

MEETING OF COUNCIL

**Edited Minutes of the meeting held on Wednesday 8 January 2014
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 J-P van Besouw, President
Dr D M Nolan
Dr L Brennan
Dr H M Jones
Professor J R Sneyd
Dr A Batchelor
Dr K Grady
Professor D J Rowbotham
Dr P Venn
Dr D Whitaker
Dr R Verma
Dr R J Marks

Dr T H Clutton-Brock
Dr J Nolan
Dr J A Langton
Dr V Ramana Alladi
Dr S Gulati
Dr E J Fazackerley
Dr S Fletcher
Professor M Mythen
Dr J R Darling
Dr I Johnson
Dr M Nevin
Dr W Harrop-Griffiths

Mrs I Dalton, RCoA Patient Liaison Group
Dr A-M Rollin, Professional Standards Advisor

In attendance: Mr K Storey, Mr C McLaughlan, Ms S Drake, Mr R Bryant, Ms A Regan, Ms H Brennan and Ms M Krech.

Apologies for absence: Professor R Mahajan, Dr P Kumar, Dr J Colvin and Dr N Penfold.

COUNCIL IN DISCUSSION

CID/01/2014 President's Opening Statement

1. Dr Rollin was congratulated following her receipt of an MBE in the New Year Honours List. The President was pleased to report that another anaesthetist, Dr Robert Linton, had also received an MBE.
2. The President reported that Professor Sue Bailey had received a DBE and Dr Jane Barrett an OBE in the New Year Honours list.
3. The President announced the deaths of Dr H Michael Nanayakkara, Dr Raymond Saunders, Dr Peter Roffee and Dr Mark Tong. Council stood in memory.
4. The President had been in correspondence with Oxford NHS Trust regarding its unilateral decision to put consultants on a 9+1 contract. The President had expressed the Royal College of Anaesthetists' (RCoA) view that this would be detrimental to consultant development within the trust. The response, which the President agreed to circulate to Council, stated that it was an ongoing discussion between the trust, the RCoA and other Colleges, and the Academy of Medical Royal Colleges (AoMRC). Although a contractual issue, from the College perspective there was concern about consultants not being permitted to do work for the wider National Health Service (NHS). The AoMRC would discuss with the British Medical Association (BMA) how the BMA should take the matter forward in contract negotiations. Dr Whitaker stated that it should be taken to the highest level, adding that there was a precedent in that particular trust of successful appeal against a 7.5-2.5 contract which achieved extra PA for Council duties. The President highlighted that of even greater concern was the suggestion that doctors should undertake such activities in

their own time. Dr Venn asked if the RCoA had a position statement on the contracting process in terms of what it would want to see. If so, it could be incorporated into Anaesthesia Clinical Service Accreditation (ACSA). Mr McLaughlan replied that the RCoA and Association of Anaesthetists of Great Britain and Ireland (AAGBI) had issued a joint statement stipulating the minimum required for revalidation purposes. There was also a statement from the AoMRC. Dr Langton was concerned about the effect of this attitude on the behaviour of future consultants and their engagement with national work. The President explained that the thrust of the argument was that consultants were employed by the Trust to work for the benefit of the Trust. Dr Fazackerley asked if the RCoA knew how the 9+1 was worked. Mr McLaughlan responded that some 9+1 contracts only included six clinical sessions. Dr Brennan highlighted that if younger consultants are not permitted to get involved in roles such as educational supervisors with appropriate supporting professional activity (SPA) time then it would not be possible to develop leadership skills required at a local and national level; this should be made clear to the Department of Health (DH). Dr Jones asked what the view of the local dean was regarding clinical supervision and assessment of trainees and all those activities which support trainees being appointed in Oxford. Dr Jones suggested using the deanery's access to the General Medical Council (GMC) to make the point. Dr Johnson added that trainees would be unable to stay there if there was no-one to supervise them. The President pointed out that the problem was not confined to anaesthesia. Professor Rowbotham explained that the real cut in funding in the NHS the next year would mean there was no money to pay for this; it was a situation which would require the RCoA to be proactive. Dr Nevin stated that the RCoA needed a strong view on the issue adding that Sir Bruce Keogh's letter about work for the wider NHS was being disregarded by Trusts.

