

## MEETING OF COUNCIL

**Edited Minutes of the meeting held on Wednesday 16 November 2011  
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 P Nightingale, President  
Dr J-P W G van Besouw  
Professor J R Sneyd  
Dr A A Tomlinson  
Dr J D Greaves  
Dr A B H Lim  
Dr R Laishley  
Professor D J Rowbotham  
Dr H M Jones  
Professor J F Bion  
Dr E A Thornberry  
Dr P J Venn  
Dr A M Batchelor  
Dr S R Moonesinghe

Dr D K Whitaker  
Dr D M Nolan  
Dr R Verma  
Dr R J Marks  
Dr T H Clutton-Brock  
Dr L J Brennan  
Dr J P Nolan  
Dr J R Colvin  
Dr J R Darling  
Dr M Nevin  
Dr I H Wilson  
Dr M Clancy  
Dr M Nevin

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

**In attendance:** Mr K Storey, Ms S Drake, Mr R Bryant and Ms A Regan.

**Apologies for absence:** Professor R P Mahajan, Dr S C Patel and Mr C McLaughlan.

### **COUNCIL IN DISCUSSION**

#### **CID/49/2011 President's Opening Statement**

- (i) The President announced the deaths of Dr Valerie Newman, Dr Sucharu Chakraborty and Dr Ian English. Council stood in memory.
- (ii) The President welcomed Dr Clancy, President of the College of Emergency Medicine (CEM), to Council.
- (iii) Because of the very large number of Committee minutes Chairmen were asked to restrict their reports to matters requiring debate and/or a decision by Council; this would allow sufficient time for the post-Council debate.
- (iv) The President asked Dr Venn to speak about a potential media opportunity. The Royal College of Anaesthetists (RCoA) had been approached by Ricochet Ltd, an independent television production company which the BBC had asked to develop a major new series about the work of elite surgical teams in the UK. The focus would be the entire team rather than just the surgeon. Dr Venn asked Council to provide him with details of surgical teams doing groundbreaking work in the UK and in particular those in which the anaesthetist is prominent. It was suggested that pre-operative assessment should be included in the filming and that the focus should be on specialties/locations not previously featured in such programmes. It was also suggested that agreement should be sought from the teams doing the filming setting out how they would remain focussed on the anaesthetist.

- (v) The President asked Dr Marks to explain to Council changes to the RCoA's crest for use on the website. A simplified version had been produced because the quality of the image of the crest suffered when reduced in size to fit into a limited space.
- (vi) The President thanked the Association of Anaesthetists of Great Britain and Ireland (AAGBI) for organising a successful joint meeting and dinner.
- (vii) A list of the President's commitments was tabled; the President would be pleased to answer questions relating to any of the meetings he had attended.
- (viii) Council members were asked to inform Ms Regan whether or not they would like to attend the Council Christmas Dinner; space is limited and there are very few places left. The President's portrait would be on display at the dinner which would be attended by the artist, Mr Keith Breeden, and his wife Helen.

**CID/50/2011            Senior Fellows' Club**

Entry to the Senior Fellows' Club had been requested by a trainee who had recently passed the FRCA, had discontinued anaesthesia and was now practising as a General Practitioner; the application was made on the grounds that he met the currently published criteria. Council agreed that the *College Regulations* be amended as shown below:

**Part II (12)  
Senior Fellows Club**

The Senior Fellows Club is open to all who have membership of the College or Faculties and who have come to the end of a career in substantial employment.

**CID/51/2011            Faculty of Medical Leadership and Management**

Dr Nevin updated Council on the Faculty of Medical Leadership and Management; his summary and a link to the Faculty's website would be circulated to Council. Council was asked to spread the word about the Faculty and its work.

**CID/52/2011            Annual Specialty Report**

Council received the first draft of the Annual Specialty Report for 2010/11; comments should be e-mailed to Mr Bryant. As well as being submitted to the General Medical Council (GMC) the report would also be circulated to Regional Advisers (RAs), Training Programme Directors (TPDs), etc as a 'state of the nation' comment on training.

**CID/53/2011            Intercollegiate Board for Training in Pre-Hospital Emergency Medicine**

Dr J Nolan wished to thank Dr David Lockey who had represented the RCoA at the meeting of the Intercollegiate Board for Training in Pre-Hospital Emergency Medicine on 14 September 2011 and produced a summary for Council's attention. Dr J Nolan clarified that with regards to point 5 there was no plan to incorporate national portfolio access within the RCoA's website although there may be a link to it.

