

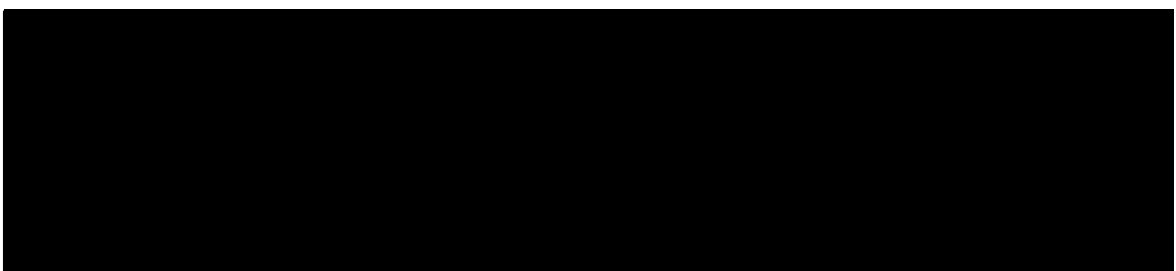
**HOSPITAL SERVICE SUB-COMMITTEE OF THE CENTRAL MEDICAL
ADVISORY COMMITTEE**

Minutes of the meeting held on Wednesday 6 February 2002 at 2.15pm in Room 922,
Dundonald House.

Present: Dr J Jenkins (Chairman)
Dr M P O'Neill
Dr P G Loughran
Dr I Orr
Dr J MacMahon
Dr J McAloon
Dr J Sloan
Dr A E Montgomery
Dr B Devlin
Dr C J McClelland
Mr S McAleer
Dr S Hawkins
Mr E J Mackle
Mr M J G Hawe
Dr K M Mahood
Mr M C McCann
Dr D McCluskey
Dr J R McCluggage
Prof J Watson
Dr D A J Keegan

