



Working together – Crossing boundaries, inspiring and supporting our SAS doctors

May 2018



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All enquiries should be addressed to:
Training Department, Royal College of Anaesthetists, Churchill House, 35 Red Lion Square, London WC1R 4SG
020 7092 1500 sas@rcoa.ac.uk www.rcoa.ac.uk/sas

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Context

Introduction

The Specialty Doctor and Associate Specialist Joint Working Party (SAS JWP) was established in 2016 and brought together the Royal College of Anaesthetists (RCoA) and the Association of Anaesthetists of Great Britain & Ireland (AAGBI).

Recognising the significant current and future contributions SAS doctors make to our specialty, the goal of the SAS JWP was to better understand the SAS anaesthetist doctors' needs, and achieve the following aims:

- understand roles and responsibilities of the constituent organisations
- identify issues and produce a gap analysis report based on what actions need to be taken
- understand some of the barriers that exist for furthering SAS development.

The main outcome of the SAS Joint Working Party is this report, which meets the objectives described above and highlights the main issues identified through contact with SAS members, the working party's discussions and other sources such as SAS surveys and gap analysis reports. This report details the action plans the two organisations will undertake collaboratively.

The RCoA and AAGBI have agreed that this report would be reviewed and updated over time as necessary to ensure that it reflects the current needs of SAS doctors.

The term SAS doctor in this document will include all nationally recognised SAS grades as well as non-standard locally employed doctors (LEDs).

SAS JWP membership

Member	Representing
Professor Ravi Mahajan	Co-Chair, Vice-President, RCoA
Dr Samantha Shinde	Co-Chair, Vice-President, AAGBI
Dr Janice Fazackerley	Vice-President, RCoA
Dr Kirstin May	SAS Committee Chair, RCoA
Dr Lucy Williams	SAS Council Member, RCoA
Dr Olivera Potparic	SAS Committee Chair, AAGBI
Ms Karin Pappenheim	Executive Director, AAGBI
Mr David Calderon Prada	Secretary, RCoA

Available literature

- *SAS Anaesthetists – Securing our Workforce*, Dr Lucy Williams and Dr Kirstin May, June 2017: <http://bit.ly/2IEoqNL>
- *Fatigue and Anaesthetists*, AAGBI, October 2014: <http://bit.ly/2rHZ9bZ>
- *The SAS Handbook Third Edition*, AAGBI, November 2016: <http://bit.ly/2GdpLWF>
- *Age and the Anaesthetist*, *Anaesthesia News*, AAGBI, August 2016: <http://bit.ly/2IDWgmg>
- *Supporting Locally Employed Doctors (LEDs) across the UK*, NACT UK, October 2017: <http://bit.ly/2IB3tDt>

Who should read this report?

Anaesthetists of all grades and all healthcare professionals will benefit from reading this report. Due to the nature of this document, it is logical that the following groups, in particular, have access to this paper: SAS anaesthetists, SAS tutors and regional anaesthesia advisors (RAAs), trusts and clinical directors (CDs), the Academy of Medical Royal Colleges (AoMRC) and, of course, the RCoA and AAGBI.

This report is a written response from the two membership organisations (RCoA and AAGBI) most relevant to SAS anaesthetists. However, this is not exclusively intended to reach and reflect only our members' needs, but the whole spectrum of SAS doctors, as they each actively promote the interests of SAS doctors.

SAS leads and RAAs may find this report useful to understand how best they can support their SAS doctors, and they could also use it as a tool to advise SAS doctors.

This paper should inform its audience of the roles of the different organisations and further actions to be taken.

Methodology

Quantitative and qualitative data obtained from a gap analysis undertaken by each organisation and from the RCoA's *SAS Anaesthetists – Securing our Workforce* (June 2017) document have been used to develop this report.

Discussion and analysis

Background information

As a result of the RCoA's *Medical Workforce Census Report 2015*, which revealed that a significant portion of the anaesthetic workforce (22%) were SAS doctors, the RCoA ran an SAS survey to understand better the issues relating to SAS anaesthetists. The responses from the survey identified six major themes:

Education, training and career development	Certificate of Eligibility for Specialist Registration (CESR)	Profile and communications	Leadership	Wellbeing and support	Subscription fees
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Following this survey, the members of the SAS JWP produced a gap analysis report for each constituent organisation, which broke down the main issues SAS doctors currently face. More importantly, this exercise highlighted that the two organisations are already undertaking a significant amount of work on the identified themes, which may be unknown by SAS doctors. It also revealed a common denominator: SAS engagement is a major issue. The gap analysis ultimately enabled each organisation to draw up action plans to ensure that SAS doctors are better supported.

