



ROYAL COLLEGE OF OBSTETRICIANS AND GYNAECOLOGISTS
Minutes of a Meeting of Council held at the RCOG and virtually on
Friday, 16 September 2022

PRESENT

President	Mr Edward Morris (Chair)
Senior Vice President, Global Health	Miss Raneer Thakar
Vice President, Clinical Quality	Professor Tim Draycott
Vice President, Membership	Dr Pat O'Brien
Vice President, Workforce and Professionalism	Dr Jo Mountfield
Vice President, Education	Miss Sue Ward

ELECTED FELLOWS

Mr Sherif Abdel-Fattah
Dr Jyotsna Acharya
Professor Dilly Anumba
Professor Adam Balen
Dr Alastair Campbell
Professor Stergios Doumouchtsis
Professor Colin Duncan
Miss Fatima Husain
Mr Joseph Iskaros
Mrs Geeta Kumar
Mr Andrew Leather
Dr Hans Nagar
Mr Andrew Pickersgill
Mr Philip Rolland
Mr Ian Scudamore
Mr Andrew Sizer
Professor Basky Thilaganathan
Miss Melanie Tipples
Professor Peter von Dadelszen

ELECTED MEMBERS

Dr George Attilakos
Dr Jenny Barber
Dr William Dudill
Dr Jonathan Frost
Ms Angharad Jones
Dr Chimwemwe Kalumbi
Dr Vanitha Kumar
Mr Alastair McKelvey
Dr Javaid Muglu

MEMBERS

Professor Emma Crosbie, Academic Board Chair
Dr Laura Hipple, RCOG Specialty and Associate Specialist and Locally Employed Doctors Lead
Dr Asha Kasliwal, FSRH President
Ms Jane Plumb, Vice Chair, Women's Network
Dr Heidi Stelling, Chair of Trainees Committee

IN ATTENDANCE

Chief Executive
Executive Director, Finance
Interim Executive Director, External Affairs
Executive Director, Education, Quality and Projects
Executive Director, Global and Membership
Business Administrator

Ms Kate Lancaster
Mr Ian Hill
Mr Ben Butler
Ms Carly Edwards
Ms Kristen Morgan
Ms Natasha Sullivan

1 Welcome

The President welcomed all to the meeting.

2 Apologies for absence

Apologies for absence were received from:
Hlupekile Chipeta MRCOG
Baroness Shaista Gohir, Women's Voices Lead
William Parry-Smith MRCOG
Sarah Quinn MRCOG, Trainees Vice Chair
Claire Thompson MRCOG

3 Vice President Election 2022 ballot

Council voted in the ballot for the Vice President election. It was originally intended that the results would be announced in the meeting and communicated immediately after. Due to the national period of mourning, the announcement to candidates, Council and the wider membership will be delayed until after Her Late Majesty's funeral.

The President thanked all those standing for election.

4 Procedure for Business

4.1 RCOG Confidentiality Agreement and Declaration of Interest and Good Standing had been circulated. Council were asked to complete and return the form if they had not done so within the last year.

5 Minutes and Matters Arising

5.1 Resolved:

THAT the minutes of the Council meeting held on 10 June 2022 (A1084) were received, with a correction that a paper on the induction of IMG trainees is being released, rather than MTI trainees, and that one specialist SAS job application has been received rather than two.

The notes of Ockenden Council workshop held on 10 June 2022 were received.

6 Obituaries

6.1 Resolved:

THAT the sympathy of Council be extended to the relatives of the following:

Dr Hugh Martin Gough – Fellow of Canada
Dr Raymond Stanley Hyslop - Fellow of Australia
Dr Neil Robert Johnstone - Fellow of Australia
Dr Ivan Jelen – Fellow of England
Mr James McGrath – Fellow of England
Dr Sulochana Gunasheela – Fellow of India
Mr Nigel Francis Perks – Fellow of England
Dr Patrick John Rowe – Fellow of France
Dr Nafis Sadik – Fellow of United States America
Dr Usukumah Eyo Usukumah – Fellow of United States America

6.2 The President paid tribute to Her Majesty, Queen Elizabeth II.

7 Introduction from new Council members

The following new members of Council introduced themselves.

