

FACULTY OF FORENSIC & LEGAL MEDICINE

of the Royal College of Physicians of London



Registered Charity No 1119599

FFLM 7th Annual General Meeting

Minutes

Friday 10 May 2013 at 15:15hrs
Weetwood Hall, Leeds

1. Apologies for absence

No apologies were received.

2. Minutes of the last meeting

The minutes of the meeting held on Friday 11 May 2012 were agreed as a true and accurate record.

3. Award of diplomas to newly elected Honorary Fellows and Fellows

Three Honorary Fellows were elected since the last AGM, for whom Dr Schütte presented citations:

- Dr Padmini Mishra (diploma presented by Dr Schütte)
- Dr Olive Buckley
- Dr Mary Pillai

Dr Schütte announced the 2013 ordinary fellows:

- Dr Christine Bassindale
- Dr Catherine Lincoln
- Dr Maria Nittis
- Dr Angela Williams

4. Award of MFFLM Examination diplomas

Three of the successful candidates in this year's MFFLM examination have been awarded membership:

- Dr Amrin Rahuf
- Dr Katina Marinaki
- Dr Farah Yusuf

5. Inauguration of new President, Academic Dean and 3 Vice Presidents

Dr George Fernie ended his term as FFLM president, thanking his wife Isobel, the FFLM staff, and his FFLM Board colleagues particularly Dr Vicky Evans, Dr Peter Schütte and Dr Michael Devlin for their support.

The Presidency was passed to Dr Vicky Evans, who steps down as Academic Dean, and Professor Ian Wall officially began his term as Academic Dean. The new Vice-Presidents were confirmed:

- Forensic Practitioners – Dr Peter Green
- Medico-legal Advisers – Dr George Fernie
- Medical Coroners – Professor Paul Marks

6. Registrar's Report

Dr Peter Schütte presented his report as follows:

Board Meetings

The Board met throughout the Faculty's seventh year on

- 1 October 2012
- 28 January 2013
- 22 April 2013

The Minutes of these meetings are available on the website to give an indication of the discussion that took place. The Minutes are both full and accurate with limited redaction on sensitive issues, particularly those involving named individuals. This reflects the Board's wish to be open and transparent, thereby helping to fulfil its obligation to the public as a registered charity.

Attendances

FFLM Board attendance:

	01/10/12	28/01/13	22/04/13
<i>Dr George Fernie (chair)</i>	✓	✓	✓
<i>Dr J Victoria Evans</i>	✓	✓	✓
<i>Dr Peter Schütte</i>	✓	✓(phone)	✓
<i>Dr Michael Devlin</i>	✓	✓	✓
<i>Dr Catherine White</i>	✓	x	x
<i>Dr Andrew Reid</i>	x	N/A	N/A
<i>Dr Nicholas Clements</i>	x	✓(phone)	x
<i>Prof John Farnan</i>	✓	✓	x
<i>Dr Anthea Martin</i>	x	✓(phone)	x
<i>Prof Richard Shepherd</i>	✓(phone)	✓(phone)	✓(phone)
<i>Dr Sarah Redvers</i>	✓	x	✓
<i>Dr Will Anderson</i>	x	✓	x
<i>Prof Ian Wall</i>	✓	✓	✓
<i>Dr Michael Robertson</i>	x	x	✓
<i>Mr Phil Willan</i>	✓(phone)	✓(phone)	✓
<i>Mr Clive Constable</i>	x	x	x
<i>Dr Patrick Cadigan</i>	x	x	x
<i>Ms Annie Norman</i>	N/A	✓	x
<i>Dr Roy Palmer</i>	N/A	✓	✓

Academic Committee attendance:

	16/07/12	17/09/12	14/01/13	19/03/13
<i>Dr Victoria Evans (chair)</i>	✓	✓	✓	✓
<i>Dr Shirjeel Tahir</i>	n/a	n/a	✓	✗
<i>Dr Frank Voeten</i>	n/a	n/a	✗	✗
<i>Shade Alu</i>	n/a	n/a	✗	✓
<i>Dr Nick Clements</i>	✗	1	✗	✗
<i>Ms Jo Delaforce</i>	✗	✗	✓	<i>Jennie Smith</i>
<i>Dr Michael Devlin</i>	✗	✓	✓	✗
<i>Dr George Fernie</i>	✓	✓	✓	✓
<i>Dr Andy Dott</i>	✗	✗	✗	✗
<i>Dr Jason Payne-James</i>	✗	✗	✗	✓
<i>Dr Roy Palmer</i>	n/a	n/a	✓	✗
<i>Dr Bernadette Butler</i>	✓	✗	✗	✗
<i>Dr Peter Schütte</i>	✓	1	✗	✓
<i>Prof Paul Marks</i>	<i>by telephone for research item</i>	<i>by telephone for research item</i>	✗	<i>by telephone for research item</i>
<i>Prof Ian Wall</i>	✓	✓	✗	✓
<i>Dr Will Anderson</i>	✓	✓	✓	✓
<i>Dr Cath White</i>	✓	✓	✗	✗
<i>Prof Miranda Horvath</i>	✓	✓	✓	✓
<i>Dr Jenny Holmes</i>	n/a	✓	✓	✗
<i>Mr Tim Miles</i>	n/a	✓	✗	✓
<i>Dr Deborah Hodes</i>	✓	✗	n/a	n/a
<i>Dr Andrew Reid</i>	✓	✗	n/a	n/a

Revalidation Committee attendance (All teleconferences):

	13/06/12	26/10/12	9/04/13
<i>Dr Nick Clements (Chair)</i>	✓	✓	✓
<i>Dr Michael Devlin</i>	✗	✗	✗
<i>Dr Victoria Evans</i>	✓	✓	✓
<i>Dr George Fernie</i>	✗	✗	✓
<i>Dr Sandy Fielding</i>	✗	✗	✗
<i>Dr Matthew Lee</i>	✓	✗	✓
<i>Dr Neil Margerison</i>	✗	✗	✗
<i>Dr Andrew Reid</i>	✓	✗	N/A
<i>Dr Peter Schütte</i>	✓	✓	✓
<i>Prof Richard Shepherd</i>	✗	✓	✓
<i>Dr Cath White</i>	✗	✓	✓

Fellowship Committee attendance:

	28/11/2012
Dr George Fernie (Chair)	✓
Dr Nick Clements	✓
Dr Julia Neild	✓
Dr Roy Palmer	✓
Dr Andrew Reid	✓
Dr Peter Schütte	✓
Dr Jeremy Smart	✓
Dr Cath White	✗

Board Membership

The President, Dr George Fernie demits office at the AGM.

