



Association for Palliative Medicine

Annual General Meeting

Thursday 24 March 2022

14:30 – 15:45

PCC, Telford International Centre

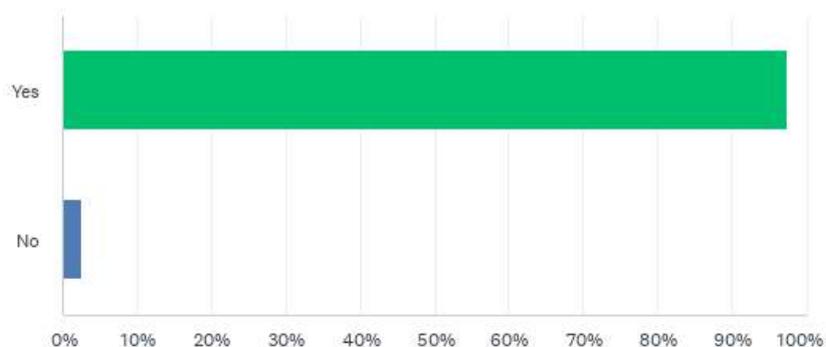
Room: Ironbridge 1

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|--|------------------------|
| 1. Welcome from Chair | |
| 2. 2021 Annual General Meeting | Dr Amy Proffitt |
| 3. President's report | Dr Amy Proffitt |
| 4. Treasurer's report | Professor Derek Willis |
| a. Vote to ratify accounts – proposer/seconders/vote | |
| 5. Demitting committee members | Dr Amy Proffitt |
| 6. Questions/AOB | Dr Amy Proffitt |
| 7. Close / date of next AGM | |

Due to Covid-19, APM members were asked to complete a survey. This included ratification of the 2020 accounts and also upcoming changes within the Association.

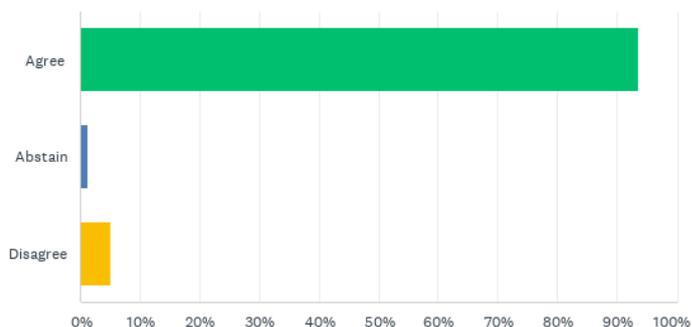
The results below illustrate that 97.5% of APM members ratified the accounts for 2020.

Q1 Do you ratify the Association for Palliative Medicine accounts for 2020?



The results below illustrate that 94% of APM members agreed to the increase in Junior Doctor membership.

Q3 APM membership fees have not been increased for some years. The costs associated with providing journals has increased annually and fees have also been compared to those of other societies. APM fees for junior members are significantly lower than those of other organisations. It is proposed to increase fees for junior members by £10 (to £40) from December 2021 and review all other membership categories at next year's AGM. Do you agree to this change?



President Report

APM AGM 2022

As we meet together face to face for the Palliative Care Congress, I am looking forward to building that physical network and see what incredible work we can achieve over the next few years so it is a privilege to be presenting this report on APM progress from April 2021 to April 2022. In a year when many organisations have had their plans “stalled, stilled and spelled” The APM has been able to achieve quite a lot. Our major work has continued, membership grew and evolved and our finances are healthy and there were many highlights in our year.

The APM restructure has bedded and all committees strive and work positively to promote the visions and values of the organisation to bring meaningful change to the care that we deliver to our services, patients and carers, populations and palliative care world here in Great Britain and Ireland and reaching out beyond this. Each of the committee reports will highlight that work and I thank every committee chair and member for their time and commitment, energy and experience and hard work over the last 12 months.

The APM have been integral to some vital work that may change the face of our specialty. Dying people will be given an explicit legal right to healthcare for the first time in NHS history, requiring every part of England to provide specialist palliative care. The government will back an amendment to the Health and Care Bill in the House of Lords. The amendment proposed during the Health and Care Bill debate in Parliament would introduce a specific requirement for clinical specialist palliative care services to be commissioned by Integrated Care Boards in every part of England. The amendment, put forward by Baroness Finlay of Llandaff, aims to improve care without increasing overall costs for the NHS. Peers provided evidence to support this amendment. This is a critical step. In light of the aging population and the projected increase in those needing specialist palliative care in the UK, it has never been more vital to provide high quality palliative care for all who need it.

The APM has worked with 27 other national organisations across Health and Social care and NHSI/E on Universal Principals on Advance Care Planning. This high-level piece of work was published in March 2022. This is about supporting a person’s individual choices and decisions about future care, so the person decides who else to involve and to ensure that conversations about future care are guided principally by what matters to that person. We are proud to have co-badged such important principles that allows our patients, their supporters and carers to speak up and have their voices heard.

The APM are also part of the Inequalities in Health Alliance which has focused on government amendments to the health and care bill.

The government laid its own amendments to the health and care bill this week. We were pleased to see the amendment that clarifies the triple aim for NHS England includes concern for inequality and the amendment that will require NHS England to publish guidance on data collection with respect to health inequalities.

By building concern for inequality into the fabric of the NHS, long term change is possible, although there is still much to do of course and the APM will continue to support this work.

Not only are we growing and influencing externally but we have been flourishing internally also. The APM Race Equity Committee was formed to support the APM to work towards becoming an anti-racist association which supports and empowers individuals working within palliative care from diverse ethnic backgrounds. This work has been led by Dr Jamilla Hussain and Dr Gurpreet Gupta with the support of Dr Aoife Gleeson and our last president Dr Iain Lawrie. I look forward to the ongoing vital work this committee is delivering.

