

MEETING OF COUNCIL

Minutes of the meeting held on 14 December 2021

Members attending:

Dr Fiona Donald, President	Dr Sri Gummaraju
Professor William Harrop-Griffiths, Vice President	Professor Jonathan Thompson
Professor Ravi Mahajan	Dr Rosalind Bacon
Professor Mike Grocott	Dr Ashwini Keshkamat
Professor Ellen O'Sullivan	Dr Ramai Santhirapala
Dr Mark Forrest	Dr John Hughes (FPM)
Dr Krish Ramanchandran	Dr Alison Pittard (FICM)
Dr Chris Carey	Professor Dave Lambert
Dr Helgi Johannsson	Dr Sandeep Lakhani
Dr Claire Shannon	Dr Dave Selwyn
Dr Claire Mallinson	Dr Mike Nathanson
Dr Sarah Ramsay	Dr Simon Ford
Dr Jamie Strachan	Dr Daphne Varveris
Dr Lucy Williams	Dr William Donaldson
Dr Felicity Plaat	Mrs Pauline Elliott
Dr Mike Swart	
Dr Sarah Muldoon	

In attendance: Mr Jonathan Bröün, Ms Sharon Drake, Mr Mark Blaney, Mr Russell Ampofo, Ms Nicola Brown, Mr Jonathan Whale, Ms Rose Murphy, Ms Natalie Dowsett.

Apologies for absence:

Dr Russell Perkins, Dr Abrie Theron, Dr Marie Nixon, Professor Judith Hall,

1. Council Minutes

The minutes of the meeting held on 10 November were circulated:

MOTION Agreed: Council approved the minutes of the 10 November as a true and accurate record with the following changes:

The following change to the motion on page 3, to read:

Motion Approved: Council agreed in principle to the creation of a Wellbeing Task and Finish Group and that approval should be sought at the Board of Trustees in December.

Page 2: **Faculty of Anaesthesia Associates (AAs) Development Project** – third paragraph – the Scope of Practice should read – Scope of Practice Survey.

Page 4: Under **College Tutors – July & August 2021** – The committee was referred to as the Trainees committee and should be changed to Training Committee.

Page 5: **Boards and Reports** – it was noted that Clinical Quality & Resource Board – should be changed to Clinical Quality & Research Board.

2. President's Statement

The statement was circulated and outlined a list of meetings the President and the Vice Presidents had attended since the last Council meeting.

Council members were asked to confirm their attendance at The President's Dinner scheduled for the evening of the 8th February 2022. This is planned as a face to face event, however should circumstances change the event will held as an online event.

The following death was reported:

- Dr Nicholas Matthew Wharton of Bristol

Logsdaill Response

An update on the response indicated current work streams which include:

- A dedicated web page on the prevention of future deaths, which to date has received 1400 views.
- A survey to review the impact of the work, which has received 550 respondents, and indicates 80% of those are aware of the 'no trace wrong place' slogan.
- A launch of Flash cards for team training purposes which have been sent to clinical directors and airway leads to be included as part of their clinical governance training. They will provide feedback by the end of March 2022.
- More in depth team training planned, to include longer scenarios, tea trolley training and the Faculty of Intensive Care Medicine (FICM) reviewing training options within an Intensive Care Unit (ITU) setting.
- Recent presentations including the Winter Symposium, of which video clips will be made available for reference on the web page.
- Nine articles planned for publication from January to February 2022, which will include a patient perspective, other articles will appear in the Difficult Airway Society (DAS), RCoA and the AoA journals.
- An article being published by the College of Operating Department Practitioners (ODPs) and in the National Guardian newsletter.
- Work is planned throughout 2022 to expand the work to wider stakeholders including Emergency Medicine and other specialities.

Faculty of Anaesthesia Associates (AAs) Development Project

The first Founding Board meeting took place on 10th November, chaired by Professor William Harrop-Griffiths. The Board approved the current Terms of Reference and discussed financial matters, a paper relating to which will be discussed at the next Board of Trustees meeting. Current activities include a meeting with the General Medical Council (GMC) in January 2022 to discuss the structure of the examination. Following some contention and discussion on the terminology of the word 'consultant' within their Career Framework document, HEE have agreed to review the wording again. There has been no further discussion on prescribing rights from the Department of Health and Social Care (DHSC).

3. CEO Update

2021 Election Update

Current numbers indicate the consultant vote tracking at 27% of the eligible voting population in comparison to 26% in 2020, the SAS vote 18% against 22% in 2020 and the trainees vote currently at 21%. Final reminders have been sent and after the closing date on 16th December results will be shared by Civica to the Executive Office. The President and CEO will make contact with successful and unsuccessful candidates respectively and outcomes will be shared with both Council and the Board of Trustees before a public announcement is made.