The three Vice-Presidents are also coming to the end of their terms of office. Dr Cath White has represented Forensic Practitioners and Dr Nick Clements Medico-Legal Advisers. Dr Andrew Reid (Vice-President Coroners) resigned in early 2013 and Dr Roy Palmer was appointed acting Vice-President (Coroners) pending the outcome of the 2013 Board elections.

Prof John Farnan and Dr Anthea Martin came to the end of their terms as ordinary members of the Board.

Ms Annie Norman, a forensic nurse, was co-opted onto the Board and attended her first meeting on 28/01/2013. Dr Michael Robertson and Mr Phil Willan continue as lay members of the Board.

All have given excellent service to the FFLM.

In the elections, there was one candidate for each vacancy, and so the following posts were filled without a ballot of the membership. They will take office at the AGM.

President: Dr J Victoria Evans
Vice-President FPs: Dr Peter Green
Vice –President (MLAs): Dr George Fernie
Vice-President (Coroners): Prof Paul Marks

Ordinary Members: Dr Will Anderson
Dr Cath White

There was one applicant for the post of Academic Dean being left vacant by Dr J Victoria Evans. The applicant was Prof Ian Wall, and his appointment has been confirmed by the Board.

Promotion of forensic and legal medicine

The FFLM will:

- Continue to work with Government to raise the profile of forensic and legal medicine and to contribute to and develop new policy
- Seek opportunities to promote the specialty to medical undergraduates
- Seek opportunities for sharing educational and good practice work with colleagues overseas
- Seek to publish articles to promote forensic and legal medicine awareness
- Seek to improve communications and press coverage
- Develop marketing and promotional literature

Education and training

- *Implement Faculty specialist examinations successfully and continue to refined these*
- *Maintain good communication links with the GMC and Academy of Medical Royal Colleges (AOMRC)*
- *Maintain Introductory Training Course for Forensic Physicians & Healthcare Professionals*
- *Maintain Development Training Courses*
- *Maintain e-learning course with Ulster University for membership examination*
- *Maintain and review faculty educational documents*
- *Maintain and support Forensic Science Committee*
- *Update Forensic Sampling guidance every 6 months*
- *Maintain a Research sub-committee*
- *Run an Annual Conference*
- *Produce new or updated guidance as appropriate*

Professional development and standards

- *Respond to GMC consultation documents*
- *Contribute to associated work of other bodies such as the National Institute for Health and Clinical Excellence (NICE)*
- *Maintain Faculty CPD scheme including manual process for accreditation of courses relevant to Faculty members*
- *Promote guidance for Faculty members on CPD*
- *Promote participation in Continuing Professional Development*
- *Encourage members to recognise that CPD participation is becoming mandatory*
- *Review effectiveness of CPD scheme with feedback from Faculty members*
- *Maintain appraiser training courses*
- *Maintain Faculty appraisal service*
- *Monitor developments in relation to revalidation*
- *Continue to build on work to develop curriculum*
- *Participate in GMC credentialing pilot with hope of achieving specialist status through this mechanism - see appended report*
- *Promote Fellowship nomination procedure*
- *Continue to revise the Faculty examination*
- *Maintain Faculty CPD web-based on-line scheme*
- *Evolve guidance for Faculty members on CPD based on GMC requirements*

Governance, Resources and Internal Matters

- *Present audited accounts to Board and AGM*
- *Present budget forecast*
- *Review standard of service provided by current auditors*
- *Review standard of service provided by C Hoare & Co*
- *Review the Standing Orders and Governance Regulations to ensure they are fit for purpose*
- *Review staffing and resources*
- *Develop in house policies and procedures*
- *Review faculty document management system*
- *Continue development of Faculty website*

GMC Specialist Register

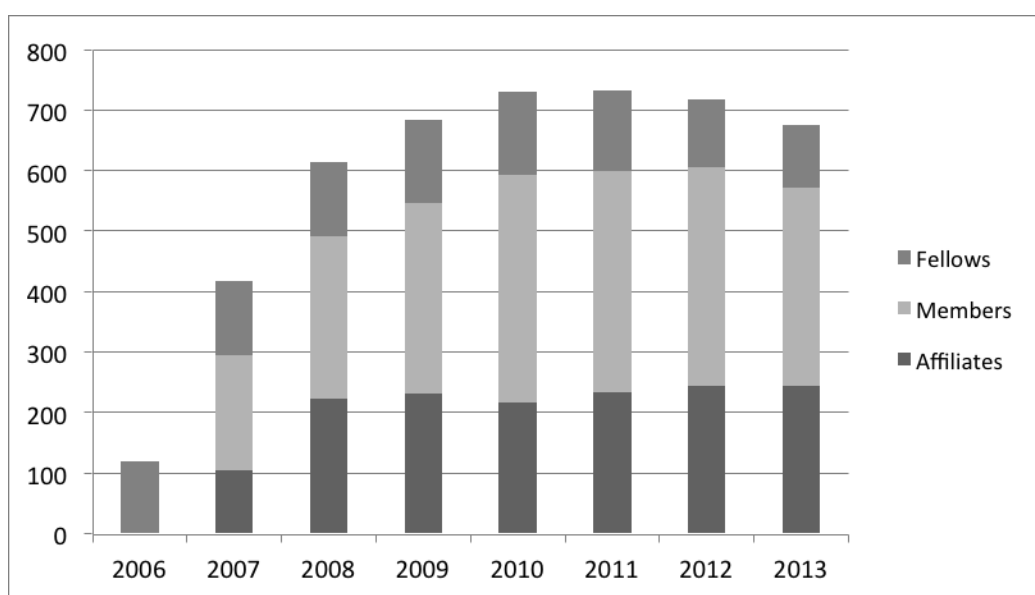
Dr Peter Green and Dr Jason Payne-James are to be congratulated on being the first UK forensic physicians to gain entry as forensic physicians on the Specialist Register of the General Medical Council. This is a landmark achievement for them personally, and for the FFLM.

