

ANNUAL REPORT 2013



CAI
SALUS DUM VIGILAMUS
College of Anaesthetists of Ireland

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President's Report

As my three year term as President began in June 2012. This is my second report to you. I am amazed how quickly the time has moved on. I am very honoured to be President and I hope I represent all our Fellows and Staff to the best of my abilities. Outlined here are some of our main activities in the last year.

Council Elections

The following Council members completed their term of office: Dr Jeanne Moriarty, Dr Deirdre McCoy and Dr Ken Lowry. I would like to extend our thanks to them for their work on behalf of Council. We also welcomed new members, Drs Jacinta McGinley and Camillus Power. I wish them every success as they take up this new role in the College. In addition to the above Dr Geraldine Moloney replaced Dr Rory Page (Convenor of the Irish Standing Committee, AAGBI) and Dr Mort Kelleher (CAT Chairperson) replaced Dr Roseita Carroll. Both Drs Moloney and Dr Kelleher are in attendance at Council. I would like to thank Drs Page and Carroll for their substantive role and participation over the last number of years.

Honours and Awards

Honorary Fellowship of the College May 2013:

Dr Peter Nightingale

Dr Gregor Pollach

Honorary Fellowship of the Faculty of Pain Medicine February 2013:

Professor Hans Kress

Professor Michael Cousins

College Medal:

Dr Tipu Sultan

Medal Winners

Membership Medal:

Dr Anusha Kannan, Autumn 2013

William & Jane Brophy Medal:

Drs Aoife Hegarty & Ahmed Elsherbenny,
Spring 2013

Pain Management Diploma Medal:

Dr Eleanor Cleary

Delaney Medal:

Dr Mairead Hayes for her presentation entitled 'Human mesenchymal stem cells enhance repair following ventilator-induced lung injury'.

GSK Medal Presentation:

Dr David Moore for his presentation entitled "Use of a multi-modal care pathway for laparoscopic cholecystectomy".

Poster prize:

Dr Darren Mullane his presentation was entitled "Cerebral Venous Thrombosis and Parietal Infarct following intrapartum Dural Puncture: A Causal or Casual Relationship?".

Council business

As you see from this year's annual report, the College has had another very busy year with a continued expansion in our activities. Council met on seven occasions in 2013. The key areas of activity and change are outlined below.

The audited accounts are contained within this report and show the College finances are in a healthy position at present. Dr Kevin Clarkson, Honorary Treasurer, and Ms Margaret Jenkinson, Finance Officer have ensured that all departments operate within budget. I would like to acknowledge the input of our new auditors, Grant Thornton. The financial outlook remains uncertain and it is critically important that we remain observant and ensure tight financial constraint for the coming future.

CEO

The CEO and his team have had another busy year. The College's activity levels continue to grow both at home and overseas. Last April the College signed an agreement as part of MV Ireland to undertake an 18 month contract to revalidate Consultant Anaesthetists in Qatar. MV Ireland is an entity made up of seven Postgraduate Training Bodies in Ireland who are all involved in this exercise. In addition, our overseas exam centers in Malaysia and Oman continue to expand.

At home, the CEO has continued to professionalise all our operations and has put in place an extensive Staff Development Programme.

Working with a wonderful group of committed staff, the CEO continues to develop the college's activities and income streams to ensure the College can deliver on its mission to provide a high level of training and education to all its stakeholders.

Strategy Meeting 31st October 2013.

The College held its third in a series of strategy workshops in Kildare on the 31st October 2013. The focus this year was on three key areas for future development:

1. Research Funding & Accreditation Services
2. Fellow engagement and interaction in College activities
3. Medical Staffing in the College – a mid-term plan.

The Executive of the College are now working towards completing the Strategic plan for the College for the coming five years and which will be published later this year. It is very important that as an institution we have clearly outlined our vision and direction for the coming years. I am hopeful, following detailed engagement that our Strategic Plan will do this.

Professional Competence

The College of Anaesthetists of Ireland was charged under The Medical Practitioners Act 2007 with administration of a Professional Competence Scheme (PCS) and an agreement was signed with the Medical Council in 2011 to implement a PCS for registered doctors aligned to the specialty. The scheme was developed in liaison with the Forum of Irish Postgraduate Training Bodies resulting in a broadly similar process across all training bodies.

The PCS year runs from 1st May to 30th April each year. The College is very conscious of the increasing financial pressure on our members and therefore we endeavor to retain the fee at the most reasonable level possible. The annual fee covers the cost of investment by the College in software, administration and database management. Dr Camillus Power has completed his first year as Chair of this Committee and I thank him for his contribution to this increasingly important College activity.

Education

The Education Committee, chaired by Dr Brian Kinirons has had an excellent year in increasing the number of educational activities offered by the College, with particular attention to covering the eight domains of practice required by the Medical Council.

The Annual Congress was held in the Convention Centre Dublin for the third consecutive year on 17th and 18th May 2013. Over 400 delegates attended over the two days at this very successful Annual Scientific meeting. The meeting covered a broad range of topics and included sessions devoted to sepsis and the critically ill patient, airway management, patient safety, regional anaesthesia and critical care medicine. The faculty included speakers from the USA, Hong Kong, Europe and the United Kingdom as well as a large number from Ireland.

The College wishes to support educational activities across the country with the regional societies to ensure that all meetings are not based solely in Dublin. This is also a key part of the College's strategy. We have also introduced web streaming of events held in Dublin and intend to expand that in the coming year.

To increase the knowledge of anaesthesia at an undergraduate level, the College ran for the first time an Essay Competition. Medical students were invited to submit an essay on the topic of "Advances in Anaesthesia". We received 29 submissions and awarded 1st, 2nd and 3rd prizes which were announced at our Annual Congress meeting in 2013.

Training

Training remains the core business of the College. The Training Committee is chaired by Dr David Mannion. The College of Anaesthetists of Ireland is the sole postgraduate training body responsible for anaesthesia in Ireland. It is recognised as such by both the Irish Medical Council and the HSE MET as SpR's who successfully complete training are awarded a Certificate of Completion of Specialist Training and are thus eligible for registration in the Specialist Division of the Irish Medical Council register.

While the new SAT scheme commenced in July 2012, the pre-existing SpR programme continues to run in parallel. SpRs taken on prior to 2012 will remain on our training scheme until 2017 when the final SpR's achieve CST status. Running two different groups of trainees remains a logistical challenge for the Training Office and I personally would like to thank all who have been very active in ensuring that we now have a very successful training programme.

The Chair of Training, the Dean and CEO have on-going interaction with HSE METR in relation to training issues and funding. The CAI agreed a new Service Level Agreement with the HSE in respect of delivery of anaesthesia training programmes for our trainees, commencing July 2013 for 1 year. These SLAs dictated the numbers to be employed on the College's Training programmes and mandatory deliverables which the College would provide, around these training programmes.

Dr Ellie O'Leary, Director of Trainee Affairs, organised the SAT interviews again this year and the process ran very efficiently. We are in the very positive position that there is no shortage of high caliber applicants to the Anaesthesia training programme at present, but it is essential that we maintain the high standards of our training, as there will be increasing pressure to focus on service needs as hospitals face more stringent budget cuts.

As part of the ongoing development of our training programmes the CAI recognised that there were opportunities to develop supra-specialty interest in a number of areas including Intensive Care Medicine, Pain Medicine, Obstetric Anaesthesia, Paediatric Anaesthesia and Cardiothoracic Anaesthesia. The HSE MET has approved these posts and it is hoped to commence appointments for 2014/15.

I would like to personally acknowledge the innovative approach to the training programme the College has now developed under the guidance of Dr Mannion and his team. There is no doubt the CAI is seen as leading the change in the training of specialists.

Committee of Anaesthesia Trainees (CAT)

The primary function of CAT is to represent trainees on all College of Anaesthetists of Ireland committees in which matters dealing with training are discussed. CAT, which is chaired by Dr Mort Kelleher has been particularly involved in the activities of the Training and Education Committees, and their representatives also contribute to Finance and Examinations Committee meetings.

In addition to participating in the Standing Committees of the College, CAT were very actively involved in the Medical Careers Day held at the Aviva Stadium. This event (organised by the Forum of Postgraduate Training Bodies) was designed to allow medical students and interns an opportunity to find out about the various options for medical specialty training in Ireland, and to get the "lowdown" from trainees and consultants in each specialty. CAT also organized the Anaesthesia Information Day held in February to allow a more in-depth experience of the multitude of roles played by anaesthetists in our hospitals. This event was attended by Undergraduates and Interns who had an interest in pursuing a career in Anaesthesia. It was a highly successful day.

Since the formation of CAT, they have become one of the most successful and innovative committees in the College. Their ongoing involvement in the College's primary activity areas are essential for the development of the Specialty of Anaesthesia and indeed the development of the College.

Hospital Accreditation

In the last 12 months, the College has increased its inspection of training hospital sites. This is a very important role for the College and I would like to thank all those who attend these inspections and who administer this function. In the last year, we have inspected:

South Infirmary Hospital, Cork

Letterkenny General Hospital, Donegal

St James's Hospital, Dublin

Cork University Hospital

Mater Misericordiae University Hospital, Dublin

The Rotunda Hospital, Dublin

National Maternity Hospital, Holles Street, Dublin

Examinations

Dr Philip Hawthorne, Vice President, chaired the Examinations Committee in 2013. In the last year the Committee met on four separate occasions. The Examinations Office has embarked on an ambitious project to streamline the management of the examination system using customised software developed by Ripley Systems UK. This project is not yet complete but the initial phase is now on stream. Dr Hawthorne embarked on a Quality Assurance visit to those international exams which we accept in part or in whole for exemption purposes as provided for in the Examination Regulations. In 2013 the Chairman visited the South African College and assessed the South African Final Fellowship examination which will stay on our exemptions list from the MCAI. The MD (Anaesthesia) examination of the University of West Indies was also added to this list following an assessment of their exam by Dr Hawthorne.

For the second consecutive year, the Examinations Department held an Examiner Training Day which was again very successful. This one day programme was for newly appointed examiners and for those who have been examining for more than five years.

Examinations are one of the key activities of the College both at home and overseas and I am very grateful to Dr Hawthorne and his team for running examinations to a level that represent the highest standards of the College. I am also very grateful to those who give up of their time to examine for the College.

Credentials

Dr Frank Loughnane took over the Chair of this Committee from Dr Clarkson in September 2013. The Committee has met on six separate occasions in 2013. The Committee reviews applications on behalf of the Medical Council for the purposes of Registration as a Medical Specialist. The Committee is guided by the Medical Practitioners Act 2007 and European Directive 2005/36/EC. Candidates are assessed for competence in clinical modules as well as in nonclinical competencies as outlined in the College document "Competence in Professionalism for Independent practice". Eight new applicants were referred to the Committee by The Irish Medical Council in 2013.

The role of The College is advisory and the Medical Council makes the final decision on eligibility for inclusion on the register of medical specialists. The Medical Council has an appeal process for doctors whose applications are refused. The Committee also assists College Council with applications for Ad Eundem fellowship of the College.

Over the last twelve months the Medical Council have been working with the Forum of Postgraduate Training Bodies to establish a revised framework for assessing doctors for entry to the Specialist Register. This new structure will provide a commonality of approach across all training bodies and will also ensure a standardized approach. The Training bodies hope to sign a service level agreement titled "Agreement for the Provision of Services in relation to the Assessment of Applications for Registration in the Specialist Division of the Register of Medical Practitioners" in the coming months.

Overseas Developments

The College is now supporting the training of three anaesthetists in Malawi on the MMed programme in Blantyre. In addition, one has now completed the Programme. The reports from their trainers in Capetown are excellent and we look forward to seeing their contribution to the development of anaesthesia in Malawi. Dr Gregor Pollach, head of department in QEH, assisted the trainees in completing research and audit projects. I am personally very grateful to Dr Pollach for his dedication towards ensuring the success of this important initiative for both the individual trainees but also in improving the quality of care in Malawi. In my time as President, I am determined to further develop and expand this initiative in association with Irish Aid.