Annual General Meeting (AGM)

A successful meeting was held on 9 December. Seventy of the 180 registrants attended. The two motions proposed and carried were the minutes of the previous meeting held in 2020 and the recommendation for a 5% uplift to membership fees which was approved with 68% in favour and 32% against. The CEO gave thanks to the Events, Communications and Finance Teams and also special thanks to the President and Ms Lucy Devine for their support in running the event. Following a request for a video of the meeting to be made available Council agreed that this could sit on the RCoA member area of the College website, however, those presenting should first be made aware in order to gain consent.

ACTION: JB to gain consent from the presenters and instruct the communications team to include the video on the member area of the College website.

4. Items for Discussion

Mandatory Vaccination for Health-care Staff against Covid 19 and Flu

A copy of the report from the Ethics committee was presented by Professor William Harrop-Griffiths, which outlined their view that there was a strong, near-unanimous, view amongst the medical and non-medical members of the committee that mandatory vaccination was warranted for healthcare staff who would

come into face-to-face contact with patients. Their response followed views made by Council members, who were responding to an approach by The Academy of Medical Royal Colleges (AoMRC) whose own views outlined that they were not in support of making vaccination mandatory. Following consultation with the Ethics committee it was announced by the Government that Covid vaccination would become mandatory for all NHS patient-facing staff from April 1 2022.

Council discussed whether there should be a mechanism of having a rapid, advisory response from the Ethics Committee which would be used in supporting Council and in informing future decisions. Council agreed that this would be a useful approach to bring in expertise and in order to help guide view.

ACTION: WHG to discuss with the Ethics Committee and Dr David Bogod the option of having a mechanism to support queries that may require a rapid response.

Terminology - What Should Senior Clinicians be Called?

In some College publications, most recently the Guidelines for the Provision of Anaesthetic Services (GPAS) the term consultant is being replaced by 'autonomously practising anaesthetist'. The latter may be either a consultant or a senior SAS doctor, now called a Specialist. The implications of such a change were presented to Council for discussion, with a view to considering consistency across further communications using the following options.

- To replace the term consultant with autonomously practising anaesthetist and provide the definition of such an anaesthetist.
- To retain the term consultant with an explanatory note that the term may include any anaesthetist practicing autonomously in the context under consideration.

There was much discussion and the final proposed form of words was agreed by e mail. This was that the term consultant should be retained but should be qualified with the explanatory note "consultant or other autonomously practising anaesthetist". It was noted that the term would need to be used consistently throughout all documentation where appropriate and this would include Anaesthesia Clinical Services Accreditation (ACSA) and GPAS documentation.

Examinations Update

Dr Forrest provided an update which noted that:

- Dr Forrest, Mr Russell Ampofo and the Chairs of the Primary and Final examination will meet soon to finalise comments, feedback, and responses from the recent listening exercises, a document will be released following this.
- Open and informal communications are taking place with other companies who could provide examination management and delivery systems, with remote proctoring. Ongoing conversations and demonstrations continue with an official tender process taking place in early January 2022. A meeting with TestReach will also take place to inform them of the current process.
- The recent Primary and Final oral examinations took place with no issue, with pass marks in keeping with historic precedent. The Primary MCQ examination ran recently with TestReach, again with no delivery issues and with good reliability.
- The Education Training and Examinations (ETE) Board have recently started discussions about returning to face to face examinations, discussions will focus on how this will be communicated with stakeholders. A final decision will need to be made by the end of February 2022.

ACTION: RA agreed to make contact with the network of Educational Directors to see how and what other Colleges are doing around returning to face to face examinations.

- A proposal was recently published for an independent review of the FRCA and Faculty examinations, following the deadline one response was received. Both the Faculties and Chairs will be notified that Dr John McLachlan from University of Lancashire will undertake the review, which will be in addition to the FRCA review the report of which will be released soon.

Training and Recruitment

Dr Carey provided an update noting that:

- An ongoing investigation is taking place into the problems around ST3 recruitment miscommunications. Professor Harrop-Griffiths is representing Council along with Alastair Seaton from the Anaesthetists in Training Committee. The investigation is likely to conclude shortly.
- Following recent requests it was noted that funding for additional training posts has not yet been approved. Discussions continue with Health Education England (HEE) to highlight the need for extra posts to support the anaesthetic workforce.
- There was agreement that any additional funding that was secured could potentially be used in the short term for educational support for those in ST3 top up posts pending additional recruitment in February 2023. Decision would need to be made on how to run the future recruitment process if

additional posts are in place. It is noted that there will be sufficient time to run a good campaign for posts commencing in 2023.