Membership trends

The membership numbers have declined slowly in the last couple of years, following the closure of the Foundation Membership route in 2009. The greatest fall has been in Members. The number of Affiliates has remained stable.

The following table gives the numbers for Affiliates, Members and Fellows since the inception of the FFLM. The figures exclude retired and honorary membership.

Year	Affiliates	Members	Fellows	Total
2006	0	0	120	120
2007	105	190	122	417
2008	222	269	123	614
2009	231	315	138	684
2010	217	375	138	730
2011	234	366	133	733
2012	245	360	112	717
2013	243	329	104	676

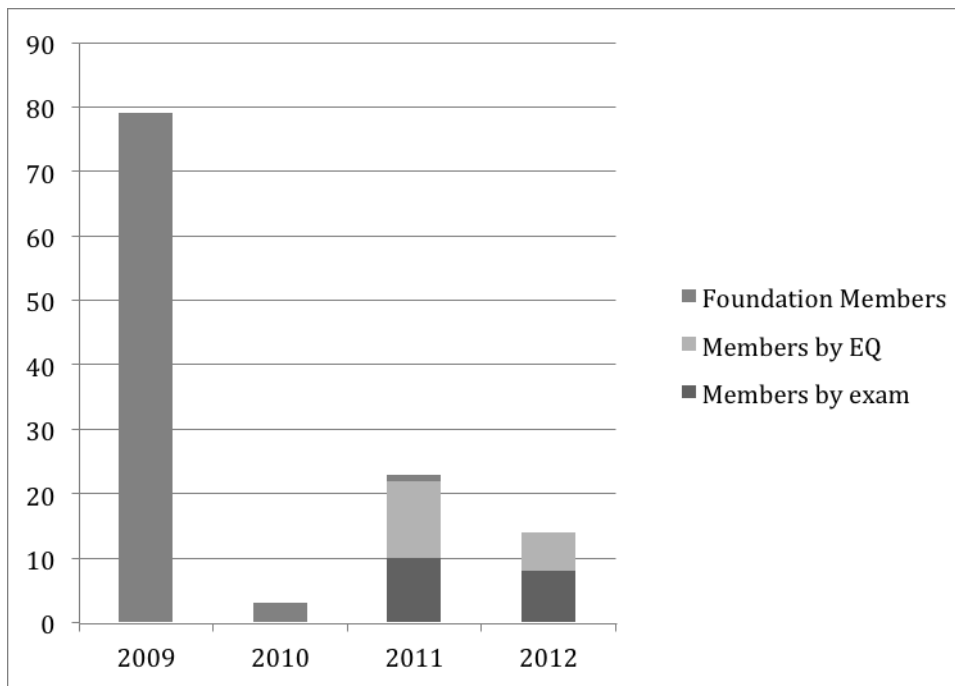


Looking at the route by which Members (i.e. MFFLMs) joined, there are similar numbers of those who take and pass the MFFLM exam (i.e. Forensic Physicians and MLAs), and those who gain entry via the Equivalent Qualification clauses 2.3.2, 2.3.3 and 2.3.4 in the Standing Orders (i.e. Forensic Pathologists, Coroners and Forensic Psychiatrists)

New MFFLMs 2009 - 2012 by route:

	Members by exam	Members by EQ*	Foundation Members	Total
2009	0	0	79	79
2010	0	0	3	3
2011	10	12	1	23
2012	8	6	0	14

* EQ = Equivalent Qualification



As seen in previous years, Forensic Physicians (a category which includes Sexual Offence Examiners) make up the bulk of the membership.

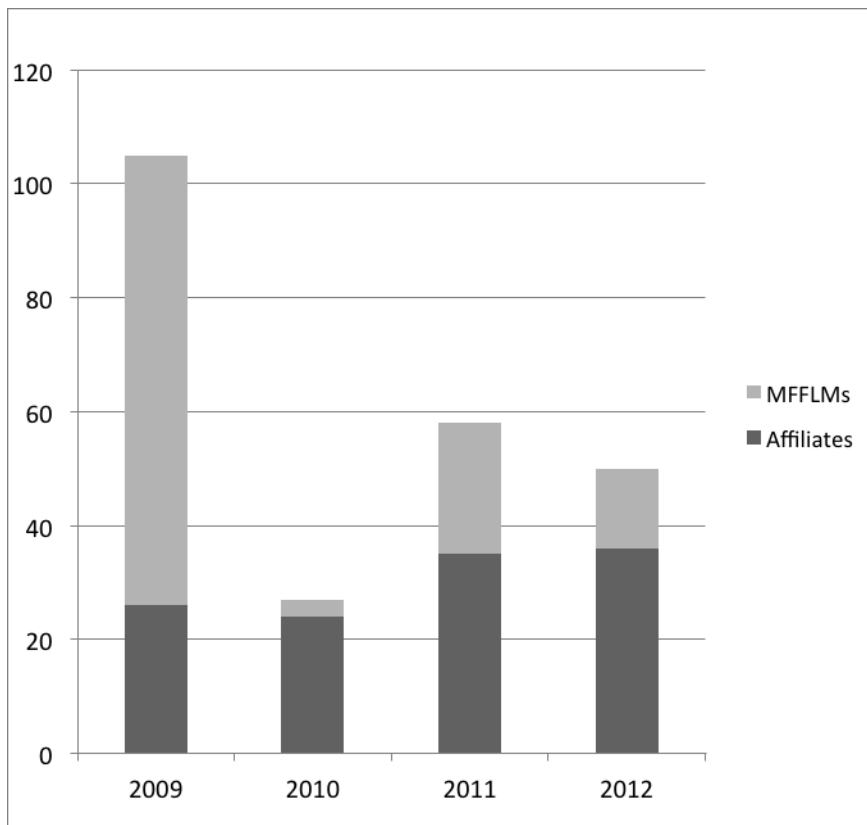
Forensic Pathologists are the second most numerous group, followed by MLAs.

