



FACULTY OF PAIN MEDICINE

of the Royal College of Anaesthetists

Minutes of the Board meeting held on Thursday 5 May 2011

Members:

Professor D Rowbotham	(Dean)
Dr K Grady	(Vice-Dean)
Dr A Tomlinson	(RCoA Vice-President)
Dr B Collett	
Dr D Justins	
Dr R Laishley	
Professor I Power	
Dr K Simpson	
Dr M B Taylor	
Dr S Ward	
Dr J Hughes	(Co-optee: Chair of the Regional Advisors in Pain Medicine)
Dr N Saxena	(Co-optee: Trainee representative)

Apologies:

Prof R Langford	(Co-optee: President of the British Pain Society)
Mr A Naughton	(Co-optee: Lay representative, Patient Liaison Group)
Ms S Drake	(Education Director)
Mr J Goodwin	(Senior Faculties Administrator)

In attendance:

Mr D Waeland	(Faculties Manager)
Miss A Ripley	(Faculties Administrator)

BFFPM/05.11/1 ELECTION OF THE DEAN

Professor David Rowbotham was re-elected, unopposed, as Dean for one year from September 2011.

BFFPM/05.11/2 ELECTION OF THE VICE DEAN

Dr Kate Grady was re-elected, unopposed, as Vice-Dean for one year from September 2011.

BFFPM/05.11/3 WELCOME AND APOLOGIES

Miss Anna Ripley was welcomed as the new administrator for the Faculty. Apologies were noted as above. Dr Justins gave apologies for some of the meeting as he would need to attend a conflicting meeting being held off-site.

BFBM/05.11/4 MINUTES OF THE LAST MEETING

The minutes were approved subject to minor changes.

BFBM/05.11/5 MATTERS ARISING

5.1 Relationships with industry

Ms Drake, with input from Dr van Besouw and Mr Waeland, had prepared some guidance on dealing with industry. The Dean noted that the guidelines were in an early draft and did not currently cover an issue key to the Faculty regarding attending industry funded events. The matter would remain on the Board agenda.

5.2 Pressure on pain services

The Dean and Professor Langford had agreed not to release a formal statement on this subject on the web as it could be counterproductive in the long term. The area has been covered twice in the Dean's *Bulletin* articles and would also be referred to in the next edition of *Transmitter*. Dr Simpson recommended commissioning as a topic for a future Faculty event which the Board agreed.

ACTION: Mr Waeland to liaise with Dr Gupta.

5.3 Map of Medicine Chronic Pain Pathways

Five working groups were in progress and the outcomes would be presented at a seminar during the BPS ASM in June. The Dean noted that the work that the groups had put into these pathways was comprehensive but due to the tight timeframe required, the robustness of the work would need to be reviewed before final publication.

5.4 Pain summit

One of the proposals for the summit had been included with the papers to give Board members an idea of the size of the project. Dr Collett reported that the Steering Committee (including representation from the FPM, BPS, CPPC, RCGP and patient organisations) had the task of delivering an English Pain Summit in November 2011. This would be a first step possibly with further summits in following years to maintain the momentum of the project. The summit aimed to engage with commissioning in the context of the changes within the NHS. The proposal included in the papers (from Policy Connect) would be twinned with a tender from Primary Care Commissioning in order to obtain the benefits of both organisations' experiences. The summit was planned to be a full day with a seminar in the morning and workshops in the afternoon. The cost for hosting and running the summit and the final report work was estimated at £70k. The financing comes via an unrestricted grant from a group of pharmaceutical companies who would have no influence on the content or outcome.

5.5 LPMES Roles & Responsibilities

The document was approved subject to a minor amendment to define SAS grade doctors as colleagues.

ACTION: Dr Hughes and Mr Waeland to amend the document and circulate to RAPMs.

5.6 Honours

The Dean requested nominations for Honorary Fellows. The Board approved Dame Carol Black who was instrumental in supporting the Faculty during its formation. Dr Justins noted that Dr John Etherington had already been approved.

ACTION: The Dean to recommend Dame Carol Black to the RCoA Nominations Committee as an Honorary Fellow.

