



# CAI

SALUS DUM VIGILAMUS

College of Anaesthetists of Ireland

*Patron:* Michael D. Higgins  
President of Ireland



ANNUAL  
REPORT  
2017



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Professor Kevin Carson, President

## PRESIDENT'S REPORT

**T**his year has been a tremendous year in the life of the College with many projects and programmes maturing and coming to fruition. This year has moved at, what seemed at times, a frenetic pace.

I am drawn to Seamus Heaney's final poem completed ten days before he died, inspired by the painting 'Banks of a Canal' by the French artist Caillebotte:

*"Say 'canal' and there's that final vowel  
Towing silence with it, slowing time  
To a walking pace, a path, a whitewashed  
gleam  
Of dwellings at the skyline. World stands  
still."*

(Banks of a Canal, Seamus  
Heaney, 2013)

The imagery is captivating, powerful, almost soporific. In a way, the poet challenges us to slow down and reflect. This is the last year of my Presidency, my caretaker-ship. This provides an opportunity to review highlights and memorable events that took place during this year and during the last three years; then we refocus and look forward as we move on again.

The first Diploma examination in anaesthesia in Ireland was developed as a joint examination of both The Royal College of Physicians of Ireland and The Royal College of Surgeons in Ireland held in 1942. Perhaps a portent of the extended role of anaesthesiologists who are recognised today as the perioperative physicians.

In 1946 the first academic body of anaesthetists was founded by the formation of the Section of Anaesthesia of the Royal Academy of Medicine in Ireland with Dr T PC Kilpatrick, anaesthetist and registrar of the RCPI as President and Prof Tommy Gilmartin as Secretary. At that inaugural meeting, Sir Ivan Magill spoke on 'Current topics in anaesthesia.'

In 1959 the faculty of Anaesthetists of the Royal College of Surgeons in Ireland was founded. The first or Foundation Dean was Professor Tommy Gilmartin.

The College of Anaesthetists of Ireland was founded as an independent college on Merrion Square in 1998, with the inauguration of Dr William Blunnie as the first President of the College of Anaesthetists of Ireland. I have the honour of being the seventh President.

This year marks the twentieth anniversary of the College's foundation.

The College awards Memberships and Fellowships in anaesthesia, critical care and pain medicine as well as administering a Master's Programme and Leadership Courses and Professionalism Programme. Currently we are in the process of preparing an application to become an affiliate College of the National University of Ireland, which will permit us to award our own degrees and diplomas.

*"So scholarship and art must be  
Fragrant with personality  
And moral feeling.  
Distinction's not an ego-trip."*

(Seamus Heaney, Verses for a  
Fordham Commencement, 1982)

The College is completing our speciality document on ethics and professionalism for the Medical Council to reflect the particular contribution from anaesthesia, critical care and pain medicine, covering such topics as advocacy, consent, breaking bad news and end of life issues.

In 2008 the Faculty of Pain Medicine was founded. The College awards both Diplomas and Fellowships in Pain Medicine. The Faculty has commenced the process of accreditation of their training

scheme with the Medical Council.

In 2009 the Joint Faculty of Intensive Care Medicine of Ireland was founded emanating from the Irish Conjoint Board of Intensive Care medicine that had been examining trainees in the specialty since 1996.

Historically the College of Anaesthetists of Ireland was a constituent College of the Joint Faculty along with the Royal College of Physicians of Ireland and the Royal College of Surgeons in Ireland. This reflects the background specialities of trainees entering the training programme. In order to streamline the governance structures to facilitate IMC accreditation of the training programme in intensive care medicine, the Faculty has now become a faculty of the College of Anaesthetists of Ireland, while still proudly acknowledging its parentage in and association with the other Colleges.

It has been recommended by the review team that the accreditation process will soon conclude positively with the opening of the specialist register in intensive care medicine before the current Medical Council demits in May of this year.

In 2009 President Mary McAleese opened the refurbished building including the newly built Dr William Blunnie lecture theatre and the Clinical science education centre in the mews site.

In May 2016 we were delighted, singularly honoured and appreciative to receive notification that we were to be the first training body to be granted Patronage by the President of Ireland, Michael D Higgins, which we proudly but humbly acknowledge on our stationary.

From:

*"Inishbofin on a Sunday morning,  
Sunlight, turfsmoke, seagulls, boatslip,  
diesel..."*

(Seeing Things, Seamus Heaney,  
1991)

To:

*Hidden in the thick of a tree is a bough  
made of gold  
And its leaves and pliable twigs are made  
of it too."*

(Seamus Heaney, the Golden Bough,  
1991)

The patronage has been especially noted in our various overseas projects and endeavours.

An Honorary Fellowship is the highest award that the College can bestow and is reserved for those who have made outstanding contributions to anaesthesia, intensive care and pain medicine as well as acknowledging academics and those in leadership positions who act as role models, exemplars and modern day heroes for our postgraduate doctors in training, Members and Fellows of the College.

On September 23rd 1998 President Mary McAleese was awarded the first Honorary Fellowship of the College. This sentinel event may be considered to be the first act of the independent College and thus, the date is considered to be the foundation of the College.

On the 9th of April 2016 we had the unique opportunity to acknowledge and celebrate the achievements and outstanding contributions that Professor William Campbell, Nobel Laureate for physiology/medicine in 2015 had made to the field of medicine by awarding him an Honorary Fellowship of this College.

His lifesaving discovery of Ivermectin – a drug active against parasite roundworms has changed the course of countless lives across the globe.

The Honorary Conferring ceremony took place in Prof Campbell's hometown of North Andover just outside Boston – a not unnoticed happy coincidence of geography and anaesthesia.

I am delighted to share with you that in May this year our Patron and President of the State, Michael D. Higgins has agreed to be conferred with an Honorary Fellowship of our College in St Patrick's Hall, Dublin Castle, in the same state apartments where he was inaugurated as President on 11 November 2011 and where then President Mary McAleese welcomed Queen Elizabeth on 18th May 2011. We look forward to this occasion with eager anticipation.

From the first anaesthetic administered in Dublin in 1847, a few weeks after the first anaesthetic was administered in Boston, on the 16th October 1846, the speciality has grown and developed. It has become one of the largest departments in most hospitals.

Twelve per cent of approved hospital consultant posts nationally are in anaesthesia. We are in the process of recording our short but rich history, having commissioned a book on the history of anaesthesia in Ireland and the College.

Anaesthesia plays a pivotal role in the patient's clinical journey.

The interaction of anaesthetists with patients in the operating theatre being only one point of contact, albeit a highly effective one, as we manage some of the sickest patients including those from the extremes of age, from 500 gram neonates to our most, fragile senior citizens with many comorbidities. Recognition of these patients' pre-operative condition allows for their stabilisation and optimisation.

Anaesthetists are involved in the management of patients during their clinical journey from the time of consideration of surgery, to and after their discharge home. We lay claim to being perioperative physicians. It is estimated that through our speciality and subspecialties that we are involved in the management of almost 70 per cent of patients who pass through our hospitals.

Whilst numbers do not reflect complexity, our most recent national audit from the public sector hospitals enumerates that approximately:

168,000	General Anaesthetics
53,000	Neuroaxial Blocks (Spinals/Epidurals)
8,500	Regional Anaesthetics

In total, approximately 230,000 anaesthetics were carried out in 2016.

Following on from the recent NAP5 study into awareness, a further approximately 39% of anaesthetics will have been administered in the private sector.

The physician's healing hand on the College Crest serves as a reminder that in Ireland all consultant anaesthetists are highly trained specialist physicians.

On the other hand, this situation is not the norm in many countries around the world. According to the Lancet Commission on Global Surgery 5 billion of the world's population is without access to safe and affordable surgical care and anaesthesia. It is estimated that 143 billion



additional surgical procedures are needed in the low and middle-income countries each year. The World Federation of Societies of Anaesthesia (WFSA) has a mission to advance the profession ensuring that safe anaesthesia provision and training is led by anaesthesiologists.

Accordingly, the WFSA define anaesthesiology as the medical science and practice of anaesthesia. It includes subspecialty areas of practice such as perioperative medicine, pain medicine, resuscitation, trauma management and intensive care medicine.

The WFSA views the delivery of anaesthesia as a medical practice and an anaesthesiologist as a qualified physician who has completed a nationally recognised medical training programme in anaesthesiology.

In light of the WFSA, European and US use of these terms, and the wider role of the anaesthesiologist, the College is considering the official introduction in Ireland of these terms replacing anaesthesia and anaesthetist with anaesthesiology and anaesthesiologist. The Australian and New Zealand College of Anaesthesia is undergoing a similar process.

Interestingly, most of the Fellows we have discussed this with seem to be in favour of the change, and we were encouraged when Chief Herald did not see any conflict with the name change and our granting of arms. Our next step is to ballot the Fellows. If this is accepted, then it will provide a massive opportunity for rebranding of the speciality and the chance to let the wider public know that anaesthesiologists are indeed perioperative specialist physicians.

Notwithstanding the physical plant of our splendid headquarters building on Merrion Square, the College is actually a vibrant body made up of Fellows, Members and administrative staff with the Executive and Council at its heart.

The functions of the College can be grouped into three robust pillars that support and lend structure to the various activities, the foundation. These pillars are:

1. Training, Education, Innovation and Research
2. Examinations
3. Patient safety and standards.

We currently have a six year seamless

training programme with 40 trainees per year. It is likely that this number will need to increase in line with workforce planning.

We are due to undergo reaccreditation of our SAT training programme by the Irish Medical Council this year.

The College, with support from the NDTP office has created 22 special interest year or fellowship posts, to allow further subspecialisation in Ireland as we try to retain, our highly trained doctors in this country.

Most of the clinical education and training takes place in the hospital sites, inspected and approved for training by the College. We watch with interest how the Medical Council will roll out and report on its hospital inspection programme.

The College is committed to continuous professional development and lifelong learning for its Members, Fellows and colleagues and has recently included compliance with PCS as a condition of "good standing".

The high fidelity, award winning, Simulation Department, one of the first in the country, continues to be one of the paragons of the College. It plays an essential role in clinical education and training at all levels and across all disciplines. We are justly proud of the developments of the multidisciplinary crisis management programme taught here in the College. We're just completing development of a second purpose built floor of the clinical sciences building for ICU/ED/Ward scenarios and are grateful to the NDTP for funding our new state of the art mannequins. We have also introduced simulation into College examinations. We look forward to forming new partnerships to expand our reach in this high demand arena.

Workplace based assessments are a key component of medical education and assessment. The College is one of the recognised leaders in this field globally along with Canada and New Zealand. The College is leading out on the development of Entrustable Professional Activities (EPAs) as a means of assessing work based competencies as our trainees develop from novices to experts.

*"My father worked with a horse-plough,*

*His shoulders globed like a full sail strung  
Between the shafts and the furrow.  
The horse strained at his clicking tongue.*

*An expert. He would set the wing  
And fit the bright steel-pointed sock.  
The sod rolled over without breaking."*  
(Seamus Heaney, Follower, 1996)

We have piloted four EPAs across a range of areas in the speciality. We are now evaluating the process before we invest further in this methodology.

Training is more than acquiring a palette of techniques and skills. Professionalism is a corner stone of a successful integrated clinical practice. Anaesthetists are recognised as natural multidisciplinary team leaders, moderators and good decision makers. These are skills we encourage and foster in our trainees.

Anaesthesia, Critical Care and Pain Medicine can be challenging and demanding on a daily basis looking after exacting patients and their families; engaging with patients with life limiting conditions can be complex.

It is important that we provide a forum for our trainees and consultants to debrief and reflect on their experiences.

However, the recent Dr Bawa Garba ruling in the UK has raised concerns for trainees and trainers in this jurisdiction as doctors continue to work in some environments that are challenging and less than ideal. To this end, the College Council has organised a 'hot topics' session for our trainees to explore the situation together and its implications with informed experts.

It is important that trainees develop resilience to face legitimate challenges, as days can be long, patients and families are demanding. However, resilience must never stop us challenging and changing an adverse or potentially toxic environment.

Seamus Heaney advises,

*"Believe that further shore  
Is reachable from here  
Believe in miracles  
And cures and healing wells.  
Call miracle self-healing*

*The utter, self-revealing  
Double take of feeling"*

(The Cure at Troy, A Version of  
Sophocles' Philoctetes, 1991)

We have provided a professional mentor training programme so the College will be in a better position to support our trainees, Fellows and consultant colleagues.

While we are an organisation committed to patient safety, we passionately care about the physical safety of our trainees. Friday, 16th of March, was 'World Sleep Day'. The RCoA and AAGBI used this to highlight the dangers of fatigue for doctors working long periods then driving home without any sleep. We too acknowledge, on occasion this may happen in this jurisdiction, with potentially disastrous consequences. The College supported the campaign emphasising the safety of "those who watch".

This year the Post-Graduate Diploma course in anaesthesia/recovery for nurses and midwives assisting anaesthetists continued in College in partnership with our colleagues from the Faculty of Nursing in Trinity College and the NCPA.

Research and innovation remains a foundation and catalyst for the continued growth and development of our speciality.

*[Indent & Italic on quote; indent and  
plain on annotation]*

*"Inspire me, then, didactic muse,  
Beyond clichés and pompous views  
Of art and science,  
To be dulce et utile,  
To speak sweetly and usefully  
About the world and th' academy  
And their alliance."*

(Seamus Heaney, Verses for a Ford-  
ham Commencement, 1982)

This year the College has increased its funding for grants for Ireland based research to €100,000 and I have negotiated and approved by Council, an annual grant from the British Journal of Anaesthesia for £50,000 with matched funding from the College for Collaborative Research.

The College examinations remain one

of the pillars of our activity – the Examinations Department continues to flourish, growing in the number of examinations and the number of candidates being processed. We have moved to an online applications system and are reviewing various IT systems to facilitate scoring and analysis. I am very happy to affirm our continued collaboration with RCSI for psychometric analysis and validation of our examinations ensuring that they continue to meet highest international standards. This complements our in house medical educationalists who can provide an immediate analysis of questions and performance at the examinations centres.

*"Salus Dum Vigilamus"* – safety while we watch. The by-line of our crest and the apothegm of our practice. Safety and standards is the third pillar of our College foundations.

The words of Shakespeare's Hamlet come to mind:

*"To die, to sleep  
to sleep, perchance to dream  
ay, there's the rub, for in this sleep of  
death  
what dreams may come..."*

It is our charge, our duty, to ensure the best outcomes so anaesthesia is a sleep of dreams rather than the alternative.

Patient and personnel safety is everyone's responsibility. Safety initiatives hone and focus these ideals. Advances in monitoring and equipment have in no small way contributed to this arena in both the operating room and in intensive care. But no matter how good the equipment, the anaesthetist or anaesthesiologist is the lynchpin, the ringmaster.

*"Of all implements, the pitch fork, was  
the one*

*That came near to an imagined perfec-  
tion:*

*When he tightened his raised hand and  
aimed with it,*

*It felt like a javelin, accurate and light.*

(Seamus Heaney, The Pitch Fork,  
1991)

In November we held the inaugural

Patient Safety in Anaesthesia conference attended by the incoming President of the WFSA. This meeting was a resounding success and will become an annual event.

The Quality and Safety Committee have established a National Safety Network with a named representative in each Department of Anaesthesia in each hospital in the country. One function this will serve is a forum to report unexpected events, equipment malfunction or drug alerts. They are working with the NCPA, the Irish Standing Committee and the AAGBI to achieve maximum compliance with anaesthesia record keeping standards as well on-going engagement with the HSE Quality Assurance and Verification Division in relation to Serious Reportable Events (SRE) (IE).

The College has contributed to the NCPA model of care for anaesthesia. The proposals included, especially the so-called "2 plus 2" cover arrangement to improve the care of obstetric patients will have implications on workforce planning for both trainee and consultant numbers, both of which will need to increase.

We are represented on the UK's Safe Anaesthesia Liaison Group (SALG).

A regular newsletter, safety warnings, advisory notes and updates are placed in the safety section of our College website.

Launched in 2016, the College was the first training body internationally to sign up to the WSFA's safety consortium Safe Anaesthesia for Everybody – Today (Safe-T), promoting international standards for the safe practice of anaesthesia worldwide.

As part of our on-going strategic plan we have set up a College risk register to identify and mitigate risk and liability.

One of the attributes of a vibrant, responsive contemporary body is change. This of itself can be challenging, but also presents new opportunities. This year, we have continued the restructuring of the administrative support team in the College with the appointments of Mr Martin McCormack who joined us as CEO from the RCPI in August, Ms Margaret Jenkinson as COO and Finance Officer, Dr Camillus Power as interim Director of Training along with Ann Kilemade and Jennie Shiels

in the Training Department and Mr Ben Courtney in the Finance Department. To each we extend a warm welcome, assured that they will work with the Council and Committees, trainees and Fellows as we move forwards together in an open, robust partnership.