Most of our membership is in the UK, with Australia second and the Republic of Ireland third.

As predicted in my report last year, the balance between joining Affiliates and joining Members (i.e. MFFLMs) is strongly in favour of Affiliates.

Joining Membership 2009 – 2012:

	<i>Affiliates</i>	<i>MFFLMs</i>
<i>2009</i>	<i>26</i>	<i>79</i>
<i>2010</i>	<i>24</i>	<i>3</i>
<i>2011</i>	<i>35</i>	<i>23</i>
<i>2012</i>	<i>36</i>	<i>14</i>



The low number of people passing Part II of the MFFLM examination remains a matter of serious concern. Indeed, in 2013, only 4 out of 17 candidates were successful.

*The Board decided in 2012 to introduce the **LFFLM**, and the necessary amendments to the Standing Orders are placed before the 2013 AGM for a vote.*

*A **Diploma in Legal Medicine**, which does not require an amendment to the Standing Orders, will also be introduced. I will leave it to the Academic Dean to provide further details. All qualifications with the exception of the MFFLM will be open to non-doctors. An announcement of the new diploma is attached.*

Amendment to Standing Orders

The proposed amendments to the Standing Orders together with the explanatory note below have been on the FFLM website for the last 3 months.

Those of you who attended the AGM in Edinburgh last year will have heard me describe the dramatic demographic changes taking place in the FFLM and in the wider provision of forensic medical services. It is vital that the FFLM adapts to enable it to continue to grow as a vibrant and successful organisation.

I attach draft amendments to the Standing Orders which have been recommended by the Board. Members of the Academic Committee and Fellowship Committee have also had an opportunity to comment on the proposed changes.

A large number of changes are proposed, and the most important ones explained below.

(1) New categories of membership.

***Licentiates** will be those who pass the LFFLM exams. They will be entitled to the **LFFLM** post nominal and they will have full FFLM voting rights.*

The number of candidates passing the MFFLM examinations is not sufficient to replace the number of Members and Fellows retiring from the FFLM. It would be wrong to lower the standard of MFFLM so that it has a lower status than MRCP, for example. However, a large number of FMEs practice part-time, some doing only two sessions per week in forensic medicine, and understandably they do not have the time or resources to justify the amount of study required for MFFLM. The LFFLM will be more affordable. It will also be more accessible in that it will be open to doctors, nurses and paramedics. The LFFLM qualification will be pitched at the minimum acceptable standard for the provision of forensic clinical services by an unsupervised practitioner.

The admission to Membership via equivalent qualification is extended (from coroners, forensic pathologists and forensic psychiatrists) to forensic odontologists. Forensic odontologists already have an entitlement to join as Affiliates.

Admission of Dento-legal Advisers to MFFLM via equivalent qualification and by examination is again under discussion, but no firm proposals are being put forward at this stage.

*There is a new category of **Associate**. This would be a category to hold in reserve as the FFLM develops. For example, we may in time choose to have Diplomates as Associates (i.e. those with DFCASA, DipFHID, DGFm or DLM, but working outside the usual jobs required by the Standing Orders for Affiliate membership), or alternatively those who are currently Affiliates but who do not wish to receive the Journal. It does not matter at this stage what the criteria for admission of Associates might be, but having this category would enable us to have the FFLM on-line application software re-written now, and avoid the need for yet another expensive upgrade if and when we do need a new category of membership. It would be a category for the Board to determine as the operational needs of the FFLM dictate.*

*The category **Student Affiliate Member** I hope speaks for itself. This new category would enable us to set a lower subscription level for students.*

*We propose two further new categories called **Nurse Affiliate Member** and **Paramedic Affiliate Member**. We would need these two categories distinct from the existing category of Affiliates so we could offer nurses & paramedics a lower and fairer subscription rate to reflect their lower earning power.*

I suspect scientific officers, managers, orthodontists and lawyers can afford the existing Affiliate subscription rate, and that in turn means we should probably not have a separate "Medical Affiliate" member category, but instead retain the existing overarching category of plain "Affiliate".

(2) Voting rights

The amendments provide for all Nurse & Paramedic Licentiates to have the right to vote one Nurse or Paramedic Licentiate onto the Board.

Giving Nurse & Paramedic Licentiates one reserved seat on the Board will give nurses & paramedics with Licentiateship two votes: one to vote a Nurse or Paramedic Licentiate onto the Board, and one to vote (medically qualified) Members and Fellows onto the Board. It is not a perfect solution. It will give nurses and paramedics a minor degree of preferential treatment, but without a vote for a reserved seat on the Board, they may feel marginalised as distinct groups. The alternative is to permanently co-opt someone onto the Board, but I have little doubt nurses & paramedics would find a co-opted representative unsatisfactory in the long term.

(3) Fellowship Committee & Senior Officers

There are other proposed amendments such as the chairing of the Fellowship Committee - and changing the name "Executive Committee" to "the Senior Officers" to reflect the reality of how the FFLM is run. I hope these proposals speak for themselves.

