

**Minutes of the RCoA Northern Irish Board meeting
Tuesday 11 October 2022
Virtual Meeting**

Present:

Dr Will Donaldson	NIB Chair, Northern Trust Representative
Dr Russell Perkins	RCoA Vice President
Mr Jono Brunn	RCoA CEO
Dr David Lee	Training Programme Director
Dr Mary Molloy	Head of School of Anaesthesia
Dr Neal Beckett	Co-opt Member, Association of Anaesthetists
Professor George Shorten	Co-opt Member, President, College of Anaesthesiologists of Ireland
Dr David Selwyn	Director CPOC
Dr Gregory Warren	CPOC Fellow
Dr Richard Laird	Regional Adviser Anaesthesia
Dr Esther Davies	Regional Advisor ICM
Dr Cheryl Turkington	Elected Consultant member, Western Trust representative
Mark McCaughy	Trainee Representative
Dr Brendan Haughey	Trainee representative
Lianne Smith	RCoA Policy & Public Affairs Officer
Lisa Roberts	RCoA Committee Secretariat

1. Apologies and declaration of interest

Mr Jono Brunn	RCoA CEO
Dr Killian McCourt	Elected Consultant Member, Belfast Trust Representative
Dr Raymond McKee	Regional Advisor for ICM

2. Introduction and Welcome

Dr Will Donaldson welcomed those in attendance including the RCoA Vice President Russell Perkins and Dr David Selwyn, the director of CPOC and his colleague Dr Gregory Warren, a CPOC Fellow.

Dr Will Donaldson commemorated Dr Ken Lowry, who sadly passed away earlier this year on 19th April 2022. Members noted that he was very well known to lots of people in Northern Ireland as an ICU consultant and latterly as the medical director of the Trust that Dr Will Donaldson and Dr Esther Davis were part of. Members noted that he was involved in the work conducted by the College of Anaesthesiologists and was a Council member from 2016. Dr Will Donaldson confirmed that he was vice president and was also an examiner for both the primary and the final exam from 1991 to 2018. Members acknowledged the contribution made by Dr Ken Lowry and held a minute's silence to remember him.

3. Minutes of the last meeting on Tuesday 12 April 2022

The board NOTED that the minutes of the meeting held on Tuesday 12 October were approved as a true and accurate record. Dr Will Donaldson confirmed the following:

- **Dr Will Donaldson to link in with Dr Lowry, Dr Molloy, and Dr Lee in relation to the NI Representative for the RCoA Anaesthetic Curriculum Development and Assurance Group.** The board noted that Doctor David Lee, who was the training program director had put himself forward to represent Northern Ireland on the RCOA anaesthetic curriculum development. Dr Will Donaldson proposed to put forward Dr Lee as a co-opted member due to his academic position and this was agreed. Action discharged.
- **Dr Will Donaldson to update the board on the summary on the Health Summit.** The board noted that the health summit was held earlier this year in March and noted that LR would forward the summary. Dr Will Donaldson confirmed that the main theme of the summary was workforce and how we needed to retain and recruit and look after the current workforce in place in Northern Ireland. Action discharged.
- **The board to contact Dr Will Donaldson if they were interested in running sessions around unrecognised oesophageal intubation.** Dr Will Donaldson confirmed that he had not received any responses on this and said that he would contact the College, the clinical

directors and college tutors to ensure that this had taken place as it was very important.
Action Discharged.

