

MEETING OF COUNCIL

Edited Minutes of the meeting held on Wednesday 20 April 2016
Council Chamber, Churchill House

Items which remain (at least for the time being) confidential to Council are not included in these minutes

Members attending:

Dr L Brennan, President	Dr J-P Lomas
Dr R J Marks	Dr K May
Dr J A Langton	Dr D Bogod
Dr A Batchelor	Dr K Ramachandran
Professor R Mahajan	Dr F Donald
Professor J Nolan	Dr E O'Sullivan
Dr J Colvin	Dr L Williams
Dr N Penfold	Dr R Darling
Dr E J Fazackerley	Dr I Johnson
Dr S Fletcher	Dr D Selwyn
Dr P Kumar	Dr A Hartle
Dr G Collee	

Mr R Thompson, RCoA Lay Committee
Dr A-M Rollin, Clinical Quality Advisor

In attendance: Mr T Grinyer, Mr C McLaughlan, Ms S Drake, Mr R Ampofo, Mr M Blaney, Ms S Larsen, Mr A Woods and Ms A Regan

Apologies for absence: Professor R Sneyd, Dr K Grady, Professor M Mythen, Professor M Grocott, Dr A W Harrop-Griffiths and Dr J Pandit.

PRESENTATION

P/1/2016 Branding Exercise

Mr Stephen Peate, Fabrik's Creative Director, updated Council on the branding exercise. The next step would be for Council members to decide which of the two options presented should be further refined and developed. A decision would not be made during the meeting as Council members would require time to consider the way forward.

Council discussed:

- The importance of a simple brand which did not need explanation.
- The future of the crest:
 - There will always be a requirement for the crest on Fellowship certificates and other formal documents.
 - Cleaning up the crest to ensure it is formatted for print and small screens.
 - Recognising that the crest is the College's heritage and the brand is its present and future. A way has to be found for the two to co-exist.
 - The branding guidelines will clarify when the crest should be used.
 - Whether or not the brand marks presented give the same level of gravitas as the crest.
- The need to consider whether or not either of the brands could be considered unacceptable or resemble another image.
- Which of the images would be the best to keep up to date thus avoiding a repeat exercise in a few years' time.

Council members agreed they were happy to make a decision on the basis of the two options presented. It was agreed Ms Regan would circulate the presentation to Council for further consideration. Council members were asked to e-mail the President with their preferred option.

Action: Ms Regan to circulate presentation to Council for further consideration.

Action: Council members to e-mail the President with their preferred option.

