



Association for Palliative Medicine

Annual General Meeting

Thursday 16 March 2023

14:35 – 15:45

PCC, Edinburgh International Conference Centre

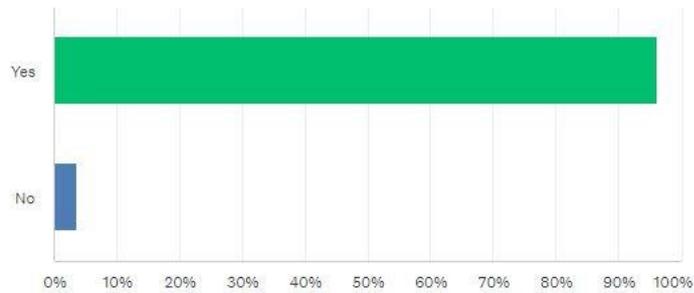
Room: Pentland

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|--------------------------------|--------------------|
| 1. Welcome from Chair | |
| 2. 2022 Annual General Meeting | Dr Sarah Cox |
| 3. President's report | Dr Amy Proffitt |
| 4. Vice President's report | Dr Sarah Cox |
| 5. Treasurer's report | Dr Natasha Wiggins |
| 6. Demitting committee members | Dr Sarah Cox |
| 7. Questions/AOB | Dr Sarah Cox |
| 8. Close / date of next AGM | Dr Sarah Cox |

Following the 2022 AGM, APM members were asked to complete an online survey. This included ratification of the 2021 accounts and also upcoming changes within the Association.

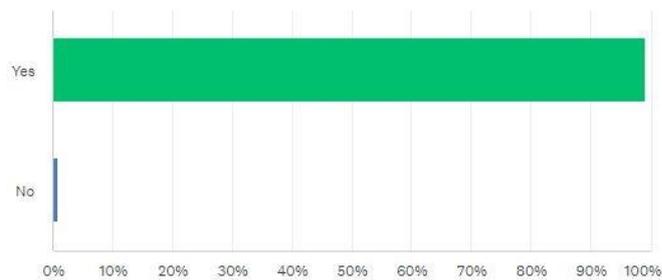
The results below illustrate that 96.27% of voters ratified the accounts for 2021.

Do you ratify the Association for Palliative Medicine accounts for 2021?



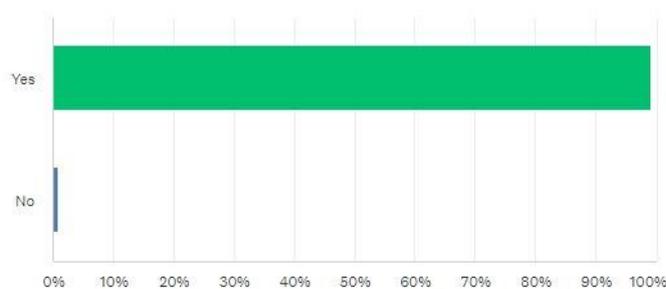
The results below illustrate that 99.19% of voters ratified the new Board members, Dr Holly McGuigan and Dr Benoit Ritzenthaler.

During 2021, Dr Holly McGuigan and Dr Benoit Ritzenthaler joined the APM Board. Do you ratify these new APM Board members?



The results below illustrate that 99.19% of voters ratified the new APM Communications committee.

During 2021, the Communications committee was formed. Do you ratify the new APM Communications committee?



Vice President Report

APM AGM 2023

I very much look forward to meeting some of you at the conference and hearing your thoughts and ideas for the APM.

Some of the work we have been involved in since my last update includes;

A focus on workforce

We have a workforce crisis and there is increasing need for palliative care which creates a demand for more staff. It is clear that we need to make the most of our existing workforce, consider ways of attracting new staff and think about innovative ways of working.

For the medical workforce we know that the introduction of dual accreditation has resulted in a dramatic but we hope temporary reduction in applications to Palliative Medicine specialist training.

At the same time HEE chose to put Palliative Medicine into the first group of a 10-15 year project to move training posts around England to better meet need. Whilst this is an admirable aim, we have campaigned to delay the major part of this work because of the impact of dual accreditation and the potential impact on hospices of having additional gaps in trainee posts. We have recently heard that HEE will pause the Palliative Medicine part of the project until 2025 and then reassess. For those few regions who were expecting an uplift in posts we know this will be disappointing although given current recruitment we would be unlikely to fill those posts anyway.

We must support and value our SAS colleagues better, and the excellent work done by our SAS committee to produce a development guide is to be commended. If you work with SAS doctors then please look at how you can implement this in your units. We know that SAS doctors who wish to join the specialist register through the CESR process find it challenging, and more so that after autumn 2024 they will have to demonstrate capabilities in both Palliative Medicine and Internal Medicine. The GMC have issued some new guidance about the assessment of CESR and the Palliative Medicine SAC are planning a webinar to share the new process which we hope will be streamlined. We have also asked the GMC to consider extending the deadline for single accreditation CESR but have not had any firm offer on this.

We need to explore what Physician Associates can offer our speciality and what we can offer them as an attractive career option. We know there are some PAs employed in Palliative Care and we look forward to hearing from the PAs and the teams about their experiences.

