

Background and Guidelines

Background

The IUGA eXchange program (IEP) is an initiative first conceived by the Educational Committee (EC) of the International Urogynecological Association (IUGA) in 2004 with a view of stimulating more participation in IUGA, especially in countries with economic, political, cultural or language barriers. From the outset it has been designed as a mutual endeavor giving both host country and IUGA the possibility to learn from each other – thus the name “IUGA eXchange”. To participate in such an exchange of skills and knowledge, however, some minimum criteria have to be met:

- ✓ In order to develop any subspecialty, the basic specialist disciplines have to be evolved to a sufficient national or regional degree;
- ✓ To communicate at an international level a common language must be spoken; and,
- ✓ To increase the likelihood of a successful program, there should be a group of local organizers, some of whom are practicing urogynecology and preferably some who are urogynecologists, are committed to developing the program, are capable of participating as presenters in it and are interested in taking additional steps before and after the program to build the specialty in the country/region.

Objectives:

1. To promote the international exchange of knowledge and skills in urogynecology and reconstructive pelvic surgery (URPS);
2. To build the capacity in urogynecological practice in the host country/region so that patients receive higher quality care;
3. To distribute the guidelines for training in URPS proposed to improve the quality of care of patients with female pelvic health (FPH) problems; and,
4. To improve identification of important female pelvic health issues in host-countries by IUGA and to strengthen contacts with health care providers involved and with key decision-makers in the country/region.

Requirements:

- ✓ Lack of a fully functional urogynecology society, approved by the national society for obstetrics and gynecology
- ✓ High chance of forming a national urogynecology society in the near future
- ✓ Presence of a supportive national society of obstetrics and gynecology

- ✓ a group of local organizers, some of whom are practicing urogynecology and preferably some who are urogynecologists, who are committed to developing the program and taking additional steps to build the specialty in the country/region
- ✓ local, English-speaking, contact who will be the primary point of contact for IUGA staff regarding logistics
- ✓ sufficient urogynecological capability among physicians and other health providers in the country to conduct about half of the sessions in the program

Organizational Structure:

The IUGA Executive Board will develop an IUGA strategy for eXchange Programs by identifying areas of the world that will be of priority for holding these programs. IUGA members and the Education Committee (EC) will be encouraged to develop proposals in keeping with the strategy. The IEP content is under the supervision of the chair of the EC, who has appointed an EC subcommittee to oversee the program. The IUGA Executive Office is responsible for the overall management of the eXchange programs including coordination with other IUGA programs. The IUGA Executive Office is responsible for planning, maintenance and overseeing the execution of specific programs.

Program Structure:

Each IEP program consists of:

- ✓ One preparatory meeting at least three to six months prior to the date of the first IEP
- ✓ The first IEP, which is held within one year of the preparatory meeting
- ✓ One preparatory meeting at least three to six months prior to the date of the second IEP. This second preparatory meeting may be omitted at the discretion of the IESC in specific situations where there is a significant level of involvement of the organizers of the first meeting in the second IEP.
- ✓ Second IEP within eighteen months of the first IEP. In some cases, a second IEP in the same country may not be necessary or appropriate. The second IEP will either involve a new set of participants in the basic program, or the same group who participated in the first program in a program that delves more deeply into urogynecology. However, a second IEP is not mandatory.

A maximum of two IEPs may occur per year.

Funding

IUGA will fund the travel, accommodation, transportation, and meal expenses for three to four speakers. It is preferred that some of these speakers come from the region of the host country so as to build a network of support for the development of the urogynecology in the host country. The local organizer/host is responsible for all other expenses, unless otherwise approved by the IUGA office, and discussed during the preparatory meeting. The support of local industry is allowed for participant meals, handout material, and workshop instruments and other related items; all industry support must be coordinated with IUGA and added to the final budget. A proposed budget of anticipated local expenses must be submitted to the IUGA office for approval and should accompany the eXchange Program application. A template of the items that often are part of such a budget is included as an appendix to these guidelines. Participants in the IEP will be charged a modest registration fee that is sufficient to cover catering and local costs for the program. In addition to providing funds to cover these expenses, it is important that participants make a tangible commitment to the program. Local organizers are encouraged to raise additional funds locally. However, a single large industrial sponsor for the entire event is not permitted.

The amount that IUGA will pay for one eXchange, comprising of one preparatory meeting and the eXchange, should be limited to \$20,000.

Any surplus funds must be declared to the IUGA office and should only be used for education or research activities in the host country/region. The planned use of any surplus will be stated by the organizing group before the program takes place. A declaration of this utilization of surplus funds must be sent by the local organizers to the IUGA office within 3 months of conclusion of the exchange. The applicable local regulations regarding relations with industry must be outlined in the IEP application.

