

EXECUTIVE SUMMARY OF THE MEETING OF THE ACADEMY ON 14.04.09

European Working Time Directive

A recent chronology of the Academy's participation in the implementation of the EWTD had been circulated. It was agreed that this would be brought up to date and published on the Academy's website with a note to say that the chronology would be updated as events progressed. The ATDG statement on the EWTD would also be published on the website with a letter from the Academy PLG on the same subject.

The Chairman reported that representatives from the Academy had met with the DH again on 2 April to discuss the implementation of the EWTD. It was noted that much more detailed data on the implementation of the EWTD was now available from the SHAs. However, there were still concerns about the accuracy of some of this data and some over optimistic assumptions would need to be challenged.

Cardiff Discussion Statement

Members received the most recent version of this statement, which had been amended following a meeting between the Chairman, Sir Neil and Sir Liam Donaldson. Dr White expressed concern on behalf of the ATDG about the reference to an intermediate stepping off point during postgraduate training, which might mark the introduction of a sub-consultant grade.

It was agreed that the Academy would accept this version of the document as the basis for further discussions, which the Academy would wish to be fully involved in. The Academy wished to approve the wording of any letter circulated with the final version of the discussion statement to ensure that it was clear that the Academy had not endorsed the content of the statement.

Medical Education England

The Academy received a letter from the Academy representatives on MEE to Sir Christopher Edwards, Chairman of MEE. A response from Sir Christopher was tabled.

It was noted that at the two day meeting of MEE members in February there had been almost unanimous agreement that the establishment of an executive group was not acceptable and that decisions should be taken at MEE Board level. This was not adequately reflected in the minutes. The Academy's representatives on MEE had submitted detailed comments on the minutes and on MEE's list of priorities, some of which were already being undertaken by other organisations including the Academy.

MMC Programme Board

The Academy discussed representation on the MMC Programme Board. It was noted that it had been agreed that the Academy's representation on MMC Programme Board would be reviewed once MEE was established with a view to spreading representation among the Colleges and Faculties.

It was agreed that there should be some continuity of Academy representation on the Programme Board and that in the first instance a replacement would be sought for Dr Hulf on both MEE and the Programme Board as Dr Hulf was due to demit office as President of the Royal College of Anaesthetists in September 2009.

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Revalidation

Members received a progress report from Dr Judith Hulf. The Academy's work on revalidation was running ahead of the schedule set by the GMC. The DH had not as yet agreed the level of funding to the Academy for revalidation for the coming year. The bid for additional funding had included feasibility studies on the revalidation tools which were being developed, a communications budget and an assessment of the legal position of Colleges and Faculties in relation to revalidation. Dr Hulf would be discussing funding with the DH in the near future.

It was noted that the bid for funding had not included a cost benefit analysis on revalidation and that it would be difficult to be precise about the benefits of revalidation for a significant period of time. Professor Field indicated that the costs of revalidation were a particular concern in primary care because of the differences in the funding structure and that this issue needed to be considered.

Professor Field reported that he had represented the Academy at the GMC Revalidation Programme Board meeting on Tuesday 7 April 2009. Sir Michael Pitt had resigned as Chairman of the Programme Board and had been replaced by Mr Keith Pearson. Consultation on the primary legislation setting out the roles and responsibilities of responsible officers would begin in summer 2009 but implementation would be delayed until the end of 2010. The GMC would be writing formally to ask for confirmation that the Academy could deliver on the relevant elements of the timetable.

Mr Orr expressed concern that the Academy e-portfolio group had been stood down and it appeared that the DOH RST group was now undertaking this work without Academy representation. Dr Hulf indicated the funding bid to the DH included funding for Colleges and Faculties to develop e-portfolios and that it would be important for these to be developed so that Members and Fellows could store their detailed records relating to revalidation outside of their Trust. The tool being developed by the RST related specifically to appraisal and the remit of the RST was limited to England. However, it would be important that summary information could be downloaded from College/Faculty e-portfolios to the RST system.

Revalidation Clinical Lead

Members received a role description for the revalidation clinical lead. Dr Hulf was due to demit office as President of the Royal College of Anaesthetists in September 2009 and would no longer be a member of the Academy. Dr Hulf had offered to continue in this role for a further six months until March 2010 when she would step down from the Council of the Royal College of Anaesthetists. It was agreed that Dr Hulf should continue in this role for a further six months and that the process for nominating her successor should begin so that there could be an adequate handover. Presidents were asked to send their comments on the role description and the selection process to the Chairman.

Service Accreditation

Professor Peter Furness reported that Professor Sir Bruce Keogh had asked the Academy, in liaison with the CQC, to develop a framework that would underpin the development of service accreditation.

