

## Notes of the ACIEM STB Meeting held at 11:30 on Friday 16<sup>th</sup> April 2022 via Teams

**Present:** Neill O'Donnell, [Chair] (NO'D), Laura Armstrong (LA), Kirsteen Brown (KB), David Connor (DC), Russell Duncan (RD), Adam Hill (AH), Kathleen Forsyth (KF), Stephen Friar, (SF), Judith Joss (JJ), Anoop Kumar (AK), Yazan Masannat (YM), Jen Mackenzie (JMck), Graeme McAlpine (GMcA), Alistair MacDiarmid (AMcD), Jonathan McGhie (JMCG), Laura McGregor (LMcG), Cieran McKiernan (CMcK), Edward Mellanby (EM), Joy Miller (JM), Alistair Murray (AM), Lailah Peel (LP), Linzi Peacock (LP), Radha Sundaram (RS), Malcolm Sim (MS), Stewart Teece (ST), Lorna Young (LY) & Neil Young (NY)

**Apologies:** Fiona Ewing (FE), Paul Gamble (PG), Stephan Glen (SG), Jim Foulis (JF), June Lawson (JL), Andrew Logue (AL), Gareth Logue (GL), Jeremy Morton (JM), Kelly Moore (KM), Hugh Neil (HN), Andrew Paterson (AP), Gareth Patton (GP), Derek Philips (DP), Gary Rogers (GR), Amir Shabir (AS), Karen Shearer (KS), Kevin Sim (KS), Malcolm Smith (MS), Mark Steven (MS), Cameron Weir (CW), Graham Wilson (GW), John Wilson (JW), Claire Vincent (CV) & Laura Young (LY)

**In attendance:** Rachel Brand-Smith (RBS)

Item No	Item	Comment	Action
1.	<b>Welcome &amp; Apologies</b>	The chair welcomed the members and noted the apologies	
2.	<b>Minutes of meeting held on 13/05/2022</b>	The following corrections to the notes were requested: <ul style="list-style-type: none"> <li><b>Item 6.4.1 – Anaesthesia - ST Uplift for 2023:</b> Change 'NO'D stated that ONS and college data seems to indicate the need for a small uplift in CT numbers.' to 'NO'D stated that ONS and college data seems to indicate the need for a small uplift in ST numbers.'</li> </ul>	<b>RBS</b> to correct meeting minutes of 13/05/2022
3.	<b>Action Points from meeting 13/05/2022</b>		
3.1	<b>Minutes of meeting held on 18/02/2022 - Correction</b>	<ul style="list-style-type: none"> <li>RBS confirmed that this has been actioned.</li> </ul>	NO'D has confirmed that this item is now closed
3.2	<b>National Anaesthetic OSCE days -</b>	<ul style="list-style-type: none"> <li>KB stated that she has still to contact CW and will do this out with the STB meeting.</li> </ul>	NO'D has confirmed that this item is now closed

	<b>Resumption of Practice OSCIs</b>		
<b>3.3</b>	<b>STEP courses for IMGs - STEP Course &amp; Non-Trainee IMG Access</b>	<ul style="list-style-type: none"> <li>AH stated that discussions were ongoing related to capacity issues.</li> </ul>	
<b>3.4</b>	<b>Intensive Care Medicine - Suggested changes to Recruitment Process</b>	<p>Various issues were discussed related to ICM issues including:</p> <ul style="list-style-type: none"> <li><b>Round 1 &amp; 2 Adverts:</b> AH confirmed that a meeting was held with CMcN. AH confirmed that it has been suggested that Anaesthetics and ICM recruitments rounds be held at different times to allow dual appointments to ICM. NO'D stated that it would be advisable to have ICM posts filled before Anaesthetics. AH stated that he has written to deans of ICM and Anaesthetics and is awaiting a response.</li> <li><b>FICM Response:</b> RS stated that issue has been discussed at FICM but there has been no progress. AH stated that he would contact Lead Deans to assess progress.</li> </ul>	<b>AH and RS</b> to update STB on any progress relating to Round 1 & 2 adverts
<b>3.5</b>	<b>Emergency Medicine - Action on Supervision Levels</b>	<ul style="list-style-type: none"> <li>AH noted that guidance indicates that Emergency Medicine Departments should not be headed by any trainee below ST4 without supervision. RD stated that College of Emergency Medicine report 'Promoting in Emergency Medicine Training' states that emergency departments should only be headed by ST4 and above. RD noted that Scotland has high levels of unsupervised ST1 to ST3 trainees compared to other areas of UK in Emergency Medicine. NO'D requested that issue be discussed at next meeting.</li> </ul>	<b>RBS</b> to add EM Supervision item to next meeting
<b>3.6</b>	<b>Anaesthesia - ST Uplift for 2023</b>	<ul style="list-style-type: none"> <li>This item was discussed elsewhere.</li> </ul>	NO'D has confirmed that this item is now closed
<b>3.7</b>	<b>Intensive Care Medicine - Variation in SCREDS posts</b>	<ul style="list-style-type: none"> <li>NY confirmed that he is still to be contacted by CMcN. NY confirmed that this will be actioned out with the STB meeting.</li> </ul>	NO'D has confirmed that this item is now closed
<b>3.8</b>	<b>Emergency Medicine - Unfilled Posts</b>	<ul style="list-style-type: none"> <li>AH confirmed that this item has been completed.</li> </ul>	

