Institute of Naval Medicine: Seconded Medical and Dental Officers’ Symposium

R Mellor

From 26-28 June 2013, the Institute of Naval Medicine once again welcomed specialty trainees of all disciplines to its annual symposium. This conference, recently extended to cover three days, aims to bring together all Royal Naval Specialty trainees both in Primary and Secondary care who otherwise may work remotely from the military family. The aim is to provide a platform not only for personnel to update their core RN knowledge but also allows face to face updates relevant to specialty training, the Royal Naval Medical Service (RNMS) and the wider Royal Navy.

The first day of the symposium comprised core military briefs, with both Security and Substance Misuse regular topics; there was light relief for some members of the contingent over thirty, who discovered that the substance misuse brief is now only required every 3 years. News from Cdr Chris New on the Diversity and Equality front is that this is now known across the Naval Service as Diversity and Inclusion, with CPOMA Barbour being INM’s nominated point of contact for this.

The Royal Navy Fitness Test once again demonstrated the impressive ability of the cadre to maintain the required fitness levels, with Surg Lt Cdr Tom Spreadborough making the finish line in an impressive 8mins 18secs.

The first day rounded off with a fireside chat with MDG(N), Surgeon Rear Admiral McArthur, who outlined many of the challenges faced with ensuring the RNMS is prepared for the future. There was discussion of the projected greater involvement of Defence Medical Services (DMS) personnel within the UK’s Trauma Centres, and the increased role of reservists to ensure we are fully equipped to meet future challenges. This was followed by the RNMS Cocktail Party held at HMS NELSON, with a significant presence of specialty trainees at the event.

There was an update on appraisal & revalidation where several key points were outlined; these included confirmation that an Annual Review of Competency Progression (ARCP) acted as an annual appraisal for trainees, and the same level of evidence was expected as for post-Certificate of Completion of Training (CCT) appraisal. For those approaching CCT the revalidation cycle ‘clock’ starts following completion of specialist training. An important point was raised regarding the responsible officer for DMS trainees: the Defence Dean shoulders this role rather than the Training Area Dean. This was echoed by Surg Capt Evershed who also highlighted the dichotomy between achievement of training goals within the constraints on time away from a training setting set by the GMC and maintaining current militarily.

Surg Cdre Buxton provided an insight into the placement process for secondary care doctors following completion of training, with the process commencing two years prior to an Officer’s CCT date. The current stance is to place new consultants within preferred partner NHS trusts, especially those NHS trusts forming part of the National Trauma Network ensuring relevant skills are maintained for the future.

The changing face of operations post 2014 was the focus of a brief from Permanent Joint Headquarters; with the end of combat operations and NATO’s role in Afghanistan there is life after HERRICK!

This tied in with how the future manning of the DMS was to be managed, with the advent of DMS 20 there is a vision for the Reserve Forces to be expanded to make up a greater proportion of the Medical Services across all three services. The topic of change continued with an outline of the Future Armed Forces Pension scheme due to arrive in 2015; although the pension scheme is changing, the underlying message was one of continuing overall benefit.

The second day also allowed many of those attending to meet their Specialty Consultant Advisors. Having heard how important OJARs are for those in training this allowed many to discuss career objectives and plans face to face.

This year’s Mess Dinner was fortunate enough to have MDG(N), Surg RAdm McArthur as its guest, who built upon his Fireside Chat the previous evening finishing aptly by echoing Second Sea Lord’s recently modernised versions of the Royal Navy’s Toasts.

The final day focused on providing a forum for presentation of research and audit undertaken by the cadre. There were nine presentations in total, with Surg Lt Cdr Arthur winning this year’s prize for his presentation on ‘ACL injury in Royal Marine Basic Training: rehabilitation times and rates of completion of Commando Training.’

The symposium was concluded with an insight into currency research on Vitamin D levels and the possible correlation with stress fracture in commando recruits, with further research planned. INM proves it remains up to date.
and relevant not only in its support of specialty trainees but also to the Naval Service as a whole.

Whilst it is always a pleasure to return to INM, the symposium requires a great deal of organisation and the specialty trainees are enormously grateful to Surg Capt Howell and his team, including Lt Murray, Sgt McCaffery, Mrs Val Mondey and Mrs Kerrie Maclean, without whom this annual event would not occur. On that note, the event is an ideal platform for trainees to showcase their experiences, research and audit and is continually looking to improve upon past performance. This is only possible with the cadre’s support and ideas to enhance the annual Seconded Medical and Dental Officers Symposium would be welcomed. Should you wish to contribute to next year’s program please contact the MOIC of INM, Surg Capt Howell, on NAVYINM-MOIC@mod.uk

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Third Annual Institute of Naval Medicine (INM) Seconded Medical and Dental Officers’ Research Symposium

AM Wood, IM Wood

For the third year running (1,2), research from across the Royal Navy was presented at the Institute of Naval Medicine (INM), as part of the Seconded Medical and Dental Officers’ (SMODO) Symposium. Whilst there were several projects generated from the conflict in Afghanistan, there was also a variety of other research presented. Surg Capt Howell, Medical Officer in Charge at INM, judged that first prize should be awarded to Surg Lt Cdr Calum Arthur Image 1 and his co-authors for their presentation on Anterior Cruciate Ligament (ACL) injuries in Royal Marine Training. This study looked at the issues regarding the rehabilitation of Royal Marines who sustain ACL injuries and the likely outcome with regard to completion of training for operative and non-operative management. Second place was awarded to Surg Lt Iain Edgar with his article on the effect of the Medical Evacuation Response Team (MERT) on casualty evacuations and the use of blood products. This interesting study warrants further investigation as it may shape policy in due course.

Surg Lt Cdr Jowan Penn-Barwell presented on three occasions during the SMODO symposium. He demonstrated that he is a budding radiologist in his analysis of angles when assessing Femoral Acetabular Impingement, and in his role as a member of the editorial committee of the Journal of the Royal Naval Medical Service he talked about the advances the Journal will be making over the coming months. Thirdly, he demonstrated the improved survival of casualties over the last ten years of conflict in Afghanistan and Iraq. Surg Lt Cdr Daniel Ablett gave an interesting review of Major Kate Brown’s paper (3), looking at how the patients she analysed recovered after their major limb trauma. He questioned some of her assumptions and asserted that the Mangled Extremity Survival Score (MESS) is of limited value in military trauma.

Surg Lt Cdr Amanda Edwards described a useful technique for keeping upper limb patients comfortable