COUNCIL IN DISCUSSION

CID/18/2016 President's Statement

- a) Congratulations were offered to Dr Ramani Moonesinghe upon her appointment as Associate National Clinical Director for Elective Care for NHS England (NHSE).
- b) Congratulations were offered to Dr David Whitaker who has been appointed Chairman of the Royal Colleges and Specialist Societies Subcommittee of the National Blood Transfusion Committee.
- c) Mr Aaron Woods was welcomed to Council. He will join the College as Technology Strategy Programme Director on 16 May 2016.
- d) Following a competitive process, Dr Paul McAndrew has been appointed as non-aligned member of the Governance Review Group.
- e) Dr Taj Hassan has been elected President of the Royal College of Emergency Medicine and will take office in September 2016.
- f) Dr Nicola Strickland has been elected President of the Royal College of Radiologists with effect from September 2016.
- g) This would be Mr McLaughlan's last Council meeting as he is unable to attend the May meeting. The President, on behalf of Council and the College, formally thanked Mr McLaughlan for his loyal service and wise counsel over the past 13 years.
- h) The President announced the deaths of Dr Claire Sheppey, Dr Frank Bennetts, Dr David Conn, Professor Bernard Simpson, Dr John Mather, Dr Margaret Grant and Dr John Lunn. Council stood in memory.
- i) The Privy Council has approved the request to change the ordinances to accommodate the staff and associate specialist (SAS) election term to six plus four years.
- j) NHS Improvement launched formally on 1 April 2016.
- k) The Physician's Assistant (Anaesthesia) (PA(A)) scope of practice and accompanying joint statement from the Presidents of the Royal College of Anaesthetists (RCoA) and Association of Anaesthetists of Great Britain and Ireland (AAGBI) was launched on 18 April 2016. The toolkit document will be jointly launched on 22 April by the RCoA, AAGBI and Association of PA(A)s accompanied by a joint statement from the three Presidents. Thanks were expressed to Dr Collee for his sterling work.
- l) The latest edition of the President's Newsletter had been circulated.
- m) The RCoA had published a statement on the junior doctors' dispute. The statement conveyed some important points including the specialty's concerns about gaps and also the fact that the specialty's skills are not generic.
- n) The Anniversary Meeting and Dinner had gone well with a good turnout and positive feedback from delegates.
- o) The RCoA had hosted a National Mental Health Capacity Action Day.
- p) The President had met with Professor Wendy Reid, Medical Director, Health Education England (HEE). Professor Reid had indicated there would be some money available to support the development of a PA(A) register at the RCoA. There had also been discussion around the funding of increased intensive care medicine posts. It was pointed out to Professor Reid that the funding of intensive care was the responsibility of all specialties, not just anaesthesia.
- q) The President gave a report of the recent Academy of Medical Royal Colleges' (AoMRC) Council meeting. Discussion was dominated by the junior doctors' dispute and attempts to produce a joint statement. Dame Sue Bailey's review has so far been confined to meetings with trainee groups. The AoMRC and Colleges have been advised not to have a formal view

on the EU referendum as it may exceed charity law. The President circulated a letter from HEE regarding legal access to e-portfolios. This will be followed by AoMRC guidance.

- r) A meeting had been held with NHSE. A range of issues were discussed including perioperative medicine commissioning, the junior doctors' dispute and an update on Anaesthesia Clinical Services Accreditation (ACSA).
- s) The President had attended RCoA Advisory Board meetings in Scotland and Wales. Each meeting had been followed by a meeting with the Chief Medical Officer (CMO).
- t) The President had met Professor David Haslam and Ms Sally Chisholm of the National Institute for Health and Care Excellence (NICE). The RCoA agreed to share data from national/local audits on uptake of NICE guidelines.
- u) The President had met with the Secretary of State for Health. Discussion focussed mainly on the junior doctors' strike and whether anaesthesia and intensive care could keep patients safe. The President had pointed out that cross cover is not an option for the specialty and that in smaller hospitals it might not be possible to guarantee the safety of patients with smaller numbers of staff to call upon.
- v) The President and other College Presidents had attended a dinner with Heidi Alexander MP, Shadow Health Secretary. Ms Alexander has accepted an invitation to meet the President and Chief Executive in May.
- w) The members' survey has generated 4859 responses (29%). Initial data will be available for the strategy meeting.
- x) The President updated Council on College staff changes:
 - a. Ms Nicola Wood has been seconded to the role of Silver Jubilee Programme Co-ordinator.
 - b. Mr Steve MacKinlay has left the RCoA.
 - c. Mr Robin Dadswell has joined the IT Department on a short-term basis.
 - d. Ms Rebecca Bruns has given birth to a baby girl.

CID/19/2016 College Strategy Update

Mr Grinyer gave an update on the vision for the RCoA for the short, medium and long term. Ms Drake presented an update on the silver jubilee.

Mr Grinyer presented the latest version of the draft strategy which had been updated following comments from Council. A staff engagement session had resulted in further feedback. Mr Grinyer suggested that if Council was happy with the document to date it be given a final copy edit to ensure it reads well and consistently.

It was noted that the document does not include the wider anaesthesia team and suggested part of the strategy should be to take the whole team forward, especially in light of the PA(A)s register which will be held by the RCoA.

