

FOR MEMBERS OF THE ROYAL COLLEGE OF PHYSICIANS AND SURGEONS OF GLASGOW

AUTUMN 2018

MEDICAL CONSENT

More than a signature, more than a form



NHS AT 70

TALKING POINTS

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The Royal College of Physicians and Surgeons of Glasgow's comprehensive non-clinical skills training programme enables healthcare professionals to develop skills in teaching and education, leadership and management, and professional competencies.

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- Practical advice for new consultants
- Clinical learning environment
- Academy of Clinical Educators (ACE) Conference PULSE 2019: Developing the doctor, designing solutions for difficult situations

There are also online updates on non-clinical skills topics such as the hidden curriculum, human factors and leadership.

For full course listings visit

rcp.sg/events



ROYAL COLLEGE OF PHYSICIANS AND SURGEONS OF GLASGOW

CENTRAL STATES

voice EDITION 1



MEDICAL CONSENT

More than a signature, more than a form

Montgomery and informed consent: where are we now? Tips for foundation doctors, trainees and their supervisors.



PRESIDENT'S UPDATE

Professor David Galloway reflects on his term and looks to the future.



WIDENING HORIZONS

Dr Vinay Kashi: 39 days at Salisbury District Hospital.



OUR ADVICE FOR NEW DOCTORS

Top tips to help with the transition from medical school to foundation year.

for himself.

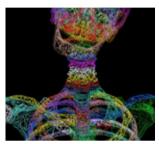
Mr Roy Miller, now 86, was a young medic training at Glasgow Royal Infirmary, long before Accident and **Emergency became** a standalone department, when he encountered the grisly consequences





TALKING POINTS

Research shows UK patient safety compromised by staffing issues



OUR SCIENCE AND ART: VISUALISING THE HUMAN BODY

Our latest Heritage exhibition looks at how advances in technology and in our knowledge of human anatomy have changed the ways we see (and see inside) the human body.



REGULAR FEATURES

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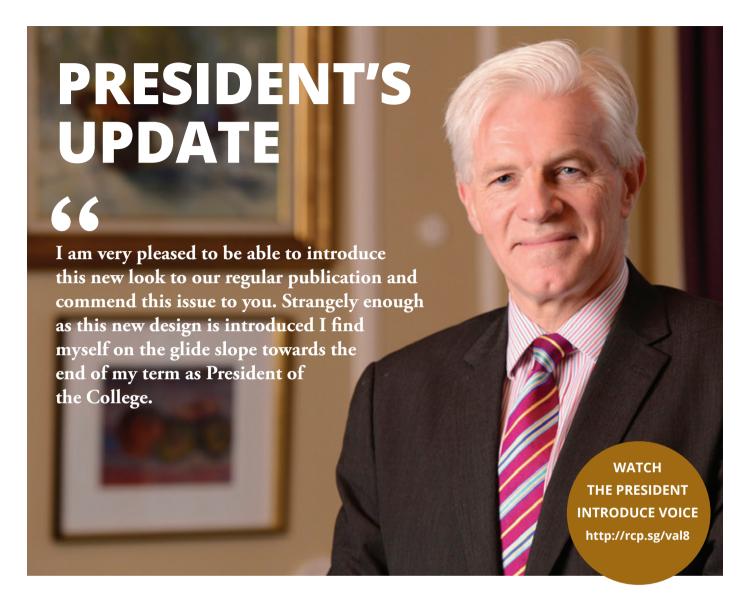
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he last three years seem to have flown past. It is relevant that this new communication features now because it is characteristic of some of the changes we have seen come to fruition in my presidency over the past three years. It has been a real privilege to serve in this role and while there are many things to celebrate and remember fondly, there have also been a few challenges and the occasional need to think quickly and hopefully clearly to deal with the unexpected.

When I started out in 2015 I committed to several objectives and I think it fair to report a measure of satisfaction in what has been achieved. I will perhaps say more about this in the Annual Report. There is however no doubt that the College has seen significant change over this period of time. Development in membership, reach, responsibility, charitable purpose and even in our physical footprint in our base in Glasgow.

Over the past five years our College membership has grown by an impressive 40%. I am particularly pleased by the development in the dental membership and while there has

been growth across the disciplines we can certainly do more to encourage our Fellows and Members to, in turn, encourage their younger colleagues to associate with us and take up the challenge of maintaining the relevance of the College into the future.

