

MEETING OF COUNCIL

Minutes of the Meeting held on 3 July 2024

Members present:

Dr Fiona Donald, President & Chair Dr Helgi Johannsson, Vice President Dr Claire Shannon, Vice President Professor Mike Grocott Dr Sarah Ramsay Dr Felicity Plaat Dr Mike Swart Professor Jonathan Thompson Dr Ros Bacon Dr Sri Gummaraju Dr Ashwini Keshkamat Dr Ramai Santhirapala Dr Toni Brunning Dr Elisa Bertoja* Dr Satya Francis Dr Sarah Thornton Professor Andrew Smith Dr Sunil Kumar

Dr Chris Taylor* Dr Jonathan Chambers Dr Paul Southall Dr Matthew Tuck Dr Sophie Jackman Dr David Urwin Dr Danny Bryden Dr Lorraine De Grav Dr Will Donaldson Dr Simon Howell Ms Jenny Westaway Dr Dave Selwyn Dr Daphne Varveris Dr Simon Ford Dr Roger Sharpe* Dr Simon Maquire Dr Giles Nordmann

In attendance: Mr Jonathan Brüün, Ms Sharon Drake, Mr Mark Blaney, Mr Graham Blair, Mr Russell Ampofo, Ms Judith Tidnam, Mr Aaron Woods, Mrs Natalie Walker, Ms Rose Murphy*, Ms Frances Bright, Peter Kunzmann.

Observers: Mr Shaun Lee and Mr Dominic du Boulay.

*Attended via Microsoft Teams

Secretariat: Mrs Natalie Walker and Mr Shaun Lee.

1. Welcome and apologies

The President, Dr Fiona Donald, opened the meeting and welcomed attendees. The President welcomed Dr Giles Nordmann to his first Council meeting, taking over from Dr James Ralph as Co-opted Council member representing Defence Anaesthesia.

Apologies for absence:

Dr Chris Carey and Dr Matt Davies.

Declarations of interest: The President reminded members of their duty to declare any conflicts of interest related to items on the agenda. No additional conflicts were declared in advance of the meeting. Professor Andrew Smith declared a conflict under agenda item '6a RCoA Position statement on AAs' noting that he was a Senior Author for the 2014 AA review.

2. Usual Business

a) Council minutes

The minutes of the meeting held on 17 April 2024 were circulated.

MOTION approved: Council approved the 17 April 2024 Council meeting minutes.

b) Matters Arising/ Actions

All outstanding matters arising were completed or on the agenda for the meeting.

The following matters were highlighted by the President. No questions were raised.

<u>08g - Lead Regional Adviser for the RCoA - Dr Chris Carey to provide a precis of the concerns</u> regarding the NHS England budget, to take the Academy of Medical Royal Colleges (AoMRC) for <u>further discussion</u>: A precis of the concerns had not been provided. However, Council agreed to close this action as it was identified that this matter was with the Academy to take forward.

<u>O6c</u> - Breaking the Silence – Update from the Working Party for Sexual Misconduct in Theatres (<u>WPSMS</u>)- Dr Sarah Thornton to write a short report on current work and to update on progress: This action would be taken forward to a meeting being arranged for October. Council agreed to close this action.

3. President's Business

a) President's Update

The President highlighted the paper circulated and noted the meetings and other commitments attended since the last Council meeting.

Matters discussed included:

<u>Board of Trustees meeting held on 15 May 2024</u>: The President referred to the detailed briefing provided in the paper that accompanied this item and noted some highlights. At this meeting, trustees said goodbye to Mr Millar and Ms Ingham who were demitting as lay trustees in June 2024, and welcomed incoming lay trustees Mrs Davina Goodall-Smith and Mr Tim Golbourn who were joining the Board at the beginning of July 2024. Summaries of the strategic retreat held in Belfast in April 2024 were presented to the Board. Mr Prout, Partner at Gerald Eve attended to give a further update following his presentation at the Belfast Strategic Retreat. His update included a planning update, illustrations of a range of commercial properties and locations that might be of interest, should the College decide to seek alternative accommodation, and a rough indication of the next stage of the process once a 'stay' or 'go' decision is made. Further information would be presented at the additional Board of Trustees meeting scheduled for 12 July 2024. The operational plan for 23/24 was discussed and reviewed and trustees agreed some draft operational objectives for 24/25. Council members would be aware of other items tabled at the Board's May meeting through other routes or would be discussed during this meeting.