A new communication committee has been established and we are in the process of redesigning our website - the forward face of the APM and improving clear communication that is dynamic and really two way between the organisation and its members. We truly want to represent the evolving and developing voice of that membership that we represent. Thank you to Dr Donna Wakefield, Dr Daniel Soutar, Dr Ollie Minton, Dr Rebecca Darge, Professor Mark Taubert and Dr Rachel Hogg for committing to take this forward.

Our specialist interest forums continue to thrive also and we aim to rejuvenate a Medical Directors SIF shortly this time with Professor Derek Willis at the helm after his successful session at last years PPC. Derek is now due to step down from his role as treasurer. Derek has ensured that finances are considered in every part of the APM and he has been central to our annual Congress planning, our relationship with journals and was the driving force behind the APM being able to provide members access to the PCF. I wish to thank him for all his incredible work and am pleased he will continue to be key in the organisation in his many roles- not least the very successful ethics study days.

I would like to take this opportunity to thank everyone who has contributed to the work of the APM. In particular, I would like to thank the APM Officers and Board, Committee and SIF members for all their hard work, usually undertaken in their own time, which makes the APM function and be the fantastic organisation it has become. However, none of this would be possible without the support we receive from our amazing Secretariat (Compleat Secretariat Services) and our events company (MunroSmith Associates).

For those that know me, I am not much of a gardener (one of my trainees would be horrified to know that I struggle to keep a pot plant alive) but we have not "stalled , spliced or spelled " , we have continued to flourish and grow. A garden unattended will grow but will not take the shape you may want. I wish to thank every individual that has taken time to tend to what we have as an organisation and a specialty. I am sure we will continue to flourish in the future.

A handwritten signature in black ink, appearing to read 'A Proffitt', written in a cursive style.

Dr Amy Proffitt
APM President

Vice President Report

APM AGM 2022

Palliative Medicine training and SHAPE

Palliative Medicine (PM) trainees will dual accredit in General Internal Medicine (GIM) from August 2022.

We have been aware for some time that this will present challenges, with gaps in posts whilst PM trainees move to GIM teams for 4 months at a time.

We know that Palliative Medicine training numbers have been insufficient to keep up with the expansion of the specialty and this has left vacancies at consultant level.

On your behalf we wrote to the Heads of School and HEE senior executives to set out the risks to patient care and services, especially in the hospice sector.

The lead Dean for Palliative Medicine has been supportive of our request that we support hospices by leaving the funding for a training post with them even when the trainee moves to a GIM post. This has not been agreed by all Deans/Schools of Medicine but the APM, with the SAC and your local specialty training committee will be working hard to achieve this.

There has been an acceptance by the lead Dean that Palliative Medicine needs a gradual increase in the numbers of PM training posts, which is a really important shift in position from them.

What you can do;

Familiarise yourself with the new curriculum.

Discuss with your Palliative Medicine Training Programme Director whether there is local agreement about funding for training posts staying with your hospice to fund backfill for your gaps. If not, you might like to read the report in the March APM Bulletin for an example of how you could achieve this from colleagues in the East of England.

Attend/watch Polly Edmonds' SHAPE masterclass at PCC this year

SEE Care

The APM is very excited to be collaborating with Simon Tavabie and Ollie Minton from the SEE Care study group to offer their snapshot audit of care of patients dying in acute hospitals to our members. This will be an opportunity to identify unmet need in those patients dying without the input of specialist palliative care. The project will benefit from the support of the UK Palliative Trainees Research Collaborative (UKPRC). The APM's involvement allows for relatively rapid analysis and turnaround of results to support local quality improvement against a national benchmark.

What you can do;

Read the March APM bulletin to find out more details and how to register

Clinical Excellence Awards become Clinical Impact Awards

There will be changes to National Clinical Excellence Awards from this year. Awards (now called National Clinical Impact Awards) will still be for five years but will be non-pensionable. Bronze, silver, gold and platinum awards are replaced by National 1, 2 and 3 awards. Applications are similar with five domains to complete to outline how your contribution goes above and beyond your job plan. Applications are no longer made for a specific award, instead the scoring determines which, if any, award is given.

Applicants can apply after one year of being a consultant and do not need to have held a local employer-based award.

This year applications will run April – June but in future the applications will be earlier in the year. There are still details to be agreed such as which organisations will be accepted to offer a citation. We will keep you updated as we hear more.

You may have heard that local clinical excellence awards or employer-based awards have been the subject of negotiation with the BMA and will also be changing. Agreement has not been reached for this year. It is possible that many Trusts will chose to divide the available fund between eligible consultants as in the previous two years.

What you can do;

Please consider putting in an application if you deliver work at regional or national level. Look out for the APM “top tips” guide that will be coming out shortly.

Dr Sarah Cox
Vice President

Treasurers Report

The 2021 period

APM AGM 2022

Introduction

Despite a year of Covid and self-isolation the APM remains financially stable. The summary of why this is the case is:

1. Membership has continued to grow both in response to the new membership categories introduced and due to the new and continued membership benefits
2. Education events have restarted – online training has taken off and the first virtual PCC was well received. Paul Paes and Elle Grogan and their committees have done sterling work in making sure that there have been educational resources for members and the wider health care community.

The Accounts for 2021 (End of year Accounts)

(Please note an APM year runs from December to November)

1. The Operating Account

In 2021 the operating account made a surplus of **£27,508** at the close of the APM financial year

The balance of the operating account was at the same point **£97,251.81**

We made a loss on this account in 2020- mainly due to the level of investment we had put into advertising membership changes – to make a surplus in 2021 vindicates these decisions and is a real achievement

The operating account is the account that membership gets paid into, where all the running costs of the organisation get paid from but significantly where the PCF fee is taken from.

The 2021 balance sheet indicates that the general fund balance is at **£345,353** (this includes the Scottish Widows reserves account)

The APM reserves level is set at 6 months' running costs. Based on 2020 estimated expenditure (£200,000), we should have 100,000 in the account. This indicates the APM has an unrestricted surplus above the reserve of £100,000 of **£245,353**.

