



## Contents

President's Report.....	2
CEO's Report.....	7
Postgraduate Dean's Report.....	9
Examinations Committee Report .....	10
Examination Pass Results.....	12
Training Committee Report.....	15
Committee of Anaesthetic Trainees (CAT) Report.....	17
Education Committee Report.....	19
Credentials Committee Report.....	21
Joint Faculty of Intensive Care Medicine of Ireland Report.....	22
Faculty of Pain Medicine Report .....	24
Honorary Treasurer's Report .....	26
Income and Expenditure .....	28
Independent Auditors Report to the Members of College of Anaesthetists of Ireland .....	29
Balance Sheet .....	31
Professional Competence Scheme Committee Report .....	32
Council of The College of Anaesthetists of Ireland 2012.....	33
Photographs From Recent Events .....	35
Education Calendar 2013.....	38
CAI Organisational Diagram and Reporting Pathways.....	39



## President's Report

This is my first report as my three year term as President began in June 2012. It was a great honour to be elected President of this prestigious institution and I will work tirelessly to serve all constituents of this College over the next three years.

I would like to personally offer my thanks to Dr Jeanne Moriarty, the Past President who steered the College successfully through an ever changing and difficult political and economic climate. She left the College in a very healthy position and it is a pleasure to take over from Jeanne and lead the College between 2012 – 2015.

### Council Elections

The following Council members completed their term of office: Prof Anthony Cunningham and Dr Brian Marsh. Dr Tom Owens retired from Council in February 2013. I would like to extend our thanks to them for their work on behalf of Council.

Prof Cunningham was instrumental as a Past President in driving the College forward to its current status as a highly esteemed postgraduate training college. We wish him well in his new role as Foundation Dean of the RCSI Perdana Medical School in Malaysia. Dr Marsh has also made a considerable contribution to the College during the last 10 years. He will be sorely missed from Council and I wish him well in his future endeavours. I also wish to acknowledge the excellent work undertaken by Dr Tom Owens in his capacity as Chair of the Hospital Accreditation Committee. This is a very important role of the College and Tom brought it to a new level of professionalism.

Dr David Mannion was re-elected to Council. Dr Anne Hennessy (Beaumont Hospital), Dr Brian Kinirons (Galway University Hospital), Dr Saad Mahdy ( University Hospital Limerick) and Dr Frank Loughnane (Cork University Hospital ) were elected to Council.

### Honours and Awards

Honorary Fellowship of the College May 2012:  
Dr Monty Mythen & Dr Steve Shafer

### Council business

The activities of the College continue to expand in all areas. Council met on six occasions in 2012 in what was a very busy year for the College. The key areas of activity and change are outlined below.

The audited accounts are contained within this report and show the College finances are in a healthy position at present. Dr Harry Frizelle, Honorary Treasurer, and Ms Margaret Jenkinson, Finance Officer have ensured that all departments operate within budget. I would like to acknowledge the input of our auditors, Ormsby Rhodes. I would in particular wish to acknowledge the excellence and professionalism of Dr Frizelle in his role as Honorary Treasurer, who will retire from this position in June 2013. Dr Frizelle's management of the College's finances has been exemplary and he has brought the College through a very difficult financial and economic climate.

### CEO

The work of the CEO, Fintan Foy, and his team continues to expand in line with the increasing complexity of the College's workload. Fintan who has been in post since May 2011 has professionalised many of the College's activities and brought structure to how the college manages and governs itself. In addition, his overseas experience has enabled the College sign three Memorandum of Understandings with the Omani Medical Specialty Board, University of Jordan and the RCSI Perdana Medical School in Malaysia. The main focus for each of these agreements is to establish a structure whereby we can host and market our exams, allow a small number of sponsored trainees spend a period of two years in Ireland and finally develop simulation and educational programmes in each of these centres.

In the coming year we also hope to sign an Agreement with the Hamad Medical Corporation in Qatar to undertake an 18 month contract to revalidate Consultant Anaesthetists against a common standard. This exciting initiative is being undertaken in conjunction with 6 other Postgraduate Training Bodies in Ireland.

### Strategy Meeting 25th October 2012

The College held its second Strategy Meeting in Kildare in October. This was attended by Council. At this meeting, the College ran three workshops which addressed the following key areas.

- *The Challenge in Funding the College's Future Development*
- *Future Planning for Anaesthesia*
- *Driving Examinations Forward*

From each session, a number of recommendations emerged and the Executive and Council will work on these as we continue to represent the best interests of our Fellows.

### Professional Competence

The College of Anaesthetists of Ireland was charged under The Medical Practitioners Act 2007 with administration of a Professional Competence Scheme (PCS) and an agreement was signed with the Medical Council in 2011 to implement a PCS for registered doctors aligned to the specialty. The scheme was developed in liaison with the Forum of Irish Postgraduate Training Bodies resulting in a broadly similar process across all training bodies. Dr Deirdre McCoy took over as Chair of this Committee in June 2012 and has done so with great application and expertise. The PCS year runs from May to May, according to legislation. We have reached the end of the second year of PCS. The evolving process in accordance with IMC guidelines may in future include performance assessment, formulation of action plans and remediation as well as multisource feedback. The CAI for its part has endeavoured to keep the PCS process simple and user friendly for meeting organisers and for PCS registrants and to represent our registrants' interests in communication with the IMC.

### Education

The Education Committee, chaired by Dr Brian Kinirons has had an excellent period in increasing the number of educational activities offered by the College, with particular attention to covering the eight domains of practice required by the Medical Council. The College introduced a new series of Leadership Lectures in the last year which have proven to be extremely popular.

The Annual Congress was held in the Convention Centre Dublin on 25 – 26th May 2012. Over 500 delegates attended over the two days which was the largest attendance at the Annual Scientific meeting to date. The meeting covered a broad range of topics and also included sessions devoted to obesity, paediatrics, patient safety, obstetrics, regional anaesthesia and critical care medicine. The faculty included speakers from the USA, Asia and the United Kingdom as well as a number from Ireland.

The College wishes to support educational activities across the country with the regional societies. With this in mind, we introduced web streaming for a number of lectures. This has proven very popular and it is an area we hope to develop further in the coming year.

### Training

Training remains the core business of the College. The Training Committee is chaired by Dr David Mannion.

In 2011, the CAI submitted a proposal to HSE METR to considerably alter anaesthesia training in Ireland. The CAI proposal was for a single entry, six year scheme. Specialist Anaesthesia Trainees (SAT) would complete all 15 anaesthesia competencies during the first five years of training and may spend the final year in a pre-fellowship programme. This was submitted to HSE METR in December 2011 and received approval from HSE METR to proceed with same in March 2012. The SAT programme thus commenced in July 2012 with recruitment to SAT year 1 and SAT year 3 in March 2012.

The Chair of Training, the Dean and CEO have on-going interaction with HSE METR in relation to training issues and funding. The CAI agreed a new Service Level Agreement with the HSE in respect of delivery of anaesthesia training programmes for our trainees, commencing July 2012 for 1 year. These SLAs dictated the numbers to be employed on the College's Training programmes and mandatory deliverables which the College would provide, around these training programmes.

Dr Ellie O'Leary, Director of Trainee Affairs, organised the SAT interviews in the new format for the second year running. This process ran efficiently on the day. The tutors took on the extended role in the appointment process and are very ably represented by the Tutor Representative, Dr Philip Hu on the Training Committee. We are in the very positive position that there is no shortage of high calibre applicants to the Anaesthesia training programme at present, but it is essential that we maintain the high standards of our training, as there will be increasing pressure to focus on service needs as hospitals face more stringent budget cuts. The issue of the 48 hour working week has not yet been addressed and will certainly impact on training. The government will be under duress to implement this in the near future.

I would like to personally acknowledge the innovative approach to the training programme the College has now developed under the guidance of Dr Mannion and his team. There is no doubt the CAI is seen as leading the change in the training of specialists.

### Committee of Anaesthesia Trainees (CAT)

This has been the first full year of CAT and under the chairmanship of Dr Roseita Carroll have already played a significant role in all of the College's activities. As well as participating in College Committees, the CAT are also active participants in the Trainee Committees of the Forum of Postgraduate Training Bodies and also on the National Clinical Programme in Anaesthesia. The first edition of the trainee newsletter was circulated in December and they plan to publish this quarterly. The Committee has also re-established links with GAT, the Training Committee of the AAGBI. I welcome this initiative and the very positive contribution CAT have made to the College.

### Hospital Accreditation

Dr Tom Owens (Chair) and Dr Damien Murphy (Secretary) of the Hospital Accreditation Committee have revised the hospital accreditation process. The application form is now on line and was rolled out nationally in 2012. The first hospital to be inspected using this method was Sligo General Hospital. AMNCH Tallaght Hospital was also inspected in 2012. The College will require each hospital to input the case mix data online annually in the future.

Inspections will still be on a five year cycle, unless any issues arise.

### Examinations

The Examinations Committee chaired by Dr Philip Hawthorne has made a significant change to the Primary FCAI which is now referred to as Membership of the College of Anaesthetists of Ireland (MCAI). This is more than simply a name change. Although the content and standard will not alter, the successful candidate will be able to use the post-nominal "MCAI". It is hoped that this will be attractive to many candidates and brings CAI more in line with other Colleges.

The relationship with the Royal College of Anaesthetists of the United Kingdom remains strong despite changes in the recognition arrangements at CST level. Both Colleges continue to accept each other's Primary Examination passes for admission to the Final examinations and continue to send examiners to each other's examinations. The nature of the exchange has changed however and the Exchange Examiner no longer examines candidates but looks at the process from a Quality Assurance perspective. This is a significant change in emphasis and strengthens the relationship and link between both our Colleges.

In the last year, we have opened overseas centres in Jordan, Oman and Malaysia, where the MCAI MCQ Examination is offered to local applicants. The numbers sitting the exams at these centres remain low and there is the need for us to further develop those centres and increase the numbers taking the College examinations.

Dr Anne Hennessy (Chair of the Primary) and Dr Philip Hawthorne (Chair of the Final in addition to being Chair of the Examinations Committee) have worked continuously to ensure that the examinations are fair and of a high standard and that the governance of the examination process is robust.

### Credentials

This Committee reviews applications on behalf of the Medical Council for the purposes of Registration as a Medical Specialist. The Committee is guided by the Medical Practitioners Act 2007 and European Directive 2005/36/EC. The Committee is ably chaired

by Dr Kevin Clarkson. 20 new applicants were referred to the Committee by The Irish Medical Council in 2012 for review. This process allows doctors who have not taken part in the College of Anaesthesia Specialist Registrar training programme to demonstrate equivalence of training and experience. This also includes those applying from abroad within or outside of the European Union. Candidates are assessed for competence in clinical modules as well as in non-clinical competencies as outlined in the college document "Competence in Professionalism for Independent Practice". The role of the College is advisory and the Medical Council make the final decision on eligibility for inclusion on the register of medical specialists. This is a very important Committee and I would like to commend the excellent work by Dr Clarkson and his team.