As has already been referred to, the College's overseas activities have expanded further in 2013. I think it is very important that we continue to develop our activities outside of Ireland in addition to our primary activities here. I think it is important that the College sees its boundaries not only within Ireland. There is a great demand for quality education and qualifications and working with the CEO and Executive, I would hope that we can expand the reach and influence of the College.

Lay Committee Members

In June 2012, the College appointed ten Lay Representatives to all of its Standing Committees. This group play a very important role in attending our Standing Committees. In the coming year, I intend to increase the involvement of the lay representatives to ensure they feel part of the College family. I have no doubt their continuation will be significant in the years to come as they provide an independent, external perspective and infuse the College's committees with fresh, new thinking on all aspects of activities.

National Anaesthesia Programme

The National Clinical Programme in Anaesthesia has been established, under the Directorate of Quality and Clinical Care. Dr Bairbre Golden was appointed Director in December 2011. The College is represented on the Advisory Group by the President CAI and the CEO of the College. Dr Kevin Carson chairs the Advisory Committee and Dr Hawthorne sits on the working group. In its short existence, the NCPA has worked tirelessly to drive improved patient care, change and efficiencies in the healthcare system. It faces many challenges in these difficult financial times but I wish Dr Golden well in achieving the aims of the Programme.

The Forum of Post-Graduate Training Bodies

The College is actively involved with the Forum in issues of general interest, namely interactions with the Medical Council, the HSE and the Department of Health in all areas pertaining to training, professional competence and standards.

The Forum and Executive met nine times in 2012. There were four Tripartite meetings with the IMC, HSE METR and the Forum.

Acknowledgements

I would like to thank the CEO and the administrative staff for their professionalism, dedication and hard work in the last year. The Dean's Office comprises Dr Ian Surgeon, Post-graduate Dean, Dr Ellie O'Leary Director of Trainee Affairs, Dr Crina Burlacu, Director of Simulation Training for Trainees, Dr Niamh Hayes, Director of Simulator Training for the Professional Development Programme and Ms Louise Kelly, Nurse Administrator. The work of the Dean's office becomes increasingly complex year on year. I would like to thank the Dean, Directors and staff for their enthusiasm, innovations and work on behalf of the College and its trainees.

I would like to thank the members of Council, particularly the Honorary Officers and Chairs for all the time they give to the work of the College. I would also like to thank them for their support and encouragement in my role as President.

Last but not least our thanks to our tutors, trainers and examiners, who have contributed to bringing on the next generation of consultants.

Dr Ellen O'Sullivan,
President



CEO's Annual Report 2013

When writing my section of the annual report, it is always a good time for reflection on the year past and to celebrate and acknowledge what overall has been a successful year. I write this now as I come towards the end of my second full year as CEO of the College of Anaesthetists. The environment within which we operate remains challenging but the College continues to strive ahead to ensure we can deliver high quality training and education programmes and represent the best interests of our Trainees and Fellows. This has been greatly helped by the dedication and hard work of a very talented group of administrative staff who continue to provide excellent support for all the endeavours of the College.

Highlights

In the last two years, in conjunction with the Council and Executive of the College and using our Strategic Workshops as a catalyst for development and change, the College has introduced a number of new initiatives, mindful at all times, that the bedrock of this institution are our trainees and fellows. Some of these initiatives have included the establishment of the Membership Examination (MCAI) which brings the College's award more in line with other training bodies both in Ireland and the United Kingdom and is appropriate recognition for what is a high stakes examination. It also has the added advantage of establishing a link between the College and the recipients in the early stages of their training.

Since commencing my role as CEO, I have attempted to broaden the College's exposure to include activities in a number of overseas centers. In this time, we now have established examination centers in Oman, Malaysia and Jordan. In the coming year, we will also determine if we should add to those centers. These include Egypt, Hong Kong, etc. In addition to examinations, we are also identifying other areas of collaboration and co-operation to include training, simulation and assessment advice. The College has many areas of expertise that are in demand overseas. However, it is important that we place a structure around these activities that allow us to deliver to the highest of standards and don't allow for any reduction in the level of activity and services provided at home.

In April 2013, the College signed a contract with Medical Validation Ireland (MVIRI) to revalidate a number of Consultants at the Hamad Medical Corporation in Qatar. This is an eighteen month project undertaken with six other Irish Training Bodies, all operating under the umbrella of MVIRI. This is an exciting opportunity for the College and other training bodies. It also illustrates that the training bodies can co-operate and work effectively together, when opportunities such as this arise. I would hope that one of the positive results of the Revalidation Project will be the emergence of other opportunities, most likely within the Gulf region.

In 2013, the College administrative team worked to increase the rental activity of the College from primarily other educationally focused businesses. The last year was considerably better than 2012, with increased utilisation of our wonderful facilities, when not in use for College business. I would hope to see this further expanding in the coming year. We have a building and facilities that we should be very proud of.

At the end of October 2013, the College conducted its third in a series of Strategic Workshops for the Council and Executive of the College. The focus this year was on three key areas for future development:

1. Research Funding & Accreditation Services
2. Fellow engagement and interaction in College activities
3. Medical Staffing in the College – a mid-term plan.

The Administrative staff held a half-day workshop also focusing on many of the same areas as identified above. This was the first time such a workshop was held and it was very successful in identifying some additional solutions and areas for consideration. The day to day operation of the College is provided by the administrative staff and it is very important that all understand and are in a position to implement the strategic plan.

The aim now is to complete and document the College Strategic Plan for the coming five years with the intention of publishing later this year. As stated in the President's report, it is very important

that as an institution we have clearly outlined our vision and direction for the coming years. The Strategic Plan will provide focus and direction for the Fellows, Trainees and staff of the College.

In the last twelve months, the College has invested in an extensive staff development programme for the administrative staff. In an institution with a relatively small support staff, it is critical that we adopt a team based mentality to ensure delivery of all our key activities and that there is transfer of knowledge and skills across all our areas to ensure appropriate support. This programme is also assisting in identifying appropriate governance structures at a management level. Investing in staff is an expensive activity but it is also key to ensuring the long term success of the organisation.

Another key area of activity for the College has been its academic arm – MSc in Professionalism. For a number of reasons, this programme has seen a dramatic fall in numbers and with the guidance and direction of the Programme Director, Dr Joeseph Tracey, the Course content has been redeveloped and reconstructed, ensuring the Modules have a broader appeal. In tandem with this change to the Programme, following the publication of the Education Act in 2012, the Royal College of Surgeons in Ireland were no longer able to provide the link between CAI and the National University of Ireland (NUI). To resolve this major problem and following negotiations with the NUI, Council have agreed to apply for Recognised Status of the NUI. This is a major undertaking and indeed challenge. The formal application will be submitted to NUI in June 2014 and if successful, we would hope to re-launch our Masters programme and new Diploma Programmes in January 2015. This will be a major achievement for the College and will allow us grow our academic and research activity.

In 2013 we undertook a review of how the College could better engage with Social Media (Facebook, Twitter and LinkedIn). As a result, we have developed our Facebook page and this is now updated almost daily and becoming increasingly popular. We will assess how best to utilise the other forms of social media in 2014. It is very important that these are used appropriately to deliver the information and messages that our stakeholders need.

The area of IT and Audio Visual Support has become a much bigger challenge in the last twelve months. IT development, support and maintenance are a substantial budgetary cost on an annual basis. To allow us progress this key area, the College will be appointing an IT support person who will be based here 2/3 days per week. This person will play a key role in driving our IT initiatives to the next level and also managing our costs. This will also include webcasting and video conferencing. These are areas we have tried to develop and implement in the last year but not always successfully. I would see both as helping all our Fellows engage to a much greater level in all College activities than heretofore. I will be disappointed if I will not be reporting considerable progress in this area in the 2014 report.

2014

As CEO of the College, my main focus in 2014 will be to further embed the College strategy and to strengthen the College's finances through increased overseas activity and rental income. I also intend completing the staff development programme and putting in place a rolling programme for on-going development but which will be less of strain on the College's finances. An area I didn't address in 2013 was a College Communications Strategy. Working with the President and Honorary Secretary, it is my intention that one will be in place by year end.

The College is in a healthy position both financially and structurally. The challenges remain and the interactions with HSE MET, Department of Health and Children and the Medical Council are at times difficult and strained as we always engage with them with the best interests of the profession, trainees and fellows. This we will continue to do in 2014.

It is my intention that my legacy as CEO in conjunction with the President and Council will hopefully be a high quality institute of learning, training and education, recognised as such both in Ireland and overseas and embraced with long term financial security.

The Staff

The College is very well served by a highly committed group of talented staff whose contribution is very much appreciated. To reflect that contribution the College along with the new staff benefits put in place in 2012, established the Staff Development Programme and also funded two members of staff to undertake Graduate and Postgraduate programmes. I have stated this each year in my report and will restate again the importance of the College becoming an employer of choice so we can maintain the high quality of administrative support that currently exists within the College.

In 2013, three new members of staff joined the College: Ms Ann Marie Harte, Examinations Administrator, Ms Natalie Brennan, Finance Assistant and Ms Karen Foley, Examinations Administrator (Maternity Cover).

I would like to acknowledge the contribution of Council and Committee members for their role in ensuring the continued provision of high quality anaesthesia services in Ireland. Finally, I would like to sincerely thank all the staff at 22 Merrion Square for their hard work, enthusiasm and dedication in supporting the business of the College.

Fintan Foy
CEO



Postgraduate Dean's Report 2014

2013 saw a consolidation of the far-reaching changes in Anaesthesia training instituted in 2012. Essentially these changes were a reduction in training duration by one year to six years and the designation of these years as SAT 1-6 (Specialist Anaesthesia Trainee); restructuring of SAT 6 to allow for Special Interest or Fellowship opportunities; a dedicated pathway from SAT 2 to SAT 3 allowing for transition without interview, provided CCSAT2 is achieved, and a change in post numbers to better match the numbers in SAT 2 and SAT 3, thus removing the bottleneck that previously existed here. It is likely that trainee numbers will continue to rise, to accommodate the large number of medical graduates now entering postgraduate training. One would assume that this process will result in increased consultant numbers in Ireland, and this indeed does appear to be Government policy in medical manpower planning. While the numbers on the National Training Programme are rising, there has been a dramatic fall in the numbers of non-training NCHDs, leading to staffing difficulties in most Irish hospitals. This of course puts pressure on remaining trainees and consultants, and leads to increased tension between the demands of service and training. There is no easy solution to this, and the implementation of the European Working Time Directive will only exacerbate this tension. One small ameliorating factor has been the development of an International Medical Graduate Initiative between the HSE, the Medical Council and the Postgraduate Training Bodies, which sets out the requirements and mechanisms by which overseas trainees can come to Ireland on a short-term basis to further their training. The first output of this process has been the identification of a group of doctors currently under training in Anaesthesia with the College of Physicians and Surgeons Pakistan, who will come to Ireland for two years in the middle of their training, and return to Pakistan subsequently, to complete training. While in Ireland, though not on the Trainee Specialist Register, they will be treated exactly like our own trainees.

Along with the changes outlined above, a major review of all competencies required for CST in Anaesthesia, Intensive Care and Pain Medicine has been under way in 2013. This was in part a response to the requirement of the Medical

Council following their approval of CAI as a Training Body, that our training system should use more educational tools for assessment of competence, as well as the traditional examination-based tests of knowledge. The newly defined competencies and their methods of assessment, along with minimum volumes of practice in a given competency, and the existing examination syllabuses for the MCAI and FCAI, are being synthesized into a Curriculum document which should be completed in 2014. Underpinning this document will be an improved trainee logbook covering Anaesthesia, Intensive Care and Pain. There will also be a need to make the process as user friendly as possible from the viewpoint of Tutors and Trainers, using online documentation, and of course training will be required in these new processes.