Themes

Education, training and career development

“ More training opportunity, just not a service-oriented post ”

SAS doctor, RCoA SAS survey, 2017

Issues

Since the introduction of a strengthened appraisal framework and revalidation, a duty of self-development has been placed on all medical practitioners. Career development is an integral part of the specialty doctor contract. This duty on the part of the doctor must be matched with the willingness on the side of the employer to support and assist training and development for all staff. However:

- some SAS doctors experience barriers to development and some do not have access to supporting professional activity (SPA) time
- SAS doctors may encounter difficulties in returning to training. Data suggests that doctors in non-training grades may be disadvantaged in the application process for the training programme

- at present, there is no mandatory mentorship scheme for doctors who are new to the NHS. While some hospitals may have this in place, this varies from hospital to hospital
- the general feeling of SAS doctors is that they have a lack of career advice.

Did you know?

The RCoA and AAGBI are keen to support SAS doctors to continue their personal career development, which is in the mutual interests of doctors, the specialty, the wider NHS and patients. It is imperative to recognise that SAS doctors have differing backgrounds, needs and aspirations, and therefore advice and support must be personalised.

The RCoA

- Since 2015, the SAS representatives on the RCoA Council have held engagement sessions with SAS doctors during all major College events. They have also given presentations to Clinical Directors and Regional Advisors Anaesthesia (RAA) to highlight ways to develop the SAS anaesthetic workforce.
- The RCoA has recently reviewed the RAAs' role, and it now includes career advice and guidance as a duty requirement. The RAAs have a good understanding of their local workforce, and close connections with other College staff and with their local training programme director. RAAs also know about training in their schools of anaesthesia.
- In 2016, the RCoA introduced an annual educational event for doctors new to the NHS, including SAS doctors. Due to the excellent feedback received, the College intends to continue holding this meeting. The *New to the NHS Meeting* aims to help newly appointed overseas doctors understand their role and responsibilities within the NHS. It includes discussions and workshops specific to SAS doctors, i.e. CESR and Equivalence, revalidation and appraisals. The meeting has so far been free of charge and CPD points are awarded to delegates. The event is part of the RCoA's efforts to support SAS doctors as valued members of the College. The next meeting will be held on Monday 9 July 2018.
- All educational events are open to SAS doctors. Details of future events are available on the RCoA's Events website: www.rcoa.ac.uk/events
- The RCoA is currently developing a new Lifelong Learning Platform and SAS doctors will have access to it. This will support their professional development and it will include logbook and e-portfolio services.

The AAGBI

- The AAGBI has published an updated edition of the *SAS Handbook*, which is designed to help SAS doctors, managers, and clinical directors: <http://bit.ly/2ljtWSy>. The AAGBI plans to update this regularly. The next edition will be available in 2019.
- The AAGBI hosted the first anaesthetic seminar exclusively for SAS doctors on 7 November 2017 which attracted 16 delegates, with excellent feedback from those attending. This exciting seminar was designed to help develop, support and inspire SAS doctors. Topics included leadership and development behaviours, how to write a case report/poster, one-to-one sessions on how to enhance/write a CV, and lectures and breakout sessions on clinical and non-clinical dilemmas as well as ageing, fatigue and burnout. Mentoring taster sessions were on offer throughout the day.

This event will be repeated in both London and regionally. The next seminar will be held on Wednesday 7 November 2018 at 21 Portland Place, London, and in 2019, outside London, with dates to be confirmed.
- The AAGBI opens the last day of its GAT ASM to SAS doctors who plan to sit the Primary or Final FRCA or who are applying for consultant posts (www.gatasm.org). This is an opportunity and educational resource to support interested SAS doctors in gaining the exam and for SAS doctors looking to develop their management and leadership roles. This opportunity is offered at an affordable price to all, and as the meeting moves round the country, it will improve accessibility to all.
- The AAGBI SAS Committee organised four seminars and three lectures at the Annual Congress as a way of raising the profile of SAS interests and doctors within AAGBI. The three seminars organised in 2017 were:
 - paediatric anaesthesia seminar on 12 June and 27 November 2017 led by Dr Smita Oswal
 - anaesthesia for trauma and orthopaedic surgery on 6 November 2017 led by Dr Santosh Babu
 - SAS seminar on 7 November 2017 led by Drs Samantha Shinde and Nancy Redfern.
- The following four seminars and a webinar are planned for 2018:
 - respiratory disease and anaesthesia on 5 March 2018 led by Dr Smita Oswal
 - paediatric anaesthesia seminar on 15 October 2018 led by Dr Smita Oswal
 - anaesthesia for trauma and orthopaedic surgery on 2 November 2018 led by Dr Santosh Babu (Regional Seminar run in Manchester)
 - SAS seminar on 7 November 2018 led by Drs Samantha Shinde and Nancy Redfern
 - SAS webinar on 19 June: *SAS webinar for SAS doctors – safety, survival and sleep.*