4.	<b>Matters Arising</b>		
4.1	<b>Simulation Group</b>	<p>N'OD gave the members the following update related to the Simulation Group including:</p> <ul style="list-style-type: none"> <li>• <b>Simulation Posts:</b> NOD confirmed that three Simulation APGD posts have been appointed including: <ul style="list-style-type: none"> <li>• <b>Anaesthesia</b> – Edward Mellanby</li> <li>• <b>Emergency Medicine</b> – Laura McGregor</li> <li>• <b>ICM &amp; ACCES</b> – Thalia Munro-Somerville</li> </ul> </li> <li>• <b>Simulation Sub-Group:</b> NO'D confirmed that the Simulation Leads will form a sub-committee which will report to this STB. LMcG confirmed that a meeting for simulation APGDs will be held at the start of October at the Simulation Centre, Larbert.</li> <li>• <b>Progress so far:</b> LMcG stated that the group is collating information on Simulation from across Scotland. LMcG suggested that future activities could include skills clubs, boot camps, debriefs, mastery learning etc. LMcG confirmed that the Simulation Group will liaise with the UK Medical Simulation Collaborative.</li> <li>• <b>Simulation Budget:</b> DC and JM asked how Simulation courses were funded. AH confirmed that the Simulation Group does not have a separate budget and is instead funded from a variety of other NES budgets and will be available for three years. AH stated that CSMEM will be reviewing specialities to see if budgets can be aligned. LMcG confirmed that costs will vary across different sites.</li> <li>• <b>Strategic Plan:</b> LMcG confirmed that a strategic plan will be developed. EM confirmed that he would be sending out a draft proposal for comments and would consider adding OSCE simulation training.</li> <li>• <b>Simulation &amp; OSCE Training:</b> KB asked if the simulation group would carry out OSCE training as training in Dundee had ceased. JM stated that Emergency Medicine Simulation OSCE</li> </ul>	

		training was already delivered centrally and there is a small number of EM trainees who complete this every year.	
<b>5.0</b>	<b>Deanery Issues</b>		
<b>5.1</b>	<b>Quality</b>	<p>Various issues related to Quality were discussed including:</p> <ul style="list-style-type: none"> <li>• <b>Quality Meting:</b> NO'D confirmed that the next QRP will be held on 28/10/2022.</li> <li>• <b>Quality Visit – EM Monklands Hospital:</b> YM confirmed that an action plan review meeting for Monklands Hospital had been carried out and had received positive feedback. YM stated that improvements had been seen in minor injuries and training days for trainees. YM stated that there are still outstanding issues related to staffing levels however this is being addressed through use of GP trainees, IMGs and co-funding of posts etc. ST noted that Monklands Hospital was identified as one of the top 5% of departments in latest GMC survey.</li> <li>• <b>Quality Visit – Aberdeen Royal Infirmary:</b> YM confirmed that an Action Plan Review meeting will be carried out for Emergency Medicine Department at Aberdeen Royal Infirmary.</li> </ul>	
<b>5.2</b>	<b>MDST</b>	<p>AH gave the members the following MDST update including:</p> <ul style="list-style-type: none"> <li>• <b>Shape of Training – Expansion Posts:</b> AH confirmed that the Shape of Training Transitions Board have recommended expansion posts for August 2023. AH confirmed that the following posts including: <ul style="list-style-type: none"> <li>• Anaesthetics – 15 posts</li> <li>• Intensive Care Medicine – 16 posts</li> <li>• Emergency Medicine – 10 posts</li> </ul> </li> <li>• <b>Expansion Post Report Consultation:</b> AH confirmed that the report has been sent out to all territorial health boards and regional workforce groups who will then report back to Scottish Shape of Training Transition Board.</li> </ul>	

