MINUTES

Present
Ian Johnson (IJ) Chair / Consultant Representative Ysbyty Gwynedd
Andy Bagwell (AB) Vice Chair / Consultant Representative Royal Gwent
Dr van Besouw (JP VB) RCoA President
Kevin Storey (KS) CEO of RCoA
Hywel Jones (HJ) Vice President, RCoA
Peter Fitzgerald (PF) Elected Consultant Member - Royal Glam
Mohammed Hashem (MH) Elected Consultant Member - Withybush
Stuart Davies (SD) Elected Representative – Singleton Hospital
Chris Thorpe (CT) REA ITU (Wales)
Sarah Plummer Elected Consultant Member – UHW
Eluned Wright (EW) RCoA Regional Advisor (Wales)
Sharmila Khot (SK) REA Pain Medicine (Wales)
Jason Bartlett (JB) RCoA PLG Representative
Sonia Wartan (SW) Pain Sub Group (representing Rhian Lewis)
Sue Jeffs (SJ) Elected Consultant Member - Nevill Hall
Chris Littler (CL) Elected Consultant Member – Wrexham
Dilesh Thaker (DT) Elected Consultant Member - Ysbyty Glan Clwyd (VC)
Mandy Collins (MC) Deputy Chief Executive & Director, Health Inspectorate Wales
Paul Morgan (PM) Chair Welsh Intensive Care Society
Beccy Robson (BR) RCPCH Wales Manager – Committee Administrator
Lisa Roberts (LR) RCoA Committee Administrator

Apologies
Piroaska Toth-Tarsoly (PTT) Elected Consultant Member - Prince Charles
Rachel Collis (RC) Elected Consultant member – Llandough
Simon Poulter (SP) Elected Consultant Member - Princess of Wales
Tamas Szakmany (TSZ) Chair Critical Care Advisory Sub Group
Kate Harvey (KH) Elected Consultant Member – Morriston
Michael Martin (MM) Elected Consultant Member – Llanelli
Rhian Lewis (RL) Chair Pain Sub Group
Sarah Harries Welsh Training Scheme Representative
Fiona Nelhans Elected SAS Member
Gethin Pugh Trainee Representative
Professor Judith Hall Academic Representative

Absent
Martin Garry Elected Consultant Member – Singleton
Mark Turtle Elected Consultant Member – Glangwili
Chris Jones Welsh Government Representative
Maggie Collingborn Elected Consultant Member – Bronglas
Chris Gildersleve Paediatric Anaesthesia Group of Wales (PAGW) Representative
Jon Hughes Welsh Clinical Directors Representative
Paul Clyburn AAGBI Representative
Welcome new members
The Chair welcomed all members to the meeting of the Royal College of Anaesthetists’ Advisory Board in Wales / National Specialty Advisory Group Committee Meeting

To receive and approve unconfirmed minutes of previous meeting held on 15th April 2013
Received and noted: Unconfirmed Minutes of Meeting held on 15th April 2013

Matters arising
Committee NOTED that ‘Matters arising’ items would be addressed under agenda items

Chair Report
Committee NOTED that healthcare remains challenging due to the re-organisation of reconfiguration of services in both North Wales and South Wales. Committee NOTED that the NSAG had contributed to a number of reports / consultations from the Welsh Government, the College and a number of other healthcare bodies. Committee NOTED that the Code of Practice for the Human Transplantation Act would be circulated for comment and Peter Matthews would be linking in to maintain continuity.

Action: Code of Practice for the Human Transplantation Act to be circulated to NSAG members.

Committee NOTED there had not been a response to the Health Inspectorate Wales (HIW) consultation. Committee NOTED that Mandy Collins, Deputy Chief Executive & Director of Inspection and Regulation would be providing a presentation on the role of HIW in the meeting. Committee NOTED that the Medical Technologies in Wales consultation had been circulated and a responses had been received which would be circulated to NSAG members.

Action: Medical Technologies in Wales response to be circulated to NSAG members.

Committee NOTED the current College issues which included the Mid Staffordshire Enquiry, seven day working from Royal College of Physicians in the Academy and the Shape of Training Review.

Committee NOTED that ACSA had been launched and that North Wales and South Wales had contributed to the initial pilot. Committee NOTED that a number of sites were interested in applying and IJ requested for all departments to sign up to the process.

Committee NOTED that the NSAG was a combination of the old Advisory Board in Wales to the College and the National Specialist Advisory Group (previously a Welsh Government Advisory Board). Committee NOTED that the NSAG’s were being used less by Welsh Government and that they tended to go directly through the College, Academy and other specialist groups.

