

**RCoA Northern Irish
Friday 19th April 2024
13:00 to 17:00
Chairman's Office, Titanic Hotel, Belfast**

MINUTES

Members:

Dr Will Donaldson, Chair	Dr Killian McCourt (apologies)
Dr Rosemary Hogg	Dr Alex Greene
Dr Mark McCague (apologies)	*Elected Consultant member vacancy
*Elected SAS member vacancy	

Ex-Officio:

Dr Fiona Donald, RCoA President	Dr Mary Malloy, HoS
Dr Esther Davis, RAA Intensive Care Medicine	Dr David Lee, Deputy HoS
Dr Neal Beckett, Association of Anaesthetist Representative	Dr Nathan Oliver, RAA Pain Medicine
Mrs Mary Lynne Smith (apologies)	Dr Richard Laird, RAA and DRA

Co-opted:

Prof George Shorten, CAI President	
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Staff:

Mr Jono Brüün, RCoA CEO
Mr Peter Kunzmann, Head of Policy and Public Affairs
Mrs Natalie Walker, Governance Manager and secretary

1. Ratification of the New Board Chair (FD)

FD reminded the Board that along with the call for agenda items for this meeting there was a call for expressions of interest for the position of Northern Ireland Board Chair. FD confirmed that this was to take over from Will Donaldson, who has planned to step down. Unfortunately, no expressions of interest were received and WD agreed to remain as Chair of the Board in the interim, until a replacement was found, hopefully by the next Board meeting in October 2024. The Board approved for WD to continue on as Chair until a replacement has been found.

2. Introductions, Welcome and Apologies (WD)

WD welcomed all to the meeting. Apologies were received from Mrs Mary Lynne Smith, Dr Killian McCourt and there were no apologies nor attendance from a representative of the College of Anaesthesiologists.

A tribute to Dr Caroline Martin was read by Dr Donaldson and a moment's silence was observed by the Board.

3. Declarations of Interest

Dr Will Donaldson invited the Board to submit any declarations of interest relating to the agenda items.

4. Minutes of the Previous meeting held on Tuesday the 10th of October 2023. (WD)

The minutes of the previous meeting held on Wednesday 12th April 2023 were circulated in advance of the meeting and were approved as a true and accurate record.

The actions were discussed, and the following updates provided:

- SAS recruitment to the Board is ongoing, and the vacancy will be included in the next call for self-nominations/ election.
- The newsletter is ongoing and in progress and Board members were invited to reach out to Will if they had any suggestions for content. There is no set deadline.

5i. RCoA College Report

1. Council and Board of Trustees Updates

FD provided the President's Update on College business and the following points were highlighted:

- There are a few new Council members that started in March 2024. They include Dr Paul Southall and Dr Jon Chambers, both elected Consultant members and Dr Sophie Jackman and Dr Matt Tuck as elected Anaesthetist-in-Training members and Dr David Urwin who will be co-opted to Council, covering Catherine Bernards maternity leave. Dr Sarah Ramsay has been elected for her second term as an elected Consultant member.
- The RCoA has had three independent lay trustees on the Board of Trustees since 2018. The three current trustees will all be demitting by June 2024 following their six-year terms and so the RCoA has appointed three new lay trustees: Hany Choueiri, Tim Golbourn, and Davina Goodall-Smith. Hany, Tim and Davina will be starting between now and July 2024.
- Dr Matt Tuck has been elected to the Board of Trustees as an elected Council member to replace Dr Claire Mallinson who will be demitted in March 2024.
- The College published an update on the outcomes following the EGM in 2023 and has sent a letter to the CLAN network laying out the ask to pause the recruitment of anaesthesia associates and some changes to supervision and scope of practice.
- The RCoA's annual conference for 2024 will be taking place in Glasgow on the 21 to 23 May. The conference in 2025 will be held in Belfast on the 20 to 22 May, topics will be confirmed soon and sign up has already opened:
<https://events.rcoa.ac.uk/rcoa/frontend/reg/tRegisterEmailNew.csp?pageID=292135&eventID=729&tempPersonID=439014>
- Special Interest areas in the non-clinical domains of learning in 'Safety & Quality Improvement' and 'Research & Managing Data' have been approved by the GMC.
- Learning outcomes and key capabilities for the special Interest areas in the non-clinical domains of learning in 'Education & Training' and 'Management & Professional Regulatory Requirements' have been submitted to the GMC for approval have been approved recently and should now all be up and running.
- The proposal for flexibility in Stage 2 and Stage 3 of the 2021 Anaesthetics Curriculum has been amended following stakeholder feedback and will be submitted to the GMC for consideration following further consultation with Deans and schools.
- The NAP 7 report was published on 17 November 2023 at a launch event held at the College. This is a report that has been 4 years in the making and a huge undertaking. The report is the most comprehensive assessment of perioperative cardiac arrest to date. It also provides a snapshot of anaesthetic activity in the UK and data on anaesthetists' personal experiences of perioperative cardiac arrest. NAP7 has huge potential to help drive further improvements. The report also provides practical

