

# MINUTES

## BHRS Council – Tuesday 12<sup>th</sup> December 2023 @ 09:00

Held via Zoom

<b>PRESIDENT:</b>	Eleri Gregory (EG)
<b>SECRETARY:</b>	Honey Thomas (HT)
<b>TREASURER:</b>	Vivienne Ezzat (VE) (in part)
<b>DOCTOR REP:</b>	Joseph de Bono (JDB), Ross Hunter (RH),
<b>PHYSIOLOGIST REP:</b>	Phil Durkin (PD), Chloe Howard (CH), Amy Dutton (AD)
<b>NURSE REP:</b>	Bridgette Smith (BS)
<b>OTHER REPS:</b>	Stuart Allen (SA) – Accreditation Committee Chair Simon Holmes (SH) – MHRA Rep Lee Graham (LG) - BCIS Structural Intervention Group Rep Mark Dayer (MD) - NICOR CRM Lead Derek Connelly (DC) – Scottish Rep (in part) Heather Herbert (HH) – SCST Rep (in part) John Paisey (JP) – Education Committee (in part)
<b>GUEST:</b>	Jonathan Behar (JB)
<b>ADMIN:</b>	Steve Sadler (SS), Pauline Heery (PH) – (TWeb)

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### 1. Apologies for absence

Ashley Nisbet, Sophie Robinson, Dewi Thomas, Paul Foley, Catherine Laventure.

### 2. AOB Declaration [All]

- Recycling document from - Steve Murray
- Funding support for Cardiac Simulation Programme - Jonathan Behar.

### 3. Agree minutes of previous Council meeting

Already complete

#### 4. Matters arising not covered elsewhere

##### a. GIRFT Cardiology Report

No progress made. It was felt a statement may now be irrelevant due to timescales. Remove from agenda.

**ACTION:** TWeb – remove from future agendas

##### b. Bullying survey

No progress has been made due to work commitments. It was felt this would still be relevant as it could cover the other multi-professional groups that the BJCA survey did not. AD volunteered to take forward alongside BS for nurse input. AD to ask James Cranley for sight of original questionnaire as a starting point. Suggested to establish the appetite for a survey at the BHRS symposium nurse and physiologist meeting.

**ACTION:** AD/BS – begin draft survey. Review the appetite for a survey at the nurse / physiologist meeting in February

##### c. Guidance for pregnant women in labour with ICDs

This was approved 2 meetings ago but is awaiting publication. JDB to inform TWeb when it can be published on the website. Remove from agenda.

**ACTION:** JDB/TWeb – place on website when ready, remove from agenda.

##### d. Device & Ablation standards refresh

Revised documents were circulated. They were approved apart from the below:

A long discussion took place around the issue that minimum standards are becoming more difficult to attain and whether numbers should be lowered. JP offered to survey the last 2 years' worth of trainees to establish whether they've had difficulties and how many procedures they had managed to complete in the time. JDB offered to complete a draft grid based on what BHRS should be asking Physiologists to achieve. JDB to send to HT and JP for a devices perspective in the first instance.

**ACTION:** JDB/JP – create grid/survey

##### e. Post Covid ICD deactivation guidance & New ICD Guidance

Draft guidance was circulated with the agenda. Comments should be fed back to HT prior to the end of December. Remove post-covid wording from future agendas as no longer relevant.

**ACTION:** ALL/TWeb – comments to HT. Remove Post-covid from future agendas.

##### f. BSDS / BHRS guideline from Andrew Turley

HT reported this document has been finalised and is now on the website. Remove from agenda.

**ACTION:** TWeb – remove from future agendas

##### g. UKMCS / BMFMS / BHRS position statement

Covered under other items. Remove from agenda.

**ACTION:** TWeb – remove from future agendas

**h. Radiotherapy Guidance**

HT reported that BHRS comments were sent to the authors for consideration. The final document has been chased but is not yet complete, expected mid-January 2024. We have asked for final sight prior to endorsement.

**i. Developing a competency to assess Radiographers in monitoring the patient with a CIED during MRI**

CH has been approached by a colleague asking for a competency document on the above. After some discussion it was decided this is not needed due to radiographers potentially not wanting to take up the role. EG offered to draft a response.

**ACTION:** EG – draft response

**j. Position statement on ACP following the recent press regarding a nurse performing TAVI**

CH has received a query as to whether BHRS will issue a statement regarding the recent press of a nurse performing TAVI. It was decided a position statement is not needed as it could cause unnecessary attention. Where there are roles suitable for advanced nurse / physiologist / scientist practice, the BHRS should openly and actively support these roles. Relevant recommendations should also be included in BHRS documents.

