

British Association for Paediatric Nephrology

President: Dr C Mark Taylor, Birmingham Children's Hospital
Tel: 0121 333 9225 Fax: 0121 333 9231 E-mail: mark.taylor@bch.nhs.uk;

Secretary: Dr Jane Tizard, Bristol Royal Hospital for Children
Tel: 0117 342 8881 Fax: 0117 342 8810 E-mail: jane.tizard@UH Bristol.nhs.uk;

Treasurer: Dr Richard S Trompeter, Great Ormond Street Hospital for Children, London
Tel: 020 7813 8305 Fax: 020 7829 8841 E-mail: trompr@gosh.nhs.uk;

www.bapn.org

BAPN Business Meeting

22nd April 2009, Liverpool

Minutes

Present: Mark Taylor (President), Alec Howie, Moin Saleem, Nick Webb, David Milford, Mohan Shenoy, Shuman Haq, Richard Holt, Jane Deal, Mary McGraw, Sally Johnson, Rukshana Shroff, Brian Judd, Judith van der Voort, Eric Finlay, Meeta Mallik, Hugh McCarthy, Stephen, Marks, Leah Krischick, Kay Tyerman, Larissa Kerecuk, Sally Feather, Jane Tizard

Apologies : Suzanne Stevens, Rodney Gilbert, Arvind Nagra, Sally Hulton,

1) Minutes of last meeting Dec 2008 -agreed

2) Matters arising

- a) CSG Minutes will be circulated soon
- b) Clinical services report still awaited
- c) Renal Biopsy audit-submitted to NDT. Minor revisions being made and then resubmitted
- d) BP in Transplants-Progress to be clarified (Action SM)

3) Presidents report

- a) MT gave a report of progress of the BAPN, highlighting the improved cohesion in nephrology across the UK. There has been significant development of all areas of the BAPN framework and particularly the development of research, audit and registry and communications was highlighted.
- b) MT was thanked by the Association for his role in the progress of the BAPN

4) RA/ RCPCH link

- a) MT outlined the issues previously circulated to the BAPN re the options of becoming a Division of the RA or accessing services of the RCPCH. The financial incentive of backing of the RA was emphasised with the RA having agreed to support the BAPN. The RA would also be responsible for auditing BAPN accounts. The excellent organisation of the RA meeting was acknowledged. The advantages of a link with the RCPCH include the physical base which RA cannot provide. It was highlighted that paediatric nephrology is unique among the paediatric sub-specialties in being almost exclusively tertiary paediatricians whereas many other groups have a larger secondary care membership. With P Houtman on the executive to champion the DGH paediatricians the BAPN hopes to increase numbers of SPIN paediatricians becoming members of the BAPN. This would increase the membership by 50+.
- b) Issues raised
 - i) There is a precedent for other groups being affiliated to the RA-e.g. The clinical scientists.
 - ii) Offer from the RA is not time limited but would be better to join in timely way.
 - iii) What is benefit to RA? RA is keen to support nephrology service throughout life.
 - iv) Would a link with the RA change relationship with RCPCH? It was agreed that it shouldn't but the BAPN would need to manage issue of general paediatrics.
- c) The options for voting on were discussed. These were agreed to be Option 1) to become a division of the RA. Option 2 to defer decision to enable information on option with the RCPCH to be clarified.

5) NHS Kidney care-Beverley Matthews

- a) Gave an outline of the structure and work programme of the NHS kidney care and the proposal to support transition across adult and paediatrics through the funding of the youth worker project.

6) Transition document

- a) This has been a joint effort from the BAPN/ RA. The document was welcomed. It was questioned as to whether the remit should be broader to include non Stage 5 CKD. It was agreed that other patients would be included in the rare diseases group who would in turn deserves special attention. The title would be changed to reflect the specific group of patients being included (Action DM).
- b) The question of the wider aspects of the CKD stage 5 was also discussed. It had been decided to make this a focussed

document but this could be developed in the future to produce and approved model.

7) Committees

- a) Treasurer
 - i) Nominations had been requested but none received. Plan to ask RT to continue until decision re RA is made.
- b) Communications officer
 - i) EF due end term of office in September-nominations for this will be requested soon to allow period of overlap.

8) Membership

- a) The following were all supported
 - i) Honorary membership
 - (1) Malcolm Coulthard
 - (2) Bob Postlethwaite
 - (3) Sue Rigden
 - (4) Dick Trompeter
 - (5) Kate Verrier-Jones
 - ii) Ordinary members
 - (1) Vaughan Lewis –proposed by C Inward
 - (2) Andrea Turner-lapse membership –rejoining

9) Communication

- a) RA-has agreed to host the BAPN website if we join the RA
- b) Website -need the BAPN to use it to make it successful
- c) EF has altered one of the GOS PIL. It was agreed that this looked excellent. This takes approximately 20mins to change. Should be reviewed by the Guidelines group to give the BAPN endorsement. EF asked for offers of help in doing this (Action ALL). It was suggested that it could be a medical student project.

10)RVD audit

- a) SM presented the audit of BAPN units –procedures were done rarely in children. However some units could not support centralisation of this service as it is required to be available locally. The expertise is available in most but with most experience in adults. It was not thought that the BAPN could support the NCG proposal.

11)Meetings – 2009-10

- a) BRS June 1st- 3rd 2009 Birmingham
- b) Exec June 19th RCPCH
- c) ESPN 2nd- 5th September Birmingham
- d) AGM Dec 4th Birmingham

- e) Histopathology meeting November 2009
- f) Bob Postlethwaite's Festschrift June 5th