

**Minutes of the RCoA Council meeting**  
**Wednesday 10 September 2025**  
**9.30 – 13.00**  
**Online**

**Members present:**

Elected Council Members:

Dr Claire Shannon, President

Dr Chris Carey, Vice President

Dr Sarah Thornton, Vice President

Dr Sarah Ramsay, Treasurer & Consultant representative – Online

Dr Rosalind Bacon, Consultant representative - Online

Dr Elisa Bertoja, Consultant representative

Dr Jonathan Chambers, Consultant representative

Dr Satya Francis, Consultant representative

Professor Mike Grocott, Consultant representative - Online

Dr Sri Gummaraju, Consultant representative

Dr Sophie Jackman, Anaesthetist in Training representative

Dr Helgi Johannsson, Consultant representative

Dr Ashwini Keshkamat, SAS Doctor representative-Online

Dr Kirsty MacLennan, Consultant representative

Dr Kirstin May, SAS Doctor representative

Dr Ramai Santhirapala, Consultant representative

Dr Emily Simpson, Consultant representative

Professor Andrew Smith, Consultant representative

Dr Paul Southall, Consultant representative

Dr Chris Taylor, Consultant representative

Professor Jonathan Thompson, Consultant representative

Dr Christopher Till, Consultant representative - Online

Dr Matthew Tuck, Anaesthetist in Training representative

Co-opted Council Members:

Dr Daniele Bryden, Dean of FICM

Dr Simon Ford, Chair of the Welsh Board of the RCoA

Dr Simon Howell, British Journal of Anaesthesia

Dr Tim Meek, President Association of Anaesthetists – Online

Dr Felicity Plaat, Clinical Quality Adviser

Dr David Selwyn, representing CPOC

Dr Roger Sharpe, representing FRCA Examinations

Dr Sue Walwyn, representing Regional Advisers

Dr Daphne Varveris, Chair of RCoA Board for Scotland

Jenny Westaway, representing PatientsVoices@RCoA

**In attendance:**

Corresponding members, invited members, observers:

Dr Ganesan Baranidharan, incoming Dean of the FPM

Frances Bright, Associate Director of Marketing and Communications

Professor Denny Levett, incoming CPOC Director

Karen Sika (agenda item 6.1 Anaesthesia Associates) - Online

Carly Melbourne, Associate Director of Clinical Quality and Research

Staff Members:

Jonathan Brүүн, Chief Executive Officer  
Sharon Drake, Deputy CEO and Director of Clinical Quality and Research  
Mark Blaney, Director of Finance & Resources  
Russell Ampofo, Director of Education, Training and Examinations  
Jud Tidnam, Director of People and Operations

Graham Blair, Director of Membership, Media and Development (MMD)  
David Hunt, Director of Digital, Data and Technology  
Rose Murphy, Head of Governance - Online  
Natalie Walker, Governance Manager - Online  
Shaun Lee, Governance Manager

## **Council Ceremonial**

A formal ceremonial took place for Council to admit Dr Claire Shannon as President and Dr Chris Carey and Dr Sarah Thornton as Vice Presidents for the year 2025 – 2026. Special thanks were given to Dr Toni Brunning in her absence as she demitted from the role of Vice President.

### **1.1 Welcome, Apologies and Declaration of Interests**

Dr Claire Shannon, President opened the meeting and welcomed all Council members to the meeting.

The following attendees were welcomed to the meeting:

- Frances Bright, Associate Director of Marketing and Communications as an observer
- Professor Denny Levett, incoming CPOC Director
- Carly Melbourne, Associate Director of Clinical Quality and Research
- Dr Sue Walwyn, incoming Regional Advisers representative

Council noted the apologies for absence received from:

- Dr Catherine Bernard, Anaesthetist in Training representative
- Dr Toni Brunning, Consultant representative
- Dr Rosie Hogg, Vice Chair RCoA Northern Ireland Board
- Dr Sandeep Lakhani, Chair of CLAN
- Colonel Giles Nordmann, representing Defence
- Dr Rashmi Rebello, Anaesthetist in Training representative

### **2.1 Council minutes 2 July 2025**

Council approved the minutes from the Council meeting held on 2 July 2025 as an accurate record.

