



Editorial

The Academic Surgical Collaborative: Launching a new trainee research collaborative



1. Introduction

The first trainee research collaborative (TRC) in medicine began in 1986, when General Practitioners orchestrated a research project for regional trainees [1]. Whilst there has been a proliferation of research collaboratives across the UK, and an increase in the proportion of publications written by collaborative groups [2], TRCs have only become more widespread relatively recently. Multicentre surgical research projects led by trainees [3,4] have firmly cemented the resurgence of the TRC and its role within the surgical profession [5]. The National Research Collaborative website is dominated by the surgical disciplines and at present twenty-nine out of the thirty-seven collaboratives listed are surgically themed [6].

Surgical TRCs are an opportunity for trainees at all levels of experience to develop their research involvement [7]. Junior trainees are supported as their exposure to research and audit increases [8] by more senior colleagues who are able to offer advice and experience. As trainees mature, TRCs can help to identify research questions, assist networking, offer academic support and mentoring, provide motivation to finish work [8] and improve access to funding [9]. TRCs are an educational tool, promote future collaboration, and increase the exposure of trainees at all levels to research and audit [1]. Finally, TRCs allow trainees to learn basic research methodology, to assist in the co-ordination of multi-centre studies, and to recruit willing collaborators from other centres who may otherwise be inaccessible [7].

Bhangu identifies that surgical trainees are highly suited to the delivery of collaborative work; they are regularly in contact with each other, are motivated and desire evidence of involvement in research [10]. However, now we find medical students are leading national audit projects (STARSurg) [10], giving them an early taste of collaborative research. International level, trainee led surgical collaborative projects have also begun to establish [10], with GlobalSurg announcing it had completed patient recruitment for its first endeavour in January 2015 [11].

This short paper describes the establishment of the Academic Surgical Collaborative (ASC); a new TRC. We describe the ASC's positioning within TRCs and its guiding philosophies.

2. The establishment and philosophies of the ASC

The ASC established formally in October 2014, after the director (RA) assembled a small group of medical students and junior doctors, many of whom had been working together informally for

some time, to create a new collaborative. The group established a website [12] and registered with the National Research Collaborative within a fortnight.

The ASC's focus is on meta-research such as evidence synthesis and the critical appraisal of the methodological and reporting quality of research. The need for research in this field has been illustrated by the recent establishment of the Meta-Research Innovation Centre at Stanford University (METRICS) [13]. Research project ideas at the ASC are centrally coordinated by a core team but proposals are encouraged from all members. Relatively small working groups take on each research project with an assigned project coordinator. A central coordinator helps steer the projects and ensures milestones are achieved and that progress is made. The ASC uses smaller teams in contrast to other existing collaboratives. The ASC's focus on methodology and reporting quality does not require multi-centre primary research, so to date has not yet needed the large, multi-author groups seen in other collaboratives. These smaller groups prevent the loss of control and ownership of a project that can occur with large-scale collaborative research [14].

Trainees can be frustrated when they commit time towards work that is irrelevant or never published [8] and can be deterred from research by slow, unproductive projects. The ASC have found that when focussed individuals commit together to meet a tight deadline, high quality work is produced quickly. In our experience, this reduces, or can even eliminate trainee frustration. The ASC's philosophy exploits the basic motivators in successful research; a high level of interest and tangible outputs. At the same time we advocate high standards of research and publication ethics.

The ASC emulates the guiding principles of collaboratives that have come before it; utilising enthusiastic trainees, shared success, an endorsement from the National Research Collaborative, strong mentorship, trainee level leadership, partnerships with academics and institutions as well as a dependable administrative infrastructure [9]. Our online portfolio [12] demonstrates the breadth of the ASC's research, with heavy junior trainee involvement. These initial successes we hope to build upon.

3. Future goals and encouraging new members

The collaborative fully encourages the involvement of new trainees and medical students with an interest in research and in surgery. New and ongoing research projects will always be at the core of the ASC; however a focus is also maintained on education.

New members receive research training and insights via their senior team members when working on a new project. Members are offered realistic opportunities to present and publish their work and then co-ordinate their own research projects in the future. A driving force for the establishment of the West Midlands Research Collaborative was frustration felt by trainees performing small, single-centre trials [9]. One of the many justifications for establishing the ASC was to address the frustration felt by trainees who had an unfulfilled desire to be educated in surgical research methodology.

The collaborative offers career support informally, but plans to expand to provide training events and conferences to cover; electives, research at medical school, job applications, surgical skills, research skill development during surgical training and advice on higher degrees. In the future the intent is to expand this to run formal workshops in these areas. This will be assisted by the recently launched International Journal of Surgery Careers (www.ijscareers.com). This resource has been written by ASC members and aims to provide education to all trainees on the above topics. It also seeks to establish a single, central, accessible webpage from which it will be possible to search for relevant conferences, prizes, fellowships and bursaries.

4. The ASC's links to scientific journals

The ASC has links with the *Annals of Medicine and Surgery* (AMS) and the *International Journal of Surgery* (IJS), and ASC members are encouraged to take part in the peer-review process and to develop skills in critical appraisal. With time, and sufficient experience, several ASC members have joined the Editorial Board of AMS.

5. Conclusions

TRCs have been successful in both encouraging skill acquisition and producing high quality research. The ASC will continue to evolve and grow and we hope you support us on our journey.

Prior presentations

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Author contribution

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Conflicts of interest

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