5.7 Acute pain ward rounds

Dr Grady had written to Dr Thornberry (Chair, RCoA Training Committee) noting that the Board had been in discussion about exposure to acute pain medicine during ST5-7 and were keen that trainees at this stage continue to attend acute pain medicine ward rounds (once a quarter) to complement their anaesthetic practice. Dr Thornberry responded on behalf of the Training Committee to say that this is a basic requirement of anaesthetic practice and so it would not be necessary to mention explicitly. The Board agreed that this did not remedy the problems that many regions faced with ensuring adequate exposure and requested clarification.

ACTION: The Dean and Dr Grady to liaise with Dr Thornberry on the Board's recommendations.

BFPM/05.11/6 DEAN'S STATEMENT

6.1 National Lead for Chronic Pain

Dr Steve Gilbert had been recently appointed as National Lead Clinician for Chronic Pain in Scotland and the Dean proposed co-opting him to the Board. The Board agreed.

ACTION: The Dean and Mr Waeland to amend the Regulations and to invite Dr Gilbert.

6.2 Pain Medicine journal update

The Dean noted that the journal carries indemnity for the editorial members but not for their partner organisations, although this was apparently being looked into. The Dean had requested further detail.

6.3 Board development

The Board had now been in existence for 4 years and had a consistent strategy. The Dean asked the Board whether there was scope for reflection and growth and recommended the concept of an away day for Board members. The RCoA Finance Committee had approved the use of funds based on Mr Waeland's budget. Dr Grady and Dr Simpson noted that the Board had spent four years reacting to activities it was required to undertake and with a new administrative support structure could now concentrate on activities it wanted to see through. The Board agreed in principle to having an away day with the possibility of a professional facilitator.

ACTION: The Dean and Mr Waeland to review concepts.

6.4 NAB Report: Epidural Rationalisation

A pharmacy-lead working group with input from other organisations on what epidural fluids should be available onsite had reproduced a final report. The Faculty had been asked to review the report, which, by extension, would mean endorsing it. Dr Simpson agreed to review the report and bring comments to the FPMPS on 17 June.

ACTION: Dr Simpson to review the report and produce some feedback from the Faculty.

BFBM/05.11/7 REPORT FROM THE RCoA DIRECTOR OF EDUCATION

Ms Drake was unable to attend due to prior commitments.

BFBM/05.11/8 FPM BOARD STRATEGY

8.1 MFPMRCA Criteria

The Membership route had been temporarily suspended to review the eligibility criteria. The Board agreed to review the criteria for Membership and consider restricting it solely to SAS grade doctors who are also Members of the RCoA. The Associate Membership route would also need to be reviewed. Mr Waeland informed the Board that current regulations required 2 years of satisfactory CPD and the criteria could be developed by defining the work environment required. A group of Board members would review the criteria for full approval by the Board and ratification by Council.

ACTION: The Dean, Dr Grady, Dr Laishley, Dr Taylor and Mr Waeland to review the criteria for Membership and Associate Membership.

8.2 Awards and Prizes

The Dean reported that the wording for the Gold Medal had been finalised by Mr Waeland and would go to this month's Nominations Committee. The Dean proposed Dr Justins as its first recipient which was supported unanimously.

ACTION: The Dean to take approval of the Faculty Gold Medal and the nomination of Dr Justins as its first recipient to the RCoA Nominations Committee.

8.3 Research

8.3.1 *Development of research support*

The Dean informed the Board that he had been in discussion with Dr Mike Grocott, the Director of the Health Services Research Centre. The HSRC had arranged an event in Perioperative Medicine at the College for a network of 20 centres who expressed interest in research. This could be repeated, with BPS input, for Pain. Dr Ward informed the Board that the BPS Research SIG would be interested in being involved. The Dean did not want to progress this further until there was full agreement from the BPS.

ACTION: The Dean to discuss further with BPS President and Mike Grocott

8.3.2 *Scottish Pain Research Consortium*

The Dean attended the first meeting of the Scottish Pain Research Community (SPaRC). NHS Scotland organised in the initiative and has embraced pain as core business.

8.4 National Registry of cases with spinal cord implants

Mr Waeland reported that the designer of the registry was currently on sick leave which had halted the project. Dr Simpson informed the Board that she would liaise with Dr Francis Luscombe (President, NSUKI) to keep him up to date on developments.

ACTION: Dr Simpson to liaise with Dr Luscombe (NSUKI).

BFBPM/05.11/9 FPM PROFESSIONAL STANDARDS COMMITTEE

9.1 FPMSC Minutes – 8 April 2011

The minutes have been delayed following long-term sick leave in the secretariat and would be available at the next Board meeting.

