

FACULTY OF SPORT AND EXERCISE MEDICINE (UK)

Draft Minutes of the Meeting Held On 4th November 2008 at The Royal College of Surgeons of Edinburgh

PRESENT:

Prof Charles Galasko
Prof Mark Batt
Dr Rod Jaques
Prof Peter Helms
Prof Angus Wallace
Prof John Fairclough
Dr Simon Till
Mr Michael Allen
Mr Jim Foster
Dr Carrie MacEwen
Dr Pat O'Neill

PRESIDENT
PRESIDENT-ELECT
VICE- PRESIDENT
HON. TREASURER
Royal College of Surgeons of Edinburgh
Chairman, External Affairs Committee
Elected Member
Elected Member
Lay Representative
Royal College of Ophthalmologists
Faculty of Sport and Exercise Medicine
(Ireland)

IN ATTENDANCE:

Mrs Yvonne Gilbert

FSEM (UK)

1. APOLOGIES:

Mr Christopher Brookes
Dr Victor Cassar-Pullicino
Dr Richard Budgett
Dr Ian McCurdie
Prof Michael Cullen

College of Emergency Medicine
HON. SECRETARY
Elected Member
Chairman, Nominations Committee
Chair, Specialty Advisory Committee
in SEM

Dr Thomas Beattie
Dr Richard Seah
Prof David Patterson
Prof Stewart Hillis

Chair, Examinations Committee
FSEM Trainee Representative
Chairman, ISEM
Royal College of Physicians and
Surgeons of Glasgow
Faculty of Occupational Medicine
Defence Medical Services of the Armed
Forces

Dr Les Odiseng
Group Captain David Jones

Royal College of Physicians of London
Faculty of Public Health Medicine
Lead Dean

Lt. Col. John Etherington
Dr Jacky Spiby
Prof David Sowden

- Prof Galasko welcomed Mr Jim Foster, immediate past CEO of RCSEd as lay representative to Council. Prof Galasko also welcomed Mr Mike Allen and Dr Simon Till as newly elected members of Council.
- Minutes of Meeting held on 12th September 2008.**

Page 3 item 4.f. delete: "***It was thought that we may be able to bid for money from the BOA***"

Page 4 item 4.h. should read “possibly a non-medical person – perhaps Zoe Hudson, **Queen Mary University of London (QMUL)**”

Page 7 item 5.J. “**Prof Batt and Dr Philip Bell met with Dr Vallance-Owen from BUPA during the summer to discuss a ‘rumour’ that BUPA had unofficially spoken of stopping payment to doctors if they were not on the Specialist Register in any current specialty by 1st January 2009. Following discussion this position is now under review.**”

Page 8 item 5.K. “**Independent on Sunday**” wrote to the Faculty asking whether we would write an article on SEM. Dr Victor Pullicino responded but as far as we are aware nothing has been published.

Page 8 item 5.L. should read “**Dr Richard Seah offered to put this to the trainee registrars but stated that the trainees would not be able to comment on subspecialty training. Council felt that it should be a consultant who gives the lecture. Prof Galasko will write to Dr Betty Canton Smith.**”

4. **Matters Arising (not covered in the Agenda).** None

5. **Matters Arising**

- a. **Newsletter:** Mr Foster queried whether the newsletter would be an e-newsletter or a printed document. It was agreed that for the first few years of the Faculty we should have an annual printed newsletter and this is what Dr Pullicino is producing at the moment. It was thought that there may be some material from the Strategy Meeting which could be included but Prof Galasko said that he would prefer to get the newsletter out before the end of the year and it should therefore be ready to go to the printers quite soon. **Action: Dr Pullicino**

It was suggested that Fellows and Members should be advised that the policy of the Faculty is to send mail electronically whenever possible so they are aware that they must read the emails if they wish to be kept up to date with Faculty information. **Action: Yvonne**

