

**MEETING OF THE SPECIALIST ADVISORY COMMITTEE
ANAESTHETICS**

**TUESDAY 12 DECEMBER 2006
1415 - 1700**

D2 LECTURE THEATRE, CASTLE BUILDINGS, STORMONT

PRESENT

Dr P Elliott
Dr G Lavery
Dr P McSorley
Prof R Mirakhur
Dr C Stanley
Dr C Wilson

DEPARTMENT

Dr E Mitchell (Chairman)
Dr M Boyle
Ms S Henry (Item 5)
Ms L Lamb (Item 5)
Dr H Neagle (Item 10)
Dr P Woods

DPH

Dr D Corrigan
Dr C Harper
Dr A Kilgallen
Dr D Stewart

ATTENDED

Dr P Bell

1. WELCOME / APOLOGIES

2. MINUTES OF THE MEETING HELD 20 SEPTEMBER 2005

3. MATTERS ARISING

- **Chronic Pain Management**

- **Future of SACs**

Following RPA both DHSSPS and HSSA will require clinical advice and details of how this is best provided will be considered.

4. MEDICAL STAFFING AND DEVELOPMENT

- **Consultant Medical Staffing**

Dr Woods reported that there were 179 consultants in post, an increase of 8 on one year previously. There remained 76 specialist registrars and 37 SHOs. Future consultant projections were based on a target consultant population of 240 providing 220 whole time equivalents. Under the anticipated run through arrangements for specialist training, the estimated training requirements were 102. This compared with the current number of 119 in the specialist registrar and SHO grade combined. However, he was mindful that a training innovation that would be introduced in the coming year involved the development of an acute care common stem training programme. This programme would draw on training placements in anaesthesia. On this basis, he felt it would be prudent to maintain current numbers pending clarity on the impact of this development.

Responding, members supported this proposal. They pointed out that over the past year there had been an increase in competition for consultant anaesthetist posts, which they considered welcome.

- **Modernising Medical Careers**

Members were apprised of the up to date position on the modernising medical careers agenda. In response to a query, Dr Woods advised that the issue of competition for places for those involved in run through training pilots would be clarified ahead of the commencement of specialty recruitment.

5. MODERNISATION AND REFORM

- **Review of Public Administration**

Ms Sharon Henry gave a presentation, attached to minutes.

6. CHANGING THE CULTURE

Members noted Paper 5/06 for information.

7. UPDATE ON QUALITY / SAFETY

Members noted Paper 6/06 for information. The Committee was informed that RQIA is about to launch quality inspection visits to all hospitals to review governance issues.

Professor Mirakhur in an email raised the issue of College visits to hospitals ceasing and whether the Northern Ireland Advisory Group should be taking this on. Members welcomed the exploration of the training visit issue with the Post Graduate Dean. It was felt that this proposal needed to be looked at in light of other arrangements including RQIA and Department arrangements on safety.

ACTION POINT Safety issue to be reviewed in light of ongoing Departmental Work

8. REVIEW OF TRAUMA

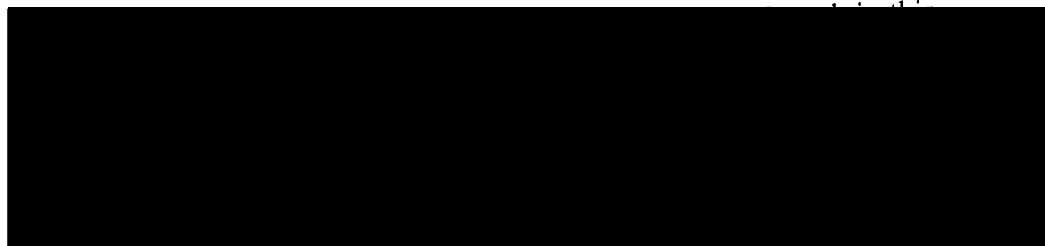


9. ANY OTHER BUSINESS



10. ITEMS FOR INFORMATION

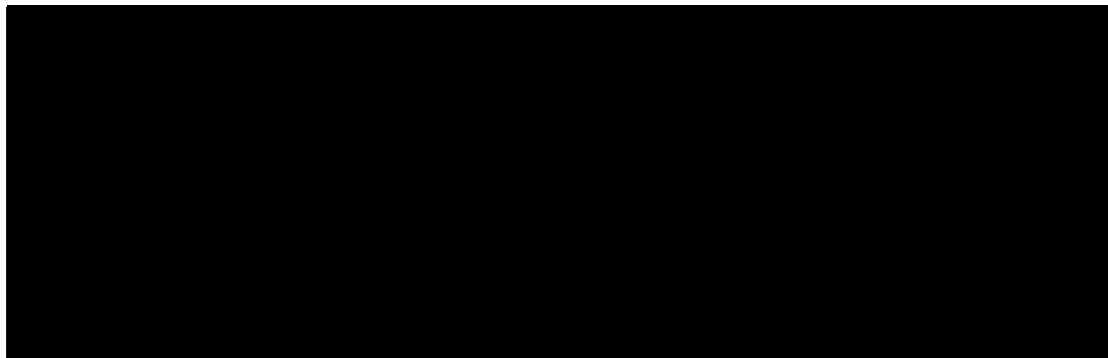
- **Early Warning System**




- **Inter-hospital Transfer of Patients and their Records**

Members welcomed notes being transferred with the patient though raised concerns re responsibility in Paragraph 1.3 of the document as this was the opposite to what NICATS had agreed some years ago. At 3.1 they asked if it should be receiving hospital rather than referring hospital.

ACTION POINT Dr Boyle to relay comments to Dr Mock who is to discuss the issue with Dr Stewart



**SAC ANAESTHETICS
12 DECEMBER 2006
ACTION POINTS**

ITEM	ACTION	LEAD
		
7 Update on Quality / Safety	Safety issue to be reviewed in light of ongoing Departmental Work	Dr Boyle