The Lead Deanery has yet to be appointed.

An article in the January *Bulletin* would outline the integration of the training programme into the anaesthesia training programme; this would ensure anaesthetic national training number (NTN) holders were informed of the timeline for sub-specialty applications.

There had been some disagreement around some of the proposals for the approval criteria to be local education providers and training schools; this would be monitored and hopefully resolved.

Dr Batchelor had been asked whether the training would be linked with NTN in intensive care medicine (ICM). It was agreed that ICM should be up and running first before anything more difficult was put into place.

**CID/54/2011            The Health and Security Perspectives of Climate Change**

Council received a report by Dr Stuart White who had represented the RCoA at a recent climate change conference. The President noted the actions suggested, particularly the establishment of a joint Climate Action Group, and would liaise with the AAGBI regarding the way forward. Dr Wilson reported that he would meet Dr White in the New Year. Professor Sneyd asked that Dr Alan McGlennan be involved in any such work. It was agreed that any terms of reference and objectives given to the group should be realistic and attainable, focussing on areas that the specialty could influence. There was no objection from Council to the formation of a group with the AAGBI and perhaps other organisations. The President would respond to Dr White encouraging further work. The RCoA would debate further how to progress the proposal.

**CID/55/2011            Replacement FRCA Certificate**

Council agreed that a replacement FRCA Certificate should be provided to Dr Joanna Claire Coates (nee Stockwell).

**COMMITTEE BUSINESS**

**CB/148/2011            Council Minutes**

The minutes of the meeting held on 19 October 2011 were approved.

**CB/149/2011            Matters Arising**

i.        Review of Action Points

*CID/48/2011 Intensive Care Medicine Post-Nominals* Council was asked to e-mail suggestions to Professor Bion.

*CID/45/2011 RCoA/CEM Working Party on Sedation, Anaesthesia and Airway Management in the Emergency Department* The wording in the document should be 'immediate life support'; Dr J Nolan would e-mail Dr Greaves suitable wording for inclusion in the document clarifying what is meant by this, with a copy to Dr Rollin for inclusion in the as yet unwritten dental sedation document.

**CB/150/2011            Regional Advisers**

Council considered making the following appointment:

**Northern Ireland**

Dr Darrell Lowry, Regional Adviser for Northern Ireland, in succession to Dr Clive Stanley **Agreed**

**CB/151/2011            Deputy Regional Advisers**

There were no appointments for Council to consider this month.

**CB/152/2011            College Tutors**

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

**Anglia**

\*Dr E A Bright (West Suffolk Hospital) **Agreed**

\*Dr C E Sharpe (Norfolk and Norwich Hospital) **Agreed**

**Northern**

Dr C J Sutherland (South Tyneside Hospital) in succession to Dr S Deshpande **Agreed**

**East Yorkshire**

\*Dr K Robins (York District Hospital) **Agreed**

**West Yorkshire**

\*Dr J A Horn (Bradford Royal Infirmary) **Agreed**

**North Thames West**

\*Dr A Koomson (Watford General) **Agreed**

**Mersey**

Dr P N Board (Leighton Hospital) in succession to Dr N C Brooks **Agreed**

**West of Scotland**

Dr I Quasim (Golden Jubilee Hospital) in succession to Dr A G Macfie **Agreed**

\*Dr F J Burns (Royal Alexandra Hospital) **Agreed**

\*Dr W G Hilditch (Western Infirmary) **Agreed**

\*Dr B J McCreath (Western Infirmary) **Agreed**

**Severn**

\*Dr S E Bakewell (Gloucestershire Royal Hospital) **Agreed**

**South West Peninsula**

\*Dr A J Matthews (Torbay Hospital) **Agreed**

**Leicester and South Trent**

\*Dr C E Elton (Leicester Royal Infirmary) **Agreed**

**Wales**

Dr S C Rees (University Hospital of Wales) in succession to Dr S Logan **Agreed**

\*Dr B John (Nevill Hall Hospital) **Agreed**

\*Dr C Terblanche (Morrison Hospital) **Agreed**

**CB/153/2011 Heads of Schools**

There were no appointments for Council to note.