- b. **Exercise for Life:** Prof Batt reported that things are moving ahead and the project is getting bigger and more exciting as more organisations hear what we are trying to achieve. The next meeting for this group is on 3rd December 2008.
- c. **Revalidation:** Nothing Specific to report. Prof Galasko said that Dr Christine Haseler, PCT clinical lead raised the question of Quality Assurance regarding revalidation and appraisals. Dr Jaques said that appraisals are for the benefit of appraisees. He said that a lot of our process has been devised from other organisation but we have not made it a pass/fail process. What Dr Haseler is getting at is appropriateness of membership – should appraisal be made essential for everyone to continue to be a Fellow or Member of the Faculty. It was agreed that this is not necessary.
- d. Prof Helms suggested the Faculty have a self CPD accreditation facility for Fellows and Members to be registered with the Faculty with no legal implication although with the occasional spot checks. Prof Galasko said that Fellows and Members may value this and asked whether we should offer this facility. It should be set up to show

external and internal CPD under guidance given by the Faculty. It would be set up on the website and Fellows and Members would input the information and when they have reached their accreditation target they would request a certificate. The question was raised whether we know if this is really going to mean something in 3/5 years time.

Prof Fairclough said that there are two levels to this, revalidation is a GMC requirement but there is also recertification for people on the specialist register. At the moment individual Colleges will have to be responsible for recertification. Therefore the Faculty will be required to be responsible for recertification. Mr Jim Foster advised that there is a meeting being held at RCSEd in April 2009 and the Faculty should send an observer. Mr Foster to advise Council of date and venue.

Action: Mr Foster

Prof Helms said that he felt our Fellows and Members might be grateful that we have put this into place as something they can use for revalidation/recertification. He will look into the practicalities of this self registration.

Action: Prof Helms

Collecting data is also essential, doctors need to collect five years data up to 2011 therefore they must start collecting now. Dr Rod Jaques will put together a paper to email to Fellows and Members advising what is available and what they should be doing/collecting now.

Dr Jaques CPD document will be included in the newsletter. Anyone undertaking the FSEM appraisal will be required to submit their CPD.

Prof Galasko suggested sending a letter to all Fellows and Members advising what they need for FSEM appraisals. If they are to be appraised by us this will outline what they need to do. Fellows and Members will also be asked if they would find it useful if the Faculty were to produce a self certificated section on our website. **Action:**

Dr Jaques

- e. **Safety in Football:** No report
- f. **Appraisers Training Day:** Prof Galasko asked whether it is necessary to run an appraisers training day every year or every two years. The consensus was not to run an Appraisers Course next year. We will await the response to the questionnaire regarding holding a course on 'How to get the best from your appraisal' before deciding on this course.
- g. **The Role of the Specialist in SEM:** Dr Richard Budgett has produced an updated document. Council thought that the document was very good. It was thought that this should be the document that we use and it would be the standard for the Faculty. There are a couple of typographical errors and Prof Batt will check for accuracy.
Action: Prof Batt
- h. **Undergraduate Committee:** Prof Stewart Hillis will chair the committee. Prof Nicola Maffulli, Mr A Pritchard (medical student), Dr Richard Seah, and Dr Simon Till have agreed to join. Prof Michael Cullen and Dr Ian McDermott were also invited to join the Committee but have declined due to other commitments. Dr Zoe Hudson has been asked and we await her response (post meeting Dr Hudson has agreed to join the committee). The role of the committee is to assess what is available in the SEM curriculum and what should be taught at

undergraduate level, to help with the development of electives in SEM, to help create a network of Medical Students SEM liaison committee in Medical Schools, to stimulate research in SEM at undergraduate level, to assess whether there is sufficient interest in undergraduates for FSEM to create an annual prize for undergraduate research in SEM and to create an undergraduate section on the FSEM website.

- i. **Good Practice:** Dr Richard Budgett previously agreed to develop a document on Good Practice based on a document previously produced by the International Olympic Committee (IOC); due to work commitment this has not yet been done. It was felt that this is a very important document for the Faculty and Prof Galasko though that it is something that Prof John Fairclough may be able to take on. Yvonne to send a copy of the IOC document to Prof Fairclough.

