



## Today and tomorrow

As we enter the final few weeks of 2016, I reflect on what a momentous year it has been for the College, our specialty and the whole of the NHS. Unprecedented demand for healthcare without a commensurate increase in resources has tested the resolve and commitment of all clinicians, including anaesthetists, as never before. To better support our membership for the uncertain future ahead, Council this year produced our first ever [five-year strategy](#). This sets out a coherent plan with clearly defined aims and objectives that we hope will allow us to progress from being at times too reactive an organisation to one that is shaping our destiny.

Last week I held my first [Listening Event](#) for anaesthetists in training, following on from the concerning findings which you reported to us in the [membership survey](#). The opportunity to discuss issues in an informal and confidential setting was welcome, and a range of topics was discussed. The next [listening event will be on 30 January](#), and we are planning more across the UK for 2017. We are working closely with our Anaesthetic Trainee Representative Group on a programme of work that includes the listening events as well as a trainee [survey](#) which explores welfare at work including reflections on feeling valued by employers and your thoughts regarding morale and working conditions. Please complete this short survey and share your views with us so that we can represent your concerns better.

Developing member engagement and the College's wider communication with stakeholders has been a key theme during 2016. We carried out a number of initiatives, including the first all-member survey, introduced this monthly President's e-newsletter, and increased our engagement with government both in the devolved nations and at Westminster. Finally, to maximise the content and visual impact of our communications, we developed a more consistent brand identity to reflect the unique role of anaesthetists. We hope that this better represents our Royal College as a modern, forward-looking organisation as we enter our 25<sup>th</sup> year.

Our core activities relating to education, training, examinations and workforce continue, in order to support our members throughout their entire career. We are exploring new undergraduate and foundation doctor membership categories and have a working group tasked with ensuring that anaesthesia and perioperative medicine are better represented in medical undergraduate curricula. With a view to enhancing our support for Staff and Associate Specialist (SAS) colleagues, we are working

with the [Association of Anaesthetists of Great Britain and Ireland](#) (AAGBI) to review the services provided for those members of our specialty. A sustainable workforce is a key priority and we continue to gather census data to inform and challenge national policy makers on the requirements for our specialty to meet patient needs. We are also working with our Regional Advisers to better define their roles and responsibilities within the evolving training and healthcare landscape. The College is investing significantly in global partnerships both in high-income and in low- and middle-income parts of the world to promote the College and UK anaesthesia. In terms of encouraging young people to develop a career in anaesthesia, I was pleased to see that being an anaesthetist was [recently ranked top](#) in the recommended 'best jobs' by Success at School, a national careers website aimed at students aged 13–19.

The College's clinical quality and research work continues to flourish. We have built on our established quality improvement activities both at local and national level, with the [National Emergency Laparotomy Audit](#), the [National Audit Project](#) (currently NAP6), and a [Perioperative Quality Improvement Programme](#) all being carried out under the direction of our own Health Services Research Centre (HSRC). Safety retains the highest profile via our collaborative working with the AAGBI and other stakeholders on the Safe Anaesthesia Liaison Group. Our peer-reviewed [Anaesthesia Clinical Services Accreditation](#) scheme has gained momentum with 13 hospitals now accredited and over 80 more actively engaged. Underpinning this work are the [Guidelines for the Provision of Anaesthetic Services](#), which recently received NICE accreditation. Our collaborative research portfolio continues to be coordinated by the National Institute of Academic Anaesthesia and the HSRC, and our newly formed

Perioperative Medicine Clinical Trials Network will develop and co-ordinate large-scale clinical trials to improve patient outcomes to support this.

In order to deliver the College's strategy we need a sustainable organisation committed to delivering a first-class service to our membership. Our Finance & Resources Directorate is taking the lead on these initiatives. This year we have made the College more accessible by opening a Fellows & Members Room on the second floor of Churchill House. We have also reviewed our presence in the devolved nations and increased the support for our Advisory Board for Northern Ireland. Meeting our members' needs requires information technology systems that are robust and integrated and to that end the College is investing significant resources to implement a dedicated two-year technology change programme.

All in all it has been a challenging but highly productive year for the College and the specialty. We now look forward to what 2017 brings, in what will be our 25<sup>th</sup> anniversary of becoming a Royal College.

Finally, with the festive season almost upon us, I am all too aware that, while some of us will be fortunate enough to be able to share the upcoming festivities with family and friends, many will be working for some or most of the Christmas and New Year break, caring for those most at need in the best tradition of our specialty. Wherever you are for the holidays, on behalf of Council and myself, we hope you have a happy Christmas and offer our best wishes for 2017.



## Royal praise for anaesthetists

Taking place on 30 November in Edinburgh, the 2016 Patient Safety Conference, hosted by the Safe Anaesthesia Liaison Group, was an engaging and informative event attended by more than 200 delegates. It was an honour to be joined on the day by our patron, Her Royal Highness The Princess Royal, who praised the dedication of anaesthetists to patient safety and commended the specialty for its commitment to learning from adverse incidents when they do occur.