- **Trainee representatives to link in with trainees in relation to the policy calls in the manifesto and how it impacts them in Northern Ireland and feedback to Dr Will Donaldson.** The board noted that the manifesto had been written and that Dr Will Donaldson had sent the link through to the new trainee representative. Action Discharged
- **Dr Will Donaldson to approach individuals to represent the board at HSRC.** The board noted that Dr Will Donaldson had approached some individuals. The board noted that no one had committed but that it was felt that either John Silversides or Matt Devine would take this up. Dr Will Donaldson asked for the action to be discharged based on this. Action Discharged.
- **New Health Secretary and new secretary to be invited to next meeting.** The board noted that Dr Will Donaldson had written to both the new Health Secretary and new secretary in April 2022 but had not received a response. Dr Will Donaldson suggested that it would be helpful for the College to write to them and invite them to attend the face-to-face meeting in April 2023. Action Ongoing
- **Professor George Shorten to consider cross border working around perioperative medicine.** The board noted that Dr Will Donaldson had been put in contact with the relevant individuals therefore this had been completed. Action Discharged.
- **Professor George Shorten to share technologies and services outlined with the board.** The board noted that this had been done. Action Discharged
- **Mrs Sharon Drake to investigate what online courses could be offered by the College in terms of reskilling.** The board NOTED that an update from Mrs Sharon Drake was required. Action Ongoing.
- **Dr Will Donaldson to write to all the CDs across the region to ask if reskilling was an issue in Northern Ireland and feed back to the College.** The board noted that Dr Will Donaldson had raised the issues outlined with local CDs, and that there were some colleagues within intensive care medicine and in pain medicine that were concerned. The board noted that they were finding it difficult to go back to an ICU and theatres post COVID because they had remained in intensive care for over 2 years, therefore clinicians were saying that due to the blocks they had not had enough regularity to keep up to date. Action Discharged
- **Dr Fiona Donald to link in with John Hughes to see if this had been recognised by the College.** The board noted that Dr Fiona Donald had written to John Hughes to look at this more broadly on a national level and was not considered to be a problem. However, the board noted that Dr Davis, our regional advisor for ICU, sent Dr Will Donaldson an e-mail which confirmed that FICM had published a return-to-work document in relation to the experience in ICU. The board noted that Dr Davis had linked in with FICM examiners and the feeling was after coming back to theatres after being in ICUs for a couple of years was a difficult and stressful process which had prompted some to retire. Action Discharged
- **Professor George Shorten to make some enquiries and find out if there was a demand for reskilling particularly in Pain Medicine.** The board noted that this had been completed. Action Discharged
- **Dr Davis to share the survey outlining the vacant ICU consultant posts.** Dr Will Donaldson confirmed that there was a workforce survey that was carried out just over a year ago which was currently being repeated by the faculty and that the feeling was that we were probably still short here. Dr Davis said that the survey looked at the anticipatory gaps coming up with retirement and what the CCTs we were expecting over the next few years. Dr Davis confirmed that it did look like there would be a shortage across the UK and more detail would be provided when it was published. Action Discharged.
- **Dr Fiona Donald to contact John Hughes about the curriculum and whether he felt that it had impacted on pain training.** The board noted that this had been completed. Action Discharged
- **Dr Will Donaldson to link in with the Lay Committee in the College re lay representation.** The board noted that discussions were still taking place. Action Ongoing.
- **Dr Will Donaldson to link in with the College in relation to the process of appointing a SAS Representative to the board.** The board noted that discussions were still taking place and noted that both representation from the Lay Committee and SAS doctors was important and was vital to the board going forward in terms of workforce and the patients that were looked after. Action Ongoing.

4. President's Business

The board noted that the full report had been circulated prior to the meeting and the following was highlighted by Dr Russell Perkins:

- The board noted that his summer had been busier than usual as the College continued discussions and membership engagement around the proposed governance changes alongside an exercise to prioritise the work of the College. In addition, Dr Russell Perkins said that a number of online meetings had also taken place during this period.
- Dr Russell Perkins confirmed that a lot of the work recently undertaken by the College was around workforce planning which remained a priority for the College. The board noted that this was also a priority for the health service and the new Secretary of State and that discussions on their workforce plans would be taking place in the coming weeks.
- In addition, the College had looked to dovetail their workforce planning for medically qualified and that work with anaesthesia associates was ongoing. Dr Russell Perkins said that the GMC had taken up the role of coordinating all of the work for anaesthesia associates, but if commissioned, the college would look to set up their own.
- The founding board of the Royal College held its first meeting in September of this year and had looked at the curriculum and what it should look like, the board noted that this work was ongoing.
- Dr Russell Perkins highlighted the work taking place around the governance review and how this would be structured going forward. The board noted that the College had revisited this as the votes needed at the beginning of the year to take forward the proposals had not been received, the board noted this was ongoing
- The board noted that the topic of conversation at the next board of trustees would be the exam review. Dr Russell Perkins said that the exams review had reported to Council last month and that it was an excellent review looking at the structure and quality of exams. The board noted that there was also a small addendum to the review that looked at some issues around the examiners. Dr Russell Perkins said that the College would be looking at how all the recommendations in the report could be implemented in full but that there would be some changes to the exams following this.
- Dr Russell Perkins said that the College had been looking at their finances and trying to prioritize and work out what they should continue to do and how they could conduct their business more efficiently in the future. The board noted that the College would be trying to set a balanced budget for 2024.
- The board noted that the Lifelong Learning Platform funding had been allocated from college reserves, and an IT company was working on that. Dr Russell Perkins said that they were working through all the tickets so that the user interface and user satisfaction with the lifelong learning platform could be improved.
- The board noted that there were two further co-opted anaesthetists in training. Dr Russell Perkins said that trainees on Council were elected last month and that further details on this were in the CEO update.
- Dr Russell Perkins confirmed that Council elections opened last month and that the balloting would start next month. The board noted that there were two consultant vacancies and one anaesthetist in training vacancy and that the vacancy was for a Council member rather than a co-opted member. Dr Russell Perkins confirmed that the College wanted to invest in trainees on Council and also look to have better representation by increasing it from two trainees to four trainees.
- The board noted that the College finances had been audited by their independent auditor which was satisfactory. Dr Russell Perkins confirmed that the College were interviewing for a new audit partner as it was considered good practice to review your contracts and to perhaps maybe even change if that was necessary.