Whilst the demands of change can be exacting, they present us with the possibility to assess where we are and our needs going forward.

The poet confronts us to  
*"walk on air against your better judgement"*

(Seamus Heaney, *The Gravel Walks*, 1995)

As part of our overarching appraisal, we are in the process of a governance review of the College as part of our College's commitment to "good governance". Many of our Articles of Association and Memoranda have their origins from the foundation of the Faculty of Anaesthetists, RCSI in 1959 and the foundation of the College in 2008. However, we now function and operate in very different times with different expectations, regulation and accountability.

The College is also in the process of consolidating its strategic plan for the next 3 years. This will provide stability and unity of vision as we move forwards, based on our three foundation pillars.

This year, we have had two very successful meetings of our newly formed Senior Fellow's Forum. We were delighted to welcome the participants back to their College. We also plan to organise a Senate meeting of the President and past Presidents of the College on an annual basis.

Another endorsement of our innovative and dynamic organisation is looking outside and developing partnerships both at home and overseas. We look forward to growing and developing our areas of co-operation.

We were honoured to host a visit from Marie Heaney in March to the College. She

was delighted to see how the anaesthesia community was being introduced to Seamus' work!

We have actively engaged with The Forum of Irish Postgraduate Medical Training Bodies as well as with the Medical Council during this year

Our partnerships and endeavours away from home, nurturing the positive facets of globalization, make Merrion Square a categorical headquarters - the hub of our activities. Our overseas examination centres are currently in Perdana and Penang in Malaysia, Oman, Bahrain, Jordan and Egypt.

Following meetings in Hong Kong at The World Federation of Societies of Anaesthesiologists meeting in 2016 and visits to the flagship Peking University Hospital College and Medical Centre - home of the anthropological wonder, "Peking Man", we officially met the President and executives from the Chinese Society of Anaesthesiologists in Guangzhou in August. This culminated in the signing of an MOU between CAI and the Chinese Society of Anaesthesiologists CSA/Chinese Medical Association to develop areas of cooperation and collaboration between the two organisations at an event hosted by His Excellency Ambassador O'Leary in the Irish Embassy in Beijing on the 7th of February this year. This is particularly timely as the Chinese anaesthesia training is undergoing revision with the formation of a College of Anaesthetists and introduction of a national curriculum.

This was a very auspicious and special day that marks a milestone in the relationship between the CAI and the CSA and CMA and thus with China itself. The significance of the event can be contextualised perfectly against the backdrop of the Silk Road Economic Belt and the 21st Century Maritime Silk Road, the so called 'Belt & Road' initiatives first launched by President Xi Jinping in 2013.

As Liu an, one of the greatest authors of the Han dynasty wrote, *"a broad mind can embrace diverse people"*. This aspiration

unites us in a unique branch of medicine that is still evolving. It is against this background that we are introducing our examinations into China. Already our Chinese website and app are complete and the first exams will take place this year.

Our other flagship programme overseas is in Malaysia. In April 2016 we signed an MOU with the College of Anaesthesiologists, Academy of Medicine of Malaysia to partner a Ministry of Health parallel, competency based, specialist training programme to address the chronic, severe shortage of specialist trained anaesthetists in the country. The programme mirrors the universities' Master's Programme in anaesthesia. The parallel programme enshrines the CAI Membership and Fellowship exams into the curriculum.

We have inspected and accredited seven hospitals in the both the Peninsula and Eastern Malaysia for training.

The College has undertaken a train the trainers and train the examiners courses as well as advising on curriculum development. These courses help underscore the importance and consequences of high stakes medical exams as well as the behind the scenes work that ensures reliability and validity of the College examinations.

This programme has been endorsed by the Minister for Health and by the Director General who will officiate at the forthcoming hospital accreditation award ceremony.

In Malaysia we are also exploring ways of extending our involvement with Penang Medical College that is a joint venture of UCD and RCSI as it receives its enhanced status of a branch Campus University.

Our partnership with the Oman Medical Specialist Board (OMSB) continues. Last year five fellows graduated from the two-year International Fellowship Programmes. Recently our Examinations Department held the membership OSCE in Oman.

In August a small group of us attended the first National Society of Anaesthesiology meeting in Malawi. In many ways this was a testament to the support, work and



investment as well as the vision of previous Presidents of this College to help develop anaesthesia in Malawi against a backdrop of the second highest maternal mortality rate in the world by training both medical officers and four Master of Medicine post graduate students.

College support for such overseas projects continues. This year, amongst others, we have sponsored two WFSA Fellowships and pursue our engagement with CA-NESCA (College of Anaesthetists of East, Southern and Central Africa).

On a diametrically different point, we continue our very fruitful participation in the Tri-Nations (Anaesthesia) Common Issues Group between ourselves, the Royal College of Anaesthetists and the Australian and New Zealand College of Anaesthetists. This is an opportunity to meet quarterly and discuss issues affecting anaesthesia at a global level – it is amazing to see how similar issues are common to all three Colleges and the influence we may bring to bear globally, for example on world-wide drug shortages.

With the building, transformation has not been limited to its personnel, but also remodelling of the building and relocation of some of the departments within the College. In December, the newly renovated lecture theatre was reopened with a ribbon cutting ceremony after Dr William Blunnie the first President and whom the theatre is named after.

The Training Department has been relocated to the 2nd floor of the clinical science and training building. The stylish office space gives a sense of corporate identity to the department. The Examinations Department has moved to the top floor of Merriion Square, which will enhance security around the examinations. The Finance Department has also relocated to the top floor. In addition, we are completing development of a new floor for high fidelity simulation in the training building.

The first event in the renamed Dr William Blunnie lecture was the 2017 Gilmar-

tin Lecture 'Who Needs Art' delivered by Prof Barbara Dawson, Director of Dublin City Gallery, The Hugh Lane.

I think there are a number of enigmas as we look forward. Funding is limited. This year we have more patients, both elderly and children, on trolleys than ever before, despite the promise of cash injections recently. The exciting publication the Sántecare Report in May 2017 on the future of healthcare in Ireland has fallen behind in its implementation programme. We are at risk of 'reform fatigue' and yet 'health inequality' prevails.

Recruitment across all specialties is challenging, we are able to progress fewer consultant posts and their take up is slow – more often, not for financial reasons but for lifestyle choices and working conditions.

Inability to employ suitably qualified nurses has resulted in closed operating rooms and ICU beds leading to longer waiting lists which impact on patient care.

Not only do we have an aging population, but also an aging workforce in anaesthesia and allied specialties. According to the Medical Council "Medical Workforce Intelligence" Report 2016, over a quarter of consultant anaesthetists are aged 55 years and over.

In other jurisdictions those over 55 years of age no longer take part in the on call rota. As one advances in years it takes longer to recover from interrupted sleep or nights without sleep. Perhaps considering a move to portfolio careers with reduced on-call may be the way forward so senior, experienced consultant anaesthetists can remain productive members of the perioperative team. This may be challenging for smaller departments.

Being released from clinical commitments for College activities, for example, for examinations, training events and executive roles, is becoming more difficult and challenging as the workload and clinical demands in the hospitals is compelling.

Notwithstanding, I do think the future is buoyant for anaesthesia and its related

specialties as well as for the College as witnessed by the large numbers of young enthusiastic doctors applying for our training scheme and the demand for our trainees who have completed our specialist training programme.

I would like to extend my thanks to each of my colleagues on the Council and administrative staff, especially Mr Martin McCormack and Ms Margaret Jenkinson for their unfailing help, support and wise counsel throughout the year.

I hope that in my time as President of the College of Anaesthetists of Ireland, a very special institution, that together we have been able to create

*"An oratorio...*

*Energy, balance, outbreak...*

*At play for their own sake"*

(Seamus Heaney, In Time, 2013)

As I conclude my final annual report, I can affirm with confidence that anaesthesia, intensive care and pain medicine are exciting, fulfilling career choices: the future is bright as we focus on our patients, trainees and colleagues. The College is secure, buttressed by its three robust foundation pillars and its Fellows as it goes forward.

**Professor Kevin Carson,**  
*President*



## CEO'S REPORT

Martin McCormack,  
CEO

The past year has been a time of change for the College but our core purpose remains the same – to protect lives and promote the health of the patients we serve. It is at the heart of everything we do, across all our pillars of activity and was a significant motivating factor when I decided to join the College.

It was a great honour to be appointed as CEO this year, it is an opportunity that I relish. My immediate priorities are to protect, sustain and grow College activity nationally and internationally.

Abraham Flexner once said that “Medical education is not just a program for building knowledge and skills in its recipients, it is also an experience which creates attitudes and expectations.” This year we continued to develop and innovate our training programmes, examinations, continuous professional development, quality and patient safety and research activity to maintain our position as an international standard bearer for world-class practice of anaesthesia, perioperative, intensive care and pain medicine.

Our core Specialist Anaesthesia Training (SAT) programme contains formative and summative assessments aligned to a curriculum that assesses patient safety, integrity, teamwork, communication and leadership as well as clinical skills, manual dexterity, proficiency, practice and refinement.

In September, we launched our Entrustable Professional Activities (EPAs) in vascular access, managing pain in labour, paediatric anaesthesia, and general

anaesthesia to trainees in year one of the SAT programme. This is a significant change management programme and we have created a repository of support material in our online hub, enabled the use of the feedback reports via mobile-app technology and developed an engagement strategy with our Tutors, Fellows and Trainees. It is great to see this project moving from a development to implementation stage and we will continue to review and measure progress.

Throughout 2017 the College inspected and supported clinical site rotations in twenty-one sites across Ulster, Munster, Connaught and Leinster; and continued to develop our structured modules and mandatory education courses and quality assure our membership and fellowship examinations.

All this work is supported by our College Council Fellows and we are indebted to the clinicians involved for their dedication and endeavours on behalf of the College and the specialty. We will continue to impress upon government the need to work with us to support clinicians who devote time to College activities.

Our CEPD Congress Committee continues to develop education, training and continuing professional support for our Fellows with a wide and varied portfolio of lectures, workshops, courses and an outstanding annual congress and education calendar.

The College of Anaesthetists of Ireland Simulation Training (CAST) programme

provides systematic training to our trainees and continuing medical education and development to practitioners in anaesthesia through experiential learning and directed self-reflection in a clinical skills and simulation environment. This year the College has significantly invested in the upgrade and development of our high fidelity simulation training programme, opening up exciting new opportunities for the future.

I am pleased to report that during my first year as Chief Executive, the College's finances have remained strong. This has enabled investment back into our core activities in Ireland and overseas.

As part of our strategic plan, College Council have agreed to increase the annual CAI research project grant to €100,000, demonstrating commitment to research and innovation here in Ireland. Our Research, Audit and Innovation committee awarded this year's grant to two excellent applicants. Internationally, Council have also agreed to fund World Federation of Societies of Anaesthesiologists Fellowship programmes in Ghana and Cairo and to match collaborative research grant funding of €50,000 with our official academic journal partner BJA to support research in our specialties across Ireland and the UK.

### International Strategy

The global burden of disease amenable to surgical intervention is substantial and growing. Despite this, there are

## The Council has adopted a corporate governance framework for the effective governance of the College.

gross disparities in access to safe surgical and anaesthesia care worldwide. As part of a properly functioning health system all people should have access to safe, high-quality surgical and anaesthesia care with financial protection when needed. We continue to collaborate with our strategic partners to build on our international commitments to help reach this goal.

From Johor Bahru at the tip of the Malay Peninsula to Zhengzhou in East Hanan province and from the Great Rift Valley in Malawi to Muscat on the Persian Gulf, the College is actively engaged in improving access to quality anaesthesia care and meeting the shortfall in skilled anaesthetists in those countries through collaboration and consultation on examinations, training programme structure and content, clinical skills workshops and international clinical fellowship programmes.

### Good Corporate Governance

The College is committed to good corporate governance, which strengthens Council and management accountability and helps build public trust in the College. The Council has adopted a corporate governance framework for the effective governance of the College. The framework addresses matters such as the commencement of a strategic planning process, building on Council's mission and vision, the introduction of an annual work programme and calendar for Council, the introduction of a risk management system for the College, a review of College committee structure and an

annual evaluation of council and committee effectiveness, the development of annual business plans and key measures of success outcomes alongside a code of conduct for Council & Committee Members.

The strategic planning process began in October 2017 and will be published and launched in 2018, reflecting the values of the College, our strategic goals, the key areas of activity on which we will focus and it will define the criteria for achieving success. The strategic plan will endure over time and will guide the annual business planning process.

College Council has established a corporate governance working-group, which regularly reviews developments in corporate governance and updates the corporate governance framework and other governance materials, as it deems necessary and appropriate.

### Quality and Patient Safety

Given that patient safety is at the heart of everything we do, it was very satisfying to see the range and depth of research and thought provoking presentations at our Inaugural National Patient Safety in Anaesthesia Conference in November, which we streamed live to Fellows, Trainees and Members across the globe. This will now become an annual event in the College calendar.

I also commend the CAI Quality and Safety Advisory Committee for establishing a National Anaesthesia Safety Network. The QSA committee work closely with the Irish Standing

Committee of AAGBI and the National Clinical Programme for Anaesthesia to communicate patient safety information in a structured and systematic way.

### Key Stakeholder Engagement

The theme of patient safety extends to our continued engagement with our regulator, the Medical Council. The College has reflected on the first five years of operation of the Professional Competence Schemes under contract with the Medical Council. In October 2017, the Medical Council together with the Forum of Postgraduate Medical Training Bodies hosted a Symposium to "Address the Challenge of Compliance in the Maintenance of Professional Competence". A number of key opportunities were broadly defined on how to facilitate and manage maintenance of professional competence compliance, especially emphasising the need to move away from considering professional competence as a box ticking exercise and engage in more meaningful lifelong learning. The Medical Council have extended the PCS contract with the College of Anaesthetists of Ireland for a further three-year period.

The College and JFICMI also engaged with the Medical Council and the Health Service Executive to seek accreditation of the intensive care medicine higher specialist-training programme. Having received support from the National Doctors Training and Planning unit and the Clinical Director of Acute Hospital services, we proceeded to make full sub-

## The College have collaborated with HSE National Clinical Programme for Anaesthesia (NCPA) in the development of a Model of Care for Anaesthesia and with the Critical Care Programme (CCP) supporting the implementation of a Model of Care for Adult Critical Care.

mission the Medical Council's Education, Training and Professional Development Committee in December 2017, which will be assessed and considered in 2018.

The Medical Council published its updated Guide to Professional Conduct and Ethics (8th Edition) on (17th May 2016). The College of Anaesthetists of Ireland have drafted an adjunct to that guide, to provide more sub-specialty level of detail on professionalism in Anaesthesia, Intensive Care and Pain Management and will publish the document in 2018. The Medical Council of Ireland's expectation is that the quality of the doctor's competence, behaviours and relationships that underlie this professionalism is maintained in the patient-doctor relationship.

Alongside the Medical Council, we continue to engage with the Forum of Postgraduate Training Bodies and the HSE National Doctors Training and Planning unit on a variety of issues relating to training and the profession. In November 2017 the College signed up to the Principles of Flexible Training in recognition of the need to support more flexible and differentiated approaches during training that take account of family, research or other constraints.

The President and I continue to advocate with the Forum and the HSE NDTP for alignment of strategy in relation to postgraduate training, to increase the level of funding in medical training, to develop meaningful recruitment and retention strategies and to support health and well-being of doctors. The College is committed to working with the Medical Council and the HSE to develop a strategy to support the increasing number of NCHDs not in training and to review the educational

supports, appraisal and assessment available to them.

The College had a significant presence at the national Medical Careers Day in September in Dublin Castle, where over 500 students had the opportunity to meet specialist clinicians and staff from our College to learn more about SAT training, which remains the most competitive specialty training programme nationally.

The College have collaborated with HSE National Clinical Programme for Anaesthesia (NCPA) in the development of a Model of Care for Anaesthesia and with the Critical Care Programme (CCP) supporting the implementation of a Model of Care for Adult Critical Care.

### **Our Heritage**

The CAI has approximately 130 Senior Fellows, who are retired from clinical practice, who have demonstrated sustained achievements in anaesthesia, intensive care or pain medicine and have contributed to the science or practice of anaesthesia and to development of the College. This year the College hosted an inaugural event especially for this group of members under the chairmanship of Prof Dennis Moriarty and such was the level of positive feedback that we will aim to host three Senior Fellows Forum events per annum.

### **Acknowledgements**

The College is well served by a highly committed group of talented staff whose contribution is very much appreciated. In October Dr Cathy Armstrong retired from her position as Director of Training, having given outstanding commitment to the College, our trainees, tutors and

Fellows and the broader development of the SAT training programme and the CAI Mentoring programme over her tenure. Dr Camillus Power was appointed as Interim Director of Training and Dr Brian O'Brien took up his new role as Chair of the Training Committee. I look forward to working with them and I would also like to thank Mr Fintan Foy, Mr Mark Mc Donnell and Ms Maria Golden, who departed during the year, for the contribution they made to the College. We wish them well in their new endeavours.