### Master's Programme

Dr Joe Tracey, Director of the Masters Programme, has undertaken a comprehensive review of the programme and proposed a number of radical changes to create a Masters in Professionalism in Healthcare. We are awaiting approval by the National University of Ireland (NUI) which will also take place at the same time as we apply for Recognised Status of the NUI. This will not only allow us award the Master's Degree but also other Postgraduate Awards and will strengthen the academic arm of the College. This process will take a little longer than we expected and therefore our new Masters will most likely not be available until the academic year commencing September 2015.

### Overseas Developments

The College is now supporting the training of 3 anaesthetists in Malawi on the MMed programme in Blantyre. Two are now in Capetown where they will work for the next year before returning to Malawi to complete their final year of the programme. The reports from their trainers in Capetown are excellent and we look forward to seeing their contribution to the development of anaesthesia in Malawi. Dr Gregor Pollach, head of department in QEH, assisted the trainees in completing research and audit projects. I am personally very grateful to Dr Pollach for his dedication towards ensuring the success of this important initiative for both the individual trainees but also in improving the quality of care in Malawi. In my time as President, I hope

we will be able to further develop and expand this initiative in association with Irish Aid.

As has already been referred to, we have now opened a number of overseas centres for doctors to sit our MCAI. It is very important that the College sees its boundaries not only within Ireland. There is a great demand for quality education and qualifications and working with the CEO and Executive, I would hope that we can expand the reach and influence of the College.

### Lay Committee Members

In June 2012, the College appointed 10 Lay Representatives to all of its Standing Committees. This was done partially to ensure the College meets all its obligations to the general public, Trainees and Fellows, but also to bring freshness in thought and ideas to our Committees. I was pleasantly surprised with the large number of applications and was most impressed with the variety of experience and ability of the applicants who put themselves forward. In the coming year, I hope to increase the involvement of the Lay Representatives to ensure they feel part of the College family. I have no doubt their continuation will be significant in the years to come as they provide an independent, external perspective and infuse the College's committees with fresh, new thinking on all aspects of activities.

### National Anaesthesia Programme

The National Clinical Programme in Anaesthesia has been established, under the Directorate of Quality and Clinical Care. Dr Bairbre Golden was appointed Director in December 2011. The College is represented on the Advisory Group by the President CAI and the CEO of the College. Dr Hawthorne sits on the working group. The NCPA faces many challenges in these difficult financial times but I wish Dr Golden well in achieving the aims of the Programme. The College will do all it can to support and guide the activities of the NCPA including the provision of administrative support.

### The Forum of Post-Graduate Training Bodies

The College is actively involved with the Forum in issues of general interest, namely interactions with the Medical Council, the HSE and the Department of Health in all areas pertaining to training, professional competence and standards.

The Forum and Executive met nine times in 2012. There were four Tripartite meetings with the IMC, HSE METR and the Forum.

### Golf Classic

Dr Gardiner organised the Golf Classic in Milltown in September and raised over €6000 for DePaul Ireland which supports homeless people in acute need.

### Acknowledgements

I would like to thank the CEO and the administrative staff for their professionalism, dedication and hard work in the last year. The Dean's Office comprises Dr Ian Surgeon, Post-graduate Dean, Dr Ellie O'Leary Director of Trainee Affairs, Dr Crina Burlacu, Director of Simulation Training for Trainees, Dr Niamh Hayes, Director of Simulator Training for the Professional Development Programme and Ms Louise Kelly, Nurse Administrator. The work of the Dean's office becomes increasingly complex year on year. I would like to thank the Dean, Directors and staff for their enthusiasm, innovations and work on behalf of the College and its trainees.

I would like to thank the members of Council, particularly the Honorary Officers and Chairs for all the time they give to the work of the College. I would also like to thank them for their support and encouragement in my first year as President.

Last but not least our thanks to our tutors, trainers and examiners, who have contributed to bringing on the next generation of consultants.

*Dr Ellen O' Sullivan*

**President**



Fintan Foy - CEO

## CEO's Report

As I come towards the end of my first full year as CEO of the College of Anaesthetists, it is a time to reflect on what has been achieved and the challenges that lie ahead. We are operating in a very difficult environment but the College continues to strive ahead to ensure we can deliver high quality training and education programmes and represent the best interests of our Trainees and Fellows. This has been greatly helped by the dedication and hard work of a very talented group of administrative staff who continue to provide excellent support for all the endeavours of the College.

### Where we were:

On joining the College in May 2011, I was struck by the positive nature of both the Council and staff in the College and the willingness to adopt change and operate within a challenging environment. The College has the advantage of being in a healthy financial position which has come from the careful management of the college's finances over a number of years. For any incoming CEO, this is an ideal platform to commence your role.

In my first few months, I identified the following as key areas that needed to be addressed in conjunction with the President and Council. These included:

- *Poor internal governance structures*
- *No overall strategic plan or direction*
- *Excessive workload of President and Chairs of Committees, all of whom are voluntary.*
- *No corporate plan as identified by a poor website.*

To deal with the above key issues and to ensure that I as CEO was representing the best interests of the College and Council, we held our first strategic Workshop in Athlone in 2011.

This was a two day meeting to discuss and determine the primary aims and targets that the College wished to achieve over the next 5 years. The strategic areas were divided into four key pillars – Training & Examinations, Finance, Governance and Education. Within each area, a set of deliverables were outlined and every effort is being made to achieve these and/or set timelines in which they will be achieved. To date the most successful changes

which have been implemented were in the areas of training where we now have a highly successful 6 year run through programme.

The above meeting was followed up with a second Strategic Workshop in Kildare in October 2012, where again we focused on our key strategic pillars with the main focus of the workshop being:

- *The Challenge in Funding the College's Future Development*
- *Future Planning for Anaesthesia*
- *Driving Examinations Forward*

### Where we are:

Through the series of strategic workshops and working closely with Council and staff, we are now moving along a path, whereby we are working on delivering a number of key strategic issues. These include an evolving Overseas Strategy which has seen the College in the last year sign Memorandums of Understanding with the Omani Medical Specialty Board, the University of Jordan and the RCSI Perdana University, Malaysia. The main focus for each of these agreements is to establish a structure whereby we can host and market our exams, allow a small number of sponsored trainees spend a period of two years in Ireland and finally develop simulation and educational programmes in each of these centres.

In the coming year we also hope to sign an Agreement with the Hamad Medical Corporation in Qatar to undertake an 18 month contract to revalidate Consultant Anaesthetists against a common standard. This exciting initiative is being undertaken in conjunction with 6 other Postgraduate Training Bodies in Ireland.

Some other key areas of development in the last 12 months include improved governance and reporting structures within the College, the development of a staff development programme which will be implemented over a 15 month period, increased rental income from the college facilities and the development of a marketing strategy.

The new College website is now fully implemented and it has proved an ideal way of transmitting the College's mission. The key challenge is to keep a website updated and to give ownership to all the College staff to ensure the latest and key information is always available. In recent months, we have also developed a Patient Information section on the website to increase our reach to a new and key group of stakeholders.

The College's interactions with other key stakeholders including the HSE, Irish Medical Council and the Forum of Postgraduate Training bodies is a critical part of our daily workload. We do so at all times representing the best interests of our Trainees and Fellows.

The international reach of the College is also important and therefore in the last year, we have put in place twice yearly meetings with the Royal College of Anaesthetists of the United Kingdom. The main focus of these meetings is identifying areas of collaboration in an ever changing clinical and political environment.

#### Where next

As CEO of the College, my main focus in 2013 will be to further embed the College strategy and to strengthen the College's finances through increased overseas activity and rental income. In addition, there is still a need to further strengthen the College governance structures and to ensure they will sustain the College long into the future. One of the key areas for attention remains a College Communications Strategy. Working with the President and Honorary Secretary, it is my intention that one will be in place by year end.

There are many challenges, but the organisation is strong and can deal with each of those to ensure continued growth and excellence in all we deliver. There remains a need to identify appropriate supports to ease the increasing burden on the President, Executive and Chairs. There is also the challenge of developing an "academic arm" to the College to include a revised MSc Programme, appropriate Diploma Courses and in time research support.

My legacy as CEO in conjunction with the President and Council will hopefully be a high quality institute of learning, training and education, recognised as such both in Ireland and overseas and embraced with long term financial security.

#### The Staff

The College is well served by a highly committed group of talented staff whose contribution is very much appreciated. To reflect that contribution the College in 2012 approved a range of new staff benefits which included 'Death in Service Benefit', 'Defined Pension Contribution Scheme' and 'Illness Protection'. These reflect the importance to the College of its most important resource – its staff. The aim of the College must be to become an employer of choice so as we can maintain the high quality of administrative support that currently exists within the College.

In December, Ms Alison Dunne, Finance Assistant left the College to take up a new post. I would like to express my and the College's gratitude for her hard work during her time here.

I would like to acknowledge the contribution of Council and Committee members for their role in ensuring the continued provision of high quality anaesthesia services in Ireland. Finally, I would like to sincerely thank all the staff at 22 Merrion Square for their hard work, enthusiasm and dedication in supporting the business of the College.

*Fintan Foy*

CEO





Dr Ian Surgeon - Postgraduate Dean

## Postgraduate Dean's Report

From the viewpoint of training and education, CAI continued to undergo major and far reaching change in 2012 – a process that began in earnest in 2011. The National Specialist Training Programme was reduced in duration by one year. This was made possible by removing the optional “year out” in the middle of the old training programme, and by redesigning all rotations so that all required competencies and mandatory elements of training could be achieved by the end of the fifth year of training, allowing a flexible approach to trainee choices for year 6, which now include remaining in standard training posts, entry to special interest posts targeted at subspecialties within the numbered training post system, and clinical or research fellowship posts inside or outside Ireland.

The number of BST posts was reduced to 70, while the number of SpR posts remained at 120, these are now spread over four years rather than five, leading to an increase from 24 to 30 posts per year. These changes served to increase the chance of moving from year 2 to year 3 from 45:24 (53%) to 35:30 (85%). This should address the bottleneck that has existed in the past, and provide a more certain career pathway for our trainees. There is no longer any competitive interview in the move to year 3 however trainees must still acquire Certificate of Completion of Basic Specialist Training to make this transition. A large part of this complex process and its resultant fallout, was ably dealt with by the Vice Dean, Dr Ellie O'Leary, and Maria Golden, the Training Officer.

Changes as radical as these are not without their problems and we have worked hard to minimise the impact on individuals. However some trainees have found themselves in difficult positions as a result of the changes. CAI is still seeking solutions to reduce the effect on anyone who has been discommoded. The training system will not return to a steady state until at least 2016, as it accommodates the remainder of the old 7 year system and the onset of the 6 year programme. 2012 also saw the launch of a redesigned hospital accreditation programme, and as a result, a new programme of accreditation visits has commenced.

