

**Minutes of the meeting of the Scottish Specialty Board for Training in Diagnostics Specialties held at 10.30 am on Tuesday 1 November 2016 in the Laurel Room, Forest Grove House, Foresterhill, Aberdeen (with videoconference links)**

**Present:** Peter Johnston (PJ) Chair, John Cumming (JC), Shona Olson (SO), Fiona Payne (FP).

**By Videoconference:** *Dundee* - Raj Bhat (RBh), Vicky Hayter (VH), Jonathan Weir-McCall (JWM), Clare McKenzie (CMK); *Edinburgh* - John Bremner (JB), Fiona Ewing (FE), Pota Kalima (PK); *Edinburgh (2)* - Hannah Monaghan (HM); *Glasgow* - Celia Aitken (CA), Frances Dorrian (FD), Clair Evans (CE), Peter Galloway (PG), Sai Han (SH), Wilma Kincaid (WC), Iain McGlinchey (IMG).

**Apologies:** Judith Anderson (JA), Ralph Bouhaidar (RBo), Sharon Edwards (SE), Robert Fleming (RF), Marie Mathers (MM), Alasdair McCafferty (AM), Rowan Parks (RP), Jane Paxton (JP), David Summers (DS), Emma Watson (EW).

**In attendance (Aberdeen):** Helen McIntosh (HM).

Item	Lead
<p>1. <b>Welcome and apologies</b> The Chair welcomed all to the meeting and apologies were noted.</p>	
<p>2. <b>Minutes of the meeting held on 20 September 2016</b> One amendment was noted:</p> <p>Page 3, Item 4.1, third paragraph, first sentence to read 'The group discussed expansion posts and that it would prefer to see equal distribution ...'.</p> <p>With this amendment the minutes were accepted as a correct record of the meeting and will be posted on the Scotland Deanery website.</p>	
<p>3. <b>Matters arising/actions from previous meeting</b> 3.1 <b>Shared Services information</b> The next Diagnostics Shared Services meeting will take place on 15 December; the same date as the next STB meeting. PJ will seek a deputy to attend.</p>	<b>PJ</b>
<p>3.2 <b>SAMD representation on Diagnostics STB</b> Noted: Dr McRitchie has left the STB. HM will ask SAMD if it planned to replace him.</p>	<b>HM</b>
<p>3.3 <b>Meeting with Interventional Radiology: update</b> The meeting has been arranged for 24 November at Westport. HM will re-send RBh's email to confirm videoconference facilities will be provided and ask for confirmation of attendance.</p>	<b>HM</b>
<p>3.4 <b>Combined Infection Training update</b> Noted: 2 CIT SAC meetings have been held.</p>	
<p>3.5 <b>PSU paper</b> CM will ask Greg Jones to circulate the paper to the STB once confirmed.</p>	<b>CM</b>
<p>4. <b>TRAINING MANAGEMENT</b></p>	
<p>4.1 <b>Recruitment update</b></p>	

Scottish Government has not yet made a decision on funding for the 8 expansion posts. The posts have already been approved by the Transitions Group. As there were already Radiology and Histopathology posts in Round 1 adverts expansion post details could be added at a later stage and once confirmed. SH confirmed the Nuclear Medicine post would be advertised in Round 1.

Paediatric Pathology has recruited 2 trainees – one to start in February and the second one to start later. The third post would rotate and therefore was most likely be recruited in 2018. It will remain in Histopathology this year and can rotate through when a trainee was ready to do this.

Noted: dates booked for Histopathology recruitment in January in London.

#### 4.2 **Combined Infection Training update**

PK joined the most recent SAC meeting by teleconference. Issues discussed were – recruitment and how to encourage more applications; the MMV/ID selection process and concerns about bias in questions towards trainees interested in ID/GIM and how to address. It was also noted at the meeting that the London Deanery has discussed decommissioning Medical Microbiology and Virology posts and rebranding as ID posts. CM reported she subsequently spoke to the Liaison English Dean who confirmed there was no drive to reduce MMV/ID posts but to re-structure the programme. However, recruitment to MMV continued to cause concern. PJ noted that John Hood had previously raised the issue of bias in questions and PJ's own experience as a panellist was that they were physicianly focused. A number of different issues remained and much work was still to be done.