recommendations that will help us improve the prevention and treatment of perioperative cardiac arrest.

JB provided an update on the operational status and future of the organisation. The following points were highlighted:

- The RCoA's Annual Strategic Retreat is taking place over the weekend. There are around 45 Council members and trustees attending to discuss key issues.
- The RCoA has achieved a break-even budget target a year ahead of schedule and once the finances begin to show some surplus, this will allow the College to reinvest in its activities and members.
- The current situation with the RCoA's estate at 35 Red Lion Square is under review due to its age and the organisation's reduced use of the space since COVID-19, with many activities now taking place online. Selling the building and moving to a more suitable property or staying and investing in the existing building will be discussed as part of the strategic retreat. There is a strong need to balance investments between the physical estate and digital infrastructure, as many members primarily engage with the organisation online.
- The RCoA has hired a Director of Technology and Digital Services on an initial 9-month contract and the RCoA will be looking to make this role more permanent over time.

PK covered key aspects of the healthcare policy, workforce planning, and professional engagement. The following points were highlighted:

- In February 2024 we wrote to Robin Swann, the Minister for Health in Northern Ireland, and Neil Gray, the Health Secretary in Scotland, welcoming them to their new roles and requesting to meet. Robin Swann has responded, and efforts are underway to arrange a meeting for the 29 May. Robin has also agreed to be a keynote speaker for the President's Dinner in July.
- RCoA is a joint 'core participant' in Module 3 of the UK Covid-19 Inquiry, along with FICM and the Association of Anaesthetists. We submitted our response on 11 September 2023. On 10 November we received feedback from the Inquiry with requests for updates and information on our drafts. We submitted our finalised response on 20 December 2024 and are currently waiting to hear back from the inquiry. The third preliminary hearing on Module 3 took place on 10 April 2024. Formal, in-person hearings for Module 3 will take place between early September and late November 2024.
- The RCoA surveyed clinical leaders and the wider membership on their perceptions and experiences of working with AAs. We conducted the clinical leaders survey from December 2022- May 2023, and the members survey from 16 August- 20 September 2023. The members' survey was designed by the RCoA policy team but conducted by Research by Design, an independent market research company. They are producing a comprehensive results report, separate from this one. The synthesis report summarises the key findings, compares the survey's results, contextualises and interprets the answers, and produces recommendations.
- The RCoA has produced an RCoA manifesto outlining calls for the political parties to include in their manifestos ahead of the next UK general election.
- CPOC Manifesto: A Blueprint for NHS Efficiency calls (also included in the RCoA manifesto) to establish a £100 million NHS efficiencies transformation fund that trusts in England can access to fund the implementation of perioperative programmes. The fund should be proportionately matched with funding for health systems in Scotland, Wales, and Northern Ireland.
- In January 2024 Fiona Donald and RCoA Head of Policy, Peter Kunzman, met with Steve Brine, Chair of the Health and Social Care Committee, alongside other Medical Royal Colleges.

WD invited questions from the Board and the following points were raised:

