ACS POSITION PAPER

Hospital Departments & Divisions of Surgery

INTRODUCTION

Surgeons are critically involved in patient care on a daily basis and should be active contributors to hospital management within a clinical governance framework. Many arrangements exist within metropolitan, regional and rural hospitals and health services with respect to the organisation of surgical departments/divisions. These guidelines provide an appropriate structure of and function for such Departments/Divisions of Surgery. Regional differences may occur depending on the number of surgeons and the surgical services provided within an institution or health service.

KEY ISSUES

All health services should have a Department/Division of Surgery embedded within their overall structure. Appropriate office space and secretarial support are essential. Larger health services should have specialty units with appropriate infrastructure within the Department/Division of Surgery.

To provide a forum for communication and policy development whether it be between individual surgeons, the various surgical specialties, hospital administration or the healthcare system. There must be surgical input into the institutional development of mission, values, planning and delivery of services, particularly surgical.

ROLES

- Advocate for excellence in all aspects of the care of surgical patients this applies to both the quality of care provided and to the efficient use of available resources
- Facilitate an environment enabling translation of the potential of individual members of the Department/Division into actual performance
- Facilitate individual surgeon divisional and unit based surgical audit
- · Hold clinical meetings and provide opportunities for continuing professional development
- Review credentialing and approve scope of practice of individual surgeons
- Promote clinical risk minimisation along with continuous quality improvement
- Co-ordinate undergraduate surgical teaching
- Co-ordinate postgraduate surgical training
- Plan, recruit and manage the surgical workforce
- Co-ordinate the provision of acute surgical care
- Participate in the development of an appropriate Division/Department budget and ensure adequate support in managing that budget
- Ensure surgical equipment is up to date and that resources are adequate
- Ensure surgical input into hospital committees, working parties etc.
- · Promote surgical outreach activities where appropriate

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· Facilitate an environment for the successful introduction of new technology

APPOINTMENTS WITHIN THE DEPARTMENT/DIVISION OF SURGERY

An open and transparent process should be utilised for the appointment of surgeons to the leadership positions within the Department/Division of Surgery and also for the individual Unit Heads. The appointed surgeon should be provided with adequate infrastructure and resources with which to undertake the various duties outlined in this document. It is recommended that the appointments be held for an initial period of three years with scope for re-appointment based upon satisfactory performance.

THE HEAD OF THE DEPARTMENT/DIVISION OF SURGERY

The Head of the Department/Division of Surgery should be a respected member of the senior surgical staff and of the surgical community who is able to devote sufficient time to the role. The individual does not necessarily need to be a Unit Head or an Academic Head (such as the Professor of Surgery) but should be someone with enthusiasm, ability, skills and experience to be successful. Roles would include:

- Foster and ensure the roles of the Department/Division of Surgery as listed above
- Chair meetings of the Department/Division and its Executive
- · Establish a clear communication strategy to and from all members of the surgical staff
- Represent the Department/Division of Surgery on key hospital committees
- Represent the hospital/health service externally in relevant settings as required
- Meet regularly with the Executive Director of Medical Services, the Executive Director of Nursing and the hospital or health service Chief Executive or their representatives to resolve issues of concern to surgery
- Meet with finance department and hospital management to establish an appropriate budget allocation
- · Performance manage Unit Heads
- Maintain a broad overall perspective of the health service

THE UNIT HEAD

The Unit Head should be a respected member of the Unit with appropriate administrative and interpersonal skills. Roles would include:

- Provide clinical leadership as well as an effective working culture among surgical staff incorporating team work, innovation and improvement
- Ensure the effective operation of the Unit consistent with policies, protocols and procedures, practices and standards of the hospital/health service
- Develop and co-ordinate Unit activities to provide excellence in all aspects of the practice of the surgical specialty including patient care, administration, staff development, teaching and research
- Define expectations, responsibilities and accountabilities of unit members
- In conjunction with the Head of the Department/Division of Surgery establish a robust process for credentialing and defining the scope of practice for doctors working in the specialty
- Performance manage unit surgical staff

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- Provide a co-ordinated approach to the management and training of junior medical staff within the specialty consistent with the requirements of the Royal Australasian College of Surgeons and the hospital/health service
- Develop and oversee an effective plan to maintain and improve quality of care through data collection on appropriate performance indicators and the conduct of Unit based surgical audit
- Co-ordinate undergraduate teaching, postgraduate training and continuing professional development of all staff in the Unit
- Oversee rostering/leave management and ensure the satisfactory function of the Unit during periods of leave, holidays and peak demand
- Meet with finance department and hospital administration to ensure adequate unit budget
- · Participate in the activities of the Executive Committee of the Department/Division of Surgery
- Represent the Unit or hospital/health service internally or externally on matters relating to the specialty as required

EXECUTIVE OF THE DEPARTMENT/DIVISION OF SURGERY

Depending on the size and structure of the organisation, it may be appropriate to establish an Executive Committee of the Department/Division of Surgery. Its membership would include the following:

- Head of Department/Division of Surgery
- All Unit Heads
- Trainee representative
- · Head of Anaesthesia
- Head of Emergency Department
- Operating theatre manager or equivalent
- · Senior nursing manager
- · Senior hospital manager

MEETINGS OF THE DEPARTMENT/DIVISION OF SURGERY AND ITS EXECUTIVE

The whole Department/Division should meet three or four times per year and the Executive should meet at least monthly. Extraordinary meetings of either group may be called as required. Meetings should be held at times to maximise surgeon attendance.

KEY WORKING RELATIONSHIPS

With individual surgeons, surgical units, hospital/health service administration and the Royal Australasian College of Surgeons

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