



CAT NEWS

April 2023

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Editor's note

Dr. Maeve O'Brien and Dr. Siobhán Clarke

Co-Editors CAT news

Hello and welcome to the Spring edition of CAT news!

Hope you're ready! We have another bumper edition for you, jam packed with stories of global and local achievements from our ever talented trainees!

To start, we chat to Dr. Andrew O'Donoghue who travelled to Malawi this year alongside some familiar faces in the College to deliver a "HOT Course"; HDU, Obstetrics and Trauma to healthcare workers. It is a fascinating read. We hope it provides inspiration for those of you with similar interests. Keep an eye on the College Website for more information.

We publish the much anticipated results of the on call audit painstakingly collated by Dr. Gillian de Loughry. This will be the third such publication and really sheds a light on working conditions in Anaesthesiology departments across the country. We hope that its publication will improve working conditions for present and future trainees. .

We have a fantastic piece written by Dr. Don Walsh on reflective practice and the recent symposium he attended. It provides a refreshing insight into a topic that frequently causes uncertainty amongst trainees.

Dr. Siobhán Clarke writes about The Safe Anaesthesia Network of Ireland, a relatively new initiative spearheaded by the Quality and Safety Advisory Committee that seeks to recruit local trainees and consultant leads in Patient Safety as part of a national network.

We have our regular instalments of SAT 7 and postgraduate education experiences from Dr. Noelle Healy and Dr. Emma Garry; hopefully making the choice of both pursuits a little easier when the time comes.

This edition's LAT news had a bit of a theme...the return of Coffee and a Gas! As always, it's wonderful to hear good news stories from the various departments.

If there is anything that you like to see featured in CAT news, please get in touch. We love to hear your thoughts and advice. Just shoot us an email, facebook message or tweet!

cat@coa.ie

[@AnaesTrainees](#)

[Committee of Anaesthesia Trainees Facebook Page](#)

[Previous CAT NEWS Editions \(anaesthesia.ie\)](#)

HOT Course - Malawi

Dr. Andrew O'Donoghue

SAT 5.5

I have recently returned from Malawi where I was part of a CAI group delivering two “HOT” Courses to 75 healthcare staff from southern Malawi. HOT stands for HDU, Obstetrics and Trauma; and is made up of an amalgamation of ATLS, ACLS and PROMPT; as well as some other bespoke aspects tailored to the needs and limitations of the Malawian context.

These courses have been delivered since 2005 as part of a larger commitment by the College in assisting the development of the Malawian health service. In addition to the courses the College have supported a number of medical graduates both professionally and financially through their postgraduate training in anaesthesia and intensive care, and the development of the College of Anaesthesiologists of East, Central and Southern Africa.



Malawi is a developing nation in East/Central Africa. Previously the British Central Africa and later Nyasaland, it gained independence in 1964 becoming what is now Malawi. It has a largely rural population and has experienced rapid population growth since independence, at which time its population was 2 million. It is now approaching 20 million. One of the local faculty on the course who works as a midwife in the Capital city, Lilongwe, informed us that approximately 600 children were born in that district on Christmas Day alone. This is proving to be a major issue to a country which has limited resources for development of infrastructure and healthcare provision.

It has a high maternal mortality ratio (349 women per 100,000 births), and while this is improving (610 in 2005) it does not compare well with the mean MMR for “least-developed countries” quoted by the WHO of 430. Anaesthesia is primarily provided by Anaesthesia Clinical Officers or ACOs, who come from a nursing or science background, although there are more registrar’s qualifying every year with support from CAI and other organisations.



There is no postgraduate continuing medical education to speak of for clinical staff and this is what the HOT course has aimed to provide. The course was primarily delivered as practical stations covering topics such as BLS/ACLS, ATLS survey, Breech delivery, Eclampsia, burns care and sepsis to name a few, with some lectures also.

Malawians refer to their country as “the warm heart of Africa” and the welcome we received and all our interactions were in tune with that. In Blantyre I got the chance to spend quite a bit of time with the anaesthesia registrar’s from Queen Elizabeth Hospital who despite working thousands of miles away, like us enjoy the equivalent of a trip to the Gingerman after a course day and a vent about the same things as we do, ICU-call and exams!