At the end of April 2012, CAI's IT systems performed well in collating and generating Statements of Participation in the Medical Council's Professional

Competence Scheme. The system has also provided a relatively easy way for practitioners to record this activity via our Website. One of the responsibilities devolved to us by the Medical Council is to audit a percentage of Statements of Participation for points verification and accuracy. This audit commenced towards the end of 2012. The website itself was completely updated and relaunched in early 2012. Again this was a complex process not without its problems. Development work on the website continues, with attention currently directed at online event booking and online payments.

Apart from the National Specialist Training Programme, CAI also provides an educational programme for NCHDs in the employ of the HSE – the Professional Development Programme, which guarantees to offer at least 20 external Professional Competence points in a given year. The HSE now requires all its NCHD employees, other than trainees, to register for this programme. However, unlike the situation for trainees, attendance at any given event is not mandatory.

Training in the CAI simulator unit, directed by Dr Crina Burlacu, Dr Niamh Hayes, and managed by Louise Kelly, has continued to develop and expand, and is now an essential part of the College's education strategy. In 2012, more complex scenarios aimed at more advanced trainees have now been instigated, as have multidisciplinary courses involving obstetricians, surgeons, paediatricians as well as anaesthetists. The simulator unit has now developed a healthy research and publishing aspect, aided by the presence of a simulator fellowship, and from input from airway fellowships held jointly with St. James and RVEEH hospitals. The unit continues to increase self-reliance by enlarging the pool of trained simulator teachers and debriefers through its Train the Trainers Courses.

The administrative staff in CAI have worked really hard in 2012 to help bring about and manage these complex changes – there is no single department that did not contribute significantly to the work of the Dean's Office.

Dr Ian Surgeon  
Postgraduate Dean



## Examinations Committee Report

This is my first report on The Examinations Committee and I would like to thank my predecessor Dr Kevin Carson for the healthy state of affairs in which he left it.

The Committee met formally 4 times during the year though, of course as any committee member will know, the members actually do their work behind the scenes and in their own time.

### Relationships

In last year's report the relationship between ourselves and our colleagues in London was referred to. This relationship remains a flourishing one, despite changes in the recognition arrangements at CST level. We continue to accept each other's Primary Examination passes for admission to the Final examinations, and we continue to send examiners to each other's examinations. The nature of the exchange has changed however, and the Exchange Examiner no longer examines candidates but looks at the process from a Quality Assurance perspective. This is a significant change in emphasis.

### Name Change

I referred to the Primary examination – for the last time! The Committee agreed, after consultation *inter alia* with the Training Committee, to rename this important examination as the "Membership" examination. This is more than simply a name change. Although the content and standard will not alter, the successful candidate will be able to use the post-nominal "MCAI". We hope that this will be attractive to many candidates and certainly brings us in line with other Colleges.

Again in cooperation with the Training Committee, we have extended the required period of exposure to clinical anaesthesia, before sitting the Final Fellowship, to 36 months from 30 months. In contrast, we will now allow a candidate with no anaesthesia experience to sit the MCQ component of the Membership exam, and have shortened the training period before sitting the OSCE/Viva component to 1 year. The Regulations are being updated to reflect these changes.

### Quality Assurance

Quality assurance, transparency and measuring reliability have become essential facets of the work of any examination department. The exchange

process mentioned is one element in the process but little can be achieved without sound, reliable data. Our examinations manager Ruth Flaherty and I visited the London College in the Autumn to look at their Examination software written by Ripley Software. The Examination Committee reviewed our findings and recommended that we start a dialogue with Ripley Software. We are grateful to the work of Professor David Croke of the RCSI for his recent independent audit of the Primary Examination. We will be undertaking a similar review of the Final Examination in the near future.

### International Exam Visits

We have also undertaken to visit – for the first time, in some cases – those international examinations which we accept as exempting a candidate for our Final examination from the requirement to possess a pass at our Membership exam. These examinations have long been on our exemption list, there will be a Quality Assurance visit to each over a rolling 5 year period.

I was asked to be the External Examiner at the November Final Examination of the College of Physicians and Surgeons of Pakistan. This coincided with the College's Golden Jubilee Celebration Conference to which Dr O'Sullivan, our President, was invited. As the Pakistan exam is on our exempting list, this was a fortuitous start to the inspection programme and I am pleased to be able to report that we will continue to welcome holders of the Pakistan Fellowship.

### Recruitment

Recruitment of examiners continues to be a problem. I noted while in Pakistan that they adopt a "jury service" approach – eligible consultants need a good reason to avoid examiner service! I have no plans to introduce such tactics but I do appeal to those consultants who have not previously considered examining. There is no tangible carrot other than PCS points but since the College's original *raison d'être* was to run the FFARCSI (as it then was) it is an essential and laudable role.



We ran an Examiners' Training day at the beginning of 2012. This was well attended by examiners and we are committed to examiner training and evaluation and will require new examiners to undertake a training session before starting.

### New Examinations

The Medical Council Supervised Division Exam was first run by us 2 years ago. The future of this event seems uncertain.

We have been asked to host an on-line self-assessment test by The European Society of Anaesthesia.

### Chairpersons

I would like to thank the outgoing Chairperson of the Primary examination Dr Deirdre McCoy for her contribution to the examinations over the last 3 years. Thanks is also due to Dr Anne Hennessy who has taken over the new Membership exam and Dr Camillus Power, the Dean of the Faculty of Pain Medicine.

### Medal Awards

Primary FCAI: Dr David Greaney and Dr Bill Walsh achieved the 'A' grades in all sections of the examination.

Final FCAI: Dr Roseita Carroll and Dr Raymund O'Connor were both awarded the William and Jane Brophy Medal at the Annual Congress in 2012.

### Thanks

I must extend thanks to all the examiners – it is not glamorous, it is hard work but I do believe those of us involved feel it is well worth while. Thank you all for your contribution.

After 8 years of service, Marguerite Harvey Examinations Officer took voluntary redundancy, we wish Marguerite the very best for the future. Thanks and sincere appreciation to Ruth Flaherty, our most valuable resource, for all her hard work.

*Dr Philip Hawthorne*

**Chairperson Examinations Committee**

## Examination Pass Results

### Primary FCAI Spring and Autumn 2012

Fahid Aamir	Azza Kibeida
Rahiman Abd Rahim	Rajesh Krishnan
Hani Abdalla	Adrian Kar Chong Kwa
Dalia Abdelrahman	Nicky Lau
Oloruntoba Adeyemi	Aoife Lavelle
Rizwan Ali	Phillip Chia-Wen Lo
Vijay Anand Angusamy	Wei Yang Low
Faraz Anjum	Aidan Magee
Imran Azher	Christina Ruth McCarroll
Suman Raj Bandela	Sinead Eileen McCarthy
Beki Suna Baytug	Ursula Mairead McHugh
Lalita Bisht	Adam Timothy Morley
Colin Black	Darren Mullane
Peter Robert Carachi	Shrijit Nair
Angela Chang	Shalini Nalwad
Sunil Kumar Chauhan	Suresh Narayanan
Suzanne Lara Coulter	Zeenat Nawoor
Martin Denley	Bassey Brendan Nkanang
Tejal Vivek Desai	Aine O'Gara
Yuvaraj Doraiswamy	Sinead Úna O'Keeffe
Thomas Michael Drew	Stephanie Onyeka
Romana Shaida Durrani	Aikaterini Papadopoulou
Ahmed Elsherbeny	Aoife Quinn
Suhail Farrukh	Neil Chandra Roy
John Fitzgerald	Jonathan Royds
Lyndsey Flora Anne Forbes	Pankaj Shende
Tagarisa Foto	Vittaldas Ramanath Shetty
Deborah Galvin	Vikash Kumar Singh
David Greaney	Juliana Sisk
Junaid Hashmi	Lyndi Snyman
Philip Hassell	Timothy Switzer
Francesca Rennie Holt	Shivarajan Thankuskodivelar Alagarasamy
Lucia Hradska Smilkova	Nuala Treanor
Mark Zachary Johnson	Sarath Varghese
Rachel Kathleen Jooste	Miriam Elizabeth Verghese
Audrius Jurgelionis	Bill Walsh
Richard Katz	Mark Worrall
Raza Kazim	
Joseph Keaveney	

## Examination Pass Results

### Final FCAI Spring and Autumn 2012

Rajeev Kumar Aggarwal  
Niamat Aldamluji  
Farhat Ali  
Ravikiran Anandampillai  
Ramesh Arumugam  
Rajneesh Bankenahally  
Abhik Bhattacharjee  
Janette Brohan  
Joseph Byrne  
Roseita Carroll  
Udaya Kumar Chakka  
Anil Kumar Chauhan  
Shang Ming Cheng  
James Paul Chinery  
Veena Daga  
Devjay Datta  
Joanna Michelle David  
Nikhil Desai  
Ramkumar Dhanancheyan  
Katrina Margaret Dick  
Gemma Caroline Dignam  
Nessa Dooley  
Binu Sam Easaw  
Hayat Osama Elfil  
Hind Saeed Mohamed Ahmed Elmahdi  
Kerry Featherstone  
Ateeq Ur Rehman Ghafoor  
Montasser Farouk Abouelyazid Ghazy  
Daniel Govenden  
Bethan Rachel Hale  
Khalid Mohammed Hanish  
David Magimairaj Jayapal  
Somasundaram Jeyanthan  
Mohammed Aminu Junaidu  
Asma Ashraf Khan  
Abdul Hameed Khan  
Srinivasan V Krishnan  
Sunil Kumar  
Yuvaraj Kummur  
Harish Lad  
Weligamage Don Harsha Lakshman  
Evan Lambe  
Michael Leggate  
Katarina Lenartova  
Anne-marie Leo  
Genevieve Rosalind Lowe  
Siaghal Mac Colgain  
Martin MacGuill  
Azlina Masdar  
Andrew Donald McKechnie  
Martinus Meela  
Dinesh Kumar Meessala  
Zulfiqar Memon  
Ahmed Mesbah  
Kambasi Mohamed Meera Mohammed Rafi  
David Michael Moore  
Gareth Samuel David Morrison  
Sailakshmi Murugesan  
Manamohan Mysore Rangaiah  
Wessam Nabeih  
Sonali Vinod Nair  
Suresh Narayanan  
Shivanandaswamy Kashimutt Narayanasioamy  
Zehrin Nassa  
Rama Natarajan  
Rohith R Nayak  
Dorita Noronha  
Raymund O'Connor  
Jenny Kaarina Parsons  
Varghese Paul  
Sesha Smitha Polimetla  
Senbagam Rajamanickam  
Austin Rattray  
Imran Razzaq  
Mohamed Lamin Hadi Rwemi  
Naveen Manik Sable  
Ahmed Mustafa Ahmed Salim  
Girisankar Saminathan  
Ruthra Sarma  
Arunkumar Sengottaiyan

## Examination Pass Results

### Final FCAI Spring and Autumn 2012 Continued

Enda Michael Shanahan  
Aidan Sharkey  
Naser Shayoub  
Anurag Singh  
Smita Singh  
Stephen Edward Smith  
Deepak Babu Subramani  
Diqakar Subramani  
Altaf Hassan Sultanpori  
Rajkumar Thangaiah  
Jessel Plavelil Varghese  
Anita Vinrayer  
Vandan Ward  
Niranjali Yatiwelle

