
PROGRESS SINCE **PROGRESS**

Promoting Gender Equality in Surgery

Summary of Actions 2017-2019



September 2019



RCSI

Progress Report 2017 with 2019 update



Gender profile of enrolled medical students at RCSI Dublin



Proportion of female doctors active in Ireland as of 2017*

Cardiothoracic	11.8%
Otolaryngology	23.6%
General surgery	13.5%
Neurosurgery	6.7%
Ophthalmic surgery	35.3%
Oral & Maxillo-Facial	8.3%
Paediatric surgery	20%
Plastic surgery	26.2%
Trauma & Orthopaedics	8.2%
Urology	12.2%

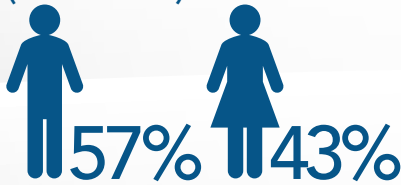


Core Surgical Training Programme 2018 intake



Specialty Surgical Training Programme

Trainees 2018 intake (40 total)



RCSI Court of Examiners June 2019



Academic Appointments 2019

2 female professors of Surgery in Ireland

Surgery in Ireland
June 2019
Male 90%
Female 10%

RCSI Council June 2019



RCSI Fellowship/ Membership June 2019



Gender not known
1.5%

*Data provided by the Irish Medical Council's annual 2017 retention dataset. The figures represent the proportion of female doctors active, retaining their place on the register, with an Irish Basic Medical Qualification, in practice in Ireland by speciality. Doctors from all nationalities are represented.



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Introduction from President of RCSI Mr Ken Mealy



Introduction to the PROGRESS report update.

Progress: Promoting Gender Equality in Surgery was published in July 2017 with a commitment to advance the career opportunities of our female professional staff. Since then, RCSI received a Bronze Athena Swan award in October 2018 and unveiled our Women on Walls project in March 2019, demonstrating at corporate level our commitment to advancing gender equality and diversity. Our Department of Surgical Affairs have been equally committed during this time period and we have made tangible gains in promoting gender equality across all our surgical training structures. Greater clarity regarding training rotas, support for less than full time training and return to work following a period of extended leave are now in place with a clear emphasis on supporting female participation within the training environment.

This cultural shift however can only be considered successful if we have practical evidence of increased female surgical participation within our workforce. This of course will take time, however the female trainee numbers exiting our training schemes continue to increase and the number of female trainees taking time to start their families during the training period has also increased which all bode well for the future.

I commend Prof Deborah McNamara, Dr Avril Hutch and Mr Padraig Kelly for their active engagement in bringing the PROGRESS report to reality. RCSI is committed to pursuing this agenda so that our female graduates feel supported and reach their full potential within the surgical community.

Mr Kenneth Mealy
President RCSI
September 2019

02

Introduction by the Chair of the Working Group



RCSI is a unique organization. We welcome undergraduate and postgraduate medical students, deliver postgraduate surgical training, and are the professional home for qualified surgeons at every stage of their career, from their first day in an operating theatre until their last. We are the voice of surgery in Ireland. For all of these reasons, RCSI has a special responsibility to ensure that every surgeon, irrespective of their gender, is valued. Beyond surgery, our role in society places a responsibility on us to ensure that female role models maintain a prominent place in our community, to enable future doctors to see someone like them and to help them envisage a career in which they too can be successful. Establishment of the Working Group on Gender Diversity in Surgery in 2016 was one of a number of initiatives to ensure that RCSI is an organization where everyone can thrive.

The PROGRESS report, published in 2017, was part of an important change at RCSI. The establishment by Professor Cathal Kelly, CEO, of the RCSI Equality, Diversity and Inclusion (EDI) Unit accelerated that change and directly contributed to our successful Athena Swan accreditation. Under Professor Kelly's leadership, RCSI has taken a leading role in advancing gender equality among university peers as well as our sister professional organisations.

Key successes include hosting the first Women in Surgery meeting in RCSI in collaboration with the Association of Women Surgeons (AWS) in 2018 and establishing Ireland's first student chapter of AWS. Our Department of Surgical Affairs, led by Kieran Ryan, commenced quarterly reporting on equality metrics; began a review of all policies and procedures to ensure gender neutrality; and is working on a major initiative to enhance our mentoring programmes. We are especially proud of the RCSI PROGRESS Women in Surgery Fellowship that launched in July 2019. This prestigious fellowship award, sponsored by J&J and developed by Aine Gibbons and her team, will enable women graduates of our surgical training programmes to access a unique surgical training experience in an international centre of excellence.

