BAPN AGM

Manchester RA/BRS meeting

Tuesday 18th May 2010

Minutes


Apologies: L Rees, M Christian, A Naqra, H Maxwell, M Muorah, P Winyard, M Lewis, D Milford, P Houtman, L Kerecuk, S Waller, L Krischock

1. Minutes of last meeting –
   a. these were agreed as a true record of the meeting in December 2009

2. President’s report
   a. Mary McGraw welcomed members to the meeting and explained that future AGMs would be held at the RA annual meeting. Hence this AGM was only 5 months after the last. The December meeting would include a business meeting together with an educational meeting.
   b. The BAPN are now a Division of the RA. The constitutional changes need to be made to finalise this.
   c. Neorecormon pen. The KA, BAPN and the NPPG have made representation to the company and the Committee for Medicinal Products for Human Use (CHMP). There was due to be an oral hearing but this was cancelled. The CHMP is continuing to investigate. Evidence has shown that decision to discontinue pen device was in 2007. Regulatory bodies are looking at processes for discontinuation of medicines/devices.
   d. Nephrology networks – a task and finish group on the development of nephrology networks has been initiated between the BAPN, RCPCH and NHS Kidney care. This aims to produce a standards document for commissioners for the requirements of a nephrology network.

3. Secretary’s report
   a. Constitution amendment
      i. In order to become a Division of the RA there need to be some changes to the constitution. JT presented these changes to the BAPN members at the AGM. There was unanimous agreement with the proposed changes. However the current constitution requires a 2/3 majority of 50% of the membership to ratify the amendments at an AGM. Alternatively a postal ballot must be held. Therefore there will be
a postal ballot-in which a further amendment may be made to allow a smaller number to ratify a rule change.

b. New members - the following new members were agreed and welcomed to the BAPN

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<thead>
<tr>
<th>Name</th>
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<tr>
<td>Craig Oxley</td>
<td>Aberdeen</td>
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<tr>
<td>Lesley Alsford</td>
<td>North Middlesex</td>
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<td>Rim El-Rifai</td>
<td>Carshalton</td>
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<td>Guy Millman</td>
<td>York</td>
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<td>Ruth Charlton</td>
<td>Epsom</td>
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<td>Steve Wadams</td>
<td>Poole</td>
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<td>Nigel Coad</td>
<td>Coventry</td>
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<td>Ben Obi</td>
<td>Guildford</td>
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<td>Munir Ahmed</td>
<td>Redditch</td>
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<td>William Barry</td>
<td>Sidcup</td>
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<tr>
<td>Michele Hamilton-Ayres</td>
<td>Cheltenham</td>
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<tr>
<td>Deepa Athavale</td>
<td>Manchester</td>
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c. E news - there continue to be some problems with individual Trusts allowing the enews through the firewall for some members. MCI are working on this. Please check that your colleagues are receiving it and let MCI or S Feather know if a problem.

4. Treasurer’s report
   a. JVVs summarised the subscription fees.
   b. Funds
      i. £4000 pa is available for committee members’ expenses.
      ii. £750 pa for KA.
      iii. These will be reviewed in 5 yrs.
   c. A ring-fenced account for funds specifically donated to the BAPN will be created and managed by members of the RA and BAPN. An annual statement will be presented to the AGM.
   d. The current statement was reported.
   e. Current issues include
      i. Annual MCRN costs - These have been £10,000 per annum. KKR have agreed to contribute £3000. Discussions are underway with MCRN to agree the payment that will be required as earlier payments included some set up costs.
      ii. Route for membership - it was agreed that all Grid Trainees should continue to automatically become members.
      iii. A form is being adapted from the RA which will be used for all new members. Still require nomination and seconder - may discuss using CV.
      iv. A Wooff suggested that the BAPN should encourage adult nephrologists to become members of the BAPN – this was strongly supported and will be discussed at EC

5. Audit & Registry Report
   a. Renal Biopsy audit – F Hussain et al now published in NDT, Standards are published on the BAPN website
   b. Hypertension in Tx patients - manuscript in preparation - standards to be agreed
   c. Anaemia in Children on RRT - discussions with NHS kidney care re funding are in progress.
   d. Care of infants on dialysis. Funding request has been submitted to HQIP
   e. Renal registry
      i. Renal registry report of 2008 data now published. CI requested feedback and suggestions for the future.
ii. 2009 data received from 9 units-awaiting Manchester, Southampton, Belfast and Newcastle. Deadline 30th June
iii. Plans for quarterly returns in the future
iv. CI reported some data from the report
   1. Increasing patient numbers
   2. Increasing ethnic minorities
   3. 0-4 age group will be subdivided for future
   4. Increasing numbers of LRD
   5. No change in Ht SDS over 10 years-need further investigation
   6. Variation in BP control between units-similar to that seen in adults.
v. CI thanked members of the RR and the BAPN members for their support

6. Research report
   a. Warwick
      i. Excellent talks by T Chambers and R Lennon Special thanks to R Lennon for stepping in at last moment due to volcano absentee!
   b. CSG
      1. Needs ideas from centres for strategy and priorities. Inform MS or local research lead.
   c. RA UK rare diseases document is now published,
   d. RaDaR
      i. Website now launched and recruiting patients
      ii. SRNS-most centres approved by R&D
      iii. MPGN in progress
      iv. Working groups for SRNS and MPGN being developed-please show expressions of interest.
   e. Funding
      i. KKR have agreed to fund £100,000 for this year. Have also agreed to £3000 for travel bursaries and £3000 for CSG costs
      ii. MS will meet with Neil Turner to discuss the link with KRUK

7. CSAC report
   a. Specialty training advisor-post has been advertised. 1 applicant
   b. NTN grid appointments
      i. December 2009, 12 applicants, 7 S/L
      ii. 2 appointments- Dr Wesley Hayes to Nottingham and Dr JJ Kim London
      iii. 17 trainees
         1. 3 locums-Leeds /Newcastle
         2. 3 overseas
         3. 3 research
         4. 6 clinical practice
         5. 2 starting in September 2010
   c. 2 replacement posts in progress-Birmingham/Nottingham. 5 further posts becoming available due to retirement 2011-2015.
   e. ST7A assessment scenarios for pilot now written. These will be piloted in nephrology-all trainees should participate.
   f. Framework for competencies for level 3 training in Paediatric Nephrology on the RCPCH website is being updated by CSAC.
   g. Framework of competencies for level 3 training SSM in Paediatric Nephrology directed at potential SPIN doctors. This needs to be advertised more widely and is on the RCPCH and BAPN website.
   h. Revalidation
      i. CSAC have discussed the GMC’s Revalidation report and will produce a response to the call for consultation – ‘Revalidation :the way ahead’
8. Standards and Guidelines report (paper report only)-previously circulated

9. AOB-none

10. Next BAPN meeting Dec 3rd 2010

11. Next AGM May 2011 at RA/BRS meeting