Committee NOTED that IJ would be attending the ARCW on behalf of the NSAG when HJ stands down next year. Committee NOTED it was important to have representation on the committee and the quarterly committee meetings attended by the CMO. Committee NOTED that IJ would be meeting with the CMO in April 2014.

RCoA President Report
Committee NOTED:

• JP VB has been admitted for a second year as President, Dr Debbie Nolan and Dr Liam Brennan as Vice Presidents and HJ demitted office as Vice President. JP VB thanked HJ for his significant contribution to the College and Council and Anaesthesia in Wales.
• Dr Kate Grady has become Dean of the Faculty of Pain Medicine.
• Shape of Training Review (commissioned by the GMC) was due to report at the end of October and the proposed key recommendations of the review were outlined: -
  - A campaign (from medical school to specialty school) to better inform students of a career in medicine
  - F1 and F2 grades will remain with a series of 4 month minimum appointments but doctors will be fully registered upon acquisition of a medical degree (no pre-registration year)
  - Medical schools have a common exam across all universities which would allow ranking of students internationally
  - Post graduate training – the current 65 CCT’s and 38 sub specialties be reduced to 12 common stems of training leading to a Certificate of General Specialist Training (CGST)
Further specialist training will be determined by local need and is likely to be delivered through designated postgraduate post CGST training schemes.
- Insistence on transferable competencies within the 12 CGST's
- Post CGST training demand led
- Market forces will determine where training will be delivered
- Requirement for supervision to be delivered throughout the working week and weekends
- GMC will make a decision on which recommendations will be implemented

- Sunday Times campaign for 7 day working supported by the ARC. (Academy estimates of that only 170 trusts can actually deliver a full 7 day working)
- Health Education England have asked the College to be included in a specialty selection test pilot which the College have declined
- E-learning anaesthesia: 1 million e-learning episodes
- Statement produced on anaesthetists working single-handed
- Report on “poorly performing anaesthetists” (guidance to clinical managers and CD’s about how to deal with colleagues performing badly, these being consultants / SAS doctors)
- Submitted evidence to the Department of Health on longer hours, fatigue and the effects of shift working (proposal to set up a working group with multi-specialty input to look at the effects of fatigue and aging workforce)
- Royal College of Physicians have published their Future Hospitals Commission Report
- College Strategy- A plan will be presented to Council at the end of the year outlining how perioperative medicine will be developed as a strand of training within the College
- Safety Conference in Wales: 23rd October
- SALG has registered with African partnerships for patient safety
- Charlie McLoughlan and Peter Venn met with the Mike Richards, the Chief Inspector of Hospitals for England who fully endorsed the ACSA process and is keen to promote it as best practice

Committee NOTED the proposed recommendations of the Shape of Training Review and DISCUSSED its impact on anaesthesia. Committee NOTED that the joint statement for Single Handed Working and Dealing with Poor Performance (post CCT) were available on the RCoA website.

CEO Report
Committee NOTED:
- 1 millionth e-learning episode will be commemorated by a letter
- 16600 members – 93% UK based
- Council Election currently open, closing deadline 10th October
- History of consultations will be available on website (including comments and contributors)
- Public opinion will be gauged on having a female on the College coat of arms, press statement available on the website. Feedback welcomed from members

ARCW Report
Committee NOTED that the quarterly meeting involved all Royal Colleges in Wales and is attended by the CMO. Committee NOTED that in 2013 there was ARCW Away Day to discuss the current issues (recruitment, obesity, A&E medicine) and the future direction and strategy of the ARCW. Committee NOTED that the HJ would attend his final meeting in Autumn 2013.

Specialty School Report
Committee NOTED:
Recruitment
Committee NOTED that a recruitment round for CT1 and ST3 trainees had been completed and training would commence in February 2014. Committee NOTED that the offer process was ongoing and it was anticipated that the 4 CT and 4 ST programmes, plus 2 – 4 LAT posts would be filled. Committee NOTED that the net gain for current vacancies would be small at ST level for programme posts and LATs as 6 out of 8 appointable ST candidates were currently occupying CT posts or ST3 LAT posts which would therefore be vacated in February 2014.

Pre hospital Emergency Medicine
Committee NOTED that the first anaesthetic trainee to undertake specialty training in pre-hospital medicine in Wales commenced his post in August 2013.
Quality Assurance
Committee NOTED that the WSA is continuing its programme of quality assurance visits. Committee NOTED in the last 6 months the WSA had visited Wrexham and would be visiting The Royal Gwent Hospital in October and Glan Clwyd Hospital in November.

