

MEETING OF COUNCIL

**Edited Minutes of the meeting held on Wednesday 13 January 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 R Alladi
Dr R J Marks	Dr E J Fazackerley
Dr J A Langton	Dr S Fletcher
Professor R Sneyd	Dr P Kumar
Dr A Batchelor	Dr G Collee
Dr K Grady	Dr J-P Lomas
Professor R Mahajan	Dr A W Harrop-Griffiths
Dr R Verma	Dr J Pandit
Dr T Clutton-Brock	Dr K May
Professor J Nolan	Dr I Johnson
Dr J Colvin	Dr H McLure
Dr N Penfold	

Mr R Thompson, RCoA Lay Committee

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

Apologies for absence: Dr J-P van Besouw, Dr P Venn, Professor D Rowbotham, Professor M Mythen, Dr R Darling, Dr D Selwyn, Dr A Hartle and Dr A-M Rollin

STRATEGY

S/1/2016 Strategy

Ms Samantha Jones, Director, New Care Models Programme gave a presentation on the care model programme and the vanguards which are designed to be at the forefront of designing the new National Health Service (NHS).

Council discussed:

- How to reassure those delivering healthcare that the programme is not just about identifying ways of doing things more cheaply. Ms Jones responded that the way care and services are delivered is not right for the future. Basing delivery around prevention, care and quality, and efficiency would ensure the focus was on doing things better. The fact that the vanguards are clinician designed and led, with a national body removing the barriers, will minimise the chance of the focus just being about money.
- The barriers imposed by existing structures thus preventing truly integrated healthcare.
- Overcoming problems caused by disengagement between clinicians and middle management. Ms Jones asked whether the relationship was worse than ever or whether people just speak more openly. Ms Jones challenged Council members to support people locally to recognise the leadership aspect rather

than assuming that every manager is just out for the money. In addition managers should involve clinicians in future planning.

- The challenge of scaling up the project to national level and the effects of the involvement of other groups such as politicians. Ms Jones explained that rather than being scaling up, it is about networks working together, local relationships, local discussions, and junior doctors, consultants and managers all working together.
- A Council member's lack of awareness of a vanguard in their own area. Ms Jones suggested the Council member should speak to their medical director and chief executive asking why it had taken attendance at a Council meeting to find out. Ms Jones asked to be informed of the response.

Ms Jones asked Council to consider how her team could support the College and its members to get involved and shape and design the new care models.

COUNCIL IN DISCUSSION

CID/1/2016 President's Statement

- a) The President welcomed Dr Abrie Theron, Vice-Chair, Royal College of Anaesthetists' (RCoA) Advisory Board for Wales.
- b) Congratulations were offered to those recognised in the New Year Honours list 2016:
 - i. CBE, Professor Keith Willett
 - ii. OBE, Dr Dan Martin, Mr Martin Bromiley and Professor Stephen Smye
 - iii. BEM, Dr Darren (Ron) Daniels
 - iv. Order of Merit, Lord Darzi
- c) Mr Charles Winstanley will succeed Mr Walter Merricks as Chair of the Board of Trustees of the Academy of Medical Royal Colleges (AoMRC), with effect from 1 April 2016.
- d) A perioperative diabetes study, led by Dr Nick Levy, has been shortlisted by the National Confidential Enquiry into Patient Outcome and Death (NCEPOD) as a possible future study.
- e) Dr Brendan McGrath has been awarded a Health Foundation quality improvement award over three years for improving tracheostomy care.
- f) The President announced the deaths of Dr Peter Thompson, Dr Laurence Langdon-Herring, Dr Patricia Painter, Dr Patricia MacKay and Professor Tess Cramond. Council stood in memory
- g) The President reminded Council that tabling papers was unacceptable and did not allow sufficient time for scrutiny by Council members.
- h) The AoMRC has issued a statement before the junior doctors' strike action. ACAS has called on both sides to reconvene talks. It is hoped that a negotiated settlement can now be reached.
- i) The revised committee list has been circulated. Chairmen were asked to look at terms of reference and lines of accountability in light of changes to the College structure.

