



Morale and welfare survey

'[Two-thirds of young hospital doctors under serious stress](#)' [The Observer] and '[NHS 'wake-up call': Six out of seven young doctors at risk of burning out](#)' [Independent] were just two of the hard-hitting headlines in response to the results of our survey of anaesthetists in training. In this newsletter I want to share with you some of the stark findings from the survey and let you know what your College is doing to support anaesthetists at all stages of their career.

My thanks go to all those who completed the College's morale and welfare survey which was open for six weeks between December 2016 and January 2017. The survey explored a number of themes, including reflections on feeling valued by employers and thoughts regarding morale and working conditions. The response rate of 58% – over 2,300 RCoA fellows and members – is a demonstration of the strength of your feelings on these issues.

Your comments and experiences from across the UK bring into sharp focus the enormous challenges facing the NHS. They provide powerful illustrations of the stark reality of training as an anaesthetist in a chronically under-resourced healthcare system. Here is a summary of the findings, including some verbatim comments:

Patient safety

The safety of our patients is of paramount importance to all anaesthetists. Directly or indirectly, all of the issues explored in our survey have some impact on our ability to care for patients. We know that [one-third of anaesthetists](#) in UK hospitals struggle to deliver safe and effective patient care due to a wide-ranging lack of resources. In this survey, anaesthetists in training confirmed that understaffing in the health service is widespread, with the average trainee across the UK filling a rota gap six times per month on average.

Another question in our survey asked anaesthetists in training to rank the factors that impact on patient safety in the hospital where they are currently based. Our feedback found that the lack of available hospital beds, low staff morale and rota gaps within other specialities were the most prominent issues: '*The current expectation is do more with less, there are constant bed pressures and this causes delays for patients and negatively impacts on patient safety.*'

As I mentioned in [last month's](#) update, the unprecedented pressure on the health service is leading to some anaesthetists in training being asked to work outside their usual scope of practice. We take seriously our responsibility to ensure that you are able to deliver the highest level of patient care in a safe and modern work environment and will continue to raise these issues at the highest levels of government and with healthcare leaders. I am pleased that our [statement on services pressure](#) for those in training has now been adapted by [Health Education England](#) (HEE) for all specialities, which demonstrates one way in which your College is leading the debate on supporting trainees.

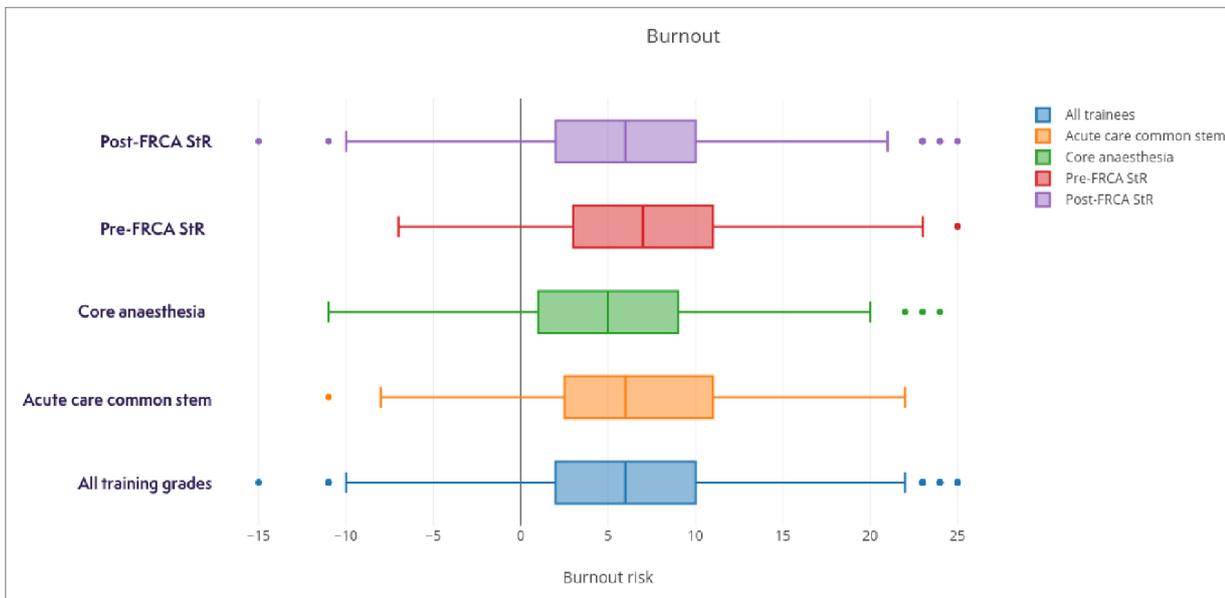
Physical and mental health

Overall, 64% of anaesthetists in training felt their job had affected their physical health, with 61% feeling a negative effect on their mental health. With anaesthetists on the front line of healthcare, these statistics underline the extreme pressures facing the NHS. Doctors in anaesthetic training are routinely going above and beyond, and face implications for their health as well as for their working and family lives.