**CB/154/2011 Training Committee****(i) Training Committee**

Council received and considered the minutes of the meeting held on 2 November 2011 which were presented by the Medical Secretary, Dr Thornberry. The curriculum would need to be submitted to the GMC as soon as possible; a delay had occurred because of the change in format of how ICM for anaesthetists is defined in the curriculum to match the format of the ICM curriculum. There is a new section in the curriculum relating to paediatric ICM. It is uncontroversial and had been discussed by the Training Committee, the Association of Paediatric Anaesthetists (APA) and various paediatric ICM groups. Council members wishing to see it were asked to contact Dr Thornberry or Mr Craig Williamson; the section would otherwise be accepted and incorporated into the curriculum.

Dr Kate Wark had received information from the Department of Health (DH) that it was likely there would be a two year allowance for those coming into the Medical Training Initiative (MTI) scheme; this had not yet been confirmed in writing.

(ii) Certificate of Completion of Training

Council noted recommendations made to the GMC for approval, that Certificates of Completion of Training (CCTs)/Certificates 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. Professor Sneyd asked that those being recommended for CESR (CP)s be annotated with #.

**Anglia**

Dr Nimit Kantilal Shah

**London**

**North Central**

Dr Sandra Joy Reynolds\*

Dr Katherine Louise Cheesman

Dr Sanjay Laxmandasji Bajaj

Dr Malthi Dudley

Dr Nicholas Ioannou \*

**Imperial**

Dr Ajit Pandharinath Walunj

Dr Maria Georghiou

Dr Anita Pandya

**East Midlands**

**Leicester**

Dr Imogen Sarah Sisley

**Nottingham**

Dr Jessica Sophie Catherine Flack

**Mersey**

Dr Roofa Mushtaq

Dr Bindu Pandit

Dr Michelle Denise Greene

Dr Mahesh Kumar Doddi

**North West**

Dr Coralie Ann Carle \*

Dr Suet-Mei Westwood

**Northern**

Dr Stephen John Robb

Dr Mahindra Goroba Chincholkar

**Northern Ireland**

Dr Navanit Nagdeve

**Severn/Bristol**

Dr Andrea Colette Binks \*

**Wessex**

Dr Helen Louise Underhill

Dr Pamela Elizabeth Winton

**West Midlands**

**Birmingham**

Dr Au-Chyun Nicole Goh

Dr Nick Fitton \*

**Stoke**

Dr Paul James Dias \*

Dr Christopher David Medd

Dr Ashley Samuel Christian Miller \*

Dr Fiona Jane Kerr Jutsum

Dr James David Andrew

**Scotland**

**West Scotland**

Dr James Macmillan Limb

**Yorkshire**

**West Yorkshire**

Dr Jonathan Charles Dilley

**East Yorkshire (Hull)**

Dr Seshu Babu Tatikola

**South Yorkshire (Sheffield)**

Dr Stuart James Smith

(iii) Medical Secretary's Report

Dr Thornberry reminded Council of the previous concerns about finding levels of ICM that all anaesthetists would require and the desire to define the levels required by those who would have ICM in their job plan. Members of the Training Committee had subsequently met with the Faculty of ICM (FICM). Professor Bion explained that consideration had been given to which set of competences and capacities would be required by consultants providing cover for ICM in a small hospital but who do not have dedicated daytime sessions; it was proposed that stage 1 competences in ICM should be the minimum for that level of practice. Stage 1 competences are part of an integrated package of training; it would be necessary to find a way in which the level of attainment of those competences could be set at a higher level for those who are exiting training rather than those at stage 1. There would be further discussion in the forthcoming days. Dr Batchelor added that agreement would also be required regarding the level of competence in ICM required by anaesthetists with no aspirations to work in ICM but who required the training because it is integral to the production of good anaesthetists.

**CB/155/2011                      Revalidation Development Committee**

Council received and considered the minutes of the meeting held on 11 October 2011 which were presented by the Chairman, Dr Tomlinson. With effect from January 2012 the Committee would become the Revalidation Delivery Committee with Dr Brennan as Chairman. Council received the draft Terms of Reference for the renamed committee.

Dr Tomlinson urged Council to respond, as individuals or via the College, to the two GMC documents currently out to consultation; one on Continuing Professional Development (CPD) and the other on Licence to Practise and Revalidation.