2. The Education Account

November 2021 year end the account had **£201,476**.

At the end of the year, we had a surplus of **£100,547**

The high surplus this year is due to

1. Costs being paid in advance (i.e., Telford face to face costs being carried forward)
2. Refund of costs where carry forward was not possible
3. A very successful virtual PCC
4. The APM embracing more online teaching (diversification of courses offered and also certain courses e.g., Ethics going online and being repeated twice yearly)

3. The Restricted Reserve

The total in the restricted reserve is **£170,811**

This is made up of two main elements:

e-ELCA:	£156,876
Breathlessness Research Charitable Trust (Abe Guz):	£ 13,935

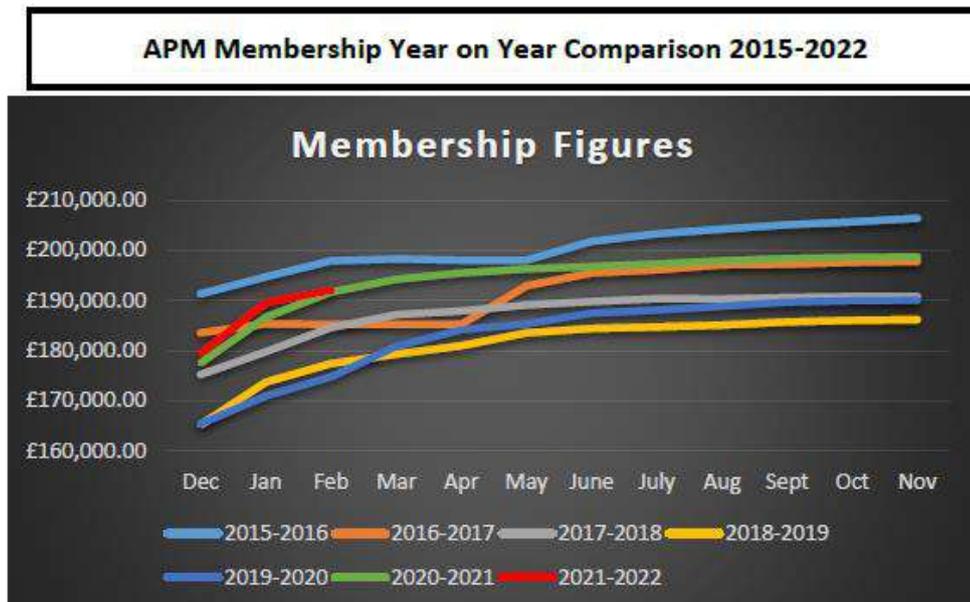
Our accountants have expressed concern regarding the stability of the grants from Abe Guz fund- details of a response to this are described below

Financial Issues and Actions in 2021

Income Generation:

Membership Income:

- Membership income increased at the end of the APM financial year (Nov 2021) by £11,002 compared to the previous year (total income for membership 2021s APM year was £200,689)
- This continues the increase in total revenue from membership fees income started last year
- Associate membership non- doctor continues to lag -to date there are 28 members in this category
- The junior membership fee was compared with other similar organisations (BTS BGS) and put up by £10 for this APM year- we will see the effect of this in December this year (2022).



	2015-2016	2016-2017	2017-2018	2018-2019	2019-2020	2020-2021	2021-2022
Dec	£191,350.00	£183,562.00	£175,238.00	£165,210.70	£165,416.23	£177,545.24	£179,467.24
Jan	£194,760.00	£185,343.00	£179,807.00	£173,730.00	£171,003.22	£186,670.13	£189,575.53
Feb	£197,924.00	£185,253.00	£184,599.00	£177,426.33	£174,784.78	£191,695.24	£192,055.62
Mar	£198,339.00	£185,253.00	£187,186.00	£179,291.08	£180,860.53	£194,266.12	
Apr	£198,099.00	£185,253.00	£187,906.00	£180,958.08	£184,186.32	£195,515.14	
May	£198,099.00	£192,941.00	£189,095.00	£183,570.62	£185,347.77	£196,312.67	
June	£201,836.00	£195,481.00	£189,790.00	£184,454.59	£187,470.69	£196,827.97	
July	£203,309.00	£196,129.00	£190,382.00	£184,735.99	£188,132.89	£197,324.36	
Aug	£204,267.00	£197,161.00	£190,295.00	£185,129.96	£188,891.96	£197,936.57	
Sept	£205,156.00	£197,236.00	£190,632.50	£185,721.71	£189,662.22	£198,374.68	
Oct	£205,738.00	£197,664.00	£190,795.50	£186,038.97	£190,000.15	£198,622.63	
Nov	£206,447.00	£197,811.00	£190,795.50	£186,217.86	£190,100.61	£198,747.73	

Membership Numbers (2018-2021)	2021	2020	2019	2018
Full Members paying full subscription	480	483	465	435
Full members paying reduced subscription	353	337	381	343
Associate members	110	105	75	70
Parental Leave	15	16	21	n/a
Junior Doctors	147	123	138	130
Medical Student (Free)	209	163	185	206
Total	1314	1227	1265	1184

Committee Expenditure

Expenses remain low for the past year as teams meetings have been exclusively used. I would encourage committees to continue using teams due to the reduction in carbon emissions, ease for members to attend if it is part of the day and the reduction in costs for the organisation overall.

The recommendation is that each committee should have only one face to face meeting a year.

Looking Ahead: Plans for 2022

1. Membership Income:

There has been no real- 'launch' for associate membership non-doctor and so I am hoping that the face-to-face PCC and specifically the nursing event at this will help promote this.

Discussion needs to be had regarding membership fees and whether the £10 increase in fee for the juniors needs to spread to other membership types

2. PCF:

The increase in membership saw an increase in the fee for PCF access online (£53,000) I negotiated a range of increase in membership before this fee would need looking at again- and am happy to report that the fee of £53,000 for the organisation stands again this year. This still represents a good service for our members and a good price for the organisation to pay.