The AAGBI

The AAGBI has a mentoring programme which aims to:

- define mentoring and enable participants to understand the benefits
- develop a working knowledge of a framework for mentoring: the skilled helper model¹
- develop mentoring skills: <http://bit.ly/2KXYtgM>
- introduce different mentoring styles
- explore ethical issues as well as practical applications of mentoring at work.

The AAGBI has developed a network of trained mentors across the UK and Ireland. The scheme has been set up so that members interested in having a mentor or receiving coaching can access a team of trained AAGBI mentors throughout the country.

This is a voluntary scheme for both mentors and mentees, with services being provided free of charge. Potential mentees can book a session with one of our trained mentors in their region via the scheme. This service is offered online: www.aagbi.org/professionals/welfare/mentoring/aagbi-mentoring-scheme

The AAGBI has an SAS audit prize competition at Annual Congress where SAS doctors can showcase their projects and be published in a special online supplement of *Anaesthesia*.

The RCoA and AAGBI have specific areas on their websites for SAS doctors that contain relevant resources to guide SAS doctors on potential career choices and job development:

- RCoA: www.rcoa.ac.uk/sas
- AAGBI: www.aagbi.org/professionals/sas/resources

1 Egan G. The skilled helper: a problem-management and opportunity-development approach to helping (ninth edition). Belmont, CA: Brooks/Cole, Cengage Learning, 2010.

Certificate of Eligibility for Specialist Registration (CESR)

“ Provide equivalent of e-portfolio for those wishing to go for CESR ”

SAS doctor, RCoA SAS survey, 2017

Issues

CESR is the process of assessing an applicant's training and experience against the current training programme requirements, as set out in the CCT curriculum in anaesthetics, in order to gain a Certificate of Eligibility for Specialist Registration (CESR) for the Specialist Register held by the General Medical Council (GMC).

Evidence from engagement sessions and surveys of SAS doctors suggest that a significant number of SAS doctors may have a lack of understanding of the CESR process. The whole process is seen as unnecessarily complicated rather than an opportunity. Potential applicants are often unaware that the framework is set by the GMC, with each College acting only to assess equivalence of knowledge and skills with those of a new CCT holder.

The CESR success rate in anaesthetics is over 50%, at present. The RCoA has considered in-house events providing specific guidance on CESR and compared events held by other organisations. However, the RCoA concluded that it would not be good value for money for SAS doctors when most of the information is available free on the GMC and RCoA websites.

Did you know?

The RCoA

- The RCoA has an efficient process for assessing CESR applications and dedicated staff who can provide applicants with advice. The RCoA can be contacted via email (equivalence@rcoa.ac.uk) or phone (020 7092 1555). The RCoA Equivalence Committee meets regularly to discuss the process, guidelines and individual applications. The Equivalence Committee has lay and SAS input as well as consultants.
- The guidance on the RCoA website has been recently reviewed and streamlined (as much as possible since this is a complex process): www.rcoa.ac.uk/careers-and-training/cesr-and-equivalence
- The RCoA is offering RAAs the opportunity to observe equivalence assessments to increase knowledge of process.
- The annual *New to the NHS Meeting* organised by the RCoA offers a session on CESR: <http://bit.ly/2lkPdvT>
- The RCoA has published several articles on CESR, most recently in the *RCoA's Bulletin*, March 2017: <http://bit.ly/2wFSZMA>

The AAGBI

- The AAGBI included CESR advice at its November 2017 seminar and both the RCoA and the AAGBI will offer educational sessions sharing CESR experience in the future. AAGBI has an SAS helpdesk available at major conferences. The AAGBI's SAS Committee is a source of experience and knowledge and members are able to informally share this with others.