In Attendance: Dr G Mock
Dr P Woods

1. APOLOGIES

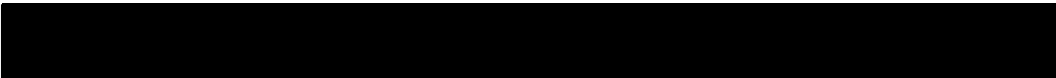


2. CHAIRMAN'S BUSINESS



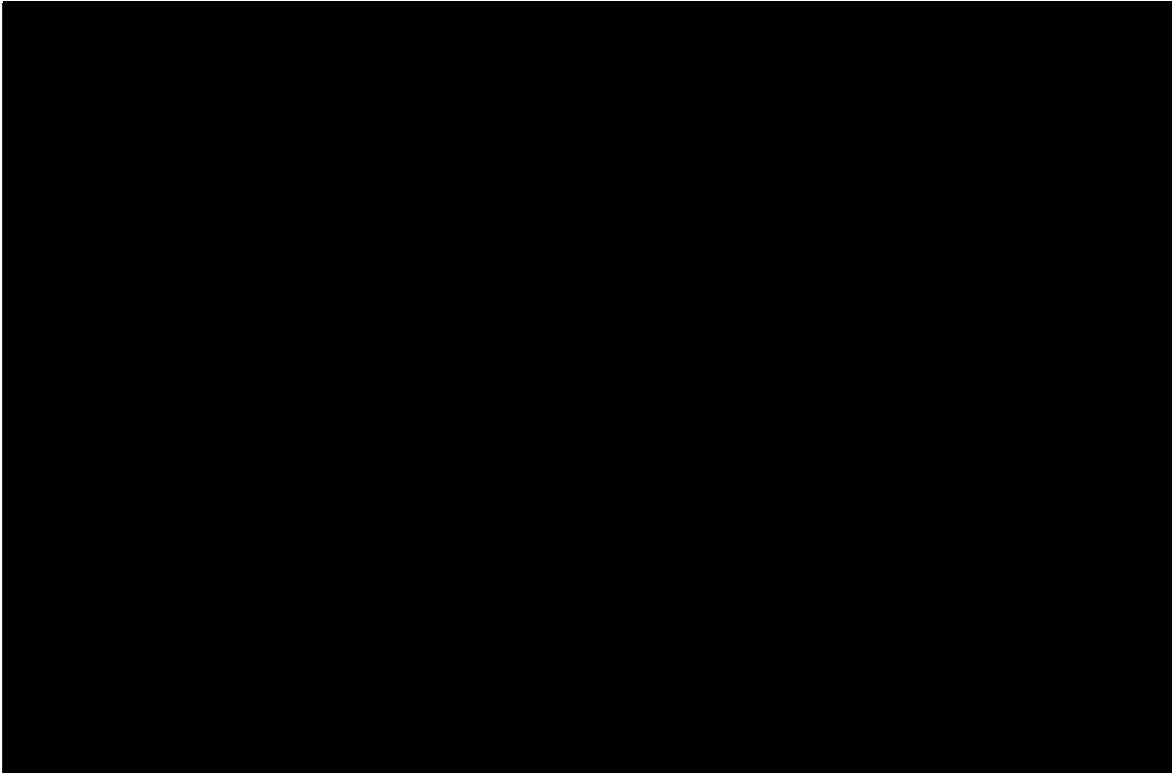


3. MINUTES OF LAST MEETING

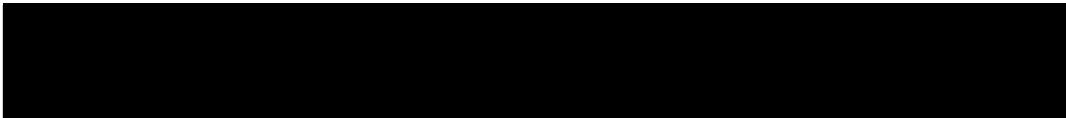


4. MATTERS ARISING

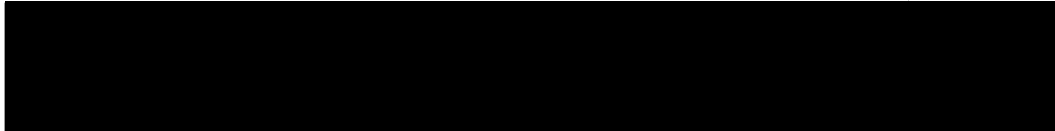
4.1 Cancer Services



4.2 Building the Way Forward in Primary Care



4.3 Investing for Health



4.4 Progress on the Quality Agenda

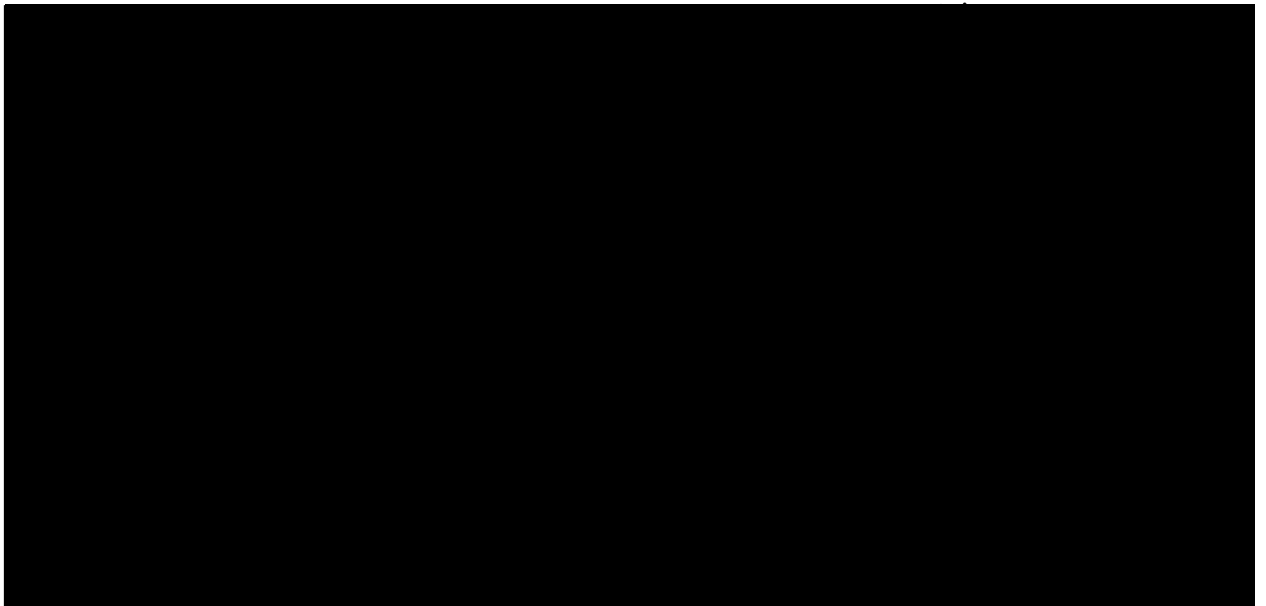
Dr Woods said consultation on the document "Best Practice – Best Care" had closed. A summary of the responses to this consultation paper and the main issues arising from consultation had been presented to the Departmental Board on Friday 25 January 2002.

The Committee emphasised that the introduction of clinical and social care governance needs to be taken forward urgently.