I would like to acknowledge the contribution of Council, Committee members, examiners, tutors and trainers for their commitment and support. Without you, we would not have a College. I would also like to thank the staff of the College for their hard work and dedication in supporting the activities of the College. In particular, I recognise the support and contribution of Ms Margaret Jenkinson, Chief Operations Officer. As Jean Paul Sartre once said, *"commitment is an act, not a word"* and Ms Jenkinson is a huge source of support in the day to day running of the College.

Finally, I would like to thank our President, Professor Kevin Carson for his leadership on Council during the time that we worked together. The President's determination and an unrelenting commitment to excellence have enabled us to attain success and envision a bright future for the College.

**Martin McCormack,**  
CEO







Dr Kevin Clarkson, Honorary Treasurer  
and Chair of the Finance & General  
Purpose Committee

## HONORARY TREASURER'S REPORT

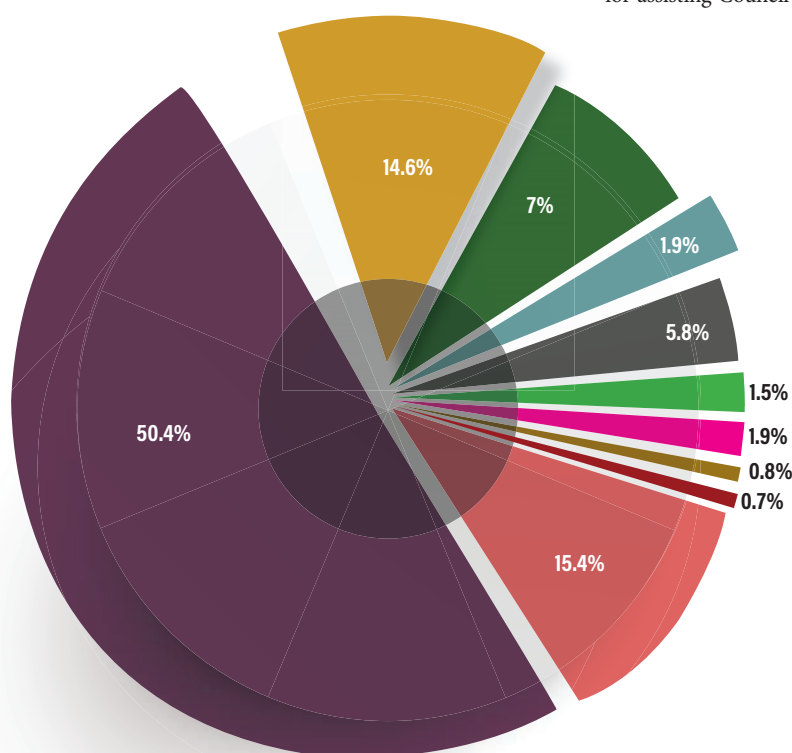
I am pleased to present our Financial Statements and my report for the financial year ended 31st December 2017. Our financial strategy employs disciplined financial stewardship to ensure the long-term sustainability of our operations and the realisation of the growth ambitions of the College. We place a strong focus on generating a surplus annually to ensure that our on-going commitments can be met. As a registered charity, all surpluses are reinvested for the furtherance of training, education and research.

In 2017 the College undertook a governance review that will continue into the early part of 2018. A key recommendation from the review was the necessity for a risk register. The Finance Committee will be responsible for assisting Council by taking delegat-

ed responsibility for the identification and assessment of risks and for reporting on same, as well as for reviewing the College's risk management and internal control systems and making recommendations to Council.

I am delighted to be able to report on another year of solid progress for the College and on the healthy state of the College finances. The College continues to have no need for borrowings and is able to rely fully on operating surpluses. During 2017 we invested €900,000 with Merrion Capital. The College's investment policy is to maintain a balance between income and capital growth with medium risk and an ethical stipulation that there should be no direct investment in tobacco related companies. The total return for the year compares satisfactorily with other types of investments of a similar risk profile. These investment funds will assist the on-going financial sustainability of the College, as well as funding cutting edge research in the fields of anaesthesia, pain medicine and perioperative medicine.

Grant Thornton audited our accounts. We have received a clean, unqualified audit opinion, which means that the financial statements present a true and fair view of the financial position



### Income 2017

- Annual subscriptions 14.6% (€525,435)
- Educational meeting and courses 7% (€249,622)
- College fees 1.9% (€69,476)
- International education & training 5.8% (€210,000)
- Venue hire and event income 1.5% (€54,680)
- HSE income reimbursement 1.9% (€66,640)
- Donations and sponsorship 0.8% (€26,948)
- Sundry income 0.7% (€25,904)
- Examinations 15.4% (€554,050)
- Grants: Structural Funding Grants HSE 50.4% (€1,808,099)

of the College and have been properly prepared in accordance with relevant legislation. No concerns or comments were expressed. The Financial Statements of the College for the year ended 31st December 2017 are set out on pages 12-18 of this annual report.

### Income & Expenditure Account

In summary, in 2017 there is a continuance of the sound financial performance and position of the College. Total income of the College for the financial year ended 31st December 2017 was €3,590,854 which represents a 7.5% increase on the total income for 2016. The majority of income continues to be earned from those activities that are core to the College's strategy.

HSE funding remains our largest single source of income, accounting for 52% of total income. While income for Annual Subscriptions has fallen slightly in 2017 it should be noted that 2016 was an exceptional year for subscription income. Furthermore, we have had significant uptake from our UK Fellows in relation to our reduced subscription for dual membership. Total expenditure for the year was €3,224,268 which represents an increase of 7.2% on 2016 expenditure. Overall, a strong surplus of €370,784 was generated on ordinary

activities – a 9.6% increase on the 2016 figure. The College's financial results for the year were in line with expectations.

### Statement of Financial Position

The statement of financial position as at 31st December 2017 details the assets and liabilities of the College and I am delighted to report that the net assets now total €8,778,285. This is an increase of 4.4% on the 2016 net assets. Debtors at 31st December 2017 were €756,923. The majority of this balance relates to HSE invoices. Creditors at 31st December 2017 were €664,366.

In 2017 the College continued to focus on investing in new and existing technology to improve services to Fellows and trainees. For 2018 we will focus on projects aimed at delivering a more sustainable organisation, with the College progressing the move to

an "Infrastructure as a service" hosted model in relation to its information technology strategy.

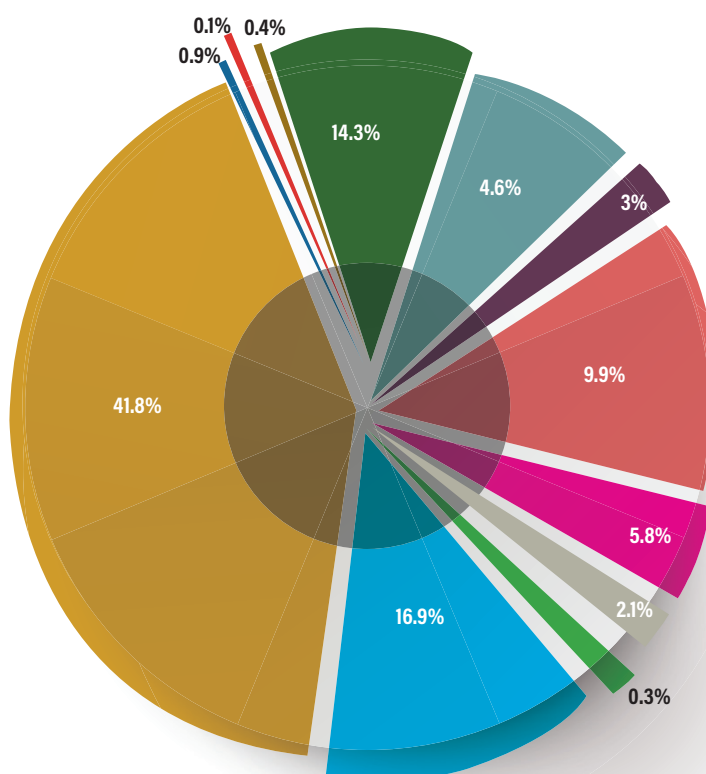
Finally, I gratefully acknowledge the support of the loyal and hardworking members of the Finance committee for their contributions and on-going financial stewardship, thereby ensuring the on-going success of the College. I would also like to express my sincere gratitude to the staff in the Finance office, Ms Margaret Jenkinson our Finance Officer and her team - Mr Ben Courtney who joined the department in January 2018 and Ms Natalie Brennan. We look forward to another exciting year ahead.

**Dr Kevin Clarkson,**

*Honorary Treasurer and Chair of the Finance & General Purpose Committee*

### Expenditure 2017

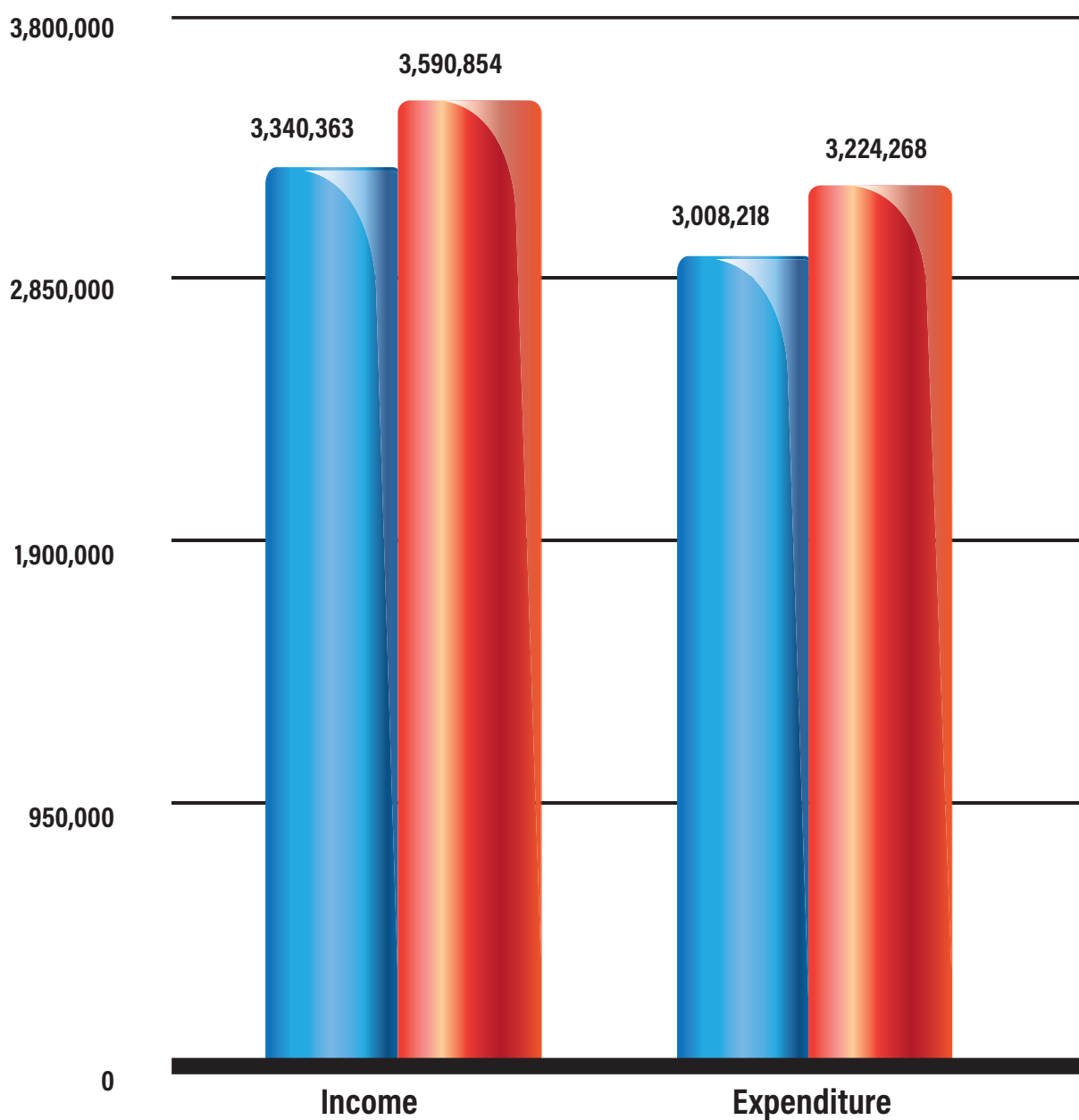
Educational material, meetings & courses	14.3% (€461,192)
Examinations	4.6% (€147,234)
Research sponsorship and tutors	3% (€96,277)
Governance	9.9% (€319,182)
Depreciation	5.8% (€186,767)
HSE Discretionary expenditure	2.1% (€66,640)
Venue hire and event expenditure	0.3% (€10,103)
Office & IT	16.9% (€547,623)
Wages, salaries, related charges training	41.8% (€1,351,092)
Bank Charges	0.9% (€29,099)
General	0.1% (€4,562)
International charitable activities	0.4% (€12,814)



**Income &  
Expenditure  
2016-  
2017**

■ 2016  
■ 2017

Total expenditure for the year was €3,224,268 which represents an increase of 7% on 2016 expenditure. Overall, a strong operational surplus of €370,784 was generated on ordinary activities – a 10% increase on the 2016 figure.



# INCOME AND EXPENDITURE

## DRAFT INCOME AND EXPENDITURE ACCOUNT FOR THE YEAR ENDED 31 DECEMBER 2017

INCOME	2017	2016
Annual subscriptions	525,435	567,123
International education and training	210,000	175,000
College fees	69,476	77,887
Educational meetings and courses	249,622	214,493
Examinations	554,050	560,861
HSE Structural Funding	1,808,099	1,545,094
HSE Income Reimbursement	66,640	79,513
Donations and Sponsorship	26,948	39,405
Venue hire and event income	54,680	63,841
Sundry income	25,904	17,146
	<b>3,590,854</b>	<b>3,340,363</b>

EXPENDITURE		
Wages, salaries, related charges, staff training and recruitment	1,351,092	1,141,903
Educational material, meetings and courses	461,192	283,509
Examinations	147,234	203,237
Office and IT	547,623	548,088
Governance	319,182	379,788
Research sponsorships and tutors	96,277	106,443
International charitable activities	12,814	9,255
Depreciation	186,767	194,175
Financial	29,099	24,121
Venue catering and advertising costs	10,103	29,770
General costs	4,562	8,416
HSE discretionary expenditure	66,640	79,513
Fair value movement of investments	(8,317)	-
	<b>3,224,268</b>	<b>3,008,218</b>

OPERATING SURPLUS	366,586	332,145
Interest receivable and similar income	4,198	6,281
Interest payable and similar charges	-	-
Surplus on ordinary activities before exceptional items	370,784	338,426

On behalf of the Board of Directors

Prof Kevin Carson

Dr Kevin Clarkson

# AUDITOR'S REPORT

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

## Opinion

We have audited the financial statements of College of Anaesthetists of Ireland CLG, which comprise the Statement of Comprehensive Income, the Statement of Financial Position, the Statement of Cash Flows, the Statement of Changes in Equity for the financial year ended 31 December 2017, and the related notes to the financial statements.

The financial reporting framework that has been applied in their preparation of the financial statements is Irish law and accounting standards issued by the Financial Reporting Council and promulgated by the Institute of Chartered Accountants in Ireland including FRS 102 'The Financial Reporting Standard applicable in the UK and Republic of Ireland'. (Generally Accepted Accounting Practice in Ireland).

In our opinion, College of Anaesthetists of Ireland CLG's financial statements:

- give a true and fair view in accordance with Generally Accepted Accounting Practice in Ireland of the assets, liabilities and financial position of the Company as at 31 December 2017 and of its financial performance and cash flows for the financial year then ended; and
- have been properly prepared in accordance with the requirements of the Companies Act 2014 and the Companies (Accounting) Act 2017.

## Basis for Opinion

We conducted our audit in accordance with International Standards on Auditing (Ireland) (ISAs (Ireland)) and applicable law. Our responsibilities under those standards are further described in the 'responsibilities of the auditor for the audit of the financial statements' section of our report. We are independent of the Company in accordance with the ethical requirements that are relevant to our audit of financial statements in Ireland, namely the Irish Auditing and Accounting Supervisory Authority (IAASA) Ethical Standard concerning the integrity, objectivity and independence of the auditor, and the ethical pronouncements established by Chartered Accountants Ireland, applied as determined to be appropriate in the circumstances for the entity. We have fulfilled our other ethical responsibilities in accordance with these requirements. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion.