Council ratified the following statement for the record, to be included in the minutes regarding their involvement in the sale of Churchill House, the proposed sale of 34 Red Lion Square, and the purchase of Jubilee House.

RCoA Council, Faculty of Intensive Care Medicine and Faculty of Pain Medicine fully support the process undertaken regarding the sale of Churchill House and 34 Red Lion Square, and the purchase of Jubilee House. They have felt fully appraised, informed and involved throughout the decision-making process led by the Board of Trustees.

### **2.2 Matters arising and actions**

Council noted that most of the actions were complete or included on the agenda at the meeting.

### **2.3 Decisions taken between meetings**

Council noted the following decisions made via email following the July meeting:

Northern Ireland Devolved Nations Board Vice Chair: on 11<sup>th</sup> August 2025, Council had approved the appointment of Dr Rosie Hogg as Vice Chair of the Northern Ireland Devolved Nations Board from the same date.

Education, Training and Examinations Board Chair: on 27 August 2025, Council had approved the appointment of Dr Satya Francis as Chair of the Education Training and Examinations Board from 10 September 2025.

## **2.4 Trustee Meeting**

Council noted that the Board of Trustees had not formally met since the July Council meeting and no update was therefore provided.

## **3.1 Stakeholder engagement overview**

The President highlighted the paper circulated in the pack, which provided an overview of major stakeholder engagement since the July meeting.

## **3.2 Staff 20-year service**

Council congratulated the following staff members on recently completing twenty years of service at the College.

James Goodwin, Associate Director of Faculties: Council noted his significant contributions, particularly in the National Audit Programmes and his previous role as Head of Research. The Dean of FICM expressed gratitude for his advice and support and emphasised the importance of his stability and wisdom, which had been invaluable to the faculty. The incoming Dean of FPM expressed thanks to James for his service including the GMC recognition of pain medicine as a specialty.

Claudia Moran, Head of Training: Council noted Claudia's impact at the College through her leadership in training and assessment in anaesthetics. She began by supporting international medical graduates and developing the MTI process, which proved hugely important for the College. Progressing to the role of Head of Training, she led significant curriculum reforms in 2010 and 2021, both of which became key pillars in upholding the College's high training standards. Claudia guided the organisation through major challenges, including Shape of Training and the COVID pandemic, drawing on her encyclopaedic knowledge of medical education to inform policy and strategy. She strengthened the college tutor network and restructured her team to meet future demands, all while maintaining a professional and personable approach that improved member engagement. Her dedication and expertise were widely respected and deeply valued.

## **3.3 Appointments**

Council noted that Colonel Giles Nordmann had been appointed Honorary Surgeon to The King from 15 July 2025. Council congratulated Colonel Giles Nordmann in his absence.

## **3.4 Deceased members**

Council observed a minute's silence for the following deceased members that the College had been informed of since the last Council meeting:

- Dr Mark Thomas
- Professor Tony Adams

## **4.1 CEO Update**

Council received a verbal update from Jonathan Brūn, CEO on matters including:

Update on Executive Team transition arrangements: The CEO provided an operational update in addition to a previous email update to Council which confirmed the transition arrangements in advance of his departure on 12 December. Sharon Drake would take over as interim CEO, with Carly Melbourne, Associate Director of Clinical Quality and Research acting up as interim to cover Sharon's role.

Graham Blair, Director of Membership, Media and Development, would leave the College in October and Frances Bright, Associate Director of Marketing and Communications would act up to backfill his role and to allow a new CEO to recruit an MMD Director when they are appointed.

The Associate Director of Clinical Quality and Research and Associate Director of Marketing and Communications roles in turn would also need to be backfilled. These changes were set to begin around 1 October. To enable day-to-day responsibilities to ensure a smooth transition. Jonathan Brüün would focus more on the Estates project before leaving, while Sharon Drake would gradually take on the day-to-day work of the CEO.

## **4.2 Governance at Strategy Weekend 2025**

Jonathan Brüün presented feedback from the strategy retreat, highlighting the need for improved information sharing and communication, and outlined plans for a 'hot topics' meeting to address gaps between Council and Board of Trustees meetings.