Sherif Abdel-Fattah, International rep MENA
Jenny Barber, Members rep North West
Peter von Dadelszen, International rep America/Australasia/Pacific Rim

William Colin Duncan, Fellows rep Scotland
Fatima Husain, Fellows rep Thames Valley and Wessex
Joseph Iskaros, Fellows rep London: North, Central, East & NW
Chimwemwe Kalumbi, Members rep Kent, Surrey and Sussex
Javaid Muglu, Members rep London South
Hans Nagar, Fellows rep Northern Ireland
Andrew Pickersgill, Fellows rep North West
Philip Rolland, Fellows rep South West
Melanie Tipples, Fellows rep Kent, Surrey and Sussex

8 President

8.1 President's Report

The report of the President's recent activities was noted.

8.2 RCOG inclusivity update and Language Guide development

The President gave Council an update on the College's inclusivity work, including the College's draft Green-top Guideline (GTG) to improve the care and experiences of transgender and gender diverse individuals accessing obstetric and gynaecological services, the inclusivity statement published in partnership with the RCM and the internal Language Guide to support clinicians producing clinical guidance or patient information on behalf of the College. The College understands the importance of language in breaking down barriers for people accessing care and is committed to using inclusive language in its communications, publications and patient information to meet the needs of all individuals. The language guide details that the aim will be to add and not take away, emphasising the importance of preserving woman-centred language as well as including language for those who do not identify as a woman.

The President thanked the communications team for their excellent work on these documents.

The FSRH President congratulated the RCOG on this work and that it is an area that is a challenge for the Faculty also.

The Women's Network Vice-Chair commented that the Network had significant input to the development of the guide and are delighted that their feedback had been listened to in the final product and welcome its publication.

A Council member queried that the recommended term in the language guide to replace 'geriatric mother' is a 'women or person who is over the age of 35 having a baby', and whether this should be changed to age over 40. It was responded that the guide is a living document; feedback will be considered and it will evolve in response.

8.3 MRCOG Part 1 exam, September 2022

The Executive Director for Education and Quality gave a verbal update on the activities the College has undertaken to support impacted UK MRCOG Part 1 candidates, following Pearson VUE's decision to close all test centres as a result of Her Majesty the Queen's funeral and the Bank Holiday.

The 77 affected UK candidates, and Heads of School, have all been written to on the next steps and timeline. Candidates have been offered support with the additional financial costs associated with attending an international centre and any candidates not able to travel to an overseas centre have been guaranteed a place in the next exam diet in January 2023. In addition, all impacted candidates that are deferring until January have been gifted a free place on a RCOG revision course ahead of their rescheduled exam. It was decided to allow the exam to go ahead at the global centres, which were not affected by the closure.

The National Trainees Committee Chair thanked the team for their handling of the situation and engagement with the Committee from the start. The affected candidates are very upset but the good communication from the College has helped.

A Council member queried whether an additional diet of the exam could be held, sooner than the next planned exam in January, potentially repeating a past exam. The Vice President for Education responded that it takes 3-6 months for the committee to prepare an exam, that the committee members volunteer their time,

and that repeating an exam is not robust, and the Officers feel that it is important not to threaten the quality of the exam.

A Council member raised that this shows a weakness in the examinations process, as we rely on Pearson Vue to hold the exams. The Executive Director for Education and Quality noted that it has been agreed not to hold an exam on a Monday in future as it means it is difficult for candidates to speak to the College if needed over the weekend.

A Council member asked whether any candidates would be held up from progressing to ST3 because of this situation. The Vice President for Education responded that one candidate is unfortunately at risk and the Heads of School have been sent copies of all communications that have been sent to the candidate.

9 Education

9.1 Report on Education and Exam activities

The Vice President for Education reported that phase one of the RCOG's new Learning Management System, RCOG Learning, will launch at the end of September. This is a 'lift and shift' exercise of the current eLearning content to its new home, in order to maintain existing member benefits before the current platform closes this autumn. The Vice President asked Council members to remind their constituents to save notes and assessment scores, as these will not be transferred to the new system. We will shortly be recruiting Member, Fellow and Trainee volunteers to join a new Digital Learning User Reference Group.

Proposed changes to advanced training will be submitted to the GMC in January, including two new ATMs on pelvic pain and robotic surgery. The capabilities of the Advanced Labour Ward Practice and the Acute Gynaecology and Early Pregnancy ATSMs are to be moved into the core curriculum. A wider stakeholder consultation on the revised ATMs and subspecialty curricula is planned for October 2022.

