





South East England General EQA Scheme AGM MINUTES

Title of Meeting:	EQA Annual General Meeting		
Venue:	Virtual Microsoft Teams Meeting	Time:	12:00 PM
Minute Taker:	Louise Knowler	Date of meeting:	Monday 20 th June 2022
PowerPoint Presentation:	 AGM 2022 Presentation		

Present			
Prof John Schofield Scheme Organiser	Gill Donald Scheme Manager	Helen Dasley Scheme Quality Manager	Louise Knowler Scheme Administrator
Dr Z Al Shiekh Ali	Dr A Elsayed Ali	Dr K Ramesar	
Dr S Al-Sam	Dr L Fulford	Dr P Ranmith	
Dr Y Alwahab	Dr G Leopold	Dr S Sandhu	
Dr N Asher	Dr A Goel	Dr M Sundaresan	
Dr A Mustajab	Dr Z Hamdi	Dr J Wang	
Dr A Vargiamidou	Dr I Hawley	Dr M Warren	
Dr J Biswas	Dr U Mahadeva	Dr V Willis	
Dr A Cymerman	Dr T Matthews		
Dr D Housa	Dr I Morrison		
Dr L Edmunds	Dr P Poonam		

Apologies			
Dr A Fleming	Dr S Roberts	Dr G Vittay	

New Minutes		
Minute number and decision	Action	Date by
1. Welcome & introduction of scheme staff		
Prof John Schofield (JS) welcomed all participants who joined the teams meeting and introduced the scheme staff. He noted that the meeting was being recorded to allow for minute taking.		
2. Scheme report / Costs and Accounts (changes and developments)		
<p>Annual report 2021 Prof Schofield explained the 2021 annual report was available online for review. (submitted to RCPATH).</p> <p>Costs and Accounts 2021-22 The number of registered participants sits at 171, with an annual subscription fee of £360.00 for UK participants and £300.00 for</p>		

<p>international participants.</p> <p>Prof Schofield explained that subscription fees cover the administration for both glass slide and digital participation</p>		
<p>3. UKAS</p>		
<p>Scheme Accreditation</p> <p>Gill Donald (GD) informed participants that we have now been accredited to ISO17043:2010 for 6 years. We retained this during our most recent surveillance visit in September 2021. GD noted that the Scheme had NO findings raised.</p> <p>UKAS provided positive feedback around the following areas:</p> <ul style="list-style-type: none"> • Spread and difficulty of cases achieved is excellent and clinically appropriate • Handbook remains well written, accurate and comprehensive • The circulation of the slides is well managed and generally keeps to the planned schedule • Good change control and evidence of continual improvement with an additional meeting piloted • Scheme operations remains robust, well thought through and well-liked by the participants as evidenced by previous feedback surveys <p>Our next surveillance visit will take place in September 2022.</p> <p>Professor Schofield noted praise for staff and that the scheme is keen to welcome new ideas, suggestions and feedback to ensure the scheme continually improves and develops further overtime.</p>		
<p>4. 2021-2022 Scheme Discussion</p>		
<p>4a. Participant Survey Results</p>		
<p>Professor Schofield noted that the scheme undertook 2 surveys during this circulation.</p> <p>Case Discussion Meeting Feedback Survey</p>  <p>Case Discussion Survey</p> <p>Professor Schofield discussed that the purpose of this survey was to ascertain thoughts on the pilot Case Discussion Meeting</p> <p>Questions in the survey were discussed, noting that 10% of participants responded with positive feedback and the meeting was formally added to the circulation process.</p>		

94% of participants who responded noted the meeting has improved their understanding of the way the scores are determined.

89% of participants that responded noted their understanding of the consultation process and its influence on determining the diagnoses has improved.

61% of participants who responded feel that the information gleaned from this meeting will improve their clinical practice.

83% of respondents believed that the information gleaned from this meeting would change the way they respond to future cases?

10th Category Survey



10th Category
Survey

Prof Schofield noted that survey intended to seek participants thoughts on a change to the 10th category. He noted the 10th category is currently a duplicate category used in rotation.

20% of scheme participants responded to the survey, with “*No change*” as being most favourable ranking all be it with a minimal majority. The scheme agreed to re-survey later in the year using a different survey style.

Prof Schofield made a note of thanks to all participants for their time and valuable input into the surveys, noting that the scheme uses their ideas and feedback to inform improvements or changes to the scheme.

4b. Case availability

Case stock under 10%:

- Educational 4%
- Endocrine 5%
- Respiratory 5%
- Gynae 8%
- Lymphoreticular 9%
- GU 9%

Professor Schofield thanked participants for their contribution to the scheme, noting that any cases are welcomed, with specific focus on those categories that are propositionally low, such as Educational, Endocrine and Respiratory.

Professor Schofield asked participants to please submit at least one case a year and reminded participants of their obligation to the scheme to ensure its continuation. Noting that there is a small number of participants who have never submitted.

4c. Changes to the scheme		
<p>Case discussion meeting Participants were thanked for their contribution, noting that the new case discussion meeting piloted in August 2021 has been very well received, and this now replaces the 4th week of the consultation period.</p> <p>Certificates of participation The changes to the certificate were discussed noting that the new cases submission certificate and the annual certificate were now combined as one. Noting also that additional information has been added to the form such as no of case discussion meetings attended as well as case consultation participation. The changes were made to further aid appraisal process for participants. The scheme will shortly send out a question to seek your feedback on those changes as well asking what possible improvements we could consider.</p> <p>Making the Case Consultation Easier We also reviewed the preliminary case consultation document to help improve participation in this exercise, now includes guidance and thumbnail image links.</p> <p>AGM virtual meetings AGM meetings noted the usefulness of Microsoft teams, this will continue.</p> <p>Slido polling Using Slido in real time, Professor Schofield asked participants to suggest their feelings about how they feel about reducing the consultation period timescale period reducing for 3 weeks to 2 weeks. 65% of participants who participated in the AGM participated suggested that a change to the consultation timescale could be reduced from 3 weeks to 2 weeks. Participants were thanked for their involvement.</p>		
4d. Possible future changes to the scheme		
<p>Reducing case consultation period from 3 weeks to 2 weeks in 2022 In addition to the Slido question considered by participants, a formal survey will be sent participants following a pilot in Round r and Round s to further seek participants opinion.</p> <p>EQA Lite evaluation The scheme is currently reviewing the efficacy of EQA Lite as a potential replacement of Onmis. The evaluation remains ongoing and no immediate changes have yet to be agreed.</p> <p>Effects of exemptions on scoring The scheme is evaluating the effect of exemptions on scoring, modelling is currently in process. The findings will be made when complete.</p>	<p>LK to update the survey monitoring document</p>	<p>June 2022</p>

<p>Glass vs Digital Review We revised our original audit and looking at the impact of this on scoring to ensure that participants are not unfairly affected by their use of digital v's glass slides.</p>		
<p>5. Any other business</p>		
<p>Comments were received on business already discussed but no new subject matter was raised under this agenda point.</p>		
<p>6. Date and venue for next meeting</p>		
<p>Date and time of the next virtual meeting to be agreed. Prof Schofield thanked participants and scheme staff for their support and hard work.</p>	<p>LK to circulate a date and time for 2023.</p>	<p>Jan 2023</p>