Profile and communications

“ SAS doctors should not be looked down upon (which unfortunately still happens) ”

“ The college does very little (anything?) for SAS grades and the general perception held by most of my colleagues is we are merely an afterthought ”

SAS doctor, RCoA SAS survey, 2017

Issues

In spite of the fact that 22% of the anaesthetic workforce are SAS doctors, a significant number of SAS anaesthetists feel that they are neglected by organisations that should be representing their interests. Channels of communication should be open for SAS doctors to engage with constituent organisations.

Did you know?

The RCoA

- SAS doctors are involved in all areas of the RCoA. The College has two elected members of Council and they represent SAS anaesthetists' interests on all major committees which means SAS doctors are involved in all consultations.
- The RCoA conducted a survey in 2016 to explore the SAS anaesthetists' needs and a summary report was published by the College: <http://bit.ly/2IEoqNL>
- The RCoA has a dedicated SAS support email: sas@rcoa.ac.uk
- Guidance documents are available on the RCoA's website.
- The RCoA offers regular contributions from the SAS Committee to the membership magazine, the *Bulletin*. A member of the SAS Committee has joined the *Bulletin* editorial board.
- The RCoA holds the *New to the NHS Meeting* annually.
- Regular SAS sessions have been held at major RCoA meetings since December 2015 as well as UK-wide listening events.
- The SAS Joint Working Party has been created to provide a voice to SAS doctors and their issues.
- The *Membership Benefits Booklet* includes a dedicated section for SAS doctors.
- The RCoA encourages nominations for SAS anaesthetists who excel for College awards.

The AAGBI

The AAGBI will keep an active focus on the needs and concerns of SAS doctors. The interests of SAS doctors are considered within the AAGBI at:

- AAGBI Council
- Education Committee
- SAS Committee
- GAT Committee
- Education Committee
- Membership Services Committee
- Safety Committee
- Day Case and Short Stay Surgery Working Party
- Good Anaesthetist Working Party
- Management of Proximal Femoral Fractures Working Party.

The AAGBI will ensure SAS doctors are fully taken into account in their member communications. An SAS membership engagement strategy is to be launched in 2018 to raise the profile of SAS doctors in all areas of activity.

Leadership

“Recognise our wider roles and responsibilities in healthcare”

“Involving us more in management and teaching roles”

SAS doctor, RCoA SAS survey, 2017

Issues

There are a significant number of SAS doctors in leadership roles, and many opportunities exist. However, many SAS doctors are unaware that they can undertake these roles.

Did you know?

The RCoA

The RCoA has opportunities for SAS doctors to develop leadership skills:

- at the RCoA, SAS doctors are involved in all areas of the College's work, e.g. committees, Council and the *Bulletin*
- there is an elected SAS anaesthetist position on the Board of all devolved nations
- the RCoA SAS Chair works with SAS leads of other specialties through the Academy of Medical Royal Colleges SAS Committee to exchange examples of good practice and develop the profile of SAS doctors.

The AAGBI

The AAGBI has a number of ways to recognise SAS doctors in a leadership capacity:

- involving SAS Committee members in guideline working parties, e.g. day case and short stay; management of proximal femoral fractures
- making a conscious effort to have a representative on any further follow-up work on ageing and any further relevant documents and guidelines
- SAS development grant – advertising resulted in five excellent applications and three awards made in 2017. Promotion of this will continue
- Evelyn Baker award – an SAS Committee member was added to the shortlisting panel for the first time last year. More nominations of SAS doctors are being encouraged
- the SAS Committee is involved in the development of educational opportunities for all grades of anaesthetists and organised a session (three lectures) at Annual Congress and Winter Scientific Meeting and they are currently organising a webinar on SAS issues
- the SAS Committee is encouraged to organise seminars (for all grades of anaesthetists). They have planned their first webinar which will take place 19 June 2018
- SAS views are expressed at education, safety and membership services committees. An SAS Committee member is co-opted into education, safety, membership and Council. AAGBI has a role as a voice for members, and discussion within the SAS Committee suggests that they can develop a stronger voice for the interests and concerns of SAS members
- AAGBI offers the annual SAS professional development grant to support training and professional development opportunities for SAS doctors who are members of the AAGBI.

Wellbeing and support

“ Preventing discrimination. Stopping the ‘dead end’ posts ”

SAS doctor, RCoA SAS survey, 2017

Issues

Some SAS doctors are unaware of the projects RCoA and AAGBI are undertaking which may be relevant to their wellbeing.