Action: Committee Chairmen to look at terms of reference and lines of accountability in light of changes to the College structure.

- j) The President was aware of some Advisory Committee on Clinical Excellence Awards (ACCEA) results although they have not yet been published. There was anecdotal evidence of award withdrawals. The results will be circulated to Council when published.

Action: Ms Regan to circulate ACCEA results to Council.

- k) The first meeting has taken place of a subgroup of the Training Committee to look at undergraduate experience and exposure to anaesthesia in the undergraduate curriculum. The subgroup's aim is to establish a network of leads in medical schools. The first piece of work will look at the state of play of anaesthesia in the undergraduate field to develop a framework document for undergraduates in anaesthesia. This will advise what should be included in the anaesthesia undergraduate curriculum and will be linked to the General Medical Council's (GMC) *Outcome for Graduates*. The subgroup will also work towards an engagement event for undergraduate trainers. The President asked Professor Sneyd to work with the group to ensure the work was presented in such a way that it would gain traction with the Medical Schools Council.

Action: Professor Sneyd to work with subgroup to ensure the work is presented in a way which will gain traction with the Medical Schools Council.

- l) The Northern Ireland and Scottish Board elections would close later in the day. At the time of the Council meeting there were two candidates for one vacancy in Scotland and two candidates for two vacancies in Northern Ireland.
- m) The Rt Hon Norman Lamb MP has requested the RCoA's support for an Independent Commission on the Future of the NHS and Social Care. Council agreed to support the initiative with the caveat of guarding against the health and social care momentum being at the expense of secondary care.
- n) The President has met with senior representatives of NHS England (NHSE). Sir Bruce Keogh has tasked Ms Celia Ingham-Clark to work with the College on looking at commissioning frameworks for perioperative medicine to ensure it gains some traction and attracts resources. Other items discussed include Anaesthesia Clinical Services Accreditation (ACSA), National Emergency Laparotomy Audit (NELA), physician's assistant (anaesthesia) [PA(A)] regulation, and terrorist attack readiness from an acute care perspective.
- o) The President and Mr Ampofo met Dr Judith Hulf to discuss undergraduate curricula issues.
- p) The President met with Baroness Finlay and discussed mental capacity and deprivation of liberty safeguarding work. Baroness Finlay has agreed to work with the RCoA to ensure the specialty is better informed on that subject. The College has agreed to host a conference on 15 March 2016 on mental capacity which will be opened by the President. A number of free places have been secured for the RCoA and it was suggested a member of the Faculty of Intensive Care Medicine (FICM) would benefit from attending. Baroness Finlay has agreed to speak at Diplomates' Day.
- q) Following a competitive process Membership Engagement Services has been appointed to support the development of improved and responsible member services and communication. Work will commence with a membership-wide survey, the questions for which will be seen by Council before they are approved as a final version. It was suggested that beta testing be carried out by Council members and also non-Council members.
- r) Professor Alison Holmes is very keen for anaesthesia to be a key player in antibiotic stewardship during the perioperative period. This will represent an opportunity for the RCoA to develop its public health responsibilities and profile. Professor Holmes will work with the perioperative medicine leadership team to see what improvements can be made and will write a piece for the *Bulletin* and possibly the *British Journal of Anaesthesia (BJA)*.

- s) The branding agency, Fabrik, would present initial feedback, as presented to the previous day's President's meeting, to Council.
- t) The President met with Minister of Health for State, Mr Ben Gummer. Areas discussed included NELA, ACSA, Perioperative Quality Improvement Programme (PQIP) and perioperative medicine. Discussion items included PA(A) regulation, the merits of voluntary regulation versus statutory regulation, and the plight of academic trainees in the light of contract negotiations. The President shared with Mr Gummer Dr Colvin's work on the Professionalism Compliance Analysis Tool (PCAT) as an example of one of the ways the specialty is trying to evaluate and improve the experience of doctors in training.
- u) The next date for strike action coincides with the President's Dinner and Council. Council members were asked to inform the President's Office if this will affect their availability.