3. Abe Guz

The breathlessness research fund is not being used up- the only expenditure used is using the interest. This makes it look like we are not being proactive in promoting the appropriate use of the fund. The original use for the fund is breathlessness education. A grant has been proposed to be issued next year at the PCC of up to £5000 for palliative care breathlessness education projects. This should help address this issue.

Operating Account Budget for 2022

The target forecast income for 2022 is £ 229,000

The forecast expenditure for 2022 is £215,1000 (with £23,000 extra to this for PCF from education account)

The key assumptions are:

Area	Expenditure
Administration, organisation, and telecommunications	£74,000
All journals	£37,100
Travel and accommodation	£6,000
Officers remuneration	£29,000
PCF	£53,000
All other costs	£39,000
TOTAL	£238,100

The end of year outturn is forecast to be around £14,000 unrestricted surplus.

APM Expenditure Forecast 2022



Summary

The two arms of income for the organisation are secure- the benefits of membership and the different types of membership available are proving popular

Education is flourishing again and is meeting the needs of our members and wider Abe Guz funds are being looked at in a different way next year

PCF expenditure is now being covered by our regular income- there should be no further need to use our reserves after this year

Recommendations

Associate membership non doctor needs actively promoting

A review of income following PCC this year needs to be conducted- this may influence the on-going balance between face to face and virtual

Membership fees need to be reviewed again

Fiona Hicks fund need to be looked at

Further discussions need to be had regarding ongoing use of the reserves the organisation has

Professor Derek Willis

Treasurer to the APM

March 2022

Education and Training Committee Report

APM AGM 2022

Membership

Dr Paul Paes	Chair
Dr Helen Bonwick	SSAS committee
Dr Felicity Dewhurst	PCC representative
Dr Polly Edmonds	SAC Chair
Dr Alison Franks	APM representative
Dr Angus Grant	Juniors Committee
Dr Suzie Gillon	APM representative
Dr Amy Hawkins	APM representative
Dr Richard Kitchen	E-ELCA lead
Dr Mary Miller	APM representative
Dr Wendy Prentice	APM representative
Dr Lizzie Woods	Trainees committee
Kate Smith/ Becki Munro	MunroSmith Associates- APM event organisers

The Education and Training Committee remit is to co-ordinate the Association's educational strategy and activities. The committee aims to ensure the educational needs of members and other professionals are met through:

1. A comprehensive education programme (face-to-face and e-learning)
2. The production of educational resources
3. Signposting to external events

Summary of Committee Activity

1. APM members' educational benefits

Members receive the following educational package:

- At least 25% discount to APM study days or resources where charges apply
- Electronic access to the journal Palliative Medicine and PCF
- Hard copy of BMJ Supportive and Palliative Care
- Free access to APM publications about policy, curricula, guidelines etc
- e-ELCA
- regular communication about education events

2. e-ELCA

e-ELCA is covered in a separate update.

3. New education activities 2021-22

As the country has navigated through Covid, much of the activity of the committee has been developing virtual education sessions and study days and more recently planning a return to face to face events. Running virtual events has been a big success reaching members who have sometimes struggled to attend for face to face events. Once the external environment has settled, educational activities will end up with a mixture of face to face (to allow more interaction and networking) alongside virtual events (to allow greater accessibility).

There has been several new activities including:

-**APM Education Hub**. This has been launched as a one stop shop for members to access APM educational activities- signposting of events, booking and viewing study days, accessing educational resources. The hub will grow in scope over time and as the APM launches a new website, the interfaces will work more seamlessly.

-**Postgraduate Medical Education Special Interest Forum (PME SIF)**. This has now been successfully launched, co-ordinated by Suzie Gillon and Mary Miller. The purpose of the PME SIF is to provide a network for individuals with an interest in providing postgraduate palliative medicine education and its aims include:

- To facilitate sharing of research evidence and best practice in postgraduate medical education
- To provide updates on developments in postgraduate medical education
- To provide an accessible repository of palliative medicine educational resources offered by participating members and organisations for use by all
- To hold educational events for individuals who deliver postgraduate medical education, including an annual meeting

The first educational meeting was held in 2021 with a further meeting planned in October 2022.

- **Covid webinar series** successfully launched at the height of Covid as the APM's first virtual activities covering key issues during Covid.

- **Palliative care for FY1s** successfully launched for newly qualified doctors

- **APM Juniors webinar series** on Palliative Care in non-malignant disease has been attracting record numbers for this virtual series

4. APM Study Days/ Conferences 2021-22

Theme	Date	Venue
2021		
Palliative Care Congress	25-26 Mar	Virtual
"Go with your Gut"	13 & 27 May	Virtual
PME-SIF (IMT): Palliative care initiatives to support CiP 8 competency achievement	18 Jun	Virtual
Palliative Care for FY1s	1 Jul	Virtual
Meeting the need & models of working for people with neurodegenerative conditions	5 Jul	Virtual
Medical Updates Study Series	16 & 30 Sep	Virtual
Ethics Course	Sep-Oct	Virtual
SAS Committee: <i>"Pain Management"</i>	24 Nov- 9 Dec	Virtual
Trainees Committee: <i>Preparing to be a Consultant</i>	1, 7 Dec	Virtual
2022		
Ethics Course	3-28 Jan	Virtual
Juniors webinar series: Palliative Care in non-malignant conditions	Jan to Jun	Virtual
PCC	Mar 2022	Telford
CBT workshop	Mar 2022	Telford

5. Developments 2022-23

The Committee is focussing on a return to face to face educational events during 2022, developing the education hub, initially with a focus on the PME SIF before wider input.

We will be looking to develop further study days, especially in collaboration with other organisations eg. PCRS, BGS and are working with the Nurse Consultants group to understand the needs of specialist nurses.

Acknowledgements

I would like to thank committee members for making our committee so enjoyable to be on, and their enthusiasm and commitment to develop our educational strategy.