- The annual joint winter pressures statement, from the RCoA and the Association will be released soon and will cover guidance on how to respond to winter pressures and re-deployment. The emphasis is on maintaining continuity in training and enabling those in training to progress.
- Guidance from HEE and the four nation statutory education bodies on vaccinations for doctors in training will be released soon. It will highlight conversations and advice needed for trainees who have not yet had the vaccination.
- Guidance was recently released relating to education development time to promote time spent on generic professional capabilities, quality improvement, research and management.
- A document will shortly be released giving guidance around flexibility in training which will enable schools to recognise a period of up to 12 months towards the CCT programme which doctors may have completed outside a formally recognised training programme. This aligns with the work the AoMRC have also conducted around flexibility in training and will conform to the new GMC rules.

Council members were keen to emphasise that the College recognises the training and experience gained in trust grade posts should be able to count towards CCT. Dr Carey noted the guidance will be published in order to provide understanding of the rules.

RCoA Presentation of Diplomates Ceremony 2022 - Planning and options paper

In 2021 a successful diplomate's ceremony was held with two ceremonies in one day and the proposal is to have the same format this year on Friday 9 September 2022. At present there are 250 diplomates who had requested deferral to the 2022 ceremony, therefore to run only one ceremony in 2022 risks not being able to accommodate the extra numbers. As in 2021 it is likely there will be some restrictions in place. Further changes will include introducing a £10 guest ticket in order offset the cost of delivery of diplomates day and to contribute towards a gift on the day. Some Council members suggested inviting examiners, possibly those at the end of their tenure to be part of the ceremony, there was a further request to have the College book for signing and to encourage applause for diplomates throughout the ceremony.

MOTION AGREED: Council agreed the running of two ceremonies for the presentation of Diplomates in 2022.

5. Report from the Association

Dr Mike Nathanson provided a report which highlighted that:

- As of Friday 10 December staff at 21 Portland will now work from home.
- That a meeting should take place between the President and Dr Varveris to discuss some of the concerns about Anaesthetic Assistants in Scotland.

Financial Model to support the Intercollegiate Board for Training in Pre Hospital Emergency Medicine (IBTPHEM)

A paper was presented to Council by Dr Helgi Johannsson to outline three options for RCoA Council to consider in relation to ongoing financial support to the IBTPHEM. Pre-Hospital Emergency Medicine (PHEM) is a sub-specialty of Anaesthetics and the training board is responsible for training and assessment throughout the UK on behalf of its parent colleges. Along with other Colleges a contribution of £10k per annum has been paid to support running costs, however this has not been requested since 2018, due to sufficient reserves, but IBTPHEM are now seeking re-establishment of funds going forward. A recent meeting with PHEM highlighted that only four trainees from RCoA exist within the programme at a cost of £2500 each and therefore Council have been approached to decide on the funding action going forward, which includes the following options:

- Continuing to pay the organisational subscription in full.
- Paying in full with the intention to work with the PHEM Board to move to an individual subscription model.
- Discontinuing payment and removing the College as a parent organisation from the PHEM Board.

MOTION AGREED: Council agreed to support the option of payment at present, with a view to tapering payment in the future, also to encourage PHEM to look at a suitable future model to support themselves in the future.

6. Boards and Reports

Clinical Quality and Research Board

The Chair's summary and minutes of a meeting held on 9 November 2021 were circulated, Dr Claire Shannon provided an update noting that:

- The Board approved the 'Prep Stop Block' proposal for a Standardised Operational Procedure (SOP) to conduct a generic block. This has also been reviewed and approved by the original working party, the Safe Anaesthesia Liaison Group (SALG), NHS Improvement and the Association of Anaesthetists (AoA), the Association for Perioperative Practice (AfPP), the Royal College of Surgeons (RCS) and Perioperative Care Collaborative.
- Top level achievements include the report from the National Emergency Laparotomy Audit (NELA), which was published on 11 November and the release of the Anaesthesia Clinical Services Accreditation (ACSA) annual review 2020-21, which covered responses of the scheme to the pandemic.
- Thanks were given to Dr Russell Perkins, who has now demitted as Chair of the Board.

Centre for Perioperative Care (CPOC) Board

A summary of Board activity since the last meeting was presented by Dr Dave Selwyn noting that:

- The AfPP have confirmed that they wish to abide by the regulations and become a CPOC Board member.
- Discussions are taking place with Chief Executive Officers and Presidents of various Royal Colleges to discuss future funding arrangements for CPOC. It is likely that both The Royal College of Physicians (RCP) and The Royal College of Surgeons (RCS) will jointly fund a deputy post. In order to develop additional funding there is also interest in joint fellow posts.
- Conversations will take place with other Colleges on joint funding initiatives with industry.
- CPOC have been involved in the Mind Plan Care and Elective Recovery Programmes being run by NHS England (NHSE) and NHS Improvement (NHSI). An elective recovery document is still to be released, which hopefully will include a mandate for all Integrated Care Systems (ICS) in England to have some form of perioperative care pathway in order to support recovery.
- Work continues with the Care Quality Commission (CQC) in defining perioperative care standards and what they will look in terms of regulation and assessment of the pathways going forward.