### 5. **PROFESSIONAL DEVELOPMENT**

5.1 No additional issues were discussed.

### 6. **QUALITY**

#### 6.1 **Quality Update**

FE had circulated the SQMG document to the group which contained the detail of her previous verbal update. She confirmed each TPD should have received the update for their specialty. Requests for any other information should be sent to her.

She noted:

- MMV in the North and East will be visited in Aberdeen where they will see trainees from both centres – FE will attend and DM will chair the visit.
- Twenty Associate posts (trainees) were advertised and over 70 applications received. The initial 20 posts were filled and it was hoped to recruit a further 10. The first cohort will receive training this week and once trained will attend visits and other meetings. Attendance will count as study leave in terms of time with a maximum commitment of 2 days per year but not in terms of funding. TPDs/Educational Supervisors have approved those who applied. The group agreed the benefit of bringing a trainee dimension to the workstream.

PJ noted Professor McLellan's presentation at the recent APGD meeting. This was to raise awareness and highlighted the need to look at the GMC visit as an opportunity to develop education and training across programmes. It was likely 4 major centres will be visited and the GMC will visit all Medical Schools. It had been thought that specialties in enhanced monitoring would not be visited but this was no longer certain.

The GMC will visit areas of concern and areas where there was good practice and will look at programmes, hospitals, STBs, Deanery and Medical Schools and their interaction and communication and how issues were addressed.

**7. FACULTY DEVELOPMENT**

RMV gave a talk on current developments in Faculty Development at the APGD meeting. LaMP has been revised and was now receiving better and positive feedback. He also informed the group about the work being done by the 12 current Clinical Leadership/Management Fellows and the plan to continue links with them once they returned to post. Recognition of Trainers was ongoing and the Faculty Development Alliance was providing material for trainers to assist in developing their capabilities. Information was available on the NES website.

**8. STRATEGIC PLANNING AND DIRECTORATE SUPPORT**

PJ reported the North region office in Aberdeen will be redeveloped and while work took place from December to April 2017 staff will move to Aberdeen Dental Education Centre. It was hoped services will continue as usual.

**9. Update reports**

**9.1 Lead Dean/Director**

CM thanked all for their feedback on the ARCP requirements. Information was now on the NES website and she asked the group to let her know if anything was unclear.

She gave a presentation on Outcome 5s at the APGD meeting. STB feedback indicated a degree of contention on seeing trainees with Outcome 1; she confirmed that TPDs could continue to see all trainees if they wished but this had to be a separate meeting. It was also clear there was variable panel membership in some specialties. CM will collate feedback from the wash up meeting for the pilot.

**CM**

The Gold Guide stipulated all evidence had to be made available to the panel 2 weeks' before ARCP and it was likely NES will make this a requirement. She was aware this could be an issue as trainees who did not provide all evidence within the timeframe would get an Outcome 5 and this had to be consistently applied. This was debated at the APGD meeting and may be tweaked after the pilot. Meantime ARCP 5 guidance was available on the NES website.

CM noted that an APGC sits on the NES LTFT group, on which she and FD also sit. A process has been developed where LTFT status can be reviewed as a paperwork exercise however she stressed this was not intended to challenge trainees to push them into full-time but was a checking exercise. She was aware that trainees already spoke to their TPDs if their LTFT status impacted on their ability to achieve competences due to rotas eg clinics not held on days on which they worked, but felt it was good to have oversight.

The simulation group has met twice. Its focus was on simulation within curriculum and how to deliver it in all areas. The group was productive and engaged and she had plans to restructure it further.

She and Ronald MacVicar were leading on Career Management developments. They planned to bring together the APGDs for Career and Management and University Careers Advisers to consider strategy and will consider the careers advice in Medical

Schools as a starting point. They would like to include trainees in this group and may invite STB trainee representatives. The group will focus on giving individuals information to allow each to make their own career decision and not selection and recruitment/retention, which was part of the StART initiative, but will feed into its work. PJ noted that NES via MDET has funded careers research work for Scotland and for elsewhere in the UK so has an existing knowledge base for this work. HMo felt it would be useful to involve DMEs in this work; CM agreed she will contact Morwenna Wood as Chair of the DME group to consider what DMEs could contribute to the group.