Going forward, the College is hoping to deliver two series of HOT courses per year. Faculty is primarily made up of consultants but a trainee will be selected for each trip. I have been informed that an invitation for expressions of interest will be advertised on the College website in due time. It was fairly intense delivering the courses but well worth it and I would love to go back. The skills and experience we gain during our training prepares us extraordinarily well to make real contributions to global health projects and for me this trip was a perfect entry point to this sphere.

SAT 7 - Perioperative medicine

Dr. Noelle Healy

Post CSCST fellow, Perioperative medicine SVUH

I'm currently working in St Vincent's hospital as part of a SAT 7 post CSCST fellowship position through the College of Anaesthesiologists of Ireland.

Peri-operative medicine is a new and growing subspeciality of anaesthesia, with a presence far beyond just the pre-operative assessment clinics.

It is a collaborative speciality that relies on effective teamwork and multidisciplinary effort that focuses on the full spectrum of care for the surgical patient, from pre-op to beyond discharge.

Despite having quite a significant presence in the UK and NHS, represented by the multitude of fellowship opportunities available, it is still in its infancy in Ireland. However, with the development of the recent Irish Perioperative Medicine Society (IPOMS) along with the advent of this fellowship, it's an exciting time to be involved in its growth.

In terms of the day to day clinical responsibilities of the job, these are split between theatre, clinic and non-clinical work.

St Vincent's offers many complex surgical specialties, and I have mostly been involved in Upper GI and Hepatobiliary surgeries, including bariatric and simultaneous pancreatic and kidney transplants.

Consistently working in the pre-operative assessment clinic is a great opportunity to identify and influence areas for audits and quality improvement, and there has been huge opportunity to do both with a variety of MDT involvement.

We have been fortunate to have strong links with UCL's peri-operative fellowship cohort over the past two years, and so have participated in their weekly education sessions. This has been an excellent opportunity to learn from leaders in the field.

This fellowship in peri-operative medicine has provided me with a chance to develop skills in communication and experience in risk assessment and patient care co-ordination. These are tools that will be ubiquitously useful in any career path, but I'm very excited to bring this skills set forward to a fellowship in obstetric anaesthesia and beyond!

For more information and helpful resources:

<https://www.ipoms.org/>



Reflective Practice

Brief thoughts on the recent Special Symposium and Planning Workshop on Reflective Practice

Dr. Don Walsh

SAT 6.5

Nothing seems to cause greater division in a tearoom of anaesthesia NCHDs than the mention of reflective practice. It's not that the importance of the subject is ever disputed, but for NCHDs, what it means, its utility, and its implementation is a live debate. As the coffee cools, and the mutual disagreements subside, finding yourself right back at the start of the conversation, only slightly more confused, is a shared experience.

Pinning the concept down into a workable definition is itself a difficult task. The development of reflective practice traces back to Dewey, where the individual applied a subjective assessment (the reflection), measured against objective facts (Dewey, 1933). A more recognisable definition to some might be that described by Boyd where reflection is a process of internally examining and exploring an issue of concern, triggered by an experience, which creates and clarifies meaning in terms of self and results in a changed conceptual perspective (Boyd and Fales, 1983). Complex stuff. The pragmatic, honed, weather worn NCHD definition of reflection might be influenced more by a reductionist approach, aligned with dominant epistemological positions in the speciality, such as evidence-based medicine, rather than historically artistic or philosophical influences.

But pinning down a workable definition so that trainees in Ireland may be equipped with, as best as possible, the skills and tools needed to navigate the rigors of a changing professional and personal landscape is, in part, what the College of Anaesthesiologists set out to do at a special symposium and planning workshop on reflective practice late in 2022. As a representative on the Education and Training committee, I had the privilege to be in attendance. I'll admit openly that I was unsure of what to expect. The issues that the NHS have experienced with reflective practice e-portfolios, misinformation surrounding their use in cases of fitness to practice inquiries, and a growing amount of material online describing their use as a "tick box" exercise, can't be ignored. I, like some of my peers, was a little sceptical of the idea.

It was refreshing then to experience the lively debate, the symposium brought together a broad range of experts from outside of our own speciality, as the faculty of the College attempted to understand what would best fit the needs of trainees. Very little went unscrutinised. It was clear that merely adopting a system employed elsewhere, simply wouldn't do.

Reflective practice is important, I didn't gain this insight from attending the symposium, but through the discussions and the debate it became clear that reflective practice is not a homogenous process. It is deeply individualised and although it may appear to be simple process, its complexity is derived from the complexity of those factors that determine our actions. Developing the skills necessary to reflect effectively requires time, practice, and support.

