

Notes and actions arising from the Obstetrics & Gynaecology and Paediatrics Specialty Training Board meeting held at 9:30 am on 31st March 2022 via Teams

Present: Claire Alexander (CA) Chair, Helen Adamson (HA), Susan Brechin (SB), Kirstyn Brogan (KB), Alastair Campbell (AC), Alan Denison (AD), Andrew Duncan (ADu) (representing Ian Hunter), Laura Jones (LJ), Christy Lamont (CLa), Carol Leiper (CLe), Chris Lilley (CLi), Chu Chin Lim (CCL), Peter MacDonald (PMacD), Jen Mackenzie (JM), Claire McFaul (CMcF), Ailsa McLellan (AMcL), Dianne Morrison (DM), Alastair Murray (AM).

Apologies: Darren Cameron (DC), Laura Combe (LC), Joanna Chisholm (JC), Tom Fardon (TF), Helen Freeman (HF), Ian Hunter (IH), Mandy Hunter (MH), Zoe Jacob (ZJ), Tim Lewis (TL), Shyla Kishore (SK), Ihab Shaheen (IS), Karen Shearer (KrS), Marion Slater (MS), Ben Smith (BS), Laura Stirrat (LS), Jane Wilkinson (JW), Mairi Stark (MS).

In attendance: June Fraser (JF) (Minutes)

Item	Item name	Discussion	Agreed/Action
1.	Welcome, Intros and Apologies	The Chair welcomed all attendees and apologies were noted. This meeting had been postponed from 3 rd February 2022.	
2	Changes to STB Members List	The Chair gave thanks to Judith Roberts for her contribution to the group as BMA Rep. Judith has now demitted office. Thanks were also noted to Alice Jollands, TPD, Paediatrics who has now been replaced by Joanna Chisholm.	
3.	Minutes of meeting held on 25th November 2021	The notes of 24 th June 2021 Meeting were accepted as an accurate record other than the following amendments: <ul style="list-style-type: none"> • 5.3 – take out “Who is Gayle?” – Gayle is Gayle Littlewood. The action should read as KB check in with Gayle re staffing issues. • When using initials ensure CLs, CRLs, CLA etc are correct. 	JF to update November Minutes. CA to update initials.
4.	Review of Action Points	All actions carried out or discussed elsewhere in the agenda other than the following: <ul style="list-style-type: none"> 3. Statutory Mandatory Training – issue may have been resolved – CA awaiting update. 4. An evaluation needs to be carried out on the specialty website. 	CA to link up with KB and CLa about specialty website and discuss with Niall MacIntosh.

		<p>5.6 Quality - Good Practice – Short Life Working Group to be set up re GP training issues, linking in with GP colleagues.</p> <p>Paediatric TPD reports being sent to Quality – important for the TPDs to get feedback on these. A review of the TPD questionnaire is being undertaken at the moment to make it more focussed.</p>	<p>CA will contact key members for SLWG.</p> <p>AC/PMacD will provide feedback on reports to Paediatric TPDs.</p>
5.	Matters arising not elsewhere on the agenda		
	STEP Course	<p>Been asked to consider running STEP course in O&G and Paeds. STEP course aims to support IMG doctors when they come into a training post in Scotland. CA taking part in pilot with Medicine to see how it is run. A small group will need to be put together to organise, run and support the course and it is hoped to initiate a pilot in Autumn if possible.</p>	<p>All to consider the STEP programme and whether able to contribute to the group. Let CA know</p>
	APGD Simulation OGP	<p>NES provided funding for 2PAs for an APGD in OGP to lead on simulation across Scotland. Interview process undertaken and have appointed 2 excellent candidates who have accepted:</p> <ul style="list-style-type: none"> • Dr Kathleen Collins, specialty doctor in Paediatrics in Lanarkshire • Dr Sarah Barr, Consultant Obstetrician and Gynaecologist in Forth Valley 	
6.	Standing Items of business		
6.1	Trainee Issues	<p><i>Paediatric update TL/LC</i></p> <p>Report provided (Paper G) which was discussed and further points made as follows:</p> <ul style="list-style-type: none"> • Staffing continues to be a problem with Covid creating shortages, particularly at middle grades, which is compounded by maternity leave and LTFT working. • Steps have been taken to try and include SPA time into rotas but this hasn't taken place in all areas. <p>It was noted that the RSPCH has developed a Trainee Charter (on website) which includes notion of trainees having time rostered into weekly work for supporting professional activities. NES/DMEs need to recognise the charter and units should strive to incorporate SPA time. A mechanism for reporting needs to be thought about for where this doesn't happen. NES cannot mandate that SPA happens but can give recommendations.</p>	