4.5 Acute Hospitals Review Group Report



5. SPECIALIST REGISTRAR STAFFING 2002/2003

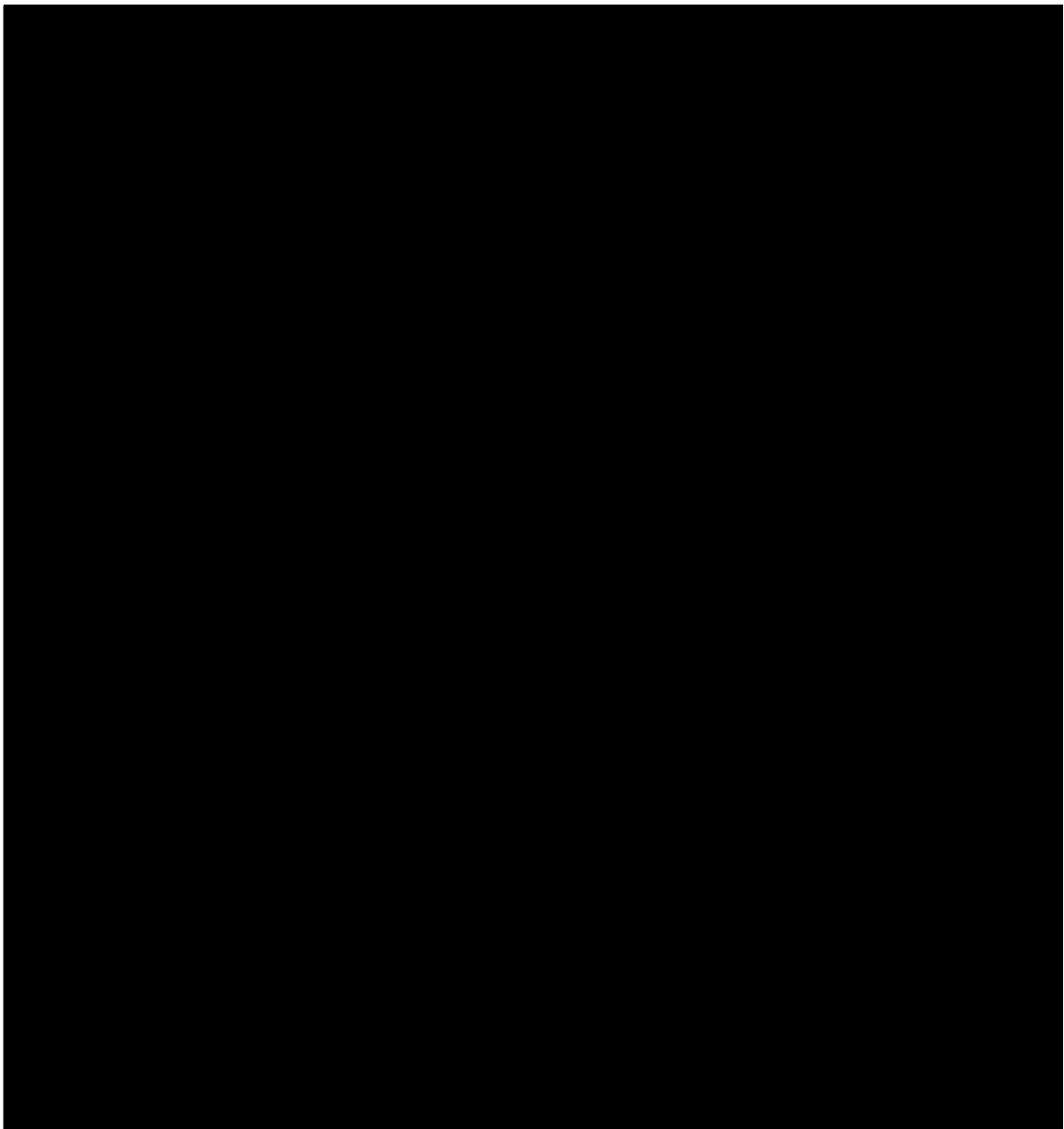




Accident and Emergency Medicine



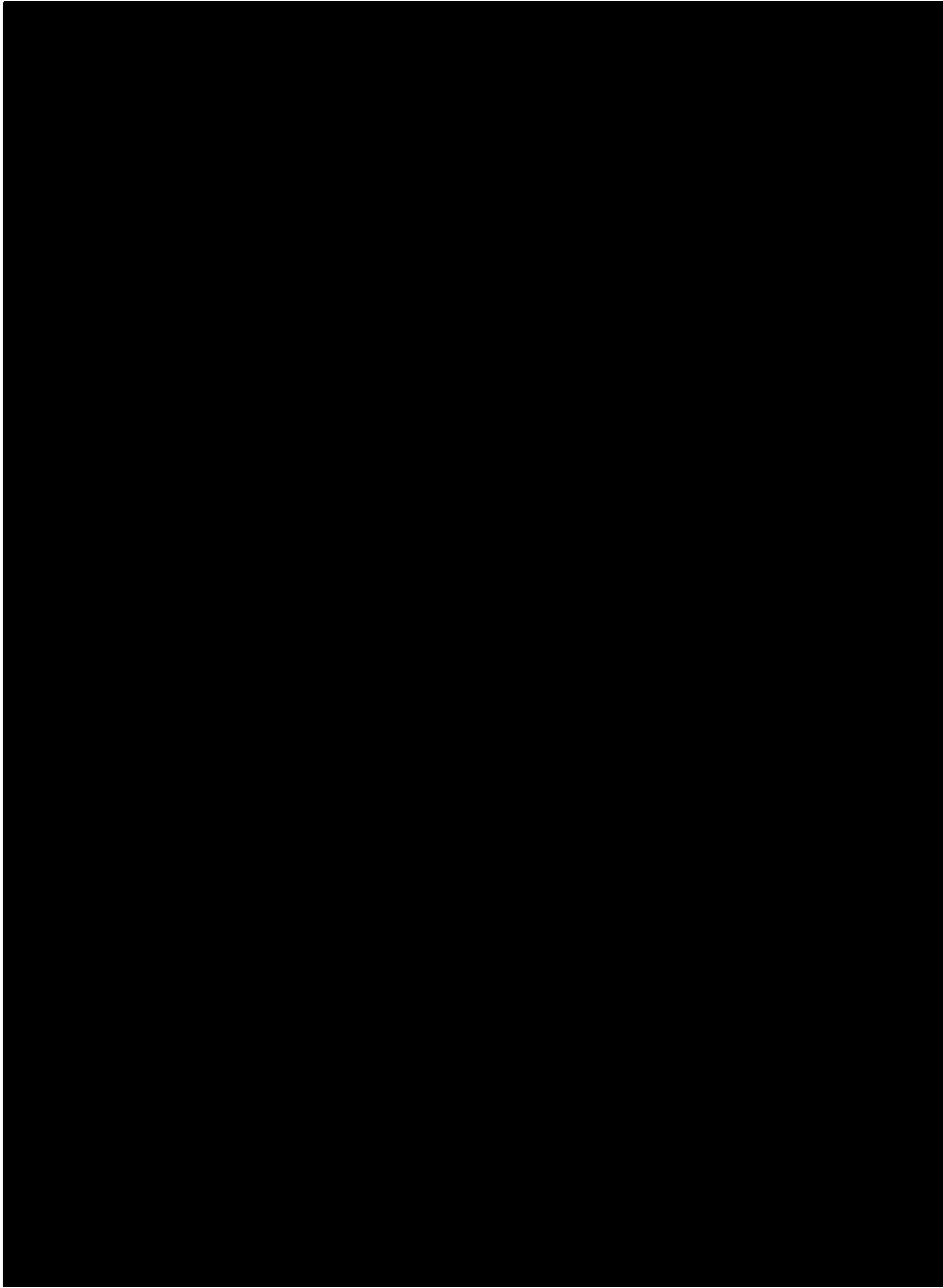
Anaesthetics

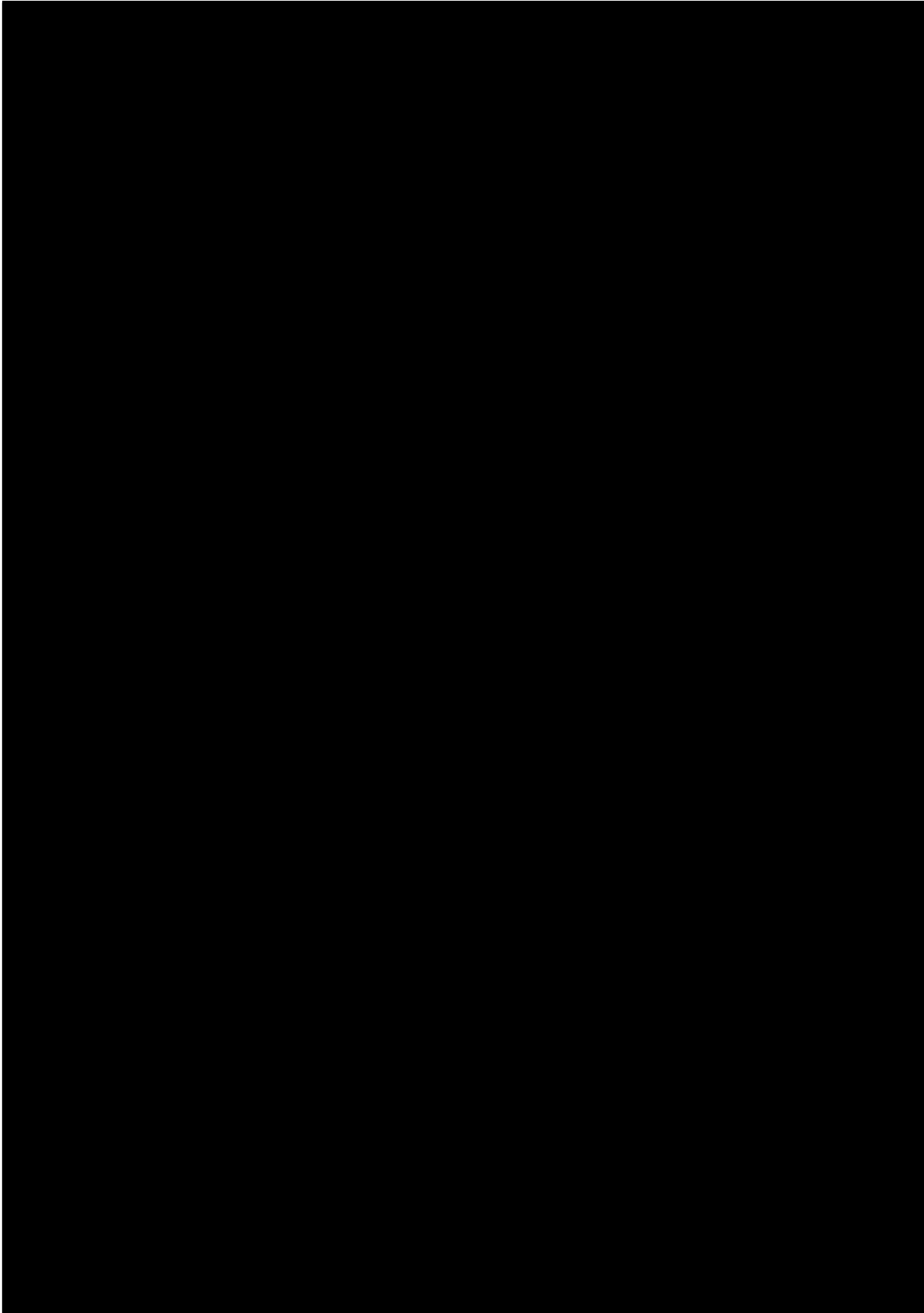