'I have reached a point where my physical and mental health have been seriously adversely affected and I wonder whether I am suffering from burnout.'

Our survey also shows that three-quarters of trainees reported working a shift without adequate hydration, while 62% of trainee colleagues had worked through a shift in the last month without a meal. This is clearly unacceptable.

The statistics make stark reading and illustrate just how hard our trainees are working and the pressures they face across the NHS. The negative effects on both physical and mental well-being appear to peak after Core Training, prior to acquisition of the FRCA. More than a quarter of



Source: RCoA morale and welfare survey, measuring burnout risk using the Oldenburg Burnout Inventory

trainees said their physical and mental health was often affected by their work at this specific point in their career. With anaesthetists central to the efficient running of all hospital services it is crucial that employers are proactive in addressing the health and wellbeing of their staff. These figures are of great concern to me as President and the College will continue to work with members and employers on practical solutions to address these issues.

Morale and burnout

Low morale has been a recurring theme among doctors from all specialties in recent years. Asked to rank the top ten factors that negatively contribute to morale, anaesthetists in training reported that difficulties with maintaining a work/life balance was their foremost concern, followed by the burden of assessment and career uncertainty. Other factors included the frequency of training rotations, terms and conditions of service, and rota gaps.

'Morale feels desperately low at times and the only thing that keeps people going is the support and empathy between colleagues who are all experiencing similar levels of stress.'

The survey also explored disengagement, burnout and exhaustion in the trainee workforce:

'We are exhausted, frustrated and burnt out. I see lapses in safety daily and, even if somebody cared, there is no money or staff to do anything about it.'

The NHS is heading for a [tipping point](#), with implications for the welfare of both patients and clinicians if these issues are not addressed. The College has always been supportive of its trainees. Our [joint advice](#) with the Faculty of Intensive Care Medicine and the Association of Anaesthetists of Great Britain and Ireland (AAGBI) publically supported the welfare of trainees and doctors, and this advice still stands. The College website also offers a range of [resources](#) that may be of help to doctors at times of stress or difficulty.

Next steps

Anaesthesia is a rewarding yet challenging career that offers the chance to make a profound difference to patients' lives. Primarily exploring themes around morale and welfare at work, our survey revealed that trainees feel valued by their colleagues including consultants, SAS doctors, College Tutors and members of the wider multidisciplinary team.

'I continually thank my lucky stars that I am training in a specialty that has so many supportive consultants and senior trainees who are so keen to teach and support us.'

At our first [Listening Events](#), held in December and January, I discussed several issues explored in this survey in more detail with trainees, with a particular focus on improving training, welfare and morale across the profession. I will soon be confirming the dates and locations for further events across the UK and will report back on our findings via this newsletter in the coming months. I will also keep

fellows and members updated on the College's activities at a political level as we continue to press for funding for a sustainable NHS, and to work with HEE to address training and workforce issues. The wealth of information in this survey will boost our case as we seek to address the anaesthesia shortfall identified in the [2015 RCoA Medical Workforce Census](#).

For some time now doctors across the country have been raising concerns about the reality of working in an overstretched health service. With the growing pressures on our health system, it is clear that an honest conversation is required if we are to secure a sustainable future for the NHS. Your feedback provides the College with a wealth of information, helping us to understand your pressures and to better represent you moving forward.



Join us at our biggest Anniversary Meeting yet

There is now less than a month to go until our [Anniversary Meeting](#) takes place on Wednesday 8 and Thursday 9 March. This event is our annual celebration of the creation of the Faculty of Anaesthetists in 1948 and the award of the Royal Charter to the RCoA in March 1992. Featuring international speakers, awards and networking opportunities, March's meeting is unmissable.