## Conclusions Relating to Going Concern

We have nothing to report in respect of the following matters

in relation to which the ISAs (Ireland) require us to report to you where:

- the directors' use of the going concern basis of accounting in the preparation of the financial statements is not appropriate; or
- the directors have not disclosed in the financial statements any identified material uncertainties that may cast significant doubt about the Company's ability to continue to adopt the going concern basis of accounting for a period of at least twelve months from the date when the financial statements are authorised for issue.

## Other Information

Other information comprises information included in the Annual Report, other than the financial statements and our auditor's report thereon. The directors are responsible for the other information. Our opinion on the financial statements does not cover the information and, except to the extent otherwise explicitly stated in our report, we do not express any form of assurance conclusion thereon.

In connection with our audit of the financial statements, our responsibility is to read the other information and, in doing so, consider whether the other information is materially inconsistent with the financial statements or our knowledge obtained in the audit, or otherwise appears to be materially misstated. If we identify such material inconsistencies in the financial statements, we are required to determine whether there is a material misstatement in the financial statements or a material misstatement of the other information. If, based on the work we have performed, we conclude that there is a material misstatement of this other information, we are required to report that fact.

We have nothing to report in this regard.

## Matters on which we are required to report by the Companies Act 2014 and the Companies (Accounting) Act 2017

- We have obtained all the information and explanations which we consider necessary for the purposes of our audit.
- In our opinion the accounting records of the Company were sufficient to permit the financial statements to be readily and properly audited.
- The financial statements are in agreement with the accounting records.
- In our opinion the information given in the Directors' Report is consistent with the financial statements. Based solely on the work undertaken in the course



of our audit, in our opinion, the Directors' Report has been prepared in accordance with the requirements of the Companies Act 2014 and the Companies (Accounting) Act 2017.

### **Matters on which we are required to report by exception**

- Based on our knowledge and understanding of the Company and its environment obtained in the course of the audit, we have not identified material misstatements in the Directors' Report.
- Under the Companies Act 2014 and Companies (Accounting) Act 2017, we are required to report to you if, in our opinion, the disclosures of directors' remuneration and transactions specified by sections 305 to 312 of the Acts have not been made. We have no exceptions to report arising from this responsibility.

### **Responsibilities of the management and those charged with governance for the financial statements**

As explained more fully in the directors' responsibilities statement, management is responsible for the preparation of the financial statements which give a true and fair view in accordance with Generally Accepted Accounting Practice in Ireland, including FRS102, and for such internal control as they determine necessary to enable the preparation of financial statements that are free from material misstatement, whether due to fraud or error.

In preparing the financial statements, management is responsible for assessing the Company's ability to continue as a going concern, disclosing, as applicable, matters related to going concern and using the going concern basis of accounting unless the management either intends to liquidate the Company or to cease operations, or has no realistic alternative but to do so.

Those charged with governance are responsible for overseeing the Company's financial reporting process.

[SH1] Responsibilities of the auditor for the audit of the financial statements

The auditor's objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance, but is not a guarantee that an audit conducted in accordance with ISAs (Ireland) will always detect a material misstatement when it exists. Misstatements can arise from fraud or error and are considered material if, individually or in the aggregate, they could reasonably be expected to influence the economic decisions of users taken on the basis of these financial statements.

As part of an audit in accordance with ISAs (Ireland), the auditor will exercise professional judgment and maintain professional scepticism throughout the audit. They will also:

Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, design and

perform audit procedures responsive to those risks, and obtain audit evidence that is sufficient and appropriate to provide a basis for our opinion. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control.

Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion of the effectiveness of the Company's internal control.

Evaluate the appropriateness of accounting policies used and the reasonableness of accounting estimates and related disclosures made by management.

Conclude on the appropriateness of management's use of the going concern basis of accounting and, based on the audit evidence obtained, whether a material uncertainty exists related to events or conditions that may cast significant doubt on the Company's ability to continue as a going concern. If they conclude that a material uncertainty exists, they are required to draw attention in the auditor's report to the related disclosures in the financial statements or, if such disclosures are inadequate, to modify their opinion. Their conclusions are based on the audit evidence obtained up to the date of the auditor's report. However, future events or conditions may cause the Company to cease to continue as a going concern.

Evaluate the overall presentation, structure and content of the financial statements, including the disclosures, and whether the financial statements represent the underlying transactions and events in a manner that achieves a true and fair view.

The Auditor shall communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit and significant audit findings, including any significant deficiencies in internal control that may be identified during the audit.

[SH1] The purpose of our audit work and to whom we owe our responsibilities

This report is made solely to the Company's members, as a body, in accordance with section 391 of the Companies Act 2014. 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.

**Colin Feely, FCA**

*for and on behalf of*

*Grant Thornton*

*Chartered Accountants*

*Registered Auditors*

*Dublin 8*

# STATEMENT OF FINANCIAL POSITION

31 DECEMBER 2017

	2017	2016
<b>FIXED ASSETS</b>		
Tangible Assets	4,443,196	4,517,432
Investments	908,317	-
	<b>5,351,513</b>	<b>4,517,432</b>
<b>CURRENT ASSETS</b>		
Debtors	756,923	550,657
Cash at bank and in hand	3,334,215	4,299,342
	<b>4,091,138</b>	<b>4,849,999</b>
<b>CREDITORS</b>		
Amounts falling due within one year	(664,366)	(959,930)
<b>NET CURRENT ASSETS</b>	<b>3,426,772</b>	<b>3,890,069</b>
<b>TOTAL ASSETS LESS CURRENT LIABILITIES</b>	<b>8,778,285</b>	<b>8,407,501</b>
<b>CAPITAL AND RESERVES</b>		
Retained Surplus	8,778,285	8,407,501
<b>MEMBERS FUNDS</b>	<b>8,778,285</b>	<b>8,407,501</b>

On behalf of the Board of Directors  
 Prof Kevin Carson  
 Dr Kevin Clarkson

# *Council of the College of Anaesthetists of Ireland 2017*

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## **BACK ROW LEFT TO RIGHT:**

Ms Margaret Jenkinson; Prof David Honan; Ms Anne Maher; Dr Brian O'Brien; Prof Gerry Fitzpatrick; Dr Calathur Nanda Kumar; Dr Ehtesham Khan; Prof George Ghaly; Dr Padraig Sheeran; Dr John O'Dea; Dr Miriam Langdon

## **FRONT ROW LEFT TO RIGHT:**

Mr Martin McCormack; Dr Rory Page; Dr Kevin Clarkson (Honorary Treasurer); Prof Kevin Carson (President); Dr Anne Hennessy (Vice President); Dr Brian Kinirons (Honorary Secretary); Dr Camillus Power; Dr Jeanne Moriarty



Dr Brian O'Brien, Chair  
of the Training and  
Education Committee

# TRAINING AND EDUCATION COMMITTEE REPORT

The committee met four times over the year and dealt with a broad variety of issues pertaining to the overall running of the scheme, and an equal range of matters pertaining to individual trainees. The major topics we have spent time on include the SAT recruitment process, the roll out of EPAs (Entrustable Professional Activities) as a smartphone-assisted form of clinical teaching, and a sweeping effort to reform the allocation of trainees on the SAT matrix so as to maximise the quality of training, the transparency and the fairness of the system. Ideally we wish to minimise the disruption of personal lives, while providing a predictable supply of high calibre doctors to our training hospitals. Frequently these objectives are difficult to reconcile, and the necessary trade-offs and compromises make up the substance of much of our discussions.

SAT recruitment is in a very positive state, with more than two applicants for every training post. We recruited 40 newcomers to the programme at interviews in January, they being selected from over 60 shortlisted. The interviews are intended to be objective, with structured questions, and points awarded for specific achievements on one's CV. The time afforded to us by consultants to conduct these interviews is greatly appreciated; indeed it underpins the credibility of the programme from its earliest stages. We thank them for their input. The application form and interview pro-

cess were changed in summer of 2017, and most involved found the new format better. Further modifications are presently under consideration, but are likely to be relatively minor. We aim to commence a formal process of data collection on the learning process and progression of the 2018 intake, which may lead to the publication of a research. Ultimately this should provide an evidence-base for the on-going evolution of the programme.

The matrix of training posts is a complex chart, covering the six-year programme of 40 doctors. Each sequence needs to include paediatric experience, obstetric care and a broad range of other specialties. We try to schedule each trainee to work in only two geographical locations, one of which is necessarily Dublin. Requests to swap, and the existence of Special Interest Years (SIYs), disrupt the pattern, and inevitably have knock-on effects. These are important options however, and justify themselves as they improve trainees' levels of satisfaction and their experience of the programme generally. Nonetheless, we are trying to improve adherence to the prescribed programme, and to establish mechanisms and guidelines for posts being swapped, and we may look to move the SIYs to an earlier point in training. Many appear to agree that the last year is best conducted as an undifferentiated, high-level anaesthesia post in which one is expected to function close to consultant level, in a broad diversi-

ty of operating environments. Moving the SIY option to year 4/5 is a way to encourage this. Reorganising this flow-chart – which covers a six-year programme for 40 people – or 240 years of working life – has been a Herculean task for college staff! Ann Kilemade and Dr Camillus Power have been major contributors to this process.

The rollout of EPA's in the second half of 2017 was a major change in the training programme, the full effects of which are not as yet apparent. The trial period for the project began in October, and full implementation for SAT 1/2 trainees begins in July 2018. In essence, this process will put clinical and theatre-based teaching on a formal, quantifiable basis. It begins a process of evolution away from time-based apprenticeships toward observed demonstrations of procedural and other competencies in the hospital setting. Acquisition of each defined skill is documented up to a point where one is deemed fully competent, and can thereafter be "entrusted" with that task. It remains an ambitious venture.

Training days for tutors and instruction videos were provided after a two-year project to choose and define the skills and competencies, develop the relevant app, and begin to troubleshoot it. It is now on the App Store and uptake has been strong, with useful and positive feedback to trainees and to the College continuing. More information on this is available from the CAI website, and elsewhere. Although the term

is perhaps overused, this is a genuine paradigm shift in clinical teaching. At this stage it's limited to four clinical interventions but the project will expand to cover many more. It has required significant planning and investment of resources at Council level. The EPA concept will be a major component of the SAT programme as experienced by trainees in the future.

The terms of reference of the committee were also reviewed during the year. In certain respects, this type of appraisal needs to be done regularly – items referred to become obsolete, and sometimes new scenarios arise that warrant specific rules to be added. The current draft appears more reflective of current training realities, and we will endeavour to maintain that standard.

A major contribution made by tutors in our 25 training hospitals must be acknowledged. The names of all tutors are listed at the end of this report. This year saw Dr Patricija Ecimovic complete her term as lead tutor, and we wish to thank her as well as all other tutors for their work, and wish Dr Ecimovic the best in the future.

With regard to the problems that are raised by individual trainees, it may be wiser to avoid giving examples or listing scenarios. Suffice to say that as a full year passes for our 240 or so doctors in training, clearly this can be seen to encompass three human lifetimes of experiences. Difficulties arise, and in some cases they are very complex and

challenging. Some relate to work, but many do not. We try to be of assistance, and to mitigate problems as best we can. We are frequently frustrated that we cannot do more, however, and unfortunately this is unlikely to change despite any efforts we make. The CAT group contributes significantly in many ways to the committee, not least in helping individuals to bring problems to our attention. Their valuable contribution is crucial to the committee, and we are very thankful for it.

**Dr Brian O'Brien,**  
*Chair of the Training and Education Committee*

Suffice to say that as a full year passes for our 240 or so doctors in training, clearly this can be seen to encompass three human lifetimes of experiences. Difficulties arise, and in some cases they are very complex and challenging. Some relate to work, but many do not. We try to be of assistance, and to mitigate problems as best we can.



During the year, additional Tutors were appointed with specific responsibility for the implementation of EPAs for the SAT 1 trainees. All our Tutors have played a significant role in the past year and are deserving of our gratitude. A current list of Tutors nationally is provided below.

## Tutors

Dr Eleanor O'Leary	Adelaide, Meath, National Children's Hospital
Dr Katrina O'Sullivan	Adelaide, Meath, National Children's Hospital
Dr Karthikeyan Srinivasan	Adelaide, Meath, National Children's Hospital
Dr Karen Tan	Adelaide, Meath, National Children's Hospital
Dr Grace Donnelly	Beaumont Hospital
Dr David Moore	Beaumont Hospital
Dr Criona Walshe	Beaumont Hospital
Dr Norah O'Leary	Cappagh National Orthopaedic Hospital
Dr Enda Shanahan	Cappagh National Orthopaedic Hospital
Dr Christopher Holmes	Children's University Hospital, Temple St
Dr Kay O'Brien	Children's University Hospital, Temple St
Dr Micheál Looney	Connolly Hospital
Dr Shane McGeary	Connolly Hospital
Dr Sabrina Hoesni	Coombe Women's Hospital
Dr John Chandler	Cork University Hospital
Dr Parvaiz Hafeez	Cork University Hospital
Dr Padraig Mahon	Cork University Hospital
Dr Louise Moran	Letterkenny General Hospital
Dr Kathryn Byrne	Mater Misericordiae University Hospital
Dr Catherine Deegan	Mater Misericordiae University Hospital
Dr Margaret Doherty	Mater Misericordiae University Hospital
Dr Jennifer Hastings	Mater Misericordiae University Hospital
Dr Katie Padfield	Mater Misericordiae University Hospital
Dr Ciara Canavan	Mayo General Hospital
Dr Jeremiah Dowling	Mercy University Hospital
Dr Mohammad Faheem	Midland Regional Hospital Mullingar
Dr Kevin McKeating	National Maternity Hospital, Holles St
Dr Paula Connolly	Our Lady of Lourdes Hospital, Drogheda
Dr Jubil Thomas	Our Lady of Lourdes Hospital, Drogheda
Dr Suzanne Cronly	Our Lady's Children's Hospital Crumlin
Dr Suzanne Crowe	Our Lady's Children's Hospital Crumlin
Dr Patrick Thornton	Rotunda Hospital
Dr Denise Rohan	Royal Victoria Eye and Ear Hospital

Dr Emer O'Mahony Imhoff	Sligo General Hospital
Dr Omar Tujjar	Sligo General Hospital
Dr Michael O'Sullivan	South Infirmary Victoria University Hospital
Dr Carl Fagan	St James's Hospital
Dr Niall Hughes	St James's Hospital
Dr Thomas Ryan	St James's Hospital
Dr Thomas Schnittger	St James's Hospital
Dr Dara Breslin	St Vincent's University Hospital
Dr Niamh Conlon	St Vincent's University Hospital
Dr Donal Ryan	St Vincent's University Hospital
Dr Abigail Walsh	St Vincent's University Hospital
Dr Joseph Costello	University College Hospital, Galway
Dr Leo Kevin	University College Hospital, Galway
Dr Jennifer McElwain	University College Hospital, Galway
Dr Catherine Motherway	University Hospital Limerick
Dr John O'Dea	University Hospital Limerick
Dr Owen O'Sullivan	University Hospital Limerick
Dr James Shannon	University Hospital Limerick
Dr Patricija Ecimovic	Waterford Regional Hospital
Dr Vida Hamilton	Waterford Regional Hospital
Dr Colette Murphy	Waterford Regional Hospital
Dr Muhammad Shahid	Wexford General Hospital

## *Certificate of Specialist Training 2017*

Fahd Aamir	Jul-17	Hafiza Misran	Jan-18
Hani Abdalla	Jul-17	Darren Mullane	Jul-17
Dalia Abdelrahman	Jul-17	Shrijit Nair	Jul-17
Colin Black	Jul-17	Sinead O'Keeffe	Jan-18
Thomas Drew	Jul-17	Shanmuga Ramaswamy	Jul-17
Sheila Duggan	Jul-17	Jassim Rauf	Jul-17
Éimhín Dunne	Jul-17	Kazim Raza	Jul-17
John Fitzgerald	Jul-17	Jonathan Royds	Jul-17
Tagarisa Foto	Jul-17	Lindi Snyman	Jul-17
James Freeman	Jul-17	Orsolya Solymos	Jan-18
Deborah Galvin	Jul-17	Farrukh Suhail	Jul-17
David Greaney	Jul-17	Nuala Treanor	Jul-17
Sheeba Hakak	Jul-17	Bill Walsh	Jul-17
Francesca Holt	Jul-17	Vandan Ward	Jul-17
Mark Johnson	Jul-17		
Richard Katz	Jan-18		
Joseph Keaveney	Jul-17		
Azza Kibeida	Jul-17		
Aoife Lavelle	Jul-17		
Katarina Lenartova	Jul-17		
Aidan Magee	Jul-17		
Sinead McCarthy	Jul-17		

# RESEARCH AUDIT AND INNOVATION COMMITTEE



Dr Jeanne Moriarty,  
Chair of the Research  
Audit and Innovation  
Committee

The committee met in February, May, September and November 2017.