9.2 Revalidation

Dr Simpson reported that she had been unable to attend the recent RCoA Revalidation Development Committee but had reviewed the minutes of the meeting. Discussions regarding Level 3 CPD were ongoing although the FPM list was complimented as a good example of a Level 3 list. A document on *Supporting Information for Appraisal and Revalidation* had been published by the GMC. Dr Tomlinson was formally thanked for the work he had done on this important project.

9.3 Recommendations on the use of epidural injections for the treatment of back pain and leg pain of spinal origin

This document had now been approved and printed and would be mailed out to the membership over the next fortnight.

9.4 Faculty events

The Cancer Pain Study Day is due to go ahead on June 10. The two November programmes were in draft and Dr Simpson and Dr Justins agreed to assist Dr Gupta in finalising them. The 3 day January meeting would be reinvented as a 'recent advances' course which would also provide preparation for the FPMRCA Examination although it would not be specifically marketed as an examination preparation course.

ACTION: Dr Justins and Dr Simpson to assist Dr Gupta in finalising the November draft programmes.

9.5 Transmitter

Transmitter issue 3 had been finalised and would be mailed out soon. Mr Waeland thanked the contributors and Dr Grady for editing the content.

9.6 CPD Advisor

Dr Hughes had been appointed as the Faculty's CPD Advisor.

9.7 NICE Library of Quality Standards

A suite of quality standards was being produced to underpin NHS service, of which some were now established and some remained in progress. The Academy of Medical Royal Colleges had requested submissions for a centralised review list and the Faculty and the RCoA submitted a joint response. NICE are organising a workshop on 10 June to explore this further.

ACTION: FPM Secretariat to add the response to the FPM website and to email to all Board Members.

BFBPM/05.11/10 FPM TRAINING AND ASSESSMENT COMMITTEE

10.1 FPMTAC Minutes – 4 February 2011

Dr Grady noted that the Trainee Registration Form had now gone live on the website and would improve the Faculty's connection to Higher and Advanced trainees via the Trainee Representative. The Audit Recipe Book now had a complete list and Dr Hughes would be

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involved in moving this forward. The Committee was due to meet the next day.

10.2 FPM Examination

The Examination is on track and there will be an examiner pre-meeting prior to the FPMTAC for updates. The development is due to begin soon on the FileMaker Pro database. The Board discussed the concept of a prize for the Examination with Dr Simpson suggesting a distinction for marks above a certain threshold. Dr Grady would bring back regulations to the next Board.

ACTION: Dr Grady to discuss the concept of a distinction or award with the FPMTAC and to bring back to the next Board meeting.

10.2.1 *Statement for interim trainees*

Dr Grady reported that a letter had been received from two advanced trainees who were concerned that as they had started APT just after the 1 February 2011 cut-off point they would complete their CCT months prior to being able to obtain the FFPMRCA by examination. The Examination Executive had written back to them answering their concerns but Mr Waeland had proposed a letter they could chose to include in their consultant applications noting the reason for the temporary closure of the relevant FFPMRCA by assessment routes. This template could then be used for any possible future queries from concerned trainees. The Board agreed with this proposal.

ACTION: The Dean and Mr Waeland to draft a letter to the two trainees concerned.

10.2.2 *Visiting FPMFCARCSI exam*

The Board discussed the appropriateness of FFPMRCA examiners visiting the Irish pain examination and other foreign examinations. The Board agreed that the FFPMRCA Examiner Handbook should note that examiners are strongly recommended not to examine or visit foreign examinations without first consulting the Examination Executive.

ACTION: Mr Waeland to update the FFPMRCA Examiner Handbook.

10.3 Curriculum

The FPMTAC had formally requested for the 2010 curriculum optional modules to be incorporated in the 2007 curriculum. This would go via the RCoA Training Committee to the GMC.

BFPM/05.11/11 REGIONAL ADVISORS IN PAIN MEDICINE

Dr Hughes informed the Board that no major concerns had been expressed by his RAPM colleagues. The next meeting of RAPMs would be held at the BPS ASM in June on with a trainee meeting to follow the next day. Board members were welcome to attend.