The issue of quality measures is being addressed by the Health Services Research Centre (HSRC).

The RCoA's work on departmental accreditation would support revalidation.

A CPD Board had been convened.

The Committee had responded to an Academy of Medical Royal Colleges' (AoMRC) document on the provision of specialty advice; this is an attempt to ensure the advice given, and the manner in which it is given, is consistent across all four nations and all specialties.

The RCoA *Guidance on Colleague and Patient Feedback for Revalidation* had been published.

Draft specialty guidance on supporting information for revalidation is available on the RCoA's website.

The DH's publication on remediation is awaited.

The Revalidation e-Portfolio had been signed off.

The KSS Deanery is running a national pilot looking at proposed enhancements to the Annual Review of Competence Progression (ARCP) process allowing postgraduate deans (as responsible officers) to make an informed revalidation recommendation to the GMC.

**CB/156/2011                      Career Grade Committee**

Council received and considered the minutes of the meeting held on 20 October 2011 which were presented by the Chairman, Dr Lim.

With regards to the GMC's standardisation criteria for the role of the educational supervisor, it was agreed that the Committee would continue to receive details of the process from Mr Bryant and Mr Craig Williamson. The Committee would co-ordinate its response to the consultation through Mr Bryant in line with the College response.

Dr Radhakrishna Shanbhag, Chairman of the British Medical Association's (BMA) Staff and Associate Specialist Committee (SASC), had requested a meeting with Dr Lim to discuss SAS doctors as trainers and supervisors. A response had been sent to Dr Shanbhag outlining the RCoA's support for SAS doctors as supervisors and trainers.

The SAS Approved to Teach Policy had been suspended pending the outcome of the GMC consultation.

The Self Assessment form for SAS anaesthetists produced by Dr Ian Barker would be placed on the RCoA's website.

Dr Jay Dasgupta had represented the RCoA at the Joint Colleges' SASC meeting. The Chief Executive of the AoMRC had stated that he is willing to have SAS representation on some of the AoMRC's committees. The Chair of the Joint Colleges' SASC would circulate details of committees where representation would potentially be necessary. The Career Grade Committee would discuss which committees the RCoA should have SAS representation on. There is unrest about subspecialty CESR applications in the Joint Colleges' SASC.

#### **CB/157/2011                      Anaesthesia Related Professionals Committee**

Council received and considered the minutes of the meeting held on 18 October 2011 which were presented by the Chairman, Dr Batchelor. The Committee wished to keep the issue of regulation for Physicians' Assistants (Anaesthesia) [PA(A)] on the political agenda and asked Council to do the same.

The PA(A) leads would like to develop nationally agreed extended training modules. The RCoA had accepted that there was already local extension of practice; the leads would like, by sharing training materials and assessment, to produce transferable recognition for the extensions. This would be brought to Council for further discussion. Dr Whitaker thought that the RCoA had not approved local extensions of practice; this was noted by the President.

A proposal would be written which would allow PA(A)s to manage emergence from anaesthesia without the direct presence of a supervising consultant; this is one area in which PA(A)s could contribute more to theatre efficiency.

Many trusts are interested in employing trained PA(A)s but are wary of the financial risk of training them. The Birmingham course is guaranteed for the next two years but would fold if there were no more trainees. Dr Batchelor pointed out that it would be difficult to re-establish the course. There is a big risk in that if the RCoA does not oversee the training it would lose control over standards and hospitals would employ PA(A)s from elsewhere.

Work is progressing on a national Advanced Critical Care Practitioner (ACCP) curriculum.

The Committee had discussed prescribing and regulation and whether there was a way forward.

**CB/158/2011                      National Institute of Academic Anaesthesia**

(i)     Board

Council received and considered the minutes of the meeting held on 13 October 2011 which were presented by Professor Rowbotham.

(ii)    Research Council

Council received and considered the minutes of the meeting held on 13 October 2011 which were presented by the Chairman, Professor Rowbotham. One of the outcomes of the recent Away Day would be a paper regarding future strategy for the National Institute of Academic Anaesthesia (NIAA). Another outcome would be that Council would receive more detailed updates regarding the work of the HSRC. Dr Moonesinghe added that the HSRC had applied to the Healthcare Quality Improvement Partnership (HQIP) for emergency laparotomy to be the subject of a national audit and was participating in the tendering process for that. Dr Moonesinghe informed Council that an additional two research fellows had been appointed and a post-doctoral researcher would soon be appointed to work with the HSRC.