*Dr Philip Hawthorne*

Chairperson, Examinations Committee



Dr David Mannion - Chair of the Training Committee

## Training Committee Report

The College of Anaesthetists of Ireland is recognised by both the Irish Medical Council and the HSE MET as the postgraduate medical body responsible for training in anaesthesia in Ireland. SpRs who successfully complete training are awarded a Certificate of Completion of Specialist Training and are thus eligible for registration in the Specialist Division of the IMC register. In 2012 the following doctors achieved CST:

### Certificate of Specialist Training 2012

#### July 2012

Sinead Bredin  
Kathryn Byrne  
Michael Callaghan  
John Chandler  
Gerard Curley  
Craig Dunlop  
Olivia Finnerty  
Alka Grover  
Kieran Hogan  
Johanne Lynch  
Tadhg Lynch  
Kevin McCarthy  
Catherine Nix  
James O'Leary  
Katie Padfield  
Jubil Thomas

#### December 2012

Alan Broderick  
Mark Campbell  
Jeremiah Dowling  
Alan Gaffney  
Tomas Hitka  
Wouter Jonker

### Specialist Anaesthesia Training Programme

In 2011, the CAI submitted a proposal to HSE METR to considerably alter anaesthesia training in Ireland. The CAI proposal was for a single entry, six year scheme. Specialist Anaesthesia Trainees (SAT) would complete all 15 anaesthesia competencies during the first five years of training and may spend the final year in a pre-fellowship programme. This was submitted to HSE METR in December 2011 and received approval from HSE METR to proceed with same in March 2012. We would like to acknowledge the foresight and vision of HSE METR in recognising the benefits of the new training programme.

The SAT programme thus commenced in July 2012 with recruitment to SAT year 1 and SAT year 3 in March 2012.

#### SAT Year 1

There was strong competition for entry to the new SAT programme. Seventy-four applicants completed an online application form and fifty-nine candidates were shortlisted using a standardised selection process. For the first time, CAI used four interview panels to interview these candidates. Thirty-four candidates were appointed, and these were then assigned to either the Eastern, Western, or Southern RATPs based on their preference and their performance in the selection process.

#### SAT Year 3

Sixty-six applicants applied for SAT Year 3, which was the equivalent of the start of the old SpR scheme. Thirty-five of these were shortlisted for interview. Thirty-one of these candidates were appointed.

With the commencement of the new SAT scheme the CAI will now be running two training schemes for the next few years, the new six year SAT programme and the old SpR programme. This is presenting considerable logistical challenges for the CAI. The Deans office have met with regional tutors and training representatives to resolve some of these challenges and devise equitable training rotations for all SpRs and SAT trainees.

I would like to pay particular thanks to the Postgraduate Dean, Dr Ian Surgeon, the Director of Training, Dr Ellie O'Leary and the Training Officer, Ms Maria Golden for the time and effort they have put into the development of this new training scheme whilst also continuing to run the old scheme. In addition I would like to thank the many tutors, hospitals and the trainees themselves for their forbearance in dealing with the challenges that implementation of this new scheme entails.

### Tutors

Dr Philip Hu is the tutor representative to the Training Committee. He has represented the views of all tutors to the Training Committee and in turn fed back committee proceedings to the Tutor group. In addition he organised a separate tutor session at the CAI ASM 2012. This was a very useful session at which tutors gave valuable feedback on many matters related to training including the new training scheme.

### Health Service Executive, Medical Education & Training

The CAI agreed a new Service Level Agreement with the HSE in respect of delivery of anaesthesia training programmes for our trainees, commencing July 2012 for 1 year. These SLAs dictated the numbers to be employed on the College's Training programmes and mandatory deliverables which the College would provide, around these training programmes.

### Post CST Fellowship Training.

In developing the new training programme the CAI recognised that there were opportunities to develop post CST specialty training in the areas of Intensive Care Medicine, Pain Medicine, Obstetric Anaesthesia, Paediatric Anaesthesia and Cardiothoracic Anaesthesia. The inclusion of the Special Interest year in the final year of training allows trainees with an interest in these areas to complete the first year of a two year Fellowship programme. In 2012 we submitted a proposal to HSE MET to develop 14 post CST Fellowship positions in these areas. If approved these will allow trainees to complete all of their specialty fellowship training in Ireland, to specialist level.

*Dr David Mannion*  
Chairperson of the Training Committee.





Dr Roseita Carroll - Chair of the Committee of Anaesthetic Trainees



CAI  
SALUS DUM VIGILAMUS  
College of Anaesthetists of Ireland

## Committee of Anaesthetic Trainees (CAT) Report

This has been a very busy first year in existence for the Committee of Anaesthetic Trainees (CAT). We have endeavoured to maximise our evolving role, both within the College and within other affiliated bodies, such as the Forum of Postgraduate Training Bodies and the National Clinical Programme for Anaesthesia (NCPA). It has been both a challenging and rewarding year. In 2013, we hope to build on this and to continue to vocally represent trainees' interests into the future. The first edition of our trainee newsletter was circulated in December and we plan to publish this quarterly. Formal elections will be held in March 2013 and we look forward to welcoming our new members.

We have had a large amount of input into the ongoing review of training within the College. We were involved in the formation of the new rotations for the 6-year SAT scheme. Trainees now have the opportunity to achieve all mandatory competencies within 5 years while minimising their number of relocations within the country. This will ensure they are free to pursue their subspecialty of choice in their final year. A number of competency review groups have been set up to ensure a high standard of training, especially in light of the new, shortened scheme. There is a trainee representative on each group. The conclusions from these groups will add clarity to what is required and will be to the benefit of all trainees and trainers. This is a very timely development: We conducted an SpR snapshot survey to assess the balance between Intensive Care and Theatre commitments among SpR 1-3s. While we found the balance was satisfactory, we also found that only 65% of SpR 1-3s were managing full adherence to their allocated modules. This is of great concern and once the competency review groups have reported back, we will be revisiting this issue with rigour. In the coming year, we will also be working on a policy for roster-makers within hospitals, and looking at potentially setting up a centralised mentoring system within the College for trainees.

Going forward we hope to organise more educational events for trainees in collaboration with the Education Committee. This year the GSK Medal was renamed the KP Moore medal.

This is one of the highlights in the calendar for trainees as it allows those in the early years of their careers to showcase their work. We are looking at expanding this in the future to include a separate audit prize to reflect the increasing participation of trainees in this activity. On the 16th February 2013 an Anaesthesia Information Day will be held for medical students, interns and those in other specialties who may have an interest. It will consist of a mixture of talks and hands-on interactive stations. We plan to make this an annual event. Our role in the Irish Congress of Anaesthesia 2013 will be expanded to include an information session on Fellowships and will be followed by our AGM later in the day.

In recent months we have re-established our links with GAT, the trainee committee of the AAGBI, and have tried to ensure Irish attendance at their meetings. While their system is different, we face many of the same problems regarding the constant conflict between training and service provision, ongoing changes within the NHS/HSE etc. This information exchange is proving to be both interesting and mutually beneficial and we hope to strengthen our links in the future. We will be revising the section on Ireland in the GAT handbook and hopefully contributing more regularly to Anaesthesia News.

In May 2012 the Forum of Postgraduate Training Bodies formed a trainee subcommittee, comprising two representatives from each specialty/faculty. This committee has been very active in looking at issues that are common to trainees across all specialties. In particular, it was instrumental in the suspension of the Level One Consultant Proposal. Extensive work was put into the document "The Role of the Consultant" which was submitted to the Department of Health. Recent developments, such as the changes to consultants' working practices and the 40% reduction in the salary of new-entrant consultants, has caused grave concern to us all. The committee is very aware of the negative effects these developments are likely to have on the quality of patient care and the retention of medical talent within Ireland and are looking at ways to ameliorate this.

Other areas in which we are ably represented include Examinations, the Joint Faculty of Intensive Care Medicine of Ireland, the Faculty of Pain Medicine and the Finance Committee. We also have representation on the Advisory Group of the NCPA, which is crucial as reconfiguration and many reforms within the health service occur. This has afforded us the opportunity to provide feedback on many draft proposals, such as Inter-hospital Retrieval/Transfer of the Critically Ill Adult, which will affect our working lives in the future. As part of the NCPA, and in conjunction with the College, we will also be involved in personnel planning for Anaesthesia in Ireland.

I would like to extend a heartfelt thanks to all the members of the CAT for their dedication and hard work throughout the year. I would also like to thank the President, Chairperson of Training, the Dean and the Director of Training along with all the members of Council for their ongoing support and encouragement. We have had invaluable assistance from Maria Golden to whom all trainees are very grateful for her tireless work in the Training Office. We look forward to another busy and fruitful year.

*Dr Roseita Carroll*

**Chairperson of the Committee of Anaesthetic Trainees**

## Committee Members

Roseita Carroll	<i>Chairperson Forum representative Joint GAT representative</i>
Karina Fitzgibbon	<i>Honorary Secretary NCPA representative</i>
Hugh O'Callaghan	<i>Honorary Treasurer</i>
Caroline Larkin	<i>Education Committee representative Forum representative</i>
David Cosgrave	<i>Education Committee representative</i>
Tomas Hitka	<i>Training Committee representative</i>
Sheila Duggan	<i>Training Committee representative</i>
Rory Naughton	<i>Examinations representative Joint GAT representative ISC (AAGBI) representative</i>
Mona Mubarak	<i>Pain Faculty representative</i>
John-Davis Coakley	<i>JFICMI representative</i>



Dr Brian Kinirons - Chair of the Education Committee

## Education Committee Report

The past year has been a busy one for the Education Committee with a large number of lectures, courses, workshops, competitions and the Irish Congress of Anaesthesia. The Committee met four times during the year on the 14th March, 9th May, 25th September, 29th November and reported back to the Council and the President.

### College Workshops

This year all of the workshops were very popular and most were oversubscribed. Vascular Access was held on the 20th of February and was run by Dr Alan McShane and the Echocardiography Workshop run by Dr Michael Griffin was on 23rd March. The College also ran a three day SAQ Practice Weekend Course for Final Fellowship candidates for the first time on the 31st August, 1st and 2nd September which was coordinated by Dr David Gray. The Local Anaesthesia for Ophthalmic Surgery Workshop was held on the 24th September in the Royal Victoria Eye & Ear Hospital, this is the only workshop in Ireland that has live orbital blocks. Dr Muhammad Mukhtar is the workshop coordinator. The Difficult Airways Workshop was held on the 7th & 8th November and was run by Dr Ellen O'Sullivan, Dr Jubil Thomas and Dr Mike Staunton. The Professionalism in Practice Workshop was held on the 16th of November and was organised by MSc Professionalism in Practice module coordinator Dr Barry Lyons.