I am delighted that the Patron of the RCoA, Her Royal Highness, The Princess Royal, will be joining us as guest of honour. The Princess will open the meeting and present the inaugural RCoA/National Institute for Health Research Clinical Research Network (NIHR-CRN) awards. These two awards (trainee and consultant) aim to recognise the outstanding contributions of NHS clinicians to clinical research, particularly in relation to NIHR-CRN Portfolio research studies.

The 2017 Anniversary Meeting is particularly significant given the celebration of the 25th Anniversary of receiving our Royal Charter. Delegates at the two-day meeting will hear from an array of speakers including Professors Lord Darzi, Kate Leslie, Simon Howell, Carol Peden and Jennie Hunter. A panel discussion on end of life care will close day one.

Although the meeting will touch on many strands of our specialty, the overall focus for the event centres on the significant developments in anaesthesia over the past 25 years. I look forward to seeing many of you there; you can find further information and register [here](#).



25th Anniversary

The College's [25th Anniversary](#) celebrations continue, with a range of events and activities taking place this month. There are various competitions throughout 2017 and we have received nominations from all schools of anaesthesia for our Trainer Award. This is a new award to celebrate exemplary training in anaesthesia, critical care and pain medicine. Many of the award citations have been heartfelt and truly inspiring, and they offer a real testament to the dedication and selfless contribution of local trainers. Congratulations to all of the trainers who have received awards – a full list will be published in the March edition of the [Bulletin](#).

On another Anniversary theme, Council member [Dr William Harrop-Griffiths](#) recently spoke at the Museum of London, in a talk tracing the history of local anaesthesia and its first uses. Looking forward, we are also supporting various regional events including one in [Warrington](#) on 16 March, hosted by the Manchester and Liverpool Medical Societies. This meeting will take place on the day that the College was awarded its Royal Charter in 1992 and so will be our official birthday! I look forward to meeting many of you there next month.

Our full 25th Anniversary programme of events can be found [here](#) and includes activities across the country in which members, patients and the public can get involved. If you would like to contribute to the celebrations, please [let me know](#).



A special screening of 'The Checklist Effect'

With our work crossing many boundaries, anaesthetists make a profound difference to the lives of patients before, during and after surgery. The delivery of safe surgery and anaesthesia is not always straightforward and in some parts of the world ensuring safe surgical and anaesthetic care can be a huge challenge.

In collaboration [with the AAGBI](#), we are holding a special screening of *The Checklist Effect*, a feature-length documentary looking at surgical safety on a global scale, at the RCoA on Tuesday 25 April. This extraordinary film takes the camera into operating theatres across the world. It explores how, as we live longer but with increasing co-morbidity, the need for surgery has increased, and how the introduction of the WHO Surgical Safety [Checklist](#) has made a profound difference to perioperative practice across the globe.

As we continue to raise our international profile through our [Global Partnerships Strategy](#), this film makes for compelling viewing and is a timely reminder of the importance of safe surgery and anaesthesia. In place of admission tickets, a donation to the [Lifebox Squared](#) fundraising campaign is suggested. More information on the viewing and how to attend can be found [here](#) and, depending on its success, we plan to show the film at other College events outside of London.



Regional Advisers Anaesthesia

Over the past 12 months the College has undertaken a review of the role of our Regional Advisers, working closely with current post holders who have provided valuable input into shaping the model of this important College position. At the meeting of Council in December 2016, the proposals for the role were approved.

The title of the post has been updated to reflect the wide-ranging nature of the position. 'Regional Advisers Anaesthesia' (RAA) are the College's senior local representatives who work with Postgraduate Deans, employers and fellow anaesthetists on all matters relating to training, professional standards and continuing professional development. They are integral to the functioning of the specialty and maintain regular liaison with, and report to, College officers, Council and relevant committees. One RAA will represent the geographical footprint of each School of Anaesthesia and the locality name of the School will be appended to the term RAA, for example 'RAA Wessex' or 'RAA Northern'.

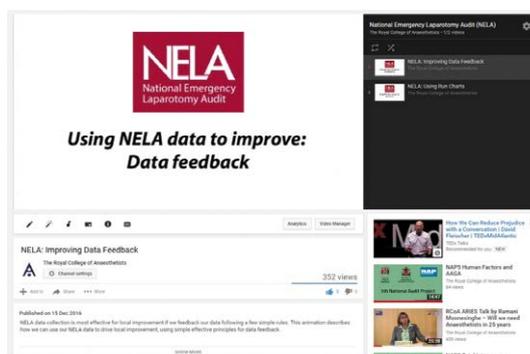
This has been a significant undertaking with the aim of better aligning the role to the respective responsibilities of stakeholders such as HEE. The changes also align the role to our five-year [strategic plan](#) and provide greater support for the role and its holders. The College is now working on implementing these changes through an induction programme, providing support to attend an RAA meeting and establishing clear and regular lines of reporting into the College.