		<p>This topic can be taken back to local TPD meetings for discussion. Clarity required on what the trainees expect to do in SPA time and also need to look at current rotas and find out how activities are split currently for each unit.</p> <ul style="list-style-type: none"> • Paed section on Scotland Deanery Website – most areas have contributed elements but still a work in progress. • Shape of Training – concerns from ST3/ST4 level trainees as to whether they will have any influence if they have to be part of the eight year or seven-year programme. Is this going to be at each TPD’s discretion? It was discussed later in the meeting that it would be the trainees who would decide but would be contacted by TPD. A process would also need to be followed. • GRID/SPIN day – great feedback and trainees keen to have this as an annual event. It was confirmed that this is likely to be the case. <p>O&G CLa presented slides put together by LS/CLa on the RCOG Trainee Evaluation Form 2021 (copy of slides attached).</p> <p>CLa and LS were thanked for all their work in this matter and it was felt there would be merit in a presentation like this taking place every year around March/April, inviting key stakeholders to attend. Would need to look at stripping out individual comments however and think about how the presentation is disseminated and communicated to the good and poor performing units. It was noted that topics which were flagged as issues within the TEF have been known issues and are complex areas.</p> <p>Obs Ultrasound Simulator housed in Tayside – need sessions for west Trainees to attend.</p> <p>KB has been working on a boot camp for ST1s in West of Scotland from August. Hoping to roll out to all ST1s in future. There may be funds available to support a national boot camp.</p>	<p>Paeds Trainees to report back with further information to CA re SPA time.</p> <p>Clarification required from NES-CA/CLi</p> <p>CLa to share presentation with Quality (ensuring individual comments deleted).</p> <p>CA to send email to discuss presentation further/decide on next course of action re TEF data.</p> <p>KB to explore organising sessions for obs sound simulator with Caithlin O’Neil TPD EOS</p>
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6.2	DME Report	No specific report.	
6.3	Specialty and STC reports	<p><i>Paediatrics STC</i></p> <p>Main issues are challenges that Covid has placed on trainees and trainers and also Consultants. Major impact on rotas and wellbeing. TPDs are very appreciative of the way in which trainees and trainers been working to keep the training programme afloat. There are a number of people out on maternity leave (16 out of 65). Able to get Level 1 or 2 staff in to cover but difficulty in covering more senior roles – currently looking at ways to remedy this. Recruitment from abroad has also been affected by Covid so has caused issues.</p> <p>National recruitment process took place in March – offers have now gone out and optimistic that all posts will be filled. The college have mooted that they may look at a recruitment process which may happen throughout the year, rather than just once. This could be helpful for covering gaps in rotas for LTF, maternity leave etc. Boards in the west have decided to do their own Fellow and LAS appointments locally which has added some complications to the recruitment process, particularly for programme management.</p> <p>Currently looking at OOP processes in light of staff shortages.</p> <p>National training has taken place (Spin and Grid) and a training session for Educational Supervisors across Scotland on ARCPs is taking place on 1st April.</p>	

		<p>O&G STC Same issues across units in terms of gaps for a variety of reasons. Some units almost at crisis levels. Impact on training sessions and professional activity. Continue to have significant numbers of trainees requesting LTFT. ST1 recruitment completed and should be no shortfall. ST3 recruitment taking place in April. Issues with shortage in interviewers for recruitment process due to time of year. Advanced laparoscopic ATSM has been advertised and starts in August and there is also a second post for Edinburgh. Interviews will take place jointly. 2 replacement sub-specialty posts in Uro-gynaecology for the west and sub-specialty post in maternal foetal medicine shared between the south east and the west – starting in August also.</p> <p>It was noted that the new Gold Guide, due to be released in August 2022 will have all categories for LTFT removed and as such trainees will not require to provide the same level of justification and all trainees may request LTFT training. Although all trainees can ask, they do not have an automatic right. It is subject to the approval and support of the clinical service.</p> <p>CSRH Not enough trainees to manage the workforce crisis. Will continue to ask for additional funding and will put in a further paper this year. Biggest issue currently is around access to certain work particularly surgical abortions and MVAs. Having to travel to north of England to meet competencies. Looking at ways to remedy this and trying to find additional funding.</p> <p>Paeds Cardiology Representative not available.</p>	
6.4	Deanery Issues		
	Quality	<ul style="list-style-type: none"> • Fact finding meeting took place at Neonates at Princess Royal in January which overall was positive. Letter has gone to the department with findings. • Princess Royal Maternity O&G – visit in March – currently on enhanced monitoring but huge improvements in the department, however still a lot of non-educational tasks being undertaken by the first on call and their access to clinics and non-emergency work is poor. Decision as to whether to remain on enhanced monitoring will be decided by GMC. • A number of visits coming up – Royal Infirmary Edinburgh (triggered visit for GP training), Haematology in Glasgow and Neonates and OG at the QEUH. 	SB to discuss with KrS in TPM