6.	Professional Development	<ul style="list-style-type: none"> <li>AH stated there were no issues to discuss.</li> </ul>	
6.1	Equality & Diversity	<ul style="list-style-type: none"> <li>AH stated that the Equality &amp; Diversity Group will be introducing questions related to equality, burn-out and access to facilities in the next trainee survey. In addition to this, the group will be looking at issues related to ARCP outcomes. AH stated that information will be released across the coming year.</li> </ul>	
6.2	STEP course for IMGs	<ul style="list-style-type: none"> <li>NO'D confirmed that a meeting will be held of 26/10/2022 to discuss STB specialties involvement in STEP programme.</li> </ul>	
6.3	STB Recruitment – September Update	<p>JMcK gave the members the following update:</p> <ul style="list-style-type: none"> <li><b>ST4 Anaesthesia - Round 3:</b> JMCK confirmed that there were eighteen ST4 applicants for Round 3 Recruitment. JMCK noted there was capacity for 32 applicants. JMCK confirmed that interviews will take place on 17/10/2022 for ten available posts.</li> <li><b>CT1 &amp; ST4:</b> JMCK confirmed that interviews for CT1 and ST4 next year will use a new interview platform with two fifteen-minute stations. JMCK stated that there would be no changes to assessor role.</li> <li><b>ICM Information:</b> JMCK confirmed that ICM information had been passed to specialty lead.</li> </ul>	
7.	Training Management (Recruitment, ARCPs, Rotations)		
7.1	Anaesthesia	<p>JMcG gave the members the following up-date related to Anaesthetics including:</p> <ul style="list-style-type: none"> <li><b>Recruitment:</b> JMCG stated that ST4 will have ten posts for the February recruitment round and that regular recruitment will commence on August 2023.</li> </ul>	

		<ul style="list-style-type: none"> <li>• <b>Interview format:</b> JMcG confirmed that a meeting will be held in October to discuss proposed changes to the recruitment interview process. JMcG noted that a simplified clinical question may be used. JMcG stated that he would update the members at the next STB meeting.</li> <li>• <b>SESSA Candidates:</b> KB confirmed that there are 20 to 22 candidates looking for posts in the South-East Region for August 2023. KB asked if there were any additional posts which would avoid trainees timing out. JMcG stated that information on available posts is still to be confirmed however it is hoped that expansion posts will provide additional positions. JMcG stated that the North and East Regions may have ongoing issues for the next two years however other regions will have enough posts.</li> <li>• <b>Expansion Posts – Timelines:</b> JMcG asked if there was a set timeline for a response related to proposed Expansion posts. AH stated that there was no set timeline at present.</li> <li>• <b>Expansion Posts – Drivers:</b> AK asked what the drivers were for the request for Expansion posts. AH confirmed that information had been used from Workforce, royal colleges, Colin Tilley etc.</li> <li>• <b>Whole Time Equivalent Model &amp; LTFT:</b> AH confirmed that a request has been made to move from head counts to Whole Time Equivalent. AH suggested that expansion posts could be used to support a Whole Time Equivalent model.</li> </ul>	
7.2	<b>Anaesthesia – Application Process for Trainees</b>	<p>Various issues were discussed relate to the application process including:</p> <ul style="list-style-type: none"> <li>• <b>Application Issues:</b> LP stated that the Scottish Anaesthesia application process requires candidates to select a nation early in the application process. LP stated that this may stop candidates from choosing Scotland. LP asked if this process should be changed.</li> <li>• <b>Application Background:</b> NO'D noted that before national recruitment was introduced each deanery recruited into their own school. NO'D stated that the Scottish Deanery standardised application questions with an additional local question. In Scotland, this related to commitment to unit of application which was then used to assess the candidate's final score. NO'D stated that the single transferable score was introduced for the national application</li> </ul>	