Dr Will Donaldson asked if it would be possible for a trainee from Northern Ireland to apply to sit on Council. Dr Will Donaldson said that it would be difficult as there were smaller regions in the country therefore, they would receive a smaller number of votes. Due to this Dr Will Donaldson asked if the College would ever consider a PR type system. Dr Russell Perkins said that it was an interesting idea and that he would take this back to the College for further discussion. The board noted that it was something that the College would consider, and Dr Russell Perkins said that he would personally welcome a candidate standing from Northern Ireland. Dr Russell Perkins said that it was important for any candidate to broaden their appeal as that was the best way of getting the votes that were required.

Action: Dr Russell Perkins to ask the College if a PR system could be considered in terms of electing to Council.

5. CEO's Business

The board noted that the full report had been circulated prior to the meeting. The board NOTED that Mr Jono Brunn was unfortunately unable to attend but that they could contact him via email if they had any questions.

6. Policy & Public Affairs Update

The board noted that a Policy and Public Affairs paper had been circulated and Ms Lianne Smith raised the following:

State of the Nation Update

The board noted that the update report would build on the workforce data and planning featured in the 'Anaesthetic workforce: UK State of the Nation' report released in February 2022 (whose statistical workforce analysis was based on RCoA Medical Workforce Census 2020 data). The board noted that this information was available on the website. Ms Lianne Smith said that the new update report would focus on outlining how the workforce gap statistics had changed since and how these fitted into the College's workforce projections for 2040. The board noted that the 'State of the Nation Update' would be published before the end of 2022, and it was hoped that there would be some interesting data about workforce that could be utilized in the future to influence government and policymakers.

Future of the Nation survey work

The board noted that this work was part of the 'Anaesthesia: Fit for the Future' policy and public affairs influencing campaign and built on the State of the Nation Report released in February 2022. Ms Lianne confirmed that there was 3 UK wide survey's that she would be leading on:

- Survey for Clinical Directors on their views and experiences of working with Anaesthesia Associates
- Survey Direct to Anaesthesia Associates about their career and professional development (partnership with – check minutes)
- Survey to Wider RCoA membership

We hope to use the survey data gathered to inform the upcoming Government stakeholder consultation on AA regulatory legislation, which is planned for late Autumn of this year. Throughout survey work, we aim to develop a rich base of data on AAs and the current views of our wider membership, which will support college internal and external communications. Our findings will also ensure we can formulate well – evidenced Anaesthetic workforce policy recommendations for Government, policy makers and NHS managers.

RCoA contributed to the AoMRC's report 'Fixing the NHS: Why we must stop normalizing the unacceptable' which was published September 2022.

The board noted that the report called for: Expansion of the NHS workforce – supporting an increase in medical school places and specialty training places.

In addition, the report also called for:

- Reform of social care in order to deliver a comprehensive health and care strategy
- The adoption of positive workplace practices such as flexible working
- Greater focus on prevention and tackling health disparities

The College particularly contributed to the report's workforce expansion and prevention of health disparities policy content. The board noted that the policy team put forward a lot of the perioperative care work that really looked at targeting health disparities and disruptions and cancellations before they came to fruition.

HEE Anaesthesia Associate Higher Education blended learning program

Ms Lianne Smith provided a brief summary on the program to the board:

- HEE was introducing a new Anaesthesia Associate higher Education blended learning Postgraduate Diploma program (Face to face and online learning) at UCL, Birmingham University and Lancaster University.
- The HEE scheme was available to NHS Trust hospitals in England who supported student AAs who started their training courses between 1st April 2022 and 1 April 2024. The board noted that the funding scheme would support a total of 120 student AAs per year across England until 2024.
- If a hospital trust took part in the HEE programme and sponsored a trainee AA, HEE would provide full funding for a student AAs university qualification, as well as providing 100% of salary costs in the first year of training and 50% of salary costs in the second year of training.
- HEE would also make a tuition fee contribution of £6,500 per year, per student and up to £2,700 towards tudent AAs educational supervision.