## **4.3 Estates update**

Jonathan Brüün provided an estates update. Matters discussed included:

Architecture Firm Appointment: The College had appointed White Red to lead the design of the project. The intention was to present designs at the Council meeting in November and, sometime after plans are finalised, to start communicating the project details to members.

Project Feedback: Following the acquisition of Jubilee House, member feedback was noted to have been mostly positive. Concerns had been noted about a London-centric focus and the cost of the building. Positive feedback had been received from a few Senior Fellows and members who were initially critical of the project.

Garden proposal: There was a discussion about the idea of a funded garden and maximizing usable spaces for members. The importance of communicating the availability of these spaces was highlighted.

Membership engagement: The need for effective communication with members about the refits was emphasized. A naming competition for the project was suggested, with careful filtering to maintain tenant relations. However, Council agreed to not pursue this option at present. The need for member spaces was highlighted.

Financial considerations: The project aimed to deliver within the envelope of the sale without adding any borrowing to members.

Sustainability and cost management: The project aimed to create a flexible, welcoming, and modern space that feels less like an office and more like a medical royal college while ensuring financial stewardship and sustainability. The long-term goal was to reduce operational costs and enhance the building's sustainability credentials.

## **4.4 Vishing attack – incident summary and next steps**

David Hunt reported on a recent phishing attack on the College. The attack had been reported and acted on quickly resulting in no system compromise or data loss. He outlined ongoing actions regarding education and awareness on this matter to staff and volunteers, and potential future training.

## **4.5 Financial report**

Mark Blaney provided a financial update. The College reported a year-end surplus. The budget set by the Trustees in June 2025 for 2025-26 was balanced with a £2k surplus. The 2025-26 external audit had been completed with no material changes, and the College was awaiting the draft Audit Finding Report for presentation to the September Finance & Resources Board and October Board of Trustees.

Dr Sarah Ramsay, Treasurer, highlighted the significant efforts of the team in managing end-of-year accounts and audits while purchasing the new property. The audit, being external and independent,

addressed concerns raised by Senior Fellows and Members over the summer. The presentation of the College's finances in the annual report would include details of the sale of Churchill House and the purchase of Jubilee House. Effective communication would be taken to explain the impact of these transactions, including at the upcoming AGM. The College faced ongoing costs, including inflation and pay increases, which would likely impact membership subscription rates.

## **5.1 Faculty of Intensive Care Medicine**

Dr Daniele Bryden provided an update from the Faculty of Intensive Care Medicine (FICM).

Election of New Dean: Dr Jack Parry-Jones had been elected as incoming FICM Dean to take over from Daniele Bryden on the 29 October.

Surveys and Feedback regarding the College of Intensive Care Medicine (CICM): Over the summer, surveys had been conducted among various groups, including intensivists in training and CESR applicants on the CICM independence programme. There were plans to survey fellows as well. Key themes from the surveys included the desire for CICM to be recognised as a peer among other colleges and to acknowledge the professional diversity of the speciality. Members had expressed the need for strengthening the Four Nations and sought reassurance about exams, curriculum fees, and benefits. The focus was on co-designing and prioritising the future college to improve the situation for its members. The move to Jubilee House was questioned by some survey respondents, but the FICM board remained fully supportive. The faculty was about to pass the 5,000-member mark. Training quality support was released in May, and an IIT conference was scheduled for November. The consultant intensivist in transition course was being consolidated.

Council passed on its thanks to Dr Daniele Bryden for her contribution during her term as FICM Dean.

## **5.2 Faculty of Pain Medicine**

Dr Ganesan Baranidharan provided an update from the Faculty of Pain Medicine (FPM). The credentialing process had started in a phased manner, beginning with the board and now extending to those working in the College. This was highlighted as positive news for the faculty. A comprehensive pain service directory had been created, which was significant because it included not just fellows but also other specialities and healthcare providers running pain services. The information was obtained through the Freedom of Information Act and was being cross-checked with fellows for accuracy. The directory was expected to be published on the website and would be useful for future work. The annual meeting was scheduled for December. The importance of identifying how primary care interaction was working in relation to the 10-year plan goals was also emphasised.