(4) Electronic ballot forms

An amendment allows the FFLM to send out ballot papers electronically, to save FFLM costs, although the proposal is that voters will have to print them off and post them to the FFLM office by ordinary mail.

(5) Election of Vice-Presidents

The amendment allows for each individual member to vote for one Vice-President only, even if the nature of their work is such that they properly belong to more than one class (i.e. either [i] forensic practitioners, [ii] medico-legal advisers or [iii] medically qualified coroners).

(6) Appointment of lay members of the Board

A new paragraph 4.7.1 clarifies the mechanism by which lay members are appointed to the Board.

Staff

Clare Pillinger as Faculty Manager, Sarah Llewellyn as Information and Learning Coordinator, Anna Dare as locum Accounts and Subscriptions Administrator (covering for Toni Nichols on maternity leave), and Patricia Gilbert provided an excellent service in challenging circumstances.

Website

This continues to be accessible at <http://fflm.ac.uk> and has further evolved under the supervision of the IT Steering Group. The committee consists of:

Dr George Fernie (President)

Dr Peter Schütte (Registrar)

Ms Clare Pillinger (Faculty Manager)

Ms Sarah Llewellyn (I & L Coordinator)

Mr Mark Eagling (Webmaster)

I remind members that electronic committee papers are the preferred medium. Members will continue to be aware of the use of electronic 'mail shots' from the Faculty on a variety of subjects of interest to them.

Journal

The Journal of Forensic and Legal Medicine goes from strength to strength as our flagship publication and there are an increasing number of articles relating to legal issues, reflecting the breadth of our membership. The Editor will provide additional detail in his report.

David Jenkins Chair in Forensic and Legal Medicine

Prof Miranda Horvath, an eminent academic and forensic psychologist at Middlesex University, is this year's incumbent.

His Honour Judge Peter Thornton QC, the Chief Coroner, has graciously accepted the Chair for 2013 – 2014.

W G Johnston & David Jenkins Memorial Funds

Dr A Irvine & Professor A Busuttill continue to administer these Funds reporting to the Treasurer. Dr Raine Roberts has retired after many years of sterling service and a replacement is being sought.

Faculty Consultations 2012-2013

- *Implementing the coroner reforms in Part 1 of the Coroners and Justice Act 2009
Publication Date: 12 April 2013*
- *Department of Health: Responsible officers in the new health architecture
Publication Date: 4 January 2013*
- *Department for Transport: Enforcement Procedures against Drink Drivers and Other Offenders
Publication Date: 1 January 2013*

- *Legislative Changes to Enable Registered Healthcare Professionals to Assess Suspected Drug Drivers*
Publication Date: 6 November 2012
- *GMC: A new model for evaluating equivalence*
Publication date: 19 June 2012
- *Good Medical Practice: A Draft for Consultation*
Publication date: 19 June 2012

Conclusion

It has been another successful year for the FFLM. We have made excellent progress in a number of areas. Big changes will be required to ensure our continuing success. I remain supremely confident in the future of the FFLM.

*Dr Peter Schütte FRCP FFLM
Registrar
1 May 2013*

The report looks first at membership trends, which is particularly relevant in light of the proposed changes to the standing orders. A landmark event was noted – that of Dr Peter Green and Dr Jason Payne-James entry into the specialist register.

Membership numbers have decreased since 2011 as predicted and action must be taken to reverse the trend. The relative number of constituents have remained static in terms of type and country, and new Members have been nominal since the conclusion of the grandparent clause (foundation membership). PS reported that no candidate passed the General Forensic Medicine examination this year which was disappointing.

Dr Schütte went on to explain the entry points for Membership post-grandparent clause; currently forensic pathologists and forensic psychiatrists can join by way of equivalent qualification whilst examination remains the route for forensic physicians and medico-legal advisers. There is a concern that we are not attracting enough new members each year to survive as a faculty.

In response to these unsettling trends, the Board proposes the introduction of a Licentiate level of membership, to be pitched at doctors, and nurses and paramedics working in custody – this proposal forms the basis of the proposed amendments to the Standing Orders. A two-thirds majority of the AGM is required for RCP Council to consider any amendment to the Standing Orders.

FFLM will also introduce a Diploma of Legal Medicine which does not require amendments to the Standing order so was not discussed (details at <http://fflm.ac.uk/newsstory/2000220>).

The following questions/comments were raised.

Dr Eddie Josse: Why in the Registrar's report is there no mention of the Faculty's failure to produce FFLM bow ties? Dr Josse was then presented with a very special FFLM bow tie. With thanks to Dr Peter Green.

Professor Paul Marks: Chris Dorries has advised that medical coroners will cease to exist in the coming weeks. Are there any plans to admit the new type of coroners as FFLM Members?

PS responded that currently, the new type of coroner would be eligible to affiliate; to make changes to allow Membership would be a great effort, would need to go via RCP council, and PS is not confident that Council would agree to it.

Dr Graeme Walker: I am new to FFLM and am considering working toward Membership. It is concerning that no one passed the GFM examination – are there any further comments as to why this happened this year, in relation to the curriculum, standard setting, or processes?

VE responded that it is a matter that has been raised at the levels of Exam Board, Academic Committee and FFLM Board, and by an external examiner. A thorough review has ascertained that this year's exam is robust and not set at a different level to previous exams. VE noted that as a small faculty, the number of candidates is small and it's not possible to compare membership to other exams that have huge numbers going through. VE also highlighted that this concerns only the GFM exam – candidates have been successful at SOM and MLA examinations.

FFLM is not aware of any factor in producing the examination which could have contributed to this result. The overwhelming opinion of the examiners is that in this particular case, candidates were not properly prepared for the examination. Following this, the Board has decided to offer a training course to candidates to address what we perceive to be a big training gap. In the past, training courses were available such as Fagin, training in Lancs and the Seal Group in the south, but it's not been picked up. SOM and MLA candidates have their own in-house training in place, but outsource providers are not delivering adequate training to their doctors.