Action: Council members to inform President's Office if availability for President's Dinner/Council affected by planned strike action.

- v) The British Society for Immunology will be moving into the ground floor of 34 Red Lion Square. Commercial rates have been agreed. The initial contract is for three years with a break clause after two years. The British Pain Society's and Intensive Care Society's (ICS) five years lease will expire later this year. Negotiations are ongoing although it looks as though both organisations will remain in Churchill House. The ICS is looking at halving the size of its accommodation and the RCoA, as part of the restructure, will need to decide what to do with that part of the building. Attention is being paid to how visitors, particularly Fellows, are received at Churchill House particularly at the front desk. Consideration is being given to turning space on the second floor into a more extensive Fellows' room to make the College a more welcoming place for Fellows to visit. Mr Grinyer explained that this will enable the RCoA to redevelop the building in approximately two and a half years if it was in a position to do so after implementation of the Technology Strategy Programme. The President added that to start two major projects simultaneously would put the College at risk. However, if Council held a contrary view he would be happy to listen.
- w) Council members were asked to read and update their biography on the website.

Action: Council members to read and update their biography on the website.

- x) The President updated Council on staff changes:
 - i. Mr Yves Nicolas has joined the College as management accountant (maternity cover).
 - ii. Ms Pamela Hines has joined the College as National Institute of Academic Anaesthesia (NIAA) co-ordinator.

CID/2/2016 International Programme

Mr Ampofo presented a summary of the work of the international programmes, cross-referencing this with the external context on international global health to inform the RCoA's future international work. A work programme will be put together before the Strategy Summit to identify how College strategy can be aligned to external strategy. There are one or two restrictions in terms of international resources. Dr Jo James, Bernard Johnson Adviser for International Programmes, has been leading the international work on her own with support from her deputy. A working group is now required to support the work. The working group will look at current priorities and help the College to develop its international strategy. A sustainable and ethical framework will be developed for the work. The existing framework for

engagement will be developed further. It was suggested that global partnerships would be a more accurate reflection of future work instead of the current international programmes. Council agreed to the formation of a short-life working party and the work between now and May to enable presentation at the Strategy Summit or sooner.

Professor Sneyd agreed to put Mr Ampofo in touch with the European Society of Anaesthesiology (ESA) to enable the College to engage with the organisation and learn from its work.

Action: Professor Sneyd to put Mr Ampofo in touch with the ESA.

It was suggested that the RCoA should work alongside the Royal Colleges of Surgeons in the United Kingdom and the Royal College of Obstetricians and Gynaecologists in this work.

It was suggested that it would be useful to look at a paper produced by the AoMRC on international engagement. It was agreed that the RCoA should be part of the AoMRC's Global Health Action Group.

Action: President to discuss RCoA involvement with the AoMRC's Global Health Action Group with the CEO of the AoMRC.

CID/3/2016 Guidelines for the Provision of Anaesthetic Services 2016 Approval

Professor Mahajan suggested deferring Council's approval of the chapters in view of the late circulation of the papers. Council was asked to e-mail comments to Professor Mahajan. It was requested that comments related to subject matter be backed up with evidence.

Action: Council to e-mail comments to Professor Mahajan ensuring comments related to subject matter be backed up with evidence.

Guidelines for the Provision of Anaesthetic Services (GPAS) is now a live document because it receives feedback from the ACSA process and public consultation. It is therefore likely to be updated every three months following the Professional Standards Committee. It was agreed that Council should be informed when future chapters are on the website for comment.

Action: Professor Mahajan to inform Council when chapters are on the website for comment.

CID/4/2016 The Shape of Training

Mr Ampofo reported that the Shape of Training Steering Group has released a statement thanking Colleges for their work on the mapping exercise. It has also issued a summary which is on the RCoA website. The Steering Group has said that Colleges should progress in their plans to look at their curriculum, assessment systems and training programme in relation to the mapping exercise. The RCoA has started work on this and is discussing with partner organisations how acute care common stem (ACCS) can be developed. The Steering Group has indicated that it would like to meet individual Colleges between now and March.

