

ACTACC Annual General Meeting

20:00 – 21:00 Monday 2nd November 2020
By Zoom hosted by Events Management Direct



Minutes

Actions

1 Welcome and apologies

Panel: Niall O'Keefe (NOK, President), Nick Gray (Host, Events Management Direct), Joe Arrowsmith (JA, Secretary), Aamer Ahmed (AA), Moyna Bill (KMB), Simon Gardner (SG), Mark Steven (MS), Gudrun Kunst (GK, Treasurer), Seema Agarwal (SA), Claire Boynton (CB), Mahesh Prabhu (MP, British Society of Echocardiography).

Present: 23 members registered for the AGM.
The following members attended part or all of the meeting:
Mark Bennett, Paul Diprose, Ravi Gill, Michael Hartley, Nick Harvey, Tim Hayes, John Kneeshaw, Jamie Macdonald, Gyanesh Namjoshi, Ben Shelley, Andrew Smith, Ramakishnan Subramaniam, Kunal Waghmare.

Apologies: None

2 Minutes of the last Committee meeting

Held on Friday 14 June 2019 at Crewe Hall Hotel, Stoke.
The minutes initially circulated incorrect; correct minutes were subsequently circulated.
Passed as a true and accurate record of the meeting.

Prop: MS
Sec: AA
Passed

3 Matters arising

Discussed below.

4 President's business (NO'K)

4(i) Improving quality of patient care in cardiac surgery

Discussions between ACTACC, the Society of Cardiothoracic Surgeons (SCTS) and British Cardiac Society (BCS) continue.

From April 2021, the National Institute for Cardiovascular Outcomes Research (NICOR) will change the way data are collected and presented. Until now, surgeon-specific outcomes have been published. From 2021, unit-based outcomes – death, length of ICU stay, length of hospital stay, etc – as well as perioperative information about haemoglobin concentration, intraoperative transoesophageal echocardiography and use of blood products will be used.

The frequency, conduct, format and governance of multidisciplinary team (MDT) meetings is currently under review. It is likely that there will be a recommendation that anaesthetists attend 'high-risk' MDT meetings. Anaesthetic MDT attendance has job planning implications.

4(ii) Basic accreditation in transoesophageal echocardiography

The Intensive Care Society (ICS), the Association of Anaesthetists (AAGBI) and the British Society of Echocardiography (BSE) have proposed an accreditation pathway for intensivists and anaesthetists managing emergency admissions to ICU, haemodynamically unstable patients and patients undergoing major non-cardiac surgery. Applicants are not required to be BSE members. ACTACC's role is purely advisory and will not take part in examinations or reaccreditation, although there will be a role in teaching and assessment for accreditation. The need for and the frequency of reaccreditation are undecided. Implementation of the scheme is some way off.

4(iii) Cooperation with other professional bodies

ACTACC is proud to maintain cooperation with the Councils of the SCTS, ICS and BSE. In addition, ACTACC maintains its longstanding role representing the College of Perfusionists (Society of Clinical Perfusion Scientists). Sadly, several national, joint meetings have had to be postponed.

4(iv) Election of ACTACC Committee

These will now take place in early 2021.

A new trainee representative is required as CB has been appointed to a substantive consultant post. CB agreed to mentor the new appointee.

4(v) ACTACC Linkmen / Link-persons

The pandemic has interrupted plans to reach the 30% of units that do not currently have an identified ACTACC linkman.

Plans to identify trainee linkmen and linkmen at stand-alone thoracic units have been discussed at Committee.

Linkmen were urged to re-approach RCoA and ensure that ACTACC has up-to-date contact information.

4(vi) Bill Palister Award

No award was made in 2020. It is hoped that an award will be made in 2021.

4(vii) Aortic dissection audit

Initiation of this national project has been delayed by the pandemic.

GK and JA have been seconded to a panel at the Department of Health & Social Care (DHSC).