Diplomates Day 2024: Diplomates Day would be taking place on Friday 6th September.

<u>Council reviews:</u> Elected and Co-opted members were encouraged to participate in a review session with one of the officers each year. Council members were invited to contact Natalie Walker to organise a suitable time and date.

<u>Deceased members</u>: As part of the update, Council noted the deaths of the following College members reported to the College since the last meeting. Council held a moment of silence in reflection.

- Dr Anthony Gordon-Gray
- Dr Jacqueline Malouf

National Patient Safety Response Advisory Panel (NPSA) Safety Alert regarding Oxytocin: Council noted that an NHS safety alert was being developed with input from the college. The alert highlighted the danger of the practice of having 40 units of Syntocinon drawn up ready to go in a delivery room and it being given inadvertently. The safety alert had gone through various iterations and was scheduled to be released soon with the RCoA as a stakeholder.

Assisted Dying survey: The President presented the item for Council's consideration. As background, back in July 2023 Council were presented with advice from the Ethics Committee, to consider the College's position of 'no stance' on whether the law should be changed to allow assisted dying under certain circumstances. It was agreed at that point that a survey of the College's membership should be undertaken, similar to that already conducted by the BMA and RCSEng. Ahead of the release of the survey Ms Drake met with Our Duty of Care, a campaigning organisation opposed to Assisted Dying. Following that meeting and in line with the BMA's and RCSEng's methodology, it was suggested that there was merit in amending the responses in the survey between "no stance" and "neutral" to avoid it looking as though there was a larger supportive group in the results data. The advice from Research by Design was to remove "no stance" as a response to some of the questions as it would help improve the interpretation of the data. An additional opening question had been added to the survey asking whether people thought the College should maintain its position of 'no stance'. This matter had been flagged at a recent President's meeting by Dr Felicity Plaat and her thoughts were that "no stance" does not need to be removed. Council discussed this and agreed that if this amendment supported better interpretation of the results, then it would be worthwhile. There was one objection to making this amendment. All other voting Council members were in favour.

Action: The survey to be amended to remove "no stance" as a response to some of the questions.

4. CEO Business

i) Election to Council timetable for July 2024 meeting

Mr Jonathan Brüün, Chief Executive Officer, presented the 2024 Council election timetable for approval. The paper set out the key dates, process and canvassing guidelines for the next Council elections. The timetable was as follows:

- Monday 16 September 2024: Nominations open.
- Monday 14 October 2024 at 12 noon: Nominations close.
- Wednesday 13 November 2024: Ballot emails distributed.
- Wednesday 4 December 2024 at 12 noon: Ballot closes.
- Thursday 5 December 2024: Result announced.
- Wednesday 5 March 2025: New members admitted to their first Council meeting.

Mr Brüün invited any questions or issues with the outlined timetable and none were raised.

Council endorsed the recommended approach to the Council 2024 elections.

ii) Draft Estates Proposal for Consultation - confidential

Mr Brüün presented a paper setting out basic principles for discussion, related to a possible future College estate, if a decision was taken to dispose of Churchill House and 34 Red Lion Square. The principles set out in the paper intended to support discussion prior to formal consultation process with leaders, the membership and employees. A decision would be made by Trustees.

Topics discussed included:

Location when considering a potential new estate: The report made a draft recommendation to maintain a London location for the College. Some Council members expressed a preference for the location to be less prescriptive towards a London site in the proposal.

<u>Educational Courses</u>: It was noted that the opportunity to make the new College a hub for excellence in education could be highlighted more explicitly in the illustration.