## College Research Grant 2017

There were seven applicants for the College Research Grant which was awarded to Dr Fennessy and Professor McCaul (€25,000) for their project, "Creation and validation of anatomically correct cricothyroidotomy models for training by 3D printing" and Drs Royds and McCrory (€50,000) "Identification and classification of the peptide and cellular constituents of CSF in patients with chronic neuropathic pain". The submissions were of excellent calibre.

The College Research Grant was increased to €100,000 for 2018. In addition, the College is collaborating with the British Journal of Anaesthesia in a joint research grant of £100,000.

## SATARN

CAT has established a trainee research and audit network, which was endorsed by the committee. The committee continues to support applications from trainees and Fellows who wish to undertake surveys and clinical audit. Training will be required in relation to the new data protection regulations.

**Dr Jeanne Moriarty,**

*Chair of the Research Audit and Innovation Committee*



# DIRECTOR OF POSTGRADUATE TRAINING REPORT

Dr Camillus  
Power, Interim  
Director of  
Postgraduate  
Training

In October 2017 Dr Cathy Armstrong retired as Director of Postgraduate Training and as a result, I vacated my Chair of Training Role to take up the position of Interim Director of Postgraduate Training for six-eight months. I'd like to take the opportunity to acknowledge the fine work and dedication of Cathy on behalf of the trainees, trainers and the College. The Chair of

Training and Education role passed to Dr Brian O'Brien and I wish him well in this important role on behalf of Council.

A number of changes had taken place in the Training Department with the appointment of a new Training Officer and new staff. In that context, it seemed appropriate to undertake a

review of the operation of the Training Department, including an in-depth review of Rotations to ensure greater fairness and transparency, Training Regulations and general Policies and Procedures. In addition, the EPA Project had reached an important milestone, whereby it was time for a transition from theory into practice. This



We also wish to acknowledge the sad untimely passing of Dr Mark Owens, who was an excellent trainee and a very talented and dedicated doctor. Dr Owens was a member of the CAT Committee and as a tribute to his remarkable dedication, we are delighted to include the picture above to acknowledge his very fine work on behalf of the next generation of trainees.



## TRAINING DEPARTMENT

The current composition of the Training Department and roles are outlined below:

NAME	ROLE
Dr Camillus Power	Interim Director of Training
Dr Eilis Condon	Deputy Director of Training
Ann Kilemade	Training Officer
Jennie Shiels	Training Manager
Lauren Donohoe	EPA Administrator
Sinead Byrne	Simulation, PCS and International Programme
Rebeca Williams	Secretariat and Training Administration
Mary Barrett	Secretariat and Training Administration

resulted in placing four core EPAs and four feedback reports at the disposal of trainees and tutors in all our training hospitals. This included a decision to launch the App, a Digital Resources Hub and the training of 25 EPA tutors. All of this was to allow practical experience of this project to inform Council's decision (in April 2018) on how best to develop competency based medical education for our training programme going forward.

We present the work of the Training Department in the format of a table, opposite, to better illustrate the work achieved to date and the scope of activities managed by the Training Department. Hopefully, this captures the sense of change, dynamism and

enthusiasm within the new Training Department.

I wish to acknowledge the sterling work of our new Training Officer and Training Manager who have had to hit the ground running on a very steep learning curve, with excellent support from a largely new team, many of whom had to take on new responsibilities to support the wide range of interconnecting College activities, ranging from recruitment, allocation of trainees, simulation to Faculty and committee support so that the trainee receives the best possible chance to progress through their training and achieve their CSCST. It is also important to acknowledge the input of CAT to the work of the Training Department,

## KEY ACHIEVEMENTS

### EPA DEVELOPMENT

- Launch of EPA project in our hospitals
- EPA tutor study days and training for SAT 1s
- Development, launch and upgrade of the App and a Digital Resources Hub for online resources
- Transition to hospital – going live with four EPAs and four feedback reports
- Irish Health Care award commendation
- Grant funding awarded by the HSE

### ROTATIONS

- Completed full review of the rotations template and revised template developed.
- Scope included review of 240 trainee allocations across six-years in 25 hospitals.
- Greater transparency with revised template published on College website
- Reviewed SIY and Post CST Fellowships with a view to centralising the appointment of the SIY posts – pilot under way

### RECRUITMENT

- Revised applications process with ability to apply through an on-line application system
- Appointments completed with 40 new trainees starting July
- Autumn and spring SLA reviews with NDTP

### INTERNATIONAL TRAINEE PROGRAMME

- Completion of programme for 2 CPSP trainees with five further trainees mid programme
- Initiation of the Sudan programme with first trainee due to start in July 2018

### OVERSEAS FELLOWSHIP INITIATIVE

- Completion of the first group of trainees from Oman in July 2017
- Annual Trainee Reviews
- Completed for 2017 and underway for 2018

### MEDICAL CAREERS DAY

- Attended day co-ordinated by the Forum of Post-graduate Training Bodies
- Information and simulation experience provided

### ADMINISTRATIVE SUPPORT

- Continued administrative support to Joint Faculty of Intensive Care Medicine of Ireland, Faculty of Pain Medicine, Intensive Care Society of Ireland, Committee of Anaesthetic Trainees (CAT) and the Training and Education, Credentials, Quality & Safety, Research & Academic Committees.



# EPA Annual Report



Review January - December 2017

## Live EPA Elements Launched in September 2017

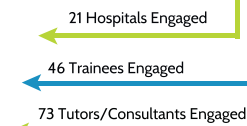


100%\*



\* Percentage of Trainees Engagement.

## Level of EPA Participation



## Grants and Awards in 2017

The EPA Feedback Report App was nominated and shortlisted for three awards:

- Irish Healthcare Awards by HSE
- Innovation by Irish Medtech
- Best Use of Information Technology, Information Technology Association Galway

Funding secured to develop the mobile app with a web-based platform, to support competency based feedback and assessment in clinical sites and, part funding to develop and implement a CBME framework in specialist training.

Team presented at the following conferences - February: INMED Conference, RCSI, August: AMME Conference, Helsinki, Finland.

## Training and Engagement

### EPA Tutors Training Days

Tutor training days took place on 23 June and 21 September. Tutors held EPA hospital briefing with consultants in early October

### EPA Trainee Induction

EPA project induction including use of App and Feedback Reports took place with SAT 1 trainees on 7th September 2017.

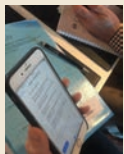
### Survey

An online survey to evaluate EPA project was created for EPA tutors and trainees.



## Tools and Resources

### Feedback Reports App



The EPA Feedback Reports App offers a paper free, tech platform to support every step of the Feedback Reports process. Achievements include:

- Design, development and launch in 2017.
- Field tested with consultants and trainees.
- Enhancements implemented based on user feedback.
- Field tested with consultants and trainees.

### Spotlight on the CAI Hub

We launched the CAI Hub in September. It is an ongoing resource for information and learning hosting:



- Scenario Videos of Roleplays.
- PDF Resources.
- EPA Vodcasts.
- Presentation Videos
- EPA Project Guidelines.
- Animations.
- Hospital Briefing Presentations.

Find out more at [www.thecaihub.com](http://www.thecaihub.com)

in particular in light of the significant change over the last 12 months.

We also capture the live nature of the current EPA work in the set of infographics presented left and take this opportunity to thank all the consultants and trainees who have engaged in the process this far. In particular, we want to thank the following consultants who worked in the co-design of the EPAs with both Dr Josephine Boland and Dr Eilis Condon: Dr Kay O'Brien, Dr Patricija Ecimovic, Dr Rebecca Fanning, Dr David Moore, Dr Kathryn Byrne, Dr Criona Walshe, Dr Ron Charles and Dr Karthikeyan Srinivasan

A particular thanks to Ms Lauren Donohoe for her excellent administrative support and to both Lauren and Ms Máirín Murray of Digital Doodle, for their innovative communication strategy, a sample of which is included in the infographics piece left. I wish to acknowledge the dedicated and untiring work undertaken by Dr Josephine Boland in bringing together all the strands in developing EPAs over the last three years into one document that will function as a key resource for all involved in Competency Based Medical Education in the College.

**Dr Camillus Power,**

*Interim Director of Postgraduate Training*

# EXAMINATIONS' COMMITTEE REPORT



Dr Anne Hennessy, Vice-President CAI,  
Chair of Examinations Committee

2017 was once again a busy year in the Examinations Office with an expanding overseas portfolio in addition to our examination commitments in Dublin. The committee met formally 4 times during 2017 - January, April, September and December. In addition, committee members and examiners undertook a huge amount of work in their own time – writing questions, correcting scripts, generating reports and developing protocols.

## Membership Examinations

**Chair** Dr D. McCoy

## Lead Examiners

**MCQ** Dr L. Kevin

**SBA** Dr M. Mugawar;

Dr G. Morrison

**OSCE** Dr P. Connolly

**SOE** Dr D. Honan (Physiology);

Dr C. Murphy

(Pharmacology)

## MCQ

There were 3 sittings of the MCQ component of the examination during the year. This part of the examination tests candidates' knowledge in Physiology, Pharmacology and Clinical Measurement. There are 3 x 60 minute MTF papers and an SBA paper. The examination ran concurrently in 6 centres in Dublin, Malaysia, Oman, Jordan, Egypt and Bahrain. A total of 230 candidates sat the MCQ paper in 2017 of whom 121 were successful.

MCQ	Total Candidates	Number Successful	Pass Rate %
January	74	39	52.7%
June	77	32	42%
September	79	50	63.3%

Number of Candidates in Attendance				Number of Successful Candidates		
Location	January	June	September	January	June	September
Dublin	23	42	28	10	18	19
Malaysia	35	20	36	20	11	23
Oman	10	5	7	5	2	5
Jordan	0	0	1	0	0	0
Egypt	3	4	0	1	1	0
Bahrain	3	6	7	3	0	3

## OSCE/SOE

There were two sittings of the OSCE/SOE part of the examination in Dublin. Seventy-seven of a total of 122 candidates taking this part of the examination were successful. There was no exchange examiner at the spring examination. Dr Chris Leng was the Exchange Examiner from the Royal College of Anaesthetists at the autumn sitting.

## MCAI Overseas - Oman and Malaysia

In February a delegation from the College comprising three examiners, the President and the Examinations Manager travelled to Muscat, Oman to examine the OSCE and SOE components of the MCAI. We were joined by a number of local examiners. Eighteen candidates were examined of whom nine were successful. An Examiner Training Day was held prior to the start

SOE / OSCE	Total Candidates	Number Successful	Pass Rate %
Spring	62	34	55%
Autumn	60	43	72%

of the examination. The feedback from local examiners was excellent.

In November a team of examiners travelled to Perdana University, Kuala Lumpur, Malaysia. Six of 22 candidates were successful. Dr D. McCoy and Dr C. Burlacu also ran a very successful Train the Trainers day.

### Fellowship Examination

**Chairs** Dr M. Griffin;  
Dr G. Iohom

### Lead Examiners

**MCQ** Dr M. Griffin  
**SBA** Dr F. Conway;  
Dr G. Morrison  
**SAQ** Dr A. Hayes  
**SOE I** Dr R. Whitty  
**SOE II** Dr M. Scully  
**Clinical SOE** Dr G. Iohom,  
Dr M. Griffin

### Spring examination:

A total of 91 candidates sat the final fellowship written examination paper in February. This was held in Dublin, Malaysia and Bahrain. It comprised of a 90-minute MTF paper (40 questions, 200 responses), a 60-minute Single Best Answer (SBA) paper (20 questions) and a 3-hour Short Answer Question (SAQ) paper. Thirty-nine candidates were successful. Of the 54 candidates who presented for the SOEs in Dublin, 37 were successful. There was no exchange examiner at the spring iteration of the final examination.

### Autumn / winter examination:

A total of 106 candidates sat the final fellowship written examination paper in September. This also comprised of a 90-minute MTF paper (40 questions, 200 responses), a 60-minute Single Best Answer (SBA) paper (20 questions) and a 3-hour Short

Spring	Total Candidates	Number Successful
Dublin	58	29
Malaysia	6	1
Bahrain	27	9

Spring	Total Candidates	Number Successful	Pass Rate %
February MCQ/SAQ	91	39	43%
April SOE	54	37	68.5%

Answer Question (10 SAQs) paper. Fifty-eight candidates were successful. Sixty-four candidates were examined in the SOEs, 44 were successful. There was no exchange examiner.

### Fellowship of the Joint Faculty of Intensive Care Medicine 2017

Eight of ten candidates were successful.

### Diploma in Pain Management 2017

Seven of 13 candidates were successful.

### Fellowship of the Faculty of Pain Medicine CAI 2017

Three of four candidates were successful.

### Medal Winners

**MCAI** Dr C. Lyons;  
Dr S. Murphy  
**FCAI** Dr P. Fennessy;  
Dr N. Barnwell  
**FJFICMI** No winner  
**FPPMCAI** No winner

### New Developments

The committee was delighted to welcome two new members during the year – Prof R. Arnett from RCSI who has agreed to act as an advisor on quality assurance matters and Dr G. Morrison who, with a diploma in medical education, provides advice and assistance on question writing and makes a significant contribution to the analysis of each component of the MCAI and FCAI as they are taken by candidates.

Autumn	Total Candidates	Number Successful
Dublin	73	43
Malaysia	6	3
Bahrain	27	12

Autumn	Total Candidates	Number Successful	Pass Rate %
September MCQ/SAQ	106	58	54.7%
December SOE	64	44	69%

Work is ongoing, as part of the overall College strategy, to improve our IT systems in order to enhance the delivery of our examinations.

Some changes to the examination question style and marking are planned for 2018. In the Fellowship Examination Short Answer Question (SAQ) paper, each question will be broken down into three or four components and each component will be scored rather than giving an overall mark for each question. The marks allowed for each component will be detailed on the examination paper and it is hoped that this will assist candidates with their time management. Over the course of 2018 Multiple True False (MTF) questions will be phased out. There will be a concurrent increase in Single Best Answer questions.

In the Membership Examination the number of MTF questions will remain at 90. The number of SBAs will increase over the course of the year to 50.

New equipment was successfully piloted for the Critical Incident and Simulator stations for the Spring OSCE. This has now become an integral part of the OSCE and is used in all iterations of the MCAI OSCE examination.

Towards the end of 2017 it was agreed that College trainees with 12 months prior experience in Irish Training Hospitals can apply to sit Fellowship Examination in year three.

In 2018 the College will be looking at further expansion of the overseas examinations to include China.

### Examiner Recruitment and Education

We have been fortunate in that we have continued to recruit new examiners throughout the year. All new examiners are required to observe each examination and undergo examiner training prior to commencing formally as a College examiner.

In September, 30 examiners attended

the 2017 Examiner Training Day in the College, which was very well received by the examiners. Drs. McCoy, Griffin and Hennessy spoke about the structure of the MCAI and FCAI examinations and there were talks from Prof. R. Arnett, Dr H. McKeague and Dr G. Morrison on the principles of assessment, question writing and standard setting.

### Thanks

The workload for both examiners and the examinations office is increasing as we continue to develop our international profile and improve our standard setting procedures and general examination processes.

I would like to extend my thanks to the Vice Chair of the Committee Dr Brian O'Brien, the chairs of each examination and to all examiners for their hard work, loyalty and commitment to the examination process. I would also like to thank the lead examiners and standard setting panel members for all the extra work they undertake.

I wish to acknowledge all members of the Examinations Committee and to thank them for their advice and support throughout the year.

Finally I would like to thank the Examinations Department Team – Mark O'Rourke, Ann-Marie Harte and Eoin Lumsden led by Ms Ruth Flaherty. The smooth running and success of each College examination is hugely dependent on the hard work, forward planning and dedication and support of Ruth and her team and I am very grateful to them all.