Wales AA expansion program:

- As part of this scheme, HEIW would be covering the postgrad course costs for student AAs, whilst the Hospital provided the student AA salary funding.
- Wales was underway to start training 6 new AAs in January 2023 as an initial process, with review of the outcome dictating further funding. The funding had been established in Swansea for 2 AAs and 4 in Cardiff.
- As far as the College know there was no AA expansion program planned in Northern Ireland or Scotland.

RCoA will contribute to the upcoming Covid 19 Inquiry

- Ms Lianne Smith confirmed that the College was planning to contribute to the upcoming COVID-19 inquiry. The board noted that the scope of the RCoA's Covid 19 Inquiry submission would be decided by the RCoA Trustee board on the 12th of October 2022.

Dr Russell Perkins referred to the COVID inquiry which the board of trustees would be considering and said that they were going to discuss whether they went in as a partner organisation with the Academy of Medical Royal Colleges or whether they went in as a standalone organisation. The board noted that the feeling was that they went in as a standalone organisation but that there would be cost implications to this.

Professor George Shorten raised the value of the UK wide questionnaires, in particular the running of cultural diagnostics across large organisations such as the NHS. Professor George Shorten asked if this had been considered in terms of the design of the questionnaires as there were a number of elements in high functioning organisations such as the NHS which could be difficult to measure such as the recent pandemic, stress, wellness and burnout in the workplace. Professor Shorten said that it would be helpful to try and capture this within the surveys that had been designed. LS confirmed that they had tried to capture the areas outlined in the College survey which looked at the broader membership. Lianne Smith said that it would be useful to look at the way that culture diagnostics had changed more broadly following the COVID-19 pandemic through the College questionnaire and said that members could contact her if they had any further suggestions / comments for surveys in the future. Professor George Shorten said that he would send her some examples.

Action: The board to link in with Lianne Smith if they had any suggestions for survey content in the future. Professor George Shorten to send some examples to Lianne Smith.

Dr Will Donaldson raised the representation of Anaesthetic Associates in Northern Ireland and confirmed that he had received an e-mail from Jenny Redmore asking him to ask the board for a representative for the faculty of Anaesthesia Associates founding board. Dr Will Donaldson said that he would circulate the information to the board to request nominations for a representative for the faculty of Anaesthesia Associates founding board as the first meeting would be taking place on 15th December.

Action: Dr Will Donaldson to circulate the information to the board to requesting nominations for a representative for the faculty of Anaesthesia Associates founding board as the first meeting would be taking place on 15th December.

7. CPOC and Northern Ireland

Dr Will Donaldson welcomed Dr David Selwyn to the meeting. The board noted that Dr Dave Selwyn was the inaugural director of the CPOC the Centre for perioperative care and was also the current medical director for Sherwood Forest's Health Trust. The board noted that Greg Warren, a CPOC Fellow was also in attendance and would be establishing trainee links to support this programme going forward. Dr Will Donaldson highlighted that currently there was not much in terms of CPOC in Northern Ireland, hence why the presentation was being provided at the meeting today. The board noted the comprehensive overview provided by Dr Dave Selwyn on the structure and strategy of CPOC around the 6 pillars, how it had developed over the past few years, the achievements of the programme and the opportunities that it could provide if Northern Ireland invested in this in the future.

The board noted that currently there was 124,900 waiting for hospital surgery or treatment in Northern Ireland which equated to 1 in 4 persons and considered the proposed roadmap provided to come out of this and how CPOC could help to support this. The board noted that societal change was needed and that primarily involvement was needed to support this. The board noted that there was a significant problem in Northern Ireland and that a joined-up effort would be needed to make an impact on this in the future. The board noted that there were currently 3

perioperative leads in Northern Ireland, but it was not known how active they were and how they could be supported. The board noted that further information was available on the website.

Dr Will Donaldson thanked Dr Dave Selwyn for the presentation. Dr Will Donaldson referred to the work taking place UK wide and asked why this was not happening in Northern Ireland and what the barriers were considered to be as it was a small nation so therefore it should be able to make changes quickly.

Dr David Lee said that he felt that this was due to the current political landscape in Northern Ireland and until these altered things would not change. Dr Will Donaldson agreed and said that he felt that it came down to funding and that we needed to consider how the group could influence this going forward. Dr Mary Molloy said that good work was taking place in Belfast City Hospital but from a trainee perspective she was not sure how linked up they were across the hospitals therefore it would be helpful for them to be more involved going forward.