By the end of the day, having been better equipped to self-reflect, any uncertainty I had towards employing the skill day-to-day had softened. More importantly, seeing the efforts, enthusiasm, and diligence of those who strive to improve our training structures and promote and advocate for the well-being of trainees in anaesthesia in Ireland, was an insight... and something I admirably commend.

BOYD, E. M. & FALES, A. W. 1983. Reflective learning: Key to learning from experience. *Journal of humanistic psychology*, 23, 99-117.

DEWEY, J. 1933. How we think, revised edition. *Boston: DC Heath*.

Msc in Perioperative medicine

Manchester Metropolitan University

Dr. Emma Garry

SAT 4 AMNCH

I am currently completing the second year of the MSc in Perioperative Medicine through Manchester Metropolitan University (MMU). The first point I want to highlight is that this is a 3 year, part-time MSc programme and despite being UK-based, the fees can be funded by TSS/SPR funds. If you haven't been turned off yet, continue reading on!

This Perioperative MSc is a new course, my year being its first intake. After the rule change for eligibility for the FCAI last year I decided to apply for a Masters. I had missed the application for the UCL Perioperative MSc but then came across this MMU MSc and thought it sounded similar. The application was relatively straightforward. The entry requirements just state that you must have clinical practice experience in perioperative medicine. The annual fee is £2,400, or £800 per 20 credits (1 year = 60 credits). For SPRs, with TSS having increased to €2,500 + the €500 SPR fund, this will cover the cost entirely. As mentioned, this is a 3 year programme. The first two years consist of three, 12-week modules:

Year 1 modules: Evidence Based Practice, Preoperative Preparation, Postoperative Care and Complications.

Year 2 modules: High Risk Surgical Patient, Research Methodology for Quality Improvement and Option Unit (for my year this is Quality and Safety in perioperative care)

Year 3: (which I have not completed yet) consists of a "project in practice"/dissertation.

The material for each week is all online and usually consists of watching one or two pre-recorded 40-minute lectures and completing some reading material. Although not recommended, it is possible to allow the coursework to build up and then you can blitz through a few weeks at a time. There is one “face-to-face day” in Manchester each term (I haven’t managed to attend any of these so far but the course coordinators have facilitated remote access for me). Each term then culminates in a written assignment of around 4500 words.

Overall, the workload is manageable and the schedule is very flexible. I have found the material applicable to day-to-day practice and helpful in preparation for the FCAI exams.

In terms of exit strategies, it is possible to withdraw at any stage and obtain a postgraduate certificate after 1 year or a postgraduate diploma after 2 years.

For more information, feel free to get in touch. The course prospectus is available here:

<https://www.mmu.ac.uk/study/postgraduate/course/msc-pgdip-pgcert-peri-operative-medicine>.

More information on TSS and SpR fund:

<https://www.hse.ie/eng/staff/leadership-education-development/met/ed/fin/>



National Audit of NCHD Call Frequency

Dr. Gillian de Loughry

Vice Chair CAT / Health and wellbeing

SAT 3 SJH

You may be aware that CAT has been conducting biannual National Call Audit Reports since September 2020, which have been regularly communicated to the training department. These reports have brought attention to the call rota pressure for NCHDs at various sites across the country, and we are grateful for the support received from the Training Department and the College Council in completing them.

The Model of Care for Anaesthesiology from the National Programme Clinical Programme for Anaesthesia, the NCHD Contract, and the Training Agreement, all recommend a **maximum NCHD call rota frequency of 1:6**. The CAI Training Department's 'On Call Reform Proposal for Training', which acts upon previous CAT National Call Audit Reports, aims to ensure sufficient staffing for call tiers and maintain a call frequency of no more than 1 in 6. The proposal also includes updates to the time allocated for trainees on each call tier, with notable changes being **12 months spent on the theatre call tier** and **18 months on senior registrar call**.

Since July 2021 we have endeavoured to further break down call frequency by tier to highlight any potential imbalances. As a result, we will be presenting data from July 2021 to January 2023 for comparison. Many sites are operating a 12 hour shift or combination of 16 hour and 12 hour shift pattern, as a result, these shifts have been converted to an equivalency of the classic 16 hour/24 hour model for comparison.