## **6.1 Anaesthesia Associates Update**

*Members were reminded to keep discussions from this agenda item confidential until the College had published an updated position regarding the Leng Review.*

Council received an update on Anaesthesia Associates including the following:

- Leng Review
- Physician Assistant in Anaesthesia Scope of Practice 2025
- AA Curriculum

Council discussed the extensive work undertaken in relation to Anaesthesia Associates (AAs), particularly in response to the recently published Leng Review. This review had been commissioned to clarify the increasingly polarised debate surrounding Medical Associate Professions (MAPs), with the College contributing significantly to the discourse, especially around patient safety.

In preparation for the review, the College had developed and published an interim scope of practice, reviewed the AA curriculum, conducted extensive membership engagement, and issued guidance to support both AAs and their training infrastructure.

The Leng Review had adopted a research-based methodology, gathering data and engaging with patient groups. A key theme in the report was the need for clear differentiation in role, name, and appearance among MAPs. Following its publication UMAPS commenced legal action against NHSE

the SoS for Health and Professor Leng to block implementation of the recommendations from the report. The College (and other colleges) had received letters before action requesting that they take no action to implement the recommendations. All parties are taking legal advice as to how to proceed, but the college's advice suggests this should not prevent council and BoT discussion as to how we wish to proceed.

Several specific things were discussed by council:

Interim Scope of Practice: The issue of the interim scope of practice was raised, with the recommendation that it remain unchanged until the legal position and potential name change were clarified. Council agreed that publishing a document subject to imminent revision would be premature.

AA Curriculum: An update was provided on the curriculum submission to the GMC. The updated curriculum had removed regional anaesthesia from training, as it fell outside the scope of practice. However, the organisation had to redraft some assessment guidance, which delayed the full submission. Ongoing discussions with the GMC were expected, and updates would be shared in due course.

Support for Leng Review recommendations 9-14 and 16: It was confirmed that the College would process the Leng Review through its governance structures, including this Council meeting and onward to the Board of Trustees. The meeting pack included seven recommendations directly related to AAs and the organisation, alongside others requiring further consideration, particularly those concerning faculty matters.

Council agreed to bring the matter to the Board of Trustees the following month, with further conversations to follow.

Council discussed the following Leng Review recommendations:

- *Recommendation 9: Anaesthesia associates should be renamed as 'physician assistants in anaesthesia'.*
- *Recommendation 10: Physician assistants in anaesthesia should have the opportunity for ongoing training and development in the context of a formal certification and credentialling programme.*
- *Recommendation 11: Career development - Physician assistants in anaesthesia should have the opportunity to become an 'advanced physician assistant in anaesthesia'.*
- *Recommendation 12: Workforce planning/expansion in the deployment of physician assistants in anaesthesia should be taken forward in conjunction with the Royal College of Anaesthetists.*
- *Recommendation 13: Ongoing monitoring of safety/ national audit of safety outcomes in anaesthesia practice in conjunction with the Healthcare Quality Improvement Partnership.*
- *Recommendation 14: A permanent faculty should be established to provide professional leadership and set postgraduate standards.*
- *Recommendation 16: Supporting doctors as leaders and line managers.*

Following robust discussion, Council agreed the following, subject to the satisfactory resolution of the current legal challenge and potential future challenges from United Medical Associate Professionals Trade Union (UMAPs) or others and/or further guidance from NHSE / DHSC. The Faculty Deans abstained from voting on the recommendations.

- Recommendations 9, 12 and 13 were supported in principle by Council.
  - The majority of Council members supported Recommendation 9. Professor Jonathan Thompson suggested the term 'physician's assistant in anaesthesia' was preferable.
  - Recommendation 13 was supported with the caveat that funding must be clarified and there must be anaesthetic leadership of audit.
  - Council supported the sentiment of Recommendations 10 and 11, and supported career progression for this workforce, but Council did not support the terminology around credentialling in particular. Council expected to be involved in further detailed discussion on these points and would bring the outcomes of those discussions back for further consultation before decision.

- On Recommendation 14, Council required more detail on funding models and governance before declaring a position.
- Recommendation 16 was postponed for future discussion.

### **6.1.2 College response to ongoing conflict in Gaza**

Jonathan Brūn introduced a paper regarding the College's response to the ongoing conflict in Gaza and the approach to member petitions regarding conflict situation. The College had declined to make a statement on the ongoing conflict in Gaza. There was pressure from some members for the College to reverse its position, and a petition had been received from a group calling themselves UK Healthcare Petitions to Royal Colleges (UKHPRC) with similar requests.

