

## Scotland

#### Meeting of the Royal College of Anaesthetists Scottish Board held on Tuesday 06 February 2024

Present Ex Officio & Co-opted	Dr Daphne Varveris Dr Jon McGhie Dr Simon Heaney Dr Nafees Jafry Dr Angela Jenkins Dr Sarah Ramsay Dr Gary Rodgers Dr Murray Geddes Dr Murray Geddes Dr Andrea Harvey Dr Anoop Kumar Dr Katie Lake Dr Ed Mellanby Dr Linzi Peacock Dr Colin Rae Dr Ann Shearer Dr Malcolm Sim Dr Cameron Weir Dr Neil Young	Chair Elected Member & Vice Chair Elected Member SAS Member Elected Member Elected Member Elected Trainee Member Representing Clinical Directors Chair AAGBI Scottish Standing Committee RA-A North East Scotland Scottish Society of Anaesthetists Scottish Simulation RA-A, South East of Scotland SIGN Representative Lay Representative Academic Anaesthesia Representative RA, East of Scotland Lead RA in Intensive Care Medicine
In Attendance	Dr Fiona Donald Mr Jono Bruun Mr Peter Kunzmann	President, RCoA CEO, RCoA Head of Policy & Public Affairs, RCoA
Apologies	Professor Lesley Colvin Dr Susan Chapman Dr Ross Junkin Dr Zuzanna Kusnirikova Dr Sonya McKinlay Dr Pete Paisley Dr Malcolm Smith	Vice Chair, SIGN Elected Member Elected Member Scottish Paediatric Anaesthetic Network Elected Member & Perioperative Medicine Joint Lead RA, Pain Medicine RA, West of Scotland

#### 1 Welcome, Introductions and Apologies Scottish Board Elections

- Daphne Varveris welcomed Simon Heaney (SH) to his first meeting as a newly elected member of the Scottish Board (SB). SH agreed to represent the Board on Anaesthetics Associates group.
- The SB was short 2 elected members and an elected trainee member.
- Jon McGhie would continue in post until June.
- Gary Rodgers would continue in post until a replacement was identified. Noted that one application for the vacancy was awaiting confirmation.
- Lack of engagement across the Consultant and Trainee Group. Timing of the request for nominations for SB over Christmas may have affected applications.

What can the SB do for trainees and to encourage engagement with the SB? Potential opportunity for SB to have a table at the May Anaesthesia meeting in Glasgow to illustrate the work being done.

- Action: Jono Bruun to take forward
- Maternity liaison Action: Angela Jenkins to consider either taking this on or an appropriate candidate

#### 2 Approval of the Minute of the Meeting held on 3 October 2023

The minutes of the meeting held on 3 October 2023 were approved.

Item 5.5, page 3 – SAS Update – No-one had contacted Nafees Jafry. He had been in touch with RCoA.

Action: Board members to try again to encourage SAS members to link up with Nafees Item 8 Regarding clinical trials and no access to PQUIP Action: Malcolm Sim to raise at his meeting with Ben Shelley next week.

#### 3 Education, Training, Recruitment and Exams

#### 3.1 Training and Impact of New Curriculum/Training Curriculum and Assessment Committee (Linzi Peacock)

- Guidance on stage 2 flexibility
- Differential attainment course running online
- 13/14 June College Tutors Meeting
- Exam reviews discussed likely to be changes in the format for 2027
- Replacing MCQ components
- Issues with recruitment, see how this round goes. Support for ANRO
- Stage 1 training, GMC keen to say all competency based
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#### 3.2 **Recruitment Report** [Angela Jenkins]

- Interviews, end Feb/beginning March
- ST4 71 applicants
- Competition ratios are similar to the rest of the UK. CT! approx 4.3:1 and ST1.6:1
- Push for new interviewers. Lots of new people have come forward. In a good position. Likely 3 station interview in 2025
- Recycling problem no solution yet
- Trainee event 15 February webinar
- Self-assessment matrices have been updated
- Presentations will now score as national
- Awarding trainee prizes not done very well throughout Scotland. Scottish national idea more regional or national may be of benefit. *Action: Katie Lake would take back.*

#### 3.3 Workforce Report [Jon McGhie]

Daphne had raised some of the issues at Scottish Academy. Scottish Government maintaining that fill rates in anaesthesia are good.

- Concern about the direction of travel. All regions in Scotland were starting to feel the pinch.
- Materially short across all regions. Departments were starting to feel the impact. This was going to be challenging with the message from government that there was no more money.
- Remote and rural working difficult to staff these centres.
- 15 posts this year and 15 next year did not expand numbers. National recruitment would result in no competitive ratios and pressures on the system.