This year we ran a new series of Leadership Lectures which were held four times during the year; the first lecture was held on the 26th January which was presented by Professor Gregor Shanik, Clinical Governance Director of Blackrock Clinic. His lecture was entitled "Leadership in anaesthesia - why YOU are important!". This was the first lecture to be webcast live and available to download on the College website. We hope to have more educational events available via live webcast in the near future. Further Leadership Lectures were held on the 23rd March by Professor Ciaran O'Boyle who is Professor of Psychology at RCSI & Director of RCSI Institute of Leadership. His presentation was entitled "Different Approaches to Leadership". Professor Sneyd, Professor of Anaesthesia in Plymouth presented his Leadership lecture on the 26th September his presentation was entitled "What kind of doctor, what kind of health service?". The last lecture was held on the 31st October and

was presented by Mr. John O'Brien former Chief Executive at St James's Hospital and adviser to the CEO of the HSE on strategic issues. His presentation was entitled "Managing Change in Practice".

In conjunction with the British Journal of Anaesthesia the College held a Research Methods Day on the 8th March. This was a new initiative and was coordinated by the Editor in Chief and Chief Editor; Prof Rob Sneyd and Prof Ravi Mahajan.

This year we held another new workshop; Practical Guide to Awake Fibre-optic Intubation on the 18th April. The workshop was coordinated by Dr Jane Bruton and Dr Birgitt Straub.

### Delaney Medal Presentation

The Delaney Medal presentations took place in the College on Thursday 15th March. The adjudicators were Prof Jaideep Pandit (UK), Dr John Boylan (St. Vincent's Hospital) and Dr Gabriella Iohom (CUH). The winning presentation was Dr Gerard Curley whose talk was entitled 'The use of intra-tracheal Mesenchymal Stem Cells therapy to enhance repair of the injured lung'. Dr Mairead Hayes won the runner up prize for her talk entitled 'In Vivo Inhibition of Pulmonary Nuclear Factor Kappa-B Attenuates Ventilator-Induced Lung Injury in The Rat'. Our thanks to Fannin Healthcare who kindly sponsored the dinner in the Westbury Hotel, Dublin.

### Abbott or Abbie Scholarship

The Abbot Scholarship in Anaesthetic Research was held on Friday 16th March. Abbot Laboratories once again provided €10,000 for a scholarship to support original research by an Irish anaesthetist. The judges were Dr Kevin Clarkson (UCHG) and Dr Kevin Carson (Temple St) and Prof Jaideep Pandit (UK). The presentations were held in the Lecture Theatre of the College of Anaesthetists of Ireland. The winner was Dr Noelle Murphy with a presentation entitled 'The role of Gremlin in the evolution of the Acute Respiratory Distress Syndrome'. Dr Grace Donnelly won a runner up prize for her presentation which was entitled 'What is minimum training required for anaesthetists to be able to perform rigid bronchoscopy? A study in manikins'.

### Irish Congress of Anaesthesia (ICA)

This was held on the 25th & 26th May in the Convention Centre Dublin. The meeting covered a broad range of topics and also included sessions devoted to obesity, paediatrics, patient safety, obstetrics, regional anaesthesia and critical care medicine. The faculty included speakers from the USA, Asia and the United Kingdom as well as a number from Ireland. The inaugural Sir Ivan Magill lecture was presented by Professor Steve Shafer (USA) the lecture was entitled "The Role of Clinical Pharmacology in the Trial of Conrad Murray". The Irish Society of Regional Anaesthesia (ISRA) held their fourth Advanced Ultrasound in Regional Anaesthesia Workshop. The meeting had a record number of attendees and feedback was excellent. The Annual Dinner was held on the 25th May in the Convention Centre Dublin.

The Gilmartin Lecture was on the evening of the 24th May and was held in the Westin Hotel and was given by Mrs Margaret Murphy, Expert Lead, Patients for Patient Safety, World Health Organization. The lecture was entitled "The Patient Experience as a Catalyst for Change". The Gilmartin Lecture was traditionally held in conjunction with the Annual Congress, this year the College decided that the event should be held annually in December. The first Winter Gilmartin Lecture was held in the College on the 13th December, the lecture was presented by Mr Kevin O'Sullivan editor of the Irish Times Newspaper. This lecture was entitled "Why Quality Newspapers matter in the Ireland of 2012".

### Core Topics Day and Autumn College Lecture

The Core Topics Day meeting was held in the College on the 17th October. The Autumn College Lecture was delivered by Dr Brendan McGrath (Manchester) his lecture was entitled "Another difficult airway: the UK National Tracheostomy Safety Project".

### Winter College Lecture

The Winter College Lecture was presented by Dr William Harrop Griffiths, President of the AAGBI, his presentation was entitled "Innovation, Technology and Safety A sceptic's view of a changing world".

### KP Moore Medal Competition

This was the inaugural KP Moore Medal Competition. The competition formally named GSK was renamed in honour of Dr Kevin P Moore. Dr Moore was a founding father of the training programme in Ireland, and for many current anaesthetists was both a mentor and friend. He was the first chairperson of the training committee from 1981-1991. This competition is organised by the Committee of Anaesthesia Trainees (CAT) group and is aimed at trainees in their first few years.

The adjudicators were Dr Conan McCaul (Rotunda), Dr Dermot Kelly (RVEEH), Dr Leo Kevin (UCHG) and Dr Rosita Carroll, the CAT representative. Dr Ghulam Raza won the KP Moore Medal Prize for his presentation entitled 'Use of the Airway Exchange Catheter technique for 'at-risk' extubation: a case report'. Dr Aoife Doolan won the poster prize for her poster presentation 'Comparison of the diagnostic accuracy of AECC and Berlin definitions of ARDS'.

### College Courses

This year's Introduction to Anaesthesia course was held in the College on the 4th, 5th and 13th July. The course was coordinated by the Postgraduate Dean, Dr Ian Surgeon and Simulation Director, Dr Crina Burlacu.

The Final Revision Course was run by Dr Deirdre McCoy from the 5th – 10th February. The course was held in the College's Clinical Skills Centre and proved very successful and received very positive feedback from the participants.

I would like to thank all those who participated as faculty for our educational events, all members of the Committee for their advice and support during the year and Ms Orla Doran and Ms Denise Johnston for their hard work.

*Dr Brian Kinirons*

**Chairperson of the Education Committee**



Dr. Kevin Clarkson - Chairperson of the Education Committee

## Credentials Committee Report

This is my second report as chairperson of the Credentials Committee which met on seven occasions during the year and is attended by other members of council including the President, Dean and National Director of Training and administrative staff. The Committee reviews applications on behalf of the Medical Council for the purposes of Registration as a Medical Specialist. The Committee is guided by the Medical Practitioners Act 2007 and European Directive 2005/36/EC. The Medical Council will usually support the college decision but retains discretion. This process allows doctors who have not taken part in the College of Anaesthesia Specialist Registrar training programme to demonstrate equivalence of training and experience. This also includes those applying from abroad within or outside of the European Union. Candidates are assessed for competence in clinical modules as well as in nonclinical competencies as outlined in the college document "Competence in Professionalism for Independent Practice".

Applicants may be recommended for immediate registration where documentation is complete and includes substantial and verified evidence of training including rosters, logbooks with a breakdown of caseload and structured references requested by the Committee. The Committee introduced new Structured Reference Reports which will be sought from chairpersons of departments, who liaise with senior colleagues in the department. Candidates deemed to be deficient in verifiable components of Specialist Registrar year 4/5 training, may be referred through the training committee for a period of structured training in specific hospitals. It is important that accepting institutions put in place a satisfactory programme for the candidate. These positions are in short supply and availability cannot be guaranteed by the College.

A number of applicants have no demonstrable specialist training equivalent to College training and cannot be supported for registration as a specialist. They may of course seek general registration. A streamlined process is being developed in conjunction with the Medical Council to provide non-eligible doctors with clarity and objectives avoiding undue delays and expense.

20 new applicants were referred to the Committee by The Irish Medical Council in 2012. Of those 19 applicants agreed to progress their submissions to the Committee. In total 10 applicants were recommended for inclusion onto the Specialist Register, five of whom had applied in 2012 and five who applied prior to January 2012. Four of those recommended for inclusion had successfully completed a period of structured training. A further six applicants who applied during 2012 were recommended to undertake further substantial senior level of training.

The role of The College is advisory and the Medical Council makes the final decision on eligibility for inclusion on the register of medical specialists. The Medical Council have an appeal process for doctors whose applications are refused. The Committee also assists College Council with applications for Ad Eundem fellowship of the College.

I would like to thank college staff, notably Ms. Orla Doran for her support of the Committee.

*Dr. Kevin Clarkson*

**Chairperson of the Credentials Committee**

## Joint Faculty of Intensive Care Medicine of Ireland

The following is a brief summary of work this year in pursuit of the aims of the Joint Faculty of Intensive Care Medicine of Ireland (JFICMI), particularly with regard to its efforts to promote specific training positions in Ireland both for year 1 and year 2 of specialty training in ICM.

**Intensive Care Medicine as a specialty:** The application process is ongoing between the Faculty and the Medical Council of Ireland. The initial response of the specialty review group has been favourable and the Faculty is currently providing the clarifications which were sought. One clarification relates to whether the Faculty anticipated applying for post graduate training body (PGTB) status and the related governance arrangement. The Medical Council have stated that they will liaise with the HSE with regard to ensuring that training positions are created and expanded, presuming specialty status is granted.

**Board composition and end of 'transition' status:** The Joint Faculty has completed its recent elections for two Board members – Drs James O'Rourke and Michael Scully being successful. These elections bring to completion the transition from the old Irish Board of Intensive Care Medicine to the new Joint Faculty. After this, each of the three Colleges – Anaesthetists, Physicians and Surgeons – have a nominated representative (of their president) on the board and the rest of the Board is primarily constituted by the six elected members from among the Fellows of the Faculty. As part of the transition from the old Irish Board of Intensive Care Medicine to the new Joint Faculty, the examination (DIBICM) has now (since Dec 4th, 2012) changed its name to Fellowship i.e. FJFICMI.

College of Anaesthetists of Ireland (CAI), close relations between it and the JFICMI continue. The JFICMI is currently housed at the CAI building as part of a generous offer to foster and financially support the 5-year set up phase of the JFICMI. Practical ongoing manifestations of the relationship are the invitation to our Dean to attend on the CAI board and to the JFICMI Treasurer and Chairperson of examinations / training to attend corresponding CAI committees.

The CAI has been the most progressive of the Colleges in instituting positions within its postgraduate training scheme which allow formal, supervised training in Intensive Care Medicine and this process has further developed recently with the institution of 6-mth training positions. A further positive development which is still under discussion with HSE MET is the allocation of a limited number of training positions to advanced training positions in Intensive Care Medicine thus allowing, if affected, the completion of specialist training in ICM in Ireland for the first time.

Royal College of Physicians of Ireland, discussions have taken place between the JFICMI and their Postgraduate Training representatives to explore how Intensive Care Medicine could be incorporated into selected Specialist Registrar training programmes. This applies primarily to the Acute Medicine programme but has wider implications also, e.g. for Emergency Medicine and others. Although there is some complexity involved, involving issues of funding, roster formation, structure and duration of the period spent in Intensive Care Medicine training, the discussions are ongoing – but slow. However, the JFICMI has expressed its commitment to promoting such training interactions.

