Injuries to staff. In this issue, Kathleen Ferguson raises some concerns about this; a subject which we will return to in a subsequent issue. Altogether, I think it is time to reconnect with the Trendy Vic Society – I’d be interested to hear your thoughts.

Also in this issue we have a further contribution to the workforce debate. Sean Tighe, who chairs our Independent Practice Committee, speculates on developments in the independent sector and their implications for the future workforce. It is three years since I became editor of Anaesthesia News, and the time has come for me to stand aside and let others bring you a fresh view. Starting next month, Council members will edit their own issues on a month-by-month basis, which we hope will keep the newsletter lively and interesting. I would like to thank all of you for reading Anaesthesia News and for sending me so many excellent contributions; I also offer my sincere apologies to those of you whose material I have lost, rejected, mangled beyond all recognition or misattributed. Please don’t stop writing to us – Chris and I will continue to manage submissions.

Last but not least, we extend a very warm welcome to our new President, stop writing to us – Chris and I will continue to manage submissions rejected, mangled beyond all recognition or misattributed. Please don’t News and for sending me so many excellent contributions; I also offer my sincere apologies to those of you whose material I have lost, rejected, mangled beyond all recognition or misattributed. Please don’t stop writing to us – Chris and I will continue to manage submissions.

It is with feelings of both excitement and apprehension that I write my first article for Anaesthesia News as President of the AAGBI. This year sees a change in the presidency of the three key organisations that represent anaesthesia, critical care and pain medicine in Great Britain and Ireland. Ellen O’ Sullivan now leads the College of Anaesthetists of Ireland. Jean-Pierre van Besouw the Royal College of Anaesthetists, and I have taken over as AAGBI President. However, this change in the old order does not signal a change in direction, but a continuation of the work of our predecessors. Jean Bythell, Harry Harrop-Griffiths, and Iain Wilson. It is traditional at this time to make comments about “standing on the shoulders of giants” but I will resist the temptation to draw this analogy on this occasion, as the new presidents are all taller than they replace and, in the case of the Royal College duo, particularly so. It is indeed a good thing that this multiple handover of leadership is so smooth and easy rather than revolving and heading in a new direction, and I think it is a particular advantage to anaesthesia and its associated subspecialties that the three Presidents are not only direct contemporaries but were all qualified in 1981 but also good friends. We will work hard together on your behalf and continue the good work of our predecessors.

I should perhaps explain the third of the quotations at the top of this article. My accession to presidency pre-dates Dr Val Bythell’s invitation to the post of Honorary Secretary sees an almost complete “descotification” of the higher echelons of the Association. Indeed, it sees a significant “gallification”, in that Richard and I are not only Welsh, but were delivered in the same hospital in Cheltenham, near Pontypool, by the same obstetrician who, interestingly, was the last to work at the Royal Free Hospital in the UK (Robert “Host” Hodkinson). With Paul Clyburn continuing as Honorary Treasurer, it is indeed a Welsh “grand slam”. We are considering making other two senior officers of the AAGBI Welshmen – step forward Steven Moriarty, Peter Nightingale and Iain Wilson. It is traditional at this time of the old order does not signal a change in direction, but a continuation of the work of the AAGBI Safety Committee will become both more important and much greater in volume as matters move forward, and I am delighted that this key committee is led by one of our most able AAGBI Council members, Dr Kathleen Ferguson from Aberdeen. We have asked that the lead taken by the Safety Committee is supported by the Safe Anaesthesia Liaison Group (SALG) and by the remaining elements of the NPSA that now reside in the AAGBI and the recently independent National Health Service Commissioning Board Special Health Authority.

Space does not allow me to wax further on the subjects of revalidation, training or NHS finances and changes – I will cover these in future articles – so I will draw my first report as President to a conclusion with a call to arms: anaesthetists of Great Britain and Ireland - stand up and be counted! We know that we are hard working; we know that we are professional; we know that the healthcare professionals who treat their patients. The work of the AAGBI Safety Committee will become both more important and much greater in volume as matters move forward, and I am delighted that this key committee is led by one of our most able AAGBI Council members, Dr Kathleen Ferguson from Aberdeen. We have asked that the lead taken by the Safety Committee is supported by the Safe Anaesthesia Liaison Group (SALG) and by the remaining elements of the NPSA that now reside in the AAGBI and the recently independent National Health Service Commissioning Board Special Health Authority.

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Dr William Harrop-Griffiths, AAGBI President