

**Minutes of the BSGE Council Meeting  
Held on Tuesday, 29th November 2016 from 18:15 to 21:00  
At the Royal College of Obstetricians and Gynaecologists in the U8 Clothworkers Room**

**Present:**

- Dominic Byrne, President (DB)
- Sanjay Vyas, Vice- President (SV)
- Mark Whittaker, Honorary Secretary (MW)
- Natasha Waters (NW)
- Justin Clark (JC)
- Tyrone Carpenter (TC)
- Sameer Umranikar (SU)
- Chris Guyer (CG)
- Kirana Arambage (KA)
- Elizabeth Ball (EB)
- Fevzi Shakir (FS)
- Donna Ghosh (DG)
- Ertan Saridogan, (ES)
- Atia Khan (AK)

<b>1.</b>	<b>Welcome &amp; apologies for absence</b>
	Apologies received from Kevin Phillips, Thomas Ind, Shaheen Khazali and Gillian Smith. Justin Clark, Ertan Saridogan and Fevzi Shakir delayed arrival.
<b>2.</b>	<b>Declaration of Interest</b>
	DB explained that Declaration of Interest will be a standing item at each Council meeting. Council members will need to declare their interest at the beginning of each meeting. TI will circulate the DoI policy for consultation for a period of 28 days after the Council meeting to be adopted as policy. Declarations: DB declared he attended dinner sponsored by Gideon Richter prior to the Fibroids meeting. He has also been invited to be the paid lead faculty for Olympus ST5+ training programme. SV declared he is paid preceptor for Olympus and Ethicon courses. No declaration of interest from DG. TC declared he attended dinner sponsored by Gideon Richter prior to the Fibroids meeting. He is also paid faculty and mentor for Olympus ST5+ training programme. No declaration of interest from KA. SU declared he teaches on Ethicon courses. No declaration of interest from EB. NW declared she sits as medical expert on Heavy Menstrual Bleeding NICE committee. No declaration of interest from MW. CG declared he teaches on Ethicon courses.
<b>3.</b>	<b>Declaration of any other urgent business</b>
	No any other urgent business was declared.

4.	<b>Minutes of the previous meeting</b>
	Minutes of BSGE Council meeting held on 20 <sup>th</sup> September 2016 at RCOG were accepted as a true record.
5.	<b>Matters arising from the minutes</b>
	<p>MW asked for update on following action points from Council members.</p> <p><b>5.4.3- TC will start national Audit of Hysterectomy project with a trainee.</b>  TC reported he has tested several OPCS codes for HES data analysis and has cross-checked the findings with his own data. He has now identified a way to minimise error to 3% and is ready to roll this out to use on national data.  This action point is now complete.</p> <hr/> <p><b>5.4.8- Morcellation document from Eddie Morris to be submitted to RCOG by ES and to be published on the BSGE website.</b>  ES has contacted EM. Morcellation document is now with the Quality department at the RCOG and awaiting their approval.  This action point is pending.</p> <hr/> <p><b>5.6.4- MW, SK, SU, NW, FS and DG will read the documents and email AK to confirm that they have read all the Trustee documents by 30<sup>th</sup> September.</b>  This action point is now complete.</p> <hr/> <p><b>5.6.7- TI will commission BSGE Anatomy drawings for a laparoscopic textbook, to the value of £2,000.</b>  MW reported TI has spoken to Russell Luker in Bath who would like to be involved in this project and MW will hold a teleconference soon. More discussions will be held at the Oxford workshop in 2017.  This action point is pending.</p> <hr/> <p><b>5.8.9- NW will send a draft letter to DB to outline her concerns on outpatient hysteroscopy current practices for the ATSM officer.</b>  Letter has been received by DB who will draft a letter to new ATSM Officer at the RCOG.  This action point is now complete.</p> <hr/> <p><b>6- JC and ZK to complete SICS programming in preparation for pilot in December/January 2017.</b>  This action is now complete.</p> <hr/> <p><b>6- TC, KP and ES will send out updated sponsorship letter from Hull ASM 2017.</b>  TC confirmed letter has gone out. £65k pledge has been received to date.  This action point is now complete.</p> <hr/> <p><b>6- BSGE Council members to suggest suitable Alec Turnbull lecturer to BSGE Officers by 20<sup>th</sup> October.</b>  MW confirmed Professor Arnaud Wattiez will be the Alec Turnbull lecturer at the ASM in Hull. Professor Wattiez attendance costs will be covered by Storz.  This action point is now complete.</p> <hr/> <p><b>6- ES to initiate joint meeting with BSGI on Endometriosis, using the new joint meetings guidance documents.</b></p>