5. Lord Kakkar had sought the RCoA's support in pursuing a joint initiative between UK Trade and Investment (UKTI) and the DH for the NHS to export its intellectual property to the Indian subcontinent. The President had expressed the RCoA's willingness to support the initiative and a meeting would be arranged to explore the matter further.
6. A recent Daily Telegraph article on the shortage of Emergency Medicine (EM) consultants had inferred that medical students opted for specialties such as general practice and anaesthesia that let them take on more lucrative private work. The President and President of the AAGBI had written a response refuting this.
7. Professor Richard Collin had written to thank the President for his condolences following the death of his wife Dr Geraldine O' Sullivan.
8. The safe and sustainable paediatric cardiac review had been rebadged as the Congenital Heart Disease Clinical Advisory Panel. The President had agreed to join the panel with Dr Whitaker as his deputy.
9. Dr Marks reported that the GMC was content for the RCoA to roll out its patient feedback form. The GMC had agreed the removal of the statement "I am happy that my doctor will keep information about me confidential" which had been criticised by patients and doctors. The RCoA's guidance on patient feedback would be updated. The President congratulated Dr Marks and those involved with the work.
10. Members of College staff would attend Council in the forthcoming months to gain an insight into Council's work.
11. Council members, who had not already done so, were asked to reply to the invitation to the President's Dinner as soon as possible. Mr Storey emphasised the importance of having sufficient Council members present to host guests.
12. The President updated Council on staff changes:
 - a. Ms Odette Lester had left the College to emigrate to America with her husband. The President acknowledged Ms Lester's contribution to the ACSA project.
 - b. Ms Emily Young had been appointed Quality and Safety Supervisor.
 - c. MS Afsana Choudhury had been appointed Workforce Planning Co-Ordinator.
 - d. Mr Tony Roche had joined the College Training Team as Training Team Administrator.

CID/02/2014 Position Statement on the Involvement of Anaesthetists in Restraint Teams

Dr Brennan presented a statement which had been endorsed by the Royal College of Psychiatrists (RCPsych).

Dr Venn suggested the removal of "Such situations should be managed according to the relevant local policy".

Dr Jones suggested an additional bullet point stating that there should be a review process for each time an incident occurs. Dr Brennan responded that the DH was consulting on restraint policies in general; one of the points suggested was a debriefing process.

Dr Marks commented that the second bullet point was ambiguous and "except in extraordinary circumstances" should be removed. Dr Marks also asked whether or not the drugs one should use should be included. Dr Brennan responded that advice on drugs had been deliberately omitted as this would be defined by local protocols. Dr Brennan agreed to remove "except in extraordinary" circumstances.

Dr D Nolan highlighted the need to be cautious about how the recommendations might be adopted in environments without the right expertise.

Dr Fazackerley stated that point 5 should say the "presence of trained assistance for the anaesthetist" instead of "access to assistance for the trained anaesthetist".

Dr Grady suggested the statement should be more explicit about what is meant by mental health care involvement. The statement should expect consultant involvement from psychiatry too in view of the underlying consent issue.

Professor Mythen pointed out that a trainee would rarely have the time or opportunity to call a consultant before acting. Dr Brennan agreed to include a sentence clarifying that the guidance was not written for emergency situations where behaviour is life threatening to the patient or others.

Dr Brennan requested that the consultation on Minimisation and Alternatives to the use of Restrictive Practices be sent to Council for comment.

CID/03/2014 Association of Anaesthetists of Great Britain and Ireland President's Report

Dr Harrop-Griffiths had nothing to report.

COMMITTEE BUSINESS

CB/1/2014 Council Minutes

The minutes of the meeting held on 11 December 2013 were approved with minor amendments.

Dr Marks reminded Council that Council minutes were published on the website and removed after one year. Council was asked to consider whether or not they should be published and whether or not they should be available for longer than one year. Council was asked to e-mail comments to Dr Marks.