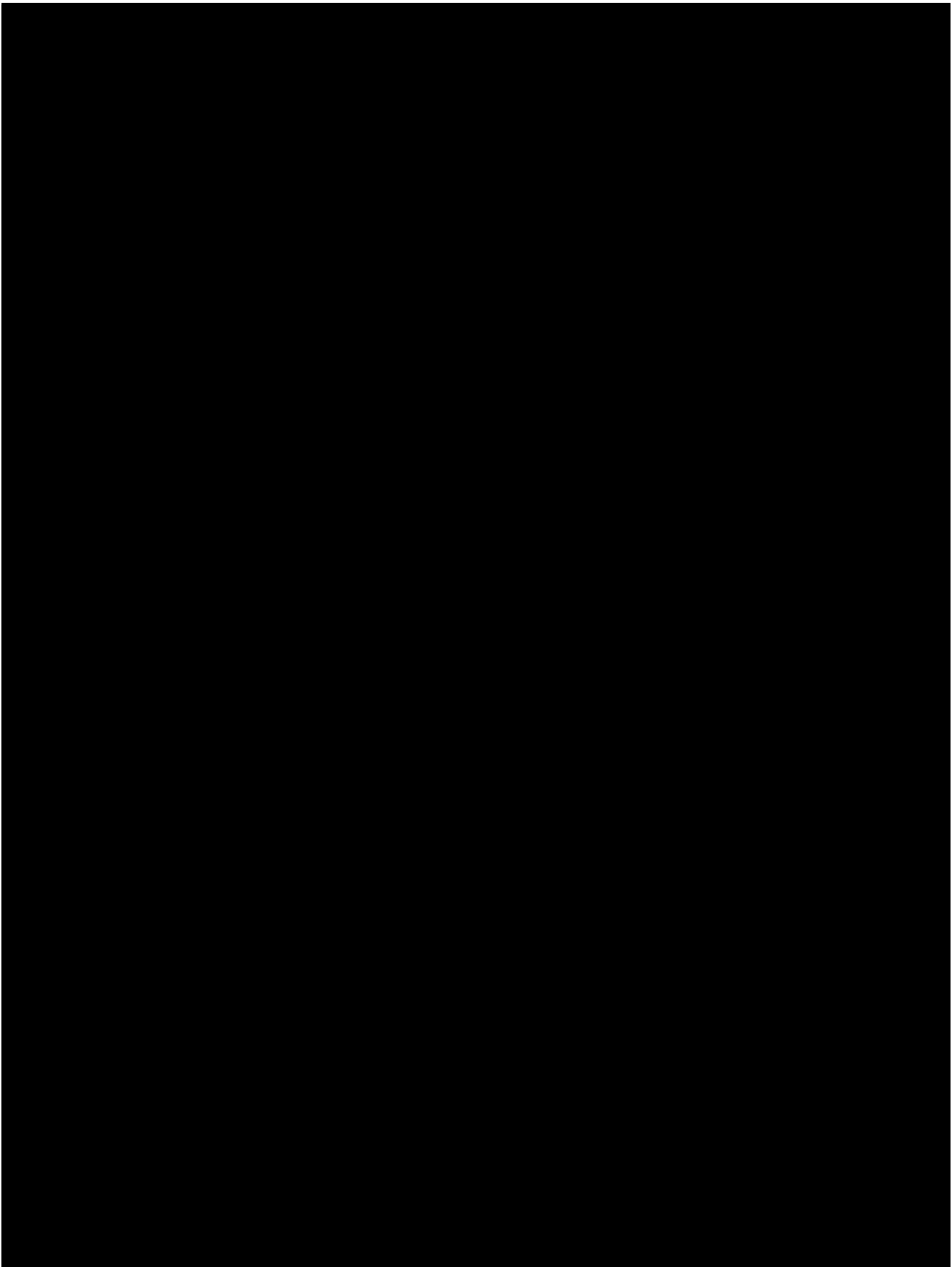


General Medicine and Related Specialties

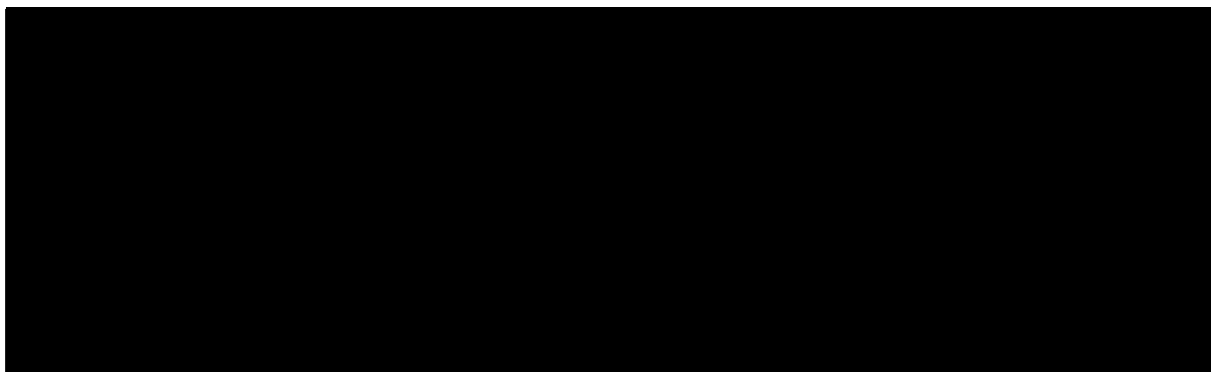








6. REVIEW OF TIME-EXPIRED SENIOR REGISTRARS



7. POSTGRADUATE MEDICAL EDUCATION AND TRAINING

Dr Woods advised that the Department of Health (London) had announced in the NHS plan that they proposed to modernise the arrangements for postgraduate medical education in the UK. It is intended to create a single body – the Medical Education Standards Board to bring together responsibility for all postgraduate Medical Education.