The CAI strategy day held in November 2013 identified, among other things, a priority requirement for improved communication from the CAI to the outside world, and the need for trained educationalist input into the CAI's training and educational activities. Accordingly the CEO and the Postgraduate Dean have been working with our IT support companies, EVAD and Softouch, to identify the most appropriate platforms for activities such as webcasting, videoconferencing, video streaming etc. Part of this process will be the employment on a part-time basis, of an in-house IT professional. We are also involved, with the help of Professor Peter Cantillon, NUIG, in identifying a part-time educationalist.

The activity of the CAI Simulation Training unit continues unabated and has been a significant success, with more courses being offered and with continuing academic output, to the College's credit. The staff of Dr Crina Burlacu, Dr Niamh Hayes and Ms Louise Kelly as well as the excellent administrative support from CAI and the input from Simulation Fellows and the cohort of Simulation Trainers now available throughout Ireland, have worked extremely hard to ensure this success.

The acquisition of some new equipment should allow the development of yet more courses, most likely with an intensive care orientation, in 2014.

As this is the last annual report from me as Postgraduate Dean, I would like to take the opportunity to thank all those who have worked with me for their support and positive regard over the years. This had made my task and my daily activity in CAI a most pleasant and rewarding experience.

Dr Ian Surgeon
Postgraduate Dean



Examinations Committee Report

The Examinations Committee met formally four times during the year but with members involved in the several exams we run there was plenty of activity besides.

Last year's report dealt with the new arrangements for Quality Assurance visits between the Royal College of Anaesthetists, United Kingdom and ourselves. This is working well and exchange examiners from both institutions have welcomed the reduction in time involved.

New Examinations

A number of new exams have come become part of our remit: the Fellowship of the Faculty of Pain Medicine, the Fellowship of the Joint Faculty of Intensive Care Medicine and the European Diploma of Intensive Care (EDIC) examination, under the chairmanship of Dr Connail McCrory and Dr Brian Marsh respectively.

In last year's report I commented that the future of the Medical Council's Supervised Division examination appeared uncertain and indeed the Training Bodies are now no longer required to run such exams.

Examination Department Management System

We embarked last year on an ambitious project to streamline the management of the examination system using customised software from Ripley Systems. This project is not yet complete but the initial phase is now on stream. This phase provides for a central bank to hold exam questions – at present only Multiple Choice but later development will allow for OSCE type questions and others. The system allows for examiners to add new questions and review/edit questions on-line. A question submitted on-line will then be available for review to others before being added to the working bank.

For those setting exam papers, the software allows for the choosing of questions according to supplied criteria and then printing the paper.

At the time of writing, the question banks have been almost completely populated from the existing college MCQ collections (Membership, Final FCA, Pain and Intensive Care). This was a large task, as some of the MCQ collections were in formats that needed considerable work to make them suitable

for the new Bank and I am grateful to those who undertook the work.

In addition to maintaining a question bank, the system can mark MCQ papers by scanning. This has been done for many years by the industry workhorse Multiquess system but the new software will integrate the marking with the question bank and provide a level of Quality Control hitherto unachievable. We have not yet trialled the Marking system.

International Examinations

In the last report I mentioned that we had embarked on a Quality Assurance visit scheme to those international exams which we accept in part or in whole for exemption purposes as provided for in the Examination Regulations. In 2012 a visit to Pakistan was carried out and this year I assessed the South African Final Fellowship examination which will stay on our exemptions list.

I was invited to Trinidad and Tobago as External Examiner for the MD (Anaesthesia) examination of the University of West Indies. Although not currently on our exemptions list, it was felt that this robust examination should be included.

Overseas

Our own overseas examinations continue to run in Malaysia, Oman and Jordan. Currently these are MCQ exams for the Membership but we are exploring other possibilities.

Examiner Recruitment

A recurring theme, I am afraid. There have been some new examiner applications throughout the year but these really only compensate for the number of retirements. Being an examiner is more onerous than simply asking prepared questions for a day – maintenance of questions banks and preparation of exam material is an on-going process.

The Examiners' Training Day held in January highlighted this. Those who attended were impressed by the difficulty in writing suitable questions and improving on existing ones during the afternoon interactive workshop. We were all impressed by the acting abilities of Drs Loughrey and Kinirons in an excellent training video Dr Deirdre McCoy put together for her presentation on Examiner Behaviour.

Dr David Croke gave an illuminating talk on Quality assurance methodology – David has been involved in a QA audit on the Membership examination.

Medal Awards

The following are the medal recipients in 2013

Membership Medal:

Dr Anusha Kannan, Autumn 2013

William & Jane Brophy Medal:

Drs Aoife Hegarty & Ahmed Elsherbenny,
Spring 2013

Pain Medicine Diploma Medal:

Dr Eleanor Cleary

Thanks

I must thank the Chairpersons of the various examinations and indeed all examiners for their efforts throughout the year. Particular thanks of course to Ms Ruth Flaherty who manages the Examination Department with great skill and enthusiasm and a "can-do" approach.

Dr Philip Hawthorne

Chairperson Examinations Committee

Membership CAI Successful Candidates 2013

Mohamed Alhomary	Jacqueline Malouf
Graeme Brannan	Khaled Masaud
Kim Caulfield	Fouad Masood
Joseph Coyne	Martina Melvin
Moninne Creaney	Myles Monaghan
Sachin Doijode Nagaraj	Peter Moran
Sheila Duggan	Peter Michael Moran
Georgina Duignan	Muhammad Munir
Laura Flood	Emma Murray
Tharumalingam Gowripalann	Maruthee Vara Murukuti
Andrea Haren	John O'Flynn
Nafees Jafry	Kate O'Hare
Ashutosh Joshi	Padraig O'Scanail
Anusha Kannan	Pramod Palhade
Fergal Kavanagh	David Ridley
Sean Keane	Ilankathir Sathivel
Colm Keane	Sadia Sharif
Patrick Kennelly	Manu Sharma
Orla Kerr	Conor Skeritt
Mustafa Khalid	Aidan Spring
Sathish Kumar	Katie Stewart
Soo Ni Lan	Ruth Vaughan
Nivan Loganathan	Thomas Wall
Laura MacDarby	Shanika Wijayaratne
Sonya MacGillivray	Kiran Yelamati
Laeq Malik	

Final Fellowship Successful Candidates 2013

Madhu Adala	Omer Farooq
Osman Ahmed	Bartlomiej Fiszer
Adel Abdul Mohsun Al-Dujaili	Aurelia Fleck
Muhamad Almousawi	Deborah Galvin
Patricia Anagnostides	Ciara Hanley
Reema Ayyash	Sameer Hanna-Jumma
Maeve Barry	Aoife Hegarty
Lalita Bisht	Maeve Henry
Muiris Buckley	Nikki Higgins
Aine Cafferkey	Elwaleed Humaida
Aidan Campbell	David Hume
Sunil Kumar Chauhan	Michael Hurley
Srinivasulu Chitty	Naomi Hyndman
Abigail Clarke	Ioannis Ioannou
Sheila Clarke	Binoy Issac
John Coakley	Rajesh Kasipandian
Ansuman Datta	Madhavi Keskar
Tejal Desai	Wan Khoo
Yvonne Doyle	Shivaprasad Koodlahalli Thippaiah
Thomas Drew	Natarajan Ganesh Kumar
Venkatesan Duraiswamy	Wei Lan
Shafiu Durojaiye	Luis Lee
Ramesh Ekambaram	Luis Macchiavello
Feras Eljelani	Irfan Mansur
Sherif El-Naas	Laura Marshall
Ahmed Elsherbeny	Fergal McDonagh

Final Fellowship Successful Candidates 2013

Derek McLaughlan	Vijay Ragothaman
Paul McMackin	Binu Raj
Martin Minich	Mohammed Sajad
Itsuki Miura	Suresh Sanapala
Ahmad Moetamin	Rahul Sardar
Ayman Mustafa	Gopinath Selvaraj
Solmaz Nakhjavani	Rashmi Senaratne
Arul Nallapillai	Neil Shaw
Shalini Nalwad	Umbareen Siddiqi
Murali Nelapatla	Navneet Sinha
Bahadur Niazi	Vanja Srbljak
Judith Nieman	Jaswant Sumal
Cormac O'Connor	Philip Tildsley
Ruth - Aoibheann O'Leary	Narcis Ungureanu
Waleed Omer	Shanmugappriya Vijayarajan
Aikaterini Papadopolou	Michelle Walsh
Dave Patel	Alison White
Linga Prasad	Thivanka Wimalaratne
Sandeep Puppulwar	Pandurangam Yadagiri
Muhammad Quraishi	Baber Zaheer
Khadija Qureshi	



Training Committee Report

The College of Anaesthetists of Ireland is the sole postgraduate training body responsible for anaesthesia in Ireland. It is recognised as such by both the Irish Medical Council and the HSE MET as SpRs who successfully complete training are awarded a Certificate of Completion of Specialist Training and are thus eligible for registration in the Specialist Division of the IMC register. In 2013 the following doctors achieved CST.

Certificate of Specialist Training 2013 July 2013

Bilal	Ansari
Eleanor Christine	Cleary
Fiona	Desmond
Margaret	Doherty
Jeremiah John	Dowling
Niall	Fanning
Peter	Harper
Jennifer	Hastings
Trevor	Kavanagh
Dinesh	Kuriakose
Rory	Naughton
Alan	Ochana
Owen	O'Sullivan
Michael	O'Sullivan
Syed Farjad	Sultan

December 2013

Sudhir	Immanni
Anand	Ramachandran
Hilary	Shanahan

Specialist Anaesthesia Training Programme

The new SAT programme commenced in July 2012 with recruitment to SAT year 1 and SAT year 3. There was further recruitment to both SAT year 1 and 3 in 2013.

SAT Year 1

There was strong competition for entry to the new SAT programme. Ninety three applicants completed an online application form and sixty nine candidates were shortlisted using a standardised selection process. These candidates were then interviewed and thirty six candidates were appointed. They were then assigned to either the Eastern, Western or Southern RATPs based on their preference and their performance in the selection process.

SAT Year 3

Fifty three applicants applied for SAT Year 3, which was the equivalent of the start of the old SpR scheme. All fifty three were shortlisted for interview. Thirty six of these candidates were appointed to SAT 3.

SpR scheme

While the new SAT scheme commenced in July 2012, the pre-existing SpR continues to run in parallel. SpRs taken on prior to 2012 will remain on our training scheme until 2017 when the final SpRs achieve CST status.

Running two different groups of trainees remains a logistical challenge for the Training Office in the CAI and I would like to pay particular thanks to the Post Graduate Dean, Dr Ian Surgeon, the Director of Training, Dr Ellie O'Leary and the Training Officer, Ms Maria Golden for ensuring it all runs smoothly. In addition I would like to thank the many tutors, hospitals and the trainees themselves for their forbearance in dealing with the challenges that running two schemes entails.

Special Interest Year in Intensive Care Medicine.

All trainees exiting the CAI training programme have achieved basic proficiency in Intensive Care Medicine. As part of the ongoing development of our training programmes the CAI recognised that there were opportunities to develop supra-specialty interest in a number of areas including Intensive Care Medicine, Pain Medicine, Obstetric Anaesthesia, Paediatric Anaesthesia and Cardiothoracic Anaesthesia. This supra-specialty interest could be pursued during the final year of training, provided all training milestones have been

met during the previous five years. The options for inclusion of the specialty in the final year are as a Special Interest Year or as a Fellowship year. Special Interest posts differs from the fellowship posts, in that SI posts are in programme i.e. trainees rotate to these posts as part of the CAI programme and they are recognised by HSE as SAT 6 (or SpR5) posts. Fellowship posts are out of programme, are not funded as SpR posts and trainees must get Training Committee approval before commencing them, if they are to be recognised for training.