An annual event, held in collaboration between the College, the AAGBI and [NHS Improvement](#), the conference is a wide-ranging one-day meeting showcasing the excellent work and commitment of individuals and groups within the SALG partnership. It was interesting to hear from Dr Suzette Woodward, Campaign Director for Sign up to Safety, on the topic of creating a culture of safety and making the NHS the safest healthcare system in the world. With the meeting taking place in Scotland, the conference also heard from Dr Catherine Calderwood, Chief Medical Officer for Scotland and Shona Robison, MSP, Cabinet Secretary for Health and Sport, who both outlined Scotland's plans to meet various aspects of their nation's healthcare challenges. I am already looking forward to next year's meeting and hope that as many of you will be able to join us in 2017.



## New Council Members

Voting for election to College Council closed on Monday 5 December and I am pleased to confirm that Professor Judith Hall, Dr Chris Carey and Dr Russell Perkins were elected to the consultant vacancies, and Dr Jenny Cheung to the trainee seat. I would like to offer my congratulations to those elected and to thank all 15 candidates for standing. The turnout of 32% and 33% respectively for the consultant and trainee constituencies were both well above the average over the past ten years, and we also saw a further increase in members choosing to cast their vote electronically.

As in previous years the ballot process was independent and managed by Electoral Reform Services (ERS). The full results can be viewed [here](#). Terms of office commence in March 2017.



## RCoA Scottish Advisory Board consultant election

Keeping with the election theme, all fellows and associate fellows in Scotland are invited to vote in the [RCoA Scottish Advisory Board](#) consultant election. There are three candidates standing. Please do cast your vote before the close of the ballot at 5pm on Thursday 12 January 2017.

High turnout in elections helps to ensure that the successful candidate has a strong mandate to represent specialty related issues in Scotland. Results will be published on the College website following the close of the ballot. Terms of office begin in March 2017.



## The 25<sup>th</sup> Anniversary countdown begins

The RCoA's year-long Anniversary celebration is now just around the corner. It will be a tremendous honour for me to be President during the 25<sup>th</sup> Anniversary of receiving our Royal Charter, a historic occasion for the RCoA and our specialty. The past quarter-century has seen anaesthesia and our College make huge advances and the RCoA today is virtually unrecognisable from the organisation in 1992.

In 2017 the College officially begins its programme of activities to mark the milestone, and will be celebrating our 25 year history as a Royal College, as well as looking back at the development of the specialty before this point. We also look ahead to the next quarter-century for the College and our specialty, a topic explored in detail by Dr Ramani Moonesinghe in the [latest ARIES Talk](#) to be uploaded to the [RCoA YouTube](#) channel, in which she asks whether anaesthetists will be required in 25 years.

As part of the celebrations, the College selected ten regional events for a 25<sup>th</sup> Anniversary bursary. During a competitive selection process, events were chosen based on diversity of topics, audience and regional coverage. In January, the first two of these supported events will take place in Oxford and Newcastle, and I am looking forward to the programme at both meetings. The full list of events can be [found here](#).

The College will also be participating in the [Inspiring the Future scheme](#), a free service that connects teachers from state schools and colleges with volunteers who have pledged to give one hour per year to speak to students about their current job, career pathway and the educational requirements for those interested in following in their footsteps. An important aim of our 25<sup>th</sup> Anniversary celebrations is to leave a lasting legacy, and there is no better way to promote our specialty than to connect with young people and inspire the next generation of anaesthetists. More information on the scheme, including how to sign up, can be found [here](#).

The College's programme of celebrations kicks off in a matter of weeks and includes activities in which fellows, members, patients and the public can get involved. From regional events to trainer awards and photography competitions, there is something for everyone in 2017. See our full programme of events [here](#).



### MBRRACE-UK maternal deaths report

A [report](#) published earlier this month by [MBRRACE-UK](#) (Mothers and Babies: Reducing Risk through Audits and Confidential Enquiries in the UK), a collaboration of academics and medical experts, confirmed that giving birth remains as safe as ever. As anaesthetists, we play a crucial role in patient care before, during and after childbirth, and we are vital to the smooth overall running across all hospital services, including obstetrics and labour wards. The MBRRACE-UK report makes for important reading, and it contains lessons which are relevant to all obstetric anaesthetists and critical care doctors.

Fewer than 9 in every 100,000 women giving birth in the UK die in pregnancy or soon after childbirth. When a mother does die in hospital, however, anaesthetists and intensive care (critical care) specialists are invariably involved either as part of a resuscitation team or in providing pain relief and multi-organ support in the final days of life. This is the first maternal confidential enquiry report since 2011 to include a chapter on critical care. The report makes recommendations on transfers of sick mothers between hospitals and draws lessons from the deaths of women during the 2009 Swine flu epidemic.