It was suggested that although the document mentions collaboration, it reads as though it refers to collaboration within anaesthesia whereas it should relate to collaboration with other specialties such as medicine and surgery.

Council agreed the strategy should be a living document.

CID/20/2016 Strategy Weekend Agenda

Professor Nolan presented the latest draft of the agenda. The President asked that supporting papers be circulated in sufficient time for attendees to read them in advance.

CID/21/2016 Age and the Anaesthetist

Council agreed to endorse the final draft of an AAGBI Working Party report, Age and the Anaesthetist, which would be published as a standalone issue of *Anaesthesia News*.

CID/22/2016 Access to and Storage of Drugs in Anaesthetic Rooms

Dr Marks presented guidance prepared by a Working Party to look at access to and storage of drugs in anaesthetic rooms. It was noted that it had not yet been approved by the AAGBI. It would also be sent to the College of Operating Department Practitioners and the Association for Perioperative Practice for approval. The intention of the document is to give departments and pharmacists a lever so that if the Care Quality Commission inspects them and raise this point they can point out that the priority is the need to have access to drugs very quickly and therefore it is not desirable for the cupboards to be locked. The Professional Standards Committee had been supportive of the document and noted that it was set out in such a way that it allowed local interpretation as necessary.

Council supported the document.

CID/23/2016 Association of Anaesthetists of Great Britain and Ireland President's Report

Dr Hartle drew Council's attention to the following items in his report:

- *Preparations for Euroanaesthesia 16 in London.*
- *New AAGBI Board members.* Concern was expressed at the reduction in interest in joining the Board.

CID/24/2016 Junior Doctors' Dispute

The President asked Council if there was anything more the RCoA and specialty could do or say in relation to the forthcoming junior doctors' strike.

Council raised the following points:

- Making use of the combined and complimentary strengths of the RCoA and AAGBI had been very successful.
- Media usage of patient safety to create fear amongst the public.
- No-one can give an absolute assurance that everyone will be safe.
- The need to educate people that, particularly in intensive care, consultants work every day.
- The need to consider how to deal with the aftermath of the dispute.
- Foundation Trusts are empowered to set their own terms and conditions. Fragmentation of terms and conditions across the country will mean the end of being able to run an effective and coherent NHS.
- The possibility of targeting a message directly to patients saying that non-training grade anaesthetists will still be working very hard to keep patients safe.
- Whether or not there is an indication of how many junior doctors will strike.
- Trusts' submissions to NHS England about whether they can or cannot maintain services.
- Elective surgery; some Trusts are going ahead as normal whilst others are cancelling large amounts.
- The BMA's next stage of action could potentially be longer strikes.

STRATEGY

S/4/2016 NHS Improvement

The President introduced Dr Kathy McLean, Executive Medical Director, NHS Improvement. Dr McLean gave a presentation on "NHS Improvement: working with the Royal College of Anaesthetists". Dr McLean described the various bodies which have merged into NHS Improvement and how the new organisation will work. Dr McLean was also keen to explore how the RCoA and NHS Improvement could work together and what, if anything, the RCoA would like from NHS Improvement.

The following points were discussed:

- It was suggested another meeting be held to discuss the RCoA's safety and quality improvement work, as well as its leadership support work.

