NK

1. Workforce planning – Review and update on the effort

* Number of appointed trainees being reduced and will continue to remain low in the upcoming years
* Remaining high curve for the projected number of post-CCT trainees without consultant jobs
* Ongoing Expansion of consultant number is not feasible
* Difficult to reduce PAs of existing consultants
* Recruit ANP to cover SHO gaps to allow trainees to step up in the SpR rota earlier
* Spine: increasing objectives for curriculum, still big disparity with orthopaedics, the subspeciality that it’s the easier to get a job (ST)
* Consider smaller unit jobs – less popular for trainees usually (ST)

1. INR credential – 6 week, only for thrombectomy and not expected to have active involvement with aneurysm treatment – 24/7 on call
2. SBNS Updates

* Two SBNs council meetings
* Interviews for the spinal TIG- ?define surgical experience standards to be appointable – consider representative letter with our views
* 2021 recruitment (12 ST1 Eng, 4 in other nations, 5 ACFs), continue with virtual

AB – SAC

* COVID reduced significantly the logbook numbers amongst all specialties- now in recovery phase
* SAC open day- attended by trainees and consultants
* New Curriculum – feedback needed required early

AP – RADAR

* FOS:TEST report
* Course in digital literacy
* ASIT future of surgery show
* Robotics academics listings for projects
* Ebrain Anatomy project

AC- Academic

* Publications from BNTRC projects
* Mutliple active projects
* New project call- Three stage, [www.bntrc.org.uk](http://www.bntrc.org.uk)
* Pillars of Neurosurgery First Tuesday of each month
* Supporting Trials : CARE Trial,

CM- Treasure

* Codman Awards ongoing , slight change to criteria this year
* Plan to commence Junior Travelling Fund to allow short term experience in other units (UK or International)

CH-ASIT

* Pre-conference meeting ASIT coming up