Action: Yvonne/ Prof Fairclough

- j. **ACCEA:** Prof Galasko reported that the Faculty has been accepted as a nominating body to sponsor people for national awards. Prof Batt thought that we would need a committee in place to scrutinise and rank people for ACCEA awards. The Nomination Committee would set a standard for people to make applications and obtain nominations. A sub-committee of the President, Vice-President, President- Elect and/or one other elected by Council would rank the nominations. Prof. Helms said that those wishing to be required to submit a CV. Prof. Galasko said that ideally regional representatives would put forward names and rank them. The final ranking would be done by the sub-committee. The proposal is that the Nomination Committee would write to everyone and collect CV's. Jim Foster said that he would seek advice on how RCSEd proceed with their nominations.

Action: Mr Foster

Prof Galasko said that there are also Scottish and Welsh bodies that the Faculty should register with. Prof Batt is to apply to the Scottish and Welsh bodies so that we can register with them.

Action: Prof Batt

- k. **FSEM Standing Orders:** Prof Galasko reminded Council that, the FSEM Standing Orders had been accepted by the two parent colleges as have the 'Duties of Officers' document. The Faculty can amend this document but any amendments to the Standing Orders will have to be taken as a motion to the AGM and if accepted then presented to the Council of the two parent colleges. To date there has only been one change with regards to signing Council Election Nomination forms electronically. Prof Galasko has put together a third document entitled '*Amendments/Additions to Standing Orders and Duties of Officers*' which shows this change.

It has been suggested that the term of Presidency be reduced to three years. If Council agrees with the proposal it needs to go to our AGM as a motion and then to the two parent college councils. Prof Galasko asked for Council's view on whether the term of office for President should be three or four years. Prof Batt said that as we are a young Faculty there was a need for flux at the top of Council. Prof Batt said that he felt that 6 years (1 as president elect and 1 as immediate past

president) would only lead Fellows and Members to be fatigued with whoever is leading for six years. Prof Helms supported Prof Batt in this and said that in terms of continuity everyone would be happy therefore this motion should be put forward at the next AGM.

I. MDU: Drs Budgett, Jaques and McCurdie attending a meeting with the MDU on behalf of the Faculty, also present was Dr Matthew Lee and Dr Christine Tompkins, MDU and Mary-Lou Nesbit, Head of Government and External Relations. It was pointed out that the MDU identify three types of SEM doctors

- i. Consultants treating sports people following a referral
- ii. Doctors attending sports events
- iii. Specialist sports medicine Doctors employed by sports clubs in an 'occupational health role'

MDU advised that they have no intention of following MPS by withdrawing indemnity cover for contracted work for Premiership football teams' although this would be dependent on the MDU having been informed in advance of the work doctors are undertaking and MDU agreeing to indemnify this work. The MDU indicated that they currently have only a handful of members whose work is primarily SEM. Dr Jaques advised that the MDU actuaries perceive a significant risk in doctors looking after professional sportsmen and women and have asked that the Faculty start to collect data on "unforeseen events." The MDU have 180,000 doctors on their list and SEM doctors barely get into double figures. There is a worry that the data they have is not the full extent of their work and the consequences would be quite serious.

Prof Galasko said that the Faculty should take on the brief of "untoward incidents reports", and inform defence societies, as part of our appraisal process. Prof Fairclough said that it is very difficult to collect data on adverse incidents, if we had a means of recording sports events and an identification of injuries it would be easier to record adverse injuries. It was thought that presently there are only about 10% of adverse injuries reported. Dr Jaques said that if we can advise the MDU on adverse injuries they will make changes to their policies. Dr Jaques said that the MDU have absolutely zero data with which they assess adverse injuries. He feels that there are two ways to collect data firstly through the appraisal system and secondly set up a system asking Fellows and Members of the Faculty to advise on adverse injuries whether or not there has been a claim. Dr Jaques said that he feels that it should be set up by our Council as part of the paperwork for appraisal.