Program Outline

- ✓ Two-day session
- ✓ The language of all deliberations will ordinarily be English. IEP in other languages need special approval by IUGA, but will be conducted when it is evident that conducting the program in English will not be effective. In these cases effort will be placed in finding faculty who are fluent in the local language.
- ✓ Limited number of local participants – up to 45
- ✓ Problem-oriented and evidence-based approach to scientific and educational program – the program should address the most important loco-regional female pelvic health issues

- ✓ Plenary sessions are not limited to a specific number
- ✓ Workshop (interactive) sessions during which attendees break out into smaller groups for hands-on training and case discussions. Six workshops per IEP (three on each day), with the workshops repeated each day so that participants have the opportunity to attend each.

SAMPLE PROGRAM OUTLINE:

NOTE: This is an example and is not the design that each eXchange program should have. That will be determined by the needs in the country where the program is being offered. Each 30 minute segment includes 20 minutes for presentation and 10 minutes for discussion. The start and ending times indicated for each day are simply to provide examples. It may be, for example, that the organizing group wants the second day to continue until 4:30 or 5pm and to use the additional time to expand the time of the workshops, add an additional workshop, add presentations, or some combination.

DAY 1

TIME	ACTIVITY	SPEAKER
7.30 – 8.30	Registration	
8.30 – 9.00	Opening Remarks: Host faculty/IUGA chairs	
SESSION 1: Chair:		
9.00 – 9.30	Local Health Care Issues/Female Pelvic Health Issues	
9.30 – 10.00	Health Care Set-Up in the Host Country (Economic issues/Access to health care)	
10.00 – 10.45	Workshops 1-3 (3 groups, one group per workshop)	
10.45- 11.00	COFFEE BREAK	
SESSION 2: Chair:		
11.00- 11.30	Identifying Urogynecologic Patients (basic=B; advanced=A): Questionnaire & QOL (B) Voiding diary (B) Mesh complications following prolapse surgery (A) Complications of stress urinary incontinence (A)	
11.30- 12.00	Pharmacotherapy for LUTS	
12.00-	Workshops 1-3 (3 groups, one group per workshop)	

12.45		
12.45-013.30	LUNCH BREAK	
SESSION 3: Chair:		
13.30 – 14.00	Overactive Bladder	
14.00 – 14.30	Voiding Difficulty and Urine Retention	
14.30 – 15.15	Workshops 1-3 (3 groups, one group per workshop)	
15.15 – 15.30	COFFEE BREAK	
SESSION 4: Chair:		
15.30 – 16.00	USI and Surgical Updates	
16.00 – 16.30	Conservative Treatment Options for Incontinence	

DAY 2

TIME	ACTIVITY	SPEAKER
SESSION 5: Chair:		
9.00 – 9.30	Vaginal Hysterectomy: Is hysterectomy mandatory during pelvic floor surgery?	
9.30 – 10.00	Surgical Options/ Updates for POP	
10.00 – 10.45	Workshop 4-6 (3 groups, one group per workshop)	
10.45-11.00	COFFEE BREAK	
SESSION 6: Chair:		
11.00-11.30	Perineal Lacerations; Pelvic Floor & Childbirth	
11.30-12.00	IUGA Guidelines for Training in Urogynecology	
12.00 – 12.45	Workshop 4-6 (3 groups, one group per workshop)	
12.45-13.30	LUNCH BREAK	

13.30-14.15	Workshop 4-6 (3 groups, one group per workshop)	
14.15 – 14.25	Awarding of Certificates: IUGA and Host Faculty	
14.25 – 14.35	Closing Remarks: Local Host/IUGA chairs	

WORKSHOPS

NOTE: These workshop titles also are examples. There are usually 6 workshops offered. The topics selected need to be directed to the needs of the country where the eXchange Program is taking place.

1	Identifying and Evaluating Urogynecologic Patients : Questionnaire & QOL
2	Voiding Diary
3	Essentials in the examination of the urogynaecology patient
4	Non-surgical Management of POP
5	Pelvic Landmarks
6	Anal Sphincter Repair
7	Pelvic Floor Rehabilitation
8	Surgical management of prolapse and incontinence cases

*Per Station: 2 tutors - 1 IUGA and 1 local faculty

EXCHANGE PARTICIPANTS ARE DIVIDED INTO THREE GROUPS AND ROTATE IN GROUPS THROUGH EACH OF THE SIX WORKSHOPS, AS LISTED ABOVE IN PROGRAM.