- Development of the National Reporting and Learning System and whether or not it is safe as part of NHS Improvement. Dr McLean assured Council that it is safe and has a statutory role. Dr McLean requested further discussion with the RCoA regarding how to support organisations that are not using the safer surgical checklist effectively. She also proposed a future discussion about theatre efficiency.
- Reassurance that improvement strategies will be formally tested in a pilot study to show that they genuinely achieve the improvement they set out to achieve.
- How to attract applicants for regional medical director posts when it is difficult to recruit trust medical directors.
- Engaging the trainee workforce. Dr McLean explained that there are some clinical fellows who have been doing work on engaging trainee doctors. It was noted that trainees remain engaged on a clinical level; it was engaging them with wider work which is difficult in some areas.
- Whether or not NHS Improvement's agenda include implementation of the AoMRC's report on Quality Improvement Training for Better Outcomes. The RCoA contributed to the report and sees it as key to creating medical engagement. Dr McLean replied that it is not currently engaged in this work but would like to explore it as it would be a valuable piece of work.
- Balancing scrutiny functions with improvement functions.
- Devolved nations. Dr Colvin agreed to provide Dr McLean with a contact in Scotland to find out about its quality improvement work.
- The risk that disengaged trainees will become disengaged consultants which is a huge threat to the opportunity to deliver what the health service needs. Many organisations that will help NHS Improvement to deliver its agenda find that when they advertise for people to be Council members it is more difficult to recruit people because not many organisations are willing to include medical leadership in job planning.
- Dr Batchelor stated that the Faculty of Intensive Care Medicine would be willing to work with NHS Improvement to take some of its agenda forward.

COMMITTEE BUSINESS

CB/36/2016 Council Minutes

The minutes and website minutes of the meeting held on 8 March 2016 were approved.

CB/37/2016 Matters Arising

Review of Action Points

CID/111/2016 President's Statement (m) Following a meeting with Professor Reid, the President received no indication that the Centre for Workforce Intelligence (CfWI) would be a source of fully independent voice on manpower issues

All other actions were completed or are ongoing and will be carried forward.

CB/38/2016 Regional Advisers

There were no appointments this month.

CB/39/2016 Deputy Regional Advisers

There were no appointments this month.

CB/40/2016 College Tutors

Council considered making the following appointments/reappointments (reappointments marked with an asterisk):

Anglia

Dr A Hallett (West Suffolk Hospital) in succession to Dr K A Williams **Agreed**

Oxford

*Dr A Kalla (Milton Keynes University Hospital) **Agreed**

North Thames East

Dr S Lahiri (Royal London Hospital) for Dr C Sheppey **Agreed**

North West

*Dr S Davies (North Manchester General Hospital) **Agreed**

South West Peninsula

Dr K Meikle (Royal Devon & Exeter Hospital) in succession to Dr R A Price **Agreed**

Severn

Dr J Middle (Yeovil District Hospital) in succession to Dr J Kerr **Agreed**

West Midlands South

Dr S Jagannathan (Queen Elizabeth Hospital) in succession to Dr Y Poonawala **Agreed**

CB/41/2016 Head of Schools

There were no notified appointments this month.

CB/42/2016 Training Committee

(i) Chairman of the Training Committee's Update

Dr Penfold reported that ongoing discussions are being held with Regional Advisers regarding their roles and responsibilities. The training committee and intercollegiate acute care common stem (ACCS) committee had each discussed the new contract pay scales and the effect on ACCS trainees. Under the new contract an ACCS trainee in emergency medicine (CT3 year) would earn £48,000 but an anaesthetic trainee in their CT2 year in their third year, if they are called that, would get £37,000. A letter will be sent to Heads of School and Regional Advisers recommending that anaesthetic trainees in the ACCS programme in their third year are labelled as CT3.

As a result of the examinations review and the curriculum review, a few changes have been submitted to the General Medical Council (GMC). The changes have been approved to the Certificate of Completion of Training (CCT) in anaesthesia document. The perioperative medicine and military units have gone to the GMC. The GMC will not be accepting any more curriculum units for a while. It has a working party on generic professional capabilities and another looking at standards of assessment, neither of which is expected to report until the middle of 2017. A reply has been received regarding the examination changes submitted. The GMC accepted two changes proposed but not a third; the move of the barrier to progression for trainees from ST4 to ST5. Examination and Training Committees will discuss the implications of the GMC decision and report back to Council.

(ii) Certificate of Completion of Training

Council noted recommendations made to the GMC for approval, that CCTs/Certificate of Eligibility for Specialist Registration (Combined Programme) [CESR (CP)] be awarded to those set out below, who have satisfactorily completed the full period of higher specialist training in anaesthesia. The doctors whose names are marked with an asterisk have been recommended for Joint CCTs/CESR (CP) s in Anaesthesia and Intensive Care Medicine.