Dr Will Donaldson said that this needed to be taken to the highest level and that even though the manifesto containing this went to all the political leads it was not recognised as was hoped in Northern Ireland. Dr Dave Selwyn asked what the College could do in terms of raising this on the agenda. Dr Russell Perkins said that he was unsure as to how the College could influence things in Northern Ireland directly from their position in London but was open to suggestions which he could then take back to the College to help influence in this area. Dr Greg Wallace said that anaesthesia was a large part of it but that maybe a collation of the medical royal colleges may have more of an impact collectively in terms of a perioperative approach. Dr Dave Selwyn said that those in attendance needed to find out who their perioperative lead was and to put them in touch with them as there needed to be leads in all departments which would contribute to a joint up approach across Northern Ireland. Dr Dave Selwyn said that there was an appetite to do this in the Royal College of Surgeons and that we needed to match this going forward. Dr Neal Beckett outlined his concerns around the College not having leverage on this, he referred to the Duty of Candour and highlighted the risks around this if it wasn't followed in the future.

Dr Will Donaldson highlighted that the College of Surgeons were heard because they were speaking all the time and that there was an alternative approach in terms potentially doing a cross border approach / an all-Ireland approach. Professor George Shorten said that there would be a strong appetite to do this from a College point of view. The board noted that the problem was largely shared, and that the magnitude of the deficit was largely similar and that the key stakeholders would be the same. Professor George Shorten asked what would be effective and would actually work and said that there was an international group producing a consensus statement on training programme outcomes and that perioperative medicine and recovery would be an element of that. Professor George Shorten suggested that to get this to work it needed to be a systems-based approach where the key components were in place and brought together effectively and carried out and done in a structured way particularly around policy.

Dr Russell Perkins said that he felt that a flagship meeting in Northern Ireland needed to take place and asked when the last one had taken place. Dr Will Donaldson confirmed that the last update meeting had taken place in 2017. Dr Russell Perkins said that there was a need to get a large audience in place with the relevant politicians in the audience to progress this and make the change in Northern Ireland. Dr Will Donaldson agreed and said that if the College was prepared to bring a large meeting to Belfast that it would be a good opportunity to bring all of the external stakeholders together to support it. Dr Russell Perkins said that he would feedback the opportunity to hold a College flagship meeting in Northern Ireland.

Action: Dr Russell Perkins to link in with the College and ask if there was an opportunity to hold a flagship meeting in Northern Ireland to influence key stakeholders.

Dr Dave Selwyn said that pushing cross border was key and would be a positive outcome. Dr Will Donaldson suggested that it would be helpful to have a newsletter with a focus on perioperative medicine in terms of what Northern Ireland were doing and what they would need to do going forward. Dr Mary Molloy said that it would be positive to invite local leads to say about what had already been established and to get their ideas too in terms of what needed to be delivered locally.

Action: Dr Will Donaldson to produce a newsletter focusing on perioperative medicine in terms of what Northern Ireland were doing and what they would need to do going forward. Dr Will

Donaldson to invite local leads to say about what had already been established and to get their ideas too in terms of what needed to be delivered locally.

Dr Will Donaldson confirmed that he would arrange a meeting with Dr Dave Selwyn to discuss the perioperative medicine agenda in Northern Ireland further and would then feed the outcomes of the meeting back to the board.

Action: Dr Will Donaldson to arrange a meeting with Dr Dave Selwyn to discuss the perioperative medicine agenda in Northern Ireland further and to feed back the outcomes of the meeting and way forward back to the board.

8. Chair's Business

i. Dr Darrell Lowry – contributions to education in NI and the NI board

Dr Will Donaldson paid tribute to Dr Darrell Lowry. Dr Will Donaldson outlined his significant contributions to the board during his time in post and thanked him for his guidance and hard work that the board recognised.

ii. Anaesthesia Associates in England and Wales, blended learning scheme – Reference: <https://www.hee.nhs.uk/news-blogs-events/news/anaesthesia-associates-blended-learning-programme-be-launched-two-universities>

The board noted that this had already been covered in the Policy and Public Affairs update.

iii. NI Newsletter contributions

In terms of the newsletter, Dr Will Donaldson confirmed that one would be published by the end of the year and that he would link in with colleagues to ask for contributions. The board noted that perioperative medicine would be highlighted in it and that Dr Will Donaldson would also look for input from trainees.

Action: Dr Will Donaldson to publish a College newsletter in 2022, Dr Will Donaldson to highlight perioperative medicine and link in with colleagues and trainees to ask for contributions to the content.

iv. Notice of Chair's intention to step down after first term

Dr Will Donaldson said that he was looking to step down after his first term but that following this meeting that he may look to reconsider and would update the board at the meeting in April 2023.

v. COPS process for the College

The board noted that Ms Lisa Roberts had circulated the document to the board in advance of the meeting. Dr Will Donaldson said that the process was around how much the College recommended guidelines and asked the board to look at the document and send any comments to him to feedback to College.