Did you know?

The RCoA

- The RCoA hosted an SAS conference in April 2018.
- The RCoA has held dedicated SAS Listening Events as a way to engage.

The AAGBI

The AAGBI has a strong record in welfare issues. It has a number of ongoing projects and programmes relevant to the wellbeing of SAS doctors.

- The Fatigue Project was initiated with a focus on trainees. It will be relevant to SAS doctors who are still on on-call rotas.
- The SAS Committee will be involved in ongoing work with ageing anaesthetists – particularly important for SAS doctors who are still on call. The publication of our report on *Age and the Anaesthetist* in 2016 highlighted a significant issue for SAS anaesthetists since many are working resident on-calls, despite the age profile of the grade being virtually identical to consultants. This needs active follow-up, as does related work on stress and burnout.
- Building links with the Practitioner Health Programme (PHP) which wishes to collaborate with AAGBI on SAS issues and wellbeing and develop support services to address the specific needs of SAS doctors.
- The Suicide Survey, looking at all grades, is ongoing.
- The AAGBI encourages SAS members to become mentors via their training programme.

Subscription fees

Issues

According to the RCoA's survey, SAS doctors are dissatisfied with their membership fees.

Did you know?

RCoA

AAGBI

Membership fees are currently being reviewed by each organisation. It is important to note that RCoA members already benefit from a lower subscription than fellows, and fees compare very favourably with other medical colleges.

Action plans and final remarks

Action plans

Following the above analysis, the SAS JWP has drawn up the following action plans addressed to the different stakeholders involved in the creation of this report and its audience.

	RCoA	AAGBI	The two organisations
Education, training and career development	<p>The website will contain up-to-date dedicated resources to assist SAS doctors with gathering evidence for appraisal.</p> <p>A form will be developed by the RCoA for SAS doctors to make a structured summary of their training and experience to date, which helps the RAA in an initial meeting to guide and make a development plan.</p> <p>RCoA will offer a comprehensive advice hub for SAS doctors via its website. This will contain advice on training, audit, QI, CPD, appraisal and revalidation. Some of this will be via signposting to other organisations such as AAGBI, GMC and AoMRC.</p> <p>RCoA will continue to offer advice for CESR via RCoA staff and website and the RAAs.</p> <p>RCoA will continue to engage key groups such as clinical directors and RAAs.</p>	<p>AAGBI will continue and expand its educational activities for SAS anaesthetists, including an SAS webinar for SAS doctors (2018).</p> <p>AAGBI will build on and develop its mentoring scheme.</p>	<p>Both will use the educational offering, make it accessible and inclusive of the interests of SAS doctors, e.g. through events.</p> <p>RCoA and AAGBI will continue to promote mentorship at a local level. The AAGBI will continue to offer training in mentorship, taster sessions and mentoring at all three of its major conferences (as well as at the SAS Seminar).</p> <p>Both will include SAS doctors in all their written communications.</p> <p>The group recommends that training requirements should be supported by Schools and training programme directors and facilitated by employers. See: http://bit.ly/2GciRRy</p>
CESR	<p>The current Equivalence template provided on the RCoA website will be kept up to date and simplified wherever possible.</p> <p>Events organised by the RCoA, e.g. <i>New to the NHS Meeting</i>, will continue to have a CESR session.</p>	<p>AAGBI will continue to provide a focus at its educational events and conferences in the form of an SAS helpdesk and sessions.</p>	<p>Both will continue and improve information and guidance within their educational offering.</p>