An issue which arises out of the discussions on Intensive Care Medicine training for Specialist registrars in Medicine is how to give recognition to this time. It has been noted that Anaesthesia has a designation of 'Consultant Anaesthetist with an interest in Intensive Care Medicine' which can be achieved after a year of Intensive Care Medicine training and successful completion of the JFICMI exam. This is a nationally recognised eligibility criterion for a category of consultant appointment and consideration of a similar designation for Medicine might usefully form an extended consideration in the discussions on joint training programmes for medicine.

Royal College of Surgeons of Ireland, one of the issues that appears to be holding up progress with encouraging surgical training programmes to incorporate ICM training time is the lack of a certificate or other tangible means of recognising ICM training within global surgical specialty training.

It is hoped that the increased implementation of competency-based training, together with a course such as the Basic Assessment and Skills in Intensive Care (BASIC), which is now established successfully in Ireland, under the auspices of the ICSI and the ESICM, will facilitate a means of certification.

The relationship with the Intensive Care Society of Ireland (ICSI), our primary partner in organising regular continuing training and educational events in Ireland, continues to evolve positively. Our pre-exam course complements their regular scientific meetings (two per year), refresher meetings and now, in conjunction with the European Society of Intensive Care Medicine, the BASIC (Basic Assessment and Skills in Intensive Care Course) which is an ideal introduction to Critical Care for doctors. There is broad agreement on the need and benefit of introducing a course on quality practice relating to Brain Death and Organ Donation and this is planned as a further collaboration between us. We also collaborate with the ICSI in representing the Critical Care community in its interactions with a number of agencies and bodies e.g. in developing Standards for ICUs with the HSE Critical Care programme.

### Website

There was agreement regarding its importance at the last meeting of the Board, the priorities being to facilitate the general visibility of the JFICMI and to facilitate interactions with Fellows and institutions, particularly with respect to Examinations and Training. The role of such a website would likely further expand presuming specialty recognition. The concept of a website for Irish Critical Care, perhaps in conjunction with the ICSI has been proposed. Links with CAI and other colleges will remain important.

### Conclusion

The JFICMI will continue its role in promoting and accrediting quality ICM training and anticipates doing this in conjunction with the CAI, where overlapping visitation processes apply. The increased implementation of competency based training together with accreditation tools such as work-based assessments will undoubtedly be a primary focus of such visitation processes. The likely imminent recognition of ICM as a specialty, together with the sought after implementation of posts allowing for advanced training in ICM, will soon introduce the accreditation by the JFICMI of a limited number of advanced training positions, and also the signing off of the completion of the advanced trainees as suitable for specialty recognition in Intensive Care medicine. The continued support of the CAI, in the evolution of the means to accommodate speciality support mechanisms, continues to be greatly appreciated.

*Dr Dermot Phelan*

**Dean, JFICMI**



## Faculty of Pain Medicine Report

The board met on 4 occasions – 16th February, 14th June, October 11th and November the 22nd in 2012. Each meeting included an educational component open to all professionals with an interest in Pain Medicine. The Annual Scientific Meeting took place between February 16-18th on the theme of “Science in the diagnosis and treatment of spinal pain” – overall attendance 361. International speakers included – Dr Sherdil Nath (Sweden), Professor Eliot Krames (California), Professor Robert Levy (USA), Dr Ken Aloe (Texas) and Professor JP Van Buyten (Belgium). The ASM included a very successful day in the College (154 in attendance) with an R&D session, a GP symposium, a nurses’ seminar and a meet the Professors working Lunch on the Friday with the main congress taking place in the Convention Centre on the Saturday (175 attendees) . On Thursday evening in the College Professor Robert Levy (Editor of the Journal Neuromodulation) gave the inaugural Dr Francis Rynd Lecture ( 32 in attendance) and was conferred with Professor Krames and Dr Aloe with Honorary Fellowships of the Faculty of Pain Medicine CAI.

The spring meeting took place at the Gibson Hotel, Dublin as a refresher course on pain medicine for GPs and anaesthetists in training sitting for the Pain Medicine Diploma exam. Guest speakers in addition to Faculty board lecturers included Dr Tony O’Brien (Palliative Care – Cork) and Dr Mike Alexander (Neurophysiology Tallaght Hospital) and Dr Seamus Looby (Radiology Beaumont Hospital).

The Diploma exam took place in the Mercy Hospital Cork organised by Drs Liam Conroy and Donal Harney with the extern Professor Jon Raphael from Birmingham, UK. The four successful candidates were Drs Gavin Weekes, Rupesh Parimkayale, Tadhg Lynch and Kevin McCarthy. This was the last sitting of the original Diploma in Pain Medicine exam which was launched in 2002. From 2013 there will be two exams; a Diploma in Pain Management, based on 6 months experience in pain medicine, and an Exit Fellowship Exam, based on two years experience in the specialty. New exam regulations have been posted on the College website. The second AGM of the Faculty took place on June 14th which was open to all fellows. Dr Declan O’ Keeffe stepped down in June as Hon Sec and board member. He was thanked in particular for his significant contribution to a very successful series

of ASM on the themes of Pain in Women (2010), Pain in Cancer (2011) and the Science of Spinal Pain (2012).

The first meeting post the AGM in October saw the election of Dr Connail McCrory as Vice Dean. New board elections took place which saw Drs Philip Hu (Tallaght) and Conor Hearty (Mater) join the new board and the re-election of Drs Liam Conroy (Cork) and Dave O’ Gorman (Galway). The new post foundation board commenced on the Dec 18th when Dr Power relinquished the office of Dean (he remains on board for another year) and handed over to Dr Josh Keaveny as Dean. All acknowledged the contribution of outgoing foundation board members including Drs Paul Murphy, Valerie Pollard, Joe Fitzgerald, Dominic Harmon, Donal Harney, Frank Chambers and John Browne. Dr Hugh Gallagher was kept on the board for an extra year to complete the consultation document on opioid prescribing with the College of GPs. Dr Ray Victory remains on the new board as President of the IPS. The new board will include a lay member Mr Duncan Gruselle, a GP nominated by the College of GPs; Dr Alan Moran, a neurosurgeon; Mr Jaber Nagaria ( Belfast); Dr Tony O’Brien, a Palliative Care Consultant (Cork) and a trainee Dr Mona Mubarak.

The autumn meeting included presentations by Drs Gerry Browne (Neuropathic Pain) and Brendan Conroy (Interventional pain techniques for back pain) and the Winter Meeting enjoyed some international speakers in town as part of the ten year celebration of the Ulysses Pain Management Programme at Tallaght – Professor Michael Nicholas (Sydney) and Professor Harriet Wittink (Netherlands). Honorary Fellowships for the 2013 meeting were agreed by Board and Council – Professor Hans Kress (President of EFIC) and Professor Michael Cousins (Past President IASP) who will deliver the second annual Rynd Lecture.

Finally 2012 saw the arrival of our Grant of Arms, the shield awarded by the Chief Herald of Ireland which incorporates symbols of pain medicine, pain intervention with a historical link to the Francis Rynd family crest underscored by our Motto “Nemo sit in miseria” (Let no one be in misery), new gowns (red and gold colours) and Chain of Office for the Dean thus completing the formal set up of the Foundation Faculty (2007-2012). Pre the December





31st change in pathway to fellowship standing orders, the following were deemed to have satisfied the entry criteria and will be admitted as fellows in 2013 – Drs Daniel Oshodi, Aman Ahuja, Tacson Fernandez, Dominic Hegarty and Jones Kurian. Those who submitted theses for application under a different pathway which also closed on December 31st will be assessed in early 2013. The theme for the ASM in 2013 will be Chronic Pain – a disease in its own right and a major healthcare problem.

*Dr Camillus Power*

Immediate past Dean, Faculty of Pain Medicine



## Honorary Treasurer's Report

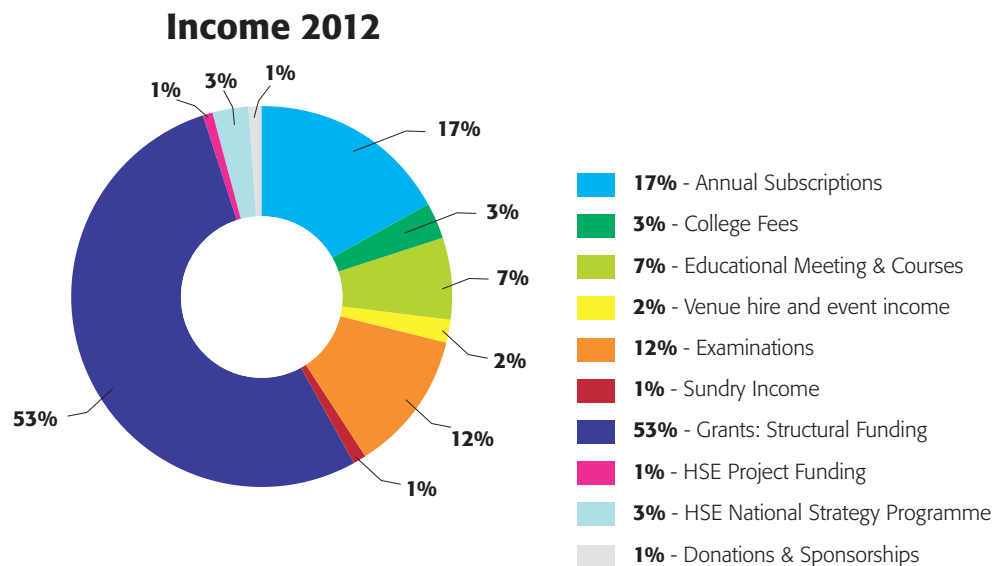
This is my fourth and final report as Honorary Treasurer and chairman of the Finance Committee, as my term ends this year. It has been an immense privilege to serve as your Treasurer over this period. For me this occasion provides a welcome opportunity in my final report to bring to your attention some of the work done during the past four years, and it is with a sense of satisfaction that I reflect on some of the achievements. In 2010, I began by reviewing the budget process. We now have budgetary controls that ensure that the budget set for each department not only provides parameters for operational controls, but is a means of monitoring and influencing strategy. In 2011, we identified and implemented other cost-saving measures aimed at reducing the operating expenses of running the College. We also streamlined our financial policies and systems. In 2012, the College Council agreed a financial strategy to ensure the long-term financial stability of the College.

As usual, my report is drawn from the annual accounts. The College of Anaesthetists of Ireland has received a clean audit opinion, which means that the financial statements were presented fairly in all material aspects, and no concerns, nor comments, were expressed. I am pleased to present herewith the Financial Statements of the College for the year ended 31st December 2012 which are set out on pages 28 to 31 of this annual report.

