Notes of the ACIEM STB Meeting held at 11:30 on Friday on 17th February 2022 via Teams

Present: Neill O'Donnell, [Chair] (NO'D), Laura Armstrong (LA), David Connor (DC), Kathleen Forsyth (KF), Paul Gamble (PG), Adam Hill (AH), John Keaney (JK), Anoop Kumar (AK), Yazan Masannat (YM), Edward Mellanby (EM), Alistair MacDiarmid (AMcD), Jonathan McGhie (JMcG), Laura McGregor (LMcG), Hugh Neil (HN), Andrew Paterson (AP), Kenny Pollock (KP), Gary Rodgers (GR), Cameron Weir (CW) & Neil Young (NY).

Apologies: Shabbir Ahmed (SA), Andrea Baker (AB), Kirsteen Brown (KB), Russell Duncan (RD), Stephen Friar (SF), Judith Joss (JJ), Jim Foulis (JF), Paul Gamble (PG), Stephan Glen (SG), June Lawson (JL), Gareth Logue (GL), Graeme McAlpine (GMcA), Jen McKenzie (JMcK), Cieran McKiernan (CMcK), Catriona McNeil (CMcN), Joy Miller (JM), Linzi Peacock (LP), Lailah Peel (LPe), Thalia Monro-Somerville (TM-S), Jeremy Morton (JM), Kelly Moore (KM), Alistair Murray (AM), Gareth Patton (GP), Derek Philips (DP), Malcolm Smith (MS), Rada Sundaram (RS), Kevin Sim (KS), Malcolm Sim (MS), Karen Shearer (KS), Claire Vincent (CV), Graham Wilson (GW), John Wilson (JW) & Lorna Young (LY)

Present: Rachel Brand-Smith (RBS)

Item No	ltem	Comment	Action
1.	Welcome & Apologies	 The chair welcomed the following new members: Dr Kenney Pollock (BMA, Scottish Consultants Committee Rep) Dr John Keany (Society of Scottish Medical Directors) 	
2.	Minutes of meeting held on 09/12/2022	The meeting notes of 09/12/2022 were accepted by the members.	
3.	Matters Arising	There were no matter arising.	
4.	Action Points from meting 09/12/2022		
4.1	Minutes of meeting held on 16/09/2022	NO'D confirmed that this item had been actioned.	

4.2	STEP Course for IMGs	NO'D confirmed that this item has been actioned	
4.3	MOD Standardisation Initiative	NO'D stated that this is still to be actioned and requested action point be added to next meeting agenda.	RBS to add action point to next meeting notes. LPe to update
5.	Standard Items of Business		
5.1	Deanery Issues		
5.1.1	Quality	 Various issues were discussed regarding Quality including: Completed Visits: YM confirmed that a successful visit was completed at Ninewells Hospital. Planned Quality Visits: YM confirmed that the following quality visits to Emergency Depts are scheduled for: Raigmore Hospital in May Edinburgh Royal Infirmary in May Queen Elizabeth Hospital in June Royal Alexandra Hospital in June SMART Objective Meeting: YM confirmed that a meeting was held at Aberdeen Royal Infirmary. TPD Queries: YM stated that TPDs have sent in queries relating to Anaesthetics. YM confirmed that seven queries had been received of which three have been closed and three require updates. HN asked if TPD queries can be shared with TPDs. AH confirmed that queries could be shared. 	

5.1.2	MDST	AH confirmed that the following NES Deans will be retiring:
		Prof Alistair McClellan will retire in May
		Prof Amjad Khan will retire in June
		Prof Claire McKenzie will retire in July
		Possible Workstream Restructuring: AH stated that posts may be restructured, and portfolios changed before new appointments are made.
5.1.3	Professional Development	There were no items to discuss.
5.1.4	Equality, Diversity & Inclusivity	NO'D confirmed that discussions are ongoing and that the STEP programme may combine the ACIEM and Surgery trainees due to small numbers. NO'D stated that this will apply to trainees for the August 2023 intake onwards.
5.1.5	Simulation Training	Various issues were discussed regarding the Simulation Programme including:
		 Simulation Strategy: LMcG confirmed that the Simulation Training strategy is still being drafted and that a locum will be recruited to fill Dr Thalia Monro-Somerville post while she is on maternity leave. LMcG stated that funding is still to be decided. EM confirmed that he would circulate the strategy to members if required. Study Budgets: EM requested advice regarding use of trainee Study Budgets for Simulation training. EM emphasised that the use of Study Budgets can only go ahead
		after discussion with TPDs and trainee reps.
5.1.6	STB Recruitment – February 2023 Update	NOD confirmed that JMcK has circulated a report.
7.	ARCP Outcome Reports 2021 & 2022	NO'D gave the members the following update regarding ARCPS including:

		 Feedback on ARCPs: NO'D stated that the STB is required to provide the deanery with feedback regarding ARCP data. NO'D requested members send him feedback by 17/03/2023. Equality of ARCP Process: AH requested members check to see if outcomes are being used consistently across each region and specialty.
8.	Training Management (Recruitment, ARCPs, Rotations)	
8.1	Anaesthesia	 CT1 Applications: JMcG stated that there was a significant increase in CT1 applications for this year however applicants for ST4 were lower than expected. Accelerated Training for Stage 2 & Stage 3: JMcG stated that a meeting between the GMC and RCoA was held to discuss accelerated Stage 2 and 3 training. JMcG stated that this may not affect the Scottish Deanery due to the use of LATS. In addition to this, JMcG stated that there is no appetite for additional Round 3 recruitment for ST6 in Scotland. Issues regarding National Recruitment: JMcG stated that there had been a data breach regarding interviews. JMcG stated that this was the third time this had occurred. JMcG stated that the issue had been addressed however requested members who know of any trainee that has been affected by this to contact him.
8.2	Intensive Care Medicine	 Lead Regional Advisor: NY confirmed that he will take over as Lead Regional Advisor for Scotland from 01/04/2023. ICM Establishment Numbers: AH confirmed that NES aims to fund 90 establishment posts in ICM. AH noted that ICM funds 70 of these posts at present.

		ICM Establishment Posts & LTFT: AH noted that 14% ICM posts will be affected by LIFT when the whole-time equivalent model is used. AH asked NO'D if LTFT would be included in the next expansion post assessment. NO'D confirmed that this would be the case.	
8.3	Emergency Medicine	AP gave the members the following update:	
		EM Interviews: AP confirmed that interviews will be held in February and will be conducted via TEAMS suing the SRA model.	
		Higher Specialty Interviews: AP stated that the higher specialties will conduct interviews in March. AP confirmed that there was a sufficient number of applicants this year.	
		• Supervision levels for trainees below ST4: AP confirmed that there has been no change regarding issues relating to ST4 Emergency Medicine trainee supervision. AP stated however that the Royal College of Emergency Medicine has issued recommendations relating to supervision. NO'D asked for item to be taken off the next meeting agenda.	RBS to remove EM Supervision item from next meeting agenda
8.4	ACCS	NOD confirmed that there were no items to discuss.	
9.	Royal College Reports		
9.1	Royal College of Anaesthetists	 RCoA & the use of Anaesthesia Associates: JMcG stated that the RCoA have discussed the role of Physician Assistants, Anaesthesia Associates, Advanced Care Practitioners etc. in Scotland. JMcG noted the following issues regarding the use of Anaesthesia Associates including: Lack of governing bodies in Scotland 	

- Reduced clinical effectiveness due to inability to prescribe
- Issues related to funding and pay
- Issues relating to available posts
- Issues Related to Anaesthesia Associates: AH asked why there was no move to use Anaesthesia Associates in Scotland. AH noted that Physician Assistants are being used in Psychiatry in the North region which is having a positive impact on service. JMcG stated that there were specific service demands in England that did not pertain to Scotland. JMcG stated that the RCoA (Scotland) recommend that an increased in trainee numbers is the most suitable response to service demands.
- **GMC Approval for PA and AAs:** AH noted that the GMC will take over governance of Physician Assistants and Anaesthetics Associates in 2024. AH stated however that legislation is still required to allow these groups to prescribe.
- Anaesthesia Associates & Hospitals: AMcD stated that there were issues relating to finding appropriate roles and posts for this group in hospitals. AMcD stated that there is not enough capacity. NY stated however that Critical Care Assistants had been very useful in the ICU setting.
- Guidance for Anaesthesia Associates: GR outlined guidance from RCoA Anaesthesia Associates committee. GR stated that this guidance covers scope of practice, impact of training and service delivery. GR noted that the RCoA recommends that anaesthesia trainees take priority over Anaesthesia Associates.
- Posts & Impact on Service: HN noted that there may be issues relating to funding when appointing Medical Clinicians, HN noted that these posts are funded by the local board not NES.