- Would work better if there was a plan.
- Should be starting to review services but this was not happening.
- There was some capacity in the trainee system. All regions could accommodate if done carefully. Trying to strike a balance.
- Linzi Peacock had written to all the CDs to explain the position in order to staff rotas.
- Continuing impact of LTFT training and the lack of people on the anaesthetic rota.
- Noted that the College will come under pressure. There was no desire to reduce trainee time and RCoA was resisting this.

There was a discussion on the appropriate time to go public with these issues, including the difficulties around MAPs.

#### Action: Peter Kunzmann and Jon McGhie to liaise to send a letter to Scottish Cabinet Secretary for Health and Social Care, now Neil Gray.

#### 3.4 **Trainee Update** [Gary Rodgers]

- National issues were static.
- Discussed if additional staff to run a further recruitment round was required would need to wait and see.
- Exam review had been published and changes welcomed.
- Concerns over the delivery of regional training had been addressed. Some minor concerns but overall the picture was good re curriculum delivery
- Trainees were very satisfied with their training. Training quality was high and trainees were positive.
- Push for remote & rural unclear if any capacity for dormant sites to take on trainees and provide training. Training capacity assessments should be carried out.
- Thanks to Angela Jenkins, Jon McGhie and Neil Young for advocating for trainees.

#### 3.5 SAS Update [Nafees Jafry]

- Engagement nationally had not been encouraging.
- New contract a lot of dissatisfaction around.
- South of the border more specialist posts were being advertised.
- Bodies working at that level who are not being recognised with the appropriate remuneration.
- Lack of funding.

#### 3.6 RA(As) Updates – Including ICM and Pain

- National recruitment was underway. Slightly more expansion posts, received 9 not necessarily 9 new posts.
- Linzi Peacock better planned on a 4 region basis to ensure ongoing interest. Not much happening.
- Anoop Kumar rota pressures over the next 6 months. Trying to get more funding for MTI posts. Concerns re filling the gaps going forwards. Colleagues in ICM might face more pressure. Newer SIAs, may need a 4-region approach e.g research and management. Expect individuals who would need support. Loss of clinical time and experience. Early stages, hope can support candidates through.
- Cameron Weir agreed with what had been said. Disappointing only given 6 expansion posts in Scotland. LTFT disproportionately affects smaller centres and impacts fulltime training
- Daphne Varveris RAs need to get together re the SIAs to take forward together.
- Colin Rae Pain workforce crisis, difficulty recruiting and attracting trainees. Burnout amongst consultant body. Presently no SIA in Pain.

### Action: Daphne Varveris to speak to Pete Paisley re who was coming through that system.

- Sarah Ramsay maybe having an exam was a deterrent.
- Simulation (Ed Mallanby) Requests feedback of areas where curriculum requirements could be supported by simulation e.g transfer to support funding

#### 3.7 Anaesthetics Assistants and Physician Associates [Daphne Varveris]

There was no update. Not been engaging in any further changes. Still a framework of training exists.

#### 3.8 Anaesthesia Associates [Sonya MacKinlay - apologies]

Discussions continued at Scottish Government, and it was noted that there was no anaesthesia representation on the MAP Programme Board and that this was imperative. SG state that an evidence based approach required to appointment of AAs Health economics for AAs published – Prof J Pandit Action: Fiona Donald would check the situation in Wales. RCOA to write to MAP programme Board to request anaesthetic RCOA representation. Noted that the results of the RCoA's survey would be available soon.

#### 4 RCoA President's and Senior Management Team Report

- Policy Updates [Peter Kunzmann]
  - > Developing a list of asks in advance of the general election.
  - Covid 19 Enquiry broken down into different modules and the College had been accepted into module 3 as a core participant. A rule 9 request had been received last summer and a written response had been submitted in December. Later this year the College would be asked to give oral evidence.
- General Updates [Fiona Donald]
  - Elections to RCoA Council had been held.
  - NAP 7 was launched.
  - Membership numbers were increasing.
  - Meeting in Peebles in April
  - Anaesthesia 2024 was being held in Glasgow
  - Feedback on the style of the report welcomed.
- Finance [Jono Bruun]
  - The College had been experiencing financial difficulties over the past few years. Background of being ambitious for members but income had remained flat. Membership constitutes 77% of income.
  - Additional pressure during covid.
  - Lots of pressures on the College.
  - A financial recovery programme had been undertaken which was on target to balance the books and make a small surplus.
  - Can control inflation of members' subscriptions this year.
  - Use of the College's estate conducting a review of resources and their purposes. Work was ongoing and a report was expected in 2024.
  - EGM, whilst a valuable democratic process, this had been very difficult to organise. Additional work – balancing had been difficult. Managing to deliver on the results of the EGM.