Anglia

Dr Shilpi Ashok Pilkington

Dr Jonathan David Veitch

East Midlands

Nottingham

Dr Vijayendra Koramangala

Chikkabbaiah #

Dr Srinivas Magham

East of Scotland

Dr Jenny Kaarina Parsons #

KSS

Dr David Richard Helm*

**London
Imperial**

Dr Shona Margaret Love
Dr James Timothy Edward Cremin
Dr Nazril Afsham Nordin
Dr Sunil Arora
Dr Rajinder Singh Chaggar

North Central

Dr Marc David Wittenberg
Dr Maria Koutra
Dr Michael David Spiro*
Dr Jonathan Douglas Mathers

Barts and the London

Dr Alice Kim Carter*
Dr Andrew Daniel Aswani*

South East

Dr Rebecca Claire Campbell

St George's

Dr Gerard Jean Sinovich
Dr Fuhazia Arif*

Northern Ireland

Dr Conor Lamb
Dr Lloyd Robin Turbitt
Dr Aidan Michael Peter Campbell #

North West

Dr Jennifer Claire Oldridge
Dr Roger Nicholas Grimshaw
Dr Sailakshmi Murugesan #
Dr Jessica Alison Longbottom

South West Peninsula

Dr Gemma Victoria Crossingham

Tri Services

Dr Ben Taylor

Wessex

Dr Samantha Kate Allen

West Midlands**Stoke**

Dr Martin Peter Anthony Steynor

West of Scotland

Dr Pamela Joanne Sandra Milligan
Dr Karina Margaret Dick #
Dr Laura Catherine Strachan*

Yorkshire and Humber**Leeds**

Dr Michael McCooe
Dr Saibal Ganguly*

Sheffield

Dr Pavan Kumar Battu
Dr Elizabeth Helen Speirs

CB/43/2016 Education Committee

The Chairman, Professor Nolan, presented the minutes of the meeting held on 8 March 2016, drawing Council's attention to the following:

- *EC150520.4 I Increasing use of Twitter to manage questions during selected events*
- *EC160308.8 II Jubilee Anniversary Meeting 2017*
- *EC160308.7 I Ve Joint Royal Society of Medicine/RCoA Event, 30 March 2017*
- *EC150917.6 Traffic light system*
- *EC160308.5 III Webcasting and social media*
- *EC160308.7 IIlg RCoA Silver Jubilee TED (Technology, Entertainment and Design) talks*

CB/44/2016 Examinations Committee

Council approved the motion as listed under M/18/2016.

CB/45/2016 Anaesthesia Related Professionals Committee

The Chairman, Dr Collee, presented the minutes of the meeting held on 25 February 2016, drawing Council's attention to the following:

- *ARPC/04/2016 e-Learning Pathway. An e-learning module for PA(A)s is now available on the Association of PA(A)s website.*
- *ARPC/05/2016 Dr Collee will attend a meeting to discuss how to formulate the RCoA register of PA(A)s.*

- *ARPC/07/2016* At the beginning of May Dr Collee will meet HEE to discuss how to integrate PA(A)s into the plans for registration and regulation of all non-medically qualified clinical personnel.

CB/46/2016 Equivalence Committee

It was agreed that the RCoA should know more about career progression for applicants who are awarded a CESR. Council agreed that Mr Chris Scorer should email successful applicants to ask how they have got on since being awarded a CESR.

A letter had been received from a Regional Adviser suggesting that CESR applicants did not have to demonstrate the same standard of training as trainees with numbered posts in anaesthesia. Dr Collee suggested that Regional Advisers should have more involvement with the process. It was suggested that the RCoA could issue advice on the website stating that those applying for a CESR would be well advised to discuss their application with the Regional Adviser if they have access to one. Council agreed this course of action. A short presentation regarding the CESR process will be given at the next Regional Advisers' meeting. It was suggested that the applicant's College Tutor could be included as one of their references.

