

Trust Appointed Doctors Representatives' Report

Ghaith Qsous

SCTS Annual Report 2025–26

TAD Representation and Engagement

Trust Appointed Doctors represent a large and important group within SCTS and contribute significantly to service delivery, education, research, audit, rota stability and emergency cover across cardiothoracic units. I have been honoured to serve as the first elected TAD Trustee, and I see this role as an important step towards improving representation, visibility and support for TADs within the Society.

One of my first aims was to improve communication with TADs and better understand their needs. We established a dedicated TAD WhatsApp group, which now includes more than 80 TADs from across the UK and Ireland. This has allowed us to share opportunities, educational events, guidance, SCTS updates and peer support more effectively.

I also circulated a questionnaire to identify the main challenges facing TADs. The responses highlighted themes including CESR and portfolio progression, operative exposure, access to training, mentorship, academic opportunities, workplace culture and equitable representation.

Collaboration and SCTS Support

Throughout the year, I worked closely with Mr Hawari and Mr Boulmeden, the SCTS educational leads for TADs. Their significant contributions and continued support have been invaluable in helping develop educational initiatives and support the wider TAD community.

I am also grateful for the wider support from SCTS, particularly in recognising the educational needs of TADs and supporting efforts to challenge bullying, undermining and harassment.

Key Achievements

- Recognition of TADs and Supportive Departments

One of the major achievements this year has been the development of dedicated SCTS awards to recognise both individual TADs and departments that actively support their progression. These awards were introduced to celebrate excellence among TADs and to acknowledge departments that provide meaningful clinical, academic and cultural support.

The awards include recognition for the **Best TAD of the Year**, nominated by colleagues based on clinical, academic and professional contribution, and the **Best Department Supporting TADs**, nominated by TADs and judged according to evidence of clinical opportunities, academic support, mentorship, workplace culture and career progression.

This initiative is important because success for TADs should not be measured only by obtaining CESR or a consultant post. Success may also include becoming a safe and independent surgeon, contributing to service delivery, producing academic work, supporting colleagues, maintaining work–life balance and progressing despite personal or professional barriers. TADs deserve visibility, fairness and structured support.

- **Education, Webinars and Portfolio Development**

Another important focus over the last year has been improving access to educational and non-educational opportunities for TADs. We organised webinars and online discussions to address different aspects of TAD development, including CESR preparation, portfolio development and fellowship pathways in thoracic surgery.

We also arranged sessions addressing wider professional and personal needs, including retirement options and financial management. These sessions recognised that TAD development is not limited to clinical progression, but also includes long-term career planning, wellbeing, financial awareness and confidence within the system.

Together, these activities have helped support TADs progressing through CESR and portfolio pathways, while also strengthening communication and engagement across the TAD community.

- **Research, Audit and Academic Contribution**

A further achievement this year has been the organisation of multicentre audits involving TADs and colleagues across different cardiothoracic units. These projects provided opportunities for TADs to participate in collaborative research and audit, contribute to data collection and analysis, and present work at national and international conferences.

This is particularly important because academic and audit involvement remains a key part of career progression, CESR preparation and portfolio development. Multicentre work also helps build networks between TADs across the UK and Ireland and demonstrates the valuable academic contribution that TADs can make to the specialty.

Advocacy and Workplace Culture

Improving visibility and advocacy for TADs has remained central to the role. Through the WhatsApp group, questionnaire, webinars and audit projects, we have started to build a more connected TAD community within SCTS.

TADs continue to face challenges around training opportunities, career structure, recognition and workplace culture. It remains important that TADs are supported to work and progress in a fair, respectful and safe environment, with continued efforts to challenge bullying, harassment and undermining.

Future Projects

Looking ahead, the key priorities for the coming year will be to consolidate and expand the work started during 2025–26.

One major future project is to develop a structured TAD mentorship programme. This has not yet been formally established but remains an important goal. The proposed programme would aim to support TADs at different stages of their careers, including those early in their UK or Ireland journey, those preparing for examinations, and those progressing through CESR or portfolio pathways.

Another key future priority is to involve TADs more actively in different SCTS subcommittees. TADs have wide experience across service delivery, education, audit, research and workforce planning, and their voice should be included in the wider work of the Society.

A further important aim is to continue reviewing the constitutional position of TADs within SCTS. In particular, I hope to explore amendment of **Article 11.4** of the SCTS constitution so that TADs can be considered for full membership status, equally to NTN colleagues. TADs make a major contribution to cardiothoracic surgery and should have fair representation, recognition and voting rights within the Society.

We will also continue to advocate for full equity of opportunity, including access to education, operative training, academic work, mentorship, leadership roles and professional recognition. This includes continuing to challenge bullying, harassment and undermining, and supporting a culture where TADs are treated fairly and respectfully.

The overall aim for the next year is to ensure that TADs are not only recognised for their service contribution, but are also supported as developing surgeons, educators, researchers and future leaders within cardiothoracic surgery.

Ghaith Qsous

TAD Trustee / TAD Representative

Society for Cardiothoracic Surgery in Great Britain and Ireland