Intensive Care Medicine was the first specialty to be included as a Special Interest Year. HSE approved eight additional training posts in eight different ICUs nationally. These posts are advertised to trainees approaching their final year and where trainees are interested, they are rotated to ICM for their final year. Trainees rotating to these posts remain on the CAI training scheme – the only difference being that their entire clinical experience is ICM during this year. This programme has been rolled out over the past three years and has had an occupancy of approximately 75% during that time.

Given the success of the ICM SI year positions we now hope to develop additional SI Years posts in Pain Medicine. Unlike the ICM posts, however, these posts will necessitate conversion of an existing SAT post into a Pain Medicine post.

Supra Specialty Training in Intensive Care Medicine and Pain Medicine.

Both Intensive Care Medicine and Pain Medicine training for anaesthesia trainees has been clarified over the last years. Trainees wishing to pursue supraspecialty training in either discipline must undergo two years training in addition to anaesthesia training.

The first years training may be achieved in the final year of anaesthesia CST training either as an SI Year in ICM or a Pain Medicine fellow. Trainees who complete this first year qualify as Anaesthetists with a Special Interest in ICM (or Pain Medicine).

Completion of the second year of supra-specialty training will qualify anaesthetists as Specialists in ICM (or Pain Medicine) and will ultimately entitle them to dual CST as both ICM and Pain Medicine achieve Specialty status with the ICM. In 2012 we submitted a proposal to HSE MET to develop post CST Fellowship positions to complete the second year of supra-specialty training in these areas. We were delighted to receive verbal approval from HSE MET in late 2013 to proceed with these posts. These will be rolled out commencing in July 2014.

In the future, it will be possible for trainees to enter training in anaesthesia in Ireland and to complete all of their training up to specialist level in Intensive Care Medicine or Pain Medicine in this country.

The training pathways outlined above are the result of discussions and co-operation between the CAI Training Office, the JFICMI and the Pain Medicine Faculty. The training content, including definition of required competencies and assessment of same, will be the function of the JFICMI for ICM and the Pain Faculty for Pain Medicine. The new IMC specialties of ICM and Pain Medicine will thus be responsible for the content and quality of training required to train anaesthetists to specialist level in these supra-specialties.

Tutors

The CAI is acutely aware that while we control and direct training, most of the clinical training occurs at hospital level. It is essential therefore that the views and feedback of clinicians who conduct training are represented to the Training Committee. Dr Philip Hu fulfilled this function as the tutor representative to the Training Committee in 2013. He has represented the views of all tutors to the Training Committee and in turn fed back committee proceedings to the Tutor group. The Training Committee also benefit from the attendance of Dr Leo Kevin, representing the Western region and Dr Fergus Walshe, representing the Southern region.

Committee of Anaesthetists in Training.

In addition to the trainers, the Training Committee also benefits from the attendance of representatives of the Committee of Anaesthetists in Training. The functioning of the Training Committee involves constant dialogue between all interested parties and none are more essential to this process than the trainees themselves. Dr Mort Kelleher succeeded Dr Roseita Carroll as Chair of the Committee of Anaesthetists in Training in 2013 and I would like to commend both for their input into the direction and decisions of the Training Committee.

Anaesthesia Manpower and its implications for Training.

The CAI agrees a new Service Level Agreement with the HSE in respect of delivery of anaesthesia training programmes every year. These SLAs dictate the numbers to be recruited to the College's Training programmes and mandatory deliverables which the College provides, around these training programmes.

In 2013 the CAI was requested by HSE MET to develop its views on anaesthesia manpower in Ireland, including how consultant manpower relates to training numbers. These views were to feedback in turn into a process of medical workforce manpower planning by HSE MET itself. It is clear that consultant manpower numbers in anaesthesia, ICM and Pain Medicine in Ireland are considerably less than required. HSE MET has concluded that anaesthesia consultant workforce numbers must increase over the next five years and it is likely therefore that we will see an increase in anaesthesia trainees to match this increase in consultant numbers.

Dr David Mannion

Chair of the Training Committee



Committee of Anaesthetic Trainees (CAT) Report

Following elections in March, the inaugural Committee of Anaesthesia Trainees (CAT) handed over their responsibilities to a new committee at the Annual General Meeting at the 2013 Irish Congress of Anaesthesia. This year's committee has sought to build on the outstanding contribution of our predecessors in representing the interests of trainees at College level and beyond. It has been another busy year for CAT, at a time when trainees (as with all our colleagues in the healthcare sector) continue to face several challenges.

Representing trainees

The primary function of CAT is to represent trainees on all College of Anaesthetists of Ireland committees in which matters dealing with training are discussed. CAT has been particularly involved in the activities of the Training Committee and the Education Committee, and our representatives also contribute to Finance and Examinations Committee meetings. We have sought to ensure that the trainee voice has been heard loud and clear over the past year. As Chair of the CAT, I have reported our activities to CAI Council, and participated in the CAI Strategy Day that was held in Carton House, Kildare in November.

As well as our participation in College activities, CAT has represented anaesthesia trainees at the Joint Faculty of Intensive Care Medicine of Ireland, the Pain Faculty, the National Clinical Programme of Anaesthesia, the Irish Standing Committee and GAT committee of the AAGBI, and the Forum of Postgraduate Training Bodies trainee subcommittee.

A busy year...

Retention of Medical Talent – Medical Careers Day & Anaesthesia Information Day

The CAT term began in earnest in September, with our participation in the Medical Careers Day held at the Aviva Stadium. This event (organised by the Forum of Postgraduate Training Bodies) was designed to allow medical students and interns an opportunity to find out about the various options for medical specialty training in Ireland, and to get the lowdown from trainees and consultants in each specialty. Anaesthesia was well represented at the event, and our simulated operating theatre caught the imagination of several prospective applicants.

For those who were sufficiently impressed by this introduction to the specialty, an Anaesthesia Information Day was held in February to allow a more in-depth experience of the multitude of roles played by anaesthetists in our hospitals. CAT members were prominent in demonstrating airway skills, regional anaesthesia techniques, echocardiography and simulation training. This was the second year of this event, and the positive feedback received suggests that medical students appreciate the opportunity to find out more about the breadth of our specialty.

AAGBI Annual Congress & Irish Trainee Forum

What awaits those medical students who decide to pursue a career in anaesthesia? There have been considerable improvements in anaesthesia training in Ireland in recent years, with the introduction of a streamlined Specialist Anaesthesia Training (SAT) programme resulting in a clear pathway for trainees from the beginning to the end of training. This has certainly been a factor in the ongoing popularity of our specialty in comparison with others.

While the CAI has led the way in addressing the concerns of its trainees, it can sometimes be difficult for the College (and indeed for the CAT committee) to accurately gauge the variety of opinions among trainees across the country. As highlighted by the NCHD strike over working hours in September, there are some considerable challenges facing trainees in Ireland at the moment.

With this in mind, CAT got together with our colleagues at the Group of Anaesthetic Trainees (GAT) committee of the AAGBI, and hosted a joint session at the AAGBI Annual Congress held at the Convention Centre in Dublin last September. A Trainee Forum gave Irish trainees the opportunity to explain what they enjoyed about training in Ireland, and what aspects of training they thought could be improved upon.

The results of the discussion have allowed us to focus on certain priorities when representing trainees at the College, specifically concerns related to the ongoing conflict between service provision and training opportunities, the effect of reduced consultant salary levels on future career prospects, and the balance between work, training, and a social life.

Strong links have been maintained with the GAT committee over the course of the year, and our representative on the GAT committee - Dr Colm Keane – was delighted to announce that the GAT committee has agreed to host a joint meeting with CAT at the College of Anaesthetists of Ireland in November 2014 to coincide with the Winter Anaesthesia Weekend.

Manpower Planning

The College has invested considerable time and resources over the past year to the question of future manpower planning in anaesthesia in Ireland. CAT has sought to ensure trainees' views were clearly heard as part of this process – particularly in relation to discussions on the nature of future of the consultant grade in this country. Trainees remain strongly opposed to any proposal that creates a two-tier consultant workforce, and will continue to promote this position within the College and through our representation on the trainee committee of the Forum of Postgraduate Training Bodies.

Education

As ever, trainees have actively participated in the educational activities of the College, and I would like to congratulate those who have been successful in presenting their work at the various events throughout the year. In particular, congratulations to Dr David Moore, who won the 2013 KP Moore Medal, and Dr Stephen Frohlich, winner of the 2014 Delaney Medal, as well as all those who presented their work at the inaugural Audit Study Day in November 2013.

Consultant Interview & CV Workshop

For the first time, a Consultant Interview & CV workshop was held at CAI on Monday April 28th. This CAT initiative was designed to de-mystify the consultant appointment process for trainees approaching the end of their training, and allow

them to gain an insight into the skills required to be successful in their pursuit of a consultant post. An experienced faculty delivered an interactive and highly entertaining programme that explored in detail the process of being appointed as a consultant in Ireland. We hope that this workshop will become a regular fixture on the College calendar, and we would like to take the opportunity to thank the Education Committee of the college for their support of the event.

Election of a new committee

As we approach the Annual General Meeting of CAT at the Irish Congress of Anaesthesia, elections to select trainee representatives for the coming year are in progress. I would like to thank the 2013/14 committee members for all their hard work over the course of the year. Unfortunately I will not be able to continue to participate in CAT as I am due to complete my training in July, and I wish the newly-elected committee members well in their efforts to continue to promote the interests of anaesthetic trainees in this country.



Education Committee Report

The past year has been a busy one for the Education Committee with a large number of lectures, courses, workshops, competitions plus several new events and the Irish Congress of Anaesthesia. The Committee met five times during the year on the 23rd January, 21st March, 7th June, 22nd August and 8th November and reported back to the Council and the President.

College Workshops

This year all of the workshops were very popular and were well attended. Vascular Access was held on the 25th of February and was run by Dr Alan McShane and the Echocardiography Workshop run by Dr Michael Griffin was on 8th March. The Local Anaesthesia for Ophthalmic Surgery Workshop was held on the 24th September in the Royal Victoria Eye & Ear Hospital, this is the only workshop in Ireland that has live orbital blocks. Dr Muhammad Mukhtar is the workshop coordinator. The Difficult Airways Workshop was held on the 30th November and was run by Dr Ellen O'Sullivan, Dr Jubil Thomas and Dr Mike Staunton. The Professionalism in Practice Workshop was held on the 22nd of November and was organized by MSc Professionalism in Practice module coordinator Dr Barry Lyons. Thank you to all workshop organisers who offer their time to ensure the success of these meetings.

Audit Study Day

This was the first year the College ran the Audit Study Day which was held in the College on the 8th November. The aspiration of the College is that this day will become an annual event in the educational calendar. This audit study day highlights the College's recognition of the importance of audit and in so doing facilitates the dissemination of audit, be it of local, national or international importance. The winner of the best oral presentation was Dr Lucia Borovickova for her presentation entitled "Clinical audit of compliance with enhanced recovery programme in elective colorectal surgery in Beaumont Hospital". The winner for best poster was Dr Aoife Quinn for her presentation entitled "Audit to Assess Departmental Standards in Performing Anaesthetic Equipment Check". On the day we welcomed Mr Ken Mealy from the National Office for Clinical Audit and Dr Phillip Crowley, Head of Quality and Patient Safety, HSE.

Undergrad Intern Open Information Day

In conjunction with the CAT Committee the College held an Open Day aimed at medical students and interns for the first time in January 2013. The day included a talk on the history of Anaesthesia. Dr David Mannion, chairman of the CAI Training Committee gave details of the National Training Programme. Also talks from current and past anaesthetic trainees from their perspectives. Delegates had an opportunity to participate in simulation scenarios and other interactive training sessions. The day was very successful and was over subscribed due to the success of the day we plan to run this workshop annually.

Presentation Skills Day

This was another new workshop ran in the College in March 2013. The workshop was run by 'Inspire Change' a London based communications agency who are the UK's leader in healthcare communication management. The workshop was aimed at trainees and consultants wishing to improve their presentation skills. The workshop was coordinated by Dr Stephen Frohlich and kindly sponsored by MSD.