Council discussed:

- The low priority currently given to Shape by the government.
- The positive will in Scotland to implement something.
- The importance of not becoming complacent about Shape.

- The possibility of testing some of the elements the RCoA wants to implement in the devolved context.
- The link between Shape and the feeling of unhappiness and insecurity among trainee doctors.
- The positive feeling amongst Colleges about improving training which might mean they implement it anyway.
- The unwillingness of the Welsh Chief Medical Officer to take forward Shape.
- The link between Shape and manpower. There has been a change in the manpower environment since the Shape Review took place and some of the assumptions made when the review was written have changed.
- The lack of mention of items such as moving pre-registration requirements.
- The risk of introduction by stealth of modular credentialing and the sub-consultant grade.

CID/5/2016 AAGBI Guidelines Perioperative Corticosteroids for Patients with Adrenal Insufficiency

Dr Fletcher reported that the guideline has been updated since it was circulated to Council and he has yet to see the changes. There is an impasse between the anaesthetic community and endocrinologists. Council will need to approve the document before publication. Council was asked to submit comments to Dr Fletcher. Dr Fletcher was asked to keep Council informed of progress.

Action: Council to submit comments to Dr Fletcher.

Action: Dr Fletcher to keep Council informed.

CID/6/2016 Association of Anaesthetists of Great Britain and Ireland President's Report

The memorandum of understanding on Continuing Professional Development (CPD) has been published on the RCoA and AAGBI websites.

COMMITTEE BUSINESS

CB/1/2016 Council Minutes

The minutes and website minutes of the meeting held on 9 December 2015 were approved.

CB/2/2016 Matters Arising

Review of Action Points

All actions had been completed.

CB/3/2016 Regional Advisers

Council considered making the following appointment:

North Thames East

Dr C Sadler in succession to Dr H Drewery as Regional Adviser for North Thames East
Agreed

CB/4/2016 Deputy Regional Advisers

Council considered making the following appointment:

West of Scotland

Dr D Smith in succession to Dr S Marshall as Deputy Regional Adviser for West of Scotland
Agreed

CB/5/2016 College Tutors

To consider making the following appointments/re-appointments (re-appointments marked with an asterisk):

Anglia

*Dr D Ignatov (Hinchingbrooke Hospital) **Agreed**

Northern

Dr H Dawson (Royal Victoria Infirmary) in succession to Dr M K Varma **Agreed**

West Yorkshire

*Dr D Odedra (St James' University Hospital NHS Trust) **Agreed**

*Dr T Collyer (Harrogate District Hospital) **Agreed**

North Thames Central

Dr S L Sambhani (Royal National Orthopaedic Hospital) in succession to Dr R Sharma **Agreed**

*Dr M S George (Great Ormond Street Hospital for Sick Children) **Agreed**

North Thames East

Dr N Walton (Broomfield Hospital) in succession to Dr E K Reid **Agreed**

North Thames West

Dr Julia Richards (Ealing Hospital) in succession to Dr L Ali **Agreed**

West of Scotland

*Dr G A Gallagher (Glasgow Royal Infirmary) **Agreed**

*Dr K R Fitzpatrick (Institute for Neurological Sciences, Glasgow) **Agreed**

*Dr R Fairgrieve (Royal Hospital for Children, Glasgow) **Agreed**

Dr S Smith (Glasgow Royal Infirmary) in succession to Dr D Smith **Agreed**

Wessex

Dr S Berridge (Royal Bournemouth Hospital) in succession to Dr I F Smith **Agreed**

KSS

Dr N Deacy (Eastbourne District General Hospital) in succession to Dr N Forder **Agreed**

West Midlands South

Dr H Ebrahim (Birmingham Heartlands Hospital) in succession to Dr K Gregory **Agreed**

Dr S Naresh (Good Hope Hospital) in succession to Dr S Watkins **Agreed**

CB/6/2016 Head of Schools

There were no notified appointments this month. A comment had been received regarding the recording of Head of Schools in the *Bulletin*.

