

Minutes of the Diagnostics Specialties Training Board meeting held at 10:00am on Friday, 16th September 2022 via Teams

Present: Fiona Ewing (FE) Chair, Judith Anderson (JA), Bernie Croal (BC), Kevin Deans (KD), Alan Denison (ADe), Jennifer Duncan (JD), Clair Evans (CE), Tom Foster (TF) (Guest Speaker), Raluca Felicia Grigorescu (RFG), Chris Kelly (CK), Ewen Millar (EM), Rosalind Mitchell-Hay (RMH), Dianne Morrison (DM), Sarah Mukhtar (SM), Leela Narayanan (LN), Karin Oien (KO), Surekha Reddy (SR), Gordon Reid (GR), Magdalena Szewczyk-Bieda (MSB), Sami Syed (SS), Alan Stockman (AS), Naveena Thomas (NT), Laura Thomson (LT), Struan Wilkie (SW), Tricia Yeoh (TY)

Apologies: Ralph Bouhaidar (RBo), Michael Digby (MD), Ray Fox (RF), Sai Han (SH), Teresa Inkster (TI), Celia Jackson (CJ), Jeremy Jones (JJ), John Kelly (JK), Jen Mackenzie (JM), Marie Mathers (MM), Lorna McKee (LMcK) (Lay Rep), Shilpi Pal (SP), Lokesh Saraswat (LS), Karen Shearer (KS), Marion Slater (MS), Colin Smith (CS), Louise Smith (LS), Divyanka Srivastava (DS) (SAS), Rebecca Wilson (RW)

In attendance (minutes): June Fraser (JF).

Item	Item name	Discussion	Agreed/Action
1.	Welcome, introductions and apologies	Apologies were noted. The group introduced themselves and the Chair welcomed all to the group.	
2.	Minutes of meeting held on 14 th June 2022	The minutes were confirmed as a correct record of the meeting.	Agreed
3.	Review of action points	<p>The majority of previous action points had been completed; however the following were still outstanding:</p> <ul style="list-style-type: none"> • Actions from 5.4 (7th March 2022 minutes) in relation to the STEP Programme and IMG Numbers. IMG was clarified as someone who has not graduated in the UK and requires extra support. • Setting up a sub-group to look at a SOP for home working (14th June 2022 minutes). Radiology volunteers have been sourced but still require someone from Histopathology. • Simulation – SP made contact with Julie Mardon who works in Forth Valley and is trying to set up a group of radiology sim trainers who will eventually roll out expertise to other consultants. SP can update at next STB. 	<p>STEP prog action (from 7 March 22) (MS) (LN has taken over from MS now) and IMG Nos required (ALL)</p> <p>Volunteer required from Histo for sub-group re SOP for home-working.</p>

4.	IEB – the trainee perspective – Dr Tom Foster	<p>TF was requested by Hamish MacRitchie, Chair of the Imaging Executive Board, to put together a piece of work from the trainee perspective with regard to SRTP and IEB.</p> <p>The resulting report was presented to the group and a Powerpoint Presentation and word document are attached which cover the information given.</p> <p>Comments given at the meeting:</p> <ul style="list-style-type: none"> • It was noted that the comments are about training experience, which is inevitable, rather than consultant practice. • 2 years have been lost with Covid which has changed how Radiologists have worked and from a training perspective there’s been a lot of lost opportunity. • Re home workstations – it was felt that having remote working falls short of what want to deliver for trainees and workstation resources are in short supply in the north. • Idea of Radiology academy was appealing but could have potential issues for funding. Simulation is another way in which opportunities for collaboration could be met. 	
5.	Main Items of business		
5.1	Radacad SBAR – SP	<p>An SBAR has been submitted in respect of Radacad, a simulation training system which was set up by Jeremy Jones, TPD in south-east of Scotland. It is in use in SES but is also a commercial package which has been taken on in areas of England. It is hoped to extend the cases on the system and to roll it out to other schemes in Scotland so that everyone has equal access to it.</p> <p>Comments on the paper were as follows:</p> <ul style="list-style-type: none"> • The paper did not completely address the question “Does Radacad fill an unmet curricular learning need” in terms of data. • There is another Radacad (in Australia) – potential conflict of name? • National PACS – perhaps a solution at some point? Would Radacad be duplicating this data. 	