The Palliative Medicine SAC is developing a curriculum to recognise GPs who wish to work at a senior level as GPs with an Extended Role (GPwER). I have also talked to the GMC about the possibility of credentialing and the future possibility of a dual training programme in GP and Palliative Medicine. However, these are not solutions which will help us in the short term.

Similar workforce pressures exist for other professionals working in Palliative Medicine and we may need to change the ways we work to mitigate this.

What can you do?

Encourage recruitment in Palliative Medicine – every contact with a medical student, Foundation or IM doctor is an opportunity to promote Palliative Medicine as a career.

Ensure your SAS colleagues feel supported and valued – read and implement the development guide for SAS doctors on the APM website.

Consider the role of Physician Associates in your organisation – is there an attractive place on your team for them?

Engage with your colleagues to identify innovative solutions to workforce pressures – one example is the virtual “show and share” event on Thursday 23rd March organised by NHSE for which we emailed you the link in February.

Supporting doctors taking the SCE exam

The dates for the next few SCE exams have been agreed as Wednesday, 16 August 2023 and Wednesday 15th May 2024.

The APM Board agreed to reimburse doctors who are taking the SCE with free SCE revision cards. This offer has been backdated to the date of the last exam. Applicants must provide evidence of sitting the SCE exam.

Supporting and developing our new committees

We are excited to be ratifying three new committees at this year’s AGM. They are the “race” equity committee, Equality and Diversity committee and Workforce committees.

What can you do?

There are more opportunities for you to get involved to support an area that you are passionate about. Look out for notices of vacancies on the committees in the APM bulletin.

Rebadging our membership categories

At the request of members we have changed our “non-doctor” category to “Associate member” for membership and conference category purposes.

We have responded to a number of consultations in the last year including;

Assisted Dying consultations for Jersey and England. Press release in Scotland.

BTS pleural disease guideline

National Clinical Guideline for stroke

CPOC Frailty Guideline - Age and Ageing

Endorsement of national multidisciplinary palliative head and neck cancer guidelines

Guidance on Competencies for Intrathecal Drug Delivery

Guidance on Competencies for Management of Cancer Pain in Adults

PRSB - Information standard for Palliative and End of Life Care

Intensive Care Society’s Standards Division - Guidance for the transfer of the adult critical care patient to an outdoor space in the context of end of life care



Dr Sarah Cox

Vice President

Treasurers Report

The 2022 period

APM AGM 2023

Introduction

This year has been about keeping things on an even financial keel amidst the changes and challenges.

The education programme is thriving and we hope this will continue over the next year.

There are two sets of funds:

- Restricted – we can't choose what this is spent on
- Unrestricted – we can choose what this money is spent on

The Accounts for December 2021 – November 2022

1. Unrestricted Funds

At the start of the APM financial year across the unrestricted accounts the fund balance was a total of £345, 353, this has increased to £356, 940 at the end of the APM financial year. An increase of £11, 587.

For a charity to be considered financially stable, at the very least it needs to have 6 months running costs available in the reserves. Based on the 2022 expenditure, 6 months reserves = £196, 241 and therefore the APM has a reserves surplus of £160, 699.

The take home: the amount of money available to spend how we choose has increased and we have more than enough in reserves to be financially stable.

Looking a little closer at the unrestricted funds:

The Operating Account

What is this? This is the 'current account' that membership is paid into and the day to day running costs are paid from, including the PCF fee.

£ In	2022	2021
Membership subscriptions	198, 396	200, 689
FAMCARE subscriptions	8, 493	7, 650
Website advertisements	2, 600	4, 207
Total	209, 489	212, 546

£ Out	2022	2021
Journal subscriptions	33, 800	32, 080
PCF access	53, 715	53, 086
Supporting costs	108, 655	94, 032
Total	200, 829	182, 669

£ Difference	8, 660	29, 877
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Consider the surplus of £8660 which is smaller compared to the previous year. This does not translate to a concern around spending as 2021 was an unusual year due to the pandemic and there has been a rise in day to day costs associated with the cost of living. Many of our day to day processes are being reviewed to streamline and make more cost effective e.g. the use of an automated membership portal in place of manual processing.

Education

What is this? All things education are accounted for here, including the Annual Palliative Care Congress.

Event	£ In	£ Out	+/-
Pain management Dec 21	158	2,000	-1,842
Trainees Committee Dec 21	2,229	1,500	729
Ethics Committee Jan 22	5,473	3,300	2,173
PCC March 22	126, 504	154, 598	-28, 094
APM / PCRS Research Course June 22	3,747	3,180	568
Ethics Committee Sept 22	4,849	600	4,249
Medical Study Update Sept 22	4,068	1,584	2,484
PME Virtual Study Oct 22	1,964	1,572	392
SAS Conference Study Nov 22	4,082	84	3,998
Trainees Committee Nov 22	432	0	432
Total	153, 074	168, 418	-15, 344

The 2022 Palliative Care Congress (PCC) made a financial loss however the conference is not just about money. All APM committees are required to meet face to face, and this creates an opportunity for this to happen whilst supporting education and reducing the time away from other commitments. Face to face learning opportunities reflects the different learning styles across our speciality and, importantly, after such a challenging 2 years, the face-to-face PCC reminded people we are a community.