CB/47/3016 National Institute of Academic Anaesthesia (NIAA)

Ms Drake presented the minutes of the Board and Research Council meetings held on 4 February 2016, drawing Council's attention to:

- *NIAAB/02.2016/6 Governance*
- *NIAAB/02.2016 Clinical Trials Network* The Clinical Trials Network launched on 14 April 2016. One of its first outputs is an interactive website.
- *NIAAB/02.2016/4 NIAA Annual Scientific Meeting*
- *Intercalated BScs* 15 applications were received. It will be interesting to track whether or not successful applicants go into research later on or undertake a career in anaesthesia.

CB/48/2016 Lay Committee

The Chairman, Mr Thompson, presented the minutes of the meeting held on 7 March 2016, drawing Council's attention to the following:

- *LCFULL/6/2016 Recruitment* Thirteen applicants were interviewed, of which eight were appointed.
- *LCFULL/5/2016 Conversations about dying* The reluctance amongst the Lay Committee to discuss this was felt to be symptomatic of society. It was noted that Dr Collee would introduce a discussion on end of life care and the anaesthetist's role at the strategy meeting. The AoMRC has chosen one of the Faculty of Intensive Care Medicine's suggestions for Choosing Wisely which is related to recognising when to offer a patient palliative care rather than active treatment. Professor Grocott will chair a working party on end of life care.
- *LCFULL/4/2016 Putting the Communications Paper into Practice*

CB/49/2016 Audit and Internal Affairs Committee

Council was asked to agree the process and timetable for this year's nominations and elections for College Officers as presented by Professor Nolan and Mr Grinyer. The President and Vice-Presidents excluded themselves from the discussion due to conflict of interest.

Professor Nolan asked Council to agree what constituted a short statement, noting that the preference of the majority of the Audit and Internal Affairs was no more than one side of

A4. Council was also asked to consider whether candidates should be given the option of not to submit a statement. The majority of Council members agreed that up to 500 words should be permitted.

It was suggested the process should state the minimum number of Council members voting to ensure a quorum. Ten Council members are required for a meeting to be quorate. It was suggested this could be looked at as part of the governance review. Council could however to set an informal threshold amongst themselves for this election and agreed that the threshold should be 20.

Council approved the timetable.

CB/50/2016 Royal College of Anaesthetists' Advisory Board for Scotland

The Chairman, Dr Colvin, presented the minutes of the meeting held on 22 March 2016, drawing Council's attention to the following:

- *2 Scottish Board election* The election had seen the highest turnout in a Scottish Board election. Dr Alastair Thomson was elected.
- *6 Workforce Planning*
- *Communication with Fellowship in Scotland* Dr Karen Pearson and Dr Malcolm Daniel have been working on this. A brief communication was put out following the Scottish Board meeting and Dr Pearson is working on a regular newsletter for the trainee network in Scotland.
- Dr Sarah Ramsay will succeed Dr Daniel as Honorary Secretary.
- *Training numbers* NHS Education Scotland are working on increasing national training numbers across specialties to compensate for out of programme activity and the contribution from less than full time training. There is an explicit policy in Scotland to retain the ability to have locum appointment – training (LAT) posts.

Dr Colvin presented the notes of a meeting with the CMO. Items discussed included:

- The CMO's Annual Report, *Realistic Medicine* The Board will develop a formal response in support of implementation of *Realistic Medicine*.
- Quality and safety work and the need to connect critical incident reporting into Scotland.
- Anaesthesia clinical services accreditation (ACSA)
- Workforce
- Intensive care medicine training

CB/51/2016 Royal College of Anaesthetists' Advisory Board for Northern Ireland

The Chairman, Dr Darling, presented the minutes of the meeting held on 15 March 2016, drawing Council's attention to the following:

