

British Association for Paediatric Nephrology

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BAPN Executive Meeting

Friday 8th June 2007

Present: Mark Taylor (President)
Kay Tyerman
Jonathan Evans
Sally Hulton
Sally Johnston
Nadeem Moghal
Dick Trompeter
Jane Tizard

Apologies: Moin Saleem
Eric Finlay
Lesley Rees

1. Minutes of last meeting

These were previously agreed as a true record of the meeting.

2. Matters Arising (not otherwise on the agenda)

a. Renal Association meeting Brighton

MT reported that the RA meeting in Brighton was a great success. This has been echoed by many who attended. Excellent guest speakers included William Van't Hoff, Pierre Cochat and others. Need to stimulate interest in other BAPN members to attend this meeting which should be the scientific centre of the BAPN.

The next meeting is in Glasgow May 15-17th. This is a combined meeting with BRS. It was agreed that we should propose a transition session at this meeting. JT to make suggestion of transition via BRS and MT to contact RA.

Suggested names included: Katherine Moody - Outreach sister Leeds, Sue Dolby psychologist Bristol, Guys link (ask Chris R), Youth Worker Nottingham, Shelia Yinson, David Milford, Paul Harden Adult Nephrologist Oxford, Jean Crozier, A Watson.

Action JT/MT

b. Joint Specialty committee 26.06.07 MT unable to attend. EJT to ask C Reid if he is able to attend

c. ESPN Birmingham 2009. Plans progressing. Have established contract with MCI group. Scientific meeting to be discussed at IPNA in September in Hungary.

3. Reports

a. Treasurer

i. All paperwork now with DT. The issue of what to do with old expenses files Discussed and it was agreed to keep for 10 years and then destroy. There is

20.06.07

£10,000 in current account. Today the BAPN received £100,000 from KKR. There is no specific remit for the donation but must be for children with kidney diseases. Aim to use for national studies. There was debate as to where to keep money whilst waiting for grant application process. Money is currently in Clubs/charities centre of Lloyds. Consider keeping in High Earning Treasury a/c. Need to investigate taxation issue.

Action DT

- ii. Keep £8000pa for travel grants etc as previously agreed
- iii. Paypal has been used. Currently paid into EF's own account. This is not a longer term option due to tax liability. Standing order easier for most in the long term. After June will have accounts to identify payment status. DT will write to all who are not paying correct amount.

Action DT

- iv. Trainee account now functional
- v. Budget to be presented at AGM in December

Action DT

b. Registry

- i. Jonathan Evans has taken over as Registry Chair and acknowledged the hard work by Chris Reid to date.
- ii. 2007 Report published. The three paediatric chapters are excellent. Available in NDT on line supplement too.
- iii. Progress with the transfer of the registry to Bristol remains slow. JE to ask CT whether the problem would be aided by financial input - if so then consider use of DoH money to facilitate this.
- iv. 2007 report - many units have still not submitted 2006 data. The plan is to move to adult registry format - ie to submit planned requests to registry for data analysis prior to writing report. As data will not be in Bristol soon enough this will not be possible this year. It was suggested that this should be the last year when previous format is used.

Action JE

- v. Workplan to be developed.
- vi. Consent-Registry currently contravenes Section 60 Health and Social Care Act 2001 as only exempted when electronic submission of data. JE to circulate draft consent form to executive and when approved send out to the local leads. Responsibility is with reporting clinician.

Action JE

Action JE

- vii. Capitation fees have not been paid by many Units. It is thought that this is an administrative issue as all BAPN units agreed to pay. JE to ask Hilary to resend invoices to local leads.

Action JE

viii. Audit:

1. BP audit - data collection completed. The report is expected later this year, to be compiled by Manish Sinha
2. Biopsy audit - currently being written up by Farida Hussain
3. Future audits to be planned on anaemia and growth.
4. It was suggested there should be greater liaison with LR and the Standards and Guidelines group.

Action JE

c. Clinical Standards and Guidelines

- i. HD and PD completed - congratulations to those involved. It was agreed these should be adopted when recent suggestions had been included.
- ii. Others suggested had been Acute renal failure, Transplantation, MCGN, ? HSP.
- iii. All trainees should be involved in national audit or guideline. However it was acknowledged that a full guideline on a broad subject was a major undertaking, which is far too much to expect a trainee to do. There was debate about what guidelines were appropriate - a narrow area of interest perhaps initiated by clinical problem. There also need to be suggestions for the CS & G committee. MT to discuss with LR. These guidelines could be shared between 2 trainees from 2 different centres with support from 2 consultants. There should be liaison between CS & G committee and Registry and findings from latter may stimulate need for specific audits.

