BFPM/12.14/1 WELCOME AND APOLOGIES
The Dean informed the Board that this was the last meeting for Professor Rowbotham, Dr Simpson and Dr Ward. The Dean thanked them for all of the hard work they have done for the Faculty. Dr Simpson will continue as Chair of Examiners.

BFPM/12.14/2 MINUTES OF THE LAST MEETING
The minutes of the last meeting held on 18 September 2014 were agreed as a true record of events subject to a minor amendment.
BFPM/12.14/3  MATTERS ARISING

3.1  Membership

3.1.1 Voluntary Register
The Dean reported that the Voluntary Register suggestion was taken to RCoA Council; this was approved in principle although a query was raised over the word ‘Register’ and whether it implied any endorsement from the Faculty. The Board agreed that it would not mean endorsement and that was the most appropriate word to use.

3.2  New Board Dates
The Dean confirmed that the Board will be held on Fridays going forwards.

3.3  Meeting with NICE
Dr Goddard raised that at the last meeting with NICE, it was confirmed that the Chronic Pain guideline was still being planned for 2015.

BFPM/12.14/4  DEAN’S STATEMENT

4.1  New Board Members
The Dean reported that following an election for three new Board members, Dr Barry Miller, Dr Ganesan Baranidharan and Dr Carol McCartney were elected.

4.2  Patrick Wall 2015
The Board were informed that the RCoA Nominations Committee have approved Professor Andrew Rice to receive the Patrick Wall medal in 2015. This will be presented that the FPM Annual Meeting on 27th November 2015.

4.3  Fellowship by Election
The Board agreed that they would put forward Dr Suellen Walker to receive the Fellowship by Election, this will be taken to the RCoA Nominations Committee.

ACTION: FPM admin to take Fellowship by Election nomination to the RCoA Nominations Committee.

4.4  Check on actions list
- The Board were informed that Dr Vivek Mehta applied to be a Pain Medicine editor for the CEACCP journal, unfortunately he was not successful; the Board expressed their concern that he was not appointed and that this leaves a lot of work for the one existing pain editor.
- The Board were informed that Dr Graham Simpson and Dr Richard Sawyer have agreed to keep the evidence base up to date.

4.5  Pain Consortium
The Dean reported that the Pain Consortium was held on 26th November, that the links created between the four groups were invaluable and that the aim is to continue the joint working.

4.6  FPM representatives on RCoA Committees
The Board discussed who from the Faculty should sit on the three RCoA Committees that are currently covered by Professor Rowbotham. The Board agreed that Dr Collett would take over as FPM representative on the RCoA Professional Standards
Committee, the Dean will sit on the Nominations Committee and Professor Rowbotham will continue to sit on the Finance Committee and feed back to the Board.

Action: FPM admin to inform RCoA secretaries about the change in membership.

BFPM/12.14/5 FPM PROFESSIONAL STANDARDS COMMITTEE

5.1 FPMPSC Minutes
Dr Collett presented the minutes of the last meeting.

- The Pathfinder project is currently on hold due to restructuring within NHS England
- There are currently three consultations being looked at by the Committee relating to confidentiality, duty of candour and tariffs.
- Dr Collett reported that she attended a NICE controlled drugs scoping meeting. The meeting was mostly attended by pharmacists and seems to be focused more on prescription dispensing and administration; Dr Collett raised the point that the clinical aspects also needed to be included; Dr Cathy Stannard is applying to be on the working party as an independent member but she has agreed to feed back to the Faculty if she gets appointed.
- The Board were informed that the Opioid resource project is progressing well with a consultation planned for February 2015.

5.2 Core Standards for Pain Management
Dr Collett reported that work is progressing well and the majority of chapters have been sent in by the authors either in draft or final form. The aim is to have a full version ready for the Board to consider in February and for the document to go for public consultation in March with a release date of April.

5.3 Pain in Secure Environments
Ms Ripley informed the Board that work is progressing well; a training day will be held in January and the first two pilots are organised for March and May. The aim is to start running the regional courses in September 2015. The Board discussed that this project has the potential of going beyond prisons in the future and could be used for nursing homes as an example. The Board agreed that this should be advertised to show the work being undertaken by the Faculty.

BFPM/12.14/6 FPM TRAINING AND ASSESSMENT COMMITTEE

6.1 FPMTAC Minutes

- Dr Barry Miller reported that the committee proposed to reduce the number of Advanced Pain Training case reports from two to one. The Board agreed this change. FPM admin will need to change the Fellowship application forms. Dr Miller informed the Board that he is also going to re-write the case report guidance as there is still large variability in the quality and marking of the case reports.

ACTION: FPM admin to change the Fellowship application forms to ask for only one case report.

- Mr Waeland reported that he attended a meeting with the GMC regarding subspecialty status and that there is the potential for Pain Medicine to become a credential if the GMC bring in the proposed changes. The Board discussed that
research is needed to see what credentialing could mean for the Faculty and that potentially it could be better to be involved with credentialing from the start if it does occur. The Board agreed that Mr Waeland should have an informal meeting with the GMC to find out some more information.