Challenges remain. Research led by RCSI's Prof Peter Gillen shows that female medical students experience less inclusion and more intimidation in the workplace than their male colleagues. Our health service is a difficult working environment and more needs to be done to increase retention and recruitment of younger doctors, where female participation in the workforce is greatest. And surgeons and surgical trainees continue to face challenges in maintaining health and well-being during and after pregnancy. RCSI is committed to working in collaboration with the HSE to improve the surgical workplace and to develop career pathways that enable less than full time working in surgery.

I wish to particularly acknowledge the President, Vice-President and my fellow members of Council for their support in implementing the recommendations of the PROGRESS report as well as Dr Avril Hutch and Mr Pdraig Kelly. I would further like to thank the following: Ms Julia Morrow, Ms Ciara Green, Mr Emeka Okererke, Ms Jane Cunningham, Ms Ger Conroy, Mr Tony Temple, Ms Clare Coyle, Ms Jennie O'Leary, Ms Helen McIlveen, Ms Robyn Byrt and Ms Emily Mannion as well as Ms Janet O'Farrell, Research Manager, Irish Medical Council.

Prof Deborah McNamara
Chair
September 2019

03

Introduction

We are pleased to present the second annual update to Progress: Promoting Gender Equality in Surgery published in July 2017.

RCSI is committed to championing gender equality in medicine and surgery. As part of this commitment, RCSI reports annually on the progress achieved. This report captures a summary of the actions achieved across four work streams and 25 recommendations put forward in the July 2017 Progress Report.

Work stream	Recommendation
1. Inform/encourage female medical students considering a career in surgery.	<p>1.1 Develop resources encouraging female and male secondary school students to consider surgical careers.</p> <p>1.2. RCSI will maintain and circulate names of a panel of surgeons, including female surgeons, who are willing to address medical school surgical societies to provide career advice, as well as female surgical subject matter experts available as visiting lecturers.</p> <p>1.3 RCSI will better promote its postgraduate training programmes to women, especially highlighting improved training opportunities, workforce planning and career progression opportunities.</p> <p>1.4 RCSI will support nationwide surgical careers information sessions for medical students and will work with the Irish Surgical Training Group to ensure that medical students with an interest in surgery have the opportunity to meet male and female surgical trainees and surgeons at different stages of their career.</p>
2. Build a culture that supports female surgical trainees.	<p>2.1 RCSI should ensure where possible gender neutrality in its training processes and SOPs.</p> <p>2.2 Individual information pack for each trainee appointed to CST including, but not limited to, maternity, paternity, adoptive, parental leave & part-time training options; impact of these options on CCST date; availability of surgical mentors; advice and options regarding re-integration after leave.</p> <p>2.3 Ensure trained mentors are available for all trainees, including both male & female surgeons, and encourage trainees to avail of a network of mentors.</p> <p>2.4 RCSI will report annually on the rate of progression of training programme alumni to fellowship and consultant posts by gender and practice setting.</p> <p>2.5. RCSI will advocate for the needs of less-than-full-time (LTFT) trainees during its engagements with the HSE and HSE NDTP to increase LTFT training options and availability and to improve surgical training fellowship options for female surgeons.</p> <p>2.6 RCSI will work with stakeholders, including the HSE, to improve surgical training fellowship options for female surgeons.</p>