Council discussed the issue in light of the College's previously agreed position on conflict, the UKHPRC petition, and the worsening situation in Gaza. In reviewing the petitioners' requests in the context of the College's published guidance on making statements of this type, Council decided to maintain the College's current stance.

#### **7.1.1 RCoA Scottish Board**

Dr Daphne Varveris provided a verbal update from the Scottish Board. The following matters were noted:

Future Medical Workforce Review by Scottish Government: A review was ongoing, targeting focus groups. Attendance had been low, but a round table for Scottish Academy groups was planned. The College was drafting a response to the review, expected to be submitted shortly.

Scottish Elections: No significant actions were expected in Scotland until the elections in May 2026, causing a stall in a number of activities.

Programme Board for Anaesthetic Associates: A circular from the CMO in Scotland had been distributed in support of the Leng Review. It indicated a desire for a Four Nations approach subject to input from the programme board, whose recent interpretations suggested a more individual approach might be necessary.

Simulation Training in Scotland: Efforts were ongoing to address funding issues for simulation training, which was lagging behind other regions. A letter was being prepared from the College to NEST to support this area.

#### **7.1.2 RCoA Northern Irish Board**

Council received minutes from the from the Devolved Northern Ireland Board of 22 May 2025. Dr Rosie Hogg was not in attendance to provide the update.

#### **7.1.3 RCoA Welsh Board**

Dr Simon Ford had indicated there was no Devolved Welsh Board update.

### **7.2. Clinical Quality & Research Board**

#### **7.2.1 Guiding principles for reporting of data**

Professor Iain Moppett on behalf of the RCoA Centre for Research & Improvement had produced some guidance on reporting data in July 2024. These were originally produced in relation to data and reports concerning Anaesthesia Associates but could be applied to any report. The principles aimed to help transparency and trust in the process of reporting data.

The Clinical Quality & Research Board had approved the guidance at the time. However, this was not published further. They were therefore being shared with Council and subsequently the Board of Trustees for completeness and to raise awareness.

Daniele Bryden spoke in support of the principles and highlighted the potential regarding the conduct of surveys and publishing of results. She noted that some FICM committee and group members have already taken initiative in this regard. The principles were silent on the conduct of surveys, which might need consideration from their perspective. The suggestion was made to take this matter to the FICM Board for further exploration.

### **7.3 Education, Training and Examinations Board**

#### **7.3.1 Update from Education, Training and Examinations Board meeting on 2 July 2025**

Dr Sarah Thornton provided an update from the Education, Training and Examinations Board meeting from 2 July 2025. The following points were noted:

- The recognition of up to two years of time outside of training would commence within the next two years and could be applied from the new training year beginning in August 2025.
- Equity, diversity and inclusion was a top priority for the Board which recognised a need to tackle this in multiple areas, including training, recruitment, exams and career progression.
- Portfolio Pathway applications continued to rise. The Board highlighted the importance of ensuring that the process was supported and resourced.
- Volunteer training roles, such as Regional Adviser, were increasingly difficult to recruit into. One School was being supported to sign off stages of training, which was not sustainable. Further ways to reward and recognise training volunteers were being explored.

#### **7.3.2 Update in reviewing exemptions for overseas qualifications**

Russell Ampofo presented a paper which responded to the request from Council for an update to the approach from the RCoA regarding overseas qualifications and exemptions to part of the FRCA exam.

The approach was agreed by the Education Training and Examinations Board in October 2024, which was grounded in equity and risk assessment and addressed two areas:

- International doctors using overseas PG qualifications to gain exemption from PLAB and join the GMC register with a licence to practise.
- Doctors using overseas PG qualifications to obtain exemption from the Primary FRCA part of the FRCA exam.

It was noted that there was no effective quality assurance process to ensure the standards of these overseas qualifications, and with upcoming changes to the exam, the time was right to remove endorsement.

The idea of establishing an application process to allow overseas organisations to apply for exemption from the Primary FRCA was supported. This application process was created, and interest was received from Sri Lanka and Bangladesh. To date, only Sri Lanka had submitted an application to have their qualification recognised for exemption from the Primary FRCA. This would enable holders of the MD in Anaesthesiology from Colombo to apply for the Final FRCA.