### Dr Anne Hennessy

*Vice-President CAI*

*Chair, Examinations Committee*

## *Successful Candidates MCAI 2017*

Mohamed Abdelghany

Ameerah Abdul Razak

Aasia Afzal

Rayeesul Ahamed

Wael Alhalabi

Abeer Ali Ali Ismaeel

Karam Alkhateeb

Dhari Alrashed

Abdul Rasheed Ambalathveetil  
Pattath

Muhammad Athar

Mehr Ali Awan

Ross Bowe

Padraig Calpin

Una Casey

Subhash Chander

Nisha Chaudhary

Kean Seng Cheah

Robyn Concannon

Patrick Conway

Danielle Courtney

Barbara Cusack

Rachael Cusack

Ahmed Dagez

Xenia David

Alison Deasy

Ayman Edarous

Abdou Eid

Eihab Elshabrawy

Mary Finnan

Kate Fitzpatrick

Mirela Fratita

Muhammad Ghafoor

Conor Gormley

Patrick Griffin

Jamal Hafeez

Amad Hania

Colleen Harnett

Muhammad Hassan

Noelle Healy

Rachel Henke De Bastidas

Alan Horan

Samahir Hussein

Mohamed Issam Eldin Ali

Chiun Chen Jee

John Jiju

Gerard Kavanagh

Damian Kerrigan

Mahendar Kumar

Daniel Lehané

Meng Huey Lim

Rory Linehan

Craig Lyons

Tai Jiun Ma

Cathal Mac Donncha

Claire MacSweeney

Eveline Matthews



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<u>Mohammad Fardeen Maudarbaccus</u>	<u>Varsha Rajesh Rai</u>
<u>Margaret McLoughlin</u>	<u>Antony Ratnasingham</u>
<u>András Mikor</u>	<u>Kiran Reddy</u>
<u>Waqas Idrees Minhas</u>	<u>Rana Shoaib Sadiq</u>
<u>Arig Mohamed</u>	<u>Amina Sajid</u>
<u>Ahmed Abdelmuty Mohamed</u>	<u>Ali Reza Sayeed Mahmud</u>
<u>Amr Mohammed</u>	<u>Chenal Shah</u>
<u>Nur Hafizah Mohd Noor</u>	<u>Zaeem Siddique</u>
<u>Chuang Shin Mok</u>	<u>Kashif Siddique</u>
<u>Stephen Murphy</u>	<u>Richard Skelly</u>
<u>Husam MUSA</u>	<u>Caroline Smyth</u>
<u>Fu Yew NG</u>	<u>Corina Gabriela Soare</u>
<u>Dermot Nolan</u>	<u>Komella Anne Sooria Prakasam</u>
<u>Eoin Ó Rathallaigh</u>	<u>Paul Stewart</u>
<u>John O'Connell</u>	<u>Shaista Sulaeman</u>
<u>Liam O'Driscoll</u>	<u>Debbie White</u>
<u>Irena Popinceanu</u>	<u>Juan Yong Wong</u>
<u>Naomi Quigley</u>	<u>Yosef Awad Atallah Yosef</u>

## *Successful Candidates FCAI 2017*

<u>Ahmed Abbas Elsaid Abbas</u>	<u>Craig Delavari</u>	<u>Darshana Maheshwari</u>
<u>Ahmed Abdelaal</u>	<u>Marton Deli</u>	<u>Orlaith McMahon</u>
<u>Ahmed Abdelaatti</u>	<u>David Devlin</u>	<u>John McNamara</u>
<u>Richa Agarwal</u>	<u>Amy Donnelly</u>	<u>Abdul Rahim Memon</u>
<u>Mushtaq Ahmad</u>	<u>Kevin Doody</u>	<u>Sandeep Miglani</u>
<u>Mohamed Hussein Ahmed</u>	<u>Mohammed Doula</u>	<u>Ankita Miglani</u>
<u>Olawale Ajetunmobi</u>	<u>Mahmoud Elebiary</u>	<u>Khaled Mohsen</u>
<u>Walid Saad Alhabashy</u>	<u>Ahmed Elwakil</u>	<u>Osmond Morris</u>
<u>Zia Ali</u>	<u>Paul Fennessy</u>	<u>Maeve Muldowney</u>
<u>Ahmed Ali</u>	<u>Ruth Fenton</u>	<u>Cormac Mullins</u>
<u>Ahmed Ali</u>	<u>Darragh Gogarty</u>	<u>Brian Murphy</u>
<u>Omnia Askar</u>	<u>Greta Gormley</u>	<u>Satishkar Narayanaswamy</u>
<u>Muhammad Zohaib Aslam</u>	<u>Wael Hassan</u>	<u>Tyng Yan Ng</u>
<u>Niamh Barnwell</u>	<u>Rania Haydar</u>	<u>Murugananth Nithiyananthan</u>
<u>Damian Barry</u>	<u>Muhammad Ikram</u>	<u>Aogan O Muircheartaigh</u>
<u>Ahmad Mohammad Ben Tareef</u>	<u>Sobia Jahan</u>	<u>Patrick O'Connor</u>
<u>Manoj Bhavaraju</u>	<u>Muhammad Jamill</u>	<u>Kate O'Donnell</u>
<u>Claire Broe</u>	<u>Louise Judge</u>	<u>Ahmed Abdelhamid Omran</u>
<u>Irmina Bukowska</u>	<u>Muhammad Sajid Kamran</u>	<u>Abdelrahman</u>
<u>Christoleenan Christudas Leela</u>	<u>Rosemarie Kearsley</u>	<u>Mark Owens</u>
<u>Eamonn Coleman</u>	<u>Feby Korandiarkunnel Paul</u>	<u>Chandar Parkash</u>
<u>Moninne Creaney</u>	<u>Kirk Levins</u>	<u>Vijai Paulsen Pauliah</u>
<u>Niall Cribben</u>	<u>Adam Livingston</u>	<u>Manoj Prappanadan</u>
<u>Ann-Marie Crowe</u>	<u>Hina Lodhi</u>	<u>Tarique Aziz Qureshi</u>
<u>Paudie Delaney</u>	<u>Tai Jiun Ma</u>	<u>Fadi Mohammad Qutishat</u>

<u>Binu Ravindran</u>	<u>Ann-Marie Crowe</u>	<u>Abdul Rahim Memon</u>
<u>Mahfouz Sharapi</u>	<u>Paudie Delaney</u>	<u>Sandeep Miglani</u>
<u>Vittaldas Shetty</u>	<u>Craig Delavari</u>	<u>Ankita Miglani</u>
<u>Shaista Sulaeman</u>	<u>Marton Deli</u>	<u>Khaled Mohsen</u>
<u>Vimalraj Sundaram</u>	<u>David Devlin</u>	<u>Osmond Morris</u>
<u>Muhammad Shafique Tahir</u>	<u>Amy Donnelly</u>	<u>Maeve Muldowney</u>
<u>Kah Heng Tan</u>	<u>Kevin Doody</u>	<u>Cormac Mullins</u>
<u>Ahmed Abbas Elsaid Abbas</u>	<u>Mohammed Doula</u>	<u>Brian Murphy</u>
<u>Ahmed Abdelaal</u>	<u>Mahmoud Elebiary</u>	<u>Satishkar Narayanaswamy</u>
<u>Ahmed Abdelaatti</u>	<u>Ahmed Elwakil</u>	<u>Tyng Yan Ng</u>
<u>Richa Agarwal</u>	<u>Paul Fennessy</u>	<u>Muruganath Nithiyananthan</u>
<u>Mushtaq Ahmad</u>	<u>Ruth Fenton</u>	<u>Aogan O Muircheartaigh</u>
<u>Mohamed Mustafa Hussein Ahmed</u>	<u>Darragh Gogarty</u>	<u>Patrick O'Connor</u>
<u>Olawale Ajetunmbi</u>	<u>Greta Gormley</u>	<u>Kate O'Donnell</u>
<u>Walid Saad Alhabashy</u>	<u>Wael Hassan</u>	<u>Ahmed Abdelhamid Omran Abdelrahman</u>
<u>Zia Ali</u>	<u>Rania Haydar</u>	<u>Mark Owens</u>
<u>Ahmed Ali</u>	<u>Muhammad Ikram</u>	<u>Chandar Parkash</u>
<u>Ahmed Ali</u>	<u>Sobia Jahan</u>	<u>Vijai Paulsen Pauliah</u>
<u>Omnia Askar</u>	<u>Muhammad Jamill</u>	<u>Manoj Prappanadan</u>
<u>Muhammad Zohaib Aslam</u>	<u>Louise Judge</u>	<u>Tarique Aziz Qureshi</u>
<u>Niamh Barnwell</u>	<u>Muhammad Sajid Kamran</u>	<u>Fadi Mohammad Qutishat</u>
<u>Damian Barry</u>	<u>Rosemarie Kearsley</u>	<u>Binu Ravindran</u>
<u>Ahmad Mohammad Ben Tareef</u>	<u>Feby Korandiarkunnel Paul</u>	<u>Mahfouz Sharapi</u>
<u>Manoj Bhavaraju</u>	<u>Kirk Levins</u>	<u>Vittaldas Shetty</u>
<u>Claire Broe</u>	<u>Adam Livingston</u>	<u>Shaista Sulaeman</u>
<u>Irminka Bukowska</u>	<u>Hina Lodhi</u>	<u>Vimalraj Sundaram</u>
<u>Christoleenan Christudas Leela</u>	<u>Tai Jiun Ma</u>	<u>Muhammad Shafique Tahir</u>
<u>Eamonn Coleman</u>	<u>Darshana Maheshwari</u>	<u>Kah Heng Tan</u>
<u>Moninne Creaney</u>	<u>Orlaith McMahon</u>	
<u>Niall Cribben</u>	<u>John McNamara</u>	



# CEPD-CONGRESS COMMITTEE

Prof Donal Buggy,  
Chair of the CEPD-Congress Committee

Formerly the Education Committee, this committee's activities include organising the Annual Congress and regular CEPD activities and was re-titled to more accurately reflect its work.

The Annual Congress 2017 was held at UCD's O'Reilly Hall and adjacent O'Brien Science Building, it included a number of high-profile international speakers, in addition to harnessing the wealth of local talent within our own community of colleagues. The meeting covered a broad range of topics including sessions devoted to obstetric anaesthesia, patient safety, anaesthesia and Alzheimer's disease, neuro-critical care and perioperative management of lung diseases. The Irish Society of Regional Anaesthesia (ISRA) held their Advanced Ultrasound in Regional Anaesthesia Workshop. We also held a Difficult Airways Workshop for the first time. Dan Sessler, Cleveland Clinic, and Hugh Hemmings, the first non-British Editor-in-Chief of BJA, were the keynote speakers among other international guests.

The Dr Mary Lehan Medal Competition was held during the Annual Congress on the 4th and 5th of May and was awarded to Dr Ciara Hayden for her E-Poster presentation entitled '*Perioperative glycaemic control and its association with post-operative infection in patients undergoing cardiac surgery on cardiopulmonary-bypass (CPB)*'.

The Delaney Medal Competition 2017 which took place during the Annual Congress was won by Dr Thomas for his presentation entitled '*Do supraglottic airways increase the accuracy of cricothyroid membrane identification in female patients? - a prospective observational study*'.

The Abbvie Scholarship 2017 competition was also held during the Annual Congress, the €10,000 scholarship was awarded Dr Stephen Duff. The scholarship supports original research by an Irish anaesthetist provided by Abbvie.

A Core Topics Day was held in September, where we continued our live web streaming of these lectures to multiple hospital sites throughout the country.

The Inaugural National Patient Safety Meeting has held on November 17. The KP Moore Competition was held in conjunction with this, and candidates were invited to submit abstracts on the topic of Patient Safety.

The KP Moore Medal was awarded to Dr Martina Melvin for her presentation entitled '*Neuro-T, a Smartphone App to aid in the safe transfer of the Emergency Neurosurgical Patient to Beaumont Hospital*'. The best E-Poster prize was awarded to Dr Timothy Moore for his presentation entitled '*Lipid Rescue Kit*'.

The Winter College Lecture was also held during the Inaugural National Patient Safety Meeting and was presented by Dr Jannicke Mellin-Olsen President Elect, World Federation of Societies of Anesthesiologists. The title of the lecture was '*Helsinki Declaration on Patient Safety in Anaesthesiology - What is next in Europe and the World?*'.

The Gilmartin Lecture was delivered by Dr Barbara Dawson is Director of Dublin City Gallery The Hugh Lane, the lecture was entitled '*Who needs art?*'.

The Audit Study Day and presentations event took place on the 9th of March and was chaired by Dr Wouter Jonker. The Audit Prizes went to Dr Cillian Suiter, '*Stop Before You Block Campaign; Compliance Audit*', who won

the Audit Oral Presentation and to Dr Ian Geraghty for his presentation '*ICU Referral Audit in Galway University Hospital*' who won the Audit poster prize.

## Workshops

The Vascular Access Workshop, which is mandatory for our trainees, was held on the 20th of February and was run by Dr Alan McShane. The Echocardiography Workshop was run by Dr Michael Griffin and Dr Kathryn Byrne on the 3rd of March. The Local Anaesthesia for Ophthalmic Surgery Workshop was held on the 10th of October in the Royal Victoria Eye & Ear Hospital, and was coordinated by Dr Muhammad Mukhtar. A Difficult Airways Workshop was held on the 22nd of September and was run by Prof Ellen O'Sullivan and Dr Caitriona Murphy.

The Professionalism in Practice Workshop was held on the 8th of December and run by the module coordinator Dr Barry Lyons. Thank you to all workshop organizers who kindly dedicate their time to ensure the success of these meetings.

As Chairman, I wish to thank all my colleagues who contribute regularly to the committee's activities, including CAT representative Dr David Devlin. The ongoing support of Ms Orla Doran, Administrative Officer and the President, CEO and Council is as always, warmly appreciated.

## Donal Buggy,

Prof Donal Buggy,  
Chair of the CEPD-Congress Committee

# QUALITY & SAFETY ADVISORY COMMITTEE



## The Quality & Safety Advisory (QSA) Committee is a standing committee of college whose overall aims are:

- To promote and maintain a culture of patient safety
- To provide leadership for patient safety and quality of care
- To provide timely information to support patient safety and quality of care.

## Anaesthetic Activity Audit

The Annual National Anaesthetic Activity Audit for the years 2014 and 2015 was published in 2017. This project jointly sponsored by CAI and the National Clinical Programme for Anaesthesia and led by Dr. John Cahill provides key information on anaesthesia activity nationally and will continue to be developed and supported by College.

## Safety Issues and Information

The committee continues to keep members and fellows informed of important safety issues via regular e-newsletters and safety advisory notices. The committee has worked with HSE to ensure implementation of a standardised European cardiac arrest call number (2222) in hospitals throughout the country. The committee continues to work on developing the national safety network – Safe Anaesthesia Network Ireland (SANI).

## NAPSAS 2017

The inaugural National Patient Safety in Anaesthesia Symposium was held in November 2017 in the college in conjunction with the European Board of Anaesthesiology. The event which was fully booked featured experts from Ireland, the UK and Europe who addressed key safety concerns in anaesthesia. The meeting was opened by Dr Kathleen McLennan, Director of the National Patient Safety Office in the Department of Health. The meeting included the Winter College

Lecture which was delivered by Dr Jannicke Melin-Olsen President Elect of the World Federation of Societies of Anaesthesiologists.

The KP Moore medal for the best presentation on a topic related to safety was awarded to Dr. Martina Melvin – Neuro-T, a Smartphone App to aid in the safe transfer of the Emergency Neurosurgical Patient to Beaumont Hospital and Dr Timothy Moore for Best Poster - Lipid Rescue Kit

The Chairman would like to acknowledge the support of the President, Professor Carson and the Council in progressing the Safety & Quality agenda. The Chairman would also like to acknowledge the help and support of the committee members and the College administrative staff.

## Prof Gerry Fitzpatrick

Chair, Quality and Safety Advisory Committee

Prof Gerry Fitzpatrick  
Chair, Quality and Safety  
Advisory Committee

## Quality & Safety Advisory Committee Members:

[Prof Gerry Fitzpatrick](#)

[Prof David Honan](#)

[Dr Jeanne Moriarty](#)

[Dr Brian Kinirons](#)

[Dr Kevin Clarkson](#)

[Dr John O'Dea](#)

[Dr Kevin Bailey](#)

[Dr Terence Montague](#)

[Dr Jeremy Smith](#)

[Council & Executive](#)

## Committee Meetings 2017:

[19th January](#)

[31st May](#)

[20th September](#)

[1st November](#)



Prof David Honan,  
Chair of PCS  
Committee

# PROFESSIONAL COMPETENCE SCHEME (PCS) COMMITTEE

It is my pleasure to provide another report as Chair of the Professional Competency Scheme (PCS) Committee. Much has changed on the PCS landscape since last year. In particular, several engagements have taken place, both with the Forum of Postgraduate Training Bodies and with the Irish Medical Council (IMC). We are currently engaged in a new process with IMC to optimise our delivery of PCS services, in accordance with our agreement with them originally arranged under the Medical Practitioners Act 2007.

We continue to audit three per cent of our PCS Registrants randomly, as set out in the IMC Agreement. This process involves our IT Consultants, who provide us with a randomly-selected list of names from amongst those registered. Doctors whose names appear on this list are then contacted by College, and requested to submit evidence of CME activity. The College reviews these submissions and the doctors involved are contacted to confirm compliance. In the event that an individual is not compliant, there is a process whereby IMC are statutorily notified, and they then pursue the matter, in their role as regulator of medical registration.

Just to remind colleagues once again, CAI has decided in the past that Internal CME points may be certified by letter from Head of Department, but external CME points still require the production of a designated CME Certificate, as issued by the appropriate

meeting/course organisers. We would once again urge colleagues to ensure that they remain compliant with PCS requirements, as in the past a small number of anaesthetists have been investigated by IMC for failing to engage with the process. When this happens, there is unfortunately nothing that CAI can do to assist these doctors.