Program Content

It is mandatory that the following content fundamental to urogynecological practice be a part of each IEP:

- ✓ Local host country issues such as demographics in general and related to the incidence of female pelvic floor conditions, health financing, access to health care, and discussions which include the top three local female pelvic health issues;
- ✓ Role of urogynecology in the host country; and,
- ✓ IUGA guidelines for training in URPS.

It is recommended that the following content fundamental to urogynecology should be part of each IEP (depending on the specifics of the host country):

- Specific issues: pelvic organ prolapse and POP-Q scoring, diagnostic evaluation of female pelvic problems, vaginal hysterectomy, stress urinary incontinence, overactive bladder, pelvic floor trauma including fistulae. These issues may be included in any part of the program (plenary sessions or workshops).
- Conservative treatment approaches
- Six hands-on workshops relevant to the local issues.

Preparation and Timeline

1. Proposal for an IEP submitted by host chairperson to IUGA Executive Office (see IUGA eXchange Proposal Form) by email to education@iuga.org (see below for proposal submission and approval process).
2. Review of the proposal by the EC Subcommittee and the IUGA Executive Office against the established review criteria.
3. If the review indicates that a program is warranted, then approval of IEP by the EC Subcommittee and IUGA Executive Office, and confirmation with local host chairperson.
4. The result of the review can also be that there isn't sufficient information to decide whether or not to approve the proposal, but that it is worth proceeding to conduct a preparatory visit that will also be an assessment of suitability.
5. EC Subcommittee Chair nominates two IUGA eXchange Organizers (IEO), one of whom will act as the faculty chairperson and will be responsible for all aspects of the program content in conjunction with the local host chairperson.
6. Local organizing group determined by local host chairperson and IEO Chairperson.
7. On-site preparatory meeting: at least six months prior to date of meeting to be attended by the one IEO, an IUGA Executive Office staff member (or only a sub-committee member if that person is especially experienced) and the organizing committee of the host country.
8. First IEP is held

NOT MANDATORY - TO BE DETERMINED BY LOCAL ORGANIZERS AND EC Subcommittee:

9. If necessary, preparatory meeting for second IEP: at least three to six months prior to date of meeting. To be attended by two (other) IEO, selected by the IESC.
10. Second IEP held approximately one year following first IEP

Preparatory Meeting (First IEP):

Preparatory Meeting: once the IEP is approved, a preparatory meeting is scheduled in the host country at least six months prior to the date of the IEP, to be attended by one IEO selected by the EC Subcommittee and a member of the IUGA Executive Office (or only a sub-committee

member if that person is especially experienced). The preparatory meeting should be used to determine (but not limited to):

- ✓ Critical evaluation of the situation in the country to confirm whether an IEP would be successful at that time.
- ✓ Local urogynecological issues that the program should address;
- ✓ Objectives for the program and how it will strengthen urogynecological practice in the host country/region;
- ✓ The outline of the scientific program;
- ✓ Speakers – mainly local and three or four IUGA-sponsored speakers; all contact information for local speakers must be included;
- ✓ Meeting venue – this should be a hospital or university setting with a nominal user's fee (if any) (Note: The IEP should not be held at a hotel venue.);
- ✓ Industry support (if any);
- ✓ Determine amount of registration fee (fees retained by local organizers to offset costs)
- ✓ Accommodations for speakers (IUGA speakers and local speakers, if necessary).

A preparatory meeting report and first draft of the program must be submitted within one month following the preparatory meeting to the EC Subcommittee and IUGA Executive Office for approval.

First IEP:

After approval of the preparatory meeting report, the first IEP should occur on the determined dates and follow the confirmed program within six months after the preparatory meeting. A post IEP report must be submitted to the EC Subcommittee for review/approval within one month following the IEP by the IEO, and submitted to the IUGA Executive Office.

Second IEP:

A second IEP **may be** organized and would follow the outline above regarding preparation and timeline. A second IEP is not mandatory and is at the discretion of the local organizing committee chairperson and EC Subcommittee. The second IEP will either involve a new set of participants in the basic program, or the same group who participated in the first program in a program that delves more deeply into urogynecology.

Evaluation Forms

There are two types of assessments. The first is a program evaluation (PE) assessment form that delegates return at the end of the program. The second is pre- and post-test. This is a set of questions to judge the knowledge of the participants before they attend the program and the (immediate) impact of the exchange on that knowledge.

The program evaluation (PE) form is handed over to delegates at the commencement of the program and is collected at the completion of the program. This evaluates the speakers, topics, workshops, and overall structure of the IEP. Participants are given a pre-test and a post-test. The questions in the tests are 25 single-response MCQs that evaluate the basic concepts which are being discussed in the exchange. These questions are provided by the faculty (1-2 questions for each presentation) and are vetted by the IUGA organizing faculty. The pre- and post-test comprise of the same set of questions but given in a different order. The results for these two tests are compared and presented in the final report. There also is an evaluation that is sent to eXchange Program participants 6 months after the course to gauge how they may have changed their practice.