### Income & Expenditure Account

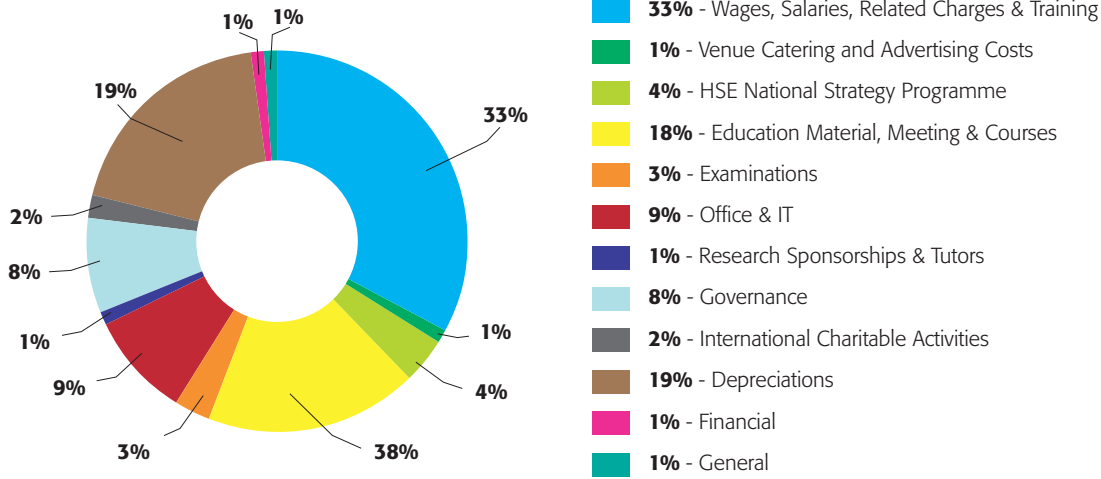
Again, the College presents very strong financial results for the year ended December 31st 2012. In 2012, overall revenue from operation activities for the year was €3,176,855; this is an increase of €308,717 on 2011 results. This year we generated income from overseas examinations and we are excited about other overseas developments that will bear fruit in the coming years.

The operating costs for the financial year were €2,465,652. This is an increase of €329,006 on 2011 expenditure. We are committed to maintaining a direction that ensures financial sustainability and prudent use of retained surpluses that will enable us to take up opportunities, and to invest wisely in the future. The sound financial position of the college is a reflection of the loyalty and dedication of the finance committee members and fellows.





### Expenditure 2012



### Balance Sheet

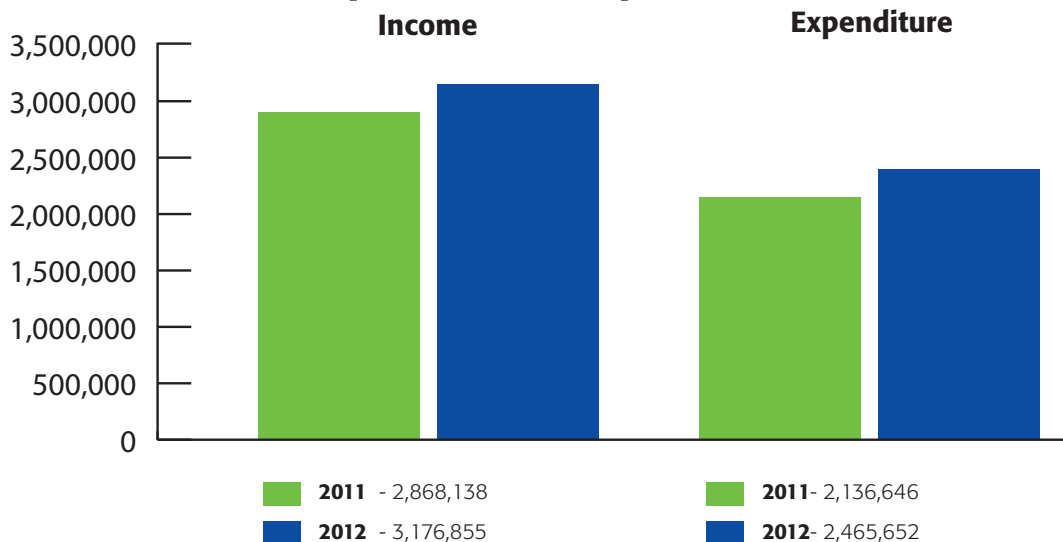
The balance sheet for 2012 details the Colleges assets and liabilities, and I am delighted to say that the net assets now total €1,928,690; The net assets increased by €34,707 As a result it is proposed to continue with special rates for fellows in good standing to attend meetings throughout 2013. The balance of the mortgage at the end of the year was 1,774,116 after repayments being made during the year. We have repaid 1.3 million of the mortgage in the last four years.

Finally, I would like to thank Council of the College for electing me to the position of Honorary

Treasurer; it has been an eventful four years, and it has been my privilege and my pleasure to be a part of it. I would like to thank the Finance committee for their commitment and support in the current difficult climate. I would also like to express my sincere gratitude to the staff in the Finance office, in particular to Margaret Jenkinson, Finance Officer, whose help, support and attention to detail has been invaluable.

Harry Frizelle, Honorary Treasurer and Chairman of the Finance & General Purpose Committee

### Income & Expenditure Comparison 2012-2011



## Income and Expenditure

### DRAFT INCOME AND EXPENDITURE ACCOUNT FOR THE YEAR ENDED 31 DECEMBER 2012

INCOME	2012	2011
Annual subscriptions	562,698	498,829
College fees	85,659	69,708
Educational meetings & courses	219,412	209,800
Examinations	417,342	476,478
Grants: Structural Funding Grants: HSE METR Funding	1,678,869	1,496,344
HSE project funding	10,000	10,000
HSE National Strategy Programme	103,143	-
Donations & sponsorships	39,493	51,095
Venue hire and event income	47,556	40,309
Sundry income	12,683	15,575
	<u>3,176,855</u>	<u>2,868,138</u>
<b>EXPENDITURE</b>		
Wages, salaries, related charges, staff training and recruitment	825,164	817,564
HSE National Strategy Programme Expenditure	103,143	-
Educational material, meetings & courses	436,016	361,688
Examinations	72,896	84,707
Office & IT	258,066	200,735
Governance	189,729	102,897
Research sponsorships & tutors	10,000	2,500
International charitable activities	41,386	126,049
Depreciation	468,990	393,201
Financial	16,084	16,437
Venue catering and advertising costs	12,110	16,960
General	32,068	13,908
	<u>(2,465,652)</u>	<u>(2,136,646)</u>
<b>OPERATING SURPLUS</b>	711,203	731,492
Interest receivable and similar income	42,400	33,459
Interest payable and similar charges	(51,773)	(76,781)
	<u>701,830</u>	<u>688,170</u>
<b>SURPLUS ON ORDINARY ACTIVITIES</b>	=====	=====

There are no recognised gains or losses other than the results disclosed above and there have been no discontinued activities or acquisitions in the current or preceding year.

On behalf of the Board of Directors

*Dr. Ellen O'Sullivan*

*Dr. Harry Frizelle*

Directors

## Independent Auditors Report to the Members of College of Anaesthetists of Ireland

We have audited the financial statements on pages 26-28 of College of Anaesthetists of Ireland for the year ended 31 December 2012 which comprise the Income and Expenditure Account, the Balance Sheet, the Cashflow Statement and the related notes. These financial statements have been prepared under the historical cost convention and the accounting policies.

### Respective responsibilities of directors and auditors

As described in the statement of directors responsibilities the company's directors are responsible for the preparation of the financial statements in accordance with applicable law and Generally Accepted Accounting Practice in Ireland including the accounting standards issued by the Accounting Standards Board and published by the Institute of Chartered Accountants in Ireland.

This report is made solely to the company's members, as a body, in accordance with Section 193 of the Companies Act, 1990. Our audit work has been undertaken so that we might state to the company's members those matters we are required to state to them in an auditor's report and for no other purpose. To the fullest extent permitted by law, we do not accept or assume responsibility to anyone other than the company and the company's members as a body, for our audit work, for this report, or for the opinions we have formed.

Our responsibility is to audit the financial statements in accordance with relevant legal and regulatory requirements and International Standards on Auditing (UK and Ireland).

We report to you our opinion as to whether the financial statements give a true and fair view, in accordance with Generally Accepted Accounting Practice in Ireland, and are properly prepared in accordance with the Companies Acts, 1963 to 2012.

We also report to you whether in our opinion: proper books of account have been kept by the company; whether, at the balance sheet date, there exists a financial situation requiring the convening of an extraordinary general meeting of the company; and whether the information given in the directors' report is consistent with the financial statements. In addition, we state whether we have obtained all the information and explanations necessary for the purposes of our audit and whether the financial statements are in agreement with the books of account.

We report to you if, in our opinion, any information specified by law regarding directors' remuneration and directors' transactions is not disclosed and, where practicable, include such information in our report.

We read the directors' report and consider the implications for our report if we become aware of any apparent misstatement within it.

### Basis of audit opinion

We conducted our audit in accordance with International Standards on Auditing (UK and Ireland) issued by the Auditing Practices Board. An audit includes examination, on a test basis, of evidence relevant to the amounts and disclosures in the financial statements. It also includes an assessment of the significant estimates and judgements made by the directors in the preparation of the financial statements, and of whether the accounting policies are appropriate to the company's circumstances, consistently applied and adequately disclosed.

We planned and performed our audit so as to obtain all the information and explanations which we considered necessary in order to provide us with sufficient evidence to give reasonable assurance that the financial statements are free from material misstatement, whether caused by fraud or other irregularity or error. In forming our opinion we also evaluated the overall adequacy of the presentation of information in the financial statements.

### Opinion

In our opinion the financial statements give a true and fair view, in accordance with Generally Accepted Accounting Practice in Ireland, of the state of the company's affairs as at the 31 December 2012 and of its surplus and cash flows for the year then ended and have been properly prepared in accordance with the requirements of the Companies Acts 1963 to 2012.

We have obtained all the information and explanations we consider necessary for the purposes of our audit. In our opinion proper books of account have been kept by the company. The financial statements are in agreement with the books of account.

In our opinion, the information given in the directors' report is consistent with the financial statements.