CB/2/2014 Matters Arising

(i) Review of Action Points

CID/61/2013 Obstetric Anaesthesia Update Dr Verma reported that it was likely that representatives of the devolved nations would be invited to join the NHS Women's Health England Patient Expert Group.

CB/3/2014 Regional Advisers

There were no appointments/re-appointments this month.

CB/4/2014 Deputy Regional Advisers

Council considered making the following appointment:

Wessex

Dr J Chambers in succession to Dr J Onslow **Agreed**

CB/5/2014 College Tutors

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

North West

Dr R Morley (Royal Manchester Children's Hospital) 2nd College tutor post created September 2013 Council. **Agreed**

East of Scotland

Dr C L Beecroft (Ninewells Hospital and Medical School) in succession to Dr F Cameron **Agreed**
Dr C J Weir (Ninewells Hospital and Medical School) 2nd College tutor post created September 2013 Council. **Agreed**

Wales

Council noted that Dr Burnell has resumed as College Tutor (Ysbyty Gwynedd, Bangor) Dr J Walker has been Acting Tutor (September 2013 Council).

West of Scotland

Dr C L Harper (Southern General Hospital) in succession to Dr D Varveris **Agreed**

KSS

Dr K J D Stannard (Maidstone & Tunbridge Wells NHS Trust) in succession to Dr M Howells **Agreed**

West Midlands South

Dr N A Osborn (Heartlands Hospital) in succession to Dr M Bieker **Agreed**

CB/6/2014 Head of Schools

There were no appointments for Council to note.

CB/7/2014 Training Committee

(i) Chairman of the Training Committee's Update

Dr Fazackerley had nothing to report in Dr Penfold's absence.

(ii) Certification 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.

London

South East

Dr Naveen Canchi-Murali
Dr Ulka Paralkar
Dr Anneliese Rigby
Dr Marilyn Lowings

North Central

Dr Joanna Makepeace

St. George's

Dr Julie O'Neill

Mersey

Dr Sapna Girdharilal
Dr Alun Roberts *
Dr Senthil Jayaseelan
Dr Timothy Astles *

North West

Dr Zara Townley

Northern Ireland

Dr Joseph Jijin Chackuvail
Dr Yasmin Nawaz
Dr Denise White

Oxford

Dr Vipul Jain
Dr Paul Hughes-Webb

Wessex

Dr Beena Parker

West Midlands

Birmingham

Dr Dewi Hughes

Stoke

Dr Nehalbhai Patel *
Dr Yat Li

Warwickshire

Dr Mohan Ramamoorthy
Dr Antonia Mayell

Scotland

North Scotland

Dr Bhushan Joshi
Dr Robert Lendrum

West Scotland

Dr Euan Black *

Yorkshire

West Yorkshire (Leeds/Bradford)

Dr Vijay Nadella

East Yorkshire (Hull/York)

Dr James Walkington
Dr Jamie Biddulph

South Yorkshire (Sheffield)

Dr Amy Thomas

CB/8/2014 Examinations Committee

Council received and considered the minutes of the meeting held on 26 November 2013 which were presented by Dr D Nolan who drew Council's attention to the following:

- *EX47/13 Disability Policy.*

Professor Sneyd noted that Council was being asked to approve an extension to the term of office of a number of examiners. He felt that a review of examiner numbers, tenure and duration should be undertaken. The President pointed out that in the cohort concerned 20-25 examiners were appointed and the current situation reflected the churn in examiners. Mr Bryant reminded Council that the Examinations Committee had agreed to increase the cohort but it would take a number of years to get the right balance of experienced examiners for the Final

FRCA and new examiners for the Primary FRCA. Mr Bryant added that appointing directly to the Final FRCA would be considered as part of the examinations review.

Council agreed that the Disability Policy (Appendix A) be added as Appendix 9, to the Primary and Final FRCA Examination Regulations, November 2013, with immediate effect.

Council agreed that Paragraph 31 of the Examination Regulations be amended to read:
"The College is committed to ensure that all candidates have equal opportunity to demonstrate their ability in all FRCA examinations and will make reasonable adjustments to examination arrangements as appropriate for individual disabled candidates. The definition of 'disability' and 'reasonable adjustment' under the Equality Act 2010 and the procedure to follow for candidates seeking examination adjustments are set out at Appendix 9 of these regulations."

