

## BRITISH HEART RHYTHM SOCIETY COUNCIL MEETING

Date: Tuesday 2<sup>nd</sup> July 2019

## **Time:** 10:30 – 12:30

Venue: Thomas Lewis Room, BCS Offices, 9 Fitzroy Square, London, W1T 5HW.

## **ATTENDEES:**

Richard Schilling (**RS**) [President], Alistair Slade (**AKBS**), Stuart Harris (**SHa**), Jason Collinson (**JC**), John Paisey (**JP**), Joseph de Bono (**JdB**), Pier Lambiase (**PL**), Martin Lowe (**ML**), Holly Daw (**HD**), Sarah Clark (**SC**), Eleri Roberts (**ER**), Shona Holding (**SH**), Ian Wright (**IW**), Nikhil Ahluwalia (**NA**), Heather Edwards (**HE**), Simon Holmes (**SH**), Francis Murgatroyd (**FM**), David Farwell (**DF**), Afzal Sohaib (**AS**), Beth Payne (**BP**)

## AGENDA

1.	Apologies for absence – VC, AH, MS, SB, TL, AS, KR, AT, SA, DT	Action Point
	Agree minutes of previous Council meeting on 24 <sup>th</sup> April 2019 <b>[RS]</b>	
	Actions arising from minutes:	
	<b>Training Update:</b> Curriculum meeting still planned for 15.07.2019 – <b>DF</b> unsure of attendance.	
	Journal Update:	
2	<b>PL</b> : Joint article with psychiatry now in in press	
2.	JdB: First regional meeting set up – may have to delay date based on funding.	
	Ongoing – to set up & find local champions as previous action point when funding has been confirmed.	
	Research Update [Pier Lambiase]	
	PL: Research meeting slot 07:30 slot Tuesday at HRC. Consider asking for annual data to report UK outcomes in a VT database but needs incentivisation. RS: is that included in audit? FM: model for risk adjustment of pacing and procedure outcomes to be positive research project-could be done through NICOR with right	

	resources ideally.	
	<ul> <li>resources ideally.</li> <li>Grants from Industry [Richard Schilling]</li> <li>MS submitted to Boston. Awating reply. MS &amp; RS to contact Graham Plant regarding industry grant outcome.</li> <li>BHRS exam Update [David Farwell]</li> <li>DF: Logbook is the least popular aspect of the exam for candidates.</li> <li>Question against keeping logbook, as this stands out from other accreditation boards. RS: Logbook has some place in terms of exposure to important parts of curriculum. Think about simplifying the logbook with supervisor countersignature.</li> <li>JP: some form of practical assessment needs to remain however need to assess the value and use of the existing logbook.</li> <li>IW: UK physiologists would look still at taking exam.</li> <li>JdB: competency assessment. JC: work station practical assessment where candidate is physically reviewed.</li> <li>JP: can the candidate demonstrate the practical elements in OSCI element, as well as logbook. Concerns raised over difficulty and time restraints for candidate</li> <li>RS: OSCI element could fit within the symbiotic training or HRC. Leave open to possibilities.</li> <li>Questions raised regarding amending the exam include DF: logbook without OSCI rigorous enough? FM: How would we differentiate from EHRA exam? JP: Need a system of accreditation fit for chosen purpose and requirements to increase footfall.</li> </ul>	Plant Complete DF: to assess and amend logbook and process. Change exam name to clinical exam. Look into potential for OSCI element to be held at meetings. RS:. Ask Tangledweb to support DF & JC to develop online way of completing via website
	rather than write new annually.	
3.	<ul> <li>BHRS Survey Update [Martin Lowe]</li> <li>ML: NICOR sticking point. NICOR level of help unsure due to their resources. Who would provide email address for survey A-A? GDPR still issue with contacting members without consent. NICOR push mark (NICOR) for contact list.</li> <li>ML: looking for individual to either take the project forward, or happy to take forward if council authorises as his last meeting.</li> </ul>	member to take on from ML as this is his last
4.	AOB [AII] <ul> <li>Opportunity for clinical representation on British clinical standards committee – no overseas travel – one meeting per</li> </ul>	

<ul> <li>annum. Documents review 4x annum - Looking for representative (SH). RS asks if SH can send information around council and they can decide who would best to represent</li> <li>Clinical Guidance for the Follow-up of CIEDs for CRM [JC]</li> <li>Document is 4 years out of date. Looking to update as a standalone document. Jan 2015 copy (was written by Sue Jones &amp; Stuart Allen). JC spoken with colleagues who are interested &amp; providing feedback from variety of centres. JC spoken with Matt Swift (Swindon) for feedback. JC will present to council. Questioned whether this required a consultation period</li> <li>RS - Good to have medical devices council members involved and shaping for Electrophysiology review. RS - review of literature &amp; consensus statement following.</li> <li>Review first before agenda for review. SH - To be mindful of all standard documents. To include remote monitoring and its role in follow up. IW: review of evidence realistic rather than completed document for 10/2019 meeting.</li> </ul>	JC to work on the document and will share
<ul> <li>RS: Standards for ablation document needed.</li> <li><u>Likely Unavailability of Internal Cardioversion Systems</u> [JdB]-</li> <li>Abbott no longer sell connecting cable. RS: is this an issue? Potentially not cost-effective. No concern raised from council.</li> </ul>	ML responsible for Standards for ablation document
<ul> <li>BCS Physiologist Council [ER]:</li> <li>Is there anything the BCS physiologist / scientist council could do for BHRS? Not for recruitment &amp; retention, more input from BCS side. Can promote relationship with BCS for physiologists if recommended.</li> <li>AER Update [AS]</li> <li>BHRS Position paper (Journal) in press.</li> </ul>	