College Tutors
Committee NOTED that Dr James Leary has come to the end of term of office as college tutor in Morriston Hospital after 6 years. Committee NOTED that EW thanked Dr Leary for his hard work whilst in office and that Dr Simon Ford would be replacing him as college tutor.

Educational Supervision
Committee NOTED that the Deanery was continuing the process of professionalising the role of Educational Supervisors and over the coming months Educational Supervisors across Wales will be signing the Tipartite Agreement.

Committee NOTED that the Welsh School of Anaesthesia’s annual Educational Supervisor’s Study Day was taking place on 24th October. Committee NOTED that Andrew Leabourne and Afsana Choudhury from the College were attending and would be running an e-portfolio master class.
Committee NOTED that Dr Neil Agnew would be giving up his role as WSA Lead for Educational Supervisors after this year’s meeting. Committee NOTED that EW thanked Dr Agnew for his invaluable contribution and that Dr Vimla Victor would be taking over from over in October.

RA Pain Report
Committee NOTED it was the end of SK’s first three years tenure as RA and would remain in post.
Committee NOTED that following the successful development of a forum for chronic pain in South East Wales the SEWP forum had now developed the South Wales Acute Pain Network (SWAPN).
Committee NOTED that the first meeting took place in summer 2013 to achieve agreement regarding the requirement of such a network for clinical, research and management purposes, as well as to consider optimal membership of the group, short term goals and long term plans. Committee NOTED that the next meeting would take place on 28th November and that the group was being led by Dr Neeraj Saxena, Consultant Anaesthesia and Pain medicine, Cwm Taf.
Committee NOTED that the delivery of the Pain Medicine curriculum for Wales was ongoing and that the process of developing higher and advanced training sub modules based on the best available training opportunities in South Wales was being discussed. Committee NOTED that although at present APT posts are based in Cardiff and Gwent there may be opportunity/interest in developing sub modules of training with experts based in other LHB’s. Committee NOTED that discussions were taking place with the interested experts on the best way to take this forward and following initial discussions further decisions will be made by the STC.
Committee NOTED that SK represented Wales at the RCoA-FPM assessments group. Committee NOTED that SK was currently working with the assessments group to develop appropriate assessment tools for APT to assess the progression of trainees in the advanced training post. Committee NOTED that work is also under way to develop tools similar to those used by psychiatry and GP trainees in line with the biopsychosocial nature of chronic pain training.
Committee NOTED that a Pain in Wales article by SK had been published: Pain In Wales, page 10, Newsletter of the Faculty of Pain Medicine, Royal College of Anaesthetists. http://www.rcoa.ac.uk/system/files/FPM-Transmitter-Spring-2013.pdf
Committee NOTED that North Wales had a robust Acute Pain Network and IJ suggested for SK to link in with the North Wales in terms of future developments.

Action: SK to link in with the North Wales Acute Pain Network (re future developments)

RA Critical Care report
Committee NOTED 4 posts had been advertised this year and 3 had been filled. Committee NOTED there were not enough interview slots last year but this had been adjusted for future recruitment.

Committee NOTED that trainees would now be required to sit a compulsory exam. Committee NOTED the impacts and that a focus on the Welsh trainees having formal training on the curriculum to pass the exam was needed. Committee NOTED that this could prove problematic due to the small number of intensive care medicine
trainees across Wales and that resources would need to be pulled together to deliver the appropriate training in both North Wales and South Wales.

Committee NOTED that there were 5 dates per year when the College provided lectures on the curriculum. Committee NOTED that CT wanted to stream the lectures (facilitated by supervisors) to 2 sites, 1 in North Wales and 1 in South Wales. Committee NOTED the technical issues and financial implications and it was suggested that Wales may be able to fund this. Committee NOTED that this process had been piloted with Scotland and had been successful.

Committee NOTED that Critical Care continued to be well supported by the Deanery in Wales and they had agreed to fund Intensive Care Medicine as a separate specialty in Wales. Committee NOTED paperwork for Intensive Care Medicine trainees was being addressed by the Faculty. Committee NOTED that the maintained level of SPA’s is being discussed by RA’s at a national level with a recommendation of a minimum of 1.5 sessions.

Pain Sub Group Report
Committee NOTED a survey was being conducted on the services in Wales to look at what level of service is delivered for chronic pain and who delivers it. Committee NOTED that the data would be presented at the next Pain Sub Group (17.10.2013) and would be circulated to the RCoA NSAG.

Action: RL / SW to circulate the Pain Survey to RCoA NSAG members.

