

BPRS Executive Committee Meeting

Wednesday 7 December 2011

MINUTES

Present - Colin Wallis (Chair)
Amanda Equi
Malcolm Brodrie
Jon Couriel
Jonathan Grigg
Neil Gibson
Sue Frost (standing in for Chris Doyle)

Apologies: Ian Balfour Lynn
Chris Doyle
Jeremy Hull
Jimmy Paton
Rob Ross-Russell

1. Minutes of last meeting – accepted

2. Presidents report:

- BPRS Executive committee posts were clarified. The BPRS welcomed Jon Couriel as the new chair for CSAC. Amanda Equi will continue to sit on both the Exec and CSAC committees as the DGH rep.
- Julian Legg was voted on as a non executive member of the BTS SOCC to support Jeremy Hull in that role.
- The ACCEA awards remain on hold whilst guidance is awaited from the DoH.
- John Price receives this year's lifetime achievement award.
- Nominations for next year's award are sought and will be announced at the Spring 2012 exec meeting.
- The process for the BPRS travel awards was discussed and clarified. The forms will be put onto the website with applications sent to and approved by the research chair. Once approved, the president will inform the treasurer and the candidate. The candidate has an obligation to provide proof of attendance to the treasurer who will arrange re-imburement. Juniors should be encouraged to apply.
- It was confirmed that the BPRS email list will not be used as a discussion forum and will never be given out to drug or other companies no matter what the incentive.
- The BPRS website requires updating. Jeremy Hull has agreed to act as the webmeister. However he can only update that which he is given. It is the responsibility of all exec members to provide Jeremy with updated information.
- The BPRS summer meeting will take place in Glasgow on the 22nd May 2012. A joint respiratory afternoon with the infectious and immunity group is proposed.

3. Report from secretary (Neil Gibson)

Current membership 327 (12 new since April 2011)
Subscription unchanged at £50 for consultants, £30 for others.

Finances:	30 Day notice Account	£37583.03
As at 7/11/11	Treasurers Account	£25741.97
	Total	£63325

Main expenses

Summer Meeting	Small profit in 2011
BPRS Dinner	£6740 in December 2010
Subscriptions to PRR	£8502

Travel Awards

£486

Internet Fraud on account in early 2011 dealt with by Treasurer and Bank. It took the form of direct debits and subscriptions for services and insurances. Full amount refunded by bank along with a £100 "donation"/apology for their slowness in sorting it all out.

Paediatric Respiratory Reviews

Elsevier and BPRS lists merged

£26 per subscription

Delivery problems largely solved

4. Report from CSAC (Jon Couriel):

Current training posts in Paediatric Respiratory Medicine

There are currently 24 grid trainees in post, 6-8 of whom have deferred their clinical training to do research. Several trainees who have completed their training have elected to gain further ("post-CCT") clinical or research experience and others have taken up consultant posts abroad. These decisions have had an impact on the recruitment to consultant posts in the UK, several of which remain unfilled. The situation is likely to change in the next 12 months but is difficult to predict.

Appointments to Grid Training Posts in Paed Resp Med

This process went very smoothly. 15 trainees applied for the 15 training vacancies: 10 were shortlisted and 8 were offered posts after interview. All successful candidates received their first or second choice of placement. Jon Couriel commended the College on the rigorously fair and efficient selection process and thanked Mike Shields and Jayesh Bhatt for their involvement in setting questions, assessing lengthy applications forms and their interviewing skills.

However, we are currently failing to attract a sufficient number of applicants for our specialty, for reasons which are not clear. Jon urged BPRS members to encourage bright young trainees to consider pursuing a career PRM.

Trainee assessments

The current annual training reviews and knowledge base assessments will continue. The next set of training reviews will be in January. Feedback indicates the reviews are valued by both trainees and trainers. They help anticipate potential problems in completing training. There is a need to offer trainees more opportunities to give their presentations and the CSAC and BPRS will address this.

Training centre visits

The College and GMC no longer supports "CSAC training centre assessments" which have been in place for almost 10 years. The aim of these visits was to assess the training opportunities each of the 20 training centres in the UK offer. It has been proposed that "BPRS training visits" could provide valuable external peer-review of training on a voluntary basis and these will be arranged for 2012

Paediatricians with an interest in paediatric respiratory medicine

There is currently a lack of clarity about the length and the content of training required in order to be able to apply for such a post. The CSAC has agreed that it will develop such guidance, which includes achievable, appropriate and clear standards for such training.