	BCS 2020 Training Sessions [AKBS]	
	<ul> <li>AKBS: BSE training day at British Cardiac Society Meeting went down well. Enthusiastic to promote BHRS training in Manchester 2020. Aimed at trainees &amp; general Cardiologists.</li> <li>JP: ER keen to set up symbiotic training, bringing together all disciplines at BCS &amp; HRC &amp; work into BHRS training days. Morning session potential at HRC &amp; BCS? RS: satellite meeting at BCS but encourage sponsors. Symbiotic Training Days perfect way to use up space at BCS but concerned the workload may be high.</li> </ul>	
	<ul> <li>JP: might be workstations rather than presentations/lecture. Drs/Nurse/etc stations promoting different areas of relevant focus.</li> </ul>	
	<ul> <li>RS: Symbiotic Training is positive, happy to run with, but to ensure extensive management of process and messages being shared. Relaxed re. time-frame for satellite meeting with BCS.</li> </ul>	
5.	<ul> <li>FM: Different audiences? JP: Try to make BCS satellite relevant for all. If ran equivalent at HRC - attempt to promote to higher level of delegate.</li> </ul>	
	<ul> <li>NA: BSE was successful as content aligned with curriculum for trainees.</li> </ul>	
	<ul> <li>AKBS: Length of Symbiotic Training? ER: 1:1 session, could be booked in 1hr slots. Potentially have physiologist with equipment, and then run throughout the day. 3x am &amp; 3x pm.</li> <li>RS: Refuse offering of full day unless agreement with BCS reached, as we bring sponsors BCS do not. JP: currently promoting half day offering, this will continue until agreement</li> </ul>	RS to JP: satellite meeting equirements as well as Symbiotic Training
	<ul> <li>RS: More 'specialist' day session with relevant funding. IW: Physiologists would benefit from the advanced training</li> </ul>	sessions

6.	<ul> <li>NICOR Audit Update [FM &amp; ML]</li> <li>ANR - one overarching report.</li> <li>2,000 pg center reports</li> <li>Link: NICOR CRM Rates based on Locality. Ablation not adjusted for age, and social variables. Variation from yr:yr.</li> <li>Traffic light Analysis: Centres &amp; NICE guidance</li> <li>Issues with reporting and lack of data. Follow up based on NHS no. and so depends on percentage of NHS no.s reported as to re-intervention rates Worse for ablation, but will hopefully improve. Doesn't reflect complications: only procedure &amp; Patient choice.</li> <li>Planning to: bring forward by 2 Yrs. April2020 (2017/18 &amp; 2018/19 data).</li> <li>PL: Registries/ centralized database &amp; use of data form these?</li> <li>FM: time and procedure problems with change of data systems.</li> <li>PL: Is there a standardised reporting of data throughout the country? JP: Linking to commissioning and funding based on reporting percentages?</li> <li>FM: Requires physiologist ½ day/ 1-day pw, providing link with centres, and data links and analysis. HD: Concerns with physiologist pools - is there resource for such a role without reimbursement. ML: Acknowledged this would be an extremely time intensive role</li> </ul>	BHRS Physiologist member to help FM – JC to add a call to interest to the website
7.	<ul> <li>Website Update [JC]</li> <li>JC: New website launch planned for 03.07.2019. Content copied over, with new format. All members to contact via email. Allowed to contact all members (GDPR). To be issued new user details. New profile page with BHRS nos. Gocardless for new sign-ups. Existing members will stay with standing orders for present.</li> <li>Tangledweb are in process of transferring members' details.</li> <li>Fellowship page now created. At present no application process or form. Council to create form to be uploaded.</li> <li>Dynamic process in terms of roles and updates.</li> <li>JC: should ensure other individuals know process for when JC for re-election.</li> <li>Arrhythmia nurse documents will be uploaded to site.</li> <li>JC: acknowledged the ECG/EGM challenge is being maintained by a small group however struggling for content for ongoing months. NA AER to host ECG/EGM challenge on website positive in hosting journal input. Work in progress. JC needs articles for future months uploads. Should encourage members for involved and submissions – need a broader pool. Exam</li> </ul>	responsibilit y for every other month for ECG/EGM challenge. JC – to share twitter login

	<ul> <li>topics can't be submitted if used for questions.HE: &amp; NA keen to appeal to SHOs &amp; junior registrars. HE to send JC basic ECG questions – relevant for exams. HE &amp; NA happy to be involved.</li> <li>NA: Using to drive trainees to membership but need correct advertising &amp; social media. JC: Using starting point.</li> </ul>	JdB – flag which going
	<ul> <li>RS – Raised the question regarding voting for BHRS council elections via the new website. JC confirmed this is possible, need to contact Tangled Web to inform them of how we want to run it and they will do so. AS: voting process needs to be completely isolated from the candidates to avoid any potential voting influences.</li> </ul>	regarding voting online Completed -
	Secretaries Report [AKBS]	
	- Usual pattern of members	
8.	<ul> <li>Preliminary feedback from GIRFT: Trusts to recreate networks rather than competing against each other.</li> </ul>	
0.	- Nothing of note to report from EHRA.	
	- Election in progress	
	Treasurers Report [SHa]	
9.	<ul> <li>Stable on finances – but down on previous as exam moved to October. Increase expected in July as majority of subs are paid at this time. Expense in relation to website. Looking to be much the same position as previous year.</li> <li>SHa A-A have provided all copies of bank statements as</li> </ul>	
	requested. Date, time & place of next BHRS Council meeting:	
	Wednesday 9 <sup>th</sup> October: 07:00-08:30am – Executive Room 1,	
	The International Convention Centre (ICC), 8 Centenary Square, Birmingham, B1 2EA	