Professor Rowbotham informed Council that all funds now had National Institute for Health Research (NIHR) status.

**CB/159/2011                      Royal College of Anaesthetists' Advisory Board for Northern Ireland**

Council received and considered the minutes of the meeting held on 4 October 2011 which were presented by the Chairman, Dr Darling. Dr Darling wished to thank the President and Ms Drake for attending the meeting.

The cancellation of the 2011 round of the clinical excellence awards scheme was causing problems in that many senior consultants were not taking up posts that previously might have attracted clinical excellence awards.

Some progress was being made towards unifying training standards for those who assist anaesthetists; the intention is to move towards the template used in Scotland.

The CPD Study Day had been attended by approximately 70 delegates. Informal feedback suggested that the charge for the trade exhibits was too high.

Despite significant effort by both the RCoA and the College of Anaesthetists of Ireland (CAI) to continue reciprocity, the process had eventually failed. It was recognised in Northern Ireland that both Colleges would probably lose something from this but the Board also recognised the support of the RCoA in attempting to develop the proposal.

The Board had noted that Fellows of the CAI could not become Founding Fellows of the FICM; this had led to an influx of applications for Fellowship ad eundem of the RCoA. Professor Bion explained that the FICM would expect to be able to accommodate such colleagues from Northern Ireland and offered to visit to speak to those affected.

**CB/160/2011                      Quality Management of Training Committee**

Council received and considered the minutes of the meeting held on 2 November 2011 which were presented by the Chairman, Dr D Nolan. The external visit template had been changed and populated with data from service accreditation information.

The Committee is looking at developing specialty specific criteria for trainers and assessors.

Drs D Nolan and Moonesinghe are working on the selection criteria and possibility of a training programme for trainee members of external visit panels.

The Committee was asked to submit ideas regarding performance indicators for the e-Portfolio to Mr Craig Williamson.

Modifications had been devised to the specialty specific questions for the GMC's 2012 trainee survey.

The President asked whether the Committee had discussed what happens when someone is invited to undertake a visit as an external deanery person but finds things which are very poor from a service perspective; what is the interface with the deanery and who takes such matters forward? Dr D Nolan responded that this was not currently formalised. Dr Jones suggested that the first contact should be with the Medical Director or Clinical Director who should decide what to do regarding patient safety issues. Dr Nevin agreed, adding that concerns should be written down; documentation would add strength to any argument over patient safety issues.

#### **CB/161/2011                      Equivalence Committee**

Council received and considered the minutes of the meeting conducted by e-mail on 20 October 2011 which were presented by Professor Sneyd. The Committee had considered one first application which was not recommended for the Specialist Register.

#### **CB/162/2011                      Faculty of Intensive Care Medicine**

Council received and considered the minutes of the meeting held on 17 October 2011 which were presented by the Dean, Professor Bion. A number of anxieties had been expressed at the RAs in anaesthesia meeting, especially regarding input to and output from ICM training and dual CCTS. There were two questions, the first being why was there not a dual appointment process? Professor Bion explained that ICM is a primary specialty not a sub-specialty. With regards to equity of access it is not possible to constrain access to ICM to specific partner specialties. To interdigitate ICM with a total of six other specialties would be extremely complex. The separate appointment process gives trainees the chance to apply for two positions. The second question was on the issue of output. It had been pointed out that there were no consultant posts for stand-alone intensivists in some regions and this suggested that there was therefore no point in creating training posts for these. Professor Bion explained that surveys strongly suggested that the need for ICM would expand; it was anticipated that there would be a doubling of consultant posts in ICM, a proportion of which would be for those who only wished to do ICM.

#### **CB/163/2011                      Trainee Committee**

Council received and considered the minutes of the meeting held on 8 September 2011 which were presented by the Chairman, Dr Moonesinghe. The Committee had agreed to produce a quarterly e-newsletter for trainees to highlight key information and to improve communication with the trainee body.

The Committee had agreed to investigate with the Education Committee some new courses for novice anaesthesia trainees and post-FRCA trainees.