A list of qualifications that were exempt, but no policy for quality assurance or new qualifications, was being investigated further and would be brought back to Council in due course. This now provided a formal process for recognising and reapproving qualifications for approval in the College where there was previously none in place.

#### **7.3.3 Portfolio Pathway**

Russell Ampofo provided a verbal update regarding current pressures & risks relating to the portfolio pathway workstream.

The number of applications received had increased threefold since 2021. A strategy was approved at Council in 2023, and its implementation led to an increase in the number of assessors to around 44. Each assessor had a baseline commitment to assess around four applications per year. Efforts were being made to improve the efficiency of the process. Additionally, a CPD day was implemented for



all assessors. This information would be presented at a meeting with the GMC the following week to discuss the future model for portfolio pathways.

### **7.3.4 SAS Committee**

Dr Ashwini Keshkamat provided a verbal SAS Committee update. The next SAS Committee was scheduled to meet in October. Since the last Council meeting in July, the Autumn Bulletin was set to be SAS-themed and ready in time for SAS Week. Thanks were given to colleagues and Council members who submitted articles, with special thanks to John Chambers for his support as editor of the Bulletin. Five episodes of podcasts on portfolio pathways were recently released, aimed at helping SAS or LEDs embarking on the portfolio journey, as well as supervisors and trainers supporting applicants. A number of SAS Committee members were finishing their three-year term, and new members were being recruited.

### **7.3.5 Anaesthetists in Training Committee**

Dr Sophie Jackman provided a verbal Anaesthetists in Training Committee update. The Anaesthetists in Training Committee had not met since the last Council meeting and was next scheduled to meet in October. A postgraduate medical training reviews publication was due to be published and was expected to recommend reforms in postgraduate medical training. The review of rotations was ongoing. The committee had noted that financial pressures appeared in some cases to be leading to a number of questionable practices within trusts, such as limiting the annual leave of anaesthetic trainees. This issue had been reported to the trust, the BMA, and NHS Employers. Council members were urged to be vigilant and report any similar issues, particularly those affecting resident doctors.

### **7.4.1 Membership, Media and Development Board Update**

Dr Jon Chambers provided a verbal update from MMD Board including headlines from the membership survey, which would be communicated in more details in due course.

Membership, Media and Development Board passed on their thanks to Graham Blair who would be leaving the College in October to take on the role of Chief Executive of the British Society for Immunology.

### **7.5 Nominations Committee**

*Dr Dave Selwyn left the room for this item.*

Dr Sarah Thornton provided an update from Nominations Committee meeting held on 3 September 2025 including a number of nominations for Council approval.

**Council ratified the following awards recommended by Nominations Committee.**

- **College Medal – Dr Dave Selwyn**
- **College Medal – Dr Alistair McKenzie**
- **President's Commendation – Dr Jeff Handel**
- **Dudley Buxton Prize Dr Judith (Jude) Partridge**
- **College Medal – Dr Caroline Evans**
- **Webb Johnson Oration 2026 – Professor Iain Moppett to be put forward to RCSEng**
- **Hon Fellowship – Dr Mohammad Abdul Rahman**

## **8.1 Centre for Perioperative Care (CPOC)**

### **8.1.1 Progress of the Strengthening CPOC at the RCoA programme**

Dr Chris Carey provided an update on plans to strengthen CPOC at the RCoA.

**Council unanimously approved the resolution to approve the Terms of Reference for the Strengthening CPOC within the RCoA Functions Short Life Steering Group.**

### 8.1.2 CPOC Update

Dr Dave Selwyn provided a CPOC update. The following key points in the report were highlighted:

Behaviour Change Resources Hub: CPOC had launched a dedicated Behaviour Change Resources Hub alongside the existing "Why change matters?" and "How to change" tools. It aimed to bring together practical, user-friendly resources from different organisations to support perioperative staff in improving workplace culture and patient safety through better behaviours. CPOC had also published a poster and infographic which were both endorsed by ten of their multidisciplinary partners.