	<p>ES confirmed BSGE/ BSGI meeting will be held on 10<sup>th</sup> November 2017 at the Mercedes Centre in Surrey. An extra day will be used for Hands on Ultrasound training. Professor Nazar Amso has spoken to GE about sponsorship. Saikat Banerjee will be organiser from BSGI. CG will be the meeting organiser for BSGE. This action point is now complete.</p> <p>-----</p> <p><b>6- BSGE President, Treasurer and ES will meet with Pelican lead and explore financial arrangements.</b> This action point is now complete.</p>
6.	<b>Agenda items</b>
	<b>Alec Turnbull Lecturer</b>
	DB confirmed Professor Arnaud Wattiez will be Alec Turnbull Lecturer at the ASM in Hull. ES arranged this at the ESGE conference in Brussels. Professor Wattiez visit will be sponsored by Storz.
	<b>ASM 2017- Hull</b>
	<p>ES reported that he visited venue for the ASM in Hull with AK on 18<sup>th</sup> November. The floor plan for Hull City Hall was displayed for Council members to see the layout. KP has proposed partitioning the main hall into two, to use for main meeting presentations and the Platinum sponsors. He suggests the Mortimer suite for other companies. An alternative option is to run the presentations in the Mortimer Suite, which can hold 210 seats and have repeater screens in the Rotunda for overflow. The main hall would then have all industry stands, posters and all catering.</p> <p>Both options were discussed in detail, at the meeting. Council unanimously favoured using the main hall as the exhibition area, posters and catering, and Mortimer Suite for the main meeting presentations. Reception drinks will be held at the Gallery opposite Hull City Hall and Gala dinner in Mortimer Suite.</p> <p><b>ACTION: DB, ES and AK to speak to KP about floor plan layout at the ASM in Hull</b></p> <p>KP sent a report which describes three pre-congress masterclasses prior to the ASM.</p> <ol style="list-style-type: none"> <li>1. Simulation in gynaecological surgery- Human factors which can make a difference.</li> <li>2. Hysteroscopy simulation training</li> <li>3. How to make laparoscopic surgery happen and be financially viable in the modern NHS.</li> </ol> <p>DB reported Karolina Afors will lead a BSGE HOT session on suturing. BSGE Council members trained for the HOT sessions are expected to participate in this.</p> <p>In the main meeting presentation topics need to link to the theme, ‘Where we are now and Where we are going?’. Text and photos are needed to update the ASM microsite, which should be launched before Christmas. Local hotels should be sourced for delegate’s accommodation.</p> <p>DG reported she is planning a ‘Pecha Kucha’ session, which will run as a separate oral presentation session as part of the main programme. The format of the presentation will include 20 slides each of 20 seconds (6min 40sec in total). Each slide within the slideshow should be programmed to automatically change at 20 seconds. This ensures a fast paced and exciting presentation with no opportunity for the presentation to overrun. A submission process will be established by FS and DG, with the abstract being submitted on a standard template and include the full presentation. This session will be part of one of the free communication sessions. Trainees can Chair the session and advertise via RIGS. TC will speak to Stryker to source a prize. Voting for best presentation can be done by voting at the presentation.</p>

