Minutes of BAPN Executive
Date 10th September 2010 10.00-13.00hrs
Venue Royal College of Paediatrics and Child Health

Present: Mary McGraw (MMG), Maggie Fitzpatrick (MMF), Milos Ognjanovic (MO), Moin Saleem (MS), Leah Krischock (LK), Helen Jones (HJ), Judith van der Voort (JV), Carol Inward (CI), Simon Waller (SW), Sally Feather (SF)

Apologies: Peter Houtman (PH), David Milford (DM)

1. Minutes of last executive meeting
   These were agreed as a true record of the meeting in May 2010

2. Matters arising (not otherwise on the agenda)
   a) Check with Jane Tizard about details regarding advert for lay member (action SF)
   b) MMG reported that MHRA is investigating Neorecormon withdrawal
   c) Postal vote to be arranged re constitution (action SF)
   d) Jane Tizard contacting local hospitals for policy re refusing transplants (SF to chase)
   e) Some job plans of commmitte outstanding (SF to chase)

3. BAPN logo
   Colour pictures of a proposed BAPN logo (based on previous BAPN black and white logo) produced by PH were reviewed. A preferred image was selected. Request to be made to PH to modify this further to explore a different colour combination and use of a kidney shape in outline (action SF to contact PH)

4. Winter meeting
This is to be held on Friday 3rd December 10.00-16.00. SF confirmed that a
venue had been organised at Birmingham Childrens Hospital. Previous format
of the meeting was considered to be good but requests had been received to
extend the business section. In addition, including trainees was considered to
be important. An outline of the timetable was drawn up to include 10.00-13.00:
1.5 hour business meeting, 45 minutes research presentation, 45 minutes
registry. 14.00-16.00 trainee slot 1 hour (action HJ to coordinate) 1 hour
state of the art session on ABO incompatability is proposed. SW to approach
Nizam Mahmood (action SW)
Sally Hulton to be contacted re refreshments (action SF)

5. Nephrology networks
Previous documents exist setting out standards but never previously looked at
patient pathway. A document has been circulated, comments have been
incorporated and executive summary will be produced. Guidelines from PH
are awaited and will be incorporated. Hypertension should also be included.
The intention is for the document to include multidisciplinary input but their
comments are awaited. Examples were included in the document of diseases
other than renal replacement therapy although these were not exhaustive.
Quality standards include research but this section needs expansion. A
meeting is planned for next week to include Hani Riad from BTS. Paediatric
urology input is also planned. An additional meeting will occur in 2011.

5. Lay representative to BAPN executive committee
An advert has been placed in Kidney Life (NKF). Two applicants exist for the
post to date. Details of advert including closing date to be obtained. An
application form to be designed. (action SF). Interview may be required.

6. ACCEA
Renal Association process for national ACCEA has already occurred. Process
for BAPN members was discussed and decided. The BAPN members will
need to submit applications to MMG by 11th October to include citation from a
senior colleague (advert to appear in September enews, action MMG and
SF). The BAPN committee will include six non retired ward holders who will
then forward applications to RCPCH for consideration.

7. Treasurers report
Funds have been removed from BAPN bank accounts into the Renal
Association account. However a final accurate statement was not yet
available (approx £30K in the account). KKR will fund £3K per year for the
renal CSG division of MCRN. Eleven BAPN members have paid BAPN
membership in addition to Renal Association membership. The BAPN
executive decided this money was not retrievable. KKR bursaries to be
advertised again in September enews (action SF).

8. Transplant 2013
SF had received an invitation for BAPN to join Transplant 2013. A decision
was taken to write to Transplant 2013 offering support but no funding possible
from BAPN (action SF). Other organisations are also struggling in the current
economic climate including the Renal Association and Kidney Alliance. Kidney Alliance are struggling to fund their lobbying group at Westminster.

9. Registry and Audit report
The use of IT systems to record Renal Registry data was considered to be critical (Renal registry is struggling to deal with interpretation of handwritten reports). EDTRA is growing and UK Renal Registry data is submitted to them. BAPN is to move to quarterly returns. Concern was raised that local infrastructure for this may not be available. September enews to advertise dates for return of Renal Registry data this year (action SF).

10. Clinical standards and guidelines
Apologies from DM. A suggestion was made that BAPN could develop Renal Association guidelines for the care of post transplant to be specific for children. NICE has consulted on immunosuppression in paediatric renal transplantation; three paediatric nephrologists attended the initial consultation meeting and made responses. NHS evidence and accreditation was raised and had been forwarded to DM to see if BAPN guidelines would be sufficiently robust to be kitemarked by NHS evidence. A request had been made for BAPN outcomes by the RCPCH; unfortunately the timescale was only three days so no outcomes were sent.

11. Research
Renal CSG: meetings occurring three times a year. A number of studies are in development including Prednos study. Local leads are being identified and pilot studies are being put in place to identify which DGHs will be able to participate. In addition, some industry led studies are being set up and random approaches by industry to CSG members are occurring.

RADAR: most centres are recruiting to the two studies: steroid resistant nephrotic syndrome and Membranoproliferative glomerulonephritis (MPGN). Disease working groups are being set up to co-ordinate different diseases within RADAR. In addition to MPGN and steroid resistant nephrotic disease working groups which have already met, PKD, HNF1β and vasculitis groups are being set up. Funding is an important aspect of the disease working groups and KRUK have been approached.

KKR funding for paediatric renal projects. CSG reviewed 6 applications and chose 3 projects to go forward to a panel including KKR and KRUK. A final funding decision will be made in October.

RCPCH meeting (5-7 April 2011). A joint meeting will be held with British paediatric bone and mineral group. This will be a half day meeting. Suggestions were invited for guest speakers.

12. Clinical services committee report
Committee has not yet met since MO has become chair. MO to contact the Renal Association Clinical services committee. BAPN executive to reflect on direction for the Clinical services committee. Suggestions included
commissioning of networks, cost cutting exercises, terms of references, nephrology networks. MO required list of BAPN clinical leads (action SF to obtain).

13. Communications officer report
Plan to send out survey to BAPN members regarding BAPN website.

14. CSAC report
Grid process for appointing nephrology trainees is underway. Concern was raised that a number of grid trainees are at the end of training and no consultant posts are available. No final decision made yet about number of grid trainees to appoint this time. SPIN trainees not yet involved in grid trainees programme and CSAC chair not aware of list of SPIN trainees. The eligibility criteria for Grid training application is on RCPCH website.

15. Trainees
Helen Jones was welcomed as new trainee representative. The list of current trainees was noted. HJ raised the lack of consultant jobs as concern for current trainees.

16. No updates were available from external committees. SF due to attend first BRS meeting. MMG due to attend Renal Association executive.

17. Future meetings
BAPN Winter meeting: 3rd December 2010, Birmingham
BRS/RA meeting: Birmingham 6-9 June 2011
RCPCH meeting: Warwick 5-7 April 2011

18. Date of next executive meeting 11 November, Leeds General Infirmary, Leeds