5 Treasurer's Report (GK)

A statement of financial activities, including income and expenditure account, for the year ended 31 December 2019 were presented.

Balances as of 1 January 2020 are:

£170,880 unrestricted funds,

£70,785 restricted funds (Bill Pallister Award; £5,000 awarded to Dr David Nagore),

£2,617 endowment funds.

Total £244,282 – 4.9% increase from 2018.

GK noted surpluses from recent meetings in Stoke (£6,110) and Manchester (£12,720).

6 Other Reports (as per provided notes)

6(i) Workforce (SG)

Report delayed in wake of pandemic.

Retirements and accelerated retirements – the pandemic has had a deleterious effect on recruitment in acute specialties especially intensive care medicine (ICM), cardiac anaesthesia (2017-22).

Changes to pensions calculations may be fueling early retirements. A recent article, published in the *British Medical Journal*, suggests that so-called 'long-covid' may have short to medium term recruitment impact. Significant numbers of medical staff have contracted Covid 19. The effects of Covid 19 on recruitment are largely unknown.

Health Enterprise England (HEE) has directed funds into ICM training and there will be 100 more national training numbers in ICM. New posts will not be evenly distributed around UK and trainees will need to rotate through cardiac units to gain cardiothoracic surgical ICM experience.

Sir Simon Stevens, NHS England (NHSE), has called for a return to pre-Covid activity levels and plans to address the backlog of cases. Although this will likely require supra-contractual activity in cardiac surgery, thoracic surgery and cardiology; little information on pay and conditions is available. A survey, to include issues in this area for negotiations with managers, is proposed.

Prop: GK
Sec: JA
Passed

Prop:
KMB
Sec: AA
Passed

The implications and possible means of addressing recruitment issues were discussed at recent ACTACC Committee meeting.

6(ii) Intensive Care National Audit & Research Centre – ICNARC (SG)

The majority of units are signed up to casemix programme.

The production of regular reports is designed to encourage increased participation.

The Care Quality Commission (CQC) will expect units to contribute to ICNARC in England. Simply rebranding or labelling ICUs as 'Postoperative Recovery Units' won't remove the obligation to contribute.

6(iii) Meetings (MS)

Crewe ACTACC Annual Scientific Meeting (ASM) 2019

Thank you to Ravish Jeeji for organising a successful meeting. A small profit was returned and a portion of these funds will be made available to support appropriate projects identified by the local organisers.

Future Annual Scientific Meetings

Meetings for 2020 postponed. Glasgow will now host the ASM on the 3rd and 4th June 2021. This is still planned to be a physical meeting with the venue and all arrangements transferred from 2020 at minimal additional cost. The plan is to finalise a new programme and arrangements in the new year when the current situation is clearer.

All subsequent meetings have been put back 12 months.

Liverpool will host in 2022, Cambridge in 2023 and Cardiff in 2024.

ACTACC / SCTS Collaboration

A joint meeting is planned for November 2021. At present this is planned to be a physical meeting hosted in Manchester. No venue has been confirmed – this will be explored once the current restrictions are eased.

6(iv) Thoracic (MS)

Lung cancer screening

There have been 2 meetings of a collaborative working group including members from the SCTS, the British Thoracic Society (BTS), the Royal College of Radiologists (RCR), British Thoracic Oncology Group (BTOG), the British Society of Thoracic Imaging (BSTI), the Royal College of Pathologists (RCPATH) and ACTACC. The intention is to produce a guidance document to facilitate the early detection and management of lung cancer. Ten clinical commissioning groups have been set-up across NHS England. These will be provided the resources and facilities for lung cancer screening. Their aim is to increase the diagnosis of lung cancer at stage 1 and 2 from its current 50% to 75% by 2028.

The majority of the issues are not impacted by anaesthesia as they are investigative and diagnostic. Once diagnosed any patient will fit into existing treatment pathways across the country.

This is a valuable process and supported/endorsed by ACTACC.