	RCoA	AAGBI	The two organisations
Profile and communications	<p>RCoA will continue to offer an SAS section in each College <i>Bulletin</i>. The College will continue to hold free SAS listening events.</p> <p>Will continue to offer updates and news items relevant to SAS doctors through social media platforms.</p>	<p>AAGBI will keep an active focus on the needs and concerns of SAS doctors. The interests of SAS doctors are considered within the AAGBI Membership Services Committee.</p> <p>AAGBI will ensure SAS doctors are fully taken into account in their member communications.</p> <p>An SAS membership engagement strategy is to be launched in 2018 to raise the profile of SAS doctors in all their areas of activity.</p>	<p>The SAS committees of both organisations will continue advocating for the interests and concerns of SAS doctors.</p> <p>Both organisations to be able to provide specialised advice through different routes.</p> <p>Both will support SAS visibility in written communications.</p>
Leadership		<p>The SAS Committee members are encouraged to organise seminars (for all grades of anaesthetists). They have planned the first webinar which will take place on 19 June 2018.</p> <p>The views of SAS doctors are represented at its education, safety, and membership services committees. An SAS Committee member is co-opted into education, safety, membership and Council.</p> <p>AAGBI has a role as a voice for members, and discussion within the SAS Committee suggests that they can develop a stronger voice for the interests and concerns of SAS members.</p> <p>The AAGBI offers the annual SAS professional development grant to support training and professional development opportunities for SAS doctors who are members of the AAGBI.</p>	<p>Both RCoA and AAGBI will:</p> <ul style="list-style-type: none"> • continue to have SAS presence/representation at all major committees • encourage SAS doctors to write articles for the <i>Bulletin</i> and <i>Anaesthesia News</i> • encourage nominations for RCoA and AAGBI awards • encourage SAS doctors to attend leadership courses and events.

	RCoA	AAGBI	The two organisations
Wellbeing and support	<p>RCoA will proactively identify and promote a positive image and positive role models.</p> <p>RCoA will continue to hold SAS Listening Events across the UK.</p>	<p>AAGBI will continue ongoing work with ageing anaesthetists – particularly important for SAS doctors who are still on call. The publication of the report on <i>Age and the Anaesthetist</i> in 2016 highlighted a significant issue for SAS anaesthetists since many are working resident on-calls, despite the age profile of the grade being virtually identical to consultants. This needs active follow up, as does related work on stress and burnout.</p> <p>AAGBI will continue building links with the Practitioner Health Programme (PHP) which would like to collaborate further with AAGBI on SAS issues and wellbeing and develop support services to address the specific needs of SAS doctors.</p> <p>The Suicide Survey – looking at all grades – is ongoing.</p> <p>AAGBI encourages SAS members to become mentors via their training programme.</p>	<p>Both RCoA and AAGBI will promote wellbeing through all available platforms: events, written articles and websites</p>
Subscription fees	<p>Currently, the RCoA is undertaking a governance review including the definition of membership categories and fees. SAS Council members are actively involved in these discussions and advocating for the SAS group.</p> <p>Upcoming fees review will make allowance for LTFT which applies to a very small number.</p>	<p>AAGBI is mindful of maintaining strong value for money in setting its membership fees and takes SAS doctors into account in its pricing policy.</p>	<p>Membership fee structure and event costs are being reviewed. Outcome needs to be communicated clearly to all members and fellows</p>

Conclusion

The research undertaken by the two organisations involved in the SAS Joint Working Party has revealed that in general, they have not always engaged with SAS doctors as successfully as they would have wished. While the two organisations recognise that there is a lot more that could be done for SAS doctors, it was also noted that many of the things that are already happening are not well known by SAS doctors.

The SAS JWP thanks those SAS anaesthetists who have shared their views with them at the different events, through surveys and via email. However, they would like to see more SAS doctors attend events, contribute to the publications (both *Anaesthesia News* and RCoA's *Bulletin*) and share examples of good practice. There are many areas of non-clinical work SAS doctors are able to contribute to but not many come forward.

The SAS JWP feels that SAS anaesthetists can do much more to support their career and speciality by:

- engaging with national organisations
- attending regional and national events
- using the help and advice mechanisms on offer via websites, email and helplines
- making an active contribution to their speciality beyond purely clinical work and share this fact with others.

The RCoA and AAGBI recognise that SAS doctors form an important group of the anaesthetic workforce and, as this report shows, they have listened to the concerns of the group. Specifically, the creation of the SAS Joint Working Party itself highlights how important the SAS group is for these organisations. It must be recognised that because of the diverse nature of the SAS doctors' group, it would be very difficult (if not impossible) to meet the expectations and needs of every single individual. However, the SAS JWP members feel that, in partnership with each organisation's SAS committees, they have a better insight into the needs of the SAS group and to act upon these.

The two organisations take the concerns of SAS doctors seriously, and now have the data to build a constructive way forward. This report embodies the clear commitment each organisation has to continue to represent and support SAS doctors and to ensure that working together, they can cross boundaries, inspire and support our SAS doctors.

♥♥ *Coming together is a beginning; keeping together is progress; working together is success* ♥♥

Henry Ford

Appendices

Appendix 1

Terms of reference: SAS Joint Working Party

Purpose

- Understand what constituent organisations are doing for SAS doctors.
- Identify issues and publish a gap analysis report based on what actions need to be taken.
- Understand some of the barriers that exist for furthering prospects.