*Aidan McCarthy*

**For and on behalf of Ormsby& Rhodes  
Chartered Accountants & Registered  
Auditors**

9 Clare Street  
Dublin 2  
19 April 2013



## Balance Sheet

31 DECEMBER 2012

	2012	2011
<b>FIXED ASSETS</b>		
Tangible assets	9,879,383	10,011,189
<b>CURRENT ASSETS</b>		
Debtors	255,969	481,189
Cash at bank and in hand	2,657,797	2,338,518
	—————	—————
	2,913,766	2,819,707
<b>CREDITORS</b>		
amounts falling due within one year	(985,076)	(925,724)
	—————	—————
NET CURRENT ASSETS	1,928,690	1,893,983
	—————	—————
	11,808,073	11,905,172
<b>CREDITORS</b>		
amounts falling due after more than one year	(1,476,925)	(2,275,854)
	—————	—————
TOTAL NET ASSETS	10,331,148	9,629,318
	—————	—————
<b>CAPITAL AND RESERVES</b>		
Retained surplus	10,331,148	9,629,318
	—————	—————
MEMBERS FUNDS	10,331,148	9,629,318
	—————	—————
On behalf of the Board of Directors		
<i>Dr. Ellen O'Sullivan</i>		
<i>Dr. Harry Frizelle</i>		
Directors		



## Professional Competence Scheme Committee Report

### Development

The College of Anaesthetists of Ireland was charged under The Medical Practitioners Act 2007 with the administration of a Professional Competence Scheme (PCS) and an agreement was signed with the Medical Council in 2011 to implement a PCS for registered doctors aligned to the specialty. The scheme was developed in liaison with the Forum of Irish Postgraduate Training Bodies resulting in a broadly similar process across all training bodies.

Since May 1st 2011 registered medical practitioners have been required to enrol on a PCS and have a legal responsibility to maintain professional competence. CAI PCS has been designed to promote self directed and practice-based learning activities comprising of Continuing Professional Development (CPD) and Clinical Audit, and to support all registrants in planning and recording CPD in addition to maintenance and development of competencies (e.g. professionalism, knowledge and skills to meet changing patient needs).

### Fees

The annual fee, similar to other postgraduate training bodies, covers the cost of investment by the college in software, administration and database management. This fee is payable at the beginning of the PCS year to allow enrolment. CAI will offer a reduced fee for 2013-2014: €240 for registrants in good standing and a further 5% reduction if payment is received by the end of August. A late payment fee of €50 will be incurred for enrolment after November 30th.

### Process

The PCS year runs May to May, according to legislation. Once enrolled on the CAI PCS you can upload/edit credits to your e-portfolio at any time. Information on PCS requirements, with links to the forum of Irish Postgraduate training bodies, frequently asked questions on PCS and the Irish medical council documents relevant to PCS are available on the CAI website.

A Statement of Participation (SoP) is issued by CAI to registrants at the end of the PCS year. We encourage PCS registrants to keep the e-portfolio updated so that a SoP can be issued on May 1st. When renewing Medical Council registration a doctor is asked to declare in good faith that he/she is enrolled in a professional competence scheme and maintaining competence in line with requirements.

### Verification

Under the terms of the agreement with the Irish Medical Council, CAI is obliged to undertake annual verification of a sample of Statements of Participation. A number of our registrants (randomly selected) are asked to provide documentation in support of data uploaded during the PCS year. Once verified these doctors will not be selected for verification for the next two years. Alternatively the Statement of Participation may be amended and the registrant will undergo verification the following year. In addition, the Medical Council will undertake an annual audit of a random sample of registered doctors. If selected you will be asked to submit your Statement of Participation to the Medical Council.

### PCS Evolution

We have reached the end of the second year of PCS. The evolving process in accordance with the IMC guidelines may in future include performance assessment, formulation of action plans and remediation as well as multi-source feedback.

The CAI for its part has endeavoured to keep the PCS process simple and user friendly for meeting organisers and for PCS registrants and to represent our registrants' interests in communication with the IMC.

*Dr Deirdre McCoy*

**Chairperson CAI PCS Committee**



## Council of The College of Anaesthetists of Ireland 2012



*Council of The College of Anaesthetists of Ireland 2012*

Elections to Council of the College of Anaesthetists of Ireland were held in May 2012. Dr David Mannion was re-elected for a second term and Drs Anne Hennessy, Brian Kinirons, Frank Loughnane and Saad Mahdy were elected to Council

### Council Members

Dr Ellen O'Sullivan	<i>President</i>
Dr Ken Lowry	<i>Vice President</i>
Dr John Loughrey	<i>Honorary Secretary</i>
Dr Henry Frizelle	<i>Honorary Treasurer</i>
Dr Gerry Browne	<i>CAI Representative, Pain Exam</i>
Dr Kevin Carson	<i>Chairperson House Committee, International Aid and Development Committee</i>
Dr Kevin Clarkson	<i>Chairperson Credentials Committee</i>
Dr Liam Conroy	<i>CAI Representative, Faculty of Pain Medicine</i>
Prof George R Ghaly	<i>Membership Exam Audit</i>
Dr Philip Hawthorne	<i>Chairperson Examinations Committee</i>
Dr Anne Hennessy	<i>Chairperson Membership Exam</i>
Dr David Honan	<i>Chairperson Quality and Safety Committee</i>

Dr Muhammed Khalid	<i>Membership Secretary</i>
Dr Brian Kinirons	<i>Chairperson Education Committee</i>
Dr Frank Loughnane	<i>Secretary Training Committee</i>
Dr Saad Mahdy	<i>Secretary Education Committee</i>
Dr David Mannion	<i>Chairperson Training Committee</i>
Dr Deirdre McCoy	<i>Chairperson Professional Competence Committee</i>
Dr Damian Murphy	<i>Hospital Inspections</i>
Dr Tom Owens	<i>Hospital Inspections</i>

### Co-opted Members

Dr Joseph Keaveny	<i>Dean Faculty of Pain Medicine</i>
Dr Dermot Phelan	<i>Dean JFICMI</i>
Dr Roseita Carroll	<i>Chairperson, CAT Committee</i>
Dr Rory Page	<i>Convenor Irish Standing Committee, AAGBI</i>
Dr Joseph Tracey	<i>Director MSc Programme</i>
Ms Anne Maher	<i>Lay Representative</i>
Mr Patrick Nolan	<i>Lay Representative</i>

### Ex-Officio

Dr Jeanne Moriarty	<i>Chair, NCPA Advisory Group</i>
Dr Ian Surgeon	<i>Post Graduate Dean</i>
Dr Ellie O'Leary	<i>Vice Dean</i>
Mr Fintan Foy	<i>Chief Executive Officer</i>

### Lay Representative Committee Members

Mr Noel Beecher	<i>JFICM</i>
Mr Enda Brazel	<i>Finance and General Purposes Committee</i>
Dr Marie Therese Clancy	<i>PCS Committee</i>
Mr Michael Delargey	<i>Examinations Committee</i>
Dr Margaret Denny	<i>Education Committee</i>
Mr James Gormley	<i>NCPA</i>
Mr Duncan Gruselle	<i>Faculty of Pain Medicine</i>
Mr David Hickey	<i>Credentials Committee</i>
Ms Catherine MacDaid	<i>Quality and Safety Advisory Committee</i>
Ms Anne Marie Regan	<i>Training Committee</i>

### Co-Opted Members to Committees

<i>Examinations Committee</i>	Prof David Croke
<i>Education Committee</i>	Dr Niamh Hayes
<i>PCS Committee</i>	Dr Brian Marsh
<i>Credentials Committee</i>	Dr Josh Keaveney
<i>Training Committee</i>	Dr Leo Kevin
	Dr Crina Burlacu
	Dr Fergus Walsh
	Dr Philip Hu
	Dr Rory Page
	Dr Connail McCrory
	Dr Andrew Westbrook

## Photographs From Recent Events



*Professor Monty Mythen, Dr Ian Surgeon and Prof Steve Shafer at the Honorary Conferring Ceremony prior to the Gala Dinner in The Convention Centre Dublin*



*Dr Ellen O'Sullivan, Prof Steve Shafer, Dr Jeanne Moriarty, Prof Monty Mythen and Mr Fintan Foy at the Honorary Conferring Ceremony in The Convention Centre Dublin*

## Photographs From Recent Events



*Dr John Loughrey, Dr James Gardiner, Dr Ellen O'Sullivan and Mr Fintan Foy presenting Ms Rio Flom from De Paul Ireland with the proceeds from the CAI Annual Golf Day*



*The presentation of the Abbot Scholarship prizes to Drs Noelle Murphy and Grace Donnelly*



## Photographs From Recent Events



*Dr Ellen O'Sullivan, Dr Asma Ashraf Khan, Dr Ummara Farooq, Dr Jeanne Moriarty, Dr Vandan Ward and Dr Muhammed Farooq Aslam at the Conferring Ceremony in the Westin Hotel*



*Drs Roseita Carroll, Evan Lambe, Jeanette Brohan and Clare O'Connor at the Conferring Ceremony in the Westin Hotel*

## Education Calendar 2013

- 19th January – Medical Education Symposium Day, CAI
- 29th – 31st January February – Final FCA Revision Course, CAI
- 7th February – AAGBI Core Topic Day, CAI
- 16th February – Medical Undergraduate Intern & Day. An Introduction to Anaesthesia, CAI
- 21st, 22nd & 23rd – Faculty of Pain Medicine ASM, CAI & CCD
- 25th February– Vascular Access Workshop, CAI
- 2nd March – Mid Western Anaesthesia Congress, In Conjunction with the 21st Sylvester O'Halloran Meeting O'Shaughnessy Anaesthesia Research Medal, Limerick
- 8th March Echocardiography Workshop, CAI
- 12th March – "Regional Anaesthesia Update & Ultrasound Workshop", CAI
- 14th March– Delaney Medal Competition and Spring College Lecture, CAI
- 15th March– Abbvie Scholarship Presentations, CAI
- 28th March – Making a Difference, A Presentation Skill Workshop, CAI
- 26th & 27th April – Western Anaesthesia Symposium, Radisson Hotel, Galway
- 10th & 11th May – Irish Paediatric Anaesthesia & Critical Care Society Annual Scientific Meeting, Cork
- 17th & 18th May– Irish Congress of Anaesthesia and Annual Dinner, Convention Centre, Dublin
- 1st – 4th June – Euro Anaesthesia 2013, Barcelona
- 14th June – AAGBI Core Topics Day, Hilton Hotel, Belfast
- 21st & 22nd June 2013 ICSI, Herbert Park Hotel, Dublin 2
- 11th, 12th & 19th July, Introduction to Anaesthesia Course, CAI
- 4th – 7th September – Annual ESRA Congress, Glasgow, UK
- 18th – 20th September – AAGBI, Annual Congress, Convention Centre Dublin
- 25th – 29th September – Dingle Conference, Dingle, Kerry
- September – Primary Exam Revision Course
- September – Local Anaesthesia for Ophthalmic Surgery Workshop, Royal Victoria Eye & Ear Hospital, Dublin
- September – South of Ireland Association Meeting
- 5th – 9th October, ESICM Annual Congress, Paris
- 10th October – Core Topics Day, CAI
- 12th – 16th October, ASA, San Francisco, USA
- 18th October – Audit Study Day, CAI
- 2nd November 2013 – IPS Annual Scientific Meeting
- November – Airway Management Workshop, CAI
- **Winter Anaesthesia Weekend 2013 – 22nd / 23rd November**  
22nd November: Professionalism in Practice Workshop, KP Moore Medal Presentations, Winter College Lecture, CAI  
23rd November Irish Standing Committee, Open Meeting and Seminar, Dublin
- 6th December – Irish Society of Obstetric Anaesthesia Annual Meeting, CAI



## CAI Organisational Diagram and Reporting Pathways