Action: The board to look at the COPS process for the College and send any comments to Dr Will Donaldson to feedback to College.

9. Advisers' business

Dr Will Donaldson welcomed the Regional Advisers' to the meeting.

Regional Advisor for Anaesthetics

The following update was provided by Dr Laird:

Dr Laird thanked all the anaesthetic trainees and trainers for their hard work, dedication, and flexibility during the last six months. The board noted that although restrictions had been lifted for most of society, COVID-19, and its fall out, remained a burden for the healthcare system at large. Dr Laird said that anaesthetic departments and trainee anaesthetists throughout the Province continued to experience heavy workloads.

Dr Johnny Little: Dr Laird said that the School was shocked and saddened by the recent tragic death of one of their senior trainees, Dr Jonathan Little on 27th April 2022. The board noted that Johnny was a well liked and respected member of the school and would be greatly missed by his friends and colleagues. Dr Laird said that they had continued to endeavour to support trainees and trainers during this time. The board noted that books of condolences were placed in each hospital following the event and were collated into two volumes to be presented to his family.

Appointments: Dr Laird welcomed Dr Mary Molloy to the post of Head of School taking over from Dr Darrell Lowry. Dr Laird echoed Dr Will Donaldson's comments and thanked Darrell for his tireless hard work and commitment to anaesthetic training over past many years. Dr Laird personally wanted to thank him for his professional support and friendship in his time of navigating the roles of College Tutor and more recently a Regional Advisor.

The board noted that Dr Brenda Daly had replaced Dr Jacqueline McAlinden as College Tutor within the Belfast Trust.

Dr Laird also welcomed Esther Davis to the meeting, the board noted that she had recently replaced Dr Raymond McKee as TPD for ICM.

Manpower: The board noted that there were fourteen on maternity leave and one on long term sick leave. Two trainees would be returning from maternity leave at the end of October and a further 2 were due to start maternity leave by Christmas. The board noted that there was no ST3 recruitment for August 2022 and due to this it had been difficult to fill gaps due to maternity leave. The board noted that there was an inter deanery transfer out of the training programme to Wales and 2 resignations from CT1. The board noted that two trainees had left programme at CT3/ ST3 level due to lack of exam progress in February 2022 and August 2022 and had been employed within Northern Ireland as specialty doctors.

Consultant job approvals:

- Western Trust; 1 post
- 1 Anaesthesia (October 2022)
- Belfast Trust; 1 post
- 1 Critical Care and Anaesthesia (2387.nia&b) (October 2022)

ST3/4 recruitment: The board noted that recruitment was being undertaken for ST4 to start in February 2023. Dr Laird said that they had two posts but only one applicant and that any unfilled posts would go to clearing. Further ST4 recruitment would happen in February 2023.

CT1 recruitment: CT1 interviews were held on 8th and 9th March 2022. The interviews were carried out virtually with the interviewers based in NIMDTA. This process ran smoothly with no major technical issues. The School appointed 19 from 38 candidates. There was generally good feedback, with the MSRA being the only source of discontent. The plan was to continue with a similar format for next year.

Exam results: Dr Laird confirmed that results had continued to be encouraging and that a group of trainees were able to attend the Diplomat's Ceremony on the 9th September 2022 celebrating their FRCA and FICM success.

Dr Laird continued to appeal for more College examiners from Northern Ireland.

Courses and Meetings: The board noted that September had been a very exciting month for Northern Ireland Anaesthesia. Dr Laird said that they had hosted two major anaesthetic meetings: the Association of Anaesthetists of Great Britain and Ireland Annual Congress and the Vascular Anaesthesia Society of Great Britain and Ireland. The board noted that Dr Caroline Curry, one of the educational supervisors within the Belfast Trust was a key organiser of the vascular meeting.

Congratulations to the many trainee winners.

AAGBI Annual Congress Winners

- Free Papers Oral Audit, Quality Improvement & Survey - 1st prize Dr Catherine Yarr
- Free Papers: Oral Case Reports - 1st prize Dr Manvi Singhal
- Roddie McNicol Patient Safety Prize - 1st Prize Dr Mark McCague
- Audit, Quality Improvement and Survey Posters - 2nd Prize Dr Emma O'Kane

Vascular Anaesthesia Society Winner:

- Poster Competition - 2nd Prize Dr Michael McCann

Dr Laird said that the Faculty Training Day was to be held on Thursday 13th October 2022. The board noted that this was an opportunity to meet education and clinical supervisors from around the Province. The day would include an update on the anaesthetic and ICM curriculums, the Lifelong Learning Platform, LTFT, mentoring and Trainee support.