5. Faculty Updates

a) Faculty of Intensive Care Medicine (FICM) Update

Council received an update from Dr Daniele Bryden regarding a membership survey as part of an initial phase of preparatory work around disaggregation. The survey had been sent out to all Faculty Members and Fellows. 20% of the faculty responded to the survey.

- 81% saw intensive care medicine as a standalone specialty,
- 71% percent thought the faculty was important for the identity of intensive care medicine'
- 62% felt that the faculty was providing good professional leadership at the moment

Respondents indicated that they would like to see more:

- advocacy on the workforce,
- support and recognition of intensivists in training,
- explanation of the role and the outputs of the faculty, and
- a better or a clearer articulation of the benefits of being a separate college over being a faculty as part of the RCoA.

Approximately 80% of the respondents with dual FICM – RCoA membership (55% of FICM membership had dual membership) indicated that they would retain membership for both, which would reduce the financial implications for the RCoA.

It was also noted that applications to ICM training from specialties other than anaesthesia this year were at the same level as those from an anaesthetic background. The faculty considered this to be an indicator regarding the interest coming from those in the medical specialties in the future.

b) Faculty of Pain Medicine (FPM) Update

Dr De Gray provided an update from the FPM. A GIRFT programme for Pain Management had been accepted. Posts for national leads would be published shortly. These roles would be multi professional which would reflect the holistic approach to pain management.

A gap analysis of pain services across England had been undertaken and none had met all 21 domains of standards as per the FPM Core Guidelines for Pain Management 2nd edition. The results would be published in due course.

Matters discussed included:

<u>Credentialing:</u> Further meetings had been undertaken with lead Deans, and FPM had managed to iron out some of the stumbling blocks. They were hoping to start retrospectively awarding credentials imminently. The GMC had devolved ownership of the credential, and the FPM would therefore be responsible and have governance over trainees who were doing credential training within a CCT programme. A National panel with FPM representation would however be responsible for awarding the Credential to doctors who are training it Pain Medicine outside a CCT program.

<u>Specialty Status</u>: Discussions had been undertaken with the GMC about applications for speciality status.

6. General Updates and Presentations

a) RCoA Position statement on AAs

Mr Russell Ampofo provided an overview of work following the Extraordinary General Meeting (EGM) that took place in October 2023, where the RCoA called for a pause in the recruitment of new student AAs while further research was conducted on the impact of the AA role.

The Cochrane Response's report of their systematic review of non-physician providers of anaesthesia had subsequently been commissioned. This included a literature review of evidence

regarding AAs and their international comparators. A draft version of the report was included in the pack for Council's information. An in-house review of published evidence had also been conducted. The results of the RCoA members' survey around AAs had also been published and was included for information. Discussions had taken place at the strategy retreat in Belfast, where attendees considered the above factors and discussed the RCoA's future position on AAs. Council were presented with a proposed position statement and asked to approve it. The statement had been developed taking all of the above into account.

Matters discussed included:

<u>AA numbers:</u> Council noted that since the EGM and the first call for the original pause, there had been a drastic reduction in the number of AAs who had joined student programmes. Approximately 25 individuals had been included in the recent intake against an expectation of 100-120.

<u>Safety and capacity for AA training:</u> Council noted that there was still no clear independent, verifiable evidence that AAs were any more or less safe than other parts of the profession, nor that the training of anaesthetists had been negatively impacted by AAs. However, the concerns around these had come from the RCoA's survey and the EGM both of which included the views of a substantial proportion of the membership. Training capacity had been a regular concern.

<u>Cochrane Response - A systematic review of the role of non-physician providers of anaesthesia:</u> Council noted that the draft Cochrane Response report, which was still subject to an independent quality assurance, was in hand. The final report would be published. In summary the report concluded there was a low certainty of evidence and results were mixed. The studies had a high risk of bias.

Expansion of physician numbers: There were a number of comments around the long-term workforce plan, and the fact that it made no specific reference to the expansion of physician numbers. There was discussion as to whether the College should make a stronger reference to that in the statement.