Members had received a copy of the Medical Education Standards Board consultation paper which sets out the proposed principles underpinning postgraduate medical education in the future.

Dr Woods sought the views of the Committee on the proposals and in particular on whether or not they posed any benefits or problems locally. The following main points emerged:

- Members welcomed the proposal that each of the countries in the UK would be represented on the MESB.**
- The proposals would impact on the functions of postgraduate Deaneries and Medical Royal Colleges. The role of the Royal Colleges was being challenged by this document and whilst it was recognised that their responsibilities for setting standards and supervision of PGME need to be rationalised there were fears that the Colleges would be sidelined. Concerns were expressed that if funding for the Colleges' work in standard setting is taken away costs of visits and examinations will rise.**
- The Committee highlighted the need to take account of Northern Ireland's close links with Royal Colleges in the Republic of Ireland and involve them in decision making.**
- The document does not mention a role for the non-consultant career grade or an attempt to have limited registration for these doctors. It was suggested this was an opportunity to examine mechanisms to enable this**

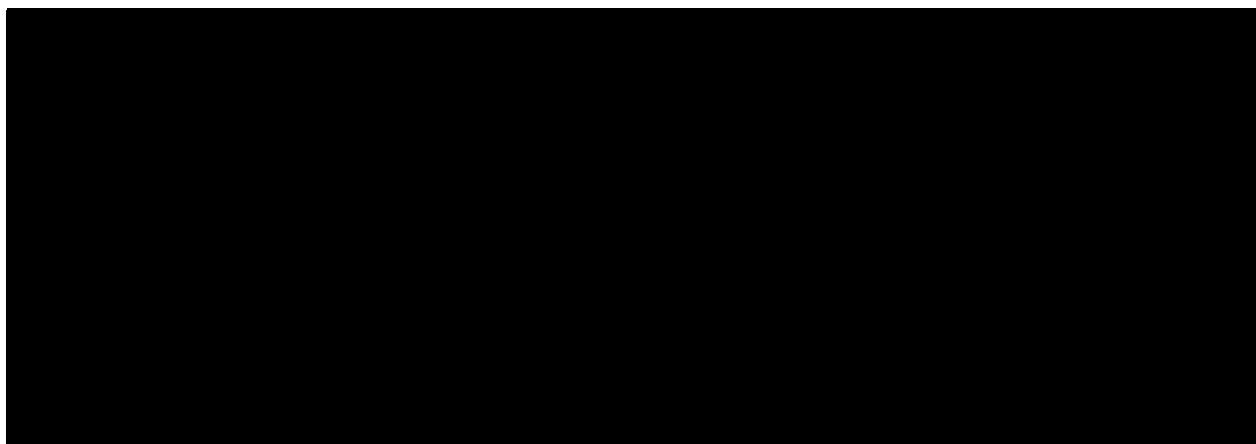
grade to re-enter higher specialist training and the development of alternative routes to specialist training.

The Chairman said the document proposes that appointments to the MESB will be made by the Secretary of State for Health and the MESB will be accountable for its performance to the Secretary of State on behalf of the four UK Health Ministers. He sought members' views about accountability arrangements.

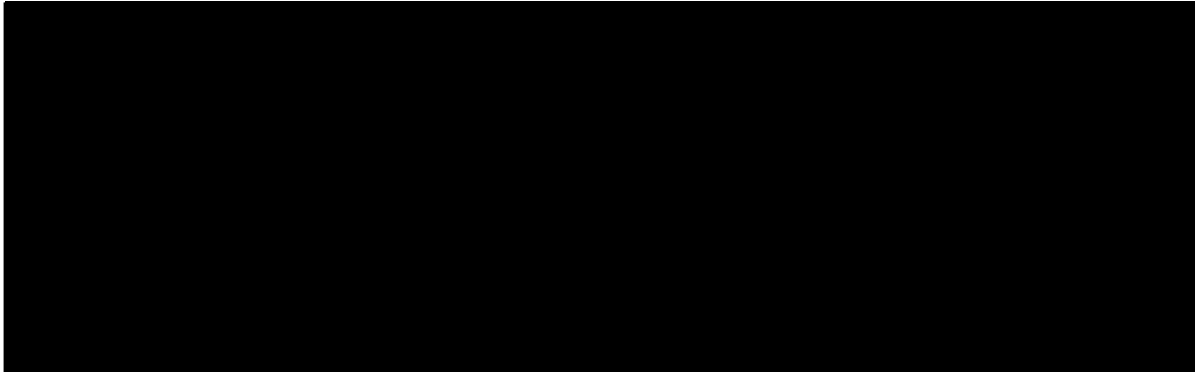
- Members questioned whether accountability directly to Westminster could be an option. There was discussion about how Northern Ireland's devolved administration would sit within the proposed accountability and reporting mechanisms and if responsibility for PGME should be part of the devolved arrangements.
- Members expressed disquiet that if the proposed model for postgraduate education and training was set up the Government would play the central role and control the agenda for PGME in the UK. It was felt that training and education matters could be compromised because of Government priorities.
- The document does not indicate that the membership of the Board will include a medical member from Northern Ireland.
- The document states that the role and function of the Board will include approving programmes of training. Members emphasised the need to involve the Royal Colleges in discharging this function.