Leadership Lecture

We ran a Leadership Lecture on the 8th November 2013 in the College which was presented by Dr Don Thornhill, a former senior civil servant, who is now a consultant and adviser on strategy and policy to a number of leading Irish organisations. His presentation was entitled "Leadership and Change - Through a Distant Mirror".

Delaney Medal Presentation

The Delaney Medal presentations took place in the College on Thursday 14th March. The adjudicators were Dr Michael Griffin (Mater), Dr Tom Ryan (St James) and Dr Nigel Webster (UK). The winning presentation was from Dr Mairead Hayes whose talk was entitled 'Human mesenchymal stem cells enhance repair following ventilator-induced lung injury'. Thank you to Fannin Healthcare who annually provide the sponsorship funds for the winner of the competition.

This is the first year that all applicants' abstracts were published in the British Journal of Anaesthesia. Thanks to Professor Dave Lambert of the BJA for coordinating this new initiative.

Abbvie Scholarship

The Abbvie Scholarship in Anaesthetic Research was held on Friday 15th March. Abbvie once again provided €10,000 for a scholarship to support original research by an Irish anaesthetist. The judges were Dr Michael Scully (Galway), Dr Dermot Phelan (Mater) and Dr Ian Surgeon (Post Graduate Dean of CAI). The presentations were held in the College of Anaesthetists of Ireland. The scholarship was ultimately jointly awarded to Dr Noelle Murphy with a presentation entitled 'The Validation of urinary biomarkers of acute kidney injury (AKI) post open aortic abdominal aneurysm repair' and to Dr Caroline Larkin for her presentation which was entitled 'The Mechanisms of sepsis-associated thrombocytopenia and thrombosis'.

Irish Congress of Anaesthesia (ICA)

This was held on the 17th & 18th May in the Convention Centre Dublin. The meeting covered a broad range of topics and also included sessions devoted to sepsis and the critically ill patient, airway management, patient safety, regional anaesthesia and critical care medicine. The faculty included speakers from the Europe, USA, Asia and the United Kingdom as well as a number from Ireland. The Sir Ivan Magill lecture was presented by Professor Judith Hall (UK) the lecture was entitled "The myth of sisyphus: Innovation in medicine".

In conjunction with the ASM 2013, The Irish Society of Regional Anaesthesia (ISRA) held their fifth Advanced Ultrasound in Regional Anaesthesia Workshop. The meeting had a record number of attendees and feedback was excellent. The Annual Dinner was held on the 17th May in the Convention Centre Dublin.

Gilmartin Lecture

The Gilmartin Lecture was held on the 13th December in the College and was given by Professor Aidan Halligan of University College London Hospitals. The lecture was entitled "Rediscovering Lost Values".

Core Topics Day and Autumn College Lecture

The Core Topics Day meeting was held in the College on the 24th October. The Autumn College Lecture was delivered by Dr Stephen Prineas (UK) his lecture was entitled "Blazing a Vapour Trail - Why Anaesthetists Can and Should Take the Lead on Human Factors Training".

Winter College Lecture

The Winter College Lecture was presented by Professor Justiaan Swanevelder, Department of Anaesthesia, Groote Schuur Hospital, South Africa, his presentation was entitled "The use or value of Echocardiography in ICU/cardiac theatres".

KP Moore Medal Competition

This competition aimed at trainees in the SAT 1-2 years. Thank you to MSD who kindly sponsored the competition.

The adjudicators were Dr Aine Ni Chonchubhair (Portiuncula), Dr Agnes Hayes (Mater) and Mort Kelleher (CAT representative). Dr David Moore won the KP Moore Medal Prize for his presentation entitled "**Use of a multi-modal care pathway for laparoscopic cholecystectomy**". Dr Darren Mullane won for best poster presentation which was entitled "Cerebral Venous Thrombosis and Parietal Infarct following intrapartum Dural Puncture: A Causal or Casual Relationship?".

Essay Competition

The College ran for the first time an Essay Competition. Medical students were invited to submit an essay on the topic of "Advances in Anaesthesia". We received 29 submissions and awarded 1st, 2nd and 3rd prizes which were announced at the ICA 2013. 1st prize was awarded to Ms Sophie Duignan (UCD), 2nd prizes went to Mr Andrew Purcell and 3rd prize to Mr David Columb (RCSI). Due to the success of the Essay Competition it will be held annually.

College Courses

This year's Introduction to Anaesthesia course which is mandatory for all new trainees on the College training programme was held in the College on the 5th, 6th and 13th July. The course was coordinated by the Postgraduate Dean, Dr Ian Surgeon and Simulation Director, Dr Crina Burlacu.

I would like to thank all those who participated as faculty for our educational events, all members of the Committee for their advice and support during the year and Ms Orla Doran and Ms Denise Johnston for their hard work.

Dr Brian Kinirons,
Chairman

Credentials Committee Report



This is my first report as chair of the Credentials Committee which met on four occasions during the year 6th February, 27th March, 23rd August and the 8th November 2013. The meetings are attended by other members of council including the President, Dean and National Director of Training and administrative staff.

The Committee reviews applications on behalf of the Medical Council for the purposes of Registration as a Medical Specialist. The Committee is guided by the Medical Practitioners Act 2007 and European Directive 2005/36/EC. The Medical Council will usually support the College decision but retains discretion. This process allows doctors who have not taken part in the College of Anaesthesia Specialist Registrar training programme to demonstrate equivalence of training and experience. This also includes those applying from abroad within or outside of the European Union. Candidates are assessed for competence in clinical modules as well as in nonclinical competencies as outlined in the College document "Competence in Professionalism for Independent practice".

Applicants may be recommended for immediate registration where documentation is complete and includes substantial and verified evidence of training including rosters, logbooks with a breakdown of caseload and structured references requested by the Committee. The Committee introduced new Structured Reference Reports which will be sought from chairpersons of departments, who liaise with senior colleagues in the department. Candidates deemed to be deficient in verifiable components of Specialist Registrar year 4/5 training, may be referred through the training committee for a period structured training in specific hospitals. It is important that accepting institutions put in place a satisfactory programme for the candidate. These positions are in short supply and availability cannot be guaranteed by the College.

A number of applicants have no demonstrable specialist training equivalent to College training and cannot be supported for registration as a specialist. They may of course seek general registration. A streamlined process is being developed in conjunction with the Medical Council to provide

non-eligible doctors with clarity and objectives avoiding undue delays and expense.

Eight new applicants were referred to the Committee by The Irish Medical Council in 2013. All applicants agreed to progress their submissions to the Committee for their recommendation.

In total eleven applicants were recommended for inclusion onto the Specialist Register, all except one applicant who was recommended applied prior to January 2013. Seven of those recommended for inclusion had successfully completed a period of structured training which was recommended by the Committee. A further five applicants who applied during 2013 were recommended to undertake further substantial senior level of training.

The role of The College is advisory and the Medical Council makes the final decision on eligibility for inclusion on the register of medical specialists. The Medical Council have an appeal process for doctors whose applications are refused. The Committee also assists College Council with applications for Ad Eundem fellowship of the College.

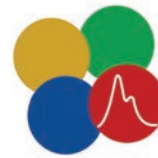
Over the last twelve months the Medical Council have been working with the Forum of Postgraduate Training Bodies to establish a revised framework for assessing doctors for entry to the Specialist Register. This new structure will provide a commonality of approach across all training bodies and will also ensure a standardized approach. The Training bodies hope to sign a service level agreement titled "Agreement for the Provision of Services in relation to the Assessment of Applications for Registration in the Specialist Division of the Register of Medical Practitioners" in the coming months.

I would like to thank College staff, notably Ms Orla Doran and Mrs Lauren Donohoe for their support of the Committee.

Dr Frank Loughnane

Chairperson of the Credentials Committee

Joint Faculty of Intensive Care Medicine of Ireland



**Joint Faculty of
Intensive Care Medicine of Ireland**

College of Anaesthetists of Ireland • Intensive Care Society of Ireland
Royal College of Physicians of Ireland • Royal College of Surgeons in Ireland

This is a summary of work this year in pursuit of the aims of the Joint Faculty of Intensive Care Medicine of Ireland (JFICMI).

Intensive Care Medicine (ICM) as a specialty

This was granted in a letter from the Medical Council of Ireland on 8th January this year following the consent of the Minister for Health. There will be a new Division of the Medical Specialist Register for Intensive Care Medicine.

The Post Graduate Training Board (PGTB) responsibility for ICM will lie with the three 'parent' Colleges but will be effected via the JFICMI.

At a meeting with Medical Council of 30th January 2014, the following was apparent:

Format of a two-year (supra-specialty) ICM training to be further clarified such that a pathway is evident – year 1 of ICM being generally taken as a Special Interest Year (in ICM) and year 2 to be further developed from current JFICMI guidelines as an 'advanced / post CST' year approved by the JFICMI.

IMC compatible format to be agreed after which CST in ICM will be awarded

Anticipated that a system allowing advanced (post CST) training in ICM will be functional in July 2014 i.e. any post-CST trainee undertaking such a post should anticipate attainment of a CST in ICM by July 2015.

Dual specialist registration for most consultants in ICM anticipated

A JFICMI / Medical Council process is anticipated whereby equivalence for eligible Consultants in ICM, currently in Irish practice, will be drawn up. PCS will be 'handled' by body representing the majority practice of the doctor

This year's AGM of the JFICMI will be held, by kind permission of the ICSI, in June 2014 at the time of its Annual Scientific Meeting. We are all indebted to the work of the Board in attending to the ongoing work and in particular to the officers of the Board, Jeanne Moriarty (Vice Dean), Brian Marsh (Past Dean), Maria Donnelly (Treasurer) and John Bates (Hon Secretary).

Board composition and elections

The next election to the Board Joint Faculty will take place in 2015 when two positions will be vacant. The Board is working effectively with six elected members and four members representing the parent bodies. We were pleased to institute a new trainee post this year and Ruth Aobheann O'Leary was elected to this position, representing ICM trainees specifically. The trainees in anaesthesia are represented by Dr John Fitzgerald from the Committee of Anaesthesia Trainees (CAT). The Critical Care Programme (CCP) of the HSE is represented as a co-opted Board position.

Post-graduate Education

The Faculty has continued its remit in organising the successful three day course held in advance of its Fellowship exam. The three hospital format has continued this year and we thank Andrew Westbrook and the organisers at each of the other hospitals (Catherine Nix and Enda O'Connor) for providing a course with such persistently positive feedback. This year also, we have re-activated (after discussion with the ICSI) the refresher course series which takes a theme e.g. Respiratory or Cardiovascular Critical Care and addresses it in a manner suitable to those seeking topic refreshment or taking exams. We thank Enda O'Connor for initiating a successful formula such that the course attendance rose several-fold for the second event.

Examinations and training

Under the co-chairmanship of Brian Marsh and Andrew Westbrook, the Fellowship exam continues to develop and is run to an exceptionally high standard. It remains as a written exam after which a candidate may progress to the Viva / Clinical exam. Although the elements of the exam are under constant review, including its summative assessment role in parallel with the evolving work-based, competency assessments, the clinical exam will remain a key mechanism in the Faculty's accreditation processes. We thank the Faculty examiners who are central to running such a high quality exam, particularly those who consistently contribute to the updating of the short answer and MCQ bank for the exam.

The committee has been to the fore in the new European (EDIC) exam which is OSCE-based and addresses one of the aspirations of the ESICM – to achieve a consistent, reliable exam Europe-wide. In this process, Dublin has been one of six sites Europe-wide.

The Training Visitation process continues and, for the sake of logistic efficiency is undertaken (where training ICUs are in question) in conjunction with the CAI Visitation process. Two JFICMI visitors are required for those visitations, where Special Interest Year (SIY) training is to be accredited. The implementation of competency based training together with its associated accreditation tools such as work-based assessments will be an increasing focus of such visitation processes. The JFICMI sought application this year for its advanced (post-CST) training positions and four sites were provisionally approved, pending specific visitation by the Faculty. This will happen in conjunction with the revisions to the Faculty's Training Pathways document, which will be effected in conjunction with Medical Council requirements.