This has been another busy year for CME activity, with high numbers of CME/CPD points being approved by CAI for both external courses and College courses. CAI has given a commitment to IMC to continue to make CME opportunities available to our registrants over the PCS year. We also continue to allow application of approved overseas CME credits to CAI PCS activity.

As changes to PCS evolve over the coming year, CAI will advise registrants of these periodically. In the meantime, any colleagues who require further information about the workings of the existing PCS arrangements may contact the CAI PCS Administrator, Ms Sinéad Byrne on [sbyrne@coa.ie](mailto:sbyrne@coa.ie) or under the PCS section on the CAI website.

**Prof David Honan**  
*Chair of PCS Committee*



# CREDENTIALS' COMMITTEE



## Credentials' Committee Members:

Dr John O'Dea (Chairman),  
Dr Kevin Clarkson, Dr Deirdre Mc Coy,  
Dr Rory Dwyer, Dr Mohammed Faheem,  
Dr Brian O'Brien, Dr Camillus Power

This is my third report as chair of the Credentials' Committee, which met on two occasions during the year.

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 usually supports the College recommendation but retains discretion in the final decision. This process allows doctors who have not taken part in the College of Anaesthesia National Training Programme to demonstrate equivalence of training and experience. Doctors who have recognised Specialist Training Recognition within the EU are entitled to apply directly to the Irish Medical Council for inclusion in the Irish Specialist register.

The Irish Medical Council also accepts applications from doctors who qualified from recognised Medical Schools outside the EU. These applications are forwarded to the relevant recognised Training Body for assessment and require a recommendation in a specified time from date of receipt. 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. The application form includes substantial and verified evidence of training including rosters, logbooks with a breakdown of caseload and structured references requested by the Committee. There is a Service Level Agreement between the Medical Council and the Postgraduate Training Body, which sets out the timelines within which applications must be reviewed and determined. The fee for such applications to the Irish Medical Council is €4,000.

Assessors undertake the assessment of the applications on behalf of the CAI Credentials Committee. In 2017, the Medical Council referred 11 new applicants to the Committee. These completed application forms were forwarded to the College of Anaesthetists of Ireland for assessment and recommendation. Following assessment, the Credentials' Committee approved one applicant and following Council approval this was communicated to the Medical Council. The remaining ten applicants were recommended to undertake further training or provide additional evidence and two of these were subsequently approved. Two applications that had been originally submitted prior to 2017 were re-submitted during the year and were recommended for inclusion in the Specialist Register.

As Chair of the Credentials' Committee, I convened a symposium at the Congress in 2017 in order to facilitate doctors practising in Anaesthesia in Ireland who might be considering an application to the Medical Council for inclusion on the Specialist Register for Anaesthesia. Approximately 40 doctors attended. The session provided an opportunity for an in-depth discussion on issues facing doctors seeking registration and some important guidance was provided. We intend to run a similar symposium at the 2018 Congress at 12.45 on Friday, 25th May.

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 appeals process for doctors whose applications are refused. The Committee also assists College Council with applications for Ad Eundem fellowship of the College.

I would like to thank Ann Kilemade on behalf of the Credentials' Committee at the College of Anaesthetists for her wonderful support and help.

*For further information on how to apply and the detail involved please contact the Medical Council for an application – or refer to <http://www.medicalcouncil.ie/Registration-Applications/>*

**Dr John O'Dea**

*Chairman, Credentials' Committee*

Dr John O'Dea,  
Chairman of the  
Credentials'  
Committee



Dr Miriam Langdon,  
Chair of IT &  
Communications'  
Committee

# INFORMATION TECHNOLOGY AND COMMUNICATIONS' COMMITTEE

This year the College has invested in a complete upgrade of IT systems, redeveloping the website, and expanding national and global access to educational meetings.

## CAI Website

Redevelopment of the website has been a major project encompassing a wide range of functions; it informs trainees and Fellows, manages PCS and logbook data and administers for the exams and training offices. Each area will comply with GDPR regulation and the website content can be updated by administrators within the College. For continuity, the new system is integrated with Filemaker so all integrated features from the old system are available to it. The Safety button has been an important step forward in disseminating updates on patient safety and Prof Gerry Fitzpatrick has championed this advance unfailingly. The new website designed by JET Design will be ready to go live in the second quarter of this year following testing and feedback. It is modernised, practical and future-proofed and we think it will make a real contribution to your professional development and governance.

## CAI App and Educational Events

Each year so many delegates have planned their conference schedules using the Congress app. This year the College App expands that opportunity to engage with Fellows about all educational events and meetings. The

College App will house the Congress app, the EPA app and information on College events. Inclusion of Fellows practicing outside of Dublin and overseas Fellows continues with video links to live college events.

## College Hardware Support Contract and College IT Systems

Rationalisation and cost effectiveness are under review over this year with a tendering process underway to ensure value for money for IT support. In June 2018 the process of looking at systems for all departments to replace Filemaker will commence and is expected to be a two to three year project. The boardroom audiovisual systems are currently being updated for improved quality and accessibility. The President, Kevin Carson; the COO, Margaret Jenkinson and the CEO, Martin McCormack have driven these projects to completion with vision and determination. I would also thank the College Council members and the CAI departments for their support and work towards the complete upgrade of the College IT projects.

**Dr Miriam Langdon,**  
*Chair of IT & Communications'  
Committee*

# COMMITTEE OF ANAESTHESIA TRAINEES (CAT)



Dr David Devlin,  
Chair of Anaesthesia  
Trainees Committee

The past year has been a period of growth and development for both the Committee of Anaesthesia Trainees and the College in general. I must commend the College with regard to its ardent engagement of trainees and our issues at every level of the organisation. The support and engagement with trainees on a wide variety of issues is of key importance to trainees and the College alike. The College continues to pave the way for other Post-Graduate Training Bodies in the way in which it works with and for trainees.

## CAT Calendar

We continued to run and grow our repertoire of events over the past year; making contributions to the Anaesthetics Induction Day for new trainees, helping to give them an introduction to the training scheme; we also attended the National HSE Careers Day (special thanks to Drs Owens, Purcell and Singleton), extolling the benefits of a career in Anaesthesia, Intensive Care and Pain to medical students who attended from around the country as well as to the College Open Day, held annually in November.

Again, this year, the committee has participated in the organisation of an Interview Skills workshop, which continues to be one of our most popular events, and the development of a symposium session at the College's Annual Scientific Meeting. We intend to run our now famous Fun Run event again this year – last year this event,

along with the cycle raised €2,800 for charity.

I must take this opportunity to sincerely thank Ms Orla Doran of the College; I have been plaguing her for two-years now on the CAT, and she has always been so helpful, so well organised and so approachable – none of the events that we organise or participate in would be possible without her continued diligence and hard work.

## Communication with Trainees

The Lead Anaesthesia Trainee (LAT) network is now well established as a port of call for direct communication from teaching departments around the country to the CAT and the College in general. I am very grateful to the hard work that Dr Moran put into keeping the LAT network alive and active over the past year.

Special mention must go to Dr Vingares, who edited the CAT Newsletter again this year. We published a quarterly bulletin on trainee issues, such as fellowship opportunities, case reports, and updates from the College. This year we updated the distribution methods of the newsletter to increase its circulation and impact.

## Trainee Issues

The College actively engaged with the CAT in relation to changes to the way in which rotations were distributed and developed and accepted points of feedback throughout the process. We welcome the new approach and transparency to the division of placements

and are very grateful to Ms Ann Kilmade and Dr Power of the Training Department for the opportunity to engage on this issue and the hours of graft that they have put in to this project, assessing all the permutations and combinations of placements, making them as fair and equitable as possible.

We also undertook work with the Training Committee in relation to the formalisation of the position and application procedure for Special Interest Years and Fellowships in Irish hospitals. This has streamlined the application process and will mean that rotations are known further ahead of time than previously.

An update to the logbook system is afoot in the College, with contributions to this valuable trainee portfolio system being made on behalf of trainees through the Committee by Dr Vingares.

One of the key issues affecting trainees today is fatigue and burnout. I must commend Dr Kelleher for his active work and engagement as a co-opted member, representing us at the Irish Standing Committee and Group of Anaesthesia Trainees in the AAGBI. He has undertaken work on fatigue in the Irish context and highlighted the issue as one of the utmost import. As a result of this work, the College has endorsed the Association's guidelines and policy in relation to fatigue amongst anaesthetists.

Following the Bawa-Garba case in the United Kingdom, the College has made moves to address the issues

## COMMITTEE OF ANAESTHESIA TRAINEES (CAT)

### CAT Members

[Dr David Devlin, Chair](#)

[Dr Gabriel Beecham, Vice-Chair](#)

[Dr Sinead Farrell, Treasurer](#)

[Dr Georgina Duignan](#)

[Dr Sinead Egan](#)

[Dr Mark Owens](#)

[Dr Joao Vingares](#)

[Dr Martina Melvin](#)

[Dr Peter Moran](#)

[Dr Andrew Purcell](#)

[Dr Eoin Kelleher](#)

[Dr Barry Singleton](#)

[Dr Camilius Power](#)

[Ms Ann Kilemade](#)

surrounding supportive training and reflective practice. A Hot Topics evening is planned for late April; and it is hoped that a position statement from the College will be forthcoming from this meeting. I must thank Mr Martin McCormack, the College's CEO for his work in this matter. It remains to be seen how the Bawa-Garba case will impact on Irish clinical and educational practice, and we will continue to represent trainees' interests at College and national level in this issue going forward.

Mr McCormack has also raised several trainee issues with the HSE directly, such as P45 delays, centralised payroll and course refunds; and we are grateful for his efforts on these issues.

The Entrustable Professional Activities project continued to grow and develop this year. The College aims to move to a more robust system of low-stakes workplace-based assessments over the coming years. We have been actively involved in the project, providing feedback, and questioning logic as

well as participating as facilitators at the Tutor Training Day. I would like to thank Drs Josephine Boland, Eilis Condon and Camilius Power for their continued hard work on the project. It represents an important step forward in the way in which we, as trainees, will develop our skills portfolio in the years ahead.

This year the Specialist Anaesthesia Trainee Audit and Research Network (SATARN) succeeded from the auspices of CAT and is now headed by Dr Pierce Geoghegan. Its continued development represents an important step for trainee research opportunities in Ireland, and we wish them every success with their on-going projects.

Dr Sinead Farrell has undertaken work in relation to the improvement of patient safety during transport of the critically ill patient, having attended courses and conducted surveys of trainees in relation to their experiences. I am hopeful that her project will bear fruit over the coming year.

### Conclusion

As I alluded to previously, much of the work, activities and projects undertaken by the CAT would not be possible without the continued and on-going support from the staff at the college, and I must thank Lauren Donohue for all of her efforts over the last year.

I would also like to thank Prof Kevin Carson, Mr Martin McCormack, Dr Brian Kinirons, Dr Camilius Power and Dr Anne Hennessy and the other members of Council for all of their support, tips, winks and nods over the last year; steering me in the right direction (from time to time!). I am grateful to have had the opportunity to work with you all.

As I step down from my role as chair of CAT, I would like to thank Ms Margaret Jenkinson for keeping us out of the red. To the chairs of the other College Committees, almost too numerous to name, I am grateful for the opportunities you have afforded CAT to participate in your respective projects and decision-making processes.

I wish the incoming committee, of which there will be seven new members following election, the very best of luck with their endeavours and projects over the coming year.

**Dr David Devlin,**

*Chair of Anaesthesia Trainees  
Committee*

The College actively engaged with the CAT in relation to changes to the way in which rotations were distributed and developed and accepted points of feedback throughout the process. We welcome the new approach and transparency to the division of placements



Dr Jeanne Moriarty,  
FFARCSI, FJICMI,  
FRCA, FAIMM (Hon),  
Dean JFICMI

# JOINT FACULTY OF INTENSIVE CARE MEDICINE OF IRELAND



The Board met on four occasions,  
February, June, September and  
November 2017

## Honorary Officers

- [Dr Jeanne Moriarty Dean](#)
- [Dr John Bates Vice Dean](#)
- [Dr Vida Hamilton Honorary Secretary](#)
- [Dr Maria Donnelly Honorary Treasurer](#)
- [Dr Andrew Westbrook Chair Examinations,  
Representative to EDIC Board.](#)
- [Dr Brian Marsh Chair Training](#)
- [Dr Michael Scully Accreditation](#)
- [Dr Donal Ryan CPD](#)
- [Dr James O'Rourke Webmaster](#)
- [Dr Martina Healy Paediatric Intensive Care](#)
- [Mr Lars Nolke RCSI](#)
- [Dr Ted Keelan RCPI](#)
- [Dr David Hickey Lay Member](#)
- [Dr Sinead Egan Trainee representative](#)
- [Dr Lindi Synman Trainee representative](#)
- [Dr Kevin Carson President CAI](#)
- [Dr Catherine Motherway President ICSI](#)
- [Dr Michael Power NCCP](#)
- [Dr Dermot Phelan, Co-opted](#)

## In attendance

- [Mr Martin McCormack CEO CAI](#)
- [Ms Ann Kilimade CAI](#)
- [Ms Rebeca Williams](#)

## Outgoing Council Members:

- [Dr John Bates](#)
- [Dr Maria Donnelly](#)

*Mr David Hickey joined the Board in  
2017 as our first lay member.*

## Establishment of the Specialist Register in Intensive Care Medicine.

Discussions continued through 2016 with the IMC culminating in submission of its specialty training programme for accreditation to the IMC in September 2016. In September 2016, JFICMI met with Professor Eilis McGovern of the National Doctors' Training Office, who agreed that the HSE would fund 14 trainees in Intensive Care Medicine over a two year programme from July 2017. The JFICMI Accreditation team met with the IMC Accreditors in January 2017. Following this meeting there was further engagement with the IMC through 2017 with submission of a revised application, addressing the comments of the IMC team. At the time of writing this report the process is close to being finalised

Opening the Specialist Register in Intensive Care Medicine is dependent on accreditation of the training programme as the training programme is the benchmark against which a Level 5 assessment will be made for applicants to the Specialist Register in Intensive Care Medicine. Graduating trainees will be entered onto the Specialist Register through the completion of Specialist Training. All other applicants will have to undergo Level 5 assessment.

The College of Anaesthetists has agreed to be the Training body within which the Faculty exists for governance purposes.

## Tenure of the Dean and Board Members

The Board agreed to extend the tenure of the Dean to three years and the Board members to five years, renewable by election for a further five years. The changes have been incorporated into the Memorandum and Articles of Association.

## Examinations

Dr Andrew Westbrook continued as Chair of the Examinations Committee and the JFICMI representative to the EDIC committee. The Fellowship Examination of the JFICMI was held in May 2017. Ten candidates sat the examination of whom eight were successful. The successful candidates listed below will be conferred in May 2018.

## Training

Dr Brian Marsh is Chair of the Training Committee. Drs Brian Marsh and Enda O'Connor undertook a review of the training syllabus and have written a revised curriculum, which formed the major part of the submission to the IMC Accreditation Review team.

## Education

Dr Donal Ryan is convenor of the Refresher Courses. The Faculty is partnering with the ICSI Annual Scientific Meetings.

## Honorary Fellowship

Professor Martin Tobin was conferred with an Honorary Fellowship in June 2017 at the Annual Scientific meeting in Belfast in recognition of his contribution to pulmonary critical care.



### Accreditation

Beaumont Hospital was inspected in 2017. The Board recommended that it be approved for one year's ICM training.

### Website

There was further development of the website with the trainee logbook coming on stream. Dr James O'Rourke has taken on responsibility for managing the website, assisted by Dr Dermot Phelan.

### Finance

Dr Maria Donnelly continues as Honorary Treasurer with her term finishing in 2018. Fees were set at €180 for consultants, €90 for overseas members with Trainees of the CAI, RCPI, RCSI (incl EM) wishing to become a registered trainee of the JFICMI – €100 once off payment.

Members in good standing are entitled to 1 free Refresher course, 10% reduction in meeting fees and free online learning.

JFICMI accounts are audited as part of the CAI financial audit.

### National Critical Care Programme Report to the Board - Dr Michael Power

Dr Michael Power, National Clinical Lead, is a co-opted member of the Board. He has kept JFICMI apprised of HSE developments.

The Medical Advisory Committee to NCCP is chaired by the Dean of JFICMI

### National Office of Clinical Audit (NOCA)

Dr Rory Dwyer chairs the Intensive Care Audit Governance Group in NOCA. The roll out of the national audit of Intensive Care continues. Reporting commenced in 2017.

The Dean represents the JFICMI on the NOCA Governance Committee, the Major Trauma Audit Governance Group, National Audit of Hospital Mortality and the Intensive Care Audit Governance Group.