Our activities, both in the UK and around the world, have also developed in an impressive way. We launched the Academy of Clinical Educators and have been impressed by our members' response and enthusiasm to be involved. This will allow access to excellent clinical education resources to support those who wish to enhance their education, skills and experience and will help us to develop high-quality faculty for existing courses. I am also encouraged by the number of new courses and ideas which have emerged and I am absolutely delighted with our new Macewen Clinical Skills Lab. We have been licensed by Her Majesty's Inspector for Anatomy for Scotland and have appointed two licensed teachers of anatomy to oversee this. This is a significant enhancement to our ability to deliver hi-fidelity operative simulation across a range of specialties and clinical scenarios. In addition we have

(now launched) the Davies e-learning studio which provides state of the art facilities for audio-visual recording and editing as well as the co-ordination of web-streaming our events to other locations around the world. We have already shared some of our flagship events with centres in the Middle East, Malaysia and India this year and this is only the beginning.

It should be clear that there are tremendous opportunities for Fellows and Members to engage their creativity and come forward with their ideas for new courses and resources and there is a drive to make our education offerings more future focused with the advent of the e-learning or blended learning facilities that we now have. I am also determined to make as much of our educational output as possible freely available as a membership benefit. Positioning this requires considerable work but it is already under way and you can certainly expect to hear more about this soon.

We have had a measure of concern over the performance of some of our examinations but I am delighted to report that the trend is now much more encouraging.

One of the great joys of Beyond our traditional education and being able to represent the assessment roles we have become much College internationally has been more adept in navigating the digital communication scene. With our new an opportunity to connect with Marketing, Communications and Policy colleagues and friends specialists we have been much more visible as advocates on a whole range of issues in diverse parts of including alcohol policy, obesity, maternal the world. morbidity and mortality, physical activity, global citizenship and even the hot political topics of the day. Most recently we have engaged the implications of the Brexit negotiations and of course the tragic Bawa-Garba case, the effects of which have reverberated around the world. I have also gathered views of our membership on some of the controversial health related issues of our day. These require careful handling and it has been very useful to have the views of colleagues on items such as transplantation consent, beginning and end of life issues as well as the thorny problems of gender identity. We have worked hard to bring some of our heritage collections to prominence and the Heritage team under the oversight of Roy Miller have done a superb job. It was particularly notable to be able to herald the internationally significant contributions made by Glasgow clinicians from the introduction of surgical antisepsis by Joseph Lister 150 years ago to the modern NHS and we were pleased to make particular note of diagnostic ultrasound and the Glasgow Coma Scale – both of which are used in virtually every hospital in the world!

We have been able to modernise our management structure with the help of our (now relatively) new CEO Dr Steve Graham. It has been such a pleasure to work with Steve and to see him represent us enthusiastically and so effectively in the intercollegiate arena.

One of my stated aims three years ago was to try to have more of a rapport with our younger colleagues and prospective members. On the formal side we have a very enthusiastic Trainees' Committee, active and engaged Buddy Scheme members, good training courses for examination preparation, clinical education and human factors and we have also been able to support the Glasgow University Surgical Society, the Scottish Medical Students Golf Association and a number of other groups – they all seem to appreciate and enjoy the opportunity to come to the College and be involved.

One of the great joys of being able to represent the College internationally has been an opportunity to connect with colleagues and friends in diverse parts of the world. I have always been impressed at the way our College is so highly regarded. While we hold the respect of so many specialists it remains an ambition to better serve their needs within their particular context.

Since I last wrote, I think the particular highlight of my year centred on our last Admission

Ceremony in June 2018. We had a fantastic and joyous day and amongst the several hundred receiving their diplomas we were pleased to award several Honorary Fellowships. Two of these introduced surgeons who have made contrasting and amazing contributions to the delivery of surgical care in low and middle income countries. Dr John Meara from Harvard has been instrumental in providing strategic direction for governments, the WHO and other organisations as surgical,

anaesthetic and obstetric provision is scaled up. In contrast, Dr David McAdam has been at the business end of delivering front line care to the poor of sub-Saharan Africa as a Christian missionary surgeon. His description of life in the African bush as a single handed surgeon in one of our College Leadership lectures was inspirational and deeply moving. Many in the audience were both impressed and challenged by the contribution he has made.

I write this from Sri Lanka where I have been the Guest of Honour at the Sri Lankan College of Surgeons Annual Clinical Congress. This has been an amazing event. We have developed really strong links with our colleagues here and we now recognise successful candidates in the MD (Surgery) examination at the Postgraduate Institute of Medicine in the University of Colombo for the automatic award of MRCS(Glasg). The GMC have, at our request, also formally recognised this qualification. In the next few days I hope to visit our new Glasgow College Centre in Chennai which gives us a formal physical presence (office, examination and education facility) in the Sri Ramachandra Medical College and Research Institute – one of the top ten such institutions in the whole of India.

As this summer passes into autumn, it will be memorable for the unusually warm weather. As I reflect on some of these activities and contributions – how memorable they will be for the College - only time will tell.

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