Communications and External Affairs Board

The Chair's summary and minutes of a meeting held on 23 September 2021 were circulated, Dr Helgi Johannsson provided an update noting that:

- Anaesthesia Fit for the Future continues apace and will support the campaign for increased training capacity.
- The bulletin will move online in 2022 and it is anticipated that this change should reduce expenditure.

Dr Johannsson and the President gave thanks to Nicola Brown and the team for their support and hard work during the year.

7. Devolved Nations

Scottish Board

Dr Varveris provided an update of the current work which included:

- Thanks being given to the communications team for the support in publishing the Scottish Newsletter which has been well received. It is envisaged that the newsletter will be promoted at regular intervals going forward.
- A College Tutors meeting is organised for January 2022
- There are ongoing issues regarding the titles Anaesthetic Assistants, and Anaesthesia Associates, and discussions are taking place with the Department of Social Care and the Scottish Government.
- The Scottish Multidisciplinary Anaesthetic Assistants Development Group (SMAAD) along with the Association have continued to work and develop competencies for Anaesthetic Assistants, however there are current ongoing concerns about the governance of SMAAD and about its long-term future and there was agreement to organise a meeting with the Association and the College to discuss and agree next steps. **ACTION:** JW to organise a meeting with the Chair of the Scottish Standing Committee, Dr Mike Nathanson, Dr Daphne Varveris, Sharon Drake and the President.
- There has been negative press in Scotland for certain professional groups, most notably intensivists, which has had a negative impact on wellbeing, public and patient behaviour. It is therefore recommended that discussion on managing this form part of the future wellbeing agenda.
- At present in Scotland vaccination for healthcare workers is not mandatory.

Welsh Advisory Board (WAB)

Dr Simon Ford provided an update noting:

- Thanks to the College for their help in supporting the challenges with recruitment for ST3 and in supporting communication with the Anaesthetic National Recruitment Office (ANRO).
- Funding by the Welsh Government to Health Education and Improvement Wales (HEIW) for intensive care funding to support future training posts.
- Continuing work and discussions with politicians to highlight the importance with key stakeholders on the challenges with out of hours accommodation and in providing wellbeing facilities, particularly in new build hospitals.
- Work continuing on re-establishing the newsletter, to focus on highlighting the work of the WAB.

Northern Irish Board (NI)

Dr William Donaldson provided an update of the current work which included:

- Collaboration with Dr Helgi Johannsson in producing future newsletters to highlight the work of the NI Board.
- Recent thanks being given to the President and Dr Alison Pittard in providing advice about priority Covid patients within the local Intensive Care Unit (ICU) departments.
- A meeting scheduled with the Chief Medical Officer (CMO) on 14 December during which the likely pressures during the next three months will be the focus of conversation.

8. Other business

New Associate Fellows, Members and Associate Members

A list of new members to Council for November was circulated.

CCTs CESR(CP)s for Council

A list of recommendations of members made to the GMC for approval was circulated. This noted that CCTs/CESR (CP)s have been awarded to those who have satisfactorily completed the full period of higher specialist training in Anaesthesia, or Anaesthesia with Intensive Care Medicine or Pre-Hospital Emergency Medicine throughout November 2021.

Current College Consultations

The list of College consultations was reviewed.

Regional Advisers Anaesthesia

The following Changes were noted:

Yorkshire and the Humber South

Dr Martin Feast to succeed Dr Sumayer Sanghera as Regional Anaesthetic Adviser for South Yorkshire.

Deputy Regional Adviser

Severn

Dr Tom Simpson to succeed Dr Ted Rees as Deputy Regional Adviser for Severn.

West of Scotland

Dr Susan Smith to succeed Dr Drew Smith as Deputy Regional Adviser for West of Scotland.

9. Any Other Business

FICM OSCE Examination

Dr Mark Forrest requested an update for Council on the recent Faculty of Intensive Care Medicine (FICM) OSCE examination.

It was noted that the Chair of Examiners and senior examiners have reviewed statistical data relating to the recent exam which is comparable to previous exams in terms of the questions. To date no clerical or administrative issues relating to the conduct of the exam have been found. The FICM Board have continued discussions and recently hosted listening events and will continue to review the results. Conversations have also commenced with assessment experts and the General Medical Council (GMC) to form further discussions with the FICM Board.

END OF MEETING

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