Action: Ms Larsen to ensure the <i>Bulletin</i> makes it clear that Head of School is not a College appointment.

CB/7/2016 Training Committee

(i) Chairman of the Training Committee's Update

Dr Penfold reported that the Regional Advisers' meeting in February will predominantly focus on the Regional Advisers' role.

A letter has been received from the GMC regarding applications to the Joint Specialist Register by the Certificate of Eligibility for Specialist Registration (CESR) route. The GMC has given the RCoA until April to produce clinical competencies that doctors will have to demonstrate in the UK. This will be discussed by the Equivalence Committee. The President expressed concern that if this is diluted to just five or six key clinical competencies that are ticked off there would be great anxiety that people will be given a ticket to the Specialist Register that would be of concern to the specialty and wider profession. Mr Ampofo was asked to respond to the GMC explaining that the RCoA will comply with the process but will not be bound to a short timeline for something of great importance.

Action: Mr Ampofo to respond to the GMC explaining that the RCoA will comply with the process but will not be bound to a short timeline for something of great importance.

(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.

London

North Central

Dr Tajinere Esidamirire Fregene

Dr York-Mui Liu

Barts and the London

Dr Kirubalini Ganeshalingam

Northern Ireland

Dr Barry Declan McConville

Dr Celia Jane Montgomery

Dr David Francis Johnston

North of Scotland

Dr Naomi Grace Scott

Northern

Dr Claire Victoria Leech*

Dr Anu Gupta Kansal

North West

Dr James Robert Hanison*

Dr Matthew James Jackson*

Oxford

Dr Hosnieh Djafari Marbini

Dr Warwick Christian Kimseng Pepper

Dr Sarah Carol Kwok

Dr Anna Elizabeth Wallis

Severn

Dr Christopher Paul Newell*

Dr Andrew Charles Foo*

Wales

Dr Anna Marie Joseph*

Wessex

Dr Benjamin Thomas*

West Midlands

Warwickshire

CB/8/2016 Examinations Committee

Council approved the motion as listed under M/5/2016. Mr Ampofo agreed to circulate to Council a document on examination statistics and reliability of the examination.

Action: Mr Ampofo to circulate to Council document on examination statistics and reliability of the examination.

CB/10/2016 ACSA Update

Dr Fletcher presented the ACSA figures as of 10 December 2015. There are six accredited departments across the UK and an additional ten have had onsite reviews in 2015. With 62 departments engaged in the process there will be a lot of work in the next two to three years. Although there are currently enough people to undertake this, there are pressures in being away from trusts and this is an area the RCoA might have to consider backfilling. It was suggested that the College could issue CPD points and a certificate for those undertaking visits. This has also been discussed at the Directors of CPD meeting at the AoMRC for those undertaking Care Quality Commission (CQC) and other visits; it was concluded that recognition could be given for the activity but not for every review.

CB/11/2016 Faculty of Pain Medicine

The Dean, Dr Grady, presented the minutes of the Board meeting held on 11 December 2015, drawing Council's attention to:

- *BFPM/12/15/4.2a Key Core Standards for Pain Management will be submitted to the CQC for inclusion in its inspection frameworks.*
- *BFPM/12/15/5.1 The President and the Dean will discuss the plagiarism case.*
- *Dr Barry Miller was inducted as Vice-Dean.*
- *BFPM/12/15/3.2 Right Patient Right Professionals Right Time initiative was launched in the House of Lords on 18 November 2015 at the same time as the launch of the Opioids Aware Initiative. The Dean commended the Opioids Aware documentation to Council as being a useful resource for anaesthetists.*

Council was asked to approve another category of eligibility to the FFPMRCA criteria which would allow consultants in pain medicine who trained in the UK but are now based overseas to attempt the examination. Accompanying the request for updated eligibility criteria was the prioritisation of applications list. Two Council members have expressed the view that the priority list is not right in that the staff and associate specialist (SAS) grades are a lower priority. Council was therefore asked to approve the addition to the eligibility list and the Dean would feedback to Executive Members the feeling about the prioritisation list and subsequently bring it back to Council.

