

Dear BSOA Members,

When I originally penned this message, we were all busy in our hospitals gearing up for the unfolding COVID-19 outbreak. Needless to say, as a Society, we prioritised the welfare and safety of our members as well as maintaining our education and morale. To that effect BSOA closely followed the government guidelines and the lockdown message of "Stay Home, protect the NHS and save lives".

When we all long for business as usual, I will nostalgically revert back to my original message:

This is in fact my last message after four years as President of the BSOA, the most rewarding role of my career. It has been such an honour and a privilege to serve the Society for the last four years. The journey has been incredibly educational and at times challenging, but mostly enjoyable! I would like to pass on my heartfelt congratulations to EJ da Silva (President Elect) who will take on the mantle from now on and steer the ship forward in these turbulent times.

EJ has been incredibly supportive through my four years as President, not least as Honorary Treasurer, and I am certain that he will be a fantastic successor. I would also like to thank Jan and Anwar, the Honorary Secretaries during my time, and all of the Executive Committee Members, and wish all the best with future progression of the BSOA.

During the last four years we have held successful national and international scientific meetings and have forged many friendships and built many bridges.

We have awarded President's Medals to Drs Mike Hetreed, Tom Neal, Professors Richard Griffiths and Mike Grocott for their outstanding contributions to orthopaedic anaesthesia.

As a funding partner of the National Institute of Academic Anaesthesia, the BSOA has offered research grants for the advancement of orthopaedic anaesthesia. As NIAA approaches two decades, I have collated a "testimonial "on behalf of the funding partner societies to encompass the contributions and role within the NIAA and reflections of our journey to date, the visons and future opportunities for our scientific societies within NIAA.

Over the past four years, we have continued to attract significant industry support, for which we are most grateful, enabling us to maintain first class meeting programmes and very acceptable membership and registration fees.

In 2019, the BSOA took the important stride of becoming a Charitable Incorporated Organisation and we welcome and thank the Board of Trustees: Dr Ramesh Vijayaraghavan (Chair), Dr Zehrin Nassa (Co-Chair), Dr Rita Gadelrab, Dr Geraldine Edge and Dr Mike Hetreed and wish you well for the future. I have no doubt you will help steer the BSOA ship through any choppy waters ahead.

As part of our charitable ethos, BSOA are proud to announce that we have pledged £2,500 towards equipment and a further £1,000 annually for ongoing medical supplies for The Holy Spirit Hospital in Sierra Leone. We will endeavour to offer financial and educational support to other Middle and Lower Income Countries.

Stay safe and well,

Bernadete Ratnagako

Dr Bernadette Ratnayake

Immediate Past President, BSOA

Dear BSOA Members,

When my predecessor, Dr Ratnayake, last wrote to you, Parliament was suspended for 5 weeks and politico-medical concentration was around Brexit. The Pension debacle was and continues to cause a collective headache. Limited Liability Partnerships was the talk of the day.

The encompassing damage that Covid-19 left in its wake has been both predictable and unpredictable to say the least. A new dawn looms as we awake from our 'COVID-peppered bunkered' lives. That dawn brings with it new fears and challenges. The word 'tolerance' will have yet another dimension added to it.

Our manner of reaction, collective approach, acceptance of responsibility and planning (or lack of it) will come to rest in the manifestation of future generations' behaviours. Now more than ever, we have to use the opportunity to refashion the square wheels in our practice and processes. Only then can we truly move forward. Our diverse approaches of instant personal gratification versus actions for the common good, need to further examine which angle of that pendulum swing we are likely to come to rest at. The 'common good' becomes more important and grows in meaning but may have ended for the general public with the cessation of 'clap for NHS heroes'.

With that in mind, the BSOA will commence holding FREE Webinars based on the Annual and Spring Scientific Meeting sessions. We look to hosting those

webinars for 1-2 hour periods which will be recorded and available on the members section of our website. Depending on duration, CEPD points will be applied for and allocated.

We aim to commence those webinars in September 2020.

Our Executive Board with guidance from the Board of Trustees have made the difficult decision to cancel our November 2020 Annual Scientific Meeting. We will be holding a series of webinars in the next few months to compensate for our absence of an ASM. These will be free for members but will attract a small token fee to cover processing and certification for non-members.

We intend to also hold a registrar competition webinar session later in the year, to afford our trainees the opportunity that has been denied them through the cancellations of many meetings nationally.

Hope to see you soon.

Very best wishes

DREDASIVA

Dr EJ da Silva President of the BSOA



P.s. detailed information about the webinars will be released this week.

Trainee Article

COVID Experiences

Dr Emma Pack, BSOA Trainee Rep

I have been working at Barnet General Hospital, a District General Hospital in North London. During COVID we stopped all elective surgery, low risk elective caesarean sections were transferred to a private hospital and all of our trauma and paediatric patients were redirected to dedicated centres. This means that for nearly three months my main focus has been ITU.

Our rotas were quickly changed so that we were working either three long days or nights, followed by three days off, followed by three standby days where we could be called in to work either a day or a night shift, sometimes at short notice. The shifts have been busy and all of these night to day changes, sometimes for single standby night shifts, have been exhausting. All annual and study leave was cancelled. Whilst the rota was designed to prepare for increased levels of sick leave, we actually ended up with minimal sickness among trainees. Instead the standby days were used to enlarge the size of the teams due to the increased workload. One anaesthetic consultant became resident on call and during the daytime consultants led line and intubation teams. Even orthopaedic surgeons and paediatricians were involved in our proning teams.

Our normal ITU capacity was 23 beds. At peak COVID, this was expanded to 39 beds using both theatre recovery and an adjacent ward, and anaesthetic machines as ventilators. 'Recovery ITU' especially felt like working in a field hospital, it was hot and



cramped, available equipment was limited and most ITU nurses struggled with the anaesthetic machines. Staffing this was difficult and at our worst there was 1 ITU nurse for every 6 patients.

Initially we had tried to prepare; we ran simulation sessions (where often nothing was agreed as there was so much initial confusion) and my work WhatsApp group has never been so busy with everyone sharing protocols and information. We still weren't ready. Compared to other hospitals in London our number of COVID patients increased early and quickly. We became overwhelmed and ended up needing to transfer several patients out to other units. Handover meetings started to include a list of equipment shortages and issues. At one point even the mortuary was full.

The last few months have been both physically and emotionally draining. However, there has been a real camaraderie among trainees. With the changed rota I have worked alongside the same trainees for nearly all shifts. Clinically, we have learnt each other's strengths and have streamlined our working practices but more importantly we have become each other's work support system; I would have struggled without this.

As COVID admissions are decreasing, the post mortem of our COVID response has now started so hopefully if another wave comes, we will be more prepared next time!

MEMBER BENEFITS

- ✓ Reduced registration fees for BSOA meetings
- ✓ Access to free webinars
- ✓ BSOA e-newsletters and the opportunity to publish articles in future issues
- ✓ Participation and voting rights at upcoming Executive Committee elections as well as eligibility to nominate and be nominated to the Executive Committee
- ✓ Participation and voting rights at the Annual General Meeting
- ✓ Access to the members-only area on our website including: Documents Library to search documents and Member Forum to join discussions and/or search topics

Questions? Comments? Suggestions? Email us anytime: info@bsoa.org.uk