Paediatric Critical Care

In 2013, the Paediatric Critical Care Group (PCCG), with endorsement from the JFICMI and the ICSI, completed a National Standards document for Paediatric Critical Care Services in Ireland – thus initiating a benchmark against which Paediatric Critical Care Services may be measured. Future documents will delineate the entire pathway for critically ill children in need of Critical Care.

In May 2013, the PCCG, with support from the JFICMI and the CCP, applied to the National Director for Clinical Strategy and Programmes, to seek parallel status with Adult Critical Care within the HSE Critical Care Programme (CCP). The CCP (see below) has given its preliminary approval and review is on-going. This process is reflective of the strong support of the JFICMI for the PCCG in its endeavour to evolve the speciality with strong Governance and Education / Training links.

The CAI training Committee in collaboration with HSE-MET, has recognised Paediatric Critical Care Medicine (PCCM), allowing formal supervised training with the introduction of a SI year and an advanced Fellowship year in PCCM. This welcome

development will allow formal completion of specialist training in PCCM in the future and is analogous to corresponding developments in adult ICM.

The PCCG are working with the Examinations and Training Committee in evolving work based competency assessment and accreditation processes to ensure and sustain the high quality standards of the JFICMI. Like Adult Critical Care, the PCCG envisages that a written exam will be a key component of accreditation in the future. The PCCG are engaging with the constituent Colleges to also explore how Paediatric Critical Care Medicine can be incorporated into the Specialist Registrar Programmes.

The continued support of the JFICMI, CAI, ICSI and CCP, in the evolution of Paediatric Critical Care is greatly appreciated.

College of Anaesthetists of Ireland (CAI)

The JFICMI is currently housed at the CAI building as part of a generous offer to foster and financially support the five year set up phase of the JFICMI. Practical ongoing manifestations of the relationship are the invitation to our Dean to attend CAI board and to the JFICMI Treasurer and Chair of examinations / training to attend corresponding CAI committees.

The CAI has been the most progressive in instituting positions within its postgraduate training scheme which allow formal, supervised training in Intensive Care Medicine thus allowing a twelve month Special Interest Year (SIY) training positions in ICM. Presuming the attainment of the relevant ICM competencies during this year, it is anticipated that this year will constitute the first of the two 'supra-specialist' years for most ICM trainees. The further development, in collaboration with the CAI Training Committee and the HSE MET, of advanced (post-CST) training positions in ICM is a welcome development this year which should now allow the completion of specialist training in ICM in Ireland for the first time.

Royal College of Physicians of Ireland

Further discussions are needed between the JFICMI and their Postgraduate Training representatives to explore how Intensive Care Medicine could be

incorporated into selected Specialist Registrar training programmes. This applies primarily to the Acute Medicine programme but has wider implication also e.g. for Emergency Medicine and others. Although there is some complexity involved, including issues of funding, rota formation, structure and duration of the period spent in Intensive Care Medicine training, the discussions are ongoing but slow. The JFICMI has affirmed its commitment to promoting such training interactions.

An issue which arises from the discussions on Intensive Care Medicine training for Specialist registrars in Medicine is how to give recognition to this time. It has been noted that Anaesthesia has a designation of 'Consultant Anaesthetist with an interest in Intensive Care Medicine' which can be achieved after a year of Intensive Care Medicine training and successful completion of the JFICMI exam. This is a nationally recognised eligibility criterion for a category of consultant appointment and consideration of a similar designation for Medicine might usefully form an extended consideration in the discussions on joint training programmes for medicine.

Royal College of Surgeons in Ireland

One of the issues that appears to be holding up the progress with encouraging surgical training programmes to incorporate ICM training time is the lack of a certificate or other tangible means of recognising ICM training within global surgical specialty training. Perhaps the increased implementation of competency-based training, together with a course such as the Basic Assessment and Skills in Intensive Care (BASIC), which is now established successfully in Ireland under the auspices of the ICSI and the ESICM, will facilitate such means of certification.

National Critical Care Programme (established 2010) is a constituent the Clinical Strategy and Programmes Directorate (CSPD) of the HSE and is the Faculty's avenue of contact with HSE decision making – the mechanism for which is the nomination of Michael Scully to the CCP advisory body and the cooption of the CCP Head, Michael Power to our Board. This year the JFICMI (together with the ICSI) endorsed the CCP's programme report and its Care Pathway for the

Critically Ill Obstetric patient, having been advised by Obstetric Intensivist, Dr Ed Carton. The Health Service recognises the following Programme Achievements.

1. Critical care 'Hub-and-Spoke' Model implemented in 5 of 6 hospital groupings.
2. Resourcing of three Adult Critical Care Retrieval services in Dublin, Cork and Galway under the clinical governance of the new National Retrieval Steering Committee.
3. National Critical Care Audit Programme has been set-up (Chairman Rory Dwyer) with a pilot site starting this year and a further nine to follow.
4. Census of Critical Care Bed Stock and Workforce (Nursing and Medical) completed annually for 2010 - 2013.
5. Managing Major ICU Surge activity e.g. Influenza A (H1N1) – Chair B Marsh. Resources e.g. new ventilators implemented and local protocols / audit in place.
6. ICU Bed Information System (ICUBIS - 'BedBureau') in development with SDU.
7. Infection Surveillance – incidence of Catheter-Related Infection measured / published for ICUs in Ireland (PI: Criona Walshe). Audit Programme may facilitate ongoing surveillance.

Specialty status administrative responsibilities

The increase in this activity is being effected on behalf of the training bodies – the CAI, RCPI and RCSI. The treasurer, Maria Donnelly has tabled a detailed five year financial projection for JFICMI which will define, when agreed, the relative role of the Faculty vis a vis the PGTBs. Meetings are anticipated with all training bodies to discuss the implementation of ICM training on their behalf and the associated financial arrangements.

Website

This is a priority for the JFICMI. Enda O'Connor has ably led a subcommittee which has evaluated a number of tenders which might meet the Faculty's requirement for visibility to its Fellows and to the public and facilitate interactions with Fellows and

trainees, particularly with respect to Examinations and Training. The company Strata 3 have been commissioned to provide this service under close oversight from the subcommittee. Links with the ICSI and with the CAI and other Colleges will remain fundamental.

Conclusion

The JFICMI will continue its role in promoting and accrediting quality ICM training and anticipates doing this in conjunction with the CAI and the other PGTBs. Similarly we will be pleased, as part of our remit relative to the new ICM specialty attainment to interact with Consultants and Fellows nationally and, in time, offer the facility for PCS compliance via the Faculty. We are also delighted that the Specialty recognition has brought forward the commencement this July of advanced training in ICM with a view to a CSCST in ICM. This will confer eligibility for a 'consultant in ICM' position – thus being the first time this has been feasible via postgraduate training in Ireland alone. We remain indebted to the support of the various Colleges, particularly the CAI, in this evolution.

Dermot Phelan

Dean,



Faculty of Pain Medicine Report

The board met on three occasions – 21st February, 07th June, and 06th November 2013. Each meeting included an educational component open to all professionals with an interest in Pain Medicine.

The Annual Scientific Meeting took place between February 21st – 23rd on the theme of “Chronic Pain – A Disease in its own right and a major healthcare problem” – overall attendance 397. International speakers included – Professor Michael Cousins (Australia), Professor Hans Kress (Austria), Professor Stephen McMahon (London), Dr David Brosook (USA), Dr Nikolaos Kostopoulos (Greece), Dr Michael Costigan (USA), Professor Tim Deer (USA) and Dr Eric Cosman (USA). The ASM included a very successful day in the College (153 in attendance) with an R&D session, a GP symposium, a nurses’ seminar and a meet the Professors working Lunch on the Friday with the main congress taking place in the Convention Centre on the Saturday (197 attendees). On Thursday evening in the College Professor Michael Cousins gave the inaugural Dr Francis Rynd Lecture “The future of pain medicine” (47 in attendance) and was conferred with Professor Kress with Honorary Fellowships of the Faculty of Pain Medicine CAI. The meeting was very well received with positive feedback.

Following the AGM an open forum for the public was held. This was very successful with 120 attendees including many patients, family members and public representatives. The meeting received excellent publicity on the airwaves.

The Summer Meeting took place at the Morrison Hotel, Dublin on 7th and 8th June. Topics included “Oro-facial pain and general Practice” by Dr Dermot Canavan, “Back Pain in the Workplace” by Dr Blainaid Hayes, “Back Pain in General Practice” by Dr Alan Moran, “Back Pain, a Surgical Perspective” by Mr Jaber Nagari, “Back Pain, a Pain Medicine Perspective” by Dr Conor Hearty. Dr Hugh Gallagher presented a draft document by the ICGP/FPMCAI on Opiate Prescription in Chronic Pain.

The Winter Meeting speakers included “Pain Management in Athletes” by Dr Ciaran Cosgrove and “Imaging Pain in Athletes” by Dr Joe Coyle.

The Board endorsed the work carried out by Dr Mannion on the issues of Manpower and the need for increased numbers of consultants.

The application to the Irish Medical Council for Specialty status for Pain Medicine was submitted and successful. Formal recognition will be announced in 2014. This is a milestone for Pain Medicine. Ireland will be among the first countries in Europe to recognise the extent and complexity of Chronic Pain and the importance of Pain Medicine in the education, training and delivery of health care in Ireland.

The FPM was represented at “Pain and Politics” and has been invited to attend the Health Committee to discuss the Chronic Pain, its costs and treatment.