<u>PatientsVoices@RCoA:</u> Council acknowledged that feedback from PatientVoices@RCoA had not been properly built into the draft position on AAs, and agreed to work with the group's chair to rectify this.

<u>Council noted the risk that</u> AAs could be subsumed by another body, which could result in the RCoA's advisory capacity in this area being weakened.

In light of the above, Council agreed to discontinue its plan to establish a Faculty of AAs, resulting in the AA Founding Boarding moving towards an AA Advisory Committee reporting to Council.

Based on the evidence outlined above, and informed by discussions at the strategy retreat and this meeting, Council agreed with the direction of travel as set out in the reports that there was no case for lifting the pause on recruitment of AAs at this point. They felt the position statement should be refined further in light of discussions.

Council supported the proposed position statement in principle and agreed to refine the statement further before release. [Post meeting note: The refined statement was agreed via e mail but after further stakeholder engagement, an additional Council meeting was arranged for August to consider this matter further].

b) Anaesthesia Associates – Governance & Committee Structure

Mr Russell Ampofo presented a paper inviting formal ratification from Council on the proposed future AA governance and committee structures within the College and the associated governance documents, following discussions at the strategy retreat weekend in April and ahead of the additional Board of Trustees meeting on 12 July. It was envisaged that these proposals would form part of the College's planned membership consultation in August 2024.

Council approved the proposal to move to the structure of governance set out in the report, which included replacing the current Founding Board with an AA Advisory Committee. Implementation of the structure would to be undertaken alongside the AA timescales as discussed in agenda item 6a above.

c) Scope of Practice

Feedback from the Clinical Reference Group (CRG)

Council received a report that set out a draft 2024 Scope of Practice for Anaesthesia Associates (AAs) based on the views of the members of the Core Writing Group (CWG). Further work was being undertaken with an aim to match the current curriculum and maintain a safe service. Areas that it was anticipated would need to be developed further included **s**pinal anaesthesia, a greater suite of regional anaesthesia and further revising in the report on how AAs are supervised in their early stages of practise. Career progression of AAs was not currently clearly set out in the scope of practice.

Council supported the direction of travel of the current draft scope of practice, subject to further development by the CWG.

As part of further development, Council suggested the scope of practice should not be so restrictive as to make the AA role completely untenable. They also requested that it should align as far as possible with the draft curriculum and the AA Registration Assessment.

d) Specialist, Associate Specialist and Specialty Doctors Update

Council received an update from Dr Ashwini Keshkamat on Specialist, Associate Specialist and Specialty Doctors. Matters discussed included:

Strive, Achieve, Sustain - Improving the working lives of SAS anaesthetists' event: A new event had been created to celebrate and improve the working lives of SAS anaesthetists taking place in a hybrid format on 17 October at the Royal College of Nursing during SAS week 2024. The event would be held jointly by the Association of Anaesthetists of Great Britain & Ireland and the RCoA. This was the first time that both organisations were coming together exclusively for SAS doctors. Sessions on the programme included portfolio pathways, well-being, mentoring, debates and panel discussions.

<u>Six principles of the SAS Collective Group:</u> The College had recently endorsed the six principles of the SAS Collective Group which reinforced work that had been carried out over a number of years in this area. A blog on <u>Advocacy for SAS doctors and the #SASsix</u> had recently been published on the College's website.

e) CPOC Proposal

Council received a proposal that followed on from discussions in Belfast, regarding the direction of travel that the RCoA would need to take to fully embed CPOC's functions within the RCoA as part of a three-year plan. Further work would be undertaken to identify partners, including those from appropriate commercial areas. Funding for the upcoming 2024-2025 year had already been approved in the budget.