Work stream	Recommendation
<p>3. Consider needs of trainees who are parents.</p>	<p>3.1 RCSI will normally allocate training posts >12 months before commencement, provided a trainee's training performance is deemed satisfactory, and will report annually on the percentage of times this takes place, by specialty and by gender.</p> <p>3.2 Protected time for research and study during the normal working week is particularly important to parents and should continue to be protected. The annual trainee survey should record the percentage of trainees receiving such protected time.</p> <p>3.3 Ensure all trainees, upon appointment to an RCSI training programme, receive information required to protect pregnant trainees, especially as it relates to exposure to radiation and other potential hazards including on-call duties, shift length and working conditions (e.g. prolonged standing). This information should also be easily available to consultant trainers.</p> <p>3.4 RCSI will explore the development of specific recommendations related to pregnancy for submission to the HSE.</p> <p>3.5 RCSI will develop recommendations and SOPs regarding training contacts during and after pregnancy and will standardise back-to-work reintegration for trainees returning from a period of leave through development of SOPs applying to all specialties.</p> <p>3.6 RCSI will use its influence with the HSE and other stakeholders to promote policies that support surgical families in balancing their personal and professional lives.</p>
<p>4. Ensure RCSI Surgical Affairs professional development for practising surgeons supports/enables a diverse profession.</p>	<p>4.1 RCSI Surgical training fellowship programmes will develop a specific offering for female Fellows within 5 years of CCST.</p> <p>4.2 RCSI will advocate for gender equality and part-time options in HSE consultant surgical appointments and will request that the HSE, the public appointments service, and hospital groups publish anonymised data on applicants and appointees to consultant surgeon posts, by gender and specialty.</p> <p>4.3 RCSI will seek and promote research funding to support female academic surgeons.</p> <p>4.4. RCSI will ensure female surgeons are considered as speakers, subject matter experts, honorary appointees, lecturers and Honorary Fellows and will test the feasibility of gender blind application processes. Encouragement of female surgeons to participate in the professional and governance structures of the profession, particularly in Ireland, and up to and including Council of RCSI, should be a priority.</p> <p>4.5. Consideration of the needs of female Fellows working in non-HSE employment will be undertaken.</p> <p>4.6 RCSI will define quality standards for surgical training surgical training fellowships to ensure minimum achievement criteria and to enable employers to benchmark surgical training fellowship training.</p> <p>4.7 RCSI will seek funding for a prestigious, high value, merit-based, sponsored surgical training fellowship award specifically designed to promote female participation in fellowship training.</p> <p>4.8 RCSI will ensure gender diversity in its awards and other selection committees.</p> <p>4.9 RCSI will publish an annual report measuring its progress on initiatives that promote gender diversity in surgery.</p>

In preparation for the first report, the working group met from November 2016 to June 2017. Since then, this report has become a standing agenda item under the remit of the Committee of Surgical Affairs (CSA) within RCSI Surgical Affairs. The CSA meets five times per year, is chaired by Professor Laura Viani and has 25 members.



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Summary of actions



1. Inform/encourage female medical students considering surgical career

Inform/encourage female medical students considering surgical career

Recommendations	Progress achieved
<p>1.1 Develop resources encouraging female and male secondary school students to consider surgical career.</p>	<p>1.1.1 RCSI Surgical Affairs has created a resource pack for schools with a standard slide deck for trainers.</p> <p>1.1.2 In March 2019, RCSI unveiled the Women on Walls portrait collection and podcast series, which recognise the pioneering achievements of eight extraordinary women and enhance the visibility of historical female leaders in healthcare.</p> <p>1.1.3 There is ongoing nationwide secondary school engagement facilitated by the Admissions and Conference and Events Offices to promote careers in medicine and surgery.</p> <p>1.1.4 The RCSI Transition Year MiniMed Programme takes place annually in RCSI Dublin and RCSI Waterford and offers transition year students the opportunity to experience what it is like to train and work as a doctor. All sections of the programme are carried out by leading professionals in their respective areas with a wide variety of topics – including general practice, heart surgery, pathology, paediatrics, forensic medicine, transplants, obstetrics and gynaecology for example.</p> <p>Since 2017, the number of student participants in the Dublin MiniMed Programme has grown from 180 students to 256 students in 2019. Female students consistently account for two-thirds of participants annually in Dublin. In the Waterford MiniMed Programme for the same time period (2017 - 2019), the number of participants averages 120 students per year with female students similarly accounting for two-thirds of participants annually.</p>
<p>1.2. RCSI will maintain and circulate names of a panel of surgeons, including female surgeons, who are willing to address medical school surgical societies to provide career advice, as well as female surgical subject matter experts available as visiting lecturers.</p>	<p>1.2.1 An existing resource held by the UK affiliate of the Global Association of Women Surgeons is available to RCSI.</p>
<p>1.3 RCSI will better promote its postgraduate training programmes to women, especially highlighting improved training opportunities, workforce planning and career progression opportunities.</p>	<p>1.3.1 In July 2018, RCSI hosted the first ever meeting of the Association of Women Surgeons in Ireland. More than 100 delegates participated in the conference representing the US, UK, Africa and Ireland. At this meeting, presentations addressed the topics of training opportunities, workforce planning and career progression. There were networking opportunities amongst the participants, which included women surgeons at all career stages. The participants convened a roundtable discussion to agree action items for Women in Surgery Ireland.</p> <p>1.3.2 RCSI's surgical trainees continue to publish articles in peer-reviewed journals on the topic of gender equality in surgical training and careers (see Appendix 2 for the publication list).</p>