	Training Management		
	ARCPS	ARCPS ready to go for June and July.	
	Rotations	Nothing specific to add.	
	Recruitment	Offers for all posts are ongoing. The training management team will have access to details of the trainees who have accepted posts for Round 1 specialties from the 13 th April and Round 2 specialties from 6 th May. It was asked that if any additional posts become available then contact TPM administrators as soon as possible to get them included in offer recycles.	
	MDET	<p>New Medical Director, Emma Watson has started and Stewart Irvine has retired.</p> <p>Dyslexia testing – current discussions regarding this and whether all trainees should be tested when start training. Decision was to defer this matter to the Training Development and Wellbeing Service which is taking over from the PSU.</p> <p>Ministerial announcement around maternity services in Dr Gray’s Hospital in Elgin. It has been decided by the cabinet secretary that option 6 will be delivered at Dr Gray’s hospital. This has implications for Neonates, Anaesthetics and other health professions.</p>	
	Equality & Diversity including differential attainment; a) Dashboard b) Examples of good practice	<p>Keen that the RCOG dashboard is used as it gives another level of detail to the information that NES holds. AD invetsiagted governance issues around use which are being looked and confimed dashboard can now be used. A review will be taken after 6 months of use</p> <p>It was requested that any examples of good practice be sent to CA via email.</p>	All – think of examples of E&D good practice and send via email to CA.
6.5	SAS Report	No representative available for report.	
6.6	SLWG		
	Shape of Training / New Paediatric Curriculum Implementation	Paediatric Grid – posts have been filled. Work going on to ensure trainees appointed to these rotational posts can be balanced with the needs of the rest of the programmes. Grid training day went well – 60 trainees attended and several others have listened in to the recorded sessions.	

		<p>Have received very good feedback. Next year will need to run similar course and take account of how Shape of Training will affect the grid access at ST4 level.</p> <p>SOT SLWG Meeting coming up on 26th April. Been looking at programme design. Paper has been circulated to SOT SLWG and will go to MDET which discusses likely impact on progress to SOT in August 2023 moving from 7 year, rather than 8-year, programme and the effect this will have in the short term and longer term. From 2026, because current ST3s will be moving out of core training and ST4s will be continuing an 8-year pathway, with an impact on number of trainees available for middle grade rotas. Attempted to model from current CCT dates what would happen and it is clear that there will be an additional short-term impact of up to 9-10% of trainees not available for middle grade rotas from 2026-28. (Also looked at LTFT training rates projected.) Some further work to be done. May look to ameliorate recruitment numbers in ST1 to mitigate these issues, subject to MDET approval. This would equate to an additional 20-22 trainees to be appointed.</p>	<p>CLi to share paper with relevant parties including APGDs in OGP STB.</p>
6.7	Medical Directors Update from Health Boards	No update.	
6.8	RCOG/RCPH Heads of Schools Reports	<p>RCOG - Head of School report attached.</p> <p>RCPH – College have taken out mandatory intubation for level 1 trainees which will feed into ARCP. It is now Airways Management. Start assessment has been looked at by the GMC – they don't feel it is mandatory however the college disagrees so ongoing discussions with this matter.</p>	
6.9	Lay Member Report	Nothing to add.	
7.	AOCB	No AOB.	
8.	Papers for information only	Papers for information only (papers F and G)	
8.	Date of next meetings:	<p>5th May 1400 – 1600</p> <p>1st September 1400 – 1600</p> <p>3rd November 0930 – 1130</p> <p>All invites with links to Teams have been sent out – if any issues, please contact: june.fraser@nhs.scot</p>	

CA thanked all for attending and for input into reports, papers, and discussions and for all their ongoing work during difficult circumstances.