A Council member raised that ATSMs and APMs would be beneficial to be made available for overseas members. The Vice President for Education responded that the College is in conversation with several countries on accessing RCOG educational packages at the core curriculum and ATSM level. This needs significant support to set-up and manage, and is reliant on in-country trainers. Negotiations are often slow and have been delayed by the pandemic. An update on this work will be presented to Council in the future.

The first phase of the Mesh Training Pathway has been launched for established practitioners to be accredited in the first instance. This is an output of a joint project with the surgeons and urologists.

The GMC is introducing a new framework for assessment of Specialist Registration that will replace the current CESR pathway. The standard will change from equivalence to CCT to knowledge, skills and experience (KSE) for specialist or GP practice in the UK. An impact assessment needs to be submitted to the GMC in September 2022, ahead of the introduction of new legislation in summer 2023.

A Council member raised that there is an issue with attracting Gynae-oncologists to the UK and the challenging requirements for equivalent experience; and asked if this could be raised with the GMC. The Vice President for Education agreed with the difficulty this poses and that discussions have been begun and will be continued.

The results of the MRCOG Part 1 and 2 examinations in July 2022, and MRCOG Part 3 diet in May 2022, were noted. The Part 3 exam took place in person at Union Street, over five days.

9.2 Future format of TOG

The Vice President for Education presented a recommendation from the Education Board on the future format of TOG and that the journal permanently move to a digital first model. A detailed options appraisal has been undertaken by the Education Team and TOG Editorial Board to formulate this recommendation. There is significant financial and environmental benefit. Users have been asked for their feedback and there is mixed feedback, with trainees generally positive towards a digital format and members preferring print. There is potential with the digital format to add additional features such as podcasts and video. TOG has been published online only since the start of the pandemic in 2020.

A Council member raised that the presented feedback shows that members prefer print version and expressed concern that this highlights a wider issue of the voice of members not being listened to. There was also a low response from members to the survey, which could be a sign of disengagement with the College.

The President responded that wider engagement needs to be looked at, and that some work has been undertaken on engagement statistics and this can be shared with the Council. Several Council members also responded that they had not received the survey.

Some Council members felt it is important to have the option to have a print version and this should be a member's choice what format they would like to receive.

Council agreed that it would be important to offer members the option to have a print version for an additional cost.

Council approved the recommendation to permanently move to a digital first model for publication. Members, Fellows and Trainees will have the opportunity to opt-in to a print version of the journal for an additional cost.

10 Clinical Quality

10.1 Report on Clinical Quality Activities

The Vice President for Clinical Quality congratulated the Tommys' centre who have secured funding for the next stage for the rollout of the mobile application.

A proposal for suggested 9 month a pilot phase for the Avoiding Brain Injury in Childbirth (ABC) programme has been submitted to DHSC and we are awaiting news regarding funding for phase 3 of the project, following the appointment of a new Health Secretary. It is hoped the tender can be secured in time for the pilot to start in November 2022 and would involve NHSE as a key stakeholder.

A Council member queried whether the ABC programme would be rolled-out to the devolved nations. The Vice President for Clinical Quality responded that this is an ambition of the programme however, it is funded by the DHSC, and we are working to engage the Scottish Government.

A Council member raised whether a discussion could be undertaken on no-fault legislation and compensation. It was responded that this is a responsibility of NHS Resolution and not in the RCOG's power, but it is important for the College to work to influence the investigation landscape.

A number of guidance publications, guidelines and enhanced content have been published since the last meeting of Council, including one Green-top Guideline, three Scientific Impact Papers, four Patient Information Leaflets and Consent Advice on Planned Caesarean Birth. There was significant media interest regarding the publication for consultation of the draft Green-top Guideline on the care of transgender and gender diverse people.

A stakeholder consultation is in process on the proposal to change the name of the RCOG Clinical Quality function. The idea of the name change is to rebrand the department making the name accessible, understandable and clear to external stakeholders and potential funding partners of its high value work. A recommendation following the consultation will be presented at the next Council meeting.

11 Global Health

11.1 Report on Global Health Activities

The Vice President for Global Health reported that work across the three major Global Health projects; Making Abortion Safe, Essential Gynaecological Skills (EGS) and SRHR UK Overseas Development Assistance Advocacy are progressing well.

The Making Abortion Safe SRHR Champions and programme team were well represented at the RCOG World Congress in June with eight ePoster presentations, two oral presentations and a panel session. 24 Champions attended the conference virtually and three in person.

Two new Best Practice Paper are being developed, one on telemedicine abortion and another on post-abortion contraception.