Dr David McLay: Did failed candidates give feedback from their point of view?

VE advised that we have had no feedback on the exam itself; there has been some correspondence but this has focused on there just being "something" wrong with it due to the fail rate; we'd likely be having the same conversation if all 10 candidates had passed. VE emphasized that just doing the work regularly is not enough to pass – Membership is not an entry-level exam.

Dr Michael Wilks asked about the new medical examiner service under death certification changes and discussed the planned online learning. When MEs are finally appointed they will have a clearly forensic role and should be attracted to the planned Licentiate level of membership. PS agreed and hoped that they will see FFLM as their natural home. They are already able to join as affiliates; we will need to watch developments before taking steps toward setting an exam.

Dr Meng Aw-Yong noted the decreasing number of forensic physicians and asked whether FFLM have surveyed to find out why they have not joined FFLM or sat the exam. PS felt that there are practical difficulties here – those most wanted to would be least likely to respond. PS suggested discussing this at the next Board meeting.

Dr Jenny Holmes: There is a lack of understanding within forces – we need to get the knowledge out there to outsource providers that membership should be a requirement. Bernadette Butler added that the idea would be supported if contracts include that X% of

staff should hold membership. There is a requirement of this nature for any other specialty; it's also a way of encouraging people to take the exam with a view to driving up standards.

VE has been asked by NHS commissioners (not in a FFLM capacity) to review a contract template; they have agreed to add quality standards. VE has asked formally for the contract to be reviewed by FFLM as part of the consultation process. It has gone out to constabularies for consultation, but not yet wider. VE will be pressing this issue and insisting that it comes to FFLM as soon as possible – this is an opportunity to insert some minimum standards.

Dr Josse asked whether it would help if the specialty was recognized as such. VE reminded him that FFLM has been working tirelessly since its inception toward specialty status. She noted that Drs Green and Payne-James' entry onto the specialty register is a start, but IW's work on credentialing with the GMC will hopefully make it a reality.

Dr Peter Okey: looking at the current state of forensic medicine, many do not want to invest in exams; more needs to be done to make the specialty attractive. He suggested looking at what the Royal College of Psychiatrists has done in recent years, engaging medical students and the general public.

In terms of membership there is little involvement with outsource providers – FFLM would work more closely but they are not interested. To work as a forensic physician one must only satisfy the medical director – there's no interest in forensic qualifications.

Dr Peter Green: There is a need for FFLM to stamp its feet. Shortly after FFLM was founded, the Home Secretary stated that FFLM is the approved standard-setting organisation for custodial healthcare. The challenge is that we need to ensure that is asserted; standards in commissioning documents should be insisted upon. PG proposed that we be more assertive and noted that working in a teaching hospital he sees many who are interested in the field.

Dr Catherine White: There is work going on; CW had attended two meetings just this week with the Home Office and Department of Health about sexual offences and the need for quality standards to be incorporated, about which there is interest. There is also work going on at the BMA where a proposal has been accepted for students to have training in forensic medicine.

Dr Tony Knight: Revalidation and appraisal may help. Fed up with the training situation; money is an issue as much as anything else – if ten people fail to turn up to training, eventually the company will say it's a waste. There's a need to give a kick for people to engage rather than encourage. A minimum of affiliate should be required and people should be encouraged to apply for membership as soon as possible – a positive push to encourage staff to progress. PS agreed and said that it's hoped that LFFLM will be seen by commissioning groups as a minimum requirement for custody doctors working unsupervised. If this is achieved then it would guarantee FFLM's long-term survival, so it's important that amendments are passed at this meeting.

Dr Nick Swift: members get paid the same as those without membership in many cases, so there needs to be an incentive to achieve membership. FFLM has a responsibility to tell forces to pay those holding membership more, reflecting expertise, training etc. This doesn't happen currently because outsource companies are not interested and say it's unaffordable; FFLM could represent membership in this way. PS responded that the problem here is that

FFLM is not a trade union and cannot therefore be involved in terms and conditions of service negotiations. However, many senior officers are also involved in the BMA which is the relevant body to take this forward. PS noted that he was paid more to hold the DMJ.

Tony McCullagh: asked whether LFFLM would be for custody nurses and felt that it might raise a problem as the introduction of custody nurses has been an unhappy process and that there will be conflict in future. He felt that standards are wanting but was not sure how they can be imposed. PS advised that as matters stand we have no influence but hopefully LFFLM will mean that FFLM will be involved at entry level. JVE added that it's about the standards being the same for both doctors and nurses – it doesn't matter where you come from, the standards should be the same for anyone working unsupervised – minimum competencies should be met.

Maureen McCullagh was involved in writing the DFCASA for doctors and nurses and feels it is the right standard. Nurses have already passed DFCASA.

7. Treasurer's Report

The year 2012 has been our fourth full year of accounts since the Faculty's independent charitable status was confirmed by the Charity Commission on 11th June 2007.

We sustained a loss of £11,646 from all our activities of which £10,312 was as we expected incurred on the restricted funds. However, a net gain on investments of £26,570 reversed this loss to give a net positive movement in funds of £14,924.

Overall total incoming resources was marginally lower than 2011, decreasing from £440,112 to £413,435.

Subscription income increased slightly from £232,335 to £238,590 in 2012 reflecting the increase in membership rates but also a fall in membership numbers. Membership costs increased almost £35,000 partly in respect of one off charges incurred following the relocation of office but also for staff recruitment costs to cover maternity leave. However, approximately £20,000 of these costs is recurring covering higher accommodation and related depreciation charges.

Conference income increased from £19,820 in 2011 to £33,810 with part of this offset by a smaller increase in expenditure. Overall conference income contributed a net surplus of £8,265 towards the overall surplus for the year.