The Committee had agreed to explore with Mr Storey the possibility of distributing copies of *The BJA* to developing nations. Dr Wilson advised that there can be difficulty in sending journals; contacts change and the AAGBI had therefore concentrated on sending journals electronically where possible.

The Committee had discussed specialty specific questions for the GMC survey and had fed back to the Quality Management of Training Committee.

#### **CB/164/2011      Trainee e-Portfolio Working Party**

Council received and considered the minutes of the meeting held on 30 September 2011 which were presented by the Chairman, Dr Brennan. The e-Portfolio had been rolled out to all 27 schools of anaesthesia. More than 8600 user accounts have been created.

Work is in hand to further enhance ARCP functionality.

There were some issues with Premier IT regarding its fees for bespoke requirements; negotiations are underway.

Work is underway to produce a logbook summary document for inclusion in the portfolio.

The President added that the foundation programme curriculum had been accepted by the GMC. The curriculum includes new workplace based assessments; if the GMC is going to promote them into specialty training would there be a significant cost in changing the e-portfolio.

#### **CB/165/2011      Professional Standards Committee**

Council received and considered the minutes of the meeting held on 3 November 2011 which were presented by the Chairman, Dr Venn. *Guidelines for the Provision of Anaesthetic Services (GPAS)* had been thoroughly revised three years ago. The Committee had agreed that it should be revised all the time with ongoing editorship and authorship. Emergency surgery would be revised and separated from trauma and orthopaedics. Chapters would be added on care of the elderly undergoing surgery and possibly also on sedation and organ donation.

Dr Venn expressed his disappointment at such a low attendance level for a major College committee.

#### **CB/166/2011      Nominations Committee**

Council received and considered the minutes of the meeting held on 4 November 2011 which were presented by the Chairman, Dr van Besouw. The Committee had agreed that because of its size the list of Fellows ad eundem would be removed from the *Criteria for Honours, Awards and Prizes*.

The Committee had agreed that retiring Council members should be presented with a framed photograph of current Council members or a lithograph of the College, signed by the President and Vice-Presidents.

Council agreed that:

1. Professor Hugh Hemmings be awarded Fellowship by Election.
2. Dr Haydn Perdnt and Dr Teik Oh be awarded the Dudley Buxton Medal.
3. Dr Bernard Riley, Dr Sue Hill and Dr Gary Smith be awarded the Humphry Davy Award.
4. Dr Chris Johnson be awarded the College Medal.
5. Dr Olaposi Simeon Kehinde, Dr Andreas Ernst Brodbeck, Dr Mukesh Chugh, Dr Gudrun Kunst, Dr James Conn Russell, Dr Duncan McKenzie Watson and Dr Kathryn Moyna Bill be awarded the Fellowship ad Eundem.
6. Dr David Zuck and Dr Gary Brear be awarded the President's Commendation.
7. Dr Jaideep Pandit and Dr Rupert Pearse be awarded the Macintosh Professorship.
8. Dr Andrew Conway Morris be awarded the Maurice Hudson Prize

**CB/167/2011            Quality Management of Service Committee**

Council received and considered the minutes of the meeting held on 27 October 2011 which were presented by the Chairman, Dr Venn; 20 sites are participating in the pilot. A number of returns had been received and some interesting trends noted where problems had been identified. HQIP had since come on board with the project.

The next tasks would be to start to develop the final document, work out the logistics and put together a group of people who are interested in going to hospitals to help them with the process by which they can reach accreditation. There is also a need to decide what is meant by accreditation. Professor Bion pointed out the need to look at the overlap into ICM. Twelve standards had been developed for ICM which had been submitted to the National Institute for Health and Clinical Excellence (NICE) as a response to the consultation on the development of specialty specific standards.

Dr van Besouw informed Council that there had been discussion with Mr McLaughlan about using the data from the pilots to look at workforce and work with the Centre for Workforce Intelligence.

**CB/168/2011            Data Analysis Group**

Council received and considered the minutes of the meeting held on 4 October 2011 which were presented by Dr Clutton-Brock. Council accepted the Group's terms of reference.

**CB/169/2011            Faculty of Pain Medicine**

Professor Rowbotham explained that the Faculty of Pain Medicine had been asked to endorse the *National Advisory Board Guidelines on Epidural Solutions* which had been circulated to Council. As the guidelines applied to those other than pain specialists the Faculty wished to ask Council to consider the recommendations. Council was in agreement with the Guidelines.