- Council noted and supported the direction of travel described in the paper.
- Council recognised the indicative future funding requirements for CPOC alongside the future membership and income opportunities for the RCoA.
- Council agreed to the initial year 1 proposal (including quarterly updates) of;
 - review and refinement of CPOC Governance, Board membership and Terms of Reference,
 - supporting the evolution of CPOC and RCoA branding and closer alignment,
 - Developing a communications strategy to facilitate delivery of the future requirements for CPOC.

f) RCoA Sustainability

i. Draft Sustainability Strategy

Council received a draft Sustainability Strategy for the College.

The following topics were discussed:

<u>Measuring success and impact</u>: Council highlighted the importance of measuring impact in this area to feedback to the membership on progress. It was suggested that in addition to annual objectives, this could be communicated to members in annual reports and at the Annual General Meeting.

<u>Carbon footprint and Churchill House:</u> Council noted that there were significant financial implications of adopting the strategy. It was noted that a strategic priority was 'Reduce the College Carbon Footprint', which included measuring the current activity and infrastructure. The College would go on to develop and implement a Climate Change Adaptation plan to minimise environmental impact. Council noted that costs associated with updating Churchill House should be considered alongside this strategy and the estates proposal.

The next steps would be for the strategy to be presented to the Board of Trustees in October for their approval and then publicised to the wider membership at the November Annual General Meeting.

Council approved the Draft Sustainability Policy and recommended that the Board of Trustees approve the policy for publication to the membership in a timely way so it could be referenced at the November 2024 Annual General Meeting.

ii. Consensus Statement on Removal of Pipeline Nitrous Oxide in the United Kingdom and Republic of Ireland.

Council received a consensus statement from the RCoA, the CAI, the OAA, the AoA and APAGBI on the removal of nitrous oxide manifolds across the UK and Ireland by the end of 2026/27.

Council approved the consensus statement from the RCoA, the CAI, the OAA, the AoA and APAGBI on the removal of nitrous oxide manifolds across the UK and Ireland by the end of 2026/27.

7. College Boards Minutes and Updates

a) Education, Training and Examinations Board

i. Draft minutes of the meeting held on 17 April 2024

Dr Sarah Thornton provided an update on the work of the Education, Training and Examinations Board.

The following matters were noted:

- A new risk had been added to the Board's risk register on the failure of NHSE to deliver its statutory obligations. This will be scored at 20 (probability of 4 and impact of 5).
- Considerable work had been achieved on moving forward the motions from the EGM.
- Due to the unprecedented number of candidates for the May 2024 Primary FRCA exam, work had been done to identify an additional 2-day sitting to be held in July 2024.
- CESR applications were being processed within the agreed timeframes of the service level agreement following the introduction of the CESR strategy.

ii. Examinations Update

Dr Roger Sharpe updated Council that there had been an issue with capacity and an options appraisal would be coming through around this in due course.

iii. A review of rotational training within the context of the 2021 Anaesthetic Curriculum

Dr Jonathan Chambers updated Council on the output of the Rotational Training Group tasked with making recommendations on mechanisms to minimise the impact of rotational training following the EGM.

Council supported the publication of recommendations on minimising the impact of rotational training.

b) Clinical Quality and Research Board

i. Draft minutes of the meeting held on 9 May 2024

Dr Elisa Bertoja updated Council on outputs from the Clinical Quality and Research (CQ&R) Board. The CQ&R Board had approved the NAP8 timeline and budget.

ii. CQ&R Board Terms of Reference

Council reviewed the CQ&R Board Terms of reference, which included updates to names and terminology.

Council approved the revised terms of reference for the CQ&R Board.

iii. Principles to guide Health Care Professionals on How to Introduce Themselves

Dr Elisa Bertoja presented guiding principles for members of an anaesthesia team when introducing themselves to patients. The following matters were discussed:

- Council approved the implementation of the guiding principles as set out in the paper to be observed when members of an anaesthesia team introduce themselves to patients.
- PatientsVoices@RCoA to produce an infographic on the roles of the anaesthesia team to support the guiding principles.

iv. RCoA criteria for making a statement on Humanitarian Emergencies and other areas of conflict

Dr Felicity Plaat presented a paper setting out criteria for the College's place in making public statements concerning humanitarian disasters associated with conflict. Council noted that there was currently no mandated process for evaluating issues using the new policy, however, it was expected that consideration would ordinarily follow the following pathway:

- 1. Initial assessment by College Officers.
- 2. Input and evaluation via Ethics Committee with advice from relevant senior staff as appropriate.
- 3. Consideration at Council, working with input and advice provided by Ethics Committee.
- 4. Consideration and decision by the Board of Trustees, working with input and advice provided by Council.