Recommendations	Progress achieved
<p>1.4 RCSI will support nationwide surgical careers information sessions for medical students and will work with the Irish Surgical Training Group to ensure that medical students with an interest in surgery have the opportunity to meet male and female surgical trainees and surgeons at different stages of their career.</p>	<p>1.4.1 The Medical Student Surgical Bootcamp was introduced in February 2019. This weekend event is designed to introduce medical students to surgery. The faculty at this two-day event was 65% female.</p> <p>1.4.2 RCSI Surgical Affairs team have worked with the surgical societies in the seven medical universities on the island of Ireland with the launch of the new All-Ireland Surgical Skills competition.</p> <p>1.4.3 RCSI undergraduate students established the AWS Student Chapter in the academic year 2018-2019.</p> <p>The RCSI Student chapter of the Association of Women Surgeons (AWS) was started in September 2018. This society is the first Irish chapter of AWS, an international nonprofit organisation which encourages women to engage, empower and excel in surgical specialities. The RCSI chapter is currently the only active chapter in Europe and has over 250 student members. In its first year, the RCSI AWS held multiple events to promote women in surgery including a panel discussion celebrating women in surgery for International Women's Day and a speed mentoring event where students could meet surgical mentors from a variety of specialities. They also held a fundraising event for Floating Doctors, a charity founded by RCSI alumni. The society was awarded Best New Society at the Student Society Awards 2019.</p> <p>1.4.4 Irish Surgical Training Group (ISTG) delivers a National Career Day for undergraduate medical students to promote a career in surgery. The day includes presentations, workshops and representatives from all surgical specialities. This event also supplements the HSE's career day.</p> <p>In year one of the programme (2017), there were 11 attendees. In year two (2018) there were 30 attendees. In year three (2019), there were 48 attendees. On average over the past three years, the gender breakdown has been about 60% female and 40% male. In 2019, the ISTG reported 28 of 48 participants were female (58%).</p> <p>1.4.5 RCSI now publishes a range of information and guidance on matters relating to family- friendly rotations and applications for less than full time training and other options for flexible training on the surgical affairs digital platform for trainees: mSurgery.</p> <p>1.4.6 RCSI will apply to present on the topic of Women in Surgery at the iWish Girls in STEM national conference in February 2020.*</p>