Developing Perioperative Medicine across the UK

The College now has over 165 local Perioperative Medicine (POM) Leads based in hospitals across the UK. On Tuesday 31 January, the first annual event for POM Leads was held at the College, with a day of networking, best practice sharing and discussion around key areas in perioperative medicine. To view the [presentation slides](#) from the day, find out who your Local Lead is, or express an interest in becoming a Lead yourself, click [here](#). The RCoA will support similar events around the UK throughout 2017 – if you would like to host an event in your area please email perioperativemedicine@rcoa.ac.uk.

In other POM news, a Perioperative Medicine Advisory Board is being convened which will consist of representatives from a range of stakeholder healthcare bodies. The aim of the Board will be to facilitate multidisciplinary working – an essential component of the POM programme. Visit the POM microsite to see a [list of the bodies involved](#) in contributing to the Advisory Board.



Research vacancies and funding opportunities

National Emergency Laparotomy Audit

Last summer the College published the [Second Patient Report](#) of the National Emergency Laparotomy Audit (NELA), providing an analysis of the care received by more than 20,000 emergency bowel surgery patients treated in hospitals in England and Wales between December 2014 and November 2015. Now into year four of data collection, the work undertaken by the NELA team continues to increase in scope. Applications are being invited by NELA for a [Clinical Lead](#) as well as a [Quality Improvement Lead](#). Applications for both roles close at 9.00 am on Friday 17 February, with interviews on 8 and 9 March 2017. More information on the roles can be found [here](#).

NELA has also released a short series of [animations](#) on how to use NELA data in your hospital to drive quality improvement. The first two videos focus on how to [improve data feedback](#) and how to use [run charts](#). Please share any feedback on these important resources by contacting info@nela.org.uk.

Funding opportunities with the National Institute for Academic Anaesthesia

The RCoA is one of four founding partners of the [National Institute of Academic Anaesthesia](#) (NIAA), a body that seeks to improve patient care by promoting the translation of research findings into clinical practice. The NIAA currently has opportunities to secure funding for researchers at both undergraduate and postgraduate levels.

While funding is available to researchers across the UK, applications are particularly encouraged from Wales and Ireland (both the Republic of Ireland and Northern Ireland), as these areas are currently under-represented. Information on current NIAA funding opportunities can be found [here](#) they include the [John Snow Anaesthesia Intercalated Awards](#) and the [NIAA Research Award](#), for which shortlisted applicants are invited to present at the [NIAA Annual Scientific Meeting](#) on 12 May.

The first round of the 2017 [NIAA Research Grants](#) are also open, with applications invited until noon on Friday 21 April 2017.

The NIAA is seeking applications from senior academics for the post of [Research Council Chair](#), which will become vacant in June 2017. The deadline to submit applications for this post is 5.00 pm on Friday 24 March. Applications are also invited for a [Trainee Representative](#), by the closing date of 5.00 pm on Monday 20 March.



An opportunity to make a difference to Anaesthesia and Perioperative Medicine at a national level

Following the success of [Getting It Right First Time's](#) (GIRFT) orthopaedic pilot, the GIRFT programme is currently expanding, and forms a key part of the roll-out of the recommendations in Lord Carter's [report](#) in operational performance and productivity in acute hospitals.

The RCoA, in partnership with GIRFT, is [inviting applications](#) for the role of Clinical Lead for Anaesthesia and Perioperative Medicine. The role will oversee the creation of a national review of perioperative data across England using the proven GIRFT methodology. Providers will be benchmarked against one another and best practice, with each trust receiving a comprehensive review of their data and receiving support to tackle the challenges and findings behind the variation that the review highlights. The role will involve close collaborative working with GIRFT Clinical Leads, National Clinical Directors and Specialised Commissioning Clinical Reference Group Chairs within NHS England where they are in place, and also with specialty leads within the Medical Directorate of NHS Improvement.

The programme is looking for a skilled and effective clinical leader, recognised as an expert by their clinical colleagues, and their application should be endorsed by the RCoA. The role is an exciting opportunity to make a contribution to the shaping of the service nationally, engaging with stakeholders across the specialty and the country. The role is on a part-time secondment basis over an initial one-year period and we anticipate an average commitment of 88 days per year. Job share applications are encouraged.