During this biannual National Call Audit Report, we identified several training sites that have exceeded the recommended frequency, including some that have both improved. Currently, **24% (n=15) of training site call tiers are operating on an NCHD call frequency greater than the recommended 1 in 6.** These 15 individual call tiers are from 8 different training sites. The 24% is a small increase on data collected from Jan-July 2022, 21% of call tiers and 18% in July 2021 - Jan 2022.

In this biannual National Call Audit Report, 2 of the **theatre call** tiers were in breach of the 1 in 6 frequency, with Letterkenny and the Mercy Hospital operating 1 in 5 frequencies. For **obstetric call** frequencies, the dedicated Obstetric hospitals have improved significantly with the Rotunda operating a 1 in 6 call frequency versus 1 in 3.5 for the previous 6 months. Holles Street is operating a 1 in 7 call frequency versus 1 in 4.5 for the previous 6 months. Unfortunately, both UHG and UHW are operating a 1 in 5 on-call tier for obstetric call.

The **ICU call** tier is the call tier most frequently non-compliant with the recommended call frequency. There were 5 training sites that were in breach: Letterkenny 1 in 5, SJH 1 in 5, SVUH 1 in 5, MMUH 1 in 5.6 and Mercy 1 in 5.6. For the majority of these sites this is their first time being non-compliant with recommendations, however for Letterkenny this frequency has been maintained in previous audit reports. There is cross-cover by both theatre senior registrar on call tier to staff the ICU tier in many institutions.

For the **senior registrar call** tier there were 3 sites in breach of the recommendations: UHG 1 in 5.5, Mater 1 in 5.6 and Wexford 1 in 4.6, with Wexford the only site repeatedly in breach of the same.

Notably, where the 1:6 frequency was not met, **rest days** are given where possible in 3 of the 8 sites. When audited, most sites were compliant with SAT 1 trainees being on-call in theatre and SAT 5.5 and above being on senior registrar Call. Several different training sites have **additional tiers of call** – SJH weekend days, UCGH trauma and Merlin off-campus on call, SVUH St Michaels on call and Mater MICAS on call. These site-specific call tiers are more difficult to quantify frequency as they are staffed by trainees at different stages and trainees who also take part in traditional on call service. During this biannual audit report we are unable to comment on Cappagh, RVEEH and CHI, Crumlin.

As the representative body for the trainee community, we have a track record of collaborating with the College to enhance the overall wellbeing and experience of Anaesthesiology trainees in Ireland. We appreciate and recognise the College's ongoing dedication and support in this regard. Enforcing call frequency standards for trainees is one of the main focuses of the college to improve trainee wellbeing as part of the On Call Reform Proposal for Training published last year. The weight of the call duty burden on trainees and its negative impact on mental health and wellbeing was also underscored in the recent national trainee survey.

CAT has requested the College review the most recent data and understand that steps to address these issues have been taken in some instances. We will continue auditing and ensuring compliance with call frequency standards, and we will keep the trainee community informed of our progress.