*Highlighted text indicates future actions**



2. Build a culture that supports female surgical trainees

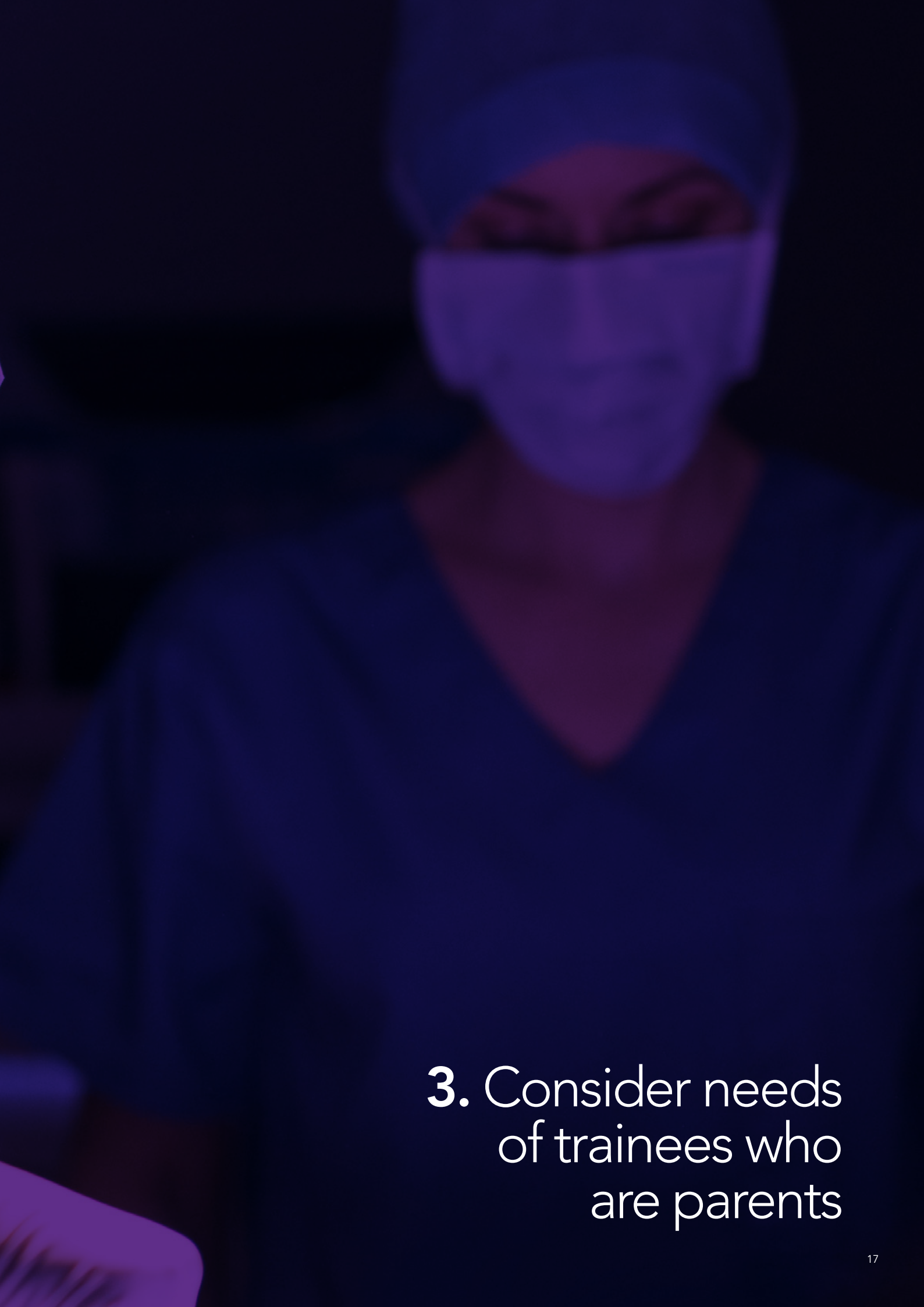


Build a culture that supports female surgical trainees

Recommendations	Progress achieved
<p>2.1 RCSI should ensure where possible gender neutrality in its training processes and SOPs.</p>	<p>2.1.1 RCSI have introduced a Document Controller who is reviewing all standard operating procedures (SOPs) for gender neutrality as part of the 24-month review period for internal policies and procedures. This exercise is halfway through completion and the final SOPs will be updated by April 2020.</p> <p>2.1.2 RCSI established a Policy Review Group in June 2019. This group has responsibility for analysing all RCSI policies from an equality, diversity and inclusion perspective on an annual basis.</p>
<p>2.2 Individual information pack for each trainee appointed to CST including, but not limited to, maternity, paternity, adoptive, parental leave & part-time training options; impact of these options on Certificate of Completion of Specialist Training (CCST) date; availability of surgical mentors; advice and options regarding re-integration after leave.</p>	<p>2.2.1 Individual information packs and trainee guides are issued annually to all trainees during induction at the RCSI Trainee Forum in June.</p>
<p>2.3 Ensure trained mentors are available for all trainees, including both male and female surgeons, and encourage trainees to avail of a network of mentors.</p>	<p>2.3.1 RCSI in partnership with the trainee representative body have launched the Mentoring Programme Development and Implementation Committee. The committee is the primary body responsible for the design, development and delivery of a Mentorship Programme for Surgical Trainees and will issue a final implementation report to Council in December 2019.</p> <p>2.3.2 The Irish Surgical Training Group hosted a mentorship morning for surgical trainees on Saturday, 9 Feb 2019 in conjunction with Charter Week at RCSI. This will continue on an annual basis.</p>