<https://apmeducationhub.org/>



@APMStudyDays

Dr Paul Paes

Education & Training Committee Chair

March 2022

e- ELCA Report

APM AGM 2022

This report focusses on work over the last year.

Strands of work and future opportunities

1. New session development
2. Rolling session update programme
3. Communications strategy
4. Improving the utility and accessibility of e-ELCA
5. Engagement with others
6. Future leadership

1. New session development

The following new sessions have been released over the last year:

- Time critical telephone conversations
- Discussing nutrition at the end of life
- Engaging effectively about advance care planning with people from ethnically diverse backgrounds

The following sessions are currently in development:

- Palliative care for those with mental ill health
- Deprescribing in palliative care
- Recognising a patient with palliative care needs
- Palliative care for Young adults Transitioning from Paediatric services

Thanks to those who have helped develop sessions.

2. Rolling session update programme

The e-ELCA programme contains approximately 165 sessions. It is imperative that all sessions are reviewed to remain up-to-date. The aim is to try to review each session on a 3-4 yearly basis. By the nature of the variety of sessions, some session updates can be completed in a short period of time, whereas others require significantly more work. A small number of sessions due for update from 2018 and a larger number from 2019 are still outstanding; this deficit is being caught up.

The following 38 sessions have been reviewed over the last year:

- Assessment of spiritual well-being
- Assessment of dying phase and after-death care
- Uses and limitations of assessment tools
- Talking with ill people: considering the surrounding environment
- Face to face communication
- Information giving
- Legal and ethical issues embedded in communication
- "Why can't I stay here" "I don't want to stay here" - when preferred place of care cannot be met
- Communicating with empathy module (6 sessions)
- Agreeing a plan of management and care
- Recognising Your Own Limitations in Symptom Management
- Drug management of pain - core knowledge
- Assessment of breathlessness
- Drug management of breathlessness
- Management of bleeding

- Management of seizures
- Recognising and managing malignant spinal cord compression
- Recognising the dying phase, last days of life and verifying death
- Managing excessive respiratory secretions
- Managing distress during the dying phase
- Initiating conversations about EoLC: cancer
- Case study: End-stage cardiac disease
- Case study: Motor neurone disease
- Case study: End-stage renal disease
- Scenario: terminal agitation - patient in a care home
- Dying in intensive care unit
- A unified DNACPR policy
- Children and bereavement
- “What will it be like?” Talking about the dying process
- Management of sore mouth and other oral problems
- Understanding and using empathy
- “How dare you do this to me” Managing anger
- Opioids in pain management: advanced knowledge

I would like to express thanks to all of those who have been part of the session update programme. If you would like to get involved with session development please get in touch.

3. Communications strategy

Whilst the content of the e-ELCA programme has been well praised, the main criticism has been that not enough people know about it. We have been engaging through the following strategies:

- Utilising Twitter to inform of new sessions/session updates/learning paths. The number of e-ELCA Twitter followers continues to grow. Our handle is @cmf_elca
- e-ELCA presence at conferences; we attended the PCC in March 2021 and the Hospice UK conference in November 2021. We will attend the PCC in March 2022
- Three monthly report for the APM Bulletin. This copy is also forwarded to e-LFH and Health Education England to use in their publications. Furthermore, HospiceUK and Skills for Care also receive this copy to distribute it too.
- Engagement with partnership organisations including HospiceUK, the RCN and Skills for Care.

The current communications strategy will be continued, with future opportunities developed too. With this, user numbers of e-ELCA continue to rise year on year; there has been an increase of 300% over the past four years.

4. Improving the utility and accessibility of e-ELCA

A number of learning paths are already in place for e-ELCA, which were designed to help navigation of the programme. Learning paths developed over the last year for:

- Foundation doctors
- Social carers working in care homes (supported by Skills for Care – sessions in this learning path are public access)
- Healthcare support workers (supported by the RCN – sessions in this learning path are public access)
- Registered nurses working in care homes (supported by Skills for Care – sessions in this learning path are public access)
- Pharmacy professionals

5. Engagement with others

As APM e-ELCA lead I am a member of the APM education committee with a specific focus on e-ELCA and attend regular meetings for this. e-LFH chair a thrice yearly e-ELCA executive meeting, last held November 2021.

eIntegrity host a twice yearly content provider group (CPG) meeting. I attended the meeting November 2021 remotely.

6. Future leadership

I am soon to finish as the APM e-ELCA lead, and am currently handing over to Dr Sarah Hanrott, who has just commenced in post. Thanks to all who have supported me during my time in post, it is much appreciated.

Dr Richard Kitchen

March 2022

APM Race Equity Committee Report

APM AGM 2022

Jamilla Hussain (Chair)
Gurpreet Gupta (Deputy Chair)
Qamar Abbas
Sarika Hanchanale
Jasmine Lee
Nadia Khan

Supported by:
Iain Lawrie
Aoife Gleeson

The APM Race Equity Committee was formed to support the APM to work towards becoming an anti-racist association which supports and empowers individuals working within palliative care from diverse ethnic backgrounds.

2021/2022 Objectives

1. Establish the committee and develop terms of reference [Jan 2021]
2. Design and conduct a survey exploring the experience of racial discrimination and prejudice of people working within palliative care across the UK. Use the findings to inform future APM strategy [March 2021-2023].
3. Develop core and extended membership to support people from minoritised ethnic groups working within palliative care [June 2022-ongoing].
4. Develop ideas on how to support allies to be effective in their roles [June 2022-ongoing]
5. Present at the APM conference on issues related to race/ethnicity and palliative care [March 2022]

This small committee has worked hard to establish a much needed new committee and have it formally recognised by the APM in late 2021. The terms of reference are established. The survey has been designed and piloted and we await ethical approval before it can be disseminated in 2022.

One of the main benefits and successes of the committee has been to create a forum for the members to support each other as individuals who have faced/face racial discrimination and prejudice and as activists in this area. Other individuals from diverse ethnic backgrounds have expressed interest in joining the committee/becoming members and we hope to facilitate this in the near future. We welcome people getting in touch if they are interested.