A fall in the educational income is a result of the accounting requirement to recognise grant income in the previous year in accordance with UK GAAP. This has resulted in recognised income from educational activities decreasing to £118,161 from £166,279, with expenditure falling in later years covered by the earlier grant income. Nevertheless, this year's income has still exceeded our income forecasts by just over £47,000 whilst expenditure was equally ahead of budgets but by a lower figure of £38,000 to provide an overall small contribution of just over £5,000.

Royalty income continues to provide a welcome contribution to our bottom line results of just over £11,000 after taking into account the fixed amortisation costs of £4,524.

All other income and costs are in line with the previous year's figures and overall within our expectations for the year.

There was capital expenditure incurred of £9,297 related to the office relocation and after depreciation charges of £13,499 the net book value of tangible fixed assets has decreased from £24,766 to £20,564. There was no additional expenditure in the year in respect of intangible fixed assets.

The market value of investments increased at year-end to £370,057 from £353,499 whilst cash held for investments also increased from £8,333 to £21,922 at the year-end.

Total net assets at the end of 2012 increased to £466,789 from £451,865.

The Faculty is exposed to the difficult economic climate that prevails, and operating costs continue to rise. As stated in the last annual report, it is necessary that the Faculty's income keeps pace with anticipated expenditure, and a CPI inflationary increase of 2.7% will be applied to all fees in all classes of membership. The table of fees payable in 2013 is produced below.

	2012	2013
Honorary Fellows	-	-
UK Fellows	£466.00	£479.00
Retired Fellows	£220.00	£226.00
Overseas Fellows	£233.00	£239.50
UK Members	£466.00	£479.00
Retired Members	£220.00	£226.00
Overseas Members	£233.00	£239.50
UK Affiliates	£213.00	£219.00
Overseas Affiliates	£106.50	£109.50
Retired Fellows/Members Relinquished LTP	£100.00	£103.00

Comparable rates include:

FRCP £510.00

FRCGP £497.00

FFOM £572.00

FRCPath £420.00

These are testing times for the Faculty, with increasing expenditure being required to deliver our membership, charitable and education activities. But it is clear that increasing costs will need to be met by increasing subscription and other revenue streams. The Board is committed to meeting these challenges in 2013.

Dr Mike Devlin

Treasurer

22 April 2013

The AGM approved the subscription rates for the year 1 July 2013 – 30 June 2014.

8. Report from the Academic Dean

The Academic Committee (AC) has met on four occasions over the past year.

The composition of the Committee is given in Appendix A and my thanks go to the members for their work over the past year.

Two Assistants to the Academic Dean, Dr Shirjeel Tahir and Dr Frank Voeten have been appointed to help with the ever increasing work load generated through the Academic Committee.

The Academic Dean is also responsible for coordinating Faculty representation on external committees (see Appendix B) and I am very grateful to all those members who give their time and service on the various committees and provide feedback.

Special thanks must go to Dr Sheila Paul who has represented the Faculty on the RCPCH Standing Committee for Child Protection for many years. Her input was I know very much valued. She will be succeeded by Dr Linda Teebay.

I will be demitting office as Academic Dean when I take over as President at the AGM. I would like to put on record my heartfelt thanks to the office staff without whom my task would be impossible. In particular Sarah Llewellyn has worked over and above the call of duty to support the Academic Dean and the Academic Committee. I know I leave the post in the good and capable hands of my successor, Professor Ian Wall.

The Membership Examination

The examination is a priority for the Faculty and therefore for the AC and Chief Examiner's (CE) Committee. Huge thanks are due to Dr Andy Dott, Chief Examiner, ably assisted by his Deputies, the Leads, and the Examiners. Thanks are also due to Angela Hall and Keira and the team from St George's.

Following the retirement of Professor Sean Hilton as External Examiner for MFFLM, Mr Kevin Hayes, Consultant Obstetrician and Gynaecologist, has become the External Examiner.

This was the last examination diet to be led by Dr Dott who will shortly retire from his post as Chief Examiner. Dr Helena Thornton has been appointed as his successor. Dr Dott has again overseen the delivery of a successful Membership Examination.

The Chief Examiner's Committee has met formally on several occasions over the last year, in addition to a number of teleconferences and much email traffic.

Part I of the Membership examination was held in October 2012 at the Royal College of Physicians and Part II in April 2013 at St George's, London. There were 26 candidates for Part I: 23 actually took the exam, of whom 16 passed and 9 failed. There were 17 candidates for part II: 10 for general forensic medicine (GFM) of whom none passed; six for sexual offences medicine (SOM), three of whom passed; and one medico-legal adviser who also passed.

Applications are to be invited for new candidates to train as examiners.

Kevin Hayes has been involved in overseeing the examination as External Examiner. He has offered to assist with training in setting and marking written exam papers next year.

The OSCEs and OSPes have taken a great deal of work and all of the examiners continue to gain experience in writing, trialling, revising and rehearsing these with actors.

Angela Hall and the team at St George's, including the actors, have as ever been invaluable in ensuring the examinations, in particular the OSCEs and OSPEs, ran without a hitch. Special thanks are due to Ms Hall for her enduring patience in guiding us through the intellectual process, ensuring that the examination content was appropriate and that nothing was forgotten on the day, and, to Keira Anderson, the Assistant Registrar.

All examiners have given up a large amount of time and effort to making the examination a success, especially so in the run up to Part II of the examination.

Sarah Llewellyn has been helpful, efficient and hardworking in supporting the examination and over the OSCE/OSPEs, attending on both days along with Patricia Gilbert (written paper - invigilator) and Anna Dare (OSCEs).

The challenge for the new academic year is to continue to build our bank of questions and stations for each part of the examination and to consolidate the skills of examiners for the Membership examination in doing so. It is still hoped change to the new method of global marking for the OSPE/OSCEs and this will require further training to accommodate this.