Council agreed that the following examiners should extend their term of examinership by one year to August 2015:

Dr Jane Bembridge
Dr Campbell Edmondson
Dr Alex Patrick
Dr Mike Wilkinson
Dr Craig Bailey
Dr Andrew Lumb
Dr Debbie Nolan
Dr Tim Smith
Dr Mike Tremlett

Council agreed that the following examiners should extend their term of examinership for one further year, completing 12 years in total to August 2015:

Dr Anthony Turley
Dr Denise Stott (LTFT basis)

Council agreed that the following examiner should continue examinership for one year to August 2015, following her retirement from clinical practice:

Dr Pauline Stone

Council agreed that the following examiner would continue to complete 10 years under his original examinership agreement, whilst working only in private practice, providing he continued to be revalidated and appraised:

Dr Patrick Magee

Council agreed that the Fellowship be awarded to those who were successful at the December 2013 Final Examination.

Council agreed that the under-mentioned doctor be awarded the Magill Prize for performing at the level of distinction in all sections of the Final examination at his first attempt at the December 2013 sitting of the Final FRCA.

Dr Toby Edward Dudbridge Reynolds – Whipps Cross Hospital, London.

CB/9/2014 Faculty of Pain Medicine

This item was deferred until March 2014 at the Dean's request.

CB/10/2014 Equivalence Committee

Council received and considered the minutes of the meeting held on 12 December 2013 which were presented by the Chairman, Dr Fletcher. One application was reviewed which was not supported.

CB/11/2014 Patient Liaison Group

(i) Proposal for Changes to the Structure of the Patient Liaison Group

Mrs Dalton presented to Council a proposal for changes to the structure of the Patient Liaison Group (PLG). The President stated that paragraph one relating to extension of the Chairman's term of office should be at Council's discretion, not the President's discretion.

Mrs Dalton informed Council that discussions were also ongoing about the PLG's name; it did not undertake much liaison with patients and not everyone on the PLG had necessarily been a patient.

Council approved the paper subject to the agreed change.

(iii) Minutes

Council received and considered the minutes of the meeting held on 10 December 2013 which were presented by the Chairman, Mrs Dalton, who drew Council's attention to the following:

- *PLG/32/2013 Should the RCoA have an Ethics Committee.*
- *PLG/35/2013 Centralisation of Specialist Services.* Dr Brennan suggested that this be fed into the AoMRC's Patient Group.
- *PLG/36/2013 Subject Leads.*

The President asked for an update on recruitment. Mr McLaughlan informed Council that shortlisting would take place this week.

CB/12/2014 Professional Standards Committee

The Chairman, Dr Venn, gave a verbal update of the meeting held on 3 December 2013 as the minutes were not available. The Committee was working closely with quality assurance initiatives from the AoMRC.

The DH had published a report in November regarding cosmetic surgery. The report recommended that the Royal College of Surgeons of England (RCSEng) should convene a working group involving all other stakeholders. Dr Venn had been informed by the RCSEng that the RCoA's input was not deemed necessary as the working group would focus on training.

The National Confidential Enquiry into Patient Outcome and Death (NCEPOD) *An Age Old Problem* Working Party had reached a position statement with five bullet points which would be built into ACSA to improve the care of elderly people in hospital. Dr Venn hoped that the Working Party would build on that and make recommendations in the public domain this year.

Dr Brennan would scrutinise evidence regarding Morbidity and Mortality meetings and would present it to the President's Meeting and Council.

The 2014 revision of *Guidelines for the Provision of Anaesthetic Services (GPAS)* had been delivered on time and to budget.

MATTERS FOR INFORMATION

I/1/2014 Publications

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

I/2/2014 Consultations

Council received, for information, the list of current consultations. Professor Mythen strongly recommended that Council members look at the NHS England Research and Development Strategy Consultation.