**k. Workforce toolkit – EP volunteer**

CH is pulling together an ARTP cardiac healthcare science toolkit and requires an EP volunteer to assist. AD offered.

**ACTION:** CH/AD – meet offline

**l. UK Kidney Association consensus guidance on stroke prevention in AF (HT)**

HT reported that a group had been created to establish guidance. The AF section would be of interest to BHRS and HT will remain involved and keep council posted.

**5. President's Report**

**a. BHRS/A-A HRC**

DC gave council an overview of the history and current situation regarding HRC and his continued work alongside Edward Rowlands and Paul Turner to potentially resurrect the partnership. Concerns were raised that HRC and the BHRS Sessions will be competing for delegates and sponsorship. DC presented a couple of options to the BHRS, all present agreed the preferred option of having representatives from the BHRS and A-A to meet face to face with their respective memorandum of understandings and finances relevant to hosting a congress / symposium. Suggested this might take place in Manchester during the Feb symposium as the A-A have been invited to have an exhibition table. DC and Edward Rowland to liaise with A-A and the BHRS with an invitation to meet in person.

**British Heart Rhythm Society**

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Registered Charity Number: 273307

**ACTION:** EG/DC – EG to circulate the BHRS memorandum of understanding. DC to update the BHRS of suggested date to meet.

**b. AF Ablation - NHS England Commissioning Policy. BlueTeq, PROMS etc**

Background – the new ablation policy released by NHS England requires BlueTeq and PROMS forms to be completed. NHSE has passed this responsibility to NICOR. NICOR has developed a portal for data capture and will analyse the PROMS and BlueTeq data however there are concerns as to the resources required for data collection and getting patients to complete the questionnaire. MD and Francis Murgatroyd have stressed that NHSE could invest in a third party to provide analyses and manage the data however this has not been met with favourable response. MD reported that the completion and submission of PROMS is currently being trialled in Exeter, Taunton and Barts and he will report back with relevant findings.

PD reported that he is in receipt of a letter from Stephen Page about PROMS and the AICC and is looking for support regarding exclusion criteria for AF ablation. He's looking for an Electrophysiologist to assist and support this. RH volunteered to review the letter as he has some insight with ongoing research and ACHD ablation.

**ACTION:** RH/PD – PD to provide letter to RH to review.

BHRS to draft letter to Nick Linker and relevant people regarding lobbying for 30 day mortality data and to prioritise on their agenda. RH is currently collating data regarding this. JBD suggesting including this data when ready.

**ACTION:** EG to draft lobbying letter

**c. Medtronic ICD**

A draft BHRS statement was circulated composed by AD. This was to highlight that some devices do not automatically have the auto alert activated. It was decided the statement needed to be more specific about the particular affected devices.

SH to make MHRA aware and establish if data exists on consequences. HT has some documents that provide evidence of the consequences of these settings not being activated. HT to send on to SH and AD. It was decided specific manufactures should be contacted to establish whether they have any advice, supporting documents or fixes or future plans before any statements are released. SH and HT to make contact with manufacturer and meet offline.

**ACTION:** HT/SH/AD – make statement more specific and make contact with manufacturer

The above highlighted the gap on council for an industry rep.

**ACTION:** EG – look at establishing an industry rep.

**d. BCIS LAAO Position Statement**

LG chased whether the LAAO position statement by Dave Hildiick-Smith had been approved. EG to chase.

**ACTION:** EG – chase status on document

**e. NICOR LAAO PFOC clinical leads interview**

BHRS have been advertising the role. Interviews have taken place and references are awaited. This position is funded until March 2025 (guaranteed) and should be renewed moving forward.

**f. PLG working group update**

EG reported that PLG had a working update yesterday.

**6. Current External Groups with BHRS Representation**

EG reported that she is ensuring BHRS is registered as stakeholders with certain groups.

**a. IQIPS Advisory Board**

AD is now the rep. Agenda to be updated. AD reported there is a meeting scheduled for 11<sup>th</sup> January.

**ACTION: TWeb - update rep name on agenda**

**b. Academy of Healthcare Science**

No update.

**c. RCCP**

No update.

**d. Resuscitation Council UK**

No update.

**e. SCST**

CH reported that SCST recently held a successful face to face National Update Meeting.

**f. BiCCEP**

VE reported BiCCEP has their 5<sup>th</sup> annual in person scientific meeting 2 weeks ago which went well. It was agreed to include BiCCEP information within the BHRS website. VE to provide TWeb content for upload.