2. The Restricted Funds

What is this? Money that can only be spent on specific things. In this case:

Fund name	What can it be spent on?	£ In	£ Out	Balance
e-ELCA	Design & delivery of e-learning via e-ELCA platform	4,000	23, 196	137, 680
Abe Guz fund	Education & Research around breathlessness	0	0	13, 935
Total				151, 615

It is important the Abe Guz Fund is used. There has been some challenge around this, however moving forward there is more flexibility with what it can be used on, with the Guz family blessings.

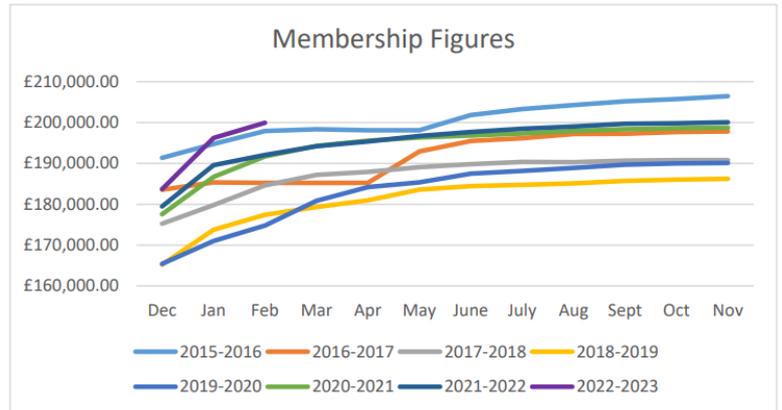
Financial Areas to review and Actions:

Membership

Membership Income	Dec 2019 – Nov 2020	Dec 2020 – Nov 2021	Dec 2021 – Nov 2022
£	190, 100	198, 747	200, 054

APM Membership Year on Year Comparison 2015-2023

This graph shows the ongoing growth in membership, reflective of the work put in by the team, the broadening of membership categories and the presumed increased appeal of the PCF access included in full membership.

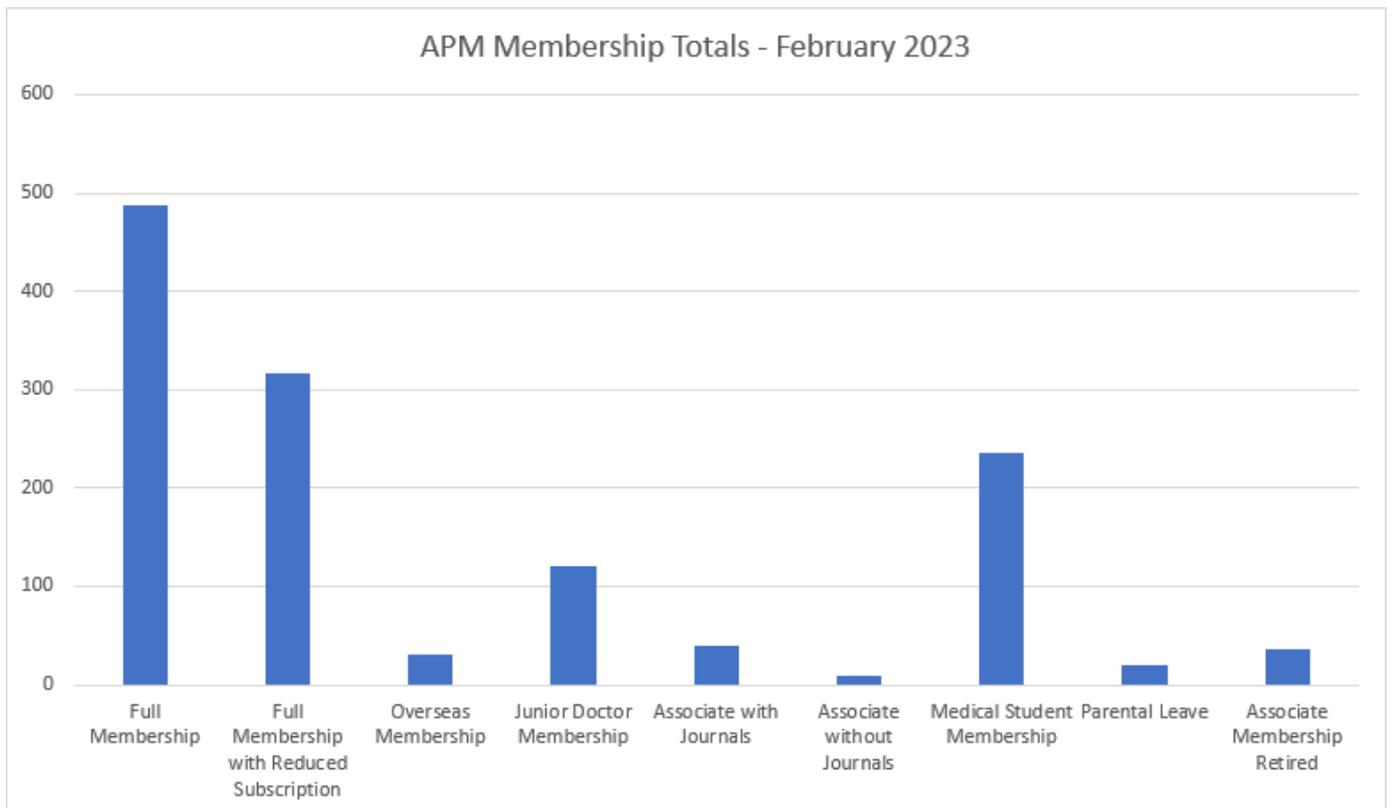


Junior Fees

Junior membership fee was increased by £10 in 2021 to £40. This has not impacted negatively on the overall junior doctor membership figures.

