

# **MINUTES**

### BHRS Council – 2<sup>nd</sup> July 2020 @ 09:30

Held via virtually via Zoom

Attendees: Alistair Slade (AKBS), Richard Schilling (RS), Stuart Allen (SA), Eleri Roberts (ER), Sarah Clarke (SC), Holly Daw (HD), Derek Connelly (DC), Jane Owen (JO), Paul Foley, (PF), Angela Hall (AH), Ashley Nisbet (AN), Stuart Harris (SH), Trudie Lobban (TL), Francis Murgatroyd (FM), Claire O'Neil (CON), Nikhil Ahluwalia (NA), Paul Foley (PF), Jason Collinson (JC), Ross Hunter (RH), Heather Edwards (HE), John Paisey (JP), Ian Wright (IW), Joseph De Bono (JDB), Trevor Fernandes (TF), Mark Sopher (MS), Steve Sadler (SS), Pauline Heery (PH)

#### 1. Apologies for absence [RS]

Kim Rajappan, Pier Lambiase, Simon Holmes.

#### 2. AOB Declaration [All]

- Guidance for pathologists conducting post-mortem examinations on individuals with implanted electronic medical devices
- Heart Rhythm Congress 2020
- Curriculum Training Update

#### 3. Agree minutes of previous Council meeting [AKBS/RS]

Agreed and uploaded to website.

#### 4. Matters arising not covered elsewhere

#### a. MRI Cardiac Devices Group

Martin Lowe had previously led BHRS representation in this group. CON offered to represent moving forward. All agreed. AKBS to request copies of recent minutes and forward to CON with detail of next meeting.

**ACTION: AKBS** – to gather detail

**CON** – to attend next group

#### b. Cardiac Arrest Group

PF attended the group and reported there was a further meeting this afternoon which he'll attend along with AKBS if possible. PF to feedback at next meeting.

**ACTION: PF** – to log feedback

TWeb – to place on agenda

#### 5. President's Update (AKBS/RS)

#### a. Constitution Update

AKBS has been in discussions with SS and Hugo at TWeb. With advice it was decided elections should remain in usual way. Advice given was that no one should be on committee after 2 consecutive year terms (max of 6 years' service). Clearly some representatives such as FM and Arrhythmia Alliance are invaluable and essential. TL will look for potential different representation from the AA. Offline discussions to take place with all relevant people and a future formal system to be put in place.

**ACTION: FM/TL** – to report to AKBS views and plans for succession.

It was noted a formal deputy process is required if the President is unavailable (especially in the two years where there is no presidential elect). It was decided the Secretary should 'act up'. AKBS to draw up a formal deputising hierarchy for comments.

**ACTION: AKBS** – formalise deputising document for consideration at next meeting.

**TWeb** – add to next agenda.

It was noted the AGM is likely to be virtual this year. It was decided it would be best to try to hold this during HRC 2020. AKBS to suggest and date and time to TL. TL will check there are no live sets happening during preferred date and time.

**ACTION:** AKBS/TL – propose a date for AGM for consideration.

#### b. BCS 2021

Andre Ng (ANG) has taken over as programme chair. AKBS currently in discussion regarding the programme for the next two years. It is likely next year's meeting in Manchester will be hybrid with limited face to face interaction. It was noted there should be substantial opportunity to present a bigger programme with BHRS involvement preferably with Physiologist and Doctor training combined. AN and JP have put together a plan. JP to reengage with ANG in the next couple of weeks to ensure we have timely input. SA offered to be involved.

**ACTION: JP** – contact ANG with plan.

#### c. Treasurer position vacant October 2020

It was noted SH will finish his term as Treasurer in October this year. SH was thanked for all his work. Potential candidates to put themselves forward to ER.

**ACTION: ALL/ER** – interested candidates to approach ER.

#### d. BCS Future Practice of cardiology working group

AKBS reported this was a short term working group set up by Simon Ray to look at the impact of Covid on cardiology practice. A document is currently being drafted with a telephone conversation scheduled for next Tuesday. Remote device monitoring has been pushed by AKBS to be included due to the success and patient feedback.

#### 6. COVID-19

PF reported the recent webinar (Living with COVID – challenges and benefits of changes) put together with Radcliffe Cardiology has been fantastically successful. Thank you to everyone who contributed.