Action: Dean to feedback to Executive Members the feeling about the prioritisation list and bring back to a future Council meeting.

It was noted that the Board agenda did not include workforce considerations and workforce planning. The Dean explained that one of the Faculty's strategy is workforce and suggested that workforce planning be included as a standing agenda item. It was also suggested that Dr John Magee, the Faculty's workforce

lead, be invited to join the RCoA's Workforce Advisory Group. The President and Dean agreed to pick up on these issues during a one to one meeting.

Action: President and Dean to pick up on workforce issues during one to one meeting.

CB/12/2016 Anaesthesia Related Professionals Committee

The Chairman, Dr Collee, presented the minutes of the meeting held on 5 November 2015. Subsequent to Dr Collee's Chairman's summary, the AAGBI was no longer able to support the guidance document. Dr Collee explained that without registration and regulation of PA(A)s no progress would be made. Dr Collee expressed the opinion that the RCoA should take on the process of registering and regulating PA(A)s. The President has discussed this issue with Minister of State, Mr Ben Gummer, who suggested as an interim measure that the College should take leadership. It was agreed that Mr McLaughlan should produce a summary of progress so far, expand on the SWOT analysis and, in conjunction with Dr Collee, develop an options paper including cost implications. It was noted that the legal costs attached to deregulating someone would be significant.

Action: Dr Collee/Mr McLaughlan to produce a summary of progress so far, expand on the SWOT analysis and develop an options paper including cost implications.

The President agreed to give considerable time for further discussion at the next meeting of Council.

Action: Ms Regan to add Registration and Regulation of PA(A)s to the February Council agenda.

CB/13/2016 Lay Committee

The Chairman, Mr Thompson, presented the minutes of the meeting held on 8 December 2015, drawing Council's attention to:

LCFULL/39/2015 Recruitment.

LCFULL/36/2015 Communications. It was noted that the paper includes the statement "the group recommends that we include a statement in the College's CPD guidance that doctors **should** take part in communication patient engagement training". It was pointed out that the Revalidation Committee, the author of the CPD guidance, does not have the authority to mandate doctors to do anything.

PRESENTATION

P/1/2016 RCoA Branding Exercise

Mr Humphrey Couchman from Fabrik presented the initial findings of the branding exercise. Council was asked to submit comments to Ms Larsen.

Action: Communications to circulate presentation to enable Council to submit comments to Ms Larsen.

MATTERS FOR INFORMATION

I/1/2016 Publications

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

1/2/2016 Consultations

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

1/3/2016 New Associate Fellows, Members and Associate Members

Council noted, for information, the following:

New Associate Fellows

Dr Torsten Beuthauser - The Royal Marsden NHS Trust

Dr Lotta Margareta Bergstrom Niska - Milton Keynes University Hospital NHS Foundation Trust

Dr Nadir Abdel-Munim Ibrahim - Salford Royal Hospital

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

Dr Chandana Arunashantha Loku Pattiyage - Harrogate District Hospital

Dr Shammi Kakad- Medway Maritime Hospital

Dr Jehan Moustafa Mahmoud Abdulmajeed - St Mary's Hospital

Dr James Smith - St James' Hospital, Leeds

Dr Shirjeel Chaudhry - South Warwickshire NHS Foundation Trust

Dr Dheeraj Sharma - Broomfield Hospital

Dr Frank Vogel - University College London Hospital

Dr Rupasingha Appuhamilage Kishan Indika Rupasingha - Diana Princess of Wales Hospital, Grimsby