Year end	Nov 2020	Nov 2021	Nov 2022
Number of junior doctor members	123	147	163

APM Membership Totals - February 2023



Looking ahead to 2023:

Considering the daily operating account, the predicted expenditure is £222, 000. The breakdown of this is detailed in the below chart.



Plans for 2023 and beyond

1. Membership income

Considering the challenges around the cost-of-living and our current surplus reserves, membership fees should remain the same for another year.

2. Palliative Care Formulary

The annual cost of access to the PCF is tied to how many fully paid members increase per year. It is due to stay the same for the coming year. Understanding the actual impact of PCF access on membership and member's experience will be beneficial.

3. Abe Guz Fund – restricted to education / research relevant to breathlessness

It is proposed that the Abe Guz fund is used to pay for a professional's time to collate all the breathlessness resources available and put them all in one place on the new APM website. Gaps in resources can then be identified and acted on.

4. Prizes

There is a review underway of prizes given out by the APM. A new prize is coming from the West Midlands Palliative Care Team rewarding excellence in Quality Improvement and Audit.

5. Website and advertisements

The development of a new website is underway. Amongst many things, we expect this to drive new membership and streamline the administrative processes. This has partially been paid for and the completing payments will come out of the budget spread over the next 5 years. The cost and process of advertisements on the website are currently being reviewed as part of this.

6. Strategic spend

Development of the APM 5 year strategy is underway and there is an expectation of a short term rise in spending to achieve the Association's strategic aims.

7. Long term investment income

It is advised that we reduce the total of current surplus funds; the points above will go some way to doing this. It is likely that income from the current sources will fluctuate in the future and some financial futureproofing is sensible. Ethical investment via a charitable high interest account for a small amount of the current surplus funds means a relatively predictable annual income and freedom to be less risk averse in funding ideas and events that will further the advancement of palliative medicine.

In Summary:

The organisation is financially secure with sufficient reserves as per the Charity Commission guidance.

It is advised that a significant proportion of the reserves are used over the next year. How do we intend to do this?

There is a lot happening in front and behind the scenes of the APM, this will require investment to make the APM more equipped to support its members in their varying roles to deliver the best care they can to patients and their loved ones in a post pandemic world.

Dr Natasha Wiggins

Treasurer to the APM

March 2023

Education and Training Committee Report APM AGM 2023

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 Sarah Hanrott	E-ELCA lead
Dr Mary Miller	APM representative
Dr Wendy Prentice	APM representative
Dr Lizzie Woods	Trainees committee
Kate Smith/ Becki Cole	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. Education activities 2022-23

As the country emerged from the worst effects of Covid, much of the activity of the committee has been returning to a regular education programme while maintaining some of the agility developed during Covid. Going forward our programme will continue to try to balance the accessibility and reach of virtual events with the opportunity to connect with colleagues through face to face events.

There have been several key activities including:

-APM Education Hub. This has continued to develop as a one stop shop for members to access APM educational activities- signposting of events, booking and viewing study days, and educational resources. The ability to hold important resources has been developed further with the APM PME SIF and APM Juniors leading this phase.

-Postgraduate Medical Education Special Interest Forum (PME SIF). This is in its second year, 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 at a time of significant change. As well as educational events, a Facebook discussion group, links to the new curriculum and resources for delivering training.

-Research Course. This has been a gap in the APM calendar for a few years and re-launched successfully this year in partnership with the Palliative Care Research Society.

4. APM Study Days/ Conferences 2022-23

Theme	Date	Venue
2022		
Juniors webinar series: Palliative Care in non-malignant conditions	Jan to June	Virtual
CBT workshop	23 Mar	Telford
PCC	24 & 25 Mar	Telford
Research course with PCRS	15 & 22 Jun	Hybrid
Palliative Care for FY1s	16 July	Virtual
Medical Update series	15 & 29 Sep	Virtual
PME SIF	11 Oct	Virtual
Neurology in Palliative Care	23 Nov & 8 Dec	Virtual
2023		

National Trainees' Study Day	17 Jan	Virtual
Ethics Course	2- 27 Jan	Virtual

5. Developments 2023-24

Suzie Gillon has taken over chairing the committee which will allow for a refresh and renewed energy in shaping the APM's educational strategy.

Acknowledgements

I would like to thank committee members for their commitment, energy and ideas- it is a great group to be part of.

Dr Paul Paes

Education & Training Committee Chair

February 2023

<https://apmeducationhub.org/>



@APMStudyDays

e- ELCA Report APM AGM 2023

This report focusses on work over the last year.