**ACTION: VE/TWeb – provide content and upload to website.**

**g. BCS CPCS**

HH has circulated some education session information. CH has volunteered to take over as BHRS rep.

**ACTION: TWeb – update rep information**

**h. Device Working Group**

MD reported this is an initiative by Francis Murgatroyd to get new technology out and added to the NHS purchasing supply change.

**i. BCS Focused Echo Working Party**

EG reported that BHRS agreed to support a focused echo on all relevant cases with a comprehensive transthoracic echocardiogram performed on the patient at some point during their arrhythmia management. Remove from agenda as not an ongoing item.

**ACTION: TWeb – remove from agenda**

**j. NHS OHCA EAG**

JDB has attended a couple of meetings. Will report back any progress.

**k. BCIS Structural Intervention Group**

LG will align with the new NICOR appointee.

**l. LAAO domain group (SM)**

Steve Murray is the rep. Ensure he is invited to future meetings.

**ACTION: TWeb – add Steve Murray to circulation list.**

## **7. Education Committee/Events**

JP reported there is new branding to cover all the educational events: Sessions, Symposium, Simulation

**a. EP Traces Day & Hands-on Simulation Day – November 2023**

JP shared photographs and feedback for the event last month. The event was really well received and positive comments have been received.

**b. BHRS Sessions – February 2024**

JP reported that registration is now open for the British Heart Rhythm Sessions in February. This event will include abstracts, a young investigator award and guest speaker – Andrew Krahn. Formal speaker invitations are going out this week. Bursaries can be claimed if delegates are unable to get study support.

In addition to the main three-day conference there will be three bonus training days: EP Traces Day on Sunday 25th February, Hands-On Simulator Training Day on Monday 26th February and Arrhythmia Nurses Day on Monday 26th February.

**c. Future Events**

- 10 – 11 June 2024 – Simulators (EP Traces Day & Hands-On Simulators) - Bristol
- 11 November 2024 – Symposium – RCP, London

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The main Sessions will move to Edinburgh in 2025.

BS has said some nurses only want to attend the nurse's day. JP suggested a £50 fee for attending just the nurse's day and those attending all days will be eligible for a bursary. BS to discuss with nurse group and confirm with JP.

**ACTION: BS/JP – let John know decision on one day entry.**

SA and EG agreed to send across contacts for national school for advertising.

**ACTION: SA/EG – send contacts to [bhrs@millbrookconferences.co.uk](mailto:bhrs@millbrookconferences.co.uk) or JP**

Council and the Education Committee have been asked to help to chase up sponsors and contact details of potential sponsors to assist Millbrook.

**ACTION: ALL – sponsor contacts to Millbrook**

#### **d. Patient Videos**

Discussion was held as to whether creation and housing of some short videos aimed at families and patients e.g. What is AF? could be completed by BHRS. This would be in a style of an interview between 2 healthcare professionals. It was felt videos such as this would be better housed on Arrhythmia Alliance and should be vetted by patient groups. EG to draft an email proposal to A-A offering the creation of this content for hosting within their site (to be sent to JP and HT in first instance for comments).

**ACTION: EG – draft email for HT & JP review to A-A**

## **8. Training Update**

### **a. Curriculum**

Covered under 4d.

### **b. BCS 2024**

JP to chase invitations to speakers.

**ACTION: JP – chase invitation distribution**

## **9. Nursing Update**

BS reported that the nurse reps were working on the content for the Feb Nurse Day at BHRS Sessions.

## **10. Accreditation Update**

SA reported that the latest exam was held 22<sup>nd</sup> November and presented the results. He confirmed results had been distributed and that exam registration for May 2024 will open 13<sup>th</sup> January.

March 2024 will see the introduction of the new reaccreditation system via BHRS points. A statement (and the website updated) has been circulated with this news.

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A successful devices mock exam was introduced and well received. An EP mock is in draft.

2 very successful webinars were recently held for Devices and EP with record numbers in attendance. Post survey feedback was positive and comments were that further webinars including: Fundamentals of EP Part 1 & Part 2 and Xrays/ fluoro images interpretation and CRM pharmacology would be beneficial.

SA has introduced a downloadable template for the ECG/EGM challenge and reported that a book prize will now be offered to successful submissions as well as 3 BHRS points.

## 11. NICOR/Audit Report

MD reported that the report will be published the start of next year. Initial data still indicates implants are lower than pre-covid. MD announced that he has stepped down from NICOR and his replacement will be interviewed on 11<sup>th</sup> January. MD has suggested a separate devices and ablation audit is required.