9.2	Faculty of Intensive Care Medicine	 Short Life Working Group: AH suggested that members form a short life working group to examine issues. AH suggested members also carry out a curriculum mapping exercise. NY stated that the exam report has now been released. NY confirmed that a meeting will be held on 07/03/2023 to discuss exams issues with trainers, trainees etc.
9.3	Royal College of Emergency Medicine	 Trainee issues: AP stated that trainees have been raising issues related to weekend rota issues, contractual issues, lack of balance when trainees move from LTFT to full time etc. AP stated that these issues were leading to high levels of trainee and Trainer burn out. NES Response: AH stated that NES can help address issues related to training quality but not contractual issues. AH suggested issues be raised with Academy of Scottish Medical Directors.
10.	Specialty and STC Reports (Workforce)	
10.1	Anaesthesia	 Expansion Posts: NO'D confirmed that Anaesthesia has made a successful bid for 15 additional ST posts for the August 2023 intake. Expansion Posts & LTFT: NO'D noted that LITFT issues were highlighted in the most recent expansion bid award but had not been used for the calculation of final numbers. NO'D stated that this will be added to next expansion bid request. NO'D has contacted TPDs for information relating to this.

10.2	Intensive Care Medicine	NY asked whether whole time equivalent for ICM includes those with an academic component to their training. AH confirmed that this was not the case. AH suggested identifying and separating out those with a 50% academic component for future bids.	
10.3	Emergency Medicine	AP state that new census will be carried out to aid Workforce discussions.	
10.4	ACCS	NO'D stated there are no items to discuss	
10.5	SAS Report	A SAS representative was not available	
10.6	Academic Report	An academic representative was not available.	
10.7	Trainee Report	 GR gave the members the following trainee update including: Trainee Exam Report: GR stated that the Primary SOE and OSCE stations have been removed and replaced by the written exam. GR stated trainees will be given twelve months' notice if there are any further changes to the exam system. Issues with National Recruitment: GR stated that some trainees have complained that an interview can only be secured if a trainee has secured an appropriate score in the MSRA. Trainees have noted that the MSRA is not relevant to all specialties. Advice on Trainee Reflection Records: GR stated that guidance has been issued related to trainee reflections and local coroners. GR stated that trainees will now be advised only to record that a reflective discussion for serious outcomes was carried out. Trainees will be advised not to record the content of those discussions in their eportfolio. 	
10.8	Lay member Report	A lay rep was not available.	
11.	AOB		

11.1	DME Highland	AK asked for information relating to expansion posts in NHS Highland including:
		 Expansion of Posts & Lack of Consultants: AK stated that guidance is required on the locating of expansion posts within NHS Highland (specifically Raigmore Hospital) where there is a shortage of consultants. AMcD and DC both noted that there are particular issues in the Highland area relating to changing population demands.
		 Expansion Posts & Full Provision: HN stated that a guidance was required on the distribution of expansion posts when there is full provision of training so that the system is fair for all trainees and regions. JK noted that posts need to be topped up when taking LTFT into consideration before posts are distributed elsewhere.
		 NES Response: AH stated that work is on-going work regarding the provision of trainee posts and consultants across Scotland. AH stated that a SLWG is required to develop an appropriate strategy.
11.2	STB Membership	DC informed that members that he will be stepping down as TPD and resigning from the STB.
11.3	MSRA Query	GR asked whether NES consider MSRA feedback. AH stated that feedback is useful and requested that trainee reps compile comments for the MDRS board.
12.	Date of Nest Meeting	Date of next meeting:
		• 12/05/2023 (11:30 – 13:30) via TEAMS