m. Untoward Incident Report: Dr Jaques has included as Paper 5 with the agenda, a draft "Untoward Incident Record Form", which he has reproduced with permission from the Royal College of Physicians of London. Prof Galasko asked whether we should record the date and time of incidents. Mr Foster said that he thought this was an area where the Faculty should take legal advice in case of malpractice. It was thought that it may be relevant to give information if no date or time can be linked to a specific incident. It was felt that date and time should be taken out of the document to make the data more

anonymous. It was pointed out by Dr Jaques that there are two separate functions for this form firstly, use the form as it is for FSEM appraisals and secondly, to be used for collection of data for the MDU. When it is being used for collecting incidents for the MDU it should be used without recording date and time. It was also suggested that the time could be left in but the date taken out. Mr Foster has said he would try to get some legal advice on this. **Action: Mr Foster**

It was agreed to collect data as part of the appraisal for the next 12 months and then see if we are getting anything useful back. If useful information is gathered then we should float this as a Faculty issue.

Action: Appraisal Committee

- n. **2012 Olympic Games:** There has been approach from FIMS to host the 2012 pre Olympic Conference. This proposal will be put forward by the President of FIMS at their next meeting which is to be held in Barcelona on 20th November 2008.

Prof Batt reported that he had attended a meeting at Richmond House on Tuesday 28th October with David Sowden and Ian McCurdie. They met with Judy Jones from the Department of Health and the new Public Health lead. He said that it is the most positive meeting that he has had with the DH. There is an appreciation that the Article 14 is sub-optimal and that there may need to be some changes made regarding interpretation of standards, Judy Jones hopes to pull together a meeting on 4th December with Prof David Rowley (PMETB), reps from the Faculty and reps from JRCPTB it is hoped that they will be able to expedite the application process. The DH and NHS have a commitment to staff the 2012 Olympic Games and it is estimated that they will probably need about 75 doctors, 50 working with LOCOG and 25 with Team GB. Judy Jones is trying to help with this process. There are two issues, firstly doctors working in NHS – will they be covered by crown indemnity.

There is also the issue of the 2012 Games Legacy. This is topical and provides an opportunity for the Faculty to put forward a document supporting the development of Sport and Exercise Medicine across the UK as part of the drive to promote health, prevent obesity etc and treat the injuries that can occur with sport and exercise. Teams in each PCT, led by a consultant in SEM, with a remit to promote exercise, prescribe customised exercise for 'at risk' patients, stimulate behavioural change to get people involved in physical activity and to treat the injuries that may occur, is one way forward. If members of Council have any views Prof Galasko will put a document together and send it to Tessa Jowell. Prof Galasko also spoke to Lord Addington who advised that now is the time to be thinking of the 2012 legacy as people are talking about it.

Prof Batt will write a draft document which will be circulated to members of Council for their input. **Action: Prof Batt**

Prof Batt needs data from the FSEM Manpower Survey. The closing date for the Survey is the end of November. **Action: Yvonne**

At the meeting on 4th December they will be looking at the PMETB Article 14 paperwork which is highly complex. Tara Wilmott will also be at this meeting. They will be taking into consideration the fact that when people undertook their training there was no CCT in place and it is being queried whether JRCPTB are being too rigid. It was commented that FSEM were not looking to lowering the standard of doctors being accepted under Article 14 but it is hoped to make the process more efficient.

- o. Darzi Report:** Prof Batt spoke to David Sowden and the view is that the Faculty should not respond to the Darzi Report. It is felt that what we are doing with the DH will be the most effective way forward at this time. Prof Batt said that the group the Faculty are working with at the DH appears to be a very effective group.

6. Presidents Report:

- A. Strategic Plan:** The Strategic Plan meeting will be held at Chancellors in Manchester on 18th/19th December. The full details will be sent to Council members next week. There are still one or two people that Sheila Damon has to contact and she will be doing this soon. The plan is to meet late on the Thursday morning and finish around 3.30pm on the Friday. Everyone will be staying at Chancellors University accommodation and conversations will continue over dinner.