Constitution

The Working Party shall consist of:

- RCoA VP (Chair) and AAGBI Board Lead (Co-Chair)
- RCoA SAS Committee chair
- RCoA SAS Council member
- Chair SAS Committee AABGI
- Senior Management Lead for AAGBI.

Quorum

The quorum of the Sub-Group shall be three members.

Meetings

The working party shall plan to hold at least two face-to-face meeting per year with the majority of other issues being communicated electronically.

Conflict of interest

All organisations will be working towards a common goal set out in the ToR, but may be conflicted in some elements of this.

Action/output

Each organisation will be attending in an advisory capacity and reporting back to their individual Boards/ Council.

Appendix 2

Response to recommendations made by Supporting Locally Employed Doctors (LEDs) across the UK report, NACT UK, October 2017

The SAS JWP group feels that the guide designed by NCT UK is a good outline of big issues and it does highlight the importance of the SAS/LEDs workforce within the medical field and across the UK.

The NACT UK report draws up some recommendations which are relevant to various stakeholders, including this SAS JWP, and the group has matched what they are already doing and what they will do. The table below has been copied from the NACT UK report and an extra column has been added (SAS JWP actions) to respond to their recommendations:

	DME	Trust	HEE/PGD	College	SAS JWP actions
SAS	Support SAS tutor	RO Appoint SAS tutor Appraisal support	Regional support for SAS tutors	SAS representation in College	RCoA has an SAS Committee which meets periodically RCoA's Council has two SAS representatives
LEDs*	Advise LED tutor Career support for those seeking training Encourage Specialty Tutors to provide educational supervisors Aware of support and resources for IMG and returning doctors	RO Appoint senior support or include in SAS tutor role. Appraisal support. Support programme for IMG and returning doctors	Support DME with advanced careers advice. Support for IMG and returning doctors	Support for those wanting to return to specialty training	RAAs can offer career advice and guidance to SAS doctors RCoA website will contain up-to-date dedicated resources to assist SAS doctors with gathering evidence for appraisal <i>The New to the NHS Meeting</i> organised by the RCoA includes discussions and workshops on appraisals
CESR	Advise CESR programme support	RO Identify programme support Identify Educational Supervisor each post	Specialty school support for programmes including teaching programmes	Support CESR application with general and specific information. E-portfolio	RCoA will continue to offer advice for CESR via RCoA staff and website and the RAAs <i>The New to the NHS Meeting</i> organised annually by the RCoA will continue to have a CESR session AAGBI included CESR advice at their November 2017 seminar and both RCoA and AAGBI will offer educational sessions sharing CESR experience in the future AAGBI has an SAS helpdesk available at major conferences

	DME	Trust	HEE/PGD	College	SAS JWP actions
"F3"	Available for careers advice	RO Identify supervisors	Support DME with advanced careers advice	E-portfolio with option to add to current portfolio after leaving programme if wants to return	Clinical Fellows will have access to the Lifelong Learning Platform (as per below)
Fellows*	Support and ensure QA of posts	RO Appoint ES for fellows CT quality assurance	Specialty schools training available	E-portfolio available	From August 2018, anaesthetists that are not in training, but are members of the College, will have access to the Lifelong Learning Platform as a learner and/or trainer. This will also include logbook features and, subsequently, CPD access
MTI	Ensure training programme equivalent to training programme	RO Appoint ES Support training as per specialist training programme	Approve MTI post	Support MTI programme through sponsorship Receive reports MTI support team	RCoA quality assures and approves MTI posts RCoA approves MTI doctors for sponsorship RCoA holds an annual induction day for MTI doctors: <i>New to the NHS Meeting</i> In February 2018, the RCoA held its first MTI Hosts Day to support MTI clinical leads, supervisors and medical staffing RCoA monitors MTI doctors throughout their training through six-monthly reports

Royal College of Anaesthetists

Churchill House, 35 Red Lion Square, London WC1R 4SG
020 7092 1500 | sas@rcoa.ac.uk | www.rcoa.ac.uk/sas

 @RCoANews

 RoyalCollegeofAnaesthetists

The Association of Anaesthetists of Great Britain and Ireland

21 Portland Place, London, W1B 1PY
020 7631 1650 | info@aagbi.org.uk | www.aagbi.org

 @AAGBI

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