The Primary and Final FRCA courses had continued to run successfully, and thanks had been conveyed to the Clinical Tutors in organising these. The board noted that the CT1 introductory

course ran successfully at the beginning of September and that the NIStar transfer course continued to develop, led by Dr Andrew Topping. The board noted that SPA time was currently available for senior trainees to support professional development.

Dr Laird confirmed that NIOAN (Northern Ireland Obstetric Anaesthetic Network) study day was held on 8th April 2022. This meeting provided face to face and virtual obstetric anaesthetic training. Next year's event would be on 21st April 2023.

ARCP panels: Last year's ARCPs worked well and there were no issues with the LLP or the virtual communication. It was planned to hold these again in late June 2023.

New Curriculum: Only a few ST6 and ST7s remained on the old curriculum, all other trainees had been moved to the new curriculum.

Regional Advisor for Intensive Care Medicine

On behalf of the ICM training committee, Dr Esther Davis thanked Dr Darrell Lowry for his support and hard work as he had now stepped down as Head of the School of Anaesthesia and Intensive Care.

Education Programme: The board noted that regional seminars, having been mostly delivered online since 2020, had now begun to be delivered in person again and that feedback from trainees continued to be very positive.

Recruitment: Dr Esther Davis confirmed that five trainees were recruited via National Recruitment and started in August 2022. Three were dual training with anaesthesia and two with emergency medicine. The board noted that this had maintained ICM trainee numbers at twenty-six in the region, replacing four who had completed training and one resignation in the last year. For 2023 recruitment, interviews would be held online again in March following shortlisting based on verified portfolio scores as coordinated by West Midlands deanery. Members of the NI training committee would be involved with both parts of this.

ARCPs: The board noted that all ARCPs were done virtually in June 2022 and all trainees attended for the review. In September, a final ARCP was held for a dual anaesthesia-ICM trainee who would complete training at the start of November.

Training: There were currently 26 training in ICM in NI:

- 16 dual anaesthesia/ICM (including one who CCTs in November)
- 6 dual EM/ICM (one of whom is anticipated to CCT in May 2023)
- 2 dual AIM/ICM
- 1 dual respiratory/ICM
- 1 single ICM

Consultant positions

Dr Esther Davis confirmed that there had been no new positions approved in the last six months, however there remained a number of previously approved unfilled consultant posts across the region. The board noted that the doctor completing training in November had been appointed to one of these.

Exam

The board noted that the most recent FFICM OSCE-SOE was held in the first week of October and was again held in person. Three local trainees were sitting one or both components in this sitting. Dr Esther Davis said that the next written exam would be held in January and that they expected 4-6 NI candidates.

New curriculum and portfolio: Dr Esther Davis confirmed that the new ICM curriculum and the move to Lifelong Learning Platform portfolio had now been in place more than a year. The curriculum change had been fairly smooth but was more complex in dual anaesthetic-ICM training due to the change in structure of anaesthetic training. The board noted that a pragmatic approach had been taken within the School in managing this successfully; and the College and Faculty had been helpful in answering individual queries.

Regional Advisor for Pain Medicine

The board NOTED that Dr Connor Farrell was not in attendance and that a report had not been provided.

10. College of Anaesthesiologists of Ireland

Dr Will Donaldson welcomed Professor George Shorten, the President of the College of Anaesthesiologists to the board. Professor Shorten updated the Board on the following college activity:

New Appointments.

Director of Quality and Patient Safety: The board noted that Dr Brian McCloskey took up his CAI role on July 1, 2022. Dr McCloskey had been Clinical Director, Critical Care Services and Consultant in Anaesthetics & Intensive Care Medicine at the Belfast Health and Social Care Trust and had substantial experience of Quality Improvement applied to healthcare.

Director of Technology Enhanced Learning: The board noted that Dr Owen O'Sullivan, took up his CAI role on 1st July 2022. Professor Shorten said that he had invited Dr O'Sullivan to present a brief overview of a proposed programme of work TEL at the Council meeting of December 9th, 2022.

Following open competition, Dr Niamh Feely had accepted the College offer to become National Clinical Lead for Simulation-based Training and would take up her new role shortly.

An offer of appointment had also been made for the role of CAI Simulation Centre Manager.

A Short Life Working Group charged with informing CAI future direction and activities in **simulation-based training** had been convened and held its first meeting in August 2022. The board noted that the group was co-Chaired by Prof Caoimhe Duffy (University of Pennsylvania) and Dr Owen O'Sullivan (CAI Director of TEL). Professor Shorten confirmed that an initial report to Council was due December 2022.