- B. FSEM/BASEM working party:** Dr Victor Cassar-Pullicino has been asked to arrange the first meeting; they will select their own Chairman. Dr Pullicino will put together a memorandum of understanding which will be presented to the Council of both FSEM and BASEM for comment and agreement. Prof Galasko asked Dr Simon Till to make contact with Dr Pullicino.

Action: Dr Till

- C. Dance Medicine:** Dance Medicine is starting to appreciate the connection between Sport and Exercise Medicine doctors and Dance Medicine. Dance Medicine can be regarded as a specific sport. In the future they will be looking towards FSEM trained doctors in Dance in areas such as ballet etc which can be considered as an elite sport. Dance UK is working in partnership with the Olympic Medical Institute (OMI), the Jerwood Centre for prevention and treatment of Dance Injuries at Birmingham Royal Ballet, Laban Dance Science Department and the University of Wolverhampton. Dr Till suggesting looking at performing arts also and has agreed to get some contact details.

Action: Dr Till

It was thought that when it comes to recertification doctors for dance and the performing arts will need necessary criteria in place. It was also suggested that the Faculty might also help BIMM their members may struggle when it comes to re-certification. Prof Galasko said that there is a difference between Dance Medicine and the Performing Arts and BIMM whose remit is wider than the management of conditions related to sport, exercise and other forms of physical activity. He felt that at this stage it would not reflect well on the Faculty to create Associate Fellowship for members of BIMM. Those whose work is in the area of Sport and Exercise Medicine have had the opportunity to apply for Foundation Fellowship or Membership of the Faculty and can apply for Membership by election if they have the qualifications

required. Prof Galasko said that our trainees are eligible for Associate Membership before they have passed the Diploma Examination.

Dr Jaques agreed that Dance Medicine, winter sports etc would be considered as SEM but we need to think about the BIMM group as they are people we associate within SEM and at the moment they are adrift. He suggested that we would need a document to indicate what would be required if we were to consider them for Associate Membership.

Action: Prof Batt

- D. **BUPA:** No further comments sent. They are reviewing their position.
 - E. **Article 14/PMETB:** There is to be a meeting with PMETB, the Faculty and JRCPTB on 4th December 2008. It was apparent at the FSEM AGM that a number of people are concerned about their application to be included on the Specialist register through Article 14 and the Faculty agreed to send out a questionnaire asking about their application to PMETB. Prof Galasko advised that the response has been disappointing; a total of 153 responses so far. He asked if we should send out a further questionnaire. It was felt that we should send out a reminder advising that we need to know this information and require a response and that even a nil response would be important. We should advise them that this questionnaire is important to people's careers.
- Action: Prof Galasko**
- F. **Sub-specialisation:** It was agreed that the Faculty should not consider Sub-specialisation in SEM. We are not training doctors for specific sports.
 - G. **BSSR-FSEM:** Nothing further to report.
 - H. **2012 Legacy:** See above.
 - I. **Needle Phobia:** A number of sports are now introducing blood testing as part of an effective anti-doping programme. The problem arises that some players have said that they have a phobia of needles and don't want to give blood samples. The Faculty had received a letter from the Profession Players Association seeking expert medical advice on whether such a phobia of needles is medically recognised (and if it is possible to tell whether a specific case is genuine). They have said that it would also be helpful to learn whether the medical establishment has a recognised process of dealing with such phobias? Advice has been taken from UK Sport and UEFA. It was agreed that very rarely, in case of malignant vaso vagal syndrome, venesection might be dangerous but unless this can be proven needle phobia would not be accepted as an excuse for avoiding giving blood samples.
 - J. **Questionnaires:** A question was sent to Fellows and Members asking if they would like to have a meeting on "How to get the best from your appraisal". They have been asked to respond by the end of this month.
 - K. **Coat of Arms:** Prof Galasko thanked Jim Foster for all he had done to help with the Coat of Arms for the Faculty. As requested by Mr Foster, Prof Galasko asked for suggestions from Council Members for a design for the Coat of Arms. Suggestions included Herodicus and Galen. Galen on one side (the first sports physician); Herodicus on