The Chairman on behalf of the Committee undertook to respond to the consultation document.

8. WORK OF JUNIOR DOCTORS' WORKING LIVES IMPLEMENTATION SUPPORT GROUP

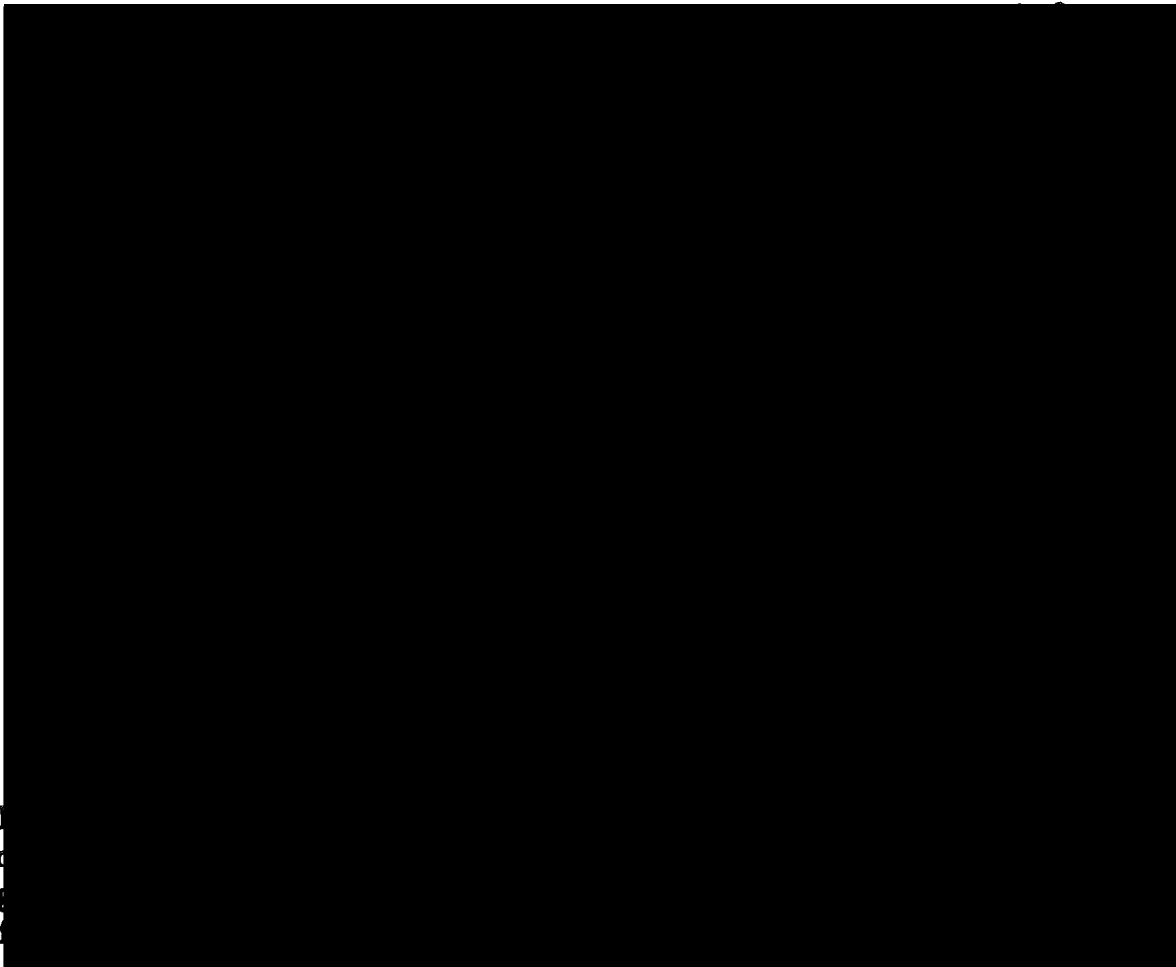


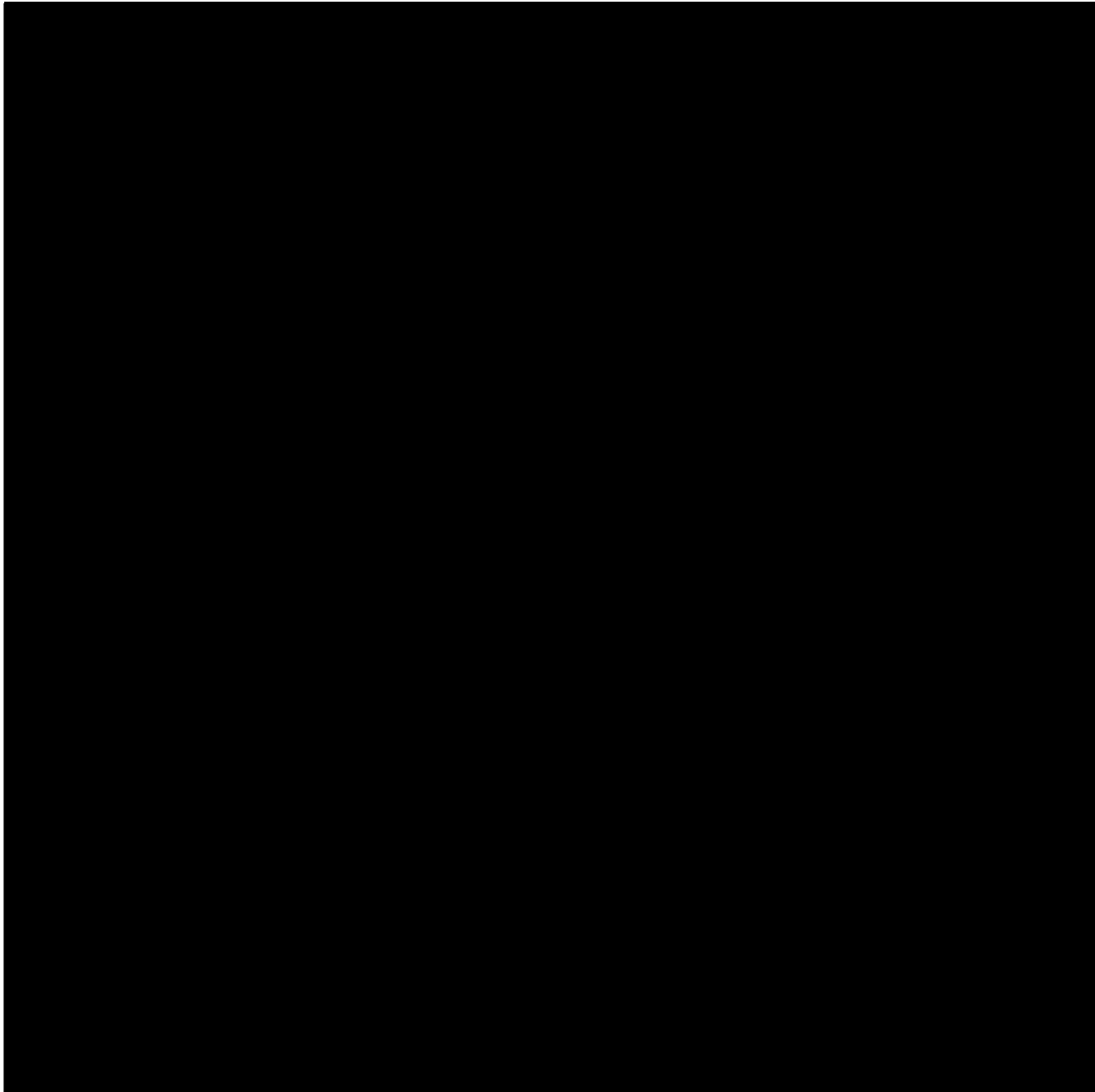
9. STAFF GRADE POSTS APPROVED 2001



