

NORTHERN IRELAND REGIONAL ORTHOPAEDIC TRAUMA COMMITTEE MINUTES
on WEDNESDAY 15th JUNE 2022 @ 10:30AM
ZOOM MEETING ONLINE

Present:

Phil Charlwood (Chair)
David Warnock (Vice Chair)
Andrew Foster (Treasurer)
Jim Ballard (TPD)
Tim Doyle (CAH Rep)

Brian Hanratty
Danny Acton
Rob Bruce-Brand

Mark Murnaghan
Paul Magill
Veronica Roberts
David McMurray
Sean Patton
Jonathan Bunn

Brian Mockford
Simon Henderson
Ravi Pagoti
Gerry Kelly
Seamus O'Hagan
Laurence Cusick
Pooler Archbold
Lynn Murphy
Gary Colleary
Michael McMullan
Sean McHenry
Conor Mullan

Carolyn Geddis
Elaine Robinson

Anne Mulgrew
Nicola Hart
Diane Stewart
Fiona Wilson

Apologies:

David Beverland

Presentation/ Demonstaration of the Patient Portal on ECR

The meeting commenced with a 15 minute presentation of the new Patient Portal on ECR by Ms Anne Mulgrew.

This included:

Initial patient invitation to join via e-mail

Patient Portal Screens – Appointments / Circle of Care / Documents / Goals / Health Library / Lab Results / Medications / Shared Files

Discussion then included the difficulties for elderly and incapacitated patients to engage and the availability of suitable devices to access the service.

Mr Mockford raised the issue of time allocation to allow input of information at clinics and Miss Roberts made the point that only information relevant to the patient's clinical care should be included with some ability built in to control the Library & Results sections.

Ms Mulgrew and her colleagues Ms Stewart, Hart & Wilson were thanked for their contribution and all 4 then left the meeting.

Previous Minutes

Minutes from the NIROTC Zoom Meeting on 11.03.2022 were presented and passed with no amendments.

Matters Arising From Previous Minutes

Training – Mr Ballard confirmed that trainees do have access to operating lists taking place in SWAH, however this remains subject to the Provider giving permission and NIMDTA remain in discussions with the Provider (Musgrave House).

Surgical Podiatry – Mr Henderson reported that the Foot & Ankle Transformation Team had met with the College of Podiatry and DoH. Currently the DoH have no plans to use surgical podiatry in NI.

GIRFT – Mr Ballard hoped that the GIRFT Report into the Recovery of Elective Orthopaedic Services in NI should be available within the next 1-2 weeks.

Treasurer's Report:

Andrew Foster was pleased to announce that after a long application process, NIROTC was granted charitable status by The Charities Commission on 16.03.2022. (Charity Reg No 108615).

He will arrange for Gift Aid Forms to be available for completion by all contributing surgeons thus allowing an uplift in donations by 25%.

Income:

AF again explained that each member of NIROTC is expected to contribute £100 annually. Currently of the 82 NHS Consultant T&O Surgeons in NI, 48 contributed in 2020, 39 in 2021 and to date only 29 in 2022. He reminded members that such payments are tax deductible and going forward are now eligible for Gift Aid.

The NIROTC Back Account details to set up a regular payment are:

Danske Bank Sort Code 950679 Account no. 20183261 (Please provide name as reference).

Expenditure:

In 2022 this includes:

Trainee Fellowship Funding (£750 x6)	£4500
Martin Medal	£100
Martin Medal Room Hire	£1000
Martin Medal Prizes	£1250
Accountant Fee	£500
Zoom Platform	£120
Charity Setup Costs	£600
TOTAL	£8070

Current Account Balance £17000

It is clear that currently our annual expenditure is over £5000 greater than our income and this raises serious concern regarding the long-term financial viability of NIROTC to support our trainees and provide educational meetings.

TPD Report:

This was presented by Jim Ballard.

Recruitment:

Interviews were held via Zoom in March 2022.

5 NTN's & 4 LATs were appointed with a further 1 LAT possible if a local trainee takes up the TORC Fellow post in Aug 2022.

This means that 28 / 32 training posts will be filled.

Further Trust LAS appointments may be made to help support on-call rotas.

Elective activity in MPH will be prioritised for ST 7/8 trainees to fulfil their procedure numbers for CCST.

FRCS(T&O) Examination:

2 successful candidates in Feb 2022

5 successful candidates in April 2022

It is planned that Belfast will again host the Intercollegiate FRCS(T&O) Examination in April 2023. A plea has gone out for consultants to identify suitable intermediate clinical cases. The need for new examiners from NI was also highlighted.

ARCP:

This continues with small panel numbers and some face-to-face interviews planned for this summer.

Martin Medal:

Mr Ballard thanked those consultants who had attended the recent Martin Medal event in Londonderry and NIROTC for their ongoing financial support of this event.

The winner was Andrew Mayne who also received an additional award in recognition of his outstanding achievement in winning the Walter Mercer Prize as the top candidate in the 2021 FRCS (T&O) examinations.

Joint runners-up were Sam McMahon and Matthew Lynch-Wong.

Education Supervisor:

Andrew James is finishing in his role and will be replaced by Sean McKenna. Andrew was thanked for his work and commitment to the trainees during his tenure.

Chairman's Report:

Phil Charlwood reported from a meeting of BOA Council in April 2022 where there was broad sympathy and concern for the plight of T&O services in NI. BOA are aware of the GIRFT process currently underway and are keen to offer support when the report is published.