- How will the College continue to engage with Anaesthetists following the EGM 2023 and discussion on Anaesthesia Associates. There have been several members who have expressed their unhappiness with the situation on AAs and their plans to relinquish their membership. FD confirmed that there had been more positive feelings towards the College since there has been more communication on the College's action following the EGM and the issues on AAs. FD reminded the Board that this is not just an RCoA issue and other Medical Royal Colleges are feeling the fallout from the NHS and GMC plans for MAPs. The RCoA are looking into the membership offering to improve the benefits members gain from their subscription fees and looking at ways to support professional development throughout an anaesthetist's career. AA workforce is a relatively small area of work that the RCoA undertakes, and members need to be reminded of the other important work that the RCoA continues to deliver and develop. In Spring and Summer 2023, the College were experiencing high volumes of dissatisfied members, but reassuringly and since the College has communicated on their progress since the EGM 2023, there has been far less negativity towards the RCoA on social media and by other means. In terms of membership numbers, the RCoA do not see a huge fallout of numbers, which is reassuring and will continue to be monitored.
- Is there an appetite from the government to have a separate registration or standardized assessments for AAs? FD confirmed that the RCoA are in the process of writing a scope of practice for beyond qualification for AAs to be trained that should come into force once regulation is in place. There will be an exam AA registration assessment that the GMC are creating with some advice from the RCoA, and this will be an MCQ exam. The RCoA is gaining a better understanding of their role within the delivery of AAs. The government has agreed to legislation for physician associates (PAs) and AAs, NHS have agreed to increase the number of AAs in the medical workforce and the GMC will be regulating them. The RCoA are very much focused on training and curriculum needs, and the reality is that the AA workforce will continue, even if the College decides not to engage.
- Does the College feel that they should be running the exam or does this does not look like the College is supporting the plan to increase AA numbers. FD confirmed that this is a GMC exam with some input from the College. WD confirmed that there was a rollout of AAs in Northern Ireland around 10 years ago and it didn't work and perhaps there are some lessons learnt that can be shared.

6. Chair's Business

WD has agreed to continue as Chair for this meeting and potentially the next until a replacement has been found. As there was an intention for a new Board Chair to take on this meeting, there was no report circulated. WD highlighted that he continues to work with local Chairs of Royal Colleges and there is a F2F meeting on the 21 May. A more detailed report will come to the next meeting in October.

7. Advisers Business

7i. Regional Advisor for anaesthetics

DL provided an update on RA business for anaesthetics, the following points were raised:

- After an overwhelming ballot for strike Trainees staged a full walk out from 08:00 on Wednesday the 6 March. A mandate exists for further industrial action. It is hoped however that the return of the executive will allow Junior doctors to receive pay and condition parity with their colleagues in the rest of the UK. Consultant negotiations have commenced regarding a similar pay deal to England.
- The anaesthetic departments have moved toward paperless record keeping in Northern Ireland. A regional rollout of Epic Encompass began in Southgate in October and will expand to Belfast Castle on the 6 of June 2024. This transition will have an impact on productivity and waiting lists. DL thanked all staff, trainees and trainers going forward for their dedication and hard work with this implementation.
- DL has taken over as RA for Northern Ireland from Dr Richard Laird and thanked Richard for his 12 years of dedication and hard work to medical training in Northern Ireland.

- DL thanked Dr Conor Farrell for his hard work as the RA in Pain Medicine over the past six years. Dr Farrell has been replaced by Nathan Oliver.
- Dr Claire Barker has been appointed as the Deputy Head of School for Anaesthetics. Claire vacates the role of Training Programme Director and expressions of interest have been circulated by the School of Anaesthesia before the formal appointment process commences.
- Dr Lisa Taylor has recently been appointed as the College Tutor in the Belfast Trust. Dr Parker has been welcomed as Deputy Head of the School for Anesthetists.
- Dr Grace McClune from the Southeastern Trust is coming to the end of her second term as College Tutor and has successfully been appointed to the role of Professional support and wellbeing lead educator in NIMDTA.
- Overall trainee numbers are more than funded slots. However, despite this there are rota gaps around the province which are due to a combination of over 30 trainees working LTFT and on maternity leave. Many of those on ML are due to return to work between February to July 2024 after taking their accrued leave. There are currently two trainees on long-term sick leave and 2 on OOP.
- CT1 interviews were held on Thursday 7th March 2024 and the offer deadline Tuesday 9 April. It is anticipated that there will be full recruitment.
- ST4 recruitment was undertaken on Monday 25 March 2024. Unfortunately, there were only 9 applicants and offers were released on Wednesday 17th April.
- Faculty Training Days were held around the province at individual departments from September 2023 to January 2024. These were an opportunity for the school to meet educational and clinical supervisors from departments and provide department specific updates and training. The days included an update on the anaesthetic curriculum, the Lifelong Learning Platform, LTFT, and the Stages of the 2021 curriculum. The feedback from each session was extremely positive.
- The Primary and Final FRCA courses have continued to run successfully. Thanks, has been conveyed to the Clinical Tutors in organising these. The CT1 introductory course ran successfully at the beginning of September 2023 in Antrim Area Hospital. The Flying solo course was recommended in the Ulster Hospital Simulation Centre for CT1 beginners in January 2024. Thanks goes to Dr Jeff Brown who has handed over the reins of Course Chair to Dr Bronagh McKay and the entire consultant faculty.
- The ARCP panels are planned for late June and early July 2024.
- All trainees in Northern Ireland have moved to the 2021 curriculum.
- There has been no expression of interest for a paying fellow in a specialist interest area for next year. The role is not being advertised but it's still under discussion. An IDT has been confirmed who is interested in pursuing the second part of a specialist area in pain.