National Clinical Forum (NCF) update
Committee NOTED that the NCF had been in place for 2 years and was put together by the Local Health Boards prior to the reconfiguration of services across Wales. Committee NOTED that the group consisted of a number of representatives across the health service including the RCoA NSAG and had met monthly to look at the plans that have been put forward for reconfiguration services.

Committee NOTED that in the last 6 months the group had primarily looked at the South Wales Plan and at the last meeting (July) the group formalised a response to the plan. Committee NOTED that the NCF felt that the South Wales Plan was not strong enough and that sustainable services required a 4 centre model and not the proposed 5 centre model proposed. Committee NOTED the plan did not fit with the guidance and there were significant issues with primary care.

Committee NOTED that the South Wales Plan had received a large response to the consultation and that the decision making that was taking place this month had now been delayed to the end of this year. Committee NOTED that there was no indication of the future of the NCF and that most work had now been concluded. Committee NOTED that changes would happen irrespective of the South Wales Plan and that a 4 centre model could be difficult to sustain in terms of the number of trainees likely to be available in the future. Committee DISCUSSED the issues and potential impacts on anaesthesia in detail and AGREED that the current plan was not be sustainable as it did not seem to be strategically planned.

Committee CONSIDERED the lack of communication in relation to reconfiguration and the issues across Wales and if this group needed to highlight their concerns to the CMO. Committee NOTED that IJ had discussed reconfiguration previously with the CMO earlier in the year. Committee DISCUSSED a number of concerns and AGREED it would be useful flag up these concerns at the ARCW committee meeting which would be attended by the CMO.

Action: Reconfiguration to be placed on the ARCW agenda for discussion.

Health Inspectorate Wales Presentation
A presentation from the Health Inspectorate Wales was provided to the RCoA NSAG members on their role and remit within the health service. IJ informed MC of the ACSA process and confirmed that the RCoA NSAG was keen to promote this in departments across Wales in conjunction with the Health Inspectorate Wales. Committee NOTED that the HIW would welcome this and support the RCoA in promoting the process.

Committee NOTED that departments would need to obtain funding for this process. Committee NOTED there was an All Wales Quality & Safety Group chaired by the CMO. Committee NOTED that MC would place this on the agenda to raise recognition and guidance for the funding of this process.

Action: ACSA process to be placed on the All Wales Quality & Safety Group agenda.
Committee NOTED that J-P van B had met with Mike Richards to discuss ACSA. Committee NOTED that they were highly supportive of Colleges due to the costs (£2.5k per trust per year) and would use it as a beacon to other medical professionals in terms of how a peer review can be delivered by Colleges. Committee CONSIDERED the input / observation that HIW could have in the future as it rolls out across departments in Wales.

Committee NOTED that if the HIW required medical advice they would approach the Royal Colleges in Wales and ask them to recommend representatives. Committee AGREED that the College would welcome the request for representation in the future and NOTED that MC would feed this back to the organisation.

Committee NOTED that an Advisory Group was being set up and MC suggested for a representative from the RCoA to sit on the group. Committee NOTED that there was a new Director of Professional Standards and KS asked MC to arrange for the director to contact him.

**Action:** MC to arrange for the Director of Professional Standards to contact KS.

Committee NOTED that the HIW would continue to raise their profile and would engage further with the RCoA in the future.

**Academic Report**
Committee NOTED that the Academic Representative was not in attendance. Committee AGREED for IJ to write to JH regarding attendance at future meetings.

**Critical Care Sub Group Report**
Committee NOTED that TS was not in attendance and a report had not been submitted.

**Specialty Doctor Report**
Committee NOTED that FH was not in attendance and a report had not been submitted. Committee AGREED for IJ to write to FN regarding attendance at future meetings.

**Trainee Issues**
Committee NOTED that GP was not in attendance and a report had not been submitted

**Maternity Services Update**
Committee NOTED that the OAA had issued new guidelines for the provision for maternity services.

**PLG / Lay Representative Report**
Committee NOTED the consideration of the issue of sedation of patients. Committee NOTED that this had been placed on the agenda for discussion as it was an area of concern. Committee NOTED that the RCoA were liaising with the Royal College of Psychiatrists and a meeting had been arranged to produce a position statement around the administration of chemical restraint. Current stance: Anaesthetists should not be involved in the administration of chemical restraint.

**Correspondence**
Committee NOTED that the Code of Practice for the Human Transplantation Act from the report Human Tissue Authority would be circulated (as per Chair Report).

**AOB**
Committee NOTED:
- Thanks to HJ for his work in promoting Anaesthesia in Wales
- Thanks to BR for her support in administrating meetings
- Thanks to KS for his attendance at the meeting

**Date of Next Meeting:** Tuesday 29th April 2014, Cardiff