I took over from Rich Kitchen as Clinical Lead in March 2022 – I would like to thank him for his outstanding hard work in his tenure especially with the impact of the pressure on all professionals during the Covid pandemic.

1. New session development

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 Pensions (expected completion April 23)
- Palliative care for Young adults: Transitioning from Paediatric services
- Benefits and Special Rules with the Department of Work and Pensions (expected completion April 23)
- Case Study – Cancer

Thanks to those who are helping develop sessions.

2. Rolling session update programme

The e-ELCA programme contains over 180 sessions over 9 modules. The aim is to try to review each session on a 3-4 yearly basis to ensure they remain up to date. 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 from previous years are still outstanding; this deficit is being caught up.

Number of sessions updated this year: 39 including the whole of the module on Advance Care Planning!

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

- Emotional support and signposting

- Talking about Death and Dying
- Understanding and Assessing Spiritual need and distress
- NIV in MND
- Registered Nurse Verification of Expected Adult Death
- When the Dying Process is Protracted Or Unexpectedly Fast
- Assessment of Pain
- Principles of Pain Management
- Symptom management in people with learning difficulties
- Ambulance Service – pre-hospital response to end-of-life-care
- Practical Support after a Bereavement
- Telephone Communication
- Culturally Sensitive palliative and end-of-life-care LGBT people
- Introduction to e-learning for end of life care
- Malignant Spinal Cord Compression
- Management of physical deterioration
- Request for Euthanasia
- Care after Death 1. – introduction
- Care after Death 2. – providing personal care after death

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 and this is ongoing. 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 2022 and the Hospice UK conference in November 2022. We will attend the PCC in March 2023.
- 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, Hospice UK, Macmillan, Marie Curie, Skills for Care and other relevant organisations also receive this copy to distribute to their stakeholders.
- Engagement with partnership organisations including Hospice UK, the RCN, and Skills for Care. We have distributed updates to other agencies via the NHS England newsletter.

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:

	April 2022	January 2023
Enrolments	209,056	228,149
Active users	67,934	76,765
Session launches	1,176,822	1,338,707

Top 5 staff group active users 01/23 (06/22)

1. Nurses and midwives 152020 (14268)
2. Medical and dental 15701 (13860)
3. Students 11,657 (10,131)
4. Additional clinical services 7015 (6419)
5. Social care sector 6068 (5399)

4. **Improving accessibility of e-ELCA**

After consideration from frequent feedback received regarding the lack of accessibility particularly in the care sector, independent hospices, volunteers and various student groups, e-ELCA was made '**Green**' or **full Public Access** in Autumn 2022. This now means that the whole content is fully available to anyone who registers using a work or personal email on the eLFH website without the need for a Hospice or Care Home code. The existing 'Public Access' programme will be discontinued in April 2023.

We hope this will mean easier accessibility for all caring for patients with palliative care needs to improve education and enhance patient care.

5. **Improving the utility of e-ELCA**

A number of learning paths are already in place for e-ELCA, designed to help navigation of the programme and we continue to develop these for different professional groups, specific organisations and specific conditions. 68% of all session launches are via learning paths.

We are developing/ plan to develop the following:

- Physician Associates
- Allied Health Professionals (Occupational and Physiotherapists)
- People working with Learning Disability

We are also in the process of making Learning Paths more noticeable and easier to navigate on the e-ELCA website.

6. **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.

We have a thrice yearly e-ELCA executive meeting, last held January 2023.

e-Integrity host a twice yearly content provider group (CPG) meeting. I attended meetings in March and May 2022 remotely.

7. **New Logo**

We are in the process of updating our logo.

Thank you for your attention – please get in touch with any questions, suggestions or volunteering for help with reviews or development of sessions

Dr Sarah Hanrott
sarah.hanrott@nhs.net
February 2023

APM Race Equity Committee Report

APM AGM 2023

APM Race Equity Committee

Jamilla Hussain (Chair)

Gurpreet Gupta (Deputy Chair)

Qamar Abbas

Sarika Hanchanale

Jasmine Lee (on leave)

Karon Ornadel

Supported by:

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.

2022/2023 Objectives

1. Disseminate and analyse 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
2. Develop core and extended membership to support people from minoritised ethnic groups working within palliative care
3. Develop ideas on how to support allies to be effective in their roles.
4. Collaborate with other APM committees to support anti-racism within their work.

This relatively recently formed new committee have established themselves as a recognised and much needed new group within the APM. The terms of reference are established. Nadia Khan has had to step down from the committee for personal reasons, another committee member is on extended leave and we have recruited a new member Karon Ornadel who has recently joined the APM for the main purpose of doing work to address racial inequality in palliative care within our supportive committee group.

The survey on the experience of racism within palliative care has been conducted and findings are being analysed. We are due to present the findings at the Marie Curie, PCC and EAPC conferences in 2023 with national and international interest in the findings and implications. Once the full findings are agreed, the committee's priority is to present the findings and discuss next steps with the APM Board who have been supportive of the work.

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. Other individuals from diverse ethnic backgrounds have expressed interest in joining the committee/becoming members. We recognise that due to historic reasons our committee has to be limited to 6 individuals which will limit the rate of progress of work in this previously neglected area. We have however continued to support individuals outside of the committee informally and are due to start an Echo for staff working in palliative care from minoritised ethnic groups in 2023 in partnership with Hospice UK.

