



**Gastroenterology Audit and Research Network: East Midlands Trainees (EMiT)  
Minutes from meeting 17 November 2016 at 15.30, Hilton Hotel East Midlands Airport**

Members present: S Ahmad, T Archer, E Atallah, A Baxter, P Eddowes, P Hooper, E Hossain, R Ingram, M Kasi, K Kodali, G Major, P Oppong, D Poon, Z Rahman, N Rezwan, C Sharratt, H Tan, A Thi, R Tiwari, C Wijayasekara (and A Jawhari)

Apologies: S Chaudhary, P Thiagarajan, J White

Minutes taken by: RI and CS

Matters arising:

**1. Apologies and register**

The register was taken and apologies received. The inaugural Annual General Meeting (AGM) was quorate with 20 Members present. No Member had given notice of their intention to exercise voting rights by proxy. AJ observed meeting as Training Programme Director (TPD).

**2. Approval of agenda and decide chair for AGM**

Notice of the AGM and circulation of the agenda were in line with the provisional constitution. The agenda as circulated was approved without opposition. AGM chaired by RI without opposition.

**3. Approval of minutes of meetings 03/07/16 and 12/10/16**

The minutes of both meetings as circulated were accepted without opposition as true and complete records of these meetings. All action points from both meetings have been completed.

**4. Approval of constitution (v1.4)**

The constitution was discussed. The current version as circulated (v1.4, November 2016) was accepted without revision and unanimously adopted by all Members without opposition. In line with the new constitution of the GARNet, all current higher specialist trainees in gastroenterology in the East Midlands were automatically considered to be Members (n=50).

***Action: Members to complete Form 1***

**5. Election of officers: (a) chair, (b) vice-chair, (c) secretary, (d) treasurer, (e) IT lead**

Process outlined by RI. No Member had given notice of their intention to stand for election in absentia. The details of the five roles were read out from the constitution by GM. Discussion over stage of training by PE, ideally to favour trainees who were not near to CCT. RI was very keen that both North and South trainees be represented, similar to the engagement across the region in the PPI in AUGIB audit.

The officer roles were raised in turn and Members given the opportunity to stand for election. None of the roles were contested such that no hustings or ballots were required. Members were duly elected unopposed as follows to serve until the next AGM (approximate 12-month term) – chair: Richard Ingram, vice-chair: Giles Major, secretary: Caroline Sharratt, treasurer: Ejaz Hossain, IT lead: Andrew Baxter. All officers had signed Form 1.

***Action: officers to complete bank signatories forms, officers to arrange committee meeting***

**6. Annual report and accounts**

The accounts were outlined by RI. The initial £100 tranche of the two-year grant of £1000 was presented to the GARNet at the hundredth meeting of the Midlands Gastroenterological society on 11/11/16. Funds of approximately £11 have been committed for the website domain name. We are in the process of opening a community directplus business account with the Co-operative Bank.

***Action: RI to complete opening of bank account with ongoing management by EH***

## 7. Website update

Currently the GARNet has a facebook page and domain name. Work is ongoing to create a dedicated website, ideally to include a members' only area and data collection infrastructure. Dropbox or equivalent could potentially be used as an alternative in the interim. Other trainee networks have externally commissioned their website, which is an option that could be explored for the GARNet.

**Action: committee to discuss**

## 8. Discussion/proposal of Honorary Members (consultants)

Several consultants from across the region been supportive of the GARNet and its aims, who might wish to be more involved such as in the committee. All consultants acting as a Site Consultant in the PPI in AUGIB audit can now be approached to become Honorary Members. As such they would need to sign Form 1 to participate in the authorship. No other proposals were made by Members.

**Action: committee to discuss and seek to appoint Consultant Committee Members**

## 9. PPI in AUGIB audit update

RI thanked Members and Site Project Leads for all their efforts with the audit. This started at 10 sites across the East Midlands on 01/11/16, though has been more challenging at some sites particularly where fewer registrars are placed. The GARNet is showing the way in delivering a multi-site, trainee-led audit against national criteria/standards, and needs to capitalise on that momentum. Members' commitment and enthusiasm is exemplified by the large number who stayed for the AGM.