		<p>process. NO'D noted that Scotland decided not to join this and retained the local question. NO'D noted that Northern Ireland runs an identical process. NO'D stated that this process does not stop appointable trainees, who fail to gain a post in Scotland, moving to another deanery through clearing. NO'D noted that ratio of applicants to posts in Scotland is very good and fill rate has been 100% since 2016.</p> <ul style="list-style-type: none"> <li>• <b>Discussion of Application Process:</b> JMcG stated that he could discuss application process at next Anaesthesia committee meeting.</li> </ul>		
7.3	<b>Intensive Medicine</b>	<b>Care</b>	<p>Various issues related to ICM were discussed including:</p> <ul style="list-style-type: none"> <li>• <b>ICM Recruitment:</b> RS reported that there are 18 NTN posts this year. RS stated that this may allow posts to be re-cycled back to Anaesthetics for further recruitment. RS stated that HEE have issued dates for 2023 recruitment. RS stated that interviews will be online and will follow the same format with four stations dedicated to clinical issues, task prioritisation, professionalism, and commitment to specialty.</li> <li>• <b>ICM ARCPs:</b> RS reported that all ICM ARCPs have been completed.</li> <li>• <b>Trainee Rotations:</b> RS stated that several new rotation sites have been approved for ST3 training. RS stated that some trainees will have single CCTs and will require additional sub-specialty rotations.</li> <li>• <b>CESR Applications:</b> RS stated that ICM has received some CESR applications which are being processed.</li> </ul>	
7.4	<b>Emergency Medicine</b>		<ul style="list-style-type: none"> <li>• GMcA stated that the Scottish deanery has updated new eligibility criteria for Emergency Medicine LTFT. NO'D stated that Andrew Paterson was not present, and item would be discussed at next meeting.</li> </ul>	<b>RBS</b> to add EM LIFT criteria to next meeting agenda

7.5	Emergency Medicine – Rota Issues for higher Emergency Medicine trainees	<p>Various issues related to Emergency Medicine rotas were discussed including:</p> <ul style="list-style-type: none"> <li>• <b>Issues with Trainee Rotas:</b> LP stated that some trainees are not following the standard rota formats which are submitted to Scottish Government for salary banding. LP stated that is a particular issue when trainees are self-rostering.</li> <li>• <b>Examples of Self-Rostering:</b> Members confirmed that self-rostering has been used at Royal Infirmary, Edinburgh, Monklands Hospital, Paisley RAH but had been dropped due to technical issues. ST stated that self-rostering had been used at RAH was dropped due to various issues. LMcG suggested LP contact rota Lead at Monklands Hospital. NY suggested contacting ICM rota Lead at Edinburgh Royal Infirmary.</li> </ul>	
7.6	ACCS	<ul style="list-style-type: none"> <li>• <b>Nil not covered above.</b></li> </ul>	
8.	Royal College Reports		
8.1	Royal College of Anaesthetists	<ul style="list-style-type: none"> <li>• JMcG stated that he would report back to the next STB after the next college meeting at the start of October.</li> </ul>	
8.2	Faculty of Intensive Care Medicine	<p>RS gave the members the following update from FICM including:</p> <ul style="list-style-type: none"> <li>• <b>FICM Exams:</b> RS stated that exams have moved to face-to-face sittings and exam pass rate has improved. RS stated that FICM has improved access to exam resources on the website.</li> <li>• <b>Triple Accreditation:</b> RS stated that there are ongoing discussions about triple accreditation for ICM, Acute Medicine, General Internal Medicine, and Renal Medicine.</li> </ul>	
8.3	Royal College of Emergency Medicine	<ul style="list-style-type: none"> <li>• To be discussed at next meeting.</li> </ul>	
9.	Specialty and STC Reports (Workforce)		