National Audit of NCHD Call Frequency

Year	July 2022 - Jan 2023					Jan 2022 - July 2022					July 2021 - Jan 2022				
Hospital	Theatre	Obs	ICU	ICU 2	Senior Reg	Theatre	Obs	ICU	ICU 2	Senior Reg	Theatre	Obs	ICU	ICU 2	Senior Reg
Beaumont	8.0		7.0	7.0	8.0	8.5		9.0	9.0	12.0					
Cappagh						8.0									
Connolly	8.0		6.0			6.0		6.5			6.0		6.0		
Coombe		7.0			6.0		7.0			5.0		4.0			5.0
Crumlin						10.0		7.0	7.0		8.0		7.0	8.0	
CUH	8.5	6.8	7.5	7.0	6.6	8.0	8.0	7.0	7.0	9.0	8.0	8.0	8.0	8.0	8.0
Drogheda	7.0	6.0	6.0			8.0	6.0	6.0			7.0	7.0	6.0		
Galway	10.0	5.0	6.5		5.5	6.0	5.0	7.5		9.0	7.5	7.0	11.0		7.0
Holles St		7.0			7.0		4.5			4.0		6.0			
Letterkenny	5.0		5.0			6.0		5.0			8.0		5.0		
Limerick	15.0	6.0	7.0		6.5	12.0	10.0	9.0		7.0	9.0	7.0	7.0		6.0
Mater	7.0		5.6	5.6	5.6	8.0		7.0	7.0	8.0					
Mayo	7.0		7.0			6.0		6.0			8.0		6.0		
Mercy	5.0		5.6			6.0		7.0			4.0		4.0		
Mullingar		6.0	6.0				5.0	5.0				3.0	3.0		
Rotunda		6.0			6.0		3.5			4.0		6.0			5.0
RVEEH						4.0					8.0				
SIVUH	6.0					7.0									
SIH	12.0		5.0	5.0	9.0	7.0		7.0	7.0		8.0		7.0	7.0	9.0
Sligo	6.0		6.0								6.0		6.0		
St Vincent's	8.0		5.0	5.0	7.0	6.0		7.0	7.0	5.0	7.0		6.0	7.0	6.0
Tallaght	10.0		7.1	7.7	8.0	8.0		6.0	6.0	6.0	9.0		7.5	7.5	8.0
Temple St	10.0		10.0								7.0		7.0		
Waterford	10.0	5.0	6.0			7.0	7.0	7.0			8.0	7.0	7.0		
Wexford	6.6				4.6	3.5				3.5	4.0				4.0
Total <1:6/tier	2.0	2.0	8.0		3.0	2.0	4.0	2.0		5.0	2.0	2.0	3.0		3.0
Total <1:6	15.0					13.0					10.0				

Safe Anaesthesia Network of Ireland

Dr. Siobhán Clarke

Quality and Safety Advisory Committee representative

SAT 3 AMNCH

The Safe Anaesthesia Network of Ireland (SANI) was first proposed several years ago by Professor Gerry Fitzpatrick, then, the chair of the Quality and Safety Committee; a standing committee of the College of Anaesthesiologists of Ireland, promoting and maintaining a culture of patient safety, providing leadership for patient safety and timely information to support patient safety. He sought to appoint a Clinical Lead in Quality and Patient Safety in each hospital or hospital group ensuring the founding principles of the Committee were being reflected at a local level.

This year SANI has been reactivated by Professor Irene Leonard, Consultant Anaesthesiologist and Safety Lead in Beaumont Hospital, with support and endorsement from the CAI Patient Safety and Quality Advisory committee. The network has now been expanded to include not only consultant anaesthesiologists but also anaesthesiology trainees and the hope is that it will expand further to include other health care professionals with an interest in patient safety. The aims of the network reflect those first proposed in 2016 and include the development of an anaesthesia patient safety community, sharing of information on safety leadership, QI methodology and learning from incidents and excellence, promotion of education and research in patient safety with collaboration within and between hospital groups on common themes.



NCHD Safety Leads have now been recruited in many network hospitals. It's envisioned that the trainee will work closely with the designated Consultant Safety Lead in identifying patient safety issues, organising and presenting mortality and morbidity and quality and safety meetings and coordinating research and audit projects within the department. A senior trainee may be best placed to adopt this role but depending on departmental resources and pre-existing systems and structures any interested trainee is eligible to apply.

In Tallaght, two SAT 6s; Dr. Kieran Crowley and Dr. Daniel Lehane share the role, overseen by Consultant Lead Dr. Clare O'Connor. Together, they have established a bimonthly quality and safety meeting and a system through which incidents and examples of learning from excellence can be reported anonymously. Our first meeting of this calendar year included a series of presentations and has resulted in a project tackling the hip fracture pathway in TUH. In Beaumont, Dr. Lauren Hughes is the current trainee Safety Lead and has worked with Prof. Irene Leonard in the organisation and presentation of Safety QI meetings, incorporation of new 'Learning from Excellence' and 'Safety News' modules into the Patient Safety programme and has compiled reports of proceedings from these meetings as feedback to hospital executive management and risk management

The role of the CAT and specifically of the trainee Quality and Safety advisory committee representative will largely be supportive. We welcome feedback regarding the designated role and responsibilities at individual hospital sites, the volume of work and local supports that are available and we will act as a conduit through which trainee leads can communicate with one another. To this end, I would appreciate if appointed individuals could email me at CAT@coa.ie.

The scope of this network is far reaching and while still in its infancy it's clear there is an appetite amongst both trainees and consultants to prioritise patient safety in anaesthesia and ensure it comprises not only a thematic cornerstone of our speciality but also the foundation of our day to day practice. We look forward to supporting the network and watching it grow and develop over time.