MD felt that a system was needed where action is taken when e.g. mortality rates are too high for devices and ablation i.e. that BHRS become involved with review and where applicable, recommendations. It was agreed that recommendations should be composed when standard is not met. MD was formally thanked for all his work since taking on the role.

**ACTION: TBC – compose standards**

## 12. Research

RH reported that the BCS initiatives are ongoing. RH plans to set up some sub-groups to try and link all the different areas and the different external groups that are represented.

EG has been contacted by EHRA regarding providing a BHRS update on UK research in the future.

## 13. BJCA/Trainee Update

EG to touch base with James Cranley (BJCA rep) to ensure he's aware of meetings and if cannot attend that he could provide a brief report.

**ACTION: EG/TWeb – EG contact James Cranley**

## 14. Admin Update

TWeb reported the following overview of work since the last meeting:

- 10 newsletters sent out
- 42 social media posts
- 123 tickets deal with
- Exam supported, analysed, results and survey sent (including mock)
- Managed webinars (advertising, registrations, formatting, polls, survey, certificates of attendance)
- Supported Millbrook & committee
- Training videographer organized for Nov event
- Moodle work: reaccreditation and new logbook system



## 15. Website Update

PD reported the following website updates/additions since the last meeting:

- Registration opened for the February 2024 British Heart Rhythm Sessions
- Accreditation pages rewritten inline with future plans
- Call for abstracts and young investigator award submissions opened
- Webinar recordings released
- Build of CRM contact information database has started
- Automated fellowship/job posting board about to be launched
- Updated 'sessions' section
- Online surveys for post-webinars & post-exam

There are now 3 challenges queued and ready to go. It was suggested Radcliffe are contacted regarding potentially publishing the submissions.

**ACTION:** PD – contact Radcliffe

## 16. BHRS App

No update.

## 17. Treasurer's Report

### a. General financial update

Balance healthy at £192,762. VE reported generalised incomings and outgoings with membership and exams being the main income. VE stressed that it was important to retain and grow these to ensure the success of BHRS moving forward and to be aware of any outgoings that may outweigh incomings.

## 18. Secretaries Report

### a. Member update

53 new members since last meeting:

- 31 - Level 1 (£60)
- 22 - Level 2 (£40)

### b. Online document review

The website has a number of outdated documents and those that need to be reviewed. HT volunteered to review and help organise with TWeb. It was suggested there was a central list with validity dates, author details etc.

**ACTION:** HT/TWeb – review and organise documents on website.

## 19. AOB

### a. Recycling document from Steve Murray

EG urged everyone to read and feedback any comments.

**ACTION: ALL – read and review document**

**b. Funding support for Cardiac Simulation Programme - Jonathan Behar**

Jonathan Behar was welcomed to the meeting. Jonathan presented the simulation training work that has been ongoing at St Thomas' and felt this would be a good opportunity for BHRS to support via badging and funding - and for BHRS members to attend the training. The aim and objective of the work is to provide a simulation programme and high quality support to cardiology registrars in training with state of the art equipment in the fields of pericardiocentesis, heartroid, simbionix etc. Funding is required for trainers and laboratory access.

JP in the first instance asked for access to the calendar of events and could potentially mark as highly desirable on the curriculum. Trainers could potentially use their study support to provide doctors to assist with training. JP also suggested contacting Millbrook regarding sponsorship opportunities to become self-sufficient.

Council to discuss badging and funding offline.

**ACTION: EG – organise discussion**

**c. Rebecca Imms correspondence**

EG reported that a member had been in contact as to whether there is formal guidance or processes existing for risk device advisories. In particular advice when to notify patients.

Council discussed and decided it should be down to individual centres. This is because decisions need to be based on the individual and a blanket approach is not feasible.

**ACTION: EG – feedback to Rebecca Imms**

**d. Mark Ainsley Correspondence**

EG has received an email regarding GA procedures and the local shortage and has been asked if BHRS would facilitate a survey to establish the use of GA for PVI, VT ablations etc so there is an understanding nationally. Agreed in principle that BHRS would accommodate sending this out to membership with the assumption that Mark would review and action the data.

**ACTION: EG – ask to work with Mark to compose and distribute survey**

**e. Scottish Heart Rhythm Society**

DC reported a plan to form this society so they can work directly with Scottish bodies. This will be formalised over the next month or so and will be formally applying to BHRS to be an affiliated group.

## 20. Date of Next Meeting

Currently scheduled for 9am on 28th February during the BHRS Sessions. Please could everyone check the programme to see if this clashes with sessions where council are speakers.

**ACTION: ALL – consider if time and date are okay.**