CM

**9.2 Histopathology**

PJ confirmed information on the ARCP decision aid was available; there was a general feeling it was not helpful. It was unclear when it will appear and its use become mandatory.

**9.3 Diagnostic Neuropathology**

No update was received.

**9.4 Paediatric Pathology**

CE and WK discussed quality issues prior to the meeting and once the programme was in place they will seek an external mentor for trainees. They were also working to resolve the issue of desk space for trainees. CE has been looking at the potential for rotating trainees around Scotland and hoped to expand this to Aberdeen.

**9.5 Forensic Histopathology**

PJ noted correspondence with Sandra Brown, Finance Officer in NEs, regarding a University of Edinburgh contract for a trainee who works in both East and North. Normally a contract would be provided by the appropriate Health Board however this specialty was different in that posts were funded by the Crown Office – with some employed by the NHS and some by Universities. FD confirmed that trainees would have 2 contracts – an employment contract with the NHS and an honorary University contract. PJ will discuss this with RBho to clarify and will send information received from Sandra Brown to FD.

PJ  
PJ

CM reported the first STC meeting has taken place.

**9.6 Radiology**

The London Deanery will run recruitment and Scottish panellists were being sought.

**9.7 Medical Microbiology**

PK said the Royal College of Pathology has asked Medical Microbiology to transition to the new curriculum and as a result eportfolios will transfer from the College to the Royal College of Physicians system. There have been some issues which he hoped will be resolved in time for ARCPs but flagged this up as a potential area of concern. CM asked PK to email her with details so she can approach the College for clarity.

PK/CM

**9.8 Virology**

Noted: Lothian trainees were already on the new programme.

**9.9 Combined Infection Training – updates**

PK reported they now have programme pathways agreed for the delivery of the programme. CM added that she will invite the ID TPD to join the CIT training

CM

committee.

**9.10 Chemical Pathology and Metabolic Medicine**

No update was received.

**9.11 Nuclear Medicine**

SH noted that interviews will take place in the second week of February. He added that they will do an imaging session in the Radiology training day and will have a session at RCPE.

**9.12 Trainees Issues**

No update was received.

**9.13 Academic issues**

PJ reported he will confirm academic representation on the STB.

**PJ**

**9.14 Service issues**

No update was received.

**9.15 DME**

It was agreed to circulate the CMT newsletter to TPDs; HMO will send it to HM for onward circulation.

**HM**

**9.16 Lay representative**

No update was received.

**10. Received for information**

The link to the S

**11. AOCB**

**11.1 Desk space within hospitals**

IMcG noted this was an issue for some hospitals; PJ will take this forward via DMEs if there were ongoing issues.

**PJ**

**12. Date and time of next meeting**

The next meeting will take place at 10.30 am on Thursday 15 December 2016 in the Lossie Room, Aberdeen Dental Education Centre, Foresterhill, Aberdeen (with videoconference links).

**Actions arising from the meeting**

Item no	Item name	Action	Who
3.	Matters arising/actions from previous meeting		
3.1	Shared Services information	To seek a deputy for Diagnostics shared services meeting.	PJ
3.2	SAMD representation on Diagnostics STB	To ask SAMD if it planned to replace Dr McRitchie.	HM
3.3	Meeting with Interventional Radiology: update	To re-send RBh's email.	HM
3.5	PSU paper	To ask Greg Jones to circulate paper once confirmed.	CM

9. 9.1	Update reports Lead Dean/Director <ul style="list-style-type: none"> <li>• ARCP pilot</li> <li>• Career Management</li> </ul>	To collate feedback. To ask Morwenna Wood re DME input to group.	CM CM
9.5	Forensic Histopathology	To discuss with RBh; to send information from Sandra Brown to FD.	PJ
9.7	Medical Microbiology	To email information re eportfolio to CM; to raise with College.	PK CM
9.9	Combined Infection Training – updates	To invite the ID TPD to join the STC.	CM
9.13	Academic issues	To check representation on the STB.	PJ
9.15	DME	To send CMT newsletter to HM; to send to TPDs.	HMo; HMs