

**The Renal Association  
Annual General Meeting**

Location: Liverpool  
Date 20<sup>th</sup> April 2009

Present: 69 attendees

Apologies: Patricia Murray, Nicola Thomas, Alan Bevington, Julie McGeoch, Martin Landray, Fiona Loud, Katy Bennett-Richards

Agenda

- | No. | Item  |
|-----|---|
| 1.  | Previous minutes accepted as correct  |
| 2.  | No matters arising not covered by agenda  |
| 3.  | President's report – included in the 2 <sup>nd</sup> RA annual report. Accepted by members with little discussion <ol style="list-style-type: none"><li>General message is that there is health in all spheres of RA activity reflecting the professionalism of the society</li><li>Workforce issues are a concern. There is an imbalance between trainee numbers and likely consultant vacancies. Phil Mason will chair a session with David Game for the trainees at the Liverpool meeting.</li><li>60<sup>th</sup> Birthday celebrations at 2010 annual meeting in Manchester. A special scientific session on the first afternoon and a celebratory dinner is proposed. Calls for ideas on format and what to include would be gratefully received.</li><li>Thanks to the organisers, programme committee and colleagues at BTS who have worked hard to ensure the Liverpool meeting is a success. Excellent meeting with good attendance and sponsorship</li><li>September there will be a joint day with the BAPN at the annual ESPN meeting in Birmingham on cystic disease</li><li>Proposed that Terry Feest be offered Honorary Membership of the Association – accepted without dissent</li></ol> |
| 4.  | Treasurer's report <ol style="list-style-type: none"><li>Summary of the financial position at the start of 09 is healthy, income from sponsorship and subscriptions. Retained funds doubled to £400K, main expenditure reflects the cost of the Advanced Nephrology Course and Secretariat. BRS/RA meeting not shown in accounts. Renal Registry income from capitation fee main expenditure salary costs. Renal Registry fund approx £1 million in 08 reflecting a stable financial position. Due to the profit from Glasgow of £60K, registration fees were kept low for the Liverpool meeting. It was expected Liverpool meeting would result in a financial loss, however, registrations are good and break even may be achieved. Registry expenditure needs monitoring. Capitation fee for 2010 is fixed at £18/patient.<p>Bruce Hendry asked how the RA and RR funds were in terms of recommended reserves Stuart Rodger – felt that these were now about right and reflected a better position than previous years</p>Accepted by members</li></ol>  |
| 5.  | Honorary Secretary Report <ol style="list-style-type: none"><li>Current membership stands at 1015 an increase from 914 in 2008</li><li>eNews and website remain integral tools for communicating with membership. eNews is opened by 45% of the membership.</li><li>Next ANC meeting is September 28/09-1/10. Continues to go from strength to strength.</li><li>Congratulations to the award winners of 2008<ol style="list-style-type: none"><li>The AEG Raine Award was awarded to Brian Conway</li></ol></li></ol>  |