London Declaration: CPOC was in the process of finalising the London Declaration that was born from the Evidence Based Perioperative Medicine Conference (EBPOM) in July 2025. The declaration was a collaboration calling for a global initiative to advance the perioperative care movement between EBPOM, CPOC, Australian & New Zealand College of Anaesthetists (ANZCA), American Society of Anesthesiologists Centre for Perioperative Medicine (CPMed), European Society of Anaesthesiology and Intensive Care (ESAIC), The Perioperative Quality Initiative (POQI) and American Society of Enhanced Recovery (ASER). More information would be published in the autumn.

Funding: CPOC and Macmillan had been successful in securing a second round of funding from the Health Foundation for the Q Community in Perioperative Care. The £20k funding would be used to continue providing a series of Macmillan hosted webinars and support the community over the next 12-18 months.

Response to recommendations for implementation of the perioperative care aspects of the NHS 10-Year Plan: CPOC was working with NHS England to provide a response to the recommendations for implementation of the perioperative care aspects of the NHS 10-Year Plan.

Council noted that this was the last Council meeting of Dr Dave Selwyn. Council thanked him for his contributions over the previous 14 years. Professor Denny Levett was appointed as the incoming CPOC Director and would commence in post on 1 October 2025.

### 8.1.3 Association of Anaesthetists Update

Dr Tim Meek provided a verbal update from the Association of Anaesthetists. The following matters were noted:

- The Association of Anaesthetists had responded to the outputs of the 10-year plan, Leng Review and the Dash Review on Patient Safety.
- Dr Tim Meek had attended a meeting with Professor Meghana Pandit, the new Chief Medical Officer, as part of the delegation from the Federation of Surgical Speciality Associations. They discussed changing the rubric for the recovery plan, which was thought to be predicated towards COVID recovery.
- Association of Anaesthetists had arranged a successful lunch and learn event in Manchester, where they publicised their activities and held a roadshow.
- Dr Tim Meek had attended a military update on RAMP (reception arrangements for MOD personnel) as part of the FSSA activities.
- Discussions were in process with a producer from the BBC World Service about a forthcoming radio programme on anaesthesia.
- The Association of Anaesthetists would be sending delegations to the forthcoming Labour Party conference and the ASA meeting in San Antonio.

### 8.1.4 RCoA Examinations Update

Dr Roger Sharpe provided an exams update. The following points were noted:

- The FRCA May Primary and June Finals exams were held in external venues due to the closure of Churchill House. The logistics were complicated but the exams ran smoothly and feedback from candidates and examiners was positive.

- Approx 440 candidates were examined in the May primary which was the highest number to date. This was achieved by running parallel OSCE floors to increase capacity.
- Exams would continue at Churchill House until the College moved to Jubilee House in mid-2026. Back up plans were in place. Allocation of an additional floor at Churchill House would allow parallel OSCE model to continue.
- 24 new examiners had been appointed for the next academic year
- The Exams Team were working on a CAG submission to the GMC for approval of the new exam format.

#### **8.1.5 BJA and RCoA Liaison Group**

Council received a written update provided by Dr Simon Howell in advance of the meeting.

#### **8.5 PatientsVoices@RCoA update**

Jenny Westaway provided a verbal Patient Voices update.

The Patient Voices Award was open for nominations for the second time. No nominations had been received to date. Additionally, the Patient Information Forum certification had been renewed, asserting the quality of patient information. A lot of work went into maintaining the quality of leaflets and information.

#### **8.6 Defence update**

Council received a written update provided by Colonel Giles Nordmann in advance of the meeting.

### **9. Matters for information**

#### **9.1 CCTs for Council**

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

#### **9.1 Regional Adviser Anaesthesia changes Council**

Council approved the following regional advisers for anaesthesia:

##### Regional Advisers Anaesthesia:

Dr Timothy Bennett in succession to Dr David Lee as RAA for Northern Ireland Medical & Dental Training Agency.

Dr James Edward Stevenson in succession to Dr Nirmala Soundarajan as RAA for North & East Yorkshire.

##### Deputy Regional Adviser Anaesthesia

Dr Rini Poddar for in succession to Dr Prasad Vyakarnam as RAA for KSS (Kent).

### **10. Any other business**

No other business was raised.

The next Council meeting would be held online from 9.30 – 13.30 on Wednesday 5 November 2025

**END OF MEETING**