I/3/2014 New Associate Fellows, Members and Associate Members

Council noted, for information, the following:

New Member

Kandasamy Bharathi – RCSI Primary

Membership Category Progression

Associate Fellow

Dr Anita Maria Szabo-Barnes – University Hospital of South Manchester

Members

Dr Niko Van De Velde - Primary of the RCoA

Dr Claire Burnett - Primary of the RCoA

Dr Vijay Kumar Venkatesh - Primary of the RCoA

Dr Judith Alison Nieman – FRCA Primary

Dr Shalini Nalwad – RCSI Final

Associate Member

Dr Jill Sarah Cochrane – Hospital Unknown

PCS/1/2014 PRESIDENT'S CLOSING STATEMENT

1. Dr Marks asked Council to check the links page on the RCoA's website and inform him of any links which should be added or removed.
2. Council members were asked to inform Ms Drake if they would be able to chair a session at the Anniversary Meeting.
3. Dr Jones asked for an update regarding the Co-operative Bank. Mr Storey replied that all of the RCoA's deposits had been moved although the current account remained with the Co-operative. This would be discussed further by the Finance Committee in February.
4. The President and Mr Storey had discussed the strategic aims for 2014. They would be brought to Council for further consideration.

MOTIONS TO COUNCIL

M/1/2014 Council Minutes

Resolved: That the minutes of the meeting held on 11 December 2013 be approved subject to minor amendments.

M/2/2014 Deputy Regional Adviser

Motion: That the following appointment be approved:

Wessex

Dr J Chambers, Deputy Regional Adviser, to succeed Dr J Onslow

M/3/2014 College Tutors

Resolved: That the following appointments and re-appointments be approved (re-appointments marked with an asterisk):

North West

Dr R Morley (Royal Manchester Children's Hospital)

East of Scotland

Dr C L Beecroft (Ninewells Hospital and Medical School)

Dr C J Weir (Ninewells Hospital and Medical School)

Wales

*Dr Burnell has resumed as College Tutor (Ysbyty Gwynedd, Bangor)

West of Scotland

Dr C L Harper (Southern General Hospital) in succession to Dr D Varveris

KSS

Dr K J D Stannard (Maidstone & Tunbridge Wells NHS Trust) in succession to Dr M Howells

West Midlands South

Dr N A Osborn (Heartlands Hospital) in succession to Dr M Bieker

M/4/2014 Examinations Committee

Resolved: That the Disability Policy (Appendix A) be added as Appendix 9, to the Primary and Final FRCA Examination Regulations, November 2013, with immediate effect.

Resolved: That Paragraph 31 of the Examination Regulations to be amended to read:

"The College is committed to ensure that all candidates have equal opportunity to demonstrate their ability in all FRCA examinations and will make reasonable adjustments to examination arrangements as appropriate for individual disabled candidates. The definition of 'disability' and 'reasonable adjustment' under the Equality Act 2010 and the procedure to follow for candidates seeking examination adjustments are set out at Appendix 9 of these regulations."

Resolved: That the following examiners extend their term of examinership by one year to August 2015:

Dr Jane Bembridge

Dr Campbell Edmondson

Dr Alex Patrick

Dr Mike Wilkinson

Dr Craig Bailey

Dr Andrew Lumb

Dr Debbie Nolan

Dr Tim Smith

Dr Mike Tremlett

Resolved: That the following examiners extend their term of examinership for one further year, completing 12 years in total to August 2015:

Dr Anthony Turley

Dr Denise Stott (LTFT basis)

Resolved: That the following examiner continues examinership for one year to August 2015, following her retirement from clinical practice:

Dr Pauline Stone

Resolved: That the following examiner would continue to complete 10 years under his original examinership agreement, whilst working only in private practice, providing he continued to be revalidated and appraised:

Dr Patrick Magee

Resolved: That the Fellowship be awarded to those who were successful at the December 2013 Final Examination.

Resolved: That the under-mentioned doctor be awarded the Magill Prize for performing at the level of distinction in all sections of the Final examination at his first attempt at the December 2013 sitting of the Final FRCA.

Dr Toby Edward Dudbridge Reynolds – Whipps Cross Hospital, London.