### Staff

Ms Maria Golden, Senior Administrator for the Board resigned

in January 2017. I would like to acknowledge her contribution to JFICMI during her 9 years in the College. Ms Ann Kilemade and Ms Rebeca Williams provided our administrative support in 2017. The Examinations Office continues to support both the Fellowship examination of the Joint Faculty and the European Diploma in Intensive Care Medicine. On behalf of the Board I would like to thank the staff of the College of Anaesthetists, who support the work of the Faculty.

The Joint Faculty would also like to thank Board Members, Course organisers, faculty and indeed participants for contributing to another vibrant and effective year.

**Dr Jeanne Moriarty, FFARCSI, FIJICMI, FRCA, FAMM (Hon)**  
Dean JFICMI

#### Successful JFICMI Candidates-2016

Immanuel Hennessy	John Fitzgerald
Aoife Quinn	Michelle O'Mahony
Laura Flood	Bill Walsh
Bairbre McNicholas	Aoife Lavelle

#### JFICMI Events

##### Pre-exam courses:

2017:	MMUH 1st March
	St Vincent's University Hospital 2th March
	St James' Hospital 3rd March

##### Critical Care Refresher Courses:

2017:	COA 27th April
	COA 21st September

##### Irish Donor Awareness Programme:

2017:	COA 25th April
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##### Basic Critical Care Echocardiography Course:

2017:	MMUH March 29th - 30th
	MMUH November 16th - 17th

##### Joint ICSI- JFICMI Annual Scientific Meeting

2017:	June 9th - 10th Belfast
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# FACULTY OF PAIN MEDICINE



Professor Connail  
McCrory, Chair  
of Faculty of Pain  
Medicine

The Faculty held four board meetings during the year. The Annual Scientific Meeting was held in the College of Anaesthetists on the 10th February (113 in attendance) and The Royal College of Physicians on 11th February (180 in attendance). Professor Andrew Rice was awarded the Rynd Medal and delivered the Rynd Lecture.

The Clinical Research Medal in Pain Medicine competition took place. Five submissions were shortlisted and Professor Rice was the adjudicator. Dr Jonathon Royds from St. James Hospital was awarded the Clinical Research Medal in Pain Medicine. The conferring ceremony took place in the College of Anaesthetists.

Fourteen candidates had sat the Part 1 FPM exam and seven were successful. Four candidates had sat the Final FPM exam and three were successful.

Dr Hugh Gallagher completed his term of office on the FPM board as ICGP representative and will be replaced by Dr Ide Delargy in 2018. The board expressed thanks to Dr Gallagher for the significant contribution

he made to the board with particular reference to his teaching on the FPM training courses regarding addiction.

The exam revision course was held in the college in May with a demonstration in the TCD Anatomy lab.

The external examiner was Dr Shyam Balasubrahmanian from Birmingham, UK. Dr Shyam Balasubrahmanian delivered a lecture on optimising analgesic selection in the management of chronic pain as part of the Summer Faculty meeting.

Work continues on the IMC submission document. It is hoped to conclude this process in 2018.

The interview for the National Training Scheme in Pain Medicine was held in December in the College. One appointment was made to the SIY programme and three to the Fellowship programme. This interview process was the most competitive yet.

**Professor Connail McCrory**  
*Chair of Faculty of Pain Medicine*



Dr Crina Burlacu,  
Director of CAST  
Programme

# SIMULATION TRAINING (CAST)

## Mandatory simulation courses for SATs and other simulation-based educational events

Three hundred participants took part in 33 simulation courses in 2017 (Table). The vast majority of these courses took place in the College of Anaesthetists Simulation Centre, and were attended predominantly by SATs. We also trained a small number of CPD-SS doctors and International Fellows.

Simulation continued to be a very well received component of several other internal and external educational events such as the Introduction to Anaesthesia Course, Difficult Airway Management Course, Foundation Course for Anaesthesia and Recovery Nurses, Anaesthesia Information Day and Medical Careers Day.

We delivered the annual A-Crisis for Consultants, which was attended by seven consultants. The Train the Trainer Simulation Instructors Course proved to be very popular again, and was attended by a record number of 19 participants belonging to multiple disciplines and specialities.

## MCAI OSCEs

In 2017, at the request of the Examination Chair and Committee, we introduced new screen-based Simulated Monitoring (SM) and Critical Incidents (CI) OSCEs at the MCAI examination. These OSCEs are using state-of-the-art ALSi machines, special scripts and marking sheets, which were designed, piloted and validated by the CAST team

## Awards, Presentations and Publications

At the Education Awards 2017, the submission with the title 'The College of Anaesthetists Simulation Training Programme – Activity and Quality Report 2010 – 2016' was finalist under both Best Student Experience Awards and Best Use of Educational Technology/ICT Initiative of the Year categories. Several scientific abstracts were accepted and presented at international meetings as in the following:

## Society in Europe for Simulation Applied to Medicine (SESAM), 2017.

1. Sim is stressful! What is the incidence of stress experienced in medical simulation training, and does the perceived stress of participants during simulation negatively affect

## COURSE NAME VENUE: CAST CENTRE

COURSE NAME VENUE: CAST CENTRE	NUMBER OF COURSES	NUMBER OF PARTICIPANTS
Anaesthesia Emergencies (AE)	3	29
Anaesthesia Related Rare Emergency Simulation Training (ARREST)	7	62
Paediatric Anaesthesia and Emergencies (PAE)	3	34
Crisis in Obstetrics Anaesthesia Simulation Training (COAST)	4	45
Simulation in Intensive & Critical Care (SICC)	2	30
Multidisciplinary Anaesthesia & Surgery Crisis Operation Training (MASCOT ONE)	4	23
Multidisciplinary Anaesthesia & Surgery Crisis Operation Training (MASCOT TWO)	4	17
A-Crisis	4	41
Clinical Decision Making Paediatrics (CDMP)	2	19
<b>Total</b>	<b>33</b>	<b>300</b>

their learning experience: an evaluation of the literature. Poster Presentation. Elizabeth Coyle, Aine Cafferkey, David Greaney, Crina Burlacu.

2. The Evaluation of a Pilot Simulation-Based Critical Incident Station in a National Postgraduate Anaesthesia Examination. Poster Presentation. Aine Cafferkey, Elizabeth Coyle, David Greaney, Ruth Flaherty, Deirdre McCoy, Anne Hennessy, Crina Burlacu.
3. Simulation as a necessary and suitable vehicle for maintaining confidence in paediatric anaesthesia following paediatric anaesthetic training. Oral Presentation. Greaney D, Cafferkey A, Coyle L, Burlacu C, Bourke M, Harte S. The latter abstract went on to publication in *Advances in Simulation* 2017, 2(Suppl 1): 26.

### European Society of Paediatric and Neonatal Intensive Care (ESPNIC), 2017

1. Confidence following paediatric ICU simulation training in Ireland from 2010-2016, a semi-quantitative retrospective analysis. Poster Presentation. Greaney D, Burlacu C, Harte S.

At the time of writing this report, I am also delighted to report that 'The College of Anaesthetists of Ireland Simulation Training programme: a descriptive report and analysis of course participants' feedback' has been published in the *Irish Journal of Medical Science*. To read the full paper in .pdf format interested readers should go to <http://rdcu.be/JwY5>

### Development and Equipment

In 2017, the CAST programme was successful in securing funding from HSE-NDTP for the purchasing of new high-fidelity simulation equipment. We are delighted to welcome a

three-member wireless SimFAMILY to the College (SimMan 3G, SimMom and SimJunior).

Under the vision and leadership of the President, Prof Kevin Carson, we have embarked on a very exciting project, which involves the expansion of the simulation space. As I write this report, the third floor of the Education and Clinical Science Building is undergoing major renovation. The new simulation area will include two simulation bays (Intensive Care and Obstetric Ward), a control room and an observation/tutorial room. The new area will be equipped with state-of-the-art IT and audio-visual technology. The SimFAMILY is moving in new housing!

### Collaboration

In the second part of 2017, half of the joint CAI-RCSI MASCOT courses were for the first time delivered in the RCSI National Surgical Training Centre. Our CAST Faculty and Nurses were present in York Street to support the delivery of these courses.

On a similar note of collaboration and partnership, Dr Crina Burlacu co-delivered a workshop with the title 'Simulation faculty recruitment, development & retention' at the Irish Association for Simulation Symposium 2017, which took place in ASSERTS UCC. She was invited to chair a session and co-judge posters at the Northern Ireland Human Factors and Simulation Network (NIHFSN) meeting in Belfast.

### Acknowledgments

Firstly, I would like to acknowledge the unconditional and expert support of our Course Leads and Simulation Faculty, which continues to make the CAST programme possible.

Secondly, I would like to extend my special thanks to our nurse assistants Ms Louise Kelly and Ms Deirdre Flynn. At the time of writing this report,

In the second part of 2017, half of the joint CAI-RCSI MASCOT courses were for the first time delivered in the RCSI National Surgical Training Centre. Our CAST Faculty and Nurses were present in York Street to support the delivery of these courses.

Ms Louise Kelly is just after leaving the programme to dedicate more time to her family. Louise has brought a major contribution to the development, implementation and delivery of the CAST programme over a seven-year period. She has supported me personally as well as Course Leads, Faculty, Fellows and nurses with her professionalism, assiduousness and friendship.

A special thank you goes to our Simulation Fellows: Dr David Greaney, Dr Aine Cafferkey, Dr Elizabeth Coyle, Dr Aoife Lavalley, Dr Montasser Ghazy and Dr Ruth Vaughan. I wish to welcome Ms Sinead Byrne who joined our team in 2017 in an administrator role.

Finally, I would like to thank Prof Kevin Carson, Mr Martin McCormack, Ms Margaret Jenkinson and all the other College staff for their continuing collaboration and support.

**Dr Crina Burlacu,**  
*Director of CAST Programme*

# EVENTS & CEREMONIES



## MEMBERSHIP EXAMINATION MEDAL 2016

**LEFT:** Prof Kevin Carson, President, College of Anaesthetists of Ireland and Dr Eoin Kelleher Membership Examination Medal Autumn 2016



## COLLEGE OF ANAESTHETISTS AUDIT PRACTICE EVALUATION STUDY DAY 9TH MARCH

**ABOVE LEFT:** Dr Michael Carey, Dr Murray Connolly, Dr Maeve McAllister **ABOVE RIGHT:** Dr Diana Iosif, Dr Mohamad Faheem, Dr Cillian Suiter, Dr Grace Donnelly, Dr Alan Griffin





#### FPM ASM 2018

**ABOVE:** Dr Romana Durrani, Dr Brendan Conroy, Vice Dean of the Faculty, Dr Aine O'Gara winner of the Faculty of Pain Medicine of Ireland Clinical Research Medal, Prof Connail McCrory, Dean of the Faculty of Pain Medicine CAI, Prof Ralf Baron who delivered the Rynd Lecture, Mr Bernard Kennedy Mundipharma



#### GALA DINNER

**ABOVE:** Mr Martin McAleese, Prof Kevin Carson, Mrs Mary McAleese & Mr Oliver Wang **BELOW:** Dr Tom Ryan, Dr Robert Whitty; Dr Stephanie Ryan & Dr Phillip Hu



**ABOVE:** 2017 CAT Fun Run







**LEFT:** Dr Waleed Omer Ahmed, Dr Anne Hennessy, Vice President, College of Anaesthetists of Ireland, Dr Janette Brohan, Dr Mohamed Omar Beileil who received their Certificate of Specialist Training.

**BELOW:** Prof Kevin Carson, President, College of Anaesthetists of Ireland, Prof David Scott who received Honorary Fellowship of the College.



**ABOVE:** Dr Ravi, Dr Dilip Malkan, Dr Abdul Razaq, Dr John Shaker, Dr Lubna Shaheen.



**ABOVE:** E Poster Presentations at Congress 2017



#### CORE TOPICS DAY

**ABOVE:** Dr Leo Kevin, Dr Josephine Boland, Dr Enda Shanahan, Dr Briony Berry, MSD, Dr Cróna Walshe, Dr Harry Frizelle, Prof Donal Buggy





**ABOVE:** Dr Sinead O'Shaughnessy, New Fellow and Dr Fiona Roberts with Dr Rachael Cusack who received their Membership of the College.



#### AUDIT STUDY DAY

**ABOVE:** Dr Cillian Suiter, Winner Best Oral Presentation, Dr Anne Hennessy, Vice-President, CAI, Dr Wouter Jonker, Audit Study Day coordinator, Dr John Cahill, Presentator and Judge.



**ABOVE:** Dr. Saleh Alabri, Dr. Ahmed Abu-Draz with Dr. Jeanne Moriarty, Chair of Research, Audit and Innovation Committee, Dr. Fatma Ali Al-Hinai, Dr. Khalil Al Rawahi, Dr. Said Almunthari, Dr. Khalid Al Rhwahi.



#### OPENING OF THE WILLIAM BLUNNIE LECTURE THEATRE

**ABOVE:** Prof Kevin Carson & Dr William Blunnie at the opening of the William Blunnie Lecture Theatre in December 2017 **BELOW LEFT:** Prof Kevin Carson presenting flowers to Mrs Monica Blunnie **BELOW MIDDLE:** Dr Josephine Boland, Mr Martin Ryan, Dr Crina Burlacu, Dr John Cronin and Dr Eilis Condon **BELOW RIGHT:** Dr Anne Hennessy, Mrs Marie Treacy, Prof Ellen O'Sullivan & Mr Joe Treacy



# EDUCATION CALENDAR 2018

<b>January</b>	<b>February</b> <ul style="list-style-type: none"> <li>• <b>23rd February</b> Faculty of Pain Medicine, The Annual Francis Rynd Lecture, CAI</li> <li>• <b>24th February</b> Faculty of Pain Medicine ASM, RCPI</li> </ul>	<b>March</b> <ul style="list-style-type: none"> <li>• <b>9th March</b> Regional Anaesthesia Update 2018 &amp; Ultrasound Workshop, CAI</li> </ul>	<b>April</b> <ul style="list-style-type: none"> <li>• <b>16th April</b> CAT Consultant Interview Workshop, CAI</li> <li>• <b>19th &amp; 20th April</b> Beyond BASIC, CAI</li> <li>• <b>19th &amp; 20th April</b> ICSI BASIC Course, Dublin (date TBC)</li> <li>• <b>27th and 28th April</b> Western Anaesthesia Symposium, Knockranny House Hotel, Westport, Co Mayo</li> </ul>
<b>May</b> <ul style="list-style-type: none"> <li>• <b>24th &amp; 25th May</b> Annual Congress of Anaesthesia and Annual Dinner, Dublin Castle</li> </ul>	<b>June</b> <ul style="list-style-type: none"> <li>• <b>8th June</b> Train The Trainer Simulation Instructors Course, CAI</li> </ul>	<b>July</b>	<b>August</b>
<b>September</b> <ul style="list-style-type: none"> <li>• <b>26th September</b> Irish Pain Society, Annual Scientific Meeting, Dublin</li> <li>• <b>September</b> Echocardiography Workshop, Mater Hospital, Date TBC</li> <li>• <b>12th - 15th September</b> 36th Annual ESRA Congress, Convention Centre Dublin</li> <li>• <b>26th - 28th September</b> AAGBI, Annual Congress, Convention Centre Dublin</li> <li>• <b>September</b> Core Topics Day, CAI TBC</li> </ul>	<b>October</b> <ul style="list-style-type: none"> <li>• <b>8th - 12th October</b> 20th Dingle Conference, Current Controversies in Anaesthesia &amp; Peri-Operative Medicine, Dingle, Kerry</li> <li>• <b>13th - 17th October</b> ASA, San Francisco, USA</li> <li>• <b>19th October</b> Difficult Airways Management Workshop, CAI</li> </ul>	<b>November</b> <ul style="list-style-type: none"> <li>• <b>16th November</b> National Patient Safety Conference, &amp; KP Moore Medal Presentations, CAI</li> <li>• <b>17th November</b> Irish Standing Committee Meeting, Venue TBC</li> <li>• <b>November</b> Local Anaesthesia for Ophthalmic Surgery Workshop, Royal Victoria Eye &amp; Ear Hospital, Dublin, Date TBC</li> <li>• <b>3rd November</b> Intern/Medical Student Anaesthesia Information Open Day, CAI</li> <li>• <b>November</b> Professionalism in Practice Workshop Date TBC</li> <li>• <b>16th November</b> National Patient Safety Conference, KP Moore Medal Presentations &amp; WCL, CAI</li> <li>• <b>17th November</b> Irish Standing Committee Meeting, CAI</li> <li>• <b>22nd &amp; 23rd November</b> ICSI BASIC Course, CAI</li> </ul>	<b>December</b> <ul style="list-style-type: none"> <li>• <b>14th December</b> A Crisis Simulation Course for Consultants, CAI</li> <li>• <b>14th December</b> ISRA Consultant Foundation Workshop, CAI</li> <li>• <b>7th December</b> Gilmartin Lecture, CAI Date TBC</li> </ul>





**CAI**  
SALUS DUM VIGILAMUS

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