Phase 2 of the abortion stigma study is underway with in-depth interviews in the programme countries taking place. A consultant has been tendered to work on the qualitative data element as well working on a stigma guidance paper.

The Vice President for Global Health travelled to Dhaka in August to meet key stakeholders and deliver inception activities for the EGS programme. Two more sites in remote areas have been selected. The EGS training package is currently being reviewed and adapted for the Bangladesh context in order to train healthcare professionals in the districts of Kushtia and Rajbari in early 2023.

The RCOG has developed a draft advocacy training toolkit for healthcare professionals on the harmful impacts of FGM. This aims to raise healthcare workers awareness and better equip them with updated knowledge, understanding, skills, competencies and attitudes to help reduce this harmful practice globally. The toolkit has been approved by the Education Quality Assurance Committee and a small amount of funding is being sought for the Centre to package and disseminate this as a pilot in Egypt initially.

Plans are underway for the Officers to attend the AICC Annual Conference in Mumbai in November 2022, which is being organised by AICC West Zone. The RCOG be involved in pre-conference workshops including a FOGSI RCOG Training the Ultrasound Trainers workshop, and a membership admission ceremony will be held.

12 Membership

12.1 Report on Membership Activities

The Vice President for Membership reported that the College hosted two successful face-to-face membership ceremonies at Union Street on 15 September, where the Late Majesty the Queen's passing was marked. Further ceremonies will take place in October, November (as part of the AICC conference in Mumbai), and December when the new Officer group will be installed.

A Council member asked whether the Past Fellows' Dinner, which in the past was held following Fellowship ceremonies, would be reinstated. The Vice President for Membership responded that is a good idea and will be considered by the Task & Finish group.

96% of annual College subscriptions have been received. To date, for the 2022 subscription round there have been 100 reinstatements (34 Fellows and 66 Members). Benefits were stopped for non-payment from June and removals begun in September, in line with the subscriptions timetable.

A Council member commented that in the graph showing membership subscriptions' revenue for 2022 in the written update, it appears that the income from UK and Ireland is a lot higher than that from overseas members. They also asked if the percentage of income by Members and Fellows could be shared in future updates.

The Vice President for Membership responded that overseas members' fees are lower due to the difference in income levels between countries.

In support of a project to review Fellowship and make it a more attractive proposition, a Fellowship Task and Finish Group is being convened in October to examine the current elevation to Fellowship process, eligibility criteria and proposition for Fellows in the UK and those based internationally. A project has also commenced to develop and deliver a paperless Direct Debit payment option alongside the project to address challenges experienced by our international members in making payments to the UK.

A Council member requested that representatives from the devolved nations are included in the Task groups being set-up.

A high number of job plans are being received for review, which has been the case through 2022, likely because of the additional funding following the Ockenden Review. The team continue to work to process them as swiftly as possible and have expanded the pool of people undertaking the reviews to share the workload. The Vice President for Membership asked Council members if they could review job plans as quickly as possible, as Trusts are keen to make appointments.

A Council member suggested that job plans for approval be sent by specialty where possible. The Vice President responded that the team aim to do this but it is not always possible due to the volume and when non-specialty specific job plans are received.

A Council member noted that job plans for Wales have different requirements to those in England. The Vice President for Membership responded that the Membership team has recently been made aware of this, and it will be flagged to those reviewing any Job Plans for posts in Wales.

The next meeting of the Retired Fellows and Members Society, chaired by Professor Jim Drife, will be on 20th September 2022. A hybrid event for retired Fellows and Members is planned for 2nd December 2022. A project to review the RCOG proposition for retired Fellows and Members has commenced.

12.2 Elevation of Members to Fellowship

The list of Members for elevation to Fellowship, as circulated to the Fellows on Council, was approved.

12.3 Honorary Fellowships 2022

Council approved the eight nominations selected for Honorary Fellowship; four honoris causa and four ad eundem.

12.4 Awards, Prizes and Bursaries 2022

Council ratified the circulated list of award, prize and bursary winners for 2022. The judging was led by the Academic Board Chair. Two awards did not receive any eligible applications and will be re-opened. In addition, the Vice President of Education proposed Tom McFarlane as recipient of the Distinguished Service Medal, which Council approved.