Recommendations	Progress achieved
<p>2.4 RCSI will report annually on the rate of progression of training programme alumni to fellowship and consultant posts by gender and practice setting.</p>	<p>2.4.1 RCSI continually measures the gender diversity of our trainees, fellows and members. Please see Appendix 1 for 2018-2019 data set.</p>
<p>2.5 RCSI will advocate for the needs of less-than-full-time (LTFT) trainees during its engagements with the HSE and HSE NDTP to increase LTFT training options and availability and to improve surgical training surgical training fellowship options for female surgeons.</p>	<p>2.5.1 RCSI continues to advocate for the benefits of less-than-full-time (LTFT) training opportunities during our ongoing engagements with the HSE. Recently, RCSI have successfully advocated for LTFT options to be included in the Aspire Postgraduate Fellowship Awards and one of the trainees for this award has availed of the LTFT option for a period of time.</p>
<p>2.6 RCSI will work with stakeholders, including the HSE, to improve surgical training surgical training fellowship options for female surgeons.</p>	<p>2.6.1 RCSI have received industry support from Johnson & Johnson Medical Devices Companies for the PROGRESS Female Surgical Fellowship which launched in July 2019. The successful candidate(s) will be awarded a Fellowship up to an amount of €45,000 each year for a maximum of two years for a total value of €90,000. The first fellow will be in post by June 2020.</p>





3. Consider needs
of trainees who
are parents

Consider needs of trainees who are parents

Recommendations	Progress achieved
<p>3.1 RCSI will normally allocate training posts >12 months before commencement, provided a trainee's training performance is deemed satisfactory, and will report annually on the percentage of times this takes place, by specialty and by gender.</p>	<p>3.1.1 91% of the Specialty Training posts are now allocated >12 months before commencement.</p>
<p>3.2 Protected time for research and study during the normal working week is particularly important to parents and should continue to be protected. The annual trainee survey should record the percentage of trainees receiving such protected time.</p>	<p>3.2.1 RCSI has now incorporated quantitative questions in relation to the amount of protected time trainees receive for research and study activities into the trainee feedback surveys. The data from these surveys is used to develop the various improvement initiatives RCSI introduces into our programmes on an ongoing basis.</p>
<p>3.3 Ensure all trainees, upon appointment to an RCSI training programme, receive information required to protect pregnant trainees, especially as it relates to exposure to radiation and other potential hazards including on-call duties, shift length and working conditions (e.g. prolonged standing). This information should also be easily available to consultant trainers.</p>	<p>3.3.1 RCSI surgical trainees continue to publish findings from research into the impacts of training programme on pregnancy. See Appendix 2.</p>
<p>3.4 RCSI will explore the development of specific recommendations related to pregnancy for submission to the HSE.</p>	<p>3.4.1 RCSI Surgical Affairs have appointed a project manager to develop guidelines for trainees and surgeons around extended leave and preparing for return to the surgical team after a period of extended leave. The work on developing these guidelines is ongoing.</p>
<p>3.5 RCSI will develop recommendations and SOPs regarding training contacts during and after pregnancy and will standardise back-to-work reintegration for trainees returning from a period of leave through development of SOPs applying to all specialties.</p>	<p>3.5.1 RCSI Surgical Affairs have appointed a project manager to develop guidelines for trainees and surgeons around extended leave and preparing for return to the surgical team after a period of extended leave. The work on developing these guidelines is ongoing.</p>
<p>3.6 RCSI will use its influence with the HSE and other stakeholders to promote policies that support surgical families in balancing their personal and professional lives.</p>	<p>3.6.1 RCSI meets regularly with the HSE and advocates for the support of surgical families at these engagements. RCSI Surgical Affairs continually develops our training structures to help and to support the work life balance of our trainees and trainers. These supports are outlined in our trainee e-portal, mSurgery.</p>





4. Ensure RCSI Surgical Affairs professional development for practising surgeons supports/ enables a diverse profession



Ensure RCSI Surgical Affairs professional development for practising surgeons supports/ enables a diverse profession