The committee have also been approached by national (Compassionate Communities) and international (EAPC) organisations to support their work in addressing racism – which we have supported within the limits of our resources, including 3 national presentations.

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. A priority for 2023/2024 is to establish how the committee can support allyship across the APM committees/Board, within the limited resource of the current core membership.

Dr Jamilla Hussain

Chair of Race Equity Committee

February 2023

Trainees' Committee Report APM AGM 2023

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 Lucy Ison - Chair

Dr Heledd Lewis - Regional Representative Coordinator

Dr Emma McDonald - Communications Coordinator

Dr Isobel Morton Juniors' - Committee Representative

Dr Ting Ta - Research and Ethics Representative

Dr Elizabeth Woods - Education Representative

Dr Anna Grundy - Clinical Quality Representative

Dr Sarah Foot - BMA Representative

Dr Erin Kadodwala - SAC Representative (England)

Dr Jessica Gutjahr - SAC Representative (Wales/N.Ireland)

Dr Ruth Yates - SAC Representative (Scotland)

Dr Rose O'Duffy - New Curriculum Representative

New Committee members

We welcome to the committee Dr Lewis as Regional Representatives Coordinator, Dr Grundy as Clinical Quality Representative, Dr Foot as BMA representative, and Dr O'Duffy as New Curriculum Representative.

Integration, communication and representation

We continue to communicate with all trainees nationally through our network of regional representatives and bimonthly newsletter. We conduct regular regional representatives meetings to ensure two way communication with trainees and through this forum have identified a number of training issues to act upon, including issues surrounding indemnity and the disparity between SPA and educational time across the country. We have another meeting being planned for the next few weeks to specifically address any concerns surrounding the new curriculum. Dr McDonald has continued to build our social media presence via Twitter and Facebook. As a committee we have reviewed the content on the website in the trainees section to ensure it is up to date and relevant.

Dr Lee and Dr Etkind, and now Dr Ison, in their role as chair 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 giving feedback on a survey conducted to gather trainees views on the implementation of the new curriculum and dual accreditation.

Education

Dr Woods has led on developing an increased portfolio of educational events in conjunction with the education committee. Events included a national training day on difficult to achieve curriculum competencies including research and management. We intend to help co-ordinate further national training days, with different regions

taking a leading role in organising these. We have supported trainees to take the SCE by updating the content on the website for SCE resources and also have gained approval for the SCE flashcards made by Pallmed Pro to be provided free of charge for any trainee who is an APM member.

Specialty Advisory Committee (SAC) and the new curriculum implementation

Dr Kadodwala, Dr Gutjahr and Dr Yates have worked hard as SAC representatives on supporting trainees during the implementation of the shape of training curriculum. A survey has been launched with the aim to pick up any issues or difficulties experienced across the country as the new system is implemented. The results of this have been presented to the SAC and the JSC and a further survey is planned for Spring 2023. They have also clarified curriculum requirements surrounding on calls and the expectations around SPA time.

To help support our work around the new curriculum we have a new representative on the committee devoted to the implementation of the new curriculum. We welcome Dr O'Duffy and look forward to working with her to support trainees during this period of change.

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. Dr Ta has also been involved in the SEECARE project. She continues to support the juniors committee to build a database of research networks. She aims to update the Resources document for trainees wanting to get involved 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. Dr Ali has advocated for the interests of our specialty at Multi-Specialty Working Group meetings. Issues such as the recent Junior Doctor poll for strike action have been discussed. Dr Ali has now demitted and we welcome Dr Foot to the committee to continue her good work.

Future directions

Over the next 12 months we are working to develop a programme of more national training days for trainees. We intend to develop more ways to support trainees through this period of transition with the new curriculum, including more frequent regional representatives meetings, and through the role of our new committee member Dr O'Duffy.

Thanks to all who have demitted from the committee in the last year, Dr Rose, Dr Ali, Dr Soutar and particularly are two co-chairs, Dr Lee and Dr Etkind, who provided excellent leadership and direction to the committee over the last few years. Thank you to Dr Kirsten Baron as acting as our link to the APM board and for her support to our committee and to Georgina Bula at Compleat for her tireless hard work, for always being on hand to answer queries and in her particular support with recruiting new members.

Dr Lucy Ison

Chair of the APM Trainees' Committee

February 2023

Clinical Quality Committee Report

APM AGM 2023

Here is a brief report on the work of the Clinical Quality committee, written for the Association of Palliative Medicine (APM)'s 2023 annual general meeting (AGM).

THE COMMITTEE

The Clinical Quality committee was created by the merging of the former Workforce committee with the Professional Standards committee (October, 2020). During the year 2022, 5 members either demitted or resigned (CSJ, AB, JK, JW, HR); while 5 new members joined SK (EA, MA, AF, AG, DEK). This meant the year was solely dedicated to building capacity and navigating purpose, with Board members (AP, SC, DW, KB) and the APM Secretariat (GB) providing additional support, particularly in the area of vision, direction and continuity.