The committee also advocate for the central role allies must play to address racial inequity and have developed collaborations with key allies across national organisations to encourage/support them to develop support systems for allies.

The committee will also be presenting on their experience of working to advance racial equity within palliative care at the national APM conference in 2022.

Dr Jamilla Hussain
Chair of Race Equity Committee
March 2022

APM Research & Ethics Committee Report

APM AGM 2022

Appointments

The Research and Ethics Committee have welcomed Dr Katie Frew and Dr Donna Wakefield as new members in February 2022.

The recent appointments to the committee bring expertise to the ethics and research component of the committee at Consultant level. This will help build on the enthusiasm and strengths of our existing members, including our active trainee representatives.

The committee anticipates that the renewed membership of the committee and hopefully some stabilisation of clinical workloads for committee members mean that the Research and Ethics Committee will actively develop over the coming year.

National work

The debate around “Assisted Dying” has been prominent over the last year. The committee and APM do not comment on Assisted Dying itself but do comment on the substantial risks and consequences of legislating for doctors to be involved. Specific responses by the APM Research and Ethics Committee include:

- Response to Assisted Dying Bill in the House of Lords, October 2021. This can be viewed on the APM webpage.
- Response to McArthur Bill consultation –December 2021

Education

The APM Ethics course retains its links with the APM Research and Ethics Committee. This has run virtually biannually in 2021 and has evaluated well. It is planned that additional members of the committee will contribute to the delivery of this education, helping maintain the content and sustainability of the programme.

Supporting and advising individual members:

An essential role of the committee is to provide specific advice to individual clinicians on what to do in difficult situations and the evidence they need to underpin their decisions. This can be support from the committee or signposting to specific expertise. Members who wish to access this support should contact the APM office directly.

Enquires in the last year have included:

- The care for people with capacity who are considering or have voluntarily stop eating and drinking. The Royal College of Physicians signposts the APM as resource and the committee is developing draft APM guidance in this area.
- Representation of ethical issues in mandatory training.

Committee aims for 2022

The Research and Ethics Committee is looking forward to working as a strengthened and expanded committee in 2022. It aims to:

1. Proactively engage in the debate about Assisted Dying, particularly about doctor and clinician involvement in this process

2. To offer a repository of advice to colleagues with ethical dilemmas, including signposting to other appropriate links
3. To establish closer links with the Palliative Care Research Society
4. Contribute to APM study events with a research and ethics theme as well as reviewing current offer.
5. Develop guidance to support clinical staff involved in caring for people with capacity who have voluntarily stopped eating and drinking

Dr Rosie Bronnert

Chair of Research & Ethics Committee

March 2022

Trainees' Committee Report

APM AGM 2022

The Trainees' Committee is run by trainees for their peers. We aim to represent palliative medicine trainees within the APM, communicate relevant information, and provide opportunities for networking, education and participation in research. This report summarises recent and planned committee activity.

Current Committee Members

Dr Jasmine Lee	Co-Chair
Dr Simon Etkind	Co-Chair
Dr Lucy Ison	Regional Representative Coordinator
Dr Daniel Soutar	Communications Coordinator
Dr Isobel Morton	Juniors' Committee Representative
Dr Ting Ta	Research and Ethics Representative
Dr Elizabeth Woods	Education Representative
Dr Hannah Rose	Clinical Quality Representative
Dr Maimoona Ali	BMA Representative
Dr Erin Kadodwala	SAC Representative (England)
Dr Jessica Gutjahr	SAC Representative (Wales/N.Ireland)
Dr Ruth Yates	SAC Representative (Scotland)

Integration, communication and representation

We continue to communicate with all trainees nationally through our network of regional representatives and bimonthly newsletter. Dr Ison has met annually with the regional reps to ensure two-way communication and Dr Soutar has developed our social media presence. We intend to improve the trainees section of the website as the main APM website is redeveloped. We are in the process of surveying trainees to collate views on educational needs, practice regarding SPA time, and to gather thoughts on how we can best act in trainees' interests.

Dr Lee and Dr Etkind have attended the APM board biannually and also attend the RCP Joint Specialty Committee (JSC), providing an upward link to raise trainees' concerns at the highest levels within palliative medicine. This has included contributing to the debate around assisted dying, and raising issues of PPE during the pandemic, specifically the contribution of inadequate PPE to ongoing workforce issues such as Long Covid.

Supporting education & 'difficult to achieve' curriculum competencies

Dr Woods has led on developing an increased portfolio of educational events in conjunction with the education committee. Events in the last year included 'who left me in charge' an online course on becoming a new consultant. We have also collaborated with the Association for Cancer Physicians to run a joint webinar on 'palliative care in advanced cancer', attended by 75 palliative care and oncology trainees. We intend to run further courses on the topic of management this year and are also planning to provide support to trainees taking the SCE by including resources in our newsletter.

Shape of Training and the Specialty Advisory Committee (SAC)

We have welcomed three new SAC representatives to the committee this year: Dr Erin Kadodwala (England), Dr Jessica Gutjahr (Wales/N.Ireland), and Dr Ruth Yates (Scotland).

Current work is focusing on supporting trainees during the implementation of the shape of training curriculum. We are working with the SAC to develop a survey of trainees aimed at picking up any issues or difficulties experienced across the country as the new system is implemented. This will be an important part of the committee's work in the next 12 months.

Thanks to our outgoing SAC representatives, Dr Gurpreet Gupta, Dr Amy Ritchie and Dr Shaun Qureshi for excellent work and commitment to supporting trainees as the shape of training curriculum is implemented.

Supporting Research

The committee, led by Dr Ta, continues to support the national registrar run research collaborative (the UKPRC) by providing a channel for dissemination of information about national research projects. The latest UKPRC project reached 119 sites, providing extensive opportunity for trainees to conduct research and audit. We hope to similarly involve trainees in upcoming national projects and would welcome any contact in relation to the UKPRC. In the near future we intend to update and upload to the website resources for trainees interested in participating in research.