the opposite side (who in the 5th century BC advised on the benefits of exercise) and a depiction of a ruptured tendo-achilles in the centre. As Dr Jenner noted he was a pretty good runner who was finally undone by an injury to his Achilles tendon. Rupture of the Achilles tendon was also described by John Hunter who suffered this injury and treated it conservatively with apparently a very good result. It was also discussed whether we should include something from our two host Colleges for example the seeing hand from RCSEd and something similar from RCPL. There was thought also of a Greek discus thrower. It was felt that it would be nice to have someone doing something physical and to consider male/female and age elderly/young. Prof Galasko asked council to also consider a motto for the Coat of Arms. e.g. Childhood to Old Age, Exercise is Health etc. It was thought that we could ask Fellows and Members to come up with some ideas for a Motto.

Action: Prof Galasko

- L. Quorum for AGM:** Prof Galasko said that the minimum number of attendees at an AGM had not previously been discussed and asked advice on what we should have as a quorum. Mr Foster said that he would seek legal advice on a quorum for a Fellowship of 500.

Action: Mr Foster

- M. Australasian College of Sports Physicians:** Nothing to report.

- N. Associate/Affiliate Membership:** See above. To be re-considered in 12 months.

- 7. Appraisal and Appeals Committee Report:** Prof Wallace reported that there were currently 27 appraisals being undertaken by the Faculty. Ms Rita Capaldi is working on this in the Faculty office and Prof Wallace reported that she was very efficient. There are presently no appeals.
- 8. Honorary Secretary's Report:** No Report
- 9. Education Committee Report:** No Report
- 10. Examination Committee Report:** Dr Beattie forwarded a post meeting report.

Post Meeting Report of the Examination Committee submitted by Dr Beattie.

There are a number of issues that have come to a head over the past week since the 30th October and these form the basis of the Report.

- i. The exam is due to take place on 19th November 2008. 23 candidates are eligible to sit the exam either from passing the written exam on this occasion or previously. This will be the last time the examination will be run in its current format and anyone who fails to pass on this occasion will need to be made aware of the different regulations and form of the exam. This is in hand with information going out to all future candidates, information will be on the website and the Examinations Department will do all they can to ensure that candidates are aware of the change to regulations.

With regard to the next exam students from Edinburgh University have been approached to act during the exam and we will see how this goes to evaluate its progress. Helen Cameron who has agreed to speak on the Trainers Day has suggested that we use the Actors Union again but we have had problems with them as discussed previously. However Jumbo

Jenner may be in a position to use these in the Apothecaries and some decision regarding this will need to be made as soon as possible.

The format of the new exam is almost ready. After discussions with Hettie Till, it was concluded that for this exam 150 single best answer (SBA) questions would be suitable. These are similar to multiple-choice but there is a stem and 4 choices for answers, only 1 of which is correct. It is envisaged that 150 of these in 2 ½ hours would be an appropriate exam. This may well have to be assessed by trial and error and only with the information of 2 or 3 exams will appropriate standard setting be possible.

The short answer questions have been removed and these will be replaced by extended matched items. Hettie Till was of the opinion that 16 stems with 3 branches per question, chosen from 8 choices would give a suitably rigorous exam. This is not quite the format that we have in place at the present or had anticipated using, but she feels that this would give us a more rigorous exam which again would be more amenable to standard setting. Some of the questions that are already in the bank are not of suitable quality and she has suggested that we use the Training Day to develop between 8 and 12 questions with another 4 coming from a modified databank.

All of this should give us enough scope to run the examine successfully in the Spring but a substantial amount of work will be needed by the Examinations Committee and all the examiners to produce further exam questions for November and to complete a databank. However the main point is to have the exam suitable for running in the spring.