PC thanked NIROTC and those consultants who attended the recent Martin Medal ceremony in the Millennium Forum, Derry. He congratulated the trainee winners and also Ms Veronica Roberts who was awarded Trainer of the Year.

PC again confirmed that to date, no acknowledgement or response to his letter to Health Minister, Robin Swann (sent in Dec 2021) had been received and this was very disappointing.

Unit Reports:

UHD

No report

RVH (Michael McMullan)

Activity levels remain very busy in fracture clinic / wards / theatres.

Gavin Heyes is due to take up his substantive post (F&A) in Aug 2022.

Gerry Kelly has been appointed to a substantive post (Limb Recon / F&A).

MPH (David Warnock)

Elective theatre capacity has increased to 4 all-day theatres (3 elective / 1 fracture) thanks to the return of re-deployed nursing staff and some additional recruitment.

Raymond McKenna has been appointed to a substantive post – Paeds fractures / F&A

The following Locum Cons posts have been filled:

Harriet Julian – Paeds fractures / UL

Jonathan Warnock – Trauma / Lower Limb incl arthroplasty (RVH)

Adam Tucker - Trauma / Lower Limb incl arthroplasty (RVH)

Locum Spine post remains unfilled.

RBHSC (Carolyn Geddis)

Raymond McKenna & Harriet Julian have been recruited as above.

Consultant On-Call rota (1 in 6) in RBHSC remains problematic. 2 out of 6 nights on rota are still being covered by Locums – thanks to G McAlinden & G Kelly for their help.

Fracture clinics have been busier than normal and VFCs remain unfunded.

T&O have access to only 4 theatre sessions in RBHSC per week and access to emergency lists remains very limited with increased competition from specialties such as haematology & ophthalmology who previously did not access RBHSC theatres pre-Covid.

Cancellation rate for elective paediatric ortho cases in RBHSC remains very high at 23%.

Altnagelvin (Danny Acton)

Day Case Unit continues to work well.

Ward beds are becoming increasingly blocked by medical outlying patients with delayed discharge to the community.

There has been some difficulty in obtaining Locum cover to maintain the Reg on Call rota at 1 in 8.

There are plans to appoint 3 new Locum Cons posts with a view to making these substantive in the near future.

Craigavon (Tim Doyle).

Trauma remains busy - currently running 14 Trauma Lists/week

Elective lists are running at 2 all-day lists per week.

Some new nurses have been recruited and hopefully elective activity will improve.

Fracture clinic attendances remain high despite the use of VFCs.

Discussion around reports:

The Royal College of Anaesthetists Report on Paediatric Orthopaedic Surgery on the MPH site was discussed. This recommended :

Child Protection & Governance in BHSC should be reviewed.

More cases should be done in RBHSC rather than MPH.

MPH cases should be limited to day cases done on an AM list only with no overnight stays.

Discussion concluded that there was no chance of a change in policy by the anaesthetists as this would go against their RC report and leave them vulnerable to criticism or suspension.

The prospect of undertaking some of the paediatric ortho cases in SE Trust was also discussed.

Workstream Reports

NIROTC Website

David Warnock reported that further work had taken place with Geoff Cinnamond of 1-Logic re setting up a NIROTC website.

Setup costs are approximately £2000 with an annual running cost of £200-£300.

Funding for this is in place through NIROTC account and an initial payment of £500 will be made.

DW hopes that a prototype website will be ready for demonstration at the AGM in Nov 2022 with a view to going live thereafter.

Paeds T&O Situation

An open discussion then took place around the current difficulties faced in providing a safe and sustainable Paediatric T&O service for NI.

Phil Charlwood opened the discussion by stating that if a regional paed fracture service could not be sustained in Belfast then the current paed fractures treated in Altnagelvin would have to stop as there would be no back-up for more complex or multi-trauma cases.

Carolyn Geddis stated that since the change in anaesthetic policy in BHSCT following their RC Report in 2017, Paeds Elective Orthopaedics was now on the "At-Risk" Register and if Paeds Elective Orthopaedic services were lost or discontinued then due to a loss of skills / loss of senior staff / extreme difficulty in recruitment – it would be impossible to sustain the delivery of acute paed fracture services and sustain an on-call rota.

Mark Murnaghan pointed out that a significant problem related to a lack of capacity within RBHSC despite further expansion needed to take on the additional adolescent (14-16 yo) T&O workload. He suggested that a ring-fenced Paeds T&O Unit would be needed to allow the service to continue, and this may have to include 3 session day and weekend sessions as well as a capacity for overnight stays in MPH.

Jim Ballard pointed out that the fracture & elective orthopaedic parts of the service were currently under different management divisions, and this was also causing a discontinuity and lack of joined up thinking. Currently the DoH contract 65% of the fracture and 100% of the paed ortho workload for NI from BHSCT and that the DoH should hold BHSCT to account for their failure to deliver these services. He also pointed out that he and some of his colleagues had considered resignation or moving to a different post given the ongoing frustrations and that given how unattractive the posts were currently, any future recruitment would be extremely difficult.

Gary Colleary used the Diabetic Foot Service as an example where only the threat of withdrawal of funding from the DoH eventually pushed the BHSCT into action to get the service up and running.

There was unanimous support from the NIROTC body that our Paeds T&O colleagues would have our full backing in their ongoing discussions with the BHSCT & DoH to maintain this vital part of our regional service.

Any Other Business

None

Date of Next Meeting

AGM - Friday 18th November 2022 afternoon (start time to be confirmed)

Hosted by the Craigavon Unit (Mr T Doyle) at Edenmore Golf & Country Club, Magheralin BT67 ORH