**ACTION: Mr Waeland to arrange a meeting with the GMC**

### 6.2 FFPMRCA examination report
Dr Simpson reported that ten candidates sat the last SOE, of which six passed. Two of the candidates scored 40/40, one on their second attempt and one on their first. The candidate who achieved full scores on their first attempt also came first in their MCQ so they will receive a commendation letter. After the next sitting the Board will be given a list of candidates to consider for the prize. The new examiners and question writers attended the exam and there were also two visitors.

### 6.3 Workforce
Mr Waeland reported that Ms Evans had created a workforce resource on the FPM website. It will be kept up to date using information collated from the RAPM bi-annual reports.

### 6.4 Trainee Update
Dr Lucy Miller informed the Board that some trainees feel that the exam should be more clinical and less science based; she has put something onto the FPM website to address these complaints. Dr Miller reported that the trainees are fully aware that there are science based questions in the exam so they should be prepared for this. Dr Miller further reported that there have been eight new trainees register this month and that she is trying to set up some more networking between the trainees.

**BFPM/12.14/7 FPM BOARD BUSINESS AND UPDATES**

### 7.1 Acute Pain
Dr Rockett informed the Board that he has collated the results of the acute pain survey and that there were 117 returns from 312 Trusts; the overall response rate was 37.5%. Dr Rockett is going to produce two posters with the results for the BPS ASM in April next year. The survey indicated that only 21% of returns indicated more than 2 PAs in Pain Medicine and that also 82% do not provide out of hours services, and that 59% had no chronic pain specialists in the acute team despite the fact they look after chronic pain patients. In summary Dr Rockett reported that the aspirations are good but that the service provision is bad. The Board agreed that a working party should be formed to look into the survey results and how to take things forward.

### 7.2 Pain Summit: Complex Pain
Dr Nicolaou reported that the ASK2QUESTIONS work stream was presented at the House of Lords on 25th November along with the other Pain Summit projects. The meeting was chaired by Lord Luce, Linda Riordan and Viscount Simon and all of the work streams were well received. The main theme to come out of the meeting is the positive collaborative working that has occurred. Dr Nicolaou further reported that Dr Collett stepped down as Chair of the CPPC and that Martin Johnson and Neil Betteridge have taken over as co-chairs. The Board discussed that they should use their contacts in the House of Lords to ask some parliamentary questions about Pain Medicine, Dr Nicolaou agreed to compile this question bank.

**ACTION: All Board to email question suggestions to Dr Nicolaou for compilation.**
7.3 **RAPM update**
Dr De Gray reported that the RAPM meeting was held on 13th November 2014 with 14 RAPMs in attendance. The RAPMs discussed that the trainee survey highlighted some gaps in training still, i.e. research and cancer pain. The RAPMs discussed that Advanced Pain Trainee numbers are dwindling, so they are going to try and generate more interest in Pain Medicine by advertising posts across Deaneries. The Board agreed that an article should be written for the Bulletin about a day in the life of a Pain Medicine doctor to help advertise. Dr De Gray also reported that the Chair's term has now been extended to three years and that for the third year they will have a deputy (Chair Elect) to make the hand over period easier. Dr De Gray also discussed the results of the RAPM bi-annual reports; 19 of 21 RAPMs returned the forms. The reports highlighted some training concerns, highlighted what training modules are available in the regions and also that there are currently five regions with no pain trainees.

**ACTION:** Dr De Gray and Dr Miller to write article for the Bulletin

7.4 **Undergraduate training**
The Board were informed that the EPM Lite course has been successfully piloted in Bristol school and that eight further medical schools have also expressed an interest; Dr Mike O'Connor is taking this project forwards.

7.5 **Peri-operative Pain Medicine**
Dr Rockett reported that he had attended a meeting that morning on the peri-operative project; this group is going to release what a peri-operative pathway should look like in January with an animation and a very well attended launch. Dr Rockett reported that he is trying to ensure that Pain Medicine is included in the pathway although this is proving difficult as the main focus of the group is reducing risks, and Pain Medicine does not use the same assessment tools.

7.6 **e-Pain**
Ms Evans reported that Dr Julian Scott-Warren has been appointed as the new clinical lead and he will pick up work on the last few remaining modules and will continue reviewing the others.

7.7 **Essential Pain Management**
The Dean reported that a course has recently been run in Uganda and Malawi and that a course will be run in Tanzania in January.

BFPM/12.14/8  **ANY OTHER BUSINESS**
The Board discussed a request regarding endorsing some non-specialist training courses. The Board agreed that they would not endorse individual courses or universities but that the FPM has already started work in this area such as the Pain in Secure Environments, Essential Pain Medicine and e-Pain.

BFPM/12.14/09  **MATTERS FOR INFORMATION**

9.1 **Terms of office of Regional Advisors in Pain Medicine**
9.2 **Table of consultations**
9.3 **List of Publications and Releases**
BFPM/12.14/10  DATES OF FUTURE BOARD MEETINGS

Friday 6th February 2015
Friday 15th May 2015
Friday 18th September 2015
Friday 11th December 2015

ACTION POINTS

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