BFPM/05.11/12 FACULTY REPRESENTATIVES REPORTS

12.1 National Pain Audit

Dr Ward reported that Phase 1 of the NPA was more or less complete and the Scientific Committee had been formed to review data. Phase 2 was now underway. 250 consultants and 100 non-physicians would be collecting and submitting data. The

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deadline date had been extended and may be flexible to ensure a good return rate. Mr Waeland offered to include a leaflet from the NPA to highlight the data collecting window.

ACTION: Mr Ward to liaise with the NPA support staff to produce a leaflet for the FPM Secretariat to include in their upcoming mail out.

BFPM/05.05/13 ANY OTHER BUSINESS

No other business was raised.

BFPM/05.11/14 FOR INFORMATION

14.1 Terms of office of current Faculty Representatives and re-appointments

14.2 Terms of office of Faculty Officer Holders and Leads

14.3 Terms of office of current Regional Advisors in Pain Medicine

The Board noted the Terms of Office.

14.4 Table of consultations

Consultation	Deadline	Submitted
(GMC) Revalidation	4 June 2010	YES
(NICE) Peripheral Arterial Disorder	16 July 2010	YES
(NICE) Incontinence in Neural Disorder	30 July 2010	YES
(NICE) Headaches	9 Sept 2010	YES
(GMC) Prescribing Medicines	21 Jan 2011	YES
(DoH) Liberating the NHS: Developing the Healthcare Workforce	30 March 2011	YES
(DOH) Quality Standards	18 April 2011	YES
(NICE) Urinary incontinence – Update	29 April 2011	Workshop
(AoMRC) Benefit of Consultant Delivered Care	6 May 2011	YES
(NICE) Diabetic Foot Problems	<i>c. Oct 2011</i>	
(NICE) Opioids in Palliative Care	<i>c. Late 2011</i>	
(NICE) Sickle Cell Crisis	<i>c. Late 2011</i>	

14.5 List of Publications and Releases

The Board noted the list of publications and releases.

BFPM/05.11/15 DATES OF FUTURE BOARD MEETINGS

Thursday 15 September 2011

Thursday 8 December 2011

Thursday 10 February 2012

Thursday 4 May 2012

ACTION POINTS

Item		Action	
4	Minutes of the last meeting	FPM admin.	To make amendments as suggested on the day.
5.2	Pressure on pain services	Mr Waeland	To liaise with Dr Gupta regarding NHS commissioning as a topic for a future event.
5.5	LPMES Roles & Responsibilities	Dr Hughes	To make final amendment and circulate to RAPMs.
		Mr Waeland	
5.6	Honours	Dean	To recommended Dame Carol Black to the RCoA Nominations Committee as an Honorary Fellow.
		Mr Waeland	
5.7	Acute Pain training exposure	Dean	To liaise with Dr Thornberry on the Board's recommendations.
		Dr Grady	
6.1	National Lead for Chronic Pain	Dean	To amend the regulations and to invite Dr Gilbert.
		Mr Waeland	
6.3	Board Development	Dean	To review ideas for a Board Away Day.
		Mr Waeland	
6.4	NAB Report: Epidural Rationalisation	Dr Simpson	To review the Report and produce some feedback from the Faculty.
8.1	MFPMRCA criteria	Dean	To review the criteria for Membership and Associate Membership.
		Dr Grady	
		Dr Laishley	
		Dr Taylor	
		Mr Waeland	
8.2	Awards and Prizes	Dean	To take approval of the Faculty Gold Medal and the nomination of Dr Justins as its first recipient to RCoA Nominations Committee.
8.4	National Registry of cases with spinal cord implants	Dr Simpson	To liaise with Dr Luscombe (NSUKI).
9.4	Faculty events	Dr Justins	To assist Dr Gupta in finalising the November draft programmes.
		Dr Simpson	
9.7	NICE Library of Quality Standards	FPM admin.	To add to consultation response to the website and to circulate to the Board.
10.2	FPM Examination	Dr Grady	To discuss the concept of a distinction or award with the FPMTAC and to bring back to the next Board meeting.
10.2.1	Statement for interim trainees	Dean	To draft a letter to the two trainees who wrote into the Faculty.
		Mr Waeland	
10.2.2	Visiting FPMFCARCSI exam	Mr Waeland	To add the outcome of the Board discussions to the Examiner Handbook.
12.1	National Pain Audit	Dr Ward	To liaise with the NPA support staff to create a flyer for the audit.
		FPM admin.	To include flyer in the upcoming mail out to Fellows and Members.