- ii. The Walls Bursary was awarded to Maria Fragiadaki
    - iii. The Lockwood Award was awarded to Jeremy Hughes
    - iv. Medical Student Elective Bursaries were awarded to seven individuals
    - v. Amgen Bursaries were awarded to 50 individuals
  - e. Proposed new members accepted by membership
6. Clinical Vice President's Report
- a. All chairs of the sub-committee were present and were willing to take questions
  - b. Highlights of the year
    - i. Success in convincing DoH to retain renal services as part of specialist services for commissioning
    - ii. PBR tariff not yet in place. Ongoing discussions with DoH about best practice tariff. Will be undertaken in 4 areas and expect renal to be included
    - iii. Work is on-going by the Home dialysis and PD working parties
    - iv. Acute kidney injury – major area of RA initiative led by Andy Lewington. Contributed to the NCEPOD report to be published in June and the consensus guidelines on IV fluids
  - c. Guidelines committee continues to progress led by Rob MacTier. The group has adopted the GRADE system to give a flexible approach to guidelines. Lot of liaison with other guideline groups to reduce duplication and contradiction.
  - d. Renal registry report available
    - i. Mistakes and late data return main cause of delays in registry report
    - ii. Geographical mapping available on Renal Registry website
    - iii. Centre specific data available
    - iv. Linkage with the Health Protection Agency and Hospital Episode Statistics database being discussed
  - e. Kevin Harris thanked Donal O'Donoghue, Renal Tsar, for all the work he had done with the DoH which has made the work of the RA easier.
- Bruce Hendry asked if it was likely that late returns would increase  
 Charlie Tomson responded that although there would always be tensions between timeliness of report and quality, there should be improvements in the future with changes implemented in the RR
- Question – would PBR go ahead in 2010?  
 Donal O'Donoghue responded that it was likely PBR would go ahead in 2010. The DoH would like to introduce payment by best practice but need clinical consensus as to what best practice is.
7. Academic Vice President's Report – accepted
- a. Education and Training Committee is now chaired by Sue Carr
    - i. CPD sessions are being organised for the annual meetings
    - ii. Elearning initiatives are underway to support both UK nephrologists and the international committee
    - iii. The Advanced Nephrology Course continues to succeed and is now under new organisers – Sunil Bhandari and Paul Harden
    - iv. Major review of the nephrology curriculum due Sept
    - v. The NSCE first diet took place in March. Jonathan Fox was thanked for all his, and colleagues, hard work. The exam went smoothly with 33 individuals sitting. Pass mark was 67%. 80% of UK trainees passed. If fail College has agreed that only have to pay for one sitting so can re-take without charge. Of the UK trainees who sat exam 50% were SpRs, who do not need to sit exam. Assumed SpRs taking exam to influence appointment committees but it is unknown whether having the exam will influence committees. Next sitting March 2010.
  - b. Clinical Trials committee – chaired by Colin Baigent
    - i. Has a database of all current clinical trials being undertaken by the renal community.
    - ii. In collaboration with the UK Renal Consortium clinical study groups have been set up to develop research and trials in many areas of renal interest.

- c. Research committee – chaired by Bruce Hendry
    - i. Undertook a very successful meeting on genetic diseases attended by 47 individuals. Progress made on furthering research in monogenic diseases. Aim to make links with the rare diseases network. More thought needs to be given to progress with polygenic diseases
  - d. International Committee – chaired by Jo Adu
    - i. Organised nephrology update with AFRAN
    - ii. Caroline Savage noted Jo Adu is to retire and thanked him for all his work with the International Committee. She requested expressions of interest for the chair of the International Committee.
8. 60<sup>th</sup> Anniversary celebrations – John Feehally
- a. John will lead a small sub-committee to plan the birthday celebrations for 2010. The RA is the oldest renal society in the world. The ISN will be 50 years old in 2010. An additional chapter will be written to update the history of the association written after the 50<sup>th</sup> anniversary. Copies of all abstracts will be available on the website. Preliminary plans include a half day plenary session at the annual meeting in Manchester aiming to look back and forward with focus on the last 10 years. A request for content ideas for the meeting, volunteers to help organise and any for old photos was made.
9. Elections
- a. Charlie Tomson congratulated on becoming President-Elect. Will take over at the next Annual Meeting
  - b. 3 executive positions are available – expressions of interest requested
  - c. Electronic voting undertaken for the change in logo and president’s election was very successful with a much higher turnout than with paper voting. Elections were run by the Electoral Reform Society. Future elections will all be electronic.
  - d. Changes to rules
    - i. The past president currently holds office for 2 years. This is an anomalous situation as president’s term is for 3 years and the past-president has several roles beyond that of trustee. Trustees suggested a change to terms of office for past-president to 3 years – Accepted by membership
    - ii. For discussion at next year’s AGM the president currently holds office for 3 years making time commitment to RA 7years (1 year president elect, 3 years president, 3 years past president) suggest changing term of office to 2 years for president and revert back to 2 years for past president.
10. Green Nephrology – Charlie Tomson
- a. The Association has agreed to explore ways of practicing greener healthcare. The Annual Meeting is being held in 2009 in Liverpool Convention Centre, which is the greenest convention centre in Europe.
  - b. A research registrar is to be appointed in sustainable healthcare working with the Campaign for Greener Healthcare, he/she will be partly seconded to industry and be taught on change and project management with the aim of improving sustainability initially in their own unit.
11. Next meeting – Manchester Convention Centre Wednesday 19<sup>th</sup> May 8am