The closing date for applications is Monday 10 April. Further information and details of how to apply can be found [here](#).



Clinical Quality update

The Clinical Quality team at the RCoA carries out all aspects of work relating to clinical standards, quality and safety in anaesthesia. The continued success of the College's [Anaesthesia Clinical Services Accreditation](#) (ACSA) scheme was a particular highlight of 2016, with 13 UK anaesthetic departments achieving ACSA accreditation over the course of the year and 86 departments currently engaged in the process. I look forward to updating fellows and members with the 2017 ACSA standards and to seeing ACSA continue to flourish this year.

Invited reviews

The College's [Invited Review](#) service is offered to hospitals who feel they would benefit from a professional and independent opinion on individual, team or departmental practice. An internal evaluation of the Invited review methodology was recently undertaken in a bid to ensure it continues to deliver a high-quality service. For more information on the revised process, contact invitedreviews@rcoa.ac.uk. The College's [Invited Reviews Training Day](#) on Friday 10 March provides an overview of this new process and will provide reviewers with an update on their role and responsibilities. It will also

include discussions and workshops on the legal implications of a review, how to recognise and deal with potential areas of bias and note taking/report writing techniques.

To express an interest in becoming a reviewer or to find out more information about the role, please email invitedreviews@rcoa.ac.uk.

Clinical Quality Adviser

Applications for the role of Clinical Quality Adviser close in just over a fortnight, at 5.00 pm on Tuesday 28 February. An important role that involves working across directorates at the College, the post includes responding to clinical enquiries and the provision of up-to-date advice on professional matters to College Council, committees and individual fellows and members. Other duties include providing clinical advice to the College's Communications and External Affairs Directorate on public and media enquiries. More information on the post can be found [here](#).



UMBRELLA request regarding FtP experiences

Fellows and members are invited to participate in the important stage of a research project on revalidation conducted by [UMBRELLA](#), an independent UK-wide collaboration of researchers led by Plymouth University Peninsula Schools of Medicine and Dentistry.

UMBRELLA is investigating whether revalidation mechanisms, through appraisal, can facilitate the identification and remedy of potential concerns before they become Fitness to Practice (FtP) referrals. This is a declared regulatory aim of revalidation, and fellows and members who have experienced the GMC's FtP procedures are invited to share whether or not their investigation was substantiated.

This is an important but often sensitive and difficult area for our profession. The UMBRELLA team assure respondents that their information and identity will be kept entirely anonymous and that no individually identifiable data will be shared with the GMC. Please email contact@umbrella-revalidation.org.uk to participate.



FRCA Examinations update

I would like to offer my congratulations to members who have passed exams in the last few months. The academic year continues for anaesthetists in training, with 321 candidates sitting last month's Primary OSCE/SOE and achieving a pass rate of 51%. The trend of encouraging recent results continues with a pass rate of 68% at the Final FRCA SOE in December, a little above the historical mean. These results epitomise the commitment and dedication of anaesthetists in training, despite what has been a very unsettling year.

In a few weeks the Primary MCQ will take place on 28 February, while candidates for the Final Written exam will sit on 7 March. A total of 410 and 468 candidates are booked onto these exams respectively. Good luck to all of you sitting exams in the near future.

There are a number of updates to the College's examinations structure underway, including changing the Final SAQ from an essay style format to a new genre of assessment – Controlled Response Questions. Work is also taking place on some changes to the Final FRCA Structured Oral Examination. The timetable will be amended so that candidates interact with six different examiners. More information and timelines for the introduction of these changes will be released in due course. For more on the FRCA Examinations, including information on the syllabus, regulations and candidate resources, see our [online exams page](#).



Annual General Meeting 2017

The agenda for the College AGM, which will take place during our annual Anniversary Meeting at 10.50am on Thursday 9 March at The Mermaid Theatre, London, has been finalised and can be [found here](#).

The Annual Review 2015–2016, which summarises what was a year of considerable change for the College and the NHS, will soon be made available. The supporting [Annual Report of Council and Financial Statements](#) are available online. Hard copies of the Review will be sent to all anaesthetic departments in the UK and copies of the Report, Review and AGM agenda will be available at the meeting in March.

If you have any comments on any of the issues raised in this Newsletter or you would like to express your views on any other matters, I would like to hear from you. Please contact me via presidentnews@rcoa.ac.uk.

Best wishes, Liam