- ii. The next issue that needs to be addressed is on what terms Hettie Till or another Psychometrician is employed. The costs of these are being looked at by Yvonne Gilbert at the moment together with officers in the College of Surgeons. Some decisions will need to be made along these lines as soon as possible.
- iii. The Exams Department will work with Yvonne Gilbert and other officers in the College of Surgeons to produce a robust set of guidelines for the conduct of exams in the future. This may well be necessary because the Apothecaries are withdrawing substantial support for the exam and we may have to send officers from Edinburgh to London to supervise the exam. Clear, explicit written instructions about the conduct of all aspects of the exam are therefore required so that anyone invigilating or supervising the exam or indeed running it has very clear instructions as to how things should proceed. This is in hand and will be assessed in due course by the Examinations Committee.

11. External Affairs Committee: Dr Fairclough spoke of a document produced by the Department of Office of Health Economics which was published in March 2008 on NHS outcome and productivity measuring the Outcomes, Performance

and Productivity and routine measurement and analysis of the outcomes of health care for patients and said he thought that it would be relevant to the Faculty regarding duty of care.

- 12. Finance Committee:** Prof Helms suggested splitting the money that FSEM have on deposit between different banks due to the current financial crisis.

Action: Yvonne

- a. Prof Helms reported that the reminder to Fellows and Members regarding payment of outstanding fees has been successful and most people were now up to date. There are one or two Fellows and Members payments that are still outstanding and it may be that further action will be required. Yvonne will keep Prof Helms informed in the New Year and see what action, if any, will be necessary.
- b. With regard to Charitable Status Prof Helms advised that the Faculty should continue under the charitable status of RCSEd.
- c. The question has been raised whether the Faculty's annual subscriptions is recognised by the tax bodies. Mr Foster asked if we had received advice from HM Customs and Excise on this. We have not and Mr Foster has said that he will look into this.

Action: Mr Foster

- 13. Nominations Committee:** Nothing to report.

- 14. Training Committee Report:** Prof Cullen is in Australia but a list of current trainees in SEM was tabled.

- 15. SAC Report:** Prof Batt advised that regarding the re-application of training programmes for the West Country had not been finalised. He reported that there are 26 trainees in the training curriculum two from the military. Regarding CCT training there are 9 out of 21 on a 4 year programme. We are waiting to hear about money from DH for a further ten run through jobs.

- 16. Report from Lead Dean:** No report.

- 17. Report from the Irish Faculty:** Dr O'Neill advised that his term of office as Dean of the Irish Faculty was coming to an end. The Dean elect is Dr Philip Carolan and he will represent the Irish Faculty at this Council in future. Dr O'Neill said that he would like to thank the President and Council and advised that the Irish Faculty have been happy to participate and will continue to do so. He advised that the Allied Medical Specialist had considered Associate Member and felt that the Faculty (Irish Faculty) had enough to deal with and they decided to concentrate on a Medical Faculty. Dr O'Neill commented on the fact that in the past both Faculties dates for Council Meetings had clashed on some occasions and the Irish Faculty have noted that the UK Faculty has published their dates for the next three years and therefore there should be no further clashes. Prof Galasko thanked Dr O'Neill for his help and support during his term as Dean and wished him well for the future.

- 18. Trainees Report:** Prof Galasko advised Council that Dr Rick Seah is putting together a programme for a taster course in SEM and when it is done it will be brought to Council.

Action: Dr Seah

- 19. ISEM Report:** ISEM had a lunch at Buckingham Palace at the end of October in honour of the award of the Prince Philip Medal. It was the second time it had been awarded in the history of ISEM and because of the name it was hosted by Prince Philip at Buckingham Palace. During the event the Faculty representatives present tried to gently publicise SEM to people and make them aware of the fact that the ISEM are the research arm of the Faculty and that they are trying to set up funds for research in SEM. There were around 60/70

people present among which were Prince Philip's private secretary Andrew McAlpine son of Sir Robert McAlpine. Prof Batt suggested to him the possibility of a Sir Robert McAlpine research building. Also present was Mihir Bose, BBC Sport Correspondent, Tessa Jowell, Minister for the Olympics, The Duke of Edinburgh and Roald Bahr who received the Prince Philip Medal. It was felt that this event could only do SEM good.