Regarding current composition, the posts of audit support, SAS and revalidation /appraisal rep are missing, and ongoing support is again, gratefully received from the secretariat of the APM.

FAMCARE

FAMCARE is a flagship of the APM. It is a national annual audit for the purpose of service improvement. It is run and subsidized by the association, and is able to provide a powerful insight into what has and hasn't gone so well during the last year of life.

In 2022, our main task was to ensure the annual survey took place, with maximum participation. Hence we placed an advert strategically, in the March bulletin, to prompt colleagues of the upcoming audit, its cost and other benefit, and the closing date. The registration process was uneventful and overall, we received over 65 entries, which is perhaps the highest number in recent times (55 in 2020, 57 in 2019).

In this cycle, data including individualised and open-ended comments, will be processed by DEK, who has already received a robust handover from outgoing JK. With regards analyses, the committee will continue to work closely with Crimson Crab, as their processes have been fully compliant with GDPR.

EA plans to pool all of the existing data, which incidentally spans over a period of ten years, for publication in related scientific journals. She is aware the outgoing committee explored the use of the FAMCARE data for NHSE research with little success.

PRIZES

In 2022, we have discussed all the prizes that fall under this committee's purview (the Undergraduate / Postgraduate audit and quality improvement prizes, and the Twycross prize). Some of the prizes run alternately, some are recurrent. A certificate of recognition is always awarded, and in some cases the prize is monetarized. Noteworthy is that the Fiona Hicks fund, a generous donation made in honour of Dr Fiona Hicks has been kindly assigned to the eventual recipient of the 2023 Undergraduate audit prize.

NEW CONSULTANTS' HANDBOOK

This handbook was produced by the out-going chair of the Clinical Quality committee. With her permission, we conducted a brief audit (convenience sampling), which showed new consultants are using the handbook.

END-OF-YEAR

Given the changes that took place in the course of the year, we met in December 2022, first to discuss and understand our brief and to recalibrate goals. Some of the emails received suggest that some APM members are not quite clear on what our role is. Hence, we plan to provide regular comms to update on our activities and manage expectations. Also, we will participate in “Meet the Committee” during the forthcoming Congress.

Conclusion

The Clinical Quality committee is working collaboratively with other committees. We have established a draft workplan drawn up for the next 12-24 months. Over the past 12 months, we’ve contributed individually and collectively to the APM’s forum, and would strive to be more intentional in all areas relating to quality going forward. Like the theme of this year’s congress, we seek opportunities to collaborate and expand our frontiers.... sustaining each other and growing together.

I eagerly look forward to meeting all the committee members in person during the PCC in Edinburgh

Dr Ebum Abarshi

Chair of Clinical Quality Committee

March 2023

SAS & Hospice Doctors Committee Report APM AGM 2023

The Committee

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 – demitted during 2022

Dr Katie Jerram

The committee would like to thank Dr Andrea Graham for the work she has carried out whilst being in the committee.

The committee welcome Dr Mary-Ann Mahadevan, so there is currently a full complement of members.

The Committee had 4 virtual meetings during the year – this has continued since COVID due to pressures on time to travel, to meet face to face. This will be reviewed during 2023-2024.

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 a member of the PCC organising committee and will be the Chair of the organising committee for 2024 and 2025.
- Dr Thomas has been successful with his CESR application and he has remained on the committee to provide assistance with the support of those wishing to make a CESR application.
- The committee have organised two virtual study afternoons relating to neurological conditions on the 23 November and 8 December 2022. The attendance was 69 and 82 bookings respectively, with some viewing after the event. The feedback was very good, with 100% of respondents finding both afternoons helpful, and over 94% saying they will change practice because of the sessions
- 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 Executive Board and the APM Education Committee

Dr Esraa Sulaivany

Joint Chair of the SSAS Committee
February 2023

Dr Helen Bonwick

Joint chair of the SSAS Committee

APM Junior Committee Report APM AGM 2023

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.
 - Posts have diversified in their content and include reflections, research, topical issues and career advice
- The annual APM Juniors Conference:
 - Held online again this year on theme of “Thinking Ahead: Palliative care on the wards”.
 - Provides opportunity for junior members to engage with research, learning and chance to showcase own work.
 - Pre-post survey of attendees demonstrated positive learning experience

- Social media presence
 - Twitter following continuing to grow (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
 - Educational 'Tweetorial' started on themes such as symptom control on the wards
- Educational opportunities
 - Palliative care for FY1 Doctors now an annual feature of the programme
 - Completion of the Non-Malignant webinar series

Future plans:

- In the pipeline:
 - Members only content
 - Physician Associate Training
 - ACP/breaking bad news workshop
 - Podcast – Plans for pilot episode and review
 - Development of mentoring system between juniors and trainees
 - Research methods webinar
 - Development of Medical School Reps network

Dr Philippa McFarlane

Chair of the APM Junior Committee

March 2023

APM Transition & Young Adult Special Interest Forum Report APM AGM 2023

2022 – 2023 Report | Chair: Dr Jo Elverson

I am writing this report at an exciting time of change for the transition and young adult SIF as we move to become a cross-organisation group with the Association of Paediatric Palliative Medicine.