		The merits of the system such as giving trainees real time local and regional teaching with a cohort of trainers they know, and pre on-call training were also discussed. It was felt that the paper was a good start but would need to be fleshed out further before being submitted to MDST.	SP to liaise with SW and update SBAR.
5.2	Access to Radiopaedia for Trainees – SP	<p>Radiopaedia is an online resource for radiologists. Within Scotland Radiopaedia access was free to trainees, however this is now coming to an end and looking to put a business case together to source some funding for this.</p> <p>Trainees use Radiopaedia regularly and particularly when studying for exams. A poll was held in Edinburgh asking trainees if they wanted to have local access to the Radiology All Access Pass and 87 % of trainees voted in favour of that (with a proportion of study leave budget going towards the cost.)</p> <p>Unfortunately no paper to consider and SP/JJ unavailable to speak to this item, therefore difficult to form an opinion.</p>	Further information and a paper required from SP/JJ and a survey extended to all areas to demonstrate value to trainees for this programme.
5.3	Diagnostics Sim Working Group – SP	<p>EVAR simulation is up and running which will be run with Vascular Surgery in Dundee and the plan is to roll it out to those on core interventional radiology training.</p> <p>Costings are being looked at for business case for additional resources for the rest of Diagnostics specialties also.</p> <p>Sim is still a key priority for NES who are working closely with the NHS Scotland Academy.</p>	
5.4	Trainee Views on Future Consultant Posts – SS/TY	<p>SS and TY were tasked, on the back of some work carried out by the Workforce Planning Group (part of the SRTP), to carry out a survey of what current trainees in Scotland want in a future consultant job.</p> <p>SS & TY presented the details of the survey to the group and these are attached for information.</p>	

		<p>It was noted how much the trainees value hybrid and flexible working which has never been considered in job planning before. Also noted lack of flexibility of movement. This could have a major impact outside the central belt. There was a discussion around challenges of placing trainees in posts outwith the Central Belt.</p> <p>The survey will be fed back to Amy Currie at Workforce Planning Group who will take it forward. The information can also be shared with other specialties if they wish to compare information.</p>	
6.	Standing items of business		
6.1	<ul style="list-style-type: none"> • Deanery issues - Report from Lead Dean/STB Chair • Quality 	<ul style="list-style-type: none"> • Awaiting Scottish Government decision on NES proposals for establishment expansion over a number of PG Medical training places across several specialty groupings. Paediatric and Perinatal Pathology is on the list and await hearing the outcome. • Pressing Scottish Government to acknowledge the rising number of LTFT trainees and provide a fix – i.e. whole time equivalent model. However times are tight for budgets. • DISSG board (sits above the Imaging Exec Board) – moves to change the structure to a new network called the Diagnostics Strategic Network. Work is ongoing. • There are active conversations ongoing regarding the wider structure of Diagnostics i.e. with healthcare scientists etc and looking at how can better join up data and intelligence to provide better advocacy for each other. • Gold Guide 9 went live in August – more flexibility and permissiveness for Inter Deanery Transfers – new category “any other reason”. • New Deputy Medical Director – Dr Lindsay Donaldson will take up post in next few months. • Realignment of portfolios within NES. There will be a new portfolio for Academic Liaison which will include closer working with universities, colleges and other stakeholders. • Visit to Histopathology at ARI at end of 2021, action plan review meeting in June 22 and now had final response to the action plan. Unfortunately there hasn't been a great deal of improvement so likely it will have a revisit. 	