New examinations

Plans are going ahead to establish the new examinations of Diploma in Legal Medicine and Diploma in General Forensic Medicine and it is hoped have the first diet in 2014.

The President has written to the Master of the Worshipful Society of Apothecaries to indicate our wish to take over the running of the Diploma of Forensic and Clinical Aspects of Sexual Assault as part of our development of our examination portfolio.

The Diploma in Forensic Human Identification [DipFHID]

Professor Peter Vanezis has worked with the Chief Examiner as Deputy Chief Examiner for this examination to ensure this examination is run in accordance with Faculty guidelines. In the October 2012 diet there were 7 candidates, all of whom passed the examination and are due to submit their dissertations by 3 June 2013.

The examiners have also been asked to look at the format of the examination and consider how it might be updated in line with the other Faculty examinations. As yet, little progress has been made.

The next examination will be held in October 2013.

Curriculum Subcommittee

After discussions with the incoming Academic Dean, it has been decided by the Board that this work will be undertaken as soon as possible. The Subcommittee will be chaired by the President.

Credentialing

Following the completion of the Credentialing Pilot ably led by Professor Ian Wall, the latter is now to represent the Faculty on a GMC Working Group set up to look at how this would work across the profession in reality, the GMC having accepted in principle that this is the way forward.

The Academic Committee is delighted to see that Dr Peter Green and Dr Jason Payne-James have both been recognized on the Specialty Register via the CESR route. The GMC has accepted that this route is open to other Fellows of the Faculty and some senior members of the Faculty have undergone training by the GMC in the process of CESR approval.

Conference Subcommittee

The conference subcommittee has been ably chaired by Dr Will Anderson. The subcommittee has met regularly by teleconference over the last year. They are to be congratulated on their organisation of a successful conference in Leeds this year.

Next year's Annual Conference will be held on 16 & 17 May 2014 at The Queen Hotel in Chester.

If you have any topics for Faculty Conference, please do let the Academic Dean or Chair of the Conference Subcommittee know.

Training and Education Subcommittee

The joint initial training course with the College of Policing (previously the NPIA) has been held once in the past academic year and further courses are planned for 2013/14.

One very successful development training course (DTC) has been held in London in the last academic year, ably organized by Dr Will Anderson and his team.

Development training for Medico-legal Advisors has been organized by Dr Angelique Mastihi and will run in September 2013 in Manchester.

Dr Peter Green ran a very successful training course to contribute to the portfolio for Level 3 Safeguarding in October 2012. Such training has now become a requirement for forensic physicians and Dr Green is organising something similar this October.

A number of training courses addressing training needs to underpin basic competencies in clinical forensic medicine, particularly general forensic medicine, and open to all healthcare professionals working in the forensic setting, have been run in the last year. Topics have included Mental Health, Road Traffic Medicine, Mental Health, and the documentation of injuries. Further courses are planned over 2013/4.

The Immediate Life Support Course to address issues arising in a forensic setting continues to run.

The committee continues to review and revise FFLM documents as required and welcomes feedback. All documents – guidelines, recommendations, pro forma, fact sheets and policy statements are available on the website with a few that can be accessed in the Members' only area (open to Fellows, Members and Affiliates).

Over the past year, many documents have been reviewed and revised as appropriate and published on the website. We have developed Quality Standards in both General Forensic Medicine and Sexual Offences Medicine with our colleagues in nursing and the paramedics, and these are due to be published soon.

Forensic Science Subcommittee (FSSC)

The Subcommittee has met on two occasions in the last year. Dr Bernadette Butler as Chair has ably steered the Subcommittee through an ever increasing workload. Dr Tom O'Gorman has resigned as Deputy Chair of the FSSC, having gone to work in Australia. He is to be succeeded by Dr George Fernie.

In July 2012 and January 2013, the updated Recommendations for the Collection of Specimens from Complainants and Suspects were put on the website and these will be reviewed again at the next meeting of the FSSC this month.

Research Subcommittee

The committee has met by teleconference in the last academic year with Professor Paul Marks as Chair.

Sexual Offences Forum

This is led by Dr Sandy Fielding and continues to attract lively debate and an opportunity for information sharing between clinical directors and lead forensic physicians, by email and on their secure area of the website forum.

The Forum has met face-to-face on two occasions in the last academic year. The Forum now has its own secure area on the Faculty website.

Collaboration with Department for Transport to set up and run training courses for trainers in response to changes in Road Traffic Legislation

The Academic Dean and Professor Ian Wall have attended a meeting at the DfT in which this was welcomed as a proposal and approved in principle. It is hoped that the Faculty will run courses for Trainers so that they can deliver a Faculty course locally to those HCPs who will be doing assessments under s4 Road Traffic Act (driving under the influence of drugs). It is expected that once rolled out, only HCPs who have successfully undertaken the training course will be able to undertake such assessments.

Children and Young People in Secure Settings Standards (CYPSS)

The Academic Dean has represented the Faculty on the Project Board for CYPSS at RCPCH. The initial work has now been completed and the Standards are to be launched on 10 June 2013. The Standards are jointly badged by RCPCH (lead college), RCPsych, RCGP, Faculty of Public Health and FFLM.

*Dr J Victoria Evans
Academic Dean*

9. Editor's Report – Journal of Forensic & Legal Medicine

The full report can be downloaded at <http://fflm.ac.uk/faculty/agmanewsletter/>

10. Proposal to amend Standing Orders

All of the proposed amendments were voted on as a set and were passed by the AGM, in excess of the two-thirds required by the Standing Orders.

11. Award of David Jenkins Chair in Forensic & Legal Medicine

The David Jenkins Chair was awarded to His Honour Judge Peter Thornton, QC.

12. Any Other Business

None.

13. Date and time of next meeting

The 8th Annual General Meeting will be held in Chester on Friday 16 May 2014.