Action MT, LR, JE

- iv. Website-all audits/guidelines and expected completion dates should be available. CS & G committees should be consulted to avoid duplication.
- d. Research including feedback from York
- i. ARB study led by K Tullus -no new information
 - ii. Taurolock study-Concern that some Units will not be willing to use heparin as the control arm. JT to E mail E Finlay. **Action JT**
 - iii. UTI/VUR –the A/N study from Bristol is planning a pilot study to assess recruitment. There is a possibility of joining with UTI study.
 - iv. Nephrotic syndrome-Pilot study going well. 30/50 patients randomised. Protocol for definitive study not complete yet.
 - v. Prospective register of renal failure in neonates(Karl Mc Keever and Richard Coward). BPSU has been approached. Need agreement from each unit to survey population prospectively.
 - vi. KKR funding–as above. KRUK will provide administrative infrastructure: This will be discussed at their Exec meeting. KRUK will be asked if they can approach industry for matching funding.
Proposals for grants: "Project grants for collaborative clinical studies/trials in paediatric nephrology, which will demonstrate patient benefit within 3 years." Aim for deadline for applications to be Nov/Dec.
 - vii. BAPN research meeting planned for Oct 5th ? venue/time. Projects should be close to submission at that time. This group needs a trainee representative too. **Action SJ/MS**
 - viii. **The future of the York RCPCH meeting** was debated. MT has posted his letter to the RCPCH on the website. There are 3 responses so far. Many consider that the RA is a more appropriate place for the BAPN to have their academic meeting. If York were to become a CPD meeting then cost has to be considered. There may be better value for money at the GOS week which many general paediatricians attend. One day courses also very popular at GOS. It was agreed that the BAPN should be asked to answer a questionnaire via the "Survey monkey". MT and SH to design a questionnaire with pros and cons of options for York. **Action MT/SH**
There is an academic board meeting on 18th October to discuss the future of York. The BAPN will need to be represented **? Action MS/MT.**
- e. Clinical Services Committee
- i. Paediatric Nephrology in England: A proposal for informed specialist commissioning
 - ii. Options for the future of Payment by Results: 2008/9 to 2010/11
 - 1. NM gave a summary of the current situation (comprehensive summary attached separately). There is a meeting with D Donoghue and S Shribman in Birmingham with MT. NM and JT will join telephone conference.
 - 2. Response to "Options for the future...." Due by 15th June at RCPCH and 22nd at DOH. It was agreed that the BAPN document would be sent in response to Q 3.6 with a covering letter to be composed by NM. **Action NM**
 - 3. It was suggested there should be meeting with the RCPCH-? Simon Lenton and Vice President for Health Services. NM to ask A Craft for advice. **Action NM**
- f. Website
- i. Update from EF previously circulated
 - ii. Feedback excellent. Some disappointment that forum not being used much but it was thought that too early to assess.
 - iii. Paypal-apparently working but concern that money being kept in EF bank account. There could be tax liability. Paypal may not be the best form of payment for those with standing orders as have to remember to pay each year. EF and DT to discuss route of payment via paypal.
 - iv. Need to consider time spent on updating website. In future may need to buy in support if it is successful. **Action EF/DT**

- v. It was agreed that Bristol should buy license for Dreamweaver and pdf writer to enable MS and JT to upload documents. The association can then be alerted by E. mail to look on website for new documents.

Action

JT/MS

- g. Secretary:
 - i. Specialist services-interdependencies and on call-final document for information. This had incorporated all responses
 - ii. 3rd edition of the Specialised Services National Definition Set-final document was approved
 - iii. Committees
 - 1. ? A Watson on International Committee JT to ask. **Action JT**
 - 2. CSAC-Need to advertise for STA and CSAC chair. SH to send JT requirements for eligibility for the posts. To be circulated to the Association. Need to be advertised in Autumn RCPCH Newsletter. Deadline for submission to newsletter is August. This will enable some overlap between SH and successor. May also ask BAPN for volunteers for Paediatrician with and Interest.
 - 3. RIXG-K Verrier-Jones has stepped down. Invite C Reid to take up position on this committee. **Action JT**
 - 4. Registry Committee. ? KV-J has stepped down. JE to enquire. Trainee to be invited to join. **Action JE**

- 4. Workforce Planning
 - a. One additional post will be vacant in 2009 in Newcastle.

- 5. ACCEA-BAPN to apply for registration as Specialist Society **Action JT**

- 6. Prescribing by eGFR and BNF

There was discussion re issue of promoting use of Schwartz formula to estimate GFR to aid prescribing in renal failure. It was decided that in adults this was aimed at GPs whereas GPs would rarely prescribe without asking advice in paediatric renal failure. The difficulty in lack of uniformity of the constant between hospitals makes this very difficult to take forward.

- 7. External Committee Update
 - a. **British Renal Society** -JT will attend the next meeting and discuss 2008 meeting
 - b. **Joint Specialties Committee**-Representative for 26th June needs to be found
 - c. **Kidney Alliance**. Kay Tyerman has not attended meeting yet
 - d. **UK Transplant** -meeting today. Results of the new matching schemes suggest that paediatrics not worse off. Fewer offers but fewer kidneys refused. No poorly matched kidneys transplanted into easily matched children.
 - e. **ESPN** -no further update
 - f. **ESPN registry**-progressing. Will be sending invoice for funds for Registry.
 - g. **IPTA**-planning next meeting-Istanbul 2009
 - h. **NICE**

UTI guidelines-meeting on the 15th June with NICE. Will be attended by H Lambert, DT, MT, MS. Still have not seen revised guidelines. MT has requested. Due for publication in August.

- 8. Meetings – 2007
 - a. Next AGM Dec Birmingham

- b. Consider having general meeting in Glasgow at time of RA in May 07 - ask H Maxwell to provisionally book room for wed 14th May **Action JT**

9. New members - none

10. AOCB

11. Date of next Exec Meeting - **Friday 14th Sept 2007, Birmingham note changed date**

Friday 29th Feb 2008 Bristol

Friday June 6th 2008 To coincide with CPC

Friday September 26th 2008 Birmingham

Friday Dec 5th 2008 ? venue