

Women in Surgery Section

Strategic Plan 2022-2026

For more information

Fellowship Services Department
Royal Australasian College of Surgeons
250-290 Spring St
East Melbourne Vic 3002

www.surgeons.org
Phone +61 3 9249 1259
Email wis@surgeons.org



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A message from the Chair

I'm delighted to present the next Women in Surgery Section Strategic Plan 2022-2026.

Our vision is to create an equitable surgical workforce that reflects and represents our community by:

- dismantling systemic barriers that limit gender equity in the surgical workforce
- challenging gender bias
- supporting women as leaders in surgery.

We aim to do this by challenging gender bias in the journey to being selected, during training and throughout the fulfilling a career as a surgeon.

Building on the broader objectives of the 2017-2021 plan, we will be focusing more specifically on reducing implicit bias, supporting parents, women in training and leadership, flexible training and mentoring and support.

The Women in Surgery section continues to support the Building Respect, Improving Patient Safety Action Plan, the Diversity and Inclusion Plan as well as working with external groups with similar goals including the Advancing Women in Healthcare initiative and Victoria University's "Women in Leadership in male-dominated professions".

The Women in Surgery Section committee works as part of Fellowship Services to connect, support and promote opportunities for RACS Fellows.

Christine Lai
Chair, Women in Surgery Section



OBJECTIVES

DELIVERY STRATEGIES

1	Reduce the prevalence of sexism and implicit bias in surgical settings.	<p>Continue to support Building Respect and Improving Patient Safety initiatives and provide appropriate advice and feedback to the relevant project leads.</p> <p>Ensure a Women in Surgery representative on the Building Respect, Improving Patient Safety Expert Advisory Group (EAG)</p> <p>Support Education Board initiatives to include unconscious bias training in appropriate RACS courses.</p>
2	Increase the number of women applying for surgical training	<p>Provide a liaison point for schools, medical student societies, JMO societies to help provide speakers</p> <p>Publish annual “report-cards” on the percentage of female SET applications, percentage of, percentage of women offered interviews and percentage of women successfully selected by each Board in surgical news and on the RACS website.</p> <p>Establish connections with new SET trainees, new Fellows and follow up winners and entrants to the WIS essay competition and encourage them to become future “champions” for women in surgery</p> <p>Profile past essay winners to promote the competition and women in surgical roles.</p>
3	Increase the number of Women in training admitted to SET to 50% by 2027 (to align with the College Centenary).	<p>Review the recommendations of the EAG review and consider leading expected further research establishing key barriers to women entering surgical training.</p> <p>Commission research to establish the key barriers to women applying for Fellowship via the SIMG pathway.</p> <p>Advocate for RACS Selection and Training Policies to be amended to remove discriminatory requirements.</p> <p>Develop initiatives to support and nurture medical students with an interest in surgery.</p> <p>Require Specialty Boards to publish annual data on the percentage of women applying to SET selection, percentage of women offered interviews and percentage of women successfully selected.</p>
4	Reduce the barriers to women completing surgical training	<p>Review current return to work policies and procedures and their relevance for Fellows and trainees. Identify gaps and areas for improvement particularly for SET trainees.</p> <p>Develop a RACS Position on pregnancy and breastfeeding support guidelines, including access to lactation rooms in hospitals, RACS offices and events.</p> <p>Review the “Provision of Facilities and Support for Parents of Infants attending RACS Activities” policy.</p> <p>Continue to promote flexible training opportunities across all training pathways.</p> <p>Develop a RACS Position on Parental leave provisions/support.</p> <p>Pilot a Women in Surgery mentoring and support program with an emphasis on encouraging relationships to establish organically.</p> <p>Investigate opportunities for the College (including State, Territory and NZ Office) to provide and support networking opportunities, with a focus on establishing mentoring connections.</p>
5	Ensure that flexible training is available to ALL trainees.	<p>Continue to promote flexible training opportunities across all training pathways.</p> <p>Collect and analyse data on availability and utilization of flexible training. Investigate</p> <p>Publish annual “report-cards” on the percentage of female SET applications, percentage of, percentage of women offered interviews and percentage of women successfully selected by each Board in surgical news and on the RACS website.</p> <p>Establish a RACS employed Flexible training co-ordinator to support trainees, training bodies and hospitals in the journey.</p>
6	Promote all aspects of women in leadership.	<p>Commission research to establish the number of women in leadership positions in Australia and Aotearoa New Zealand hospitals and in academia.</p> <p>Support programs, webinars and or/conferences that promote Women in Surgery Leadership.</p> <p>Utilise RACS and Committee member communications channels to profile women surgeons and leaders, emphasizing those with unique pathways (pathways differing from men) to normalize the variety of pathways beyond the ‘traditional’.</p> <p>Utilise RACS communications channels to promote WiS people, events, publications and other relevant information.</p>