We had our first joint meeting in February 2023, which was well attended, representing paediatric and adult palliative physicians from the whole of UK and Ireland. We plan to meet again in April to discuss the new opportunities that this collaboration brings.

As always we continue to recognise the role of the group in providing peer support for those 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.

We continue to connect with other national developments in Transition and young adult care ensuring that there is an adult palliative medicine voice contributing to discussions around service development to address the unmet needs of this growing population. We welcome the new Together for Short Lives guidance on Palliative care transition, featuring some helpful case studies; and look forward to the publication of the NCEPOD Transition report later this year.

Link with Association of Paediatric Palliative Medicine (APPM) and Study day

The SIF chair remains co-opted as a member of the APPM executive team. This has been a constructive relationship with areas for joint working and learning identified. We are delighted that the APPM has chosen to focus their 2023 study day on Transition to adult services and look forward to contributing to the programme. The study day will take place on 16-17th November 2023.

e-ELCA

Although our progress on an e-ELCA session “Transition in Palliative care” has been delayed we plan to complete this in the coming year. This will be mapped to aspects of the new Specialty training curriculum, but will be relevant for any palliative care professional.

Terms of Reference

We plan to update the Terms of Reference to ensure they accurately represent the priorities of the new joint group, however the core aims of the SIF will continue to be:

- To improve services for young adults with palliative care needs
- To increase awareness amongst palliative care 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.

Similarly, our essential activities will continue to centre on

- Providing a forum for discussion, debate and ideas creation
- Creating opportunities for collaborative working, practice sharing and policy-making
- Encouraging development of services appropriate to the needs of young adults
- Supporting the APM/APPM by responding to requests for expert advice and opinion in this area.

During this period of change the APM executive agreed they were happy for Jo to extend her period as chair of the group beyond the intended 3 years. We anticipate to run the group with joint chairs representing each organisation in the future.

Dr Jo Elverson

Transition and Young Adult SIF lead

March 2023

APM Undergraduate Medical Education SIF Report APM AGM 2023

1. Annual SIF Meeting

The 2022 SIF annual meeting was held in person in Cambridge on November 30th 2022 with the title “**Undergraduate medical education in Palliative Care: looking to the future**”. The programme and presentations can be found at <https://www.apmuesif.phpc.cam.ac.uk/annual-conferences/annual-conference-2022/> We started with an outstanding keynote presentation “The Medical Licensing Assessment: implications for medical education” from Professor Mark Gurnell, Head of Medical Assessment at the University of Cambridge School of Clinical Medicine and Chair of the Medical Schools’ Council Assessment Alliance.

This was followed by an update from Jessica Watkin, Policy Manager, General Medical Council concerning the recently updated GMC Guidance ‘Treatment and care towards the end of life’. This was followed by a series of delegate presentations that stimulated much interest and discussion. After lunch, Dr Tom Weetman (NIHR

Academic Clinical Fellow in Medical Education and Palliative Medicine in Cambridge) presented the initial results of his recent national survey of medical school education in Palliative Care. Round-table discussions of the SIF workstreams rounded off the day. 50 colleagues from across the UK attended and commented how good it was to be back to meeting in person.

The next annual meeting of the SIF will be in Liverpool on Wednesday October 18th. All are welcome to join us: please contact Stephen Barclay at sigb2@medschl.cam.ac.uk for further information if you are not already on our email list.

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 "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

We plan to host a further event in 2023 to produce Single Best Answer questions for the General Medical Council Medical Licensing Assessment that will shortly form part of all medical student Finals examinations. Please contact Stephen Barclay sigb2@medschl.cam.ac.uk if you would like to be involved. We have responded to the MLA team concerning the proposed exam content map.

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

Stephen Barclay & John Ellershaw

Undergraduate Medical Education SIF leads

February 2023

APM NeuroSIF Report

APM AGM 2023

Coordinator – I took over from Dr Claire Stockdale as coordinator in January 2023. My thanks to Claire for the excellent work she has been doing to promote the work of the NeuroSIF for several years.

Membership – This remains broad, including substantive and training grades, and not limited to palliative care physicians. We have 60 confirmed members.

The work of the NeuroSIF over the last year includes:

Teaching/Study Days

The last study day was in 2021, but a number of colleagues who were (or now are) associated with the NeuroSIF contributed to the British Geriatrics Society conference in June 2022, which focused on palliative care in Parkinson's Disease, through planning and speaking. Feedback for this conference was excellent (each speaker scoring more than 8/10), but few attendees were from specialist palliative care, and the sense was that it was a missed opportunity to develop the link between geriatrics and palliative care. The BGS reported that the meeting made a financial loss. In terms of how the NeuroSIF might learn from this for our own work, there is much here to be reflected upon in the future but a focus on the common themes between geriatrics and palliative care in neurological disorders might be fruitful.

More recently, we were again approached by the BGS for a speaker for their spring 2023 conference, specifically to speak about end of life care in stroke.

National work

In the last year, members of the NeuroSIF have been asked to contribute to:

- Research on advance care planning for adults with severe cerebral palsy
- The UK MND clinical studies group
- Research on living with tracheostomy for those with MND

And have been invited to attend the palliative care masterclass run by the Neurology Academy in May 2023.

Dr Jon Martin

Neuro SIF lead

March 2023