**MATTERS FOR INFORMATION**

**I/35/2011                Publications**

The list of publications received in the President's Office was drawn to Council's attention. The President drew Council's attention in particular to King's College London Dental Institute's Standards for Sedation in Dentistry and an article on The Trainee in Difficulty in *The Obstetrician and Gynaecologist*.

**I/36/2011                Consultations**

Council received, for information, a list of the current consultations. The President urged Council to respond to consultations; a broad range of views is important.

**I/37/2011                New Associate Fellows, Members & Associate Members**

There were no new Associate Fellows, Members and Associate Members to note.

**PRESIDENT'S CLOSING STATEMENT**

**PCS/10/2011 President's Closing Statement**

There were no additional items the President wished to bring to Council's attention.

**MOTIONS TO COUNCIL**

**M/45/2011            Council Minutes**

**Resolved:** That the minutes of the meeting held on 19<sup>th</sup> October 2011 be approved.

**M/46/2011 Regional Advisers**

**Resolved:** That the following appointment be approved:

**Northern Ireland**

Dr Darrell Lowry Regional Adviser for Northern Ireland

**M/47/2011 College Tutors**

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

**Anglia**

\*Dr E A Bright (West Suffolk Hospital)

\*Dr C E Sharpe (Norfolk and Norwich Hospital)

**Northern**

Dr C J Sutherland (South Tyneside Hospital)

**East Yorkshire**

\*Dr K Robins (York District Hospital)

**West Yorkshire**

\*Dr J A Horn (Bradford Royal Infirmary)

**North Thames West**

\*Dr A Koomson (Watford General)

**Mersey**

Dr P N Board (Leighton Hospital)

**West of Scotland**

Dr I Quasim (Golden Jubilee Hospital)

\*Dr F J Burns (Royal Alexandra Hospital)

\*Dr W G Hilditch (Western Infirmary)

\*Dr B J McCreath (Western Infirmary)

**Severn**

\*Dr S E Bakewell (Gloucestershire Royal Hospital)

**South West Peninsula**

\*Dr A J Matthews (Torbay Hospital)

**Leicester and South Trent**

\*Dr C E Elton (Leicester Royal Infirmary)

**Wales**

Dr S C Rees (University Hospital of Wales)

\*Dr B John (Nevill Hall Hospital)

\*Dr C Terblanche (Morrison Hospital)

## **M/48/2011 Nominations Committee**

**Resolved:** that Council approves Professor Hugh Hemmings for Fellowship by Election.

**Resolved:** that Council approves Dr Haydn Perdnt for the Dudley Buxton Medal.

**Resolved:** that Council approves Dr Teik Oh for the Dudley Buxton Medal.

**Resolved:** that Council approves Dr Bernard Riley for the Humphry Davy Award.

**Resolved:** that Council approves Dr Sue Hill for the Humphry Davy Award.

**Resolved:** that Council approves Dr Gary Smith for the Humphry Davy Award.

**Resolved:** that Council approves Dr Chris Johnson for the College Medal.

**Resolved:** that Council approves Dr Olaposi Simeon Kehinde be awarded the Fellowship ad Eundem.

**Resolved:** that Council approves Dr Andreas Ernst Brodbeck be awarded the Fellowship ad Eundem.

**Resolved:** that Council approves Dr Mukesh Chugh be awarded the Fellowship ad Eundem.

**Resolved:** that Council approves Dr Gudrun Kunst be awarded the Fellowship ad Eundem.

**Resolved:** that Council approves Dr James Conn Russell be awarded the Fellowship ad Eundem.

**Resolved:** that Council approves Dr Duncan McKenzie Watson be awarded the Fellowship ad Eundem.

**Resolved:** that Council approves Dr Kathryn Moyna Bill be awarded the Fellowship ad Eundem.

**Resolved:** that Council approves Dr David Zuck for the President's Commendation.

**Resolved:** that Council approves Dr Gary Brear for the President's Commendation.

**Resolved:** that Council approves that Dr Jaideep Pandit be awarded the Macintosh Professorship.

**Resolved:** that Council approves that Dr Rupert Pearse be awarded the Macintosh Professorship.

**Resolved:** that Council approves that Dr Andrew Conway Morris be awarded the Maurice Hudson Prize