LAT News: Coffee and a Gas

Dr. Maeve O'Brien

LAT coordinator

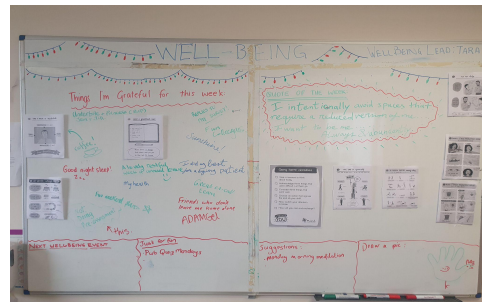
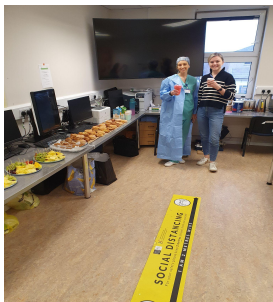
SAT 2.5

Waterford University Hospital

Dr. Shauna Gallen

We had our "Coffee and a Gas" brekkie spread on Tuesday 7th March. Congratulations to two of our NCHDs, Aneeqa Tahir and Viktoria Czok, who successfully passed the MCAI MCQ! We had three NCHDs who were successful in their application to the SAT programme - Viktoria Czok, Hassan Khan and Tarek Omar - congratulations guys!

Our new wellbeing officer, Tara Banon, has been busy boosting workplace morale and initiating activities to improve wellbeing. As well as starting a wellbeing board at work. There are plans to start some wellbeing group activities including meditation and seaswimming 😊



Wexford General Hospital

Dr. Gordian Barry

Wexford has been a lively place in recent times. With a fire, hospital evacuation and a visit from the Taoiseach all ticked off, all that was left was to host our eagerly anticipated Coffee and A Gas morning. Delicious coffee and breakfast was served by Westgate Design cafe and there was smiles and good chat all round.

Congratulations also to Maeve O'Brien who recently got engaged (to me!) 😄

Coombe

Dr. Francis Fallon

Congratulations to the trainees at the Coombe who took second place at The Circular pub quiz last month with their team 'The Good The Bad & The Pugly'. Huge shoutout to their team captain Grace the pug who ensured her team's success on the night. Heartiest congratulations to Kate Rafferty, Shane Kelly and Susan Reid who were all successful in their interviews for the SAT scheme. Congratulations also to Albert and Ali who were both successful in the MCAI exams.



Captain Grace pictured celebrating with her quiz team.

SIVUH

Dr. Kevin MacSweeney

Congratulations to Dr. Orna Collins (SAT 3) came first in the SIVUH theatre bake-off! We also held a very successful coffee and a gas morning!



Temple Street

Dr. Ronan Bluett

Some news from temple street. John Ryan SAT trainee got married on St Patrick's day!

REEVH

Dr. Aoife Mabelson

The gang in REEVH held a very successful coffee and a gas morning. Check out their photo!



Support Services

Despite our best efforts, our job can be stressful. With the pandemic hopefully disappearing off into the distance, we need to remember that we still need to look out for ourselves, look out for each other and reach out to fellow trainees if you think they might be having a bad day / week / month!

Below are some resources that you may find helpful.

General Practitioner

With moving around every year or indeed every 6 months, it can be difficult to find the time to register with a GP. The National GP Directory, compiled by the ICGP, lists GPs who have indicated that they have capacity to register NCHDs, trainees and interns seeking a GP within their locality during their clinical rotations. You can access the map and directory [here](https://www.icgp.ie/go/in_the_practice/doctors_health/national_gp_directory_for_nchds).



https://www.icgp.ie/go/in_the_practice/doctors_health/national_gp_directory_for_nchds

Practitioner Health

This programme provides appropriate care and support for health professionals in Ireland who may have mental health issues such as stress, anxiety, or burnout or who may have a substance misuse problem. It is fully independent and separate from the regulatory bodies and employers. It has been endorsed by Memorandum of Understanding by the relevant professional councils and is supported by representative organisations and training bodies.