Dr Dharani Subramaniam - Kingston Hospital NHS Trust

Dr Jean-Marie Sarti - Berkshire Independent Hospital, Reading

Dr Dinithi Yogya Silva Juliyange - North Middlesex University Hospital

Dr Deepshikha Palit – Bedford Hospital

Dr Shenouda Malaak Guirguis Farag – Harrogate and District NHS Foundation Trust

Dr Ravi Shankar Pudukollu – Prince Charles Hospital, Merthyr Tydfil

Dr Miguel Miro Murillo – University College London Hospitals

Dr Ikram Mohamed Musthapha – Hull and East Yorkshire Hospital

Membership Progression:

Member

Dr Rebecca Rowley - FRCA Primary

1/4/2016 College Strategy Update

Council noted discussion with the Privy Council regarding election of the two trainee members of Council and agreed that it should be included in the governance review.

Mr Grinyer gave a presentation on the proposed restructure which, in the light of Mr McLaughlan leaving the College in the summer, was more radical than initially envisaged.

Council discussed the following:

- Increased workload changing Council's close working relationship with directors.
- The potential of having two directors who are overwhelmed and the need to add in additional tiers of staff.
- The need to make better use of managers.

Council was asked to feedback comments to Mr Grinyer.

Action: Council to feedback comments to Mr Grinyer.

Council was asked to submit agenda items for the Strategy Summit to Dr Nolan and Dr Fletcher.

Action: Council to submit Strategy Summit agenda items to Dr Nolan and Dr Fletcher.

I/5/2016 Financial Training

Deferred to February meeting.

I/6/2016 Clinical Quality Directorate Enquiries

Deferred to February meeting.

PRESIDENT'S CLOSING STATEMENT

PCS/1/2016

(a) The President agreed that Dr Verma could circulate details of the Professor of Obstetric Anaesthesia which the Obstetric Anaesthetists' Association was seeking to appoint.

Action: Dr Verma to circulate details of the Professor of Obstetric Anaesthesia which the Obstetric Anaesthetists' Association was seeking to appoint.

MOTIONS

M/1/2016 Council Minutes

Resolved: The minutes and website minutes of the meeting held on 9 December 2016 were approved.

M/2/2016 Regional Advisers

Resolved: That the following appointment be approved:

North Thames East

Dr C Sadler as Regional Adviser for North Thames East

M/3/2016 Deputy Regional Advisers

Resolved: That the following appointment be approved:

West of Scotland

Dr D Smith as Deputy Regional Adviser for West of Scotland

M/4/2016 College Tutors

Resolved: That the following appointments/reappointments be approved (reappointments marked with an asterisk):

Anglia

*Dr D Ignatov (Hinchingbrooke Hospital)

Northern

Dr H Dawson (Royal Victoria Infirmary)

West Yorkshire

*Dr D Odedra (St James' University Hospital NHS Trust)

*Dr T Collyer (Harrogate District Hospital)

North Thames Central

Dr S L Sambhani (Royal National Orthopaedic Hospital)

*Dr M S George (Great Ormond Street Hospital for Sick Children)

North Thames East

Dr N Walton (Broomfield Hospital) in succession to Dr E K Reid

North Thames West

Dr Julia Richards (Ealing Hospital) in succession to Dr L Ali

West of Scotland

*Dr G A Gallagher (Glasgow Royal Infirmary)

*Dr K R Fitzpatrick (Institute for Neurological Sciences, Glasgow)

*Dr R Fairgrieve (Royal Hospital for Children, Glasgow)

Dr S Smith (Glasgow Royal Infirmary)

Wessex

Dr S Berridge (Royal Bournemouth Hospital)

KSS

Dr N Deacy (Eastbourne District Hospital)

West Midlands South

Dr H Ebrahim (Birmingham Heartlands Hospital)

Dr S Naresh (Good Hope Hospital)

M/5/2016 Examinations Committee

Resolved: That the Fellowship be awarded to those who were successful at the December 2015 Final Examination.

M/6/2016 Faculty of Pain Medicine

Resolved: That Council approves the addition of the category to the eligibility list for the FFPMRCA.

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