	<p><b>Advanced laparoscopic surgery ATSM update- RCOG changes in recruitment process</b></p>
	<p>DB reported that the RCOG has devolved the selection process for the Advanced laparoscopic surgery ATSM. Heads of School and Deaneries are now working on a recruitment process. BSGE has expressed concerns about a fall in quality of the training and this subsequently putting patients needing highly complex laparoscopic surgery at risk. BSGE comments have been noted but no changes have occurred as a result. DB spoke to new ATSM officer who is sympathetic to BSGE concerns but the situation will remain at it is. BSGE Officers have discussed this and have decided to be more robust on this. DB has since spoken to new VP for Education at the RCOG who has accepted BSGE points and is supportive. She has given RCOG approval to proceed with an application for sub-speciality training recognition.</p> <p>Ultimately the BSGE expects two levels of laparoscopic surgeon to develop; 1. A Consultant gynaecologist with a special interest in laparoscopic surgery who would be trained by the benign surgery ATSM and 2. A Consultant gynaecologist - Endopelvic surgeon who will sub-specialise in endopelvic surgery.</p> <p>KA congratulated DB and made some suggestions. It was agreed that SV and Alfred Cutner originally who originally wrote the ATSM will take the project forward.</p> <p><b>ACTION: DB to Second Alfred Cutner to work with SV on developing Subspecialty training application to the GMC</b></p>
	<p><b>LapHyst Project update</b></p>
	<p>DB reported that several changes had occurred since the last Council meeting. DB, TI and ES met with the CEO of the Pelican Cancer Foundation (Sarah Crane) to discuss administration and this was a constructive meeting. SC presented a detailed financial spreadsheet, which DB and TI had not seen previously. SC proposed that Pelican carry the expected financial loss in the first year but keep all profits in subsequent years. The model involved large sums and was heavily dependent on industry sponsorship.</p> <p>Subsequently BSGE members met with the three current sponsoring companies of the LapHyst project. Unfortunately all 3 companies have declared they are unable to fund the LapHyst project in 2017. The Pilot project is still in progress and currently the budget is in balance. Olympus have paid £30k for the preceptor module directly to the BSGE and this spending will need to be tracked for their records. Ethicon and Storz have agreed to honour their preceptor module contribution after some persuasion, but will make payments retrospectively direct to the preceptors. One delegate has paid contribution without participation in the project, which needs to be resolved. The Pilot study needs to be completed before the ASM and the findings presented at the Hull ASM by MW.</p> <p>MW presented slides on behalf of the LapHyst project working group which includes MW, NW, JE and ES. JE sent his apologies. MW reported since the last meeting, 12 trainees have been appointed a preceptor. All but one has applied for honorary contracts. The aim is to complete the project and present data to the Council meeting and ASM in Hull in May 2017 to decide on next steps. Due to uncertainty and recent issues, Olympus, Storz and Ethicon cannot commit financially to the project. Feedback from the sponsoring companies has been good. There was one complaint from a delegate about not receiving reading material in advance. This was resolved.</p> <p>MW expressed his concerns that the Olympus Training programme for ST5+ is now to include Consultants. MW explained the model used for the training programme is very similar to the LapHyst project for Consultants and felt this adds confusion, whilst the LapHyst project is still running its pilot. There was further discussion around the Olympus Training programme and the general consensus from Council was to ask Olympus to limit their training to trainees, to prevent confusion.</p>

	<p><b>Promoting BSGE Internationally - Affiliate membership</b></p>
	<p>KA reported that many doctors outside the UK wish to benefit from BSGE membership. This was echoed by SU. After speaking to SK, KA and SK would like to propose 'Affiliate BSGE membership' for overseas members. Affiliate members will not receive hard copy of the journal and would pay reduced membership fees. The fee structure still has to be determined. This change would not increase BSGE costs but would increase membership and income.</p> <p>DB reported that TI is working on AAGL and journal costs to discover if introducing Affiliate members would adversely affect costs. TI wishes to survey all BSGE members about these costs and their views on BSGE spending, which could include questions about Affiliate membership as a concept.</p> <p><b>ACTION: TI will work with KA &amp; SK to develop the Affiliate membership package for overseas members. If acceptable to officers it will be put to membership at the BSGE AGM in May, with three months' notice.</b></p> <p><b>ACTION: TI to undertake membership survey and include questions about affiliate membership.</b></p> <p>DB reported that ESGE would like the BSGE to become an official GESEA Training and Testing Centre to host their exams. GESEA is European diploma programme. Costs are involved. ES explained that ESGE have testing centres and diploma centres. ESGE is offering individual countries the opportunity to host membership exams internationally. BSGE would have to buy equipment for the training centre to become semi-independent diploma centre. Hysteroscopy sets would cost the most at 2600 euros each. They have suggested buying 10 sets but BSGE may purchase fewer sets. There are initial costs but it is possible that it will bring income for the society in the long run.</p> <p><b>ACTION: ES to draft a paper with the GESEA proposal with detailed costings for council to review.</b></p>
	<p><b>Treasurer's report</b></p>
	<p>TI sent a video presentation for Council members to hear his report.</p> <p>TI reported data protection policy and travel policy is to be reviewed by council before the ASM. Charity Governance document should be read by all Council members. New risk assessment will be reviewed before the ASM. TI will circulate a membership survey in few weeks time. 2015 accounts have been submitted to the Charity Commission. Most up to date finance are available on the Treasurer report; and current bank balance is £487k.</p> <p>TI introduced the new declaration of interests (DOI) policy and specifically asked Council to consider whether they agree to disclose their DOI's on the members section of the website. It was agreed to allow Council time to read the policy and decide on this issue.</p> <p>DB reported documents will be sent for consultation after the council meeting and decision to display declaration of interest on the website will be made after the 28 day consultation period.</p> <p>FS asked if trustee liability insurance was in place as planned and if he could see a copy of it.</p> <p><b>ACTION: AK will circulate copy of the DOI policy for 28 day consultation, and the Trustees liability Insurance to Council members. Members to email comments direct to TI regarding DOI policy and website publication of DOI's.</b></p>
	<p><b>RCOG Partnership agreement</b></p>
	<p>SV reported the RCOG hosts the Specialist Societies meetings and TI attended last one in place of DB. A new</p>