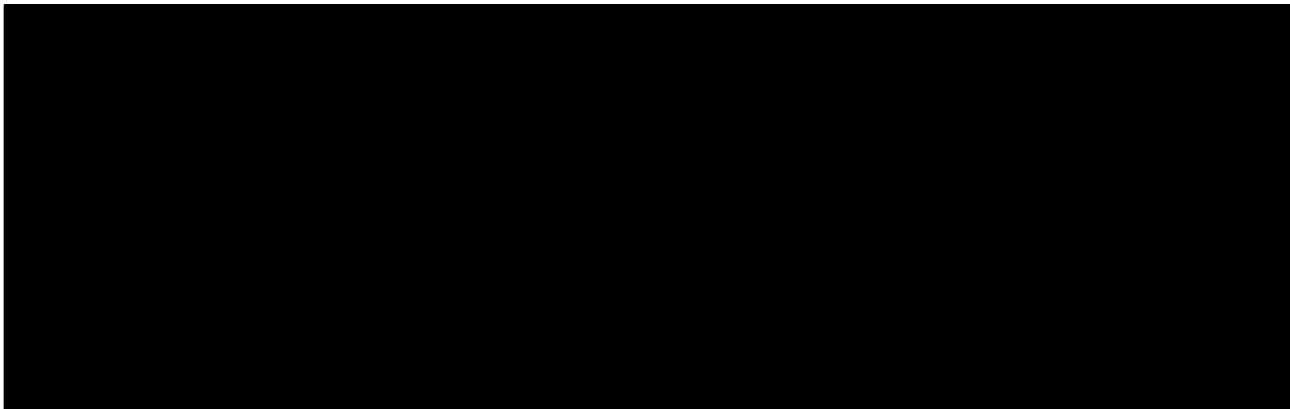
10. STAFF GRADE APPROVALS

**4 STAFF GRADE POSTS ANAESTHETICS AT ERNE HOSPITALS
1 STAFF GRADE POST ANAESTHETICS AT ULSTER COMMUNITY
AND HOSPITALS TRUST**





11. REVIEW OF DOMICILLARY OXYGEN THERAPY SERVICES





12. DATE OF NEXT MEETING

