

# MINUTES

**BHRS Council – Tuesday 27<sup>th</sup> February 2024 @ 08:00**

***Venue: Lancaster Suite, The Midland, Manchester & Zoom***

<b>PRESIDENT:</b>	Eleri Gregory (EG)
<b>SECRETARY:</b>	Honey Thomas (HT)
<b>DOCTOR REP:</b>	Joseph de Bono (JDB), Paul Foley (PF)
<b>PHYSIOLOGIST REP:</b>	Chloe Howard (CH), Amy Dutton (AD)
<b>NURSE REP:</b>	Catherine Laventure (CL)
<b>OTHER REPS:</b>	Stuart Allen (SA) – Accreditation Committee Chair Derek Connelly (DC) – Scottish Rep Heather Herbert (HH) – SCST Rep John Paisey (JP) – Education Committee
<b>ADMIN:</b>	Steve Sadler (SS), Pauline Heery (PH) – (TWeb)

---

## 1. Apologies for absence

Lee Graham, Mark Dayer, Ashley Nisbet, Vivienne Ezzat, Simon Holmes, Bridgette Smith, Sophie Robinson, Ross Hunter, James Cranley, David Farwell.

## 2. Agree minutes of previous Council meeting

Already complete

## 3. Matters arising not covered elsewhere

### a. **Bullying survey**

There was some discussion as to whether this was still needed. Potential to add advice and ability to escalate issues via the website and via a ticketing system with an anonymous option in the future for anyone with issues. It was felt there was a benefit to membership surveys that may capture 'unknown' information as it was suggested assessing for bullying in the workplace wasn't the initial intention of the BJCA survey and this became apparent from the membership answers.

**ACTION:** EG to review the original BJCA survey ahead of the next council meeting to determine its value to other disciplines.

**b. Device & Ablation standards refresh**

Revised devices standards have been released and published.

**c. ICD deactivation guidance**

HT reported these had been distributed and well received. Currently looking at a future webinar to introduce this guidance.

**d. Radiotherapy Guidance**

EG reported that RCP has confirmed they were still working towards the final draft for release in March which incorporates BHRS comments.

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

EG has drafted a document. EG to forward to CH for comments. Remove from agenda moving forward.

**ACTION:** EG – forward document to CH  
TWeb - remove from agenda

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

This has been taken forward by BCS. BHRS are not in a position to make a statement. Remove from agenda.

**ACTION:** TWeb – remove from agenda

**g. Workforce toolkit**

CH has discussed with SCST and BSC. Progress slow but ongoing.

**h. Patient videos**

JP still felt it would be beneficial to have patient videos endorsed by BHRS e.g. what is AF? What is involved? JP feels a 2-way interview would be beneficial and would be invaluable to our members to direct their patients too. It was decided to continue discussion and development offline via the Education Committee. There were no objections but there would be a need for patient representation.

**ACTION:** JP – take offline

**i. Online document review**

HT reported this is currently in progress. HT has re-categorised all documents and TWeb are working on a system that will present them well. Potentially add review dates to documents to help keep track.

**j. CRM National Database**

CH confirmed the database was launched. Positive feedback has been received. HT added it was important to put plans in place to ensure it remains up to date.

**k. Funding support for Cardiac Simulation Programme**

EG has met a couple of times with Jonathan Behar. It was unlikely BHRS would be able to exclusively fund but discussions are ongoing.

**l. NHS Centres where nurses are doing box changes / PPM implants**

Some minimal and potential contacts had been circulated. It was decided a statement was needed to support any non-medical staff completing certain procedures to improve training opportunities and career progression. HT to draft a statement and circulate to council to acknowledge that other healthcare professionals, other doctors etc are taking on an increasing role in implantation and practical procedures and that this may well be appropriate as long as appropriate governance numbers are met to ensure a high-quality service - and that we welcome input from places where this is happening so that we can develop it.

**ACTION: HT – draft statement for council to review**

**m. Free membership for students**

JP stressed his surprise at which stations did not seem popular at yesterday's simulation event and felt we were potentially not reaching certain groups during advertisement as emails are targeted at BHRS members. It was decided to cover this in the Education Committee debrief on 15th March. Any additional feedback from council to be sent in prior to the meeting.

**ACTION: ALL – feedback to JP**

There was potential to offer free membership to target appropriate audiences (until they qualified). It was decided these should be non-voting members. JP to draft a list of memberships that would be applicable e.g. med students, 1<sup>st</sup> year physiology trainees, nurse etc. TWeb to work how to manage payments using a 'qualifying date' moving forward.

**ACTION: JP – create criteria list  
TWeb – research how system would work**

**n. ILR - BHRS standards for Insertion**

HT reported an individual has raised issues with the requirements listed in this document. There was discussion whether the revision could be added to the next general standards document release but it was decided it needed to remain separate. TWeb to research where the document is housed. Use opportunity to add explant information and make it clearer that numbers are indicative. CL, JDB and CH volunteered to review the current document. TWeb to update the individual of progress.

**ACTION:** CL/JDB/CH – revise the document offline  
TWeb – report back to individual

- o. Draft Cardiac Science workforce vision**

Ongoing.

- p. Consideration of BHRS support for NCEPOD for anticoagulation for AF**

HT raised the issue that local cardiologists are concerned with delays and are looking for national support. It was agreed that BHRS should be involved. HT to draft statement of support and circulate for approval.

**ACTION:** HT – draft statement of support

#### **4. President's Report**

- a. BHRS/A-A HRC**

Ongoing. EG To catch up with DC offline.

**ACTION:** EG/DC – catch up offline

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

EG to pick up actions from last meeting. EG to chase announcement of new NICOR lead.

