



Board/Council Elections - Examples of supporting statements

These were the successful candidates in the 2018 Board/Council elections

Dr Mike Kinsella

I am a consultant obstetric anaesthetist at St Michael's Hospital, Bristol. I have extensive experience of committee work for one of our professional bodies, having been on the committee of the OAA for a number of years ending as Honorary Secretary, and including chairing the audit, surveys and patient information sub-committees.

I am an editor of Anaesthesia journal, which has given me an insight into the workings of the AAGBI, and through that role, I am currently on two AAGBI guidelines working parties.

I have worked with the RCoA, editing the obstetric section of the Audit Recipe book through three editions.

I have been involved with the NPSA and NHS England on the neuraxial non-Luer project, which has truly enlightened me on the meaning of déjà vu, presque vu and jamais vu.

Dr Robert Self

I have been a Consultant Anaesthetist at the Royal Marsden Hospital since 2007. My clinical interests include anaesthesia in adult and paediatric oncology and Total Intravenous Anaesthesia. Previous roles include Lead Paediatric Anaesthetist and 'Out of Programme Lead' for a School of Anaesthesia. I am currently a College Tutor and also a Consultant Appraiser.

I joined the AAGBI as a Senior House Officer and was impressed by the support offered to members and also the high quality Education activity. If elected to council, I would continue to focus on these two themes.

I have seen the benefits of Coaching and Mentoring, both as a mentor and a mentee. I completed the AAGBI Mentoring course in 2015. I continue to be active on the AAGBI Mentoring scheme – as a mentor, facilitator at Mentoring courses and delivering Mentoring 'taster sessions' at AAGBI conferences. I have regularly delivered lectures and facilitated interview practice at the GAT Consultant Interview Course since 2014.

There is an urgent need to focus on wellbeing of anaesthetists and to move towards what the Institute for Healthcare Improvement describe as 'Joy in Work'. If elected, this would be my priority for AAGBI members of all grades.

Dr Peter Young

My name is Peter Young and I have been a Consultant Anaesthetist since 2000 working in a district general hospital in Norfolk. I work full time clinically in anaesthesia and intensive care.

I have a particular passion for providing protective frameworks and support for junior and senior doctors at risk of individual or collective adverse scrutiny from governmental, legal and regulatory organisations for the performance their vocation. As anaesthetists we are under increasing pressure to perform at the highest level whilst undertaking complex tasks and making thousands of potentially controversial and in-exact decisions open to wide-ranging interpretation – all within a resource stretch service. When things go wrong, judgement often revolves around single decisions and we are in a culture where individuals are often held to account, rather than a recognition of the contribution of system failure. This can be individually devastating for the clinician but can also predispose to wider defensive practice and ultimately patient harm.

I introduced locally and then published a protective referral framework to smooth out controversy during ICU referrals and refusals, and am now exploring developing and trialing a multidisciplinary and 2 clinician approach to withdrawal of life sustaining treatments with Trust Board reporting and a resultant corporate sharing of responsibilities. I believe the AAGBI can influence this and it would be a privilege to be a part of this process.