13 Workforce and Professionalism

13.1 Report on Workforce and Professionalism activities

The Vice President for Workforce and Professionalism reported that an early prototype workforce tool was presented to the Maternity Transformation Board and an extraordinary meeting of the Maternity Infrastructure Oversight Group and was well received. The RCOG has secured an agreement from DHSC to fund further development of the tool through to 2025. HEE are populating the prototype tool with data from the RCOG census and publicly available data (for example MSDS). There have been frustrating delays waiting for patient level data from hospital episode statistics (HES) via NHS Digital, which will be added once available. Following acquisition of this data, statistical analyses are to be performed to calculate safe numbers of staffing adjusted for the complexity of the local population.

The guidance on the new Certificate of Eligibility for Short Term Locums is now published and available on the College website. The individual doctor undertaking short-term locum posts will be required to collect the evidence needed for certificate sign off, via the Training ePortfolio. This will become mandatory from February 2023. The guidance will be disseminated to clinical directors, the RCOG membership, the trainees committee and via NHSe networks and locum agencies, with a launch webinar planned for 14 October. Colleagues will need to support locums to gain the necessary evidence for their certificate.

The RCOG position statement on ensuring safe out of hours support for complex emergency obstetric and gynaecology surgery was published in July 2022 and disseminated to all clinical directors and medical directors. It is planned to add some case studies and sample SOPs to the website in the near future.

A Council member raised on behalf of their constituent whether the statement has been consulted before being launched as it has resource impact. The Vice President for Workforce and Professionalism responded that this is why the statement has been issued as guidance rather than rules, as agreed at Council.

13.2 Uncoupling the training pathway proposal

The Workforce Fellows, Farah Siddiqui and Katharine Edey, joined Council to present and discuss a proposal to uncouple basic training from higher training in Obstetrics and Gynaecology. This is one of the actions taken to increase flexibility in training, and help recruitment in response to gaps within the training programme that exist due to less than full time working, out of programme opportunities and attrition.

Under this proposal, basic training would run from ST1-3 and higher from ST4-7. There would be a second national recruitment round at ST4. The current recruitment at ST3 (designed to fill gaps) would cease. This situation is already the case in Ireland, as Council have discussed on a previous occasion.

Council submitted comments in advance, which were responded to as follows:

- ‘In order to improve the quality and quantity of expert gynaecological surgeons, would there be scope to select those motivated and applying for ST4 for a gynaecological surgery track?’ It was responded that doctors in training will have a clearer idea of the progression pathway. The uncoupling will not supersede the review of advanced training but there is scope for alterations.
- ‘Can we recruit enough people at ST4 to support LTFT potentially for the majority of trainees and is there not a high likelihood that this will either lead to wastage at consultant level or a need to change the landscape of consultant working radically to support a greater number of LTFT consultants?’ It was responded that modelling would be undertaken for an increase in numbers though it is not possible to fill to LFTF only.
- ‘Could this potentially take away trainees after their basic training - from rural areas to bigger cities, where they will not only have more opportunities to learn surgical and other skills but also work under supervision in 3 tier rotas - thus leaving more gaps in smaller units?’ It was responded that the training programme would encourage people to have a mix of experience. Posts will be redistributed around the country, so there will be more subspecialty work around the country with better links and more responsive to needs in areas.
- ‘Do we envisage having similar number of posts nationally - at entry level for basic as well as advanced training?’ It was responded that there would not be a guarantee for advanced training posts, there will be interviews required.
- ‘Moving base from one region to another half way through training - could this be a deterrent especially for those with working partners and young families?’ It was responded that this may affect some people who do not get a post where they want to be, but it will offer more flexibility to those who want it.
- ‘Would it be possible to have the number of people that have been engaged from the different groups mentioned in the workshops?’ It was responded that an open call was included in the trainees’ newsletter but low response received, a stakeholder day held with specialist societies, trainees and student, and the BMA, and focus groups held.
- ‘Have alternative options be considered to address the problems mentioned?’ It was responded that two other options have been considered, recruitment at ST3 but this lacks flexibility in programme, and to recruit more at ST1 but this is driven by HEE and funding and therefore does not enable forward planning.
- ‘Have we explored the risk of uncoupling training fully?’ It was responded that the workforce team have considered this carefully. In the short-term it could reduce the number of applicants for ST1, in the medium term, people could potentially not apply for ST4, and those at ST3 may need more support, and in long-term, a reduction in the number of consultants at CCT. It will be important to look at making the training programme more attractive.