Thanks

Jon Couriel thanked all his colleagues on the CSAC for all their work to support training.

5. Report from research committee (Jonathan Grigg):

The research committee met on Thursday 8th December. The committee has two major roles. First, to represent the BPRS on the BTS education and research committees (advising on joint symposia, speakers, and selecting abstracts for the winter BTS meeting), and the UK Respiratory Research Collaborative (a strategic committee chaired by Stephen Holgate). The committee's members also contribute to the Respiratory Study Group of the Medicines for

Children Research Network (chaired by Paul Seddon). Our second role is to keep an eye on ongoing paediatric respiratory trials - and encourage the development of new studies. The UKRRC is currently developing a proposal for a multi-factorial intervention aimed at improving children's lung function - e.g. a smoking cessation intervention in pregnancy combined with optimisation of vitamin D etc. Leads for this are Andy Bush, John Henderson and Warren Lenney. Warren is currently seeking funding to perform a systematic review to identify the most promising interventions. Ongoing studies noted by the committee were; WAIT (PI; Jonathan Grigg), TORPEDO (Simon Langton-Hewer), SABRE (Mark Everard), SPACE (Warren Lenney), David Spencer's empyema surveillance study, and Janet Stock's inflammation/lung function in young CF children study - details of these are (or will soon be) on the BPRS website. The committee agreed that we should revisit the BPRS research priorities - and ensure that new suggestions are fed into the NIHR scoping process. Possible studies include; a cross-over placebo controlled study of subcutaneous terbutaline in difficult asthma, induced sputum to identify responders to omalizumab - and to guide inhaled steroid management, formal assessment of the "Finnish" approach to the management of asthma in the community, nebulised infection-modulating carbohydrates in CF, and the applicability of helium MRI to paediatric respiratory conditions.

6. Report from the Trainees rep (Malcolm Brodlie)

Trainee issues discussed at recent BPRS and CSAC meetings held at the Winter BTS were:

- BPRS travel awards – trainees are encouraged to apply for support to attend meetings where they are presenting, see the BPRS website for full detail
- Knowledge-based assessments – inequalities in the presentations across the UK were discussed, it was also agreed that some of the current topics are ambiguous and almost impossible to deliver in 10 minutes, topics and format will therefore be refined in 2012
- ERS HERMES exam – it was clarified that it is not compulsory for UK grid trainees, but may be seen as desirable at consultant interviews
- The proposed curriculum for trainees with an interest in PRM is currently felt to be too extensive and it will be revised in 2012 along with clarification of the exact requirements to train with an interest.

7. Report from the AHP rep (Sue Frost)

The National Paediatric Respiratory Nurse Group (NPRNG) has now been functioning since our first committee meeting in September 2009 (with current membership over 90.) All nurses are encouraged to join the BPRS as NPRNG's objectives and term of reference are linked with those of the BPRS.

A study day was held on 1st October 2011 where 80 delegates attended and positively evaluated the day. The next study day will be held on 6th October 2012 and will be advertised in the New Year. For information on how to become a member or if you would like further details about the group contact either;

Chris Doyle (Chair) ; chris.doyle@alderhey.nhs.uk – 01512525776

Sue Frost (Vice chair) – susan.frost@bch.nhs.uk - 01213338014

8. Report from the ERS rep (RRR – by email)

We are planning to run a session at next year's EAPS conference in Istanbul on the 'paediatric origins of adult lung disease'. I am also in discussion with Monika Gappa about developing a database of all the training centres in countries across Europe and will be sending out a questionnaire to every country to identify lead clinicians, and gather info on the number of centres and methods of accrediting them. Lastly I would remind everyone (again) that membership of the ERS is free to those under 35, and that it gives access to a very extensive training package online, much of it developed by Jimmy Paton and friends!

9. AOB:

Calls for the next president will be out from this month with a choice to be made by end January 2012

Next meeting: Tuesday 22nd May Glasgow.

Colin Wallis
Dec 2011