FD mentioned that the Workforce Committee is meeting on the 10th May and it would be great for the issues NI are experiencing to be voiced. Dr Malloy is a member of the Committee and agreed to work with Russell Ampofo and PK to get a summary presented.

7ii. Regional Advisor for Intensive Care

ED provided an update of RA business for Intensive Care and the following points were raised:

- There are currently 24 training in ICM in Northern Ireland and 12 dual training with anaesthesia, six dual training with emergency medicine. Four on the training programme completed in January and all have taken up posts locally.
- There are concerns about funding and training capacity, with a need to increase numbers at different training stages. As this can have an impact on other levels of training in various hospital settings.
- Regional seminars continue to be delivered and have mostly returned to in-person format. Feedback is consistently very positive. As part of our educational programme, an exam prep course with practice OSCE-SOE is provided for local candidates as needed and feedback is excellent. The organisers, Dr Black and Dr Headley, and the rest of the volunteer faculty do an excellent job and their work on this is very much appreciated.
- Consultant sessions and workforce challenges are noted as a major concern. Four

consultant posts have been filled since the last meeting, but gaps remain in the consultant workforce. Formal workforce review of ICM in NI remains overdue but we project a mismatch between completed training posts and expected vacancies for the next 3-5 years.

7iii. Reginal Advisor for Pain Medicine

CF was absent from the meeting and no update was reported.

8. College of Anesthesiologists of Ireland

There was no representative from CAI at the meeting and no update was reported.

9. Association of Anesthetists Business

NB provided an update of RA business for Intensive Care and the following points were raised:

- Since the last meeting, the Association has continued to seek improved safety and quality of care for patients, while promoting the well-being of members. He suggested that reducing the workload for members could benefit the College and enhance the quality of care.
- The Association agreed with plans to introduce legislation raising the age of sale of tobacco products by one year annually starting in 2027, aiming for a 'smoke-free' generation.
- The Association commented on the strategy and objectives of the Patient safety Commission. It was noted both parties shared many of the same goals and objectives for patient care and safety. The areas of focus include safety culture, safety management systems, signal detection, and restorative approaches to patient protection.
- Since the last meeting other issues affecting members have lessened the profile of the 'Fight Fatigue' campaign. Nevertheless, it continues to garner new support from medical groups and a range of political parties. However, there remains scant support from NHS Trusts and no political support in Northern Ireland.
- The Association continues to promote its 'Manifesto for the Next General Election'. This composes of six main areas of concern to members that political parties should be addressing. These include: making the HNS an attractive place to work for anaesthetists; workforce strategy planning should show clear and reported progress; identify and solve issues around recruitment; understand and improve issues around retention; regulate and assess Anaesthetic Associates; include anaesthetic involvement at all stages of policy discussion.
- Since the last Board meeting the Association has issued a position statement on Anaesthetic Associates (AAs).

10. Trainee Representative Business

AG presented an update on the trainee business and the following points were highlighted:

- In general, there's a lot of support from consultants, especially this past year during the junior doctor's strike.
- Trainees felt a sense of advocacy from the College support network, but it continues to be a stressful time with challenges in clinical work. This stems from the COVID-19 pandemic where the Northern Ireland caseload has dropped, and the intensity has increased in terms of having to navigate the new EPIC system.
- To note list numbers have dropped by 50%. In addition, there have been time constraints in clinical work, exam preparation and ever-increasing paperwork and considerable time spent navigating EPIC and data entry.

11. AOB

It was agreed that the next meeting will be held on Tuesday 8 October 2024.

The Chair thanked everyone for their contributions and attendance.