	<ul style="list-style-type: none"> • Training Management – Recruitment, ARCPs, Rotations, Subspecialty, Redeployment Update, Examination Strategies • Professional Development • ED&I • MDST 	<ul style="list-style-type: none"> • Histopathology, QEUH – visit in early July. First SMART objective meeting has taken place at end of August. Initial response to action plan due in one week and will go to SQMG in November. • Diagnostics QRP is on 13th October – it will be a hybrid panel and rooms are booked in FGH and Westport. • Quality Data Group – looking at STS survey and will adjust question sets for non-patient based specialties. The hope is that the next run of the STS will have the new question sets. • STS for combined infection – on the radar and will be looked at by Hazel Stewart. • TPD Away Day on 1st November in Dundee. • Recruitment papers attached (Papers 5a and 5b) for information <p>No update</p> <p>No update</p> <p>The MDST and STB Chairs meeting takes place on Monday, 3rd October.</p>	
6.2	Service (MD/DME) report	<ul style="list-style-type: none"> • No particular update but happy to help with any issues and can take back to the DME group. 	
6.3 & 6.4	Royal Colleges report and Heads of School Report	<ul style="list-style-type: none"> • Exam sessions beginning shortly. • Looking at overall more potent attempt to gather data on workforce planning. • Concerns re Immunology and a potential service crisis. 	

		<ul style="list-style-type: none"> • 60th Anniversary of the college – symposium on 25th November at College of Surgeons in Edinburgh with high profile speakers. All are welcome. Link to registration: https://www.rcpath.org/event/rcpath-scotland-60th-anniversary-symposium-what-has-pathology-ever-done-for-us.html • RCR – exam reforms going on currently, in relation to FRCR 2B. Rapid reporting exam will change format and number of sittings for exams will be 3 per year. Also in discussion re ARCP progression points. 	
6.5	Specialty and STC reports	<p>Radiology Nothing additional to add.</p> <p>Nuclear Medicine</p> <ul style="list-style-type: none"> • All going smoothly. <p>CIT/Med Micro/Virology</p> <ul style="list-style-type: none"> • Combined Infection training – RF would like some interaction re reporting with Quality. • ALS courses were discussed and whether they are funded or not for dual infection trainees. <p>Chempath</p> <ul style="list-style-type: none"> • Trainees moved on to the new curriculum at last ARCP unless in last year of training. • Fill rate – all posts filled to date and one post out for advert for Feb 2023. • Exams – there was a worry about the Autumn diet but BC, with input from KD and others, has stepped up to lead the Autumn 2022 exam diet and it is all set. <p>Histopathology</p> <ul style="list-style-type: none"> • LS raised (through SM) issue about PM training in Aberdeen in Dundee where there is a lack of trainers. FE mentioned that RBo is moving forward with simulated training with mannequins for FP and this may be of interest for this issue. 	<p>JD/MM to contact RF re CIT Reports. FE to contact Simon Edgar re ALS funding.</p>

		<p>Diagnostic Neuropath</p> <ul style="list-style-type: none"> • Trainee in post on mat leave soon and will advertise for next post in 2023. <p>Paediatric and perinatal path</p> <ul style="list-style-type: none"> • Awaiting to see if funding for 4th post. <p>Forensic Histopath</p> <ul style="list-style-type: none"> • No report 	
6.6	Trainee report	<ul style="list-style-type: none"> • No Report • It was requested that feedback and thoughts be put in a report for next meeting. 	
6.7	SAS report	<ul style="list-style-type: none"> • No Report 	
6.8	Academic report	<ul style="list-style-type: none"> • SCREDS lecturer doing fine and there is also a SCREDS trainee in Aberdeen who is progressing well. • Undergraduates – many more medical students (400 total this year) • Additional academic representation – helpful to reach out to colleagues in Scotland from Radiology or other disciplines. 	
6.9	Lay Rep Report	<ul style="list-style-type: none"> • Lay rep on annual leave and unable to attend. 	
7.	Received for Information	None	
8.	AOB	<ul style="list-style-type: none"> • RC Path Research Committee email will be shared with the group – medal awards available for trainees. Closing date end of October. 	FE to share research opportunity to Board members.
9.	Date of next meeting	<ul style="list-style-type: none"> • Wednesday, 7th December at 2:00 pm 	