Initial meetings had taken place between Academy representatives, the CQC and the HCC. A bid for funding for a stakeholder meeting had been submitted to Sir Bruce's office. Professor Furness indicated that the meeting would be open to representatives from all four UK countries. The extent that the principles developed would apply outside England would be for the other three countries to decide. Although the focus would be on developing a framework for accrediting services provided by the NHS, service providers outside the NHS would also be able to apply for accreditation as was currently the case in specialties such as pathology. The tentative date for the meeting was 29 June 2009 this was dependent on funding being in place.

Medical Leadership Competency Framework

Members approved a refined version of the framework. The Chairman reported that the leadership project was in its final phases, she had agreed with the NHS Institute that she would replace Dr Hamilton as the Academy's representative on the project steering group. The Chairman had also negotiated funding for Colleges and Faculties to embed the framework within their specialty curricula. Each UK Medical Royal College and Faculty would receive £20,000 as a contribution to this work. In the case of medicine and surgery these funds would be paid to JCST and JCRPTB.

No Health Without Mental Health

The Academy received a short briefing paper and a new summary version of the report. The previous version of the full report had been presented to the Academy at its meeting in December 2008. Members agreed that the summary report was a great improvement and approved its publication. Professor Bhugra indicated that the report would be published in hard copy as part of the Royal College of Psychiatrist's fair deal campaign.

2009 Election of the Academy's Officers

Members approved the timetable for the election of the Academy's Officers and the role descriptions for the Chairman and Vice-Chairmen. It was agreed that where applicable current Officers would be asked if they wished to stand for re-election and that this information would be circulated with the call for nominations.

Academy of Medical Royal Colleges in Wales

The Chairman reported that she had attended the most recent meeting of the Welsh Academy on 16 March. Both the Welsh Academy and the Welsh Assembly were keen that the Welsh Academy was established on a more formal footing with its own secretariat in Wales. It had been proposed that the Welsh Academy should be a sub-committee of the UK Academy. The Welsh Assembly would be willing to part fund this development but wished to see a financial contribution from Colleges and Faculties.

It was noted that a considerable number of Colleges and Faculties already funded regional structures e.g. a Welsh Board, which provided fora for discussion of specialty specific issues relating to Wales.

It was agreed that details of the financial support already provided by Colleges and Faculties would be collated. This information would be sent to the Chairman of the Welsh Academy to form part of a business case for funding to be submitted to the Welsh Assembly.

Consultant delivered service

The Chairman reported that statements from individual Colleges and Faculties on this issue had been forwarded to Sir Neil who would consider whether an Academy statement could be produced.

National Patient Safety Campaign

It was agreed that the Academy should endorse this campaign.

E-Learning for Health

The Academy noted that two further projects, e-learning for medical leadership and e-learning in neuroscience (hosted by the Academy on behalf of the Joint Neurosciences Council) had been approved by E-learning for Health.

Modernising Scientific Careers Working Group

Professor Newland reported that discussions were taking place about the establishment of a working group under the auspices of the Academy to examine the role of senior scientists.

Each President had also been invited to nominate an individual to take part in the curriculum development process. Three, two-day workshops had been proposed. The Presidents expressed concern that the notice for these events was too short and the time commitment to high. Professor Newland agreed to pass these comments onto Professor Hill.

Innovation for Health

It was agreed that the Academy should set up a small working group, to be chaired by Dr Susan Bews. The group would consider how to take forward the recommendations in the report that related to the Academy in discussion with Professor Gilmore.

BAMM – Standards of Medical Management and Leadership

A letter from Professor Jenny Simpson, Chief Executive of BAMM asking for the Academy's comments on the latest revisions to these standards was tabled. Many Presidents indicated that they had received an individual letter. It was agreed that the Chairman would respond to Professor Simpson to indicate that Colleges and Faculties would respond individually with comments on these standards.

PMETB

The Chairman proposed that the Academy group which had met with PMETB to discuss issues such as the contract for services with Colleges and Faculties should be reconstituted and that further meeting should be held to discuss modular credentialing and other related issues. The Chairman would liaise with Professor Macpherson to seek a date for this meeting and would then ask for volunteers.

The Academy had also been asked to nominate two representatives on a group which PMETB were setting up on modular credentialing. The Chairman reminded the meeting that the Academy had submitted a project on credentialing to the Department of Health as part of its current bid for matched funding. Several Presidents had expressed an interest. It was agreed that the Chairman should nominate two Presidents who did not already represent the Academy on major committees or boards and that she should ask for a third Academy place on this group.

GMC Consultation on amendments to the Fitness to Practise Rules

The Chairman informed the Academy that she had written to Presidents about this consultation and urged each College to look carefully at some of the more contentious changes.

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