Recommendations	Progress achieved
<p>4.1 RCSI Surgical training fellowship programmes will develop a specific offering for female Fellows within 5 years of CCST.</p>	<p>4.1.1 RCSI have received industry support from Johnson & Johnson Medical Devices Companies for the PROGRESS Female Surgical Fellowship which launched in July 2019. The successful candidate(s) will be awarded a Fellowship up to an amount of €45,000 each year for a maximum of two years for a total value of €90,000. The first fellow will be in post by June 2020.</p>
<p>4.2 RCSI will advocate for gender equality and part-time options in HSE consultant surgical appointments and will request that the HSE, the public appointments service, and hospital groups publish anonymised data on applicants and appointees to consultant surgeon posts, by gender and specialty.</p>	<p>4.2.1 RCSI have engaged with the Consultant Appointments Commission and the Public Appointments Service advocating for gender equality and part-time options in HSE consultant surgical appointments and requesting data from them on the same.</p>
<p>4.3 RCSI will seek and promote research funding to support female academic surgeons.</p>	<p>4.3.1 RCSI Office of Research and Innovation (ORI) supports provision of training and resource material for RCSI female researchers. Gender equality is a key mandate of Irish research institutes (HRB, IRC, SFI) which endorse Athena SWAN and with whom RCSI engages.</p> <p>4.3.2 RCSI will create an apprenticeship model to increase the number of female co-PIs through offering shadowing/deputy roles on grant calls.</p> <p>4.3.3 RCSI recognises the importance of gender balanced selection committees, support during maternity leave and gender-blind evaluation processes for female researchers and works to advocate for same with Irish research bodies.</p>

Recommendations	Progress achieved
<p>4.4 RCSI will ensure female surgeons are considered as speakers, subject matter experts, honorary appointees, lecturers and Honorary Fellows and will test the feasibility of gender blind application processes. Encouragement of female surgeons to participate in the professional and governance structures of the profession, particularly in Ireland, and up to and including Council of RCSI, should be a priority.</p>	<p>4.4.1 The Honorary Fellowship of RCSI is the highest distinction the College bestows, recognising outstanding achievement in both surgery as well as outstanding achievements in other areas. Since 1784, when the Honorary Fellowship was introduced, approximately 4% of recipients have been female. RCSI continues to focus on improving the gender diversity amongst recipients of this distinction and progress is evident in recent years. In 2017, 4 honorary fellowships were bestowed to 3 men and 1 woman (25%). In 2018, 8 honorary fellowships were bestowed to 7 men and 1 woman (12.5%). In 2019, 6 honorary fellowships were bestowed to 4 men and 2 women (33%).</p> <p>4.4.2 RCSI established an Honorary Doctorate Award in 2011 to recognise excellence and to provide an inspiration to students on their graduation day. The awardees are exceptional people who have made a difference to the world through education, research or service. Since 2016, there have been a total of 11 recipients, 6 male and 5 female (45%). In 2016, 2 honorary doctorates were awarded to 1 man and 1 woman (50%). In 2017, 2 honorary doctorates were awarded to 1 man and 1 woman (50%). In 2018, 3 honorary doctorates were awarded to 2 men and 1 woman (33%). In 2019, 4 honorary doctorates were awarded to 2 men and 2 women (50%).</p>
<p>4.5 Consideration of the needs of female Fellows working in non-HSE employment will be undertaken.</p>	<p>4.5.1 RCSI Surgical Affairs have appointed a project manager to develop guidelines for trainees and surgeons around extended leave and preparing for return to the surgical team after a period of extended leave. The work on developing these guidelines is ongoing.</p> <p>4.5.2 RCSI is engaging with the HSE to incorporate the needs of women surgeons in private practice in all Progress actions.</p>
<p>4.6 RCSI will define quality standards for surgical training surgical training fellowships to ensure minimum achievement criteria and to enable employers to benchmark surgical training fellowship training.</p>	<p>4.6.1 RCSI have developed standards for Fellowships posts which are due to be ratified September 2019.*</p>