Dr Josh Keaveny
Faculty of Pain Medicine



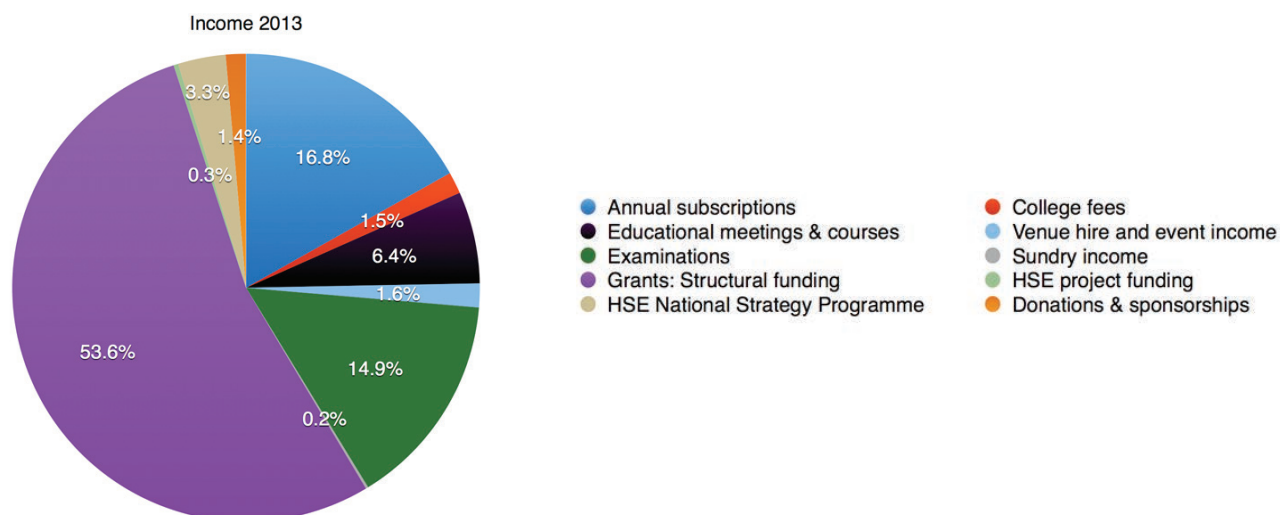
Honorary Treasurer's Report

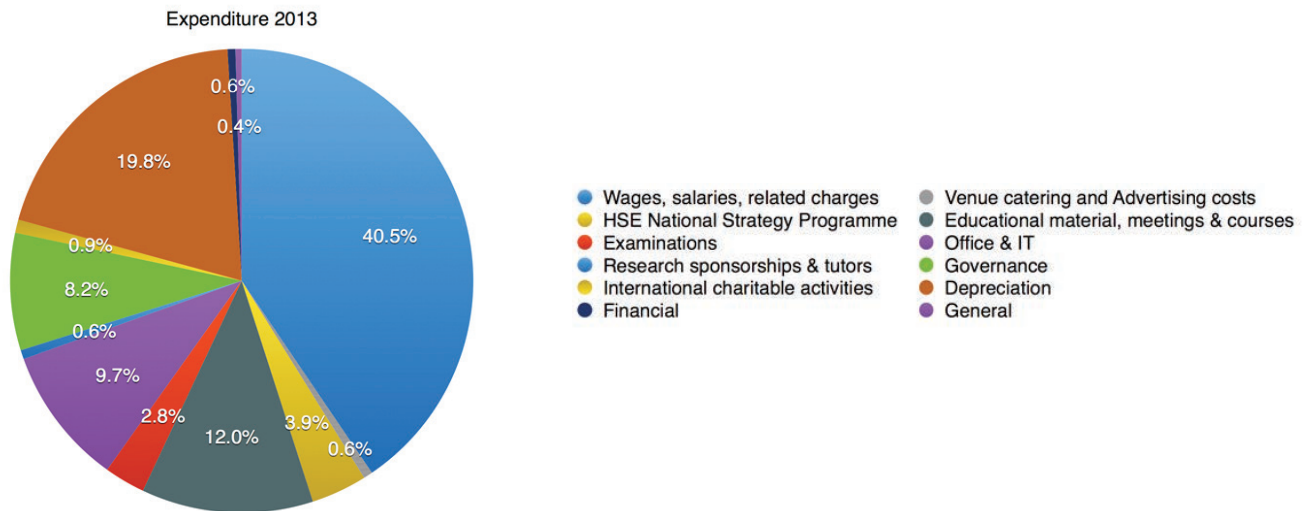
It gives me great pleasure to present my first report as Honorary Treasurer and Chairman of the Finance committee to the fellows of the College of Anaesthetists of Ireland. I took over the role in June 2013. It has been both a challenge and an honour to provide financial guidance to the College. This has been a year in which I have learned much, and I greatly appreciate the support provided by my predecessor Dr. Harry Frizelle. He served the College graciously and with superb effectiveness over the past four years. We agreed at our last AGM to change our auditor to Grant Thornton. I am pleased to advise that Grant Thornton have conducted a full financial audit of the College of Anaesthetists of Ireland and have reported that we are in full compliance with accounting standards. I am pleased to present the Financial Statements of the College of the Financial year ended 31st December 2013 which are set out on pages 33 to 36 of this annual report.

In 2013 overall revenue from operating activities for the year was €3,123,326 expenditure totaled €2,652,599, leaving an operating surplus of €470,722. The surplus on ordinary activities before exceptional items was €489,877. The surplus provides a sound financial platform to enable the College to deliver its primary objectives in furtherance of the specialty and to create the reserve required by the College's Reserves policy.

Our property on Merrion Square over recent years remained valued at 10 million Euro. Along with our new auditors, we felt it was prudent to recognise the alteration in market property valuation, and to comply with accounting rules an independent valuation of the property was required. In this regard the College engaged Lisney's to value the Land and premises at 22 Merrion Square North. In our Income & Expenditure statements this resulted in an exceptional item of an impairment of land & buildings of €6,354,523 giving an operating deficit of (€5,564,646) for the year. Given the prime location of the property the value is expected to recover in the medium to long term. While this figure seems alarming, the College does not need to realise the asset and our mortgage will be repaid in full in early 2015, many years ahead of the repayment schedule, and in line with the financial strategy adopted by Council in 2012.

At our Strategy day in October we made some interesting decisions around developing a high quality and creative Educational Research department that will have a positive impact in the College. There is no doubt that Educational Research will require significant financial resources to adequately manage and implement this project over the coming years. This will improve awareness of the College and anaesthesia, and broaden engagement with other philanthropic organisations and donors.





I think it is appropriate that I mentioned the members for their continued support of the College through their payment of the annual subscription. The College is deeply indebted to its members for their continued support. In recognition of the economic climate, the level of subscriptions has not increased. We now offer a substantial discount to members of the College In Good Standing for meetings and courses and for all who avail of our early payment plans.

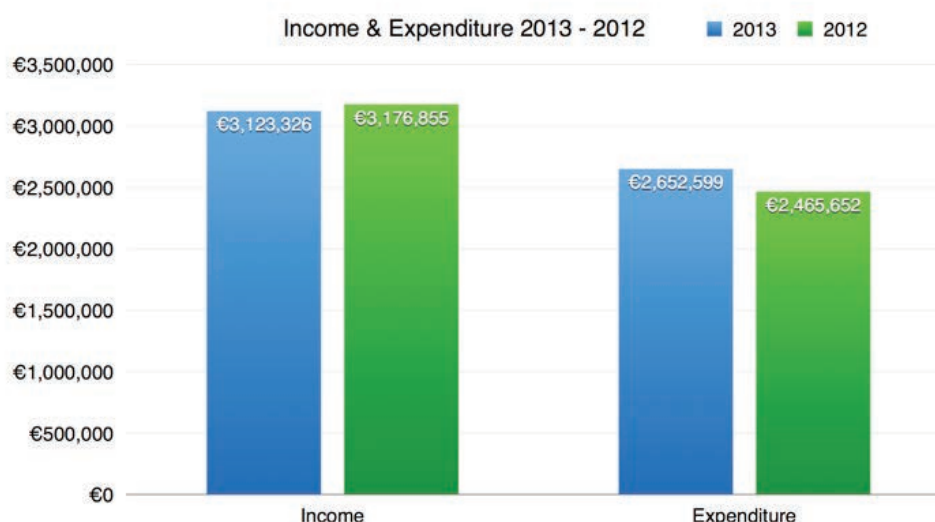
Expenditure growth, up from €2,465,652 in 2012 to €2,652,599 in 2013, largely reflected the increased activity which is evident in the higher revenue outcome in examinations.

We are delighted to welcome Natalie Brennan as an assistant to the Finance Office and welcome her to the staff. I am indebted to Margaret Jenkinson for her tireless and excellent support to the Finance office. Her corporate knowledge and expertise are invaluable to the organisation.

In closing, I would like to thank members of the Finance committee for their commitment and dedication: you are, and will continue to be, the most valuable asset of the College in successfully navigating future challenges and opportunities. I would like to acknowledge that though our financial position is strong, able to sustain excellence, and positions the College to take advantage of future exciting directions and opportunities, we also face important challenges. We look forward to the financial year 2014 and beyond with continued commitment to balancing the Colleges aspirations with prudent financial management & stewardship.

Kevin Clarkson Honorary Treasurer and Chairman of the Finance & General Purpose Committee.

Finance Committee; Kevin Clarkson, Ellen O'Sullivan, John Loughrey, Harry Frizelle, Philip Hawthorne, Muhammed Khalid, David Mannion, Kevin Carson, Philip Hawthorne, Ian Surgeon, Ellie O'Leary, Hugh O'Callaghan, Ann Maher, Enda Brazel and Fintan Foy.



Income and Expenditure

DRAFT INCOME AND EXPENDITURE ACCOUNT FOR THE YEAR ENDED 31 DECEMBER 2013

INCOME	2013	2012
Annual subscriptions	526,228	562,698
College fees	46,673	85,659
Educational meetings and courses	198,519	219,412
Examinations	465,625	417,342
Grants: Structural funding	1,672,932	1,678,869
HSE project funding	10,000	10,000
HSE national strategy programme	103,143	103,143
Donations and sponsorships	43,630	39,493
Venue hire and event income	51,470	47,556
Sundry income	5,106	12,683
	3,123,326	3,176,855
EXPENDITURE		
Wages, salaries, related charges, staff training and recruitment	1,074,166	825,164
HSE national strategy programme expenditure	103,143	103,143
Educational material, meetings and courses	318,200	436,016
Examinations	75,502	72,896
Office and IT	256,316	258,066
Governance	216,821	189,729
Research sponsorships and tutors	16,886	10,000
International charitable activities	24,076	41,386
Depreciation	524,504	468,990
Financial	14,556	16,084
Venue catering and advertising costs	16,855	12,110
General	11,574	32,068
	(2,652,599)	(2,465,652)
OPERATING SURPLUS	470,727	711,203
Interest receivable and similar income	41,482	42,400
Interest payable and similar charges	(22,332)	(51,773)
	489,877	701,830
EXCEPTIONAL ITEMS		
Impairment of land and buildings	(6,354,523)	-
	(5,864,646)	701,830
(Loss)/Profit for the year	=====	=====

On behalf of the Board of Directors

Dr. Ellen O'Sullivan

Dr. Kevin Clarkson

Independent Auditors Report to the Members of College of Anaesthetists of Ireland

We have audited the financial statements of College of Anaesthetists of Ireland for the year ended 31 December 2013 which comprise of the Income and Expenditure Accounts, Balance Sheet, Cash flow Statement and related notes. The financial reporting framework that has been applied in their preparation is Irish law and accounting standards issued by the Financial Reporting Council and promulgated by the Institute of Chartered Accountants in Ireland (Generally Accepted Accounting Practice in Ireland).

Respective responsibilities of directors and auditor

As described in the Statement of Directors' Responsibilities on page 3, the company's directors are responsible for the preparation of the financial statements giving a true and fair view. Our responsibility is to audit and express an opinion on the on the financial statements in accordance with applicable Irish law and International Standards on Auditing (UK and Ireland). Those standards require us to comply with the Auditing Practices Board's [APB's] Ethical Standards for Auditors.

This report is made solely to the company's members, as a body, in accordance with Section 193 of the Companies Act, 1990. Our audit work has been undertaken so that we might state to the company's members those matters we are required to state to them in an auditor's report and for no other purpose. To the fullest extent permitted by law, we do not accept or assume responsibility to anyone other than the company and the company's members as a body, for our audit work, for this report, or for the opinions we have formed.

Scope Of The Audit Of The Financial Statements

An audit involves obtaining evidence about the amounts and disclosures in the financial statements sufficient to give reasonable assurance that the financial statements are free from material misstatement, whether caused by fraud or error. This includes an assessment of: whether the accounting policies are appropriate to the company's circumstances and have been consistently applied and adequately disclosed; the reasonableness of significant accounting estimates made by the directors; and the overall presentation of the financial statements. In

addition, we read all the financial and non-financial information in the Directors' report to identify material inconsistencies with the audited financial statements and to identify any information that is apparently materially incorrect based on, or materially inconsistent with, the knowledge acquired by us in the course of performing the audit. If we become aware of any apparent material misstatements or inconsistencies we consider the implications for our report.

Opinion on financial statements

In our opinion the financial statements:

- give a true and fair view in accordance with Generally Accepted Accounting Practice in Ireland of the state of the company's affairs as at 31 December 2013 and of its loss for the year then ended; and
- have been properly prepared in accordance with the requirements of the Companies Acts 1963 to 2013.

Independent auditors' report to the members of college of anaesthetists of ireland

Matters on which we are required to report by the companies acts 1963 to 2013

- We have obtained all the information and explanations which we consider necessary for the purposes of our audit.
- In our opinion proper books of account have been kept by the company.
- The financial statements are in agreement with the books of account.
- In our opinion the information given in the directors' report is consistent with the financial statements.

- The net assets of the company, as stated in the balance sheet are more than half of the amount of its called-up share capital and, in our opinion, on that basis there did not exist at 31 December 2013 a financial situation which under Section 40 (1) of the Companies (Amendment) Act, 1983 would require the convening of an extraordinary general meeting of the company.