The board noted that A history of anaesthesia in Ireland (1847-1998), "**Safety as we watch**" authored by Drs

Declan Warde, Joseph Tracey, and John Cahill would be launched by Dr Mary McAleese, former President of Ireland at the College on November 10th, 2022, which had been circulated.

The National Anaesthesia Patient Safety Conference (NAPSAC 2022) would be held at the College Premises on November 11, 2022. The Winter College Lecturer for 2022 would be Dr Charles Vincent, who would be speaking on Monitoring and Measuring Patient Safety.

CAI Strategy Refresh outcomes: Professor Shorten said that based on The Strategy Refresh event (April 7th-8th 2022), the outcomes were:

- i. Revised Strategy Document (attached)
- ii. A Strategy Refresh summary report
- iii. A dashboard presenting progress towards strategic aims at each meeting of Council.

The board noted that the revised Strategy was intended to serve as a living document which enabled should provide Council, College Staff, and the wider College community to evaluate progress and alignment of effort/investment with our strategic priorities.

Brief Report on CAI Governance Structures and Process: The board noted that Professor Colm Bergin's brief review of CAI Governance was underway. Workstreams included document review, questionnaire, and interviews with key stakeholders.

Forum of PGTBI Strategy for Postgraduate Medical Training in Ireland. Update

National Learning Analytics Unit for Health Professionals: On June 30th, a proposal was submitted to the Department of Health (Chief Nursing Officer, Ms Rachel Kenna and shared with Principal Officers for review). The board noted that follow up discussions were now underway, and a funding proposal had been included by HSE QPS Directorate for consideration to the Health Estimates process for 2022, as New Services Delivery (Exceptional Area Category).

Mr John Magner, Programme Manager for the Forum Strategy had begun the process of establishing Steering Groups for each of the Priority Action areas.

Consensus Statement on Training Programme Outcomes in Anaesthesiology.

Professor Shorten confirmed that drafting and structure planning was underway (most recent meeting September 16, 2022). The board noted that it was on schedule to produce a document for CAI (and other bodies') endorsement by May 2023. Many of the Expert Group drafting the statement would participate as faculty in CAI Congress 2023 (provisional dates May 18, 19) which would be themed on the future of education and training in our disciplines.

Dr Russell Perkins highlighted CPOC and asked what the College of Anaesthesiologists Ireland's position was on this and how they could influence this in the future. Professor George Shorten said that they had a very highly energised multi-disciplinary group that had created a society for perioperative medicine. Professor George Shorten said that there would be an appetite to do cross border, but it would be more difficult to consider as to how they could influence what needed to be influenced in terms of perioperative medicine. Professor George Shorten said that they probably had a greater degree of direct access to Government departments of health based on size and scales but used channels sparingly however they were effective. Professor Shorten said that collaboration was key and that once the product was there that their College could contribute to delivering it via the right channels (via Department of Health).

11. Association of Anaesthetists' business

The board NOTED the following update from Dr Neal Beckett.

- The Association held a face-to-face conference in Belfast 14-16 September which was very successful
- In terms of publication there has been a document on substance use disorders and anaesthetists and age and the anaesthetists in September and in draft publication one in human factors and non-technical skills.
- The Association had also signed up to the menopause workplace plan which would be part of the well-being framework which could come up across several specialties. Dr Neal Beckett said that this was relevant to anaesthetics because we had an aging workforce, and it was seen as a predominantly female workforce therefore it would influence workforce planning

12. Lay Committee business

The board NOTED that there was currently not a LAY Representative on the board. Dr Will Donaldson said that he was linking in with the College in relation to LAY and SAS representation on the board in the future. Dr Russell Perkins asked if the representative needed to be from Northern Ireland, Dr Will Donaldson confirmed that did not need to be from Northern Ireland. Dr Mary Molloy highlighted the pool of LAY Representatives involved in the training and that it would be beneficial to have someone local. The board NOTED that Dr Will Donaldson would link in with Dr Mary Molloy in relation to the pool of LAY Representatives involved in this.

Action: Dr Will Donaldson to link in with Dr Mary Molloy in relation to the pool of LAY Representatives that she referred to at the meeting.

13. Trainee Representative Business

The trainee representatives present confirmed that they had not received any issues from trainees.

14. SAS Representative Business

The board NOTED that currently there was not a SAS Representative in place and that Dr Will Donaldson would be linking in with the College in relation to this.

15. Any Other Business

The board noted that there was no further business to be discussed.

16. Date of the next meeting

It was proposed that the next meeting would be held on **Wednesday 12 April 2022 from 2.00pm-5.00pm** at the Hilton Hotel in Belfast City Centre. WD made the board aware that Monday 10 April was a Bank Holiday therefore asked them to link in with their health boards and contact Lisa Roberts regarding the date.