Reports

Preparatory Meeting Reports

Preparatory meeting reports are due to the IUGA Executive Office within one month following a preparatory meeting by email to education@iuga.org, as a plain text-file or in MS Word format (not PDF). Reports are the responsibility of the IEO and must include:

- ✓ Assessment as to whether the IEP proposed should be conducted. If the recommendation is to continue, then the report would cover the following points.
- ✓ Confirmed dates of the IEP
- ✓ Confirmed location of the IEP
- ✓ Local Organizing Committee Chairperson (all contact information required - primarily email)
- ✓ Local Organizing Committee Members
- ✓ Local, English-speaking, contact who will be the primary point of contact for IUGA staff regarding logistics
- ✓ IEO (Two IEO should attend the preparatory meeting)
- ✓ Analysis of the local urogynecological situation
- ✓ Objectives for the IEP that will allow for evaluation of the effectiveness of the IEP
- ✓ Scientific program:
 - Length of program (two days)
 - Presentations: topics/speakers
 - Workshops: topics/instructors/rotation schedule
 - Other (describe other programs/educational events which will be included in IEP, i.e. visiting regional hospital/specialty clinic)
- ✓ Speakers/workshop instructors – mainly local and three or four IUGA-sponsored speakers, including the two IEO. IUGA-funded speakers will be fully funded by IUGA (airfare, accommodations, meals, transportation) according to the IUGA travel policy
- ✓ Full name and contact information for ALL local speakers (preferably email)
- ✓ Meeting venue – this should be a hospital or university setting with a nominal user's fee (if

- ✓ Information regarding how catering (lunch) x two days and coffee/tea break(s) will be provided
- ✓ Industry support (if any). Describe amount of support, or targets of support if it has not yet been secured, and use of funds.
- ✓ Determine the amount of registration fee to be charged (registration will be done using an IUGA-created registration form) and how registration will be handled. Often attendees are identified by the local organizers to maximize the participation from all parts of the country.
- ✓ Suggested accommodations for speakers (IUGA speakers; local speakers if applicable). Accommodations should be relatively low-budget, i.e. university/institution housing or inexpensive hotel close to meeting venue.
- ✓ Faculty dinner location (funded by IUGA)
- ✓ Proposed recipient, should there be a surplus from the IEP.
- ✓ A revised budget that presents the financial aspects of the above information.

Post IEP Reports

A post IEP report of the meeting should be prepared by the local organizing committee chairperson/IEOs and submitted to the IUGA Executive Office one month following the IEP. Post IEP reports should include:

- ✓ Overall report of country of IEP, specifically on health care areas of concern relating to urogynecological issues and demographics
- ✓ Final program
- ✓ Faculty (IUGA and local): names and affiliations
- ✓ Venue description (include any fee paid, if applicable)
- ✓ Participants list (name, address, telephone, email address) for future contact and inclusion in IEP participant database and amount of registration fee
- ✓ Report of overall meeting summary
- ✓ Report of scientific session
- ✓ Report of workshops/hands-on session
- ✓ Report of local urogynecology/gynecology society involvement (if applicable); report if new urogynecological society was formed
- ✓ Industry support
- ✓ Final expenses compared to the last approved budget
- ✓ Utilization certificate with regards to any surplus left with the local organizers
- ✓ Evaluation summary (data from evaluations given to participants at completion of IEP)
- ✓ Photographs (during program, social events)

Registration of Participants

IUGA staff and the local organizers will decide how to handle registrations. Whether registrations are initially gathered by the local organizer, or completed registrations using forms provided by IUGA are forwarded to the IUGA office, IUGA must, eventually, have a complete list of all participants, including their full contact information. Participants will be charged a modest registration fee that is sufficient to cover catering costs for the program. All registrants will receive complimentary IUGA membership + electronic subscription to the International Urogynecology Journal (IUJ) for the 12-months following the eXchange program. Attendees will receive email notification of their membership status and receipt of IUJ. At the completion of the 12-month period, attendees will be offered a one-year membership in the IUGA and will be asked to renew their IUGA membership and pay the full membership fee in future years.