Supporting the APM Juniors' Committee

We continue to link closely, via the Juniors' rep Dr Morton, with the APM juniors committee and offer support for their study days and conference. A peer mentorship scheme is planned, linking current trainees with juniors interested in a career in palliative medicine.

Working with the BMA

The Trainees' Committee have continued to engage and contribute to the work of the BMA. A number of issues relevant to palliative medicine training have arisen e.g. such as reflective practice, rota gaps, exception reporting, SPA time and work scheduling. Dr Ali has advocated for the interests of our specialty at Multi-Specialty Working Group meetings.

Future directions

In the next 12 months we intend to develop further our educational activities and support trainees through the shape of training implementation, ensuring trainees' views and priorities are represented at every stage.

Thanks to all who have demitted from the committee in the last year, and to Dr Soutar who is soon to demit having reached his CCT.

We will be stepping down as co-chairs of the committee before the end of this calendar year and would like to thank the rest of the committee for their committed and dynamic efforts to support palliative medicine trainees nationally. We'd also like to thank Dr Kirsten Baron for linking us in with the APM board, and Georgina at Compleat for her help particularly with recruitment to roles within the committee.

Dr Simon Etkind and Dr Jasmine Lee

Co-Chairs of the APM Trainees' Committee

March 2022

SAS & Hospice Doctors Committee Report

APM AGM 2022

Elected Members

Dr Esraa Sulaivany Joint Chair
Dr Helen Bonwick Joint Chair

SSAS Representatives

Dr Beth Williams
Dr Nicola Goss
Dr Owain Prys Thomas
Dr Rebecca Watson
Dr Paul Selway
Dr Andrea Graham
Dr Katie Jerram

The committee now has a full complement of members and continues to work tirelessly to represent SAS doctors and Hospice Doctors working in palliative medicine

The Committee had 4 virtual meetings during the year – due to COVID – 19 restrictions

Committee Work

- Continued support of SAS Doctors and Hospice Doctors – answering email and telephone enquiries, mainly relating to CESR applications and contract issues.
- Dr Becky Watson has continued to be a member of the PCC organising committee for 2022. She has also lead on the review of the submitted abstracts for the conference.
- Both Dr Thomas and Dr Watson chaired sessions at the virtual Palliative Care Congress in 2021.
- The committee have organised four virtual study afternoons in 2021. These were titled Going with your Gut (13 and 27 May) and Managing pain (24 November and 9 December) these have had good attendance and evaluated well.
- Continued to contribute to the strategic work of the executive committee and provided representation at all appropriate work streams including the other committees and task and finish groups.
- Dr Esraa Sulaivany and Dr Helen Bonwick have been mentoring members of the committee to take over as chair into the future.
- Dr H Bonwick continues to be a member of the APM Board and the APM Education Committee.
- Dr A Graham is the SAS representative on the RCP JSC Committee.

Dr Esraa Sulaivany

Joint Chair of the SSAS Committee

Dr Helen Bonwick

Joint chair of the SSAS Committee

February 2022

APM Juniors Report

APM AGM 2022

Following establishment of a fresh committee in 2021 the juniors committee has had a year of productivity and energy which has allowed for significant progress to be made.

There has been ongoing success of:

- APM Juniors blog:- monthly articles provided by trainees and juniors, including medical students, which are published to the website.
 - Significant numbers of which have been provided by the medical student creative entry competition introduced for the APMJ conference.
 - Publication the winning essays from conference medical student essay prize
 - Posts have diversified in their content and include reflections, research, topical issues and career advice
- The annual APM Juniors Conference: - this year online
 - Ongoing support from Dr S. Barclay (thank you!)
 - Provides opportunity for junior members to engage with research, learning and chance to showcase own work.
- Social media presence
 - Twitter following doubling annually (now over 1,000 followers) with increasing reach.
 - 'Publication of the Week' providing up to date articles and encouraging conversation among junior members.
 - Opportunity to share blog posts and highlight APMJ and APM events

There has been further development in:

- Educational opportunities
 - Non-Malignant webinar series – 270 signed up for each webinar, approx. 100 in attendance
 - Carer in academic palliative care webinar – 75 signed up
 - Establishment of Preparing for palliative care on the ward future F1 day – 238 registered for the day with 150 attendees
 - This is planned to continue annually

Future plans:

- In the pipeline:
 - Podcast
 - Development of research network of contacts with PRCS
 - Development of mentoring system between juniors and trainees
- Ongoing development of educational opportunities

Dr Philippa McFarlane

Chair of Juniors Committee

March 2022

APM Transition & Young Adult Special Interest Forum Report

APM AGM 2022

2021 – 2022 Report | Chair: Dr Jo Elverson

Over the last year we have been delighted to gain new members to the SIF, including individuals representing Scotland and Wales.

One key role of the Transition and Young adult SIF is to offer peer support to palliative physicians working with young adults with complex conditions. Over the last year we have met remotely on a quarterly basis. Our meetings include time for learning through case discussions as well as wider discussions around education and service development at local and national levels. We would welcome any new members who would like to attend these meetings.

Nationally there are many initiatives taking place that have relevance to Transition, including Hospice UK Transition ECHO hubs, RCGP adolescent health network, and Burdett trust and Together for Short Lives initiatives. The SIF has become a hub for disseminating information about these. We aim to ensure that there is an adult palliative medicine voice contributing to discussions around service development to address the unmet needs of this growing population.

Link with Association of Paediatric Palliative Medicine (APPM)

Since 2020, the SIF chair has been co-opted as a member of the APPM executive team. This enables the SIF to keep abreast of relevant developments and educational opportunities from paediatric palliative care. The development of new guidelines on symptoms management, and discussions around improving advance care planning for young people have been particularly helpful.