Site Project Leads updated the room on patient numbers thus far. Leicester hospitals in particular have recruited a large number. We should be on track for around 100 patients across the region. Completion of the audit proforma can be time-consuming, particularly for larger sites, and GM suggested that Sites look to recruit other motivated junior doctors to be involved. They can become Associate Members. A complete dataset is desirable.

DP raised the issue of whether inclusion in the audit period is based on date of admission or date of endoscopy. RI confirmed it is based on date of admission, such that patients admitted 31/10/16 who underwent OGD on 01/11/16 are ineligible, whereas those admitted on 30/11/16 but who undergo OGD thereafter will be eligible. The whatsapp group for the study team is a good way to clarify uncertainties and to raise any challenges.

GM suggested that we agree and work towards a deadline by when all data collection at each site must be completed. Various dates were discussed at 19/12/16 was unanimously agreed. Other discussions and future plans are as per Action points. Submission to Frontline Gastro is anticipated.

**Action: Site Project Leads to review progress locally and submit local data by 19/12/16, GM and RI to discuss analysis and have this completed by December 2016 with a view to sharing regional data and proposed action (note that site-level data will be anonymous), site-specific discussion of quality improvement actions should be planned for Jan 2017, the Regional Project Leads will update Members at teaching on 26/01/17 and the plan for implementation and re-audit will be finalised, conference deadlines are too soon to complete the audit cycle before preparation of the abstract though these data should be available by the time of the BSG and MGS meetings**

## 10. Discussion/proposal of other projects and collaboration

Proposing and delivering future projects is in the hands of the GARNet's membership. RI mentioned some of the ideas that have come out of meetings and discussions, for example: following patients with Crohn's disease post-operatively to evaluate different aspects of care together with the East Mids anaesthetic and surgical trainee groups, an audit of hepatorenal syndrome management together with the West Mids, big data projects looking at IBD or endoscopy datasets. Other ideas have focused on hepatology and endoscopy projects.

GM suggested that trainee-led networks are well suited to delivering multi-site audit, service delivery evaluations and research feasibility studies. Audits should be against established national criteria and standards. Two projects per year undertaken by the GARNet was suggested as a reasonable target. RI suggested that these need not necessarily involve every single site but those

with trainees able and willing to take part. Project proposal forms have been developed by other research networks and the steps are outlined in the constitution (section 7). Potential approaches to decide between projects would be a dragons den-style meeting or through discussion. Ultimately the GARNet is a democratic organisation whose Members will decide.

RT highlighted the need for trainees to undertake QIP alongside audit as part of our curriculum. RI confirmed that our TPDs were happy that involvement in audits through the GARNet would be recognised at ARCP, provided that site project leads planning to count their involvement were fully involved in all stages of the audit (see section 8 of the constitution).

RI explained that the BSG are planning a national training day focused on trainee-led research on 20/03/17 in Birmingham. Our TPDs are happy that this be recognised as a training day using trainees' internal study leave allowance. The afternoon will have workshops where projects can be discussed and refined. An aim would be to apply for CORE funding and, as a partner organising of the NIHR, any successfully funded projects would be eligible for portfolio adoption and support with delivery.

Members agreed a timeline where future projects are proposed/prepared in January 2017 (training day is 26/01/17), these are presented/discussed and voted on in February 2017 (training day is 01/03/17), and interested trainees attend the BSG symposium in March 2017 (20/03/17).

***Action: committee to discuss pre-requisites/processes such that this timeline can be delivered***

#### **11. Any other business**

Members were happy to keep discussion of GARNet projects and similar trainee-led time as part of regional teaching days. This is supported by TPDs.

*NB: other training issues (separate to the GARNet) were raised – SEC rep for South with 2 year term to interlace with North rep term, feedback on various topics required, April 2017 teaching and SCE.*

#### **12. Date of next AGM**

Anticipated to be 19/10/17 alongside first regional teaching day after rotation in September 2017