#### 5 Clinical Quality and Research

5.1 SIGN Update [Colin Rae] Noted.

# 5.2 Safe Anaesthesia Liaison Group [Daphne Varveris] Issue with over burden of alerts and electronic prescribing. Noted that the Patient Safety Update gets published by SALG, however Scottish data not included in this.

#### 5.3 **Scottish Quality and Safety Group** [Daphne Varveris]

- Presentation [Gary Rodgers] & Update [Andrea Harvey]
   Discussion on Scottish incident reporting and why it cannot be fed directly into SALG. It
   was noted that there was no funding available.
   Actions:
  - Andrea Harvey to try to meet up with Manoj Kumar, National Clinical Lead for Quality Reviews. Gary Rodgers would be happy to join the meeting.
  - Possible discussion at Scottish Academy. (Daphne Varveris)
- 5.5 **Perioperative Medicine** (CPOC) [Sonya McKinlay]
  - Sonya McKinlay had been co-opted onto the Scottish Board. Sharon Drake was going to try to link up a network.
  - CPOC Advisory Group had requested a representative from Scotland. Noted there was a £2,500 joining fee.
     Action: Jono Bruun to take forward.

#### 6 Academic Anaesthesia [Malcolm Sim]

- Good uptake from trainees who wanted to go out of programme or academia for 6 months.
- Recruitment into trials was limited.
- Trainees were assisting in organising and being were being encouraged to do the training.
- More focus on platform studies
- Platform study run from Edinburgh, a precision medicine trait study

#### 7 Communication and External Affairs

- 7.1 Scottish Academy Update [Daphne Varveris]
  - A senior leadership group had been set up by the CMO in an attempt to link with clinicians with management and Scottish Government.
  - Winter planning
  - Public facing information
  - Issues with mental health
  - Prevention strategies
  - Requirement to doing things differently
  - Pre-operative tests
  - Feedback from trainees missing out on training opportunities. Concerns re time for audit, research and teaching.
- 7.2 **Scottish Newsletter/Media Engagement** [Susan Chapman] No input had been received for the newsletter.

Action: ALL

#### 8 Reports from Committees and Other Groups

#### 8.1 **CD Network** [Murray Geddes]

- No progress to report in setting up a network.
- What would the board find useful and what does it want to feedback into it?
- What exactly does the group feel would be useful?
- Valuable for Scottish CDs to stay linked to CLAN.

Action: All to ask their CDs if happy to contact Murray Geddes to set this up. Maybe the College could send out an email too.

#### 8.2 **Obesity Alliance Scotland** [Daphne Varveris]

Noted that funding changes are imminent and that the organisation's lead is moving on.

- 8.3 **SHAAP** [Daphne Varveris]
  - MUP was being looked at again by Scottish Government.
  - Massive issues re cutting services throughout Scotland. Decline in people accessing treatment.
- 8.4 **Scottish Paediatric Anaesthetic Network** [Zuzana Kusnirikova] Report noted.

#### 8.5 Scottish Society of Anaesthetists [Katie Lake]

- Spring meeting was open for booking.
- Specific questions for chair of GMC, please email them.
- AGM 25 April at 13:.30.
- Travel & Research Grants please let trainees know.
- Educational type grants available but not many applications.
- Prizes not usually offered at the November meeting but can have a conversation about it at their Council before the November meeting.

#### 8.6 Scottish Standing Committee AAGBI [Andrea Harvey]

The circulated report was noted.

- 7 December 2023 was the last meeting, all highlighted in the report.
- Core topic meeting in Glasgow, 15 March 2024
- Joint meeting in Inverness in November.
- 8.7 Scottish Health Technologies Group [Jon McGhie] Noted.

#### 9 Sustainability [Simon Heaney]

Review of the restriction on Desflurane use. Report had concluded that that emissions do not make a contribution to climate change although it was recognised that the Scottish Government was unlikely to reconsider its use.

#### 10 Dates of Meetings 2023 – All held at RCPE, 10:30 – 15:00

- Tuesday 04 June
- Tuesday 1<sup>st</sup> October 2024
- 11 Meeting with CMO

To be rescheduled.