- *5(i) CPD Study Day*
- *10 Trainee Representative Business*
- *5(ii) The Bengoa Review*
- *5(iii) Clinical Excellence Awards*
- *Workforce Planning* Expansion in intensive care medicine trainees has been mooted to be at the expense of anaesthesia trainees.
- *5(iv) Human Transplantation Bill Northern Ireland*
- *5(vi) National Emergency Laparotomy Audit*
- *6(i) Pre Hospital Emergency Medicine*
- *7 College of Anaesthetists of Ireland*

MATTERS FOR INFORMATION

I/18/2016 Financial Training

Mr Blaney gave a training session on management accounts to annual accounts. Dr Collee requested a detailed analysis of the cost of running courses to enable Council to discuss how the RCoA finances the courses it runs. Mr Blaney agreed to circulate a detailed analysis to Council so members could discuss it at the May meeting.

Action: Mr Blaney to circulate a detailed analysis of the cost of running courses.

I/19/2016 Clinical Quality Directorate Enquiries

Council received, for information, a list of enquiries received by the Clinical Quality Directorate.

I/20/2016 Publications

Council received, for information, the list of publications received in the President's Office.

I/21/2016 Consultations

Council received, for information, the list of current consultations.

I/22/2016 New Associate Fellows, Members and Associate Members

Council noted, for information, the following:

Associate Member:

Dr Ruth Olwen Lucy Ugochukwu – Hull Royal Infirmary

To receive for information, the following doctors have been put on the Voluntary Register:

Dr Anushka Dilani Mudalige – Leicester General Hospital
Dr Manjeet Prakash Save – Barnet & Chase Farm (Royal Free NHS Trust)
Dr Parvez Sultan Lala – St James University Hospital, Leeds
Dr Vineetha Subba Karadka – The Leeds Teaching Hospital NHS Trust
Dr Mayur Purushottam Manwatkar – Barnet Hospital
Dr Piyusha Ama Jayawardhana – Leicester General Hospital
Dr Chinthaka Sandun Warusawithararna – Leicester General Hospital
Dr Zaid Saghir Ahmed – St James's Hospital, Leeds
Dr Anupama Shriram Joglekar – Calderdale and Huddersfield NHS Trust
Dr Manoj Kumar Sanwal – Freeman Hospital

Membership Progression

Associate Fellow:

Dr Sanjay Kumar Agarwal – Hereford County Hospital

Members:

Dr Wazir Salamut – FRCA Primary
Dr Stephen Manning – FRCA Primary
Dr Anne Louisa Ormandy – FRCA Primary

Associate Members:

Dr Nicholas Souter – Hospital unknown
Dr Jiten Mistry – Hospital unknown
Dr Gabriella Wong – Hospital unknown
Dr Melanie Victoria Watson – Hospital unknown.

PRESIDENT'S CLOSING STATEMENT

PCS/4/2016

a) The President had nothing further to raise.

MOTIONS

M/16/2016 Council Minutes

Resolved: That the minutes and website minutes of the meeting held on 8 March 2016 be approved.

M/17/2016 College Tutors

Resolved: The following appointments/reappointments were approved (reappointments marked with an asterisk):

Anglia

Dr A Hallett (West Suffolk Hospital) in succession to Dr K A Williams

Oxford

*Dr A Kalla (Milton Keynes University Hospital)

North Thames East

Dr S Lahiri (Royal London Hospital) for Dr C Sheppey

North West

*Dr S Davies (North Manchester General Hospital)

South West Peninsula

Dr K Meikle (Royal Devon & Exeter Hospital) in succession to Dr R A Price

Severn

Dr J Middle (Yeovil District Hospital) in succession to Dr J Kerr

West Midlands South

Dr S Jagannathan (Queen Elizabeth Hospital) in succession to Dr Y Poonawala

M/18/2016 Examinations Committee

Resolved: That the following examiner extends their term of examinership by one year to August 2017:

Dr David Hett, Final FRCA Examiner