There was some concern about ablation remaining de-prioritised. It was noted differing policies throughout the UK regarding patients needing to self-isolate prior to procedures, and that these policies affected the patients' desire to coming in due to other planned commitments in the self-isolation period. Obviously the sooner patients are seen the better the outcome with AF. RS to draft up a press release/statement to share with DC and TL to encourage that AF should not be overlooked and the need to return services to normal

**ACTION:** RS – draft up statement/release for consideration – sent to TL and AKBS

#### 7. Guideline Update – Cardiac Monitoring (PF/AH)

PF and AH have composed draft guidance. They are currently waiting on a couple of comments before circulation. PF to chase final comments and distribute for comments. AH suggested an inclusion of monitoring duration for different conditions.

**ACTION: PF** – chase and include comments, circulate documents

#### 8. Exam Update (SA/DF)

#### a. Pearson, online etc.

SA thanked SS for his support. Examination date is now booked for 10<sup>th</sup> November at 8am. Exam will last 4 hours, consist of 120 questions and be held at multiple locations. Candidates will register with BHRS and Pearsons will allocate a test centre. Pearsons will automatically mark the examinations but BHRS will need to grade them. Examination will be available to those overseas and can be held virtually under certain circumstances e.g.

those shielding. SA To draw up a list of extraordinary circumstances that will allow virtual examinations.

**ACTION: SA** – list circumstances where candidates can hold exams virtually.

Face to face exam writing sessions have been cancelled. SA will set up zoom groups into relevant areas. A database of previous exam questions have now been set up.

SA is looking to organise exam course preparation online which will involve a mixture of live presentations with an additional plan to build up a library of recorded session around the syllabus.

Log Books are being phased out from those taking the examination this year. Historically logbooks can take up to 2 years to complete. From this year candidates will upload DOPs signed by their mentor for each discipline. This will ensure standards remain high, speed up results, minimise costs and hopefully encourage nurses to also complete certification.

Those currently completing logbooks will be considered to swap over to the new system on request.

On suggestion SA to also look at improving the education content on the website.

**ACTION: SA** – to review education content on website.

#### 9. Website Update (JC/TWeb)

The website and social media has been continually updated with new information. JC to work with TWeb to review all current content to ensure everything remains relevant and up to date.

ACTION: JC/TWeb -website review

JC has reported the monthly challenges have slowed due to work commitments and will attempt to restart this. Council were supportive of JC working with Radcliffe Cardiology where challenge case submissions will be co-published on the BHRS website and the new Radcliffe Cardiology Arrhythmia Academy website. CON also offered EGMs which can be published.

**ACTION: CON/JC** – publish relevant EGMs.

Council were reminded that the website team are always looking for new content, news, suggestions and comments and social media that can be reshared etc. NA also requested any videos that can be shared to continue to grow our training library.

**ACTION: ALL** – contributions to news, social media and website.

Council asked that NA and HE produce a desired list of video materials and allocate these requests to council. Home monitoring and remote alerts should be on the list.

**ACTION:** NA/HE – created desired list of videos and work with council to allocate

items per specialist areas of members.

10. BHRS admin update (TWeb)

• 17 new members up to 27<sup>th</sup>. June from last meeting.

• Steady hits on website. RS is helping with retweets.

TWeb stressed the need for content and comments for improvements.

• 54 tickets resolved.

• 47 certificates sent out.

• 3 newsletters sent out.

• Required document forms sent out to council for completion.

TWeb to gain data on renewal of membership and feedback to the council.

**ACTION:** SS – gain renewal information and bring back to meeting.

11. NICOR/Audit Report (FDM)

FDM fed back that the final report will be submitted in September. FDM would like to compose an exploratory paper with NICOR looking at outcomes and institutional and operator factors that may influence this. Council fully supported this.

**ACTION: FDM** – to compose paper.

FDM reported data migration to the new platform is now complete. Centres will now get submissions bouncing back if data is incorrect. FDM asked that detail be sent via the next newsletter to members.

**ACTION: FDM** – to supply relevant text to admin team.

Centres are still using the old system for follow-up purposes. This is causing data errors and confusion. Council fully support the decision to discontinue software with years notice.