	<p>group of officers have been appointed and they have developed a generic partnership agreement for all specialist societies. Officers have read it and the agreement explains reciprocal arrangements between RCOG and BSGE about promoting specified and agreed products and services. The document is well balanced and in principal, Officers are happy with it. However TI will renegotiate room hire and catering costs. Officers will also discuss profit share of joint RCOG/BSGE meetings with the RCOG and keep Council informed.</p> <p><b>ACTION: TI to renegotiate RCOG room hire costs and Officers to explore the RCOG Partnership agreement further and report back to Council.</b></p>
	<p><b>Access to Endometriosis centre database for research purposes</b></p>
	<p>EB is working on 'Endo App', which is research project and would like access to the data from Endometriosis Centre database for this research. CG reported that a process for requesting use of Endocentre data was being developed and will be circulated for consultation and then come into use.</p>
<b>7.</b>	<p><b>Portfolio sub-committee reports</b></p>
	<p><b>Endometriosis centres report</b></p>
	<p>CG report was accepted. SV commented that the malignant histology field should be changed to reduce the likelihood of incorrect data being added.</p> <p><b>ACTION: CG will work with Jaanus of ICE ICT to change the malignancy field format on the database.</b></p>
	<p><b>Industry relations extended report</b></p>
	<p>TC report was accepted.</p>
	<p><b>Nurse &amp; Paramedic report</b></p>
	<p>GS report was accepted.</p>
	<p><b>Research &amp; Audit report</b></p>
	<p>JC report was accepted. JC presented slides on SICS project. JC reported that the programming of BSGE Surgical Information Collection system (SICs) is being finalised. Hysteroscopic and laparoscopic procedures are nearly completed and plan is to complete the pilot by the end of January. BSGE Council members will get access to this first and comments are welcomed. Chosen interested trainees are welcome to join in the pilot. This project is for BSGE members only.</p> <p><b>ACTION: JC to forward access details for SICs project to AK to forward to Council members with login info.</b></p> <p><b>ACTION: AK to book a stand at Hull ASM for SICs project and add flyers to delegate bags.</b></p>
	<p><b>Trainee representatives report</b></p>
	<p>FS &amp; DG report was accepted. DB congratulated FS for appointing RIGS representatives. FS reported that Storz have offered their training facility in Slough as a potential venue for running laparoscopic courses for trainees at a reduce cost.</p> <p><b>ACTION: FS &amp; DG to forward the laparoscopic survey to trainees committee at RCOG.</b></p>
	<p><b>Meetings Convenor report</b></p>

	ES report is accepted. BSGE Officers will work on BSGE ASM 2018, Edinburgh with Andrew Horne.
	<b>Guidelines report</b>
	EB report was accepted. EB was congratulated for her progress on guidelines. When the guideline is finalised It will be circulated to Council members for comments and may open for consultation for members via BSGE website.
	<b>Laparoscopy report</b>
	SU report was accepted. SU was congratulated on the last ATSM meeting at the RCOG.
	<b>Awards report- BSGE Keyhole Innovation awards</b>
	KA reported that he would like to introduce BSGE Keyhole Innovation Awards to recognise the most innovative and forward thinking gynaecological endoscopy related technology or quality improvement in patient care. KA also added some detail on the planned Oxford Cadaver course.  <b>ACTION: KA to speak to TI about the innovation awards.</b>  <b>ACTION: KA &amp; MW to send report on Cadaver course in Oxford to TI, ES and TC.</b>
<b>8.</b>	<b>AOUB</b>
	SU congratulated JC and ES on getting the Hysteroscopy Fluid guideline published.
<b>9.</b>	<b>Date, time and venue of the next meeting</b>
	Wednesday, 17 <sup>th</sup> May 2017, Hull Time and venue TBC.