Council queried how the process would be considered by the faculties. Action: Faculty Boards to be invited to consider how the process could be amended to allow integration with faculties for adoption.

Council agreed to adopt the criteria and process as set out in the report.

v. Unrecognised Oesophageal Intubation – PUMA guidelines

Council noted the background that in November 2022, the international Project for Universal Management of Airways (PUMA) published consensus guidelines for the prevention of Unrecognised Oesophageal Intubation (UOI). Council at the time considered whether to endorse the guidelines both pre and post publication. Although changes were made following Council's initial feedback, it was decided in November 2022 not to endorse the guidelines largely due to concerns regarding the lack of College involvement in their creation and the emphasis the guidelines placed on the use of video laryngoscopy rather than human factors.

Council noted that the situation had changed and agreed to support the proposal.

Council noted that the College had quality review processes in place to reduce the impact on curriculum.

Council agreed to endorse the PUMA guidelines and adjust communications regarding Unrecognised Oesophageal Intubation to reference human factors.

c) Membership, Media and Development Board

Dr Ramai Santhirapala updated Council on outputs from the Membership, Media and Development (MMD) Board.

i. Draft minutes of the meeting held on 4 June 2024

The following matter was noted:

<u>Update on Anaesthesia 2024 outcomes:</u> 1,291 delegates had attended, of which 581 were in person.

ii. Draft Social Media Policy

The MMD board proposed a Social Media Policy which:

- aligned with new guidance from the Charity Commission; and
- incorporated an update of the College's existing Social Media Guidelines for Council Members, Trustees and Senior Employees.

Council approved the Social Media Policy for adoption.

Membership Matters

Council noted that it had responsibility for membership matters in relation to termination. College Ordinance 3 sets the reasons for termination of membership and rescission of diplomas for the Royal College of Anaesthetists. The Council shall have power to terminate the membership of any member:

- a) if they are convicted of any criminal offence.
- b) if they have their name erased from the Medical Register by the General Medical Council under section 36 of the Medical Act 1983 (or any statutory re-enactment or modification thereof).
- c) if a Receiving Order is made against them or they make any composition with their creditors.
- d) if at any time the Council, after due enquiry in accordance with the disciplinary proceedings set out in Ordinance 4, shall resolve that the interests of the College so require.

The case presented to Council did not require the instigation of disciplinary proceedings under Ordinance '3d' above.

Membership Matters: Case One

Council approved the recommendation to terminate the Dr's College membership. No further action was required.

Membership Matters: Case Two

Council approved the recommendation to terminate the Dr's College membership. No further action was required.

d) Nominations Committee Award Proposal

Nominations Committee had discussed an additional Nomination following their meeting on 27 March 2024. They had discussed a proposal to award the Humphry Davy Prize to the NAP7 Fellows by email outside of the normal yearly meetings.

The rationale was that the Group should receive the award at the September 2024 Diplomates Day, rather than waiting for a whole year to receive their prize, as the work is already having a significant impact.

Council ratified the Nominations Committee decision to award the NAP7 Fellows the Humphry Davy Prize.

e) RCoA Scottish Board

Council received an update on the RCoA Scottish Board from Dr Daphne Varveris.

A meeting had been undertaken with Neil Grey, Health Minister in Scotland. The focus of the meeting was on workforce and anaesthetic trainee numbers.

f) RCoA Welsh Board

Council received an update on the RCoA Welsh Board from Dr Simon Ford.

Work was being undertaken in collaboration with CPOC on the Clinical Implementation Network for Perioperative Medicine.