20. Any Other Business.

- I. There have been some documents arriving in the Faculty office seeking advice from the Faculty the latest being an NHS Clinical Knowledge Survey. The Faculty wish to put in place a formal mechanism for dealing with these documents. It was felt that they should be forwarded to the External Affairs Committee to assess and try to find someone with the appropriate expertise to deal with each separate subject. We would have to have a clear definition of what we can ask and responses would require to be clearly vetted and monitored. Those producing the guidelines would require to look at the document and advise whether it is a good document, we would need a list of expertise of people, who are in jobs in different areas, to forward documents to for review. Prof Batt asked for an oversight list to be available for every Council meeting – a working document. Who should do the oversight – step one is to get the information. Prof. Batt agreed to ask BJSM if we can use their data base. If not the Faculty will have to develop its own.

Action: Prof. Batt, Prof Fairclough and Prof Galasko

Prof Batt suggested the possibility of using electronic recording so that outcomes could be collected in a more standard format making it easier to transfer later onto a computer. He advised that PCP have produced a disc although it would require someone to go through this and tidy it up. Prof Batt said that he would talk to James Brown about this.

Action: Prof Batt

- II. Prof Galasko advised Council that Domhnall MacAuley had been in contact with the Faculty to advise that one of his colleagues at the BMJ is pioneering an initiative called doc2doc. It is an online medical community from the BMJ Group. It will open to invited users in the middle of November, with a full launch in early 2009. The site gives groups and societies the opportunity to have a free public or private area where they can hold discussions, post notices, upload pictures and videos, plan events and network. There are also clinical forums covering all specialties, general discussion forums and blogs. Prof MacAuley wants to know if the Faculty would be interested. Prof Batt said that he thinks that the Faculty should take up this opportunity and that he will respond.

Action: Prof Batt

- III. Updated GMC Confidentiality document – Prof Galasko said that from the Faculty's point of view confidentiality is a problem when treating elite sportsmen and women and asked whether the Faculty should respond in any way to the document regarding what sportsmen and women deal with. Council are to let Prof Galasko know their views within the next few days.

Action: All Council

- IV. Prof Batt informed Council that the Faculty office are receiving an increasing number of emails from research students looking for

placements and that there is a need for something to be written more specifically to Members and Fellows who can respond directly if interested, on whether or not they are happy to receive enquiries from students looking for temporary placements in SEM. Look at setting up a list of those interested. Dr Till said that we should look at a way of collaborating with BASEM on this as they receive similar enquiries.

Action: Yvonne

- V. Prof Fairclough advised Council that he had received a letter from a doctor regarding WADA rules and asked if we have a central agency who would deal with these enquiries. Prof Galasko advised that this was regarding NZ response to a change to steroid injections regulations. He said that such enquiries should be dealt with by UK Sport.
- VI. Dr Jaques enquired regarding the use of secretarial time. He advised that he passes quite a lot of Faculty work onto his EIS secretary. It was agreed that secretarial support is a major issue and it was suggested that a way forward would be to use remote dictation. Prof Galasko advised Council that Rita Capaldi now works 29 hours for the Faculty which is the maximum she is prepared to work and therefore we may need to consider employing someone else next year. Prof Helms said that the Faculty would be prepared to pay for extra assistance for Senior Faculty Officers. Dr Jaques has agreed to monitor the FSEM work he is asking his secretary to carry out over the next month and he will forward a report to the Treasurer with a view to this being charged to the Faculty.

Action: Dr Jaques and Prof Helms.

The meeting closed at 3.00pm.

The next meeting will be held at 10.30am to 3.00pm on 2nd February 2009 in the Society of Apothecaries in London.