The APPM have also welcomed a view from the adult palliative care perspective. Early in the year we began discussions around role of adult palliative care in supporting young adults and hope to create cross-association core statements around this in the coming year.

e-ELCA

We are delighted to have been invited to develop an e-learning session on Transition in palliative care. This will be mapped to aspects of the new Specialty training curriculum, but will be relevant for any palliative care professional. A subgroup of the SIF will start work on this in April 2022.

Research

We are pleased that Transition has been recognised as a priority for research as part of the collaborative UK wide paediatric palliative care research network (CoPPAR). One specific aim of the CoPPAR network is to support organisations in navigating some of the practical and methodological barriers to conducting research with young people with complex and life-limiting conditions. Many of these barriers to research remain relevant even after they reach adulthood. The SIF hopes to work with the network to ensure that adult services are able to contribute to and learn from this research.

Study day

In the last year, we felt the regular peer support meetings were the most practical way to address our learning needs and to compliment the many other training opportunities available. We are aware that part of the role of the SIF is to increase young adult awareness among adult palliative care professionals and beyond promoting with

our own individual networks, we have not formally done this as a group recently. We hope to hold a virtual study day in the coming year to coincide with the launch of the new e-ELCA session.

Terms of Reference

The extended term of our Chair, Jo Elverson has come to an end, and we are looking to recruit a new chair/co-chairs. Jo will continue in her role until a replacement is in place.

Aim of SIF
<ul style="list-style-type: none">● To improve services for young adults with palliative care needs● To increase awareness amongst adult SPC professionals of the needs of young adults● To improve the process by which young adults move between children's palliative care and adult palliative care services where this is appropriate
Brief description of anticipated activities
<ul style="list-style-type: none">● To provide a forum for discussion, debate and ideas creation● To create an opportunity for collaborative working, practice sharing and policy-making● To encourage development of services appropriate to the needs of young adults● To support the APM by responding to requests for expert advice an opinion in this area ● To represent the APM within the Association of Paediatric Palliative Medicine (SIF Co-ordinator to be co-opted member of APPM executive committee)● To report back to the APM Executive Committee quarterly

Dr Jo Elverson
March 2022

APM Undergraduate Medical Education SIF Report

APM AGM 2022

Co-Chairs: Prof Stephen Barclay (Cambridge), Prof John Ellershaw (Liverpool).

1. Annual SIF Meeting

The 2020 SIF annual meeting was held jointly with the APM SIF for Postgraduate Medical Education via Zoom on November 11th 2021 with the theme of “Achieving Palliative Care learning outcomes in the undergraduate curriculum: what is the role of simulation?” <https://www.apmuesif.phpc.cam.ac.uk/annual-conferences/annual-conference-2021/> We started with a thoughtful keynote presentation “Medical Education in the time of COVID” from Prof Paul Wilkinson, Clinical Dean of the Cambridge School of Clinical Medicine and an update from Johanna Kuila of the GMC. Following this, we ran parallel sessions for the two SIFs, before returning to a joint final plenary. 75 members attended for a very productive afternoon.

Planning for the 2022 SIF meeting is well underway, and will take place in person in Cambridge on Wednesday November 30th 2022. All are welcome to join us then: please contact Stephen Barclay at sigb2@medschl.cam.ac.uk for further information.

Plans are taking shape for a major two-day international Education in Palliative Care conference in autumn 2023 at the Royal College of Physicians in Liverpool. Further details to follow.

2. Revision of APM Curriculum for Undergraduate Medical Education

We are continuing to work on revising the 2014 APM curriculum for undergraduate education and mapping this against the GMC’s document “Outcomes for Graduates”. This was paused due to the COVID-19 pandemic but work has recently restarted with a view to the publication of a formal APM document entitled “Key Palliative Care Learning Outcomes for UK Medical Schools”.

3. SIF Website

The SIF website <https://www.apmuesif.phpc.cam.ac.uk/> and email communication list is managed and updated by the team at Cambridge. The site contains details of undergraduate palliative medicine curricula from UK medical schools and details of previous and upcoming events.

4. Question writing for the National Bank

The SIF plans to host a further event in 2022 to produce Single Best Answer questions on palliative Care for medical student Finals Examinations, the Medical School Council Assessment Alliance national question bank and the future General Medical Council Medical Licensing Examination. Please contact Stephen Barclay sigb2@medschl.cam.ac.uk if you would like to be involved.

5. Liaison

The SIF continues to liaise with the following groups to inform and direct its work:

- APM Education committee
- GMC EOLC lead
- Palliative Care Congress
- EAPC Education Steering Group

Dr Stephen Barclay & Prof John Ellershaw
February 2022

APM NeuroSIF Report

APM AGM 2022

Membership – broad membership (not exclusively Palliative Medicine Clinicians), including training grades/AHPs.

Teaching/Study Days

On the 5th July 2021 the Neurology Special interest Forum held their first virtual study afternoon ‘Meeting the need and models of working for people with neurodegenerative conditions’. Over 60 people were able to join the event and there were plenty of questions and chat throughout the afternoon.

We were very lucky to have Dr John Bowen, Dr Alexandra Ball, Prof Irene Higginson/Prof Wei Gao and Nilay Heggul from Kings College London and Prof David Oliver presenting and sharing their perspectives, insights and research outcomes with us and helping us to better understand the potential barriers and opportunities to bridge the gaps between neurology, rehabilitation and palliative medicine. The need for clear referral criteria to palliative care services, commissioned services based on need not diagnosis and coordination of care were common themes. The event was very positively received and we are very grateful to all the speakers who contributed to the success of the event.

We are on the organising committee for BritMODIS 2022 and the APM are a partner for this conference focusing on Palliative Care and Parkinson’s Disease.

National Guidelines

Contribution to Multiple Sclerosis NICE draft guidelines

Signposting to CPD

International Neuropalliative Care Society Annual Conference
European Association for Palliative Care - Webinar

Research/Audit

MND

Dr Claire Stockdale
March 2022