**ACTION:** EG – chase announcement

- c. Medtronic ICD**

Note from Simon Holmes: "SH and MHRA colleagues met with Medtronic 21/2 and plan further engagement with BHRS representatives HT and others with respect to the proposed BHRS statement".

EG and AD to send received statements to relevant council members.

**ACTION:** EG/AD – send statements

- d. Advancing Women's Access to CV Treatment BCS Affiliate Meeting**

EG reported there had been an interesting initial meeting with the intention to publish a consensus document to go in BMJ. They would like BHRS input on arrhythmia related text. EG to check what data exists to back this up and how much work is involved - then ask for volunteers.

**ACTION:** EG – compose reply asking for more detail

#### **5. Current External Groups with BHRS Representation**

- a. IQIPS Advisory Board**

AD reported they had met 11<sup>th</sup> Jan. They are keen to be kept informed of any AI technology that may affect the accreditation process. They are also looking for technical assessors and have asked for help in promoting this as well as accreditation. They are also looking to set up a mentor system – and have put information on their website. Also looking at whether to move the IQIPS standards.

**b. Academy of Healthcare Science**

No update.

**c. RCCP**

No update.

**d. Resuscitation Council UK**

No update.

**e. SCST**

HH reported SCST were currently attempting to improve their admin and comms.

**f. BiCCEP**

JDB reported a successful recent meeting with all going well.

**g. BCS CPCS**

HH reported they were talking at BCS with the subject of exercise.

**h. Device Working Group**

No update. EG to talk to Francis regarding gaining a new rep.

**ACTION: EG – talk to Francis regarding a replacement rep.**

**i. NHS OHCA EAG**

Ongoing.

**j. BCIS Structural Intervention Group**

No update.

**k. LAAO domain group**

No update.

### **l. UK Kidney Association consensus guidance on stroke prevention in AF Group**

HT reported the group is currently looking at anti-regulation in the disease and that is progressing.

### **m. PLG Working Group**

EG reported the group met in December. No update.

## **6. Education Committee/Events**

JP reported that the next Education Committee meeting is in a couple of weeks with the primary focus to review this week's events. May be beneficial at this point to restructure and redefine roles within the committee.

### **7. Training Update**

#### **a. Curriculum**

No update.

#### **b. BCS 2024**

Currently have 3 sessions at BCS. Any suggestions for content 2025 and onwards would be welcome. Email JP.

**ACTION: ALL – ideas for BCS content (3 x talks 1.5 hour each)**

## **8. Nursing Update**

CL reported a productive day at the nurse bolt-on day yesterday. There is an ongoing issue with nursing competency framework with RCN – will meet offline.

## **9. Accreditation Update**

SA reported an accreditation session is being held at the sessions tomorrow. SA presented the latest registration figures for the exam. Next Accreditation Committee is in a couple of weeks in York where the next exam will be composed – along with the launch of the new Physician exam. Advertisement has begun for the Device EGMs and EP Traces webinars. These are already well subscribed. EP Fundamental webinars to follow.

## **10. NICOR/Audit Report**

EG reported the new NICOR lead had been recently appointed and will be co-opted to council.

## 11. Research

No update.

## 12. BJCA/Trainee

No update. EG to contact directly. Suggest 2 reps are needed.

**ACTION: EG – contact BJCA – suggest representation and who x 2**

## 13. Admin Update

SS reported 16 newsletters sent out, 71 social media posts and 162 tickets answered.

## 14. Website

### a. General update

- 2 x ECG/EGM challenges launched
- Continuing promotion of 'Sessions'
- Registration for x 2 webinars launched (Devices EGM's & EP & Traces)
- CRM Contact Database launched
- Revised Standards for Implantation & Follow-up of CRM added
- Exam registration launched (inc the option for Physician)
- Discontinuation of ICD Shock Therapies towards EOL guide added
- Current GA Practice survey launched & completed
- Jobs posting board launched

Traffic is consistently good and you can see events and challenges are of particular interest.

### b. Paid content

JP has been contacted by Zoll asking if we offer paid content on behalf of companies. This raises the potential question as to whether we should offer this as a paid service commercial which has never been done. JDB stressed if we did this we need to steer away from sponsored case studies, that content needs approval by council and needs to be clear when members are leaving to go to an external site. It was decided this needs more consideration although additional funding would be welcome to cover any event shortfalls. EG To speak to Jo at BSE for guidance. Disclaimers and policies would be needed if go ahead.

**ACTION: EG – speak to BSE for guidance**

## 15. BHRS App

SS reported that the login has been approved by Apple. A new version is in the app store this week with another version, with member-only content and new functionality planned.

## 16. Treasurer's Report

### British Heart Rhythm Society

Registered Address: 24A Market Street, Disley, Cheshire SK12 2AA UK

Email: admin@bhrrs.com | Web: www.bhrrs.com

Registered Charity Number: 273307

SS presented a banking report in VE's absence. £50k had been passed over to Millbrook as receipt of sponsorship money to them has been slow. Regardless, balance remains healthy at £184,750.

## 17. Secretaries Report

### a. Member update

144 new members. 80 x level 1, 64 x level 3. It was noted it would be interesting to see if new members attending the sessions remained members.

## 18. AOB

### a. British Society of Echocardiography triage guidelines - volunteers wanted

EG reported that Dan Augustine of BSE has been in contact as their triage guidelines are up for renewal. They would like BHRS to help with the focused echo section. JDB and PF volunteered. EG to inform BSE.

**ACTION: EG – inform BSE of volunteers – JDB & PF**

### b. EHRA 2024 – BHRS CME Session Endorsement Request - Radcliffe Group

Agreed in principle but it was decided council should view the programme and speaker details before confirming endorsement.

**ACTION: EG/TWeb – forward around document with a deadline**

## 19. Date of Next Meeting

Thursday 18th April 2024