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The Association of
Surgeons in Training

Response to BMA JDC European Working Time Directive Statement

February 2012

In response to a recent House of Commons discussion (18th January 2012, Prime Minister's Questions 90170)¹ and BMA JDC comment regarding the European Working Time Directive², ASiT would like to reiterate our longstanding position on this matter. We maintain our stance that a relaxation of the EWTD regulations is necessary to protect the standards of Surgical Training and of upmost importance, patient safety.³

We have strongly opposed the application of EWTD since before its introduction and, as an Association for Surgical Trainees, have voiced the concerns of our members. Surgery, as a craft specialty in particular, must have clinical time in which to advance training. In 2009 we released the results of a nationwide survey of 1,600 surgeons-in-training from all nine Surgical Specialties. This document reported that over two-thirds of trainees reported deterioration in their surgical training since EWTD implementation, with only 1% of respondents experiencing any improvement. Furthermore, 84% of Surgical Trainees working an EWTD-compliant rota witnessed their work-life balance deteriorate or remain unchanged. Theoretical reductions in working hours achieved through the introduction of increasingly irregular working hours and shift patterns have also lead to a notable reduction in the continuity of patient care.⁴

We fundamentally disagree with the BMA JDC statement issued by Dr. Tom Dolphin, against reformation of the current working pattern and which incorrectly states that 'relaxation of the EWTD will increase risk to patients'. Surgical trainees believe it will allow a return to sensible working patterns, allowing proper continuity of patient care, and improved training through increased clinical exposure. BMA Careers published an update on the EWTD just 5 months ago which recognised the opposition to the EWTD by both Surgical Trainees and our Obstetrics and Gynaecology colleagues.⁵ We are disappointed this viewpoint was not represented in the recent BMA JDC statement.

No-one wishes to see a return to the 80-100 hour weeks of the past, however a compromise must be met that balances sufficient training for our consultant surgeons of the future with high quality patient care.

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on behalf of ASiT Executive

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ASiT Publicity Officer

References

¹ House of Commons. (2012). *European Working Time Directive*. Available: <http://www.publications.parliament.uk/pa/cm201212/cmhansrd/cm120118/debtext/120118-0001.htm> Last accessed 5th February 2012.

² BMA News. (2012). *Juniors warn against revising EWTD*. Available: <http://web2.bma.org.uk/nrezine.nsf/wd/RTHS-8QVLY5?OpenDocument&C=28+January+2012> Last accessed 5th February 2012

³ Fitzgerald JEF, Marron CD, Giddings CEB. *The influence of specialty, grade, gender and deanery on the implementation and outcomes of European working time regulations in surgery*. Br J Surg 2011;98(S3):21.

⁴ Simpson C, Cottam H, Fitzgerald JE, Giddings CEB. *The European working time directive has a negative impact on surgical training in the UK*. Surgeon 2011;9(1):56-7. PMID: 21195334.

⁵ Datta S, Chatterjee J, Roland D, Fitzgerald JEF, Sowden D. *The European Working Time Directive: time to change?* BMJ Careers 10 September 2011:75-76.

1. Further Reading

1.1 EWTD Press Release 2009

http://www.asit.org/assets/documents/ASiT_BOTA_EWTD_Survey_Press_Release_November_2009.pdf

1.2 EWTD for Surgical Trainees

http://www.asit.org/assets/documents/EWTD_for_Surgical_Trainees_final_1.pdf