<https://practitionerhealth.ie/confidential@practitionerhealth.ie>
085 7601274

Pieta House

Pieta provide free counselling to those with suicidal ideation, those engaging in self-harm, and those bereaved by suicide. Staff are fully qualified and provide a professional one-to-one therapeutic service.



www.pieta.ie
24hr Crisis Helpline on Free phone **1800 247 247**, or Text **HELP** to **51444**
Therapy Services team on **0818 111 126**

Samaritans

Samaritans is a charity in Ireland offering emotional support 24 hours a day, 365 days a year, to anyone who is in distress, lonely, struggling to cope or feeling suicidal. Samaritans has 21 local branches across the island of Ireland (13 in RoI and 8 in NI) which are run independently by a network of volunteers. Volunteers are on duty 24 hours a day, seven days a week, on the freephone helpline number **116 123**



HSE Employee Assistance Programme

The HSE Employee Assistance Programme (EAP) is a work-based support service for staff and the organisation. This is a confidential independent service. It supports employees with psychosocial issues (psychological and social factors that influence mental health). These issues may be personal or work-related, affecting your job performance or home life. The service is free and available to all HSE employees.

Call **0818 327 327** to speak to someone who can help.



Websites

HSE: <https://www.hse.ie/eng/staff/workplace-health-and-wellbeing-unit/>

CAI: <https://www.anaesthesia.ie/training/wellbeing/>

Mind the Frontline: <https://www.mindthefrontline.com/>

UK ICU Society:

https://www.ics.ac.uk/Society/Wellbeing/Society/Wellbeing_hub/Wellbeing_Hub.aspx?hkey=c4cc359f-caac-4198-b1f2-dabac29af11a

Apps

Insighttimer: meditation app where much of the content is free with an endless supply of new content frequently being added. Users can browse between a range of popular wellbeing topics.

Headspace: An app that makes meditation and mindfulness simple

Calm: Focuses around meditation relaxation and sleep, with sessions anywhere between 3-25minutes to suit your schedule.

Dates for your Diary

28-29th March

Membership CAI OSCE and SOE

5th April

Trial pain exam

12th April

Fellowship pain medicine

18-19th April

Final Fellowship FCAI-SOE

27th April

Trial fellowship JFICMI

4th May

FJFICMI written examination

18th May

CAT sponsored Night Out post Thursday of Congress. Location to be revealed.

30th May

Pain Clinical

1st June

FJFICMI Clinical Examination

7th June

Trial Membership CAI, online

23rd June

Graduation

6-9th September

6th World Congress regional anaesthesia and pain medicine- ESRA Paris

13th September

Membership CAI online

14th-15th November

Member CAI OSCE & SOE

17th November

National Patient Safety, CAI

5-6th December

Final fellowship FCAI SOE

Upcoming events

CAT careers evening

20th April

College of Anaesthesiologists Ireland, Merrion Sq.

The much anticipated CAT careers evening will take place on Thursday 20th April at 6pm both in person at the CAI, Merrion Sq. and online. With a selection of speakers covering all sub-specialities in Anaesthesia, this event is not to be missed. This event is free of charge and we will be sending out registration for in-person attendance in the coming days.

Annual Congress of Anaesthesiology

May 18-19th

University College Dublin

The Annual Congress never fails to disappoint and this year it returns to a two day in-person format for the first time in 2 years!

The programme is diverse covering a breath of topics from perioperative bariatric medicine to sustainability and there will be unmissable breakout sessions covering TIVA and regional anaesthesia. There will also be a CAT Night Out on the 18th May (Thursday). Location to be revealed. Bar tab on the night!

Register here and buy your tickets today!

<https://cai.eventsair.com/cai-annual-congress-2023/registration/Site/Register>

Charity fun run @ Congress

May 19th

UCD

The annual event is back this year in person and we couldn't be more excited. Due to take place Friday morning 19th May ahead of the second day of the Congress, this event has been known to bring out the competitive edge amongst our trainees. Fancy dress is encouraged!

Upcoming events

Anaesthesia 2023

May 16th-18th

Birmingham

RCOA's flagship conference will take place over 3 days both online and in person. An event not to be missed!

Register here:

<https://events.rcoa.ac.uk/rcoa/frontend/reg/tRegisterEmailNew.csp?pageID=194385&eventID=492&tempPersonID=329611>

Critical Care Reviews 2023

June 14-16th

Titanic Belfast

This unique conference selects a number of major trials in the arena of critical care to discuss and present

More info: <https://criticalcarereviews.com/meetings/ccr23>

AND FINALLY!!

Following the success of our CAT Boat Party, we have another social event planned for June!!

Watch this space....!!