*Highlighted text indicates future actions**

<p>4.7 RCSI will seek funding for a prestigious, high value, merit-based, sponsored surgical training fellowship award specifically designed to promote female participation in fellowship training.</p>	<p>4.7.1 RCSI have received industry support from Johnson & Johnson Medical Devices Companies for the PROGRESS Female Surgical Fellowship which launched in July 2019. The successful candidate(s) will be awarded a Fellowship up to an amount of €45,000 each year for a maximum of two years for a total value of €90,000. The first fellow will be in post by June 2020.</p>
<p>4.8 RCSI will ensure gender diversity in its awards and other selection committees.</p>	<p>4.8.1 RCSI Surgical Affairs implemented RCSI policy to ensure a minimum of 40% gender representation on committees, where possible, as of March 2018.</p>
<p>4.9 RCSI will publish an annual report measuring its progress on initiatives that promote gender diversity in surgery.</p>	<p>4.9.1 The gender diversity training report will be published each year and published reports will also be available from October 2019 on RCSI Surgical Affairs website.*</p>

*Highlighted text indicates future actions**

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Appendices

Appendix 1. Gender Diversity Report 2018-2019

Table 1A Trainee Gender Demographics (Number)

GENDER DIVERSITY SPREAD TRAINEES (%)				
	HST TRAINEES		CST TRAINEES	
	No MALE	FEMALE	MALE	FEMALE
2019	51.8%	38.2%	62%	38%

Table 1B Trainee Number Gender Demographics (%)

GENDER DIVERSITY SPREAD TRAINEES (Numbers)				
	HST TRAINEES		CST TRAINEES	
	No MALE	FEMALE	MALE	FEMALE
2019	137	84	79	46

Table 2 CST Gender Demographics

GENDER DIVERSITY SPREAD 2013-19					
	CST APPLICATIONS		CST TRAINEES		
	MALE	FEMALE	MALE	FEMALE	
2013	65%	35%	64%	36%	
2014	60%	40%	54%	46%	
2015	66%	34%	62%	38%	
2016	70%	30%	66%	34%	
2017	72%	28%	75%	27%	
2018	59%	41%	35%	65%	
2019	60%	40%	59.9%	40.1%	
Rank of Highest Scoring Female					1
Rank of Second Highest Scoring Female					6

Table 3 HST Gender Demographics

Ireland				
	HST TRAINEE NUMBERS		HST TRAINEE % BREAKDOWN	
	No MALE	FEMALE	MALE	FEMALE
2017	138	80	63.4%	36.6%
2018	138	95	59.3%	40.7%
2019	137	84	51.8%	38.2%

Table 4 CCST Awarded Gender Demographics

GENDER BREAKDOWN OF TRAINERS			
	TOTAL No.	% FEMALE	% MALE
2016	18	29%	71%
2017	29	41%	59%
2018	38	47%	53%

Table 5 Approved Trainer Gender Demographics

GENDER BREAKDOWN OF TRAINERS			
	TOTAL No.	% FEMALE	% MALE
2019	402	14%	86%

Table 6 Approved Trainer Gender Demographics

	MRCS ADMITTENCE NUMBERS		MRCS ADMITTENCE %	
	MALE	FEMALE	% MALE	% FEMALE
2014	110	46	71%	29%
2015	123	43	74%	26%
2016	171	64	63%	27%
2017	192	50	79%	21%
2018	230	56	80%	20%

Table 7 RCSI FRCS Gender Demographics

GENDER BREAKDOWN OF FRCS			
TOTAL No.	No. ADMITTED	% FEMALE	% MALE
2014	50	14%	86%
2015	59	28%	72%
2016	43	16%	84%
2017	57	35%	65%
2018	26	27%	73%

Appendix 2. Publications list

Cronin, C., Lucas, M., McCarthy, A., Boland, F., Varadarajan, R., Premnath, N., Gillen, P., (2019). 'Are we reaping what we sow? Gender diversity in surgery: a survey of medical students', *Postgraduate Medical Journal*, Published Online First: 11 April 2019. Available at: doi: 10.1136/postgradmedj-2018-136136 (Access 20 May 2019).

Rogers, A., McNamara D., (2017). 'Pregnancy and the Surgeon—Too Many Opinions, Too Little Evidence', *JAMA Surg*, 52(11), pp. 997–998. Available at: doi:10.1001/jamasurg.2017.2892 (Accessed 20 May 2019).

Rogers, A., Wren, S., McNamara, D., (2019). 'Gender and Specialty Influences on Personal and Professional Life among Trainees', *Annals of Surgery*, 269 (2), pp. 383 – 387. Available at: <https://www.ncbi.nlm.nih.gov/pubmed/29099401> (Accessed 20 May 2019).

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