Allocation of Responsibilities

Local Organizing Committee will:

- ✓ Conduct analysis, in collaboration with the IEOs, of urogynecological educational needs in the country/region being proposed for the IEP
- ✓ Develop and submit IEP proposal to IUGA office
- ✓ Host preparatory meeting with two IEO
- ✓ Confirm meeting dates
- ✓ Confirm meeting venue
- ✓ Propose topics/hands on workshops (in conjunction with IEO)
- ✓ Organize workshops including all necessary materials (in conjunction with IEO)
- ✓ Propose local speakers
- ✓ Identify a local English-speaker who will be the point of contact for the IUGA Executive Office regarding program logistics
- ✓ Contact local speakers to confirm participation
- ✓ Assist IUGA Executive Office to collect faculty disclosure forms from local speakers
- ✓ Identification of the recipient of any IEP surplus
- ✓ Contact local industry for support (if applicable)
- ✓ Make catering arrangements for attendees/faculty
- ✓ Arrange for a public address system in the venue if it will be needed for participants to hear the presenter. In most cases this will be necessary.
- ✓ Recruit IEP participants
- ✓ Collaborate with the IUGA office to secure completed registrations and payment from participants
- ✓ If it is decided to use hard-copy of material, print handouts/syllabus (supplied by IUGA)

- ✓ Print attendee badges
- ✓ Print/distribute Pre- and Post-tests (will be supplied by the IUGA office)
- ✓ Print attendee certificates (template supplied by IUGA office)
- ✓ Print/distribute IEP evaluation forms (template supplied by IUGA office)
- ✓ Submit post IEP report in conjunction with IUGA eXchange organizing executives to IUGA office

The local organizing chairman must communicate with the IUGA office relative to all aspects of eXchange organization, excluding the scientific portion. All issues related to the scientific portion must also be communicated to the IUGA eXchange organizers.

IUGA eXchange Organizers will:

- ✓ Conduct Preparatory Meeting/Meeting with local organizing chairperson.
- ✓ Propose topics/hands on workshops (in conjunction with local organizing committee)
- ✓ Submit Preparatory Meeting Report to IUGA office no later than 1 month following the Preparatory Meeting.
- ✓ Collaborate with the local organizing committee to organize workshops including all necessary materials.
- ✓ Create the pre- and post-tests.
- ✓ Collect pre- and post-tests and calculate the results. This should also be included in the post eXchange report.
- ✓ Collaborate with the local organizing committee to develop the final program. Collect IUGA eXchange evaluation forms (will be distributed by local organizing committee). Data from the evaluation forms must be tabulated and a report generated and included in the post eXchange report.
- ✓ Submit post eXchange report in conjunction with local organizing chairperson to IUGA office no later than 1 month following an eXchange program.

IUGA Office will:

- ✓ Participate in deciding whether to conduct the IEP
- ✓ Have responsibility for the overall management of the IEP
- ✓ Manage the registration of participants in collaboration with the local organizers
- ✓ Issue invitation letters to all speakers (IUGA faculty and local speakers)
- ✓ Confirm all speaker affiliations (with assistance from local organizers)
- ✓ Send/receive faculty disclosure forms from all speakers (with assistance from local organizing committee for local speakers)

Application Process for IUGA eXchange Programs

- ✓ Application material for the eXchange Program is always available on the IUGA website, but an announcement for applications for eXchange program applications will be made to all membership after each IUGA meeting.
- ✓ A completed application, including a draft program outline, is submitted to the IUGA office.
- ✓ IUGA EC Subcommittee, in collaboration with IUGA staff, reviews the submitted application and grades the likelihood of the proposal leading to a successful eXchange program, according to the objectives of the IUGA eXchange initiative in general (see grading system below).
- ✓ The EC Subcommittee and IUGA staff prepare a recommendation for the Education Committee regarding the proposed IEP.
- ✓ Referring to the priority geographic areas identified by the IUGA Executive Board, and the available budget, the Education Committee decides whether to conduct the IEP and, if so, when.
- ✓ The EC Subcommittee chair will select two IUGA Exchange Organizing Executives (IEOs) for each exchange.
- ✓ The IEOs and the local chair will begin planning for the preparatory meeting.

Five-star rating systems with the following domains:

1. Political situation stable (1=unsafe to 5=safe)
2. Commitment and responsiveness of the lead local organizer (1=low to 5=high)
3. Likelihood that a national urogynecological association will be formed in the near future (1=low to 5=high)
4. Strength of the local organizer team involved (1=few to 5=all)
5. Presence of a supportive national obs/gyn society (1=low to 5=high)
6. Need for introductory and basic urogynecology practices demonstrated by factors such as: the types of services currently being provided and by whom; and, the degree to which urogynecological disorders are specifically screened for in general obgyn clinics (1=low to 5=high)
7. Number of local resource persons who can be involved in the presenting as part of the program (1=few to 5=many)