**ACTION: FDM** – to arrange discontinuation and relevant communication

12. Research Report (PL & RH)

Over the COVID period, PL submitted the AF ablation in Heart Failure Multicentre Trial (CRAAFT-HF) to BHF and NIHR HTC. It is expected that it will be asked to submit a leaner trial on review due to the costs but full feedback is awaited from both bodies which should be in the next month or so.

The BHF CRC now has a digital platform to facilitate a number of features on Microsoft Teams to allow multi-attendee conferencing and editing of documents by multiple users at a common site plus many other. This platform will enable more frequent meetings and study reviews - one thing the COVID crisis has accelerated.

A number of other studies are currently being planned and reviewed including the Imperial His bundle pacing trial (PROTECT HF). The latter was successfully discussed online with multiple participants recently through the BHF CRC platform as an experiment.

#### 13. Nursing Update (AH & SC)

#### a. Competency documents

AH currently looking at competency documents. Some documents have been uploaded to website already. Thank you to Sarah and Jane for their contributions. Relevant Nurse Members are gathering via Zoom for an update tomorrow. Loop recorder document is due to be updated. AH will update and circulate for comments.

SC is currently creating guidance linking bands into competencies. Individual services can be flexible about this but the principle is to ensure that nurses are appropriately recompensed for their skills.

**ACTION: SC** to forward this work to council within a month.

#### 14. Trainee Update (NA)

#### a. Trainee Proposal HRC

NA and HE has been corresponding regarding a session in October with the primary focus on the introduction of formal mentoring. NA shared the proposed structure. NA will need more mentors from each discipline (30 mins to 1 hour of mentor time needed). JC, SC, AH and JO have volunteered so far. NA and HE to create a wish list of members (with permission to approach people outside of council). It was also noted that we should integrate a HRC flagship session and ensure there is Scottish representation.

**ACTION: NA/HE** – to create wish list, approach and begin relevant discussions.

#### 15. Secretaries Report (ER)

ER reported an increase in membership and would expect to see a further spike when exam registration opens. IBHRE has also been postponed which possibly may direct those candidates to us.

ER has sent out correspondence to those who are able to stand again for election and reported there is the following posts available:

- 1 nurse
- 3 physician

ER to compose text regarding current available positions for advertising. Council support the same standard election process. Adverts will aim to go live in the next couple of days with a close for nominations 4 weeks after that.

**ACTION: ER** – to start advertising for vacant positions.

#### 16. Treasurer's Report (SH)

SH reported a very steady and consistent income. The main source of income has been subscriptions and exam registrations

#### 17. AOB

## a) Guidance for pathologists conducting post-mortem examinations on individuals with implanted electronic medical devices

MHRA have been liaising with the Royal College of Pathologists about revising their 2015 guidance. The council decided this should have both physiologist and physician involvement. **SA, HD and PF** volunteered to be involved in the new guidance.

**ACTION:** TWeb – inform SH of the volunteer names so this can be actioned.

It was noted IW is currently putting together a document regarding death in ICU patients. IW to forward for comments.

**ACTION: IW** – forward document to relevant people for comments

#### b) Heart Rhythm Congress

TL reported HRC will be virtual this year. Most sessions will be recorded during August. There will also be a number of live sessions. There will be no charge this year and all content will be able for 12 months after the congress.

**ACTION: JP** – resend BHRS agenda to HRC

#### b) Training Update

JP reported there had been minor changes to the curriculum documents. These have been circulated to council for comments and information. JP reported there is a meeting at SAC tomorrow were this will be covered. PF and AN will also be attending. GMC will need to give final approval. FM to send separate list of comments to JP.

**ACTION: FM** – send list of comments to JP.

#### c) CQC Response: Unregistered Providers of Cardiovascular Diagnostics

Council was circulated the CQC response yesterday. It was decided the response was not clear enough to enable distribution of clear guidance. It was decided to await further clarification and go for a collaborative view.

**ACTION: RS** – to inform council if he hears anything more from CQC

RS ended the meeting with thanks to all members for their hard work in progressing BHRS and wished AKSB luck in his new role as President. RS will chair the AGM and will then officially step down.

#### 18. Date of next meeting

To be confirmed.