Despite maternal death in the UK fortunately being a rare event, there are important lessons to be learned, such as the importance of early recognition of critical illness and the prompt involvement of senior clinical staff. With UK critical care units running close to full capacity and delays to admission whilst beds are being found are commonplace, critical care support can be initiated across multiple hospital settings.

There is little doubt that obstetric anaesthetists are well-placed to work in partnership with critical care colleagues to provide initial resuscitation and stabilisation whilst bed management takes place. Delays caused by bed pressures are not a reason to postpone life-saving critical care treatments.



### Clinical Quality posts

The Clinical Quality and Research Directorate at the RCoA encompasses all aspects of work relating to clinical standards, quality and safety in anaesthesia. Guidelines and standards are crucial to establishing and maintaining good practice and a high quality anaesthesia service, and I would like to invite fellows and members to apply for the following two vacancies:

#### GPAS Editor

The College wishes to appoint an Editor for its Guidelines for the Provision of Anaesthetic Services (GPAS) document, the definitive UK anaesthetic service reference, which underpins our audit and accreditation work. In 2016 the GPAS document for the first time contained chapters that achieved NICE accreditation, further raising its profile with national regulators.

Expected to work closely with GPAS chapter authors to compile and edit sections of the document, the successful candidate will also provide senior clinical and academic support to GPAS. The role also involves leading the integration of GPAS with other areas of the RCoA's work to set, measure and promote standards of good anaesthetic practice.

Applications are invited before the closing date of 5pm on 31 January 2017. For more information on the position, see the job description [here](#).

## Clinical Quality Adviser

An important aspect of the College's work includes responding to clinical enquiries and the provision of up-to-date medical and anaesthetic advice to College Council, committees and individual anaesthetists. In addition to responding to enquiries, the role also involves representing the RCoA on various committees as well as assisting in the development of the Invited Reviews process. Other duties include providing clinical advice to the College's Communications and External Affairs Directorate on public and media enquiries.

The closing date for applications is 28 February 2017. More information on the post can be found [here](#).



## SAS survey feedback

Building on the findings of the College's [2015 medical workforce census](#), which showed that SAS doctors account for 22% of all UK anaesthetists, the RCoA conducted a survey of SAS doctors to further develop our understanding of workforce issues within the grade.

The survey closed on 21 November with a good response rate of 31%, so thank you to our SAS colleagues for participating. The results and feedback will help us to further understand and promote the interests of SAS doctors within the healthcare system.

We are in the process of analysing the full results. However, some key findings are:

- 55% of SAS doctors obtained their Primary Medical Qualification in non-EU countries
- 63% are on a 'specialty doctor' type contract
- 90% have substantive posts
- 47% chose to be an SAS doctor because of a better work life balance

- 87% have at least 1.0 Supporting Professional Activities (SPA) in their job plan.

A full report on the findings from the survey is in development and we will provide more information via future editions of the [Bulletin](#) and this newsletter.



## National reviews into children's specialised services

NHS England is hosting a series of webinars on 5 January 2017 on the accelerated [national reviews](#) of paediatric critical care and specialised surgery for children. The RCoA is part of an Expert Stakeholder Group recruited to oversee the reviews, which have been fast-tracked to run in parallel with other work on new nationally agreed standards for congenital heart disease.

The aim of the reviews is to ensure sustainable paediatric critical care and specialised surgery services which will deliver high quality, safe care to children. The reviews also look at paediatric Extra Corporeal Membrane Oxygenation (ECMO), which delivers care to children with life-threatening respiratory and cardiac conditions, and paediatric transport which provides children with a mobile critical care service while transferring them between hospitals.

The webinars will consist of a short presentation, an update on the scope of the review and some of the key issues that NHS England will focus on. Participants will have the opportunity to ask questions. Registration information for the sessions can be found [here](#). If you are unable to participate in the webinars but would like to provide comments please contact NHS England at [england.paedsreview@nhs.net](mailto:england.paedsreview@nhs.net).



### And finally...

#### Exams update

The academic year continues for anaesthetists in training, with more than 350 candidates sitting the FRCA Final SOE exam over the course of last week. The trend of encouraging recent results has continued with an overall pass rate of 68%, almost matching the record 71% pass rate in the Final FRCA written examination in September and the SOE is in June.

The results epitomise the commitment of anaesthetists in training despite what has been a very unsettling year. The many [resources](#) provided by the College, including Primary and Final Masterclasses, exam videos and our e-Learning Anaesthesia platform will also undoubtedly have contributed to these very encouraging results. I hope that the trend towards higher pass rates in all FRCA examinations will be maintained for the remaining part of the academic year and beyond. For more on the FRCA Examinations, including information on the syllabus, regulations and candidate resources, see our [online exams page](#).

If you have any comments on any of the issues raised in this *Newsletter* or you would like to express your views on any other matters, I would like to hear from you. Please contact me via [presidentnews@rcoa.ac.uk](mailto:presidentnews@rcoa.ac.uk). I wish you a very happy Christmas and best wishes for 2017.

Best wishes, Liam