9.1	Anaesthesia	<p>Various issues were discussed relating to Anaesthesia including:</p> <ul style="list-style-type: none"> <li>• <b>Anaesthetics Uplift Request:</b> NO'D stated that paper has been submitted to Scottish Government for uplift in Anaesthetics numbers. NO'D stated that, if approved, this will create 39 new posts over four years. NO'D noted that the numbers would be front loaded towards 2023 and 2024 due to impact of new curriculum. NO'D stated that the following post would be created: <ul style="list-style-type: none"> <li>• 2022 – 15 posts</li> <li>• 2024 – 12 posts</li> <li>• 2025 – 6 posts</li> <li>• 2026 – 6 posts</li> </ul> </li> <li>• <b>Impact of Retirements in Anaesthetics:</b> KB asked about the impact of retirements in Anaesthetics. NO'D stated that the uplift request is an attempt to cover all workforce losses based on available data. NO'D stated that information from Royal college census data is used to calculate request. KB asked whether there will be an updated census. NO'D stated that next census will be 2025.</li> <li>• <b>BMA Response:</b> LP stated that BMA has raised various issued including the requirement for uplift in a letter to the Scottish Government. LP stated that BMA Consultants committee are investigating issues related to retention.</li> </ul>	
9.2	Intensive Medicine Care	<p>RS gave the members the following update related to ICM including:</p> <ul style="list-style-type: none"> <li>• <b>Expansion Posts:</b> RS stated a request for expansion posts, based on Scottish Care Delivery Group report, has been submitted to Scottish Government. RS noted that some salaries for ICM are still funded through the Anaesthetics budget and that new funding is required for ICM to become a self-sustaining establishment. RS stated that ICM have requested 16 expansion posts with a plan to advertise 18 posts for August 2023. RS noted that ICM should reach establishments number in the next 12 months. RS stated that it is predicted that numbers will meet losses caused by retirements.</li> </ul>	

		<ul style="list-style-type: none"> <li>• <b>Dual Trainee Issues:</b> ST stated that dual trainees may have an impact on future workforce demands especially when trainees decide to split their posts at CCT. NO'D stated that up to 2025 dual training for all specialties in ICM will have a negative impact however from 2025 onwards the funding process will have a small positive impact for all partner specialties. RS noted that recycling of posts means that Emergency Medicine will gain extra trainees however work plans may differ.</li> </ul>	
9.3	<b>Emergency Medicine</b>	<ul style="list-style-type: none"> <li>• To be discussed at next meeting.</li> </ul>	
9.4	<b>ACCS</b>	<ul style="list-style-type: none"> <li>• NO'D stated that there were no plans to increase numbers in ACCS as last year's uplift has met demand alongside Core numbers.</li> </ul>	
10.	<b>SAS Report</b>	<ul style="list-style-type: none"> <li>• To be discussed at next meeting.</li> </ul>	
11.	<b>Academic Report</b>	<p>MS gave the members the following update related to academic issues including:</p> <ul style="list-style-type: none"> <li>• <b>Trainee Academic Posts:</b> MS stated that all trainee research posts have been filled this year. MS stated that there were more trainees who want to peruse research with an Anaesthesia component than posts available.</li> <li>• <b>SCREDS Posts:</b> MS raised issue of trainees who have been appointed as a SCREDS lecturer post which has been badged to Anaesthesia or ICU. MS stated that it has been agreed that the SCREDS post will follow trainee.</li> <li>• <b>Trainees Completing High Degrees:</b> MS stated that trainees should be advised to continue higher degrees throughout their training. MS stated that this would avoid gaps between completion of MD and CCT.</li> <li>• <b>Academic Trainees in Emergency Medicine:</b> CMcK stated that Emergency Medicine has increased number of academic trainees. CMcK stated that there was a desire to start academic research earlier in training cycle. CMcK stated that he would be submitting a business case to seek funding for this.</li> </ul>	

12.	<b>Trainee Report</b>	<ul style="list-style-type: none"> <li>• NO'D requested that RBS to circulate the Trainee Report to the members. RBS sent report to all meeting members.</li> </ul>	
13.	<b>Lay member Report</b>	<ul style="list-style-type: none"> <li>• To be discussed at next meeting</li> </ul>	
14.	<b>AOB</b>	<ul style="list-style-type: none"> <li>• There were no additional items of business</li> </ul>	
15.	<b>Date of Next Meeting</b>	<p><b>Date of next meeting:</b></p> <ul style="list-style-type: none"> <li>• 09/12/2022 (11:30 – 13:30) via TEAMS</li> </ul>	