Matters on which we are required to report by exception

We have nothing to report in respect of the provisions in the Companies Acts 1963 to 2013 which require us to report to you if, in our opinion the disclosures of directors' remuneration and transactions specified by law are not made.

Colin Feely FCA

**For and on behalf of
GRANT THORNTON
Chartered Accountants
Ireland & Registered Auditor**

24 - 26 City Quay
Dublin 2

Balance Sheet

31 DECEMBER 2013

	2013	2012
FIXED ASSETS		
Tangible assets	3,269,467	9,879,383
CURRENT ASSETS		
Debtors	53,180	255,969
Cash at bank and in hand	2,663,684	2,657,797
	<hr/>	<hr/>
	2,716,864	2,913,766
CREDITORS		
amounts falling due within one year	(919,871)	(985,076)
	<hr/>	<hr/>
NET CURRENT ASSETS	1,796,993	1,928,690
	<hr/>	<hr/>
TOTAL ASSETS LESS CURRENT LIABILITIES	5,066,460	11,808,073
CREDITORS		
amounts falling due after more than one year	(599,958)	(1,476,925)
	<hr/>	<hr/>
TOTAL NET ASSETS	4,466,502	10,331,148
	<hr/>	<hr/>
CAPITAL AND RESERVES		
Retained surplus	4,466,502	10,331,148
	<hr/>	<hr/>
MEMBERS FUNDS	4,466,502	10,331,148
	<hr/>	<hr/>

On behalf of the Board of Directors

Dr. Ellen O'Sullivan

Dr. Kevin Clarkson

Professional Competence Scheme Committee Report



PCS Committee Meetings 2013:

06th February / 27th March / 08th May / 21st June / 08th November.

PGTB Forum Sub Committee Meeting 2013:

29th Jan / 16th April / 21st May / 3rd September / 3rd December.

The College of Anaesthetists of Ireland signed an agreement with the Irish Medical Council in 2011 under The Medical Practitioners Act 2007 to administer a Professional Competence Scheme (PCS) on behalf of the Medical Council for registered doctors aligned to Anaesthesia, Critical Care & Pain Medicine.

Since 1st May 2011 all registered medical practitioners are required to enrol in and maintain their Professional Competence. Over the past three years, a significant investment has been required by all PGTB's to implement and maintain these schemes from online software upgrades, manpower and administration and the submission of annual reports to the Medical Council.

The PCS year runs from 1st May to 30th April each year. Once a registrant is enrolled in the scheme they have access to record PCS activity through an online diary available on the College website. A Statement of Participation is issued at the end of the PCS year stating all activity that has been recorded. When renewing registration with the Medical Council, a doctor is asked to declare in good faith that he/she is enrolled in a Professional Competence Scheme. The current number of registrants for CAI is 754.

The annual fee covers the cost of investment by the College in software, administration and database management. In order to be fully registered for PCS the annual fee must be paid. The PCS fee for 2014-2015 is €220 for registrants in good standing and €350 for registrants not in good standing and a further 5% discount if payment is received by the end of August.

Under the terms of the agreement with the Irish Medical Council, CAI is obliged to undertake an annual verification of a sample of Statements of Participation. 3% of all registrants (20 selected in 2013) are randomly selected and are asked to provide documentation to support the data that has been uploaded to the PCS diary. In addition to the verification process carried out by CAI, the Irish Medical Council will undertake an annual audit of a random sample of registered doctors. If you are selected for this audit you will be asked to submit a copy of your PCS Statement of Participation.

We are reaching the end of the third year of PCS. CAI has endeavoured to keep the PCS process as simple and user friendly as possible for both meeting organisers and PCS registrants. PCS Frequently Asked Questions are available on our website.

CPD Points Accredited: PCS Year 2012/2013

CAI Meetings: 170.5 CPD Points awarded across 30 courses/meetings

External Meetings: 238.5 CPD Points awarded across 38 courses/meetings

CPD Points Accredited: PCS Year 2013/2014 (To Feb 28th)

CAI Meetings: 134 CPD Points awarded across 30 courses/meetings

External Meetings: 149 CPD Points awarded across 29 courses/meetings

Council of The College of Anaesthetists of Ireland 2013



Council of The College of Anaesthetists of Ireland 2013

Council Members

Dr Ellen O'Sullivan	<i>President</i>
Dr Philip Hawthorne	<i>Vice-President, Chair Examinations Committee</i>
Dr John Loughrey	<i>Honorary Secretary</i>
Dr Kevin Clarkson	<i>Honorary Treasurer</i>
Dr Gerard Browne	<i>CAI Representative on Pain Exam</i>
Dr Kevin Carson	<i>Chair International Aid & Development Committee/ NCPA</i>
Dr Liam Conroy	<i>CAI Representative on Pain Faculty</i>
Dr Harry Frizelle	<i>Past Honorary Treasurer</i>
Dr George Ghaly	<i>Chair Membership Examination Audit</i>
Dr Anne Hennessy	<i>Chair Membership Examination</i>
Dr David Honan	<i>Secretary Quality & Safety Advisory Committee</i>
Dr Muhammad Khalid	<i>Membership Secretary</i>
Dr Brian Kinirons	<i>Chair Education Committee</i>
Dr Frank Loughnane	<i>Chair Credentials Committee</i>
Dr Saad Mahdy	<i>Secretary Education Committee</i>
Dr David Mannion	<i>Chair Training Committee</i>
Dr Jacinta McGinley	

Dr Damien Murphy	<i>Chair Hospital Accreditation Committee</i>
Dr Camillus Power	<i>Chair Professional Competence Committee</i>

Co-opted Members

Dr Josh Keaveny	<i>Dean Faculty of Pain Medicine</i>
Dr Dermot Phelan	<i>JFICMI</i>
Dr Geraldine Maloney	<i>Convener Irish Standing Committee, AAGBI</i>
Dr Mort Kelleher	<i>CAT Representative</i>
Ms Anne Maher	<i>Lay Representative</i>
Dr Patrick Nolan	<i>Lay Representative</i>

Ex-Officio

Dr Ian Surgeon	<i>Postgraduate Dean</i>
Dr Ellie O'Leary	<i>Director of Training</i>
Dr Geraldine Moloney	<i>AAGBI Representative</i>
Dr Joseph A. Tracey	<i>MSc Programme Director</i>
Mr Fintan Foy	<i>Chief Executive Officer</i>

Elections to Council of the College of Anaesthetists were held in May 2013. Dr Jacinta McGinley and Dr Camillus Power were elected to Council.

Education Calendar 2014

- 30th January - Faculty of Pain Medicine, The Annual Francis Rynd Lecture, CAI
- 31st January - Faculty of Pain Medicine, 1st February Chronic Pain Strikes All Ages, CAI & CCD
- 1st February - Undergrad & Intern Open Day. An Introduction to Anaesthesia, CAI
- 6th February - AAGBI Core Topics Day, CAI
- 17th February - Vascular Access Workshop, CAI
- 28th February - Medical Education Symposium. Practical Skills for Effective Teaching & Learning, CAI
- 6th March - Delaney Medal Competition and Spring College Lecture, CAI
- 7th March - Abbvie Scholarship Presentations, CAI
- 28th March - Echocardiography Workshop, CAI
- 28th & 29th March - Western Anaesthesia Symposium, G Hotel, Galway
- 20th & 21st March - Beyond BASIC Course, CAI
- 24th & 25th April - BASIC Course, CAI
- 28th April - CAT Consultant Interview Workshop, CAI
- 16th & 17th May - Irish Congress of Anaesthesia and Annual Dinner, Convention Centre, Dublin
- 13th & 14th June ICSI, Radisson Blu Hotel, Golden Lane, Dublin 2
- 3rd - 6th September - Annual ESRA Congress, Seville, Spain
- 6th September - Irish Pain Society, Annual Scientific Meeting, Radisson Hotel, Golden Lane, Dublin
- 17th - 19th September - AAGBI, Annual Congress, Harrogate, UK
- 27th September - 1st October - ESICM Annual Congress, Barcelona, Spain
- 29th September - Presentation Skills Workshop, CAI
- 7th - October - Core Topic Day & Autumn College Lecture, CAI
- 11th - 15th October - ASA, New Orleans, USA
- 15th - 19th October - Dingle Anaesthesia & Peri Operative Medicine Conference, Joint meeting with South of Ireland Association of Anaesthetists, Dingle, Kerry
- 22nd October - Airway Management Workshop, CAI
- 4th November - Local Anaesthesia for Ophthalmic Surgery Workshop, Royal Victoria Eye & Ear Hospital, Dublin
- 15th November - ICSI Autumn Meeting, Dunraven Hotel, Adare, Co Limerick
- 20th & 21st November - ICSI BASIC Course, CAI
- Winter Anaesthesia Weekend 28th & 29th November 2014
- 28th November: Professionalism in Practice Workshop, KP Moore Medal Presentations,
- Winter College Lecture, CAI, Dublin
- 29th November - Irish Standing Committee, Open Meeting and Seminar, Conrad Hotel, Dublin
- 3rd December - Audit Study Day, CAI
- 5th December - Irish Society of Obstetric Anaesthesia, CAI
- 11th December - Audit Study Day, CAI
- 11th December - Gilmartin Lecture, CAI

Photographs From Recent Events



Drs John Loughrey, Camillus Power, Anne Hennessy, Ellen O'Sullivan, Iain Wilson (AAGBI Past President), Ian Surgeon, Mr Fintan Foy, Dr J.P. Van Besouw (President, RCOA) and Dr William Harrop-Griffiths (President, AAGBI) at the Honorary Conferring Ceremony of Dr Iain Wilson in the College.



Mr Bryony Berry MSD, Dr Aisling Ni Eochagáin, Dr Janette Brohan, Dr Shrijit Nair, Dr Ellen O'Sullivan, President Of the College, Dr Damien Barry, Dr Terry Kong, Dr David Moore and Mr Eugene Canning, MSD at the KP Moore Medal Presentations in the College.



Dr. Brian Kinirons, Chair Education Committee, Dr Angie Hayes, Dr Barry Lyons, Dr Terence Montague at the KP Moore Medal Presentations in the College.



Dr Ellen O'Sullivan with guest lecturer Dr Justiaan Swanevelder at the KP Moore Medal Presentations in the College.



Dr David Hogan, Mrs Patricia McCarthy, Dr John McCarthy, Prof John Cooper and Mrs Mary Cooper at the Gilmartin Lecture in the College in December 2013



Dr Ellen O'Sullivan and Dr Brian Kinirons presenting Prof Aidan Halligan with the Gilmartin Medal following his Gilmartin Lecture in December 2013.

Photographs From Recent Events



Dr Stephen Prineas and Dr Ellen O'Sullivan at the Autumn College Lecture in October 2013.



Dr Ken Lowry, Ms Dawn-Marie Forrester, Mrs Anne McAdoo, Prof John McAdoo, Dr Deirdre McCoy, Dr Paul Collins, Dr Muhammed Khalid and Mrs Sameera Khalid at the Gala Dinner in the Convention Centre Dublin in May 2013



Dr Peter Nightingale, Mrs Pamela Nightingale, Prof Lee Fleisher and Dr Ramani Moonesinghe at the Gala Dinner in the Convention Centre Dublin in May 2013



Mr Tony O'Brien, Dr Peter Nightingale, Dr Ellen O'Sullivan, Prof George Shorten and Prof John Higgins at the Irish Congress of Anaesthesia 2013 in the Convention Centre Dublin in May 2013



Dr Ellen O'Sullivan and Ms Jacqueline Tierny present Dr Caroline Larkin with the Abbvie Scholarship at the Irish Congress of Anaesthesia 2013



Drs Dermot Phelan, Peter Nightingale, Ken Lowry, Ellen O'Sullivan, Gregor Pollach and Kevin Carson at the Conferring Ceremony in The Westin Hotel in May 2013



College of Anaesthetists of Ireland

CAI
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