A Council member commented that they are supportive of the proposal but that the Examinations Committee have worked to emphasise that the MRCOG be taken at ST5 and are concerned that this proposal may encourage people to sit the MRCOG at ST3. The Vice President for Workforce and Professionalism responded that we do not know at this point whether the proposal would have that impact.

A Council member queried whether ST4 is not a suitable time to leave training. It was responded that there are potential benefits and drawbacks, and that this may not be important if training takes longer.

The Trainees Committee Chair commented that this decision will have a major impact for trainees and that they are unsure why there was a low response rate from the trainees’ newsletter and queried who has been involved so far in the focus groups. Flexibility is key and they are not confident that this proposal is the answer. The Vice President encouraged feedback to be submitted to the upcoming consultation, as this will be carefully considered, and that any questions can be sent to the workforce team.

A Council member queried whether both options, run through and with a break, could be made available. It was responded that this would not be possible as it would be too complicated in practice.

The Vice President for Workforce and Professionalism reported that the next stage in the proposal will be a wider consultation period, initially with the GMC and recruitment leads, and then with the wider membership.

Council asked for a further opportunity to understand and discuss this proposal. It was confirmed that an opportunity for Council would be arranged; it is planned to make an initial submission to the GMC in January so the discussion will need to be arranged in the upcoming weeks.

14 Academic

14.1 Report on Academic activities

The Academic Board Chair reported that the next Blair Bell Annual Academic meeting would be held at Union Street in February 2022. Abstract submissions will open soon.

A series of virtual seminars for members are being planned on careers in research. There will also be an offering of individual mentorship.

15 Women's Network

The Women's Network Vice-Chair noted the circulated written update on recent activities of the Network and Women's Voices Panel.

The Voices Panel have suggested that the College create a chart for periods (similar to the Bristol Stool Chart) where the different types of bleeding are clearly defined. A Council member responded that there is a resource currently in use, which is a good resource to use for effective communication with patients.

16 FSRH

The President of FSRH noted the circulated report on the Faculty's recent activities. The FSRH recently published the FSRH Hatfield Vision, endorsed by 29 organisations. The Vision features priority goals and actions for policy makers in areas such as access to contraception, reproductive rights, menopause, menstrual health, cervical screening and maternal health outcomes in black women and women of colour.

This being the incumbent FSRH President's last RCOG Council meeting, she recognised the huge strides both organisations have taken over her six-year term, and the strength and support gained through working together. Janet Barter has been elected as the next President of the Faculty and she will start later in September 2022.

17 CEO

17.1 CEO Update

The Chief Executive's report on the work of the College across a range of activity, constructed around the four goals of the RCOG strategy, was noted.

18 Elections

Council Elections Autumn 2022

There are two vacant positions on Council, and a number of posts may become vacant following the Vice President election. It is planned to hold a round of elections in autumn for these positions.

The timetable for these elections was presented and Council approved the proposed nomination form.

19 Council Membership

19.1 Committee and Honorary Appointments

The four new appointments to RCOG Committee posts were ratified.

19.2 Council representatives on Boards/Committees

The President asked for Council expressions of interest for the following posts:

Finance and General Purposes Committee: Member

Clinical Quality Board: Fellow

Education Board: Fellow

EDI Committee: Fellow or Member

Workforce Board: Fellow and Member

19.3 2023 Council and Board meeting dates

The 2023 meeting dates were noted.

19.4 Council appointed Trustee

The nomination pack was shared to call for nominations for the Council appointed Trustee post. If there are more than two nominations received, an election will be held at the December Council meeting.

20 Reports/minutes

The following minutes were circulated to note:

- 20.1 Global Health Board July 2022 minutes
- 20.2 Clinical Quality Board June 2022 minutes
- 20.3 Education Board July 2022 minutes
- 20.4 Academic Board June 2022 minutes

21 Any other business

A Council member raised how retiring Officers can continue to be part of the College and that they feel there is a lack of recognition of their contributions to the College, such as nothing on the website about Past Presidents/Officers or the President portraits not prominently displayed. The President-Elect and Executive Director will consider the recognition of past Officers.

Some members felt that it is important for retiring Officers to let the new team take leadership, whilst a thorough handover is important and being available as a source of information, it is important to balance with not interfering.

The President thanked the retiring Vice Presidents, members of RCOG staff, Women's Network, the Council secretary and retiring FSRH President.

The President-Elect thanked the retiring President on behalf of Council for his excellent leadership of the College over the last three years.