High-Risk MDT Short-Life Working Group (HRMDT SLWG)

This group had been created within the lung cancer screening project. The aim is to review the current evidence in favour of collaborative assessment and management of high risk thoracic surgical patients. A guidance document will be produced describing effective set-up and practice of HRMDT.

This is supported by ACTACC. It will be a useful document, providing evidence to support any service seeking to establish a HRMDT. The contribution of ACTACC to this document will be to reinforce the value of anaesthesia and facilitate the release of anaesthetic resource and time to attend these meetings.

Thoracic linkman project

There is intention to overhaul and update the ACTACC linkman network. Expanding a thoracic presence will be incorporated into this exercise.

6(v) Education (MS)

No report.

6(vi) Research and National Institute of Academic Anaesthesia (NIAA) update (GK)

NIAA Research Board

The NIAA research board has agreed to have a representative from ACTACC. AA has agreed to accept the role..

Research Grants

The award of British Journal of Anaesthesia (BJA) and Vascular Anaesthesia Society (VASGBI) research grants (£75,000) has been delayed by the pandemic.

Audit Publications

The re sternotomy audit was published in *Anaesthesia* in May 2020. SA was congratulated. (doi: 10.1111/anae.15070)

Type A aortic dissection audit

The start has been delayed until spring (March or April) 2021.

ACTACC has been invited by the DHSC to represent research interest – priority research question workshop. Gavin Murphy (Leicester) stated that research priorities have been published. Workshop is scheduled to take place with DHSC in December – ACTACC members invited.

National Audit Project (NAP7) Perioperative Cardiac Arrest (SA)

This is delayed, probably until early 2021.

Cardiogenic shock (SA)

ICS work on cardiogenic shock is continuing albeit more slowly than was originally planned.

6(vii) British Society of Echocardiography Council (MP)

The joint ACTACC / BSE examination is now established. The original 60-70 candidates has been reduced 30-40. It is proposed that 2-4 practical, simulator-based examinations be held around country. It is the only echocardiography assessment to have a practical, hand-on session. Negotiations continue with the ICS, AAGBI and BSE. Discussions with the BCS, who require candidates to be BSE members, have broken down.

MP has been the TOE lead for the ACTACC/BSE examination for five years and wished to step down. He is happy to continue as ACTACC/BSE linkman unless an elected officer is interested in the role.

6(viii) Advisory Committee on Clinical Excellence Awards – ACCEA (JA)

The 2020 national round was abandoned in March. Applicants seeks renewal of an award had the existing award automatically renewed for a further year.

ACCEA hopes to announce the 2021 round early in the New Year as soon as ministerial approval has been granted. Because of the large number of applications anticipated, the deadlines for submission, assessment and nominating bodies will be relaxed.

Successful applicants for deferred award renewals will have their awards extended by four years.

7 Discussion

No questions from attendees.

8 Committee Roles and responsibilities

Niall O’Keefe	President, College of Perfusionists, specialist societies AAGBI, Critical Care Leadership Forum (CCLF)
K Moyna Bill	Immediate Past-President, cardiac linkmen, National Cardiac Benchmarking Collaborative (NCBC)

	Joe Arrowsmith	President-elect, secretary, newsletter, website, specialist societies AAGBI
	Gudrun Kunst	Treasurer, Research, National Institute of Academic Anaesthesia (NIAA) representative
	Mark Steven	Thoracic anaesthesia
	Simon Gardner	Workforce, Intensive Care Medicine
	Claire Boynton	Trainee representative (co-opted), women in cardiothoracic anaesthesia
	Aamer B Amhed	College of Perfusion Scientists, congenital and paediatrics, Royal College of Anaesthetists CPD Board
	Mahesh Prabhu	British Society of Echocardiography (co-opted)
9	Any other business	
	None received.	
10	Date of next meeting	
	June 2021 during Glasgow ASM – details to be confirmed	