A meeting had taken place with the Sir Frank Atherton, Welsh Chief Medical Officer.

g) RCoA Northern Irish Board

Council received an update on the Northern Ireland Board from Dr William Donaldson. A meeting was scheduled in the next week with either the SPAD or Secretary as part of a wider group of college leads. A meeting with the Health Secretary had been arranged for 29 August. Council would be updated regarding these meetings in due course.

8. Co-Opted Member Reports

Council received the following reports.

a) Centre for Perioperative Care Board (CPOC)

Council noted the CPOC report which updated on matters since the last meeting on 18 April. The next CPOC Board meeting was scheduled for 11 July.

A new Fellow, Claire Frank a preoperative assessment pharmacist based in North Wales had been appointed. She would join as lead for the UK Clinical Pharmacy Association Handbook of Comparative Medicine.

b) BJA and RCoA Liaison Group

The BJA and RCoA Liaison Group were working on an agreement to support a closer partnership between the two charities with joint working in areas of common interest within their charitable objectives. More details would follow in due course.

c) PatientsVoice@RCoA

Council noted an update on key activities from PatientsVoice@RCoA. This included:

- The launch of a new recruitment campaign using a more accessible and friendly recruitment process.
- The production of a risk communication toolkit.
- Implementing changes to their internal working practices, with the focus of making their internal communications more efficient.

d) Clinical Leaders in Anaesthesia Network (CLAN)

Council received a CLAN update. They had held a webinar on 25 June which was very well attended & initial feedback was very positive. The CLAN annual event would take place at the College on Monday 25 November. Registration was scheduled to open in early September.

e) Association of Anaesthetists Report

Council received a report from the Association of Anaesthetists. A governance review was currently underway with significant changes to the organisation proposed.

f) Lead Regional Adviser of the RCoA

Council thanked Dr Simon Maguire for his contribution during his term of office. Council congratulated him on his appointment as Bernard Johnson Advisor for training.

g) Defence Representative

Council received an update from Colonel Giles Nordmann, Co-opted member of Council representing Defence. Colonel Nordmann set out his background and some areas of interest including:

- Background to military anaesthetists
- Mental health awareness and challenges
- Operations overseas, conflict and the impact on NHS in the future

9. Matters for Information

a) Early sight of Proposed Regulation Changes

Mr Brüün presented the recommended changes to the Regulations for consideration. This has been presented to the May Board of Trustees meeting to seek any initial feedback and a further, final version would be presented to Council in September and the Board of Trustees for a final decision in October 2024. Mr Brüün requested that any initial comments were sent to the <u>goverance@rcoa.ac.uk</u> inbox for consideration ahead of the next Council and Board if Trustee meetings.

b) New Associate Fellows, Members and Associate Members

Council noted that the information for July has been circulated electronically.

c) CCTs CESR (CP)s for Council

Council noted that recommendations made to the GMC for approval, that CCTs/CESR (CP)s be awarded to those who had satisfactorily completed the full period of higher specialist training in Anaesthesia, or Anaesthesia with Intensive Care Medicine or Pre-Hospital Emergency Medicine where highlighted.

d) Current Consultations

Council reviewed the list of current consultations. No comments were received.

e) Regional Advisers Anaesthesia changes for July 2024 Council

Council noted the following updates to Council composition regarding regional advisers for anaesthesia:

- Peninsula: Dr Justine Elliott in succession to Dr James Pittman as Regional Adviser for Peninsula
- Defense: Col Giles Nordmann in succession to Colonel James Ralph as Regional Adviser for Defense
- Deputy Regional Advisers: Lt Col James Chinnery in succession to Lt Col Sarah Fadden for Defense
- Deputy Regional Adviser: Dr Claire Joannides in succession to Dr Elsbeth Dyson as Deputy Regional Adviser for Wessex

10. Any other business

Dr Helgi Johannsson reminded demitting members to exit the RCoA Council WhatsApp Group.

No further matters were raised or discussed.

END OF MEETING