



Chair: Louise Craddock
Vice Chair: Jeremy Lavy
Secretary: Deborah Mawman
Treasurer: John Briggs

Minutes of BCIG Council Meeting
22nd October 2009, RNTNE, London
Time: 11.00am - 3.00pm

Present

Louise Craddock (Chair)
Jeremy Lavy (Vice Chair)
John Briggs (Treasurer)
Deborah Mawman (Secretary)
Sheena Round (Membership Secretary)

Chris Raine
Andrew Reid
Shak Saeed

1) Agreement of previous Minutes

Minutes of last meeting not available

2) Review of actions

Not discussed

3) Matters Arising

Not discussed

4) Adult QS document for website

A draft format of the adult OS document is on the website. Check that RNID are happy with revisions and create final PDF version of document. **Action JL.**

5) Password for BCIG website

Council discussed whether there was a need for members only section on website which would be password protected. A decision was made that this was unnecessary since it was unlikely that any information on the website would be of a highly sensitive or confidential nature, but that the cost of setting up a password for the website would be explored. **Action JL.**

6) Paediatric QS document

Jane Martin (Bradford CI programme) is in the process of revising a draft document which will be a joint BCIG / NDCS document to update the 2005 QS. Jane will send a copy of the revised document to coordinators for comments and the document will be reviewed at the next council meeting in January 2010. **Action JM.**

7) Job descriptions for Council posts

Agreement was made that a short job description for each of the officer posts on the BCIG council needs to be written. This only needs to be a series of bullet points but will help with new members taking up posts to have an understanding of the role. There can be a generic one for ordinary officers. **Action all current and former council members.**

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8) Minutes of council meetings for membership

Agreement was reached that an edited version of the minutes of the council meetings would be emailed to the BCIG membership and that the minutes would also be posted on the website. This would improve communication between Council and the membership. **Action DM / JL.**

9) Guidelines for new centres and expansion of current CI provider centres

The draft document was discussed together with feedback from coordinators who had received a copy of the guidelines and had been invited to comment. LC thanked the authors of the document and members of BCIG who had contributed to it.

Currently pressure is being applied to commissioners from CI users and user groups who would like to be able to attend a CI centre closer to home. Elderly people who have difficulty travelling and parents who are unable to take a time off work may find it difficult to access the existing services. Where there are outreach clinics in operation users report that they want access to the service straight away rather than have to wait for a month. Waiting lists in some centres indicate that there are difficulties for existing centres coping with the increased demand for implantation, especially in the short term with the extra demand from patients wanting a contralateral implant. It may be appropriate that new centres will be required and that existing centres should have a role in mentoring new centres rather than being obstructive.

There is concern however that where local demand is already met in a region, any new centres starting may have an injurious impact on existing centres. The financial implications for existing centres because of the potential reduction in the number of cases if a new centre is established close by, may include redundancy.

It was recognised that in the UK we do not want to have numerous new centres performing small numbers of cases and without the proper infrastructure to support a quality CI centre. However BCIG do not want to set the bar too high so that new centres are unable to start up. Instead BCIG would like to be supportive at a national level to ensure that the pressures of demand and capacity are met throughout the UK.

It was agreed that there is a need to maintain the quality of the provision of CI services throughout the UK and that the current quality standards documents already reflect this. It was also agreed if it is the case that there is a need for more CI centres in the UK that BCIG could have a role in determining where this expansion should happen, and in a controlled way. BCIG needs to determine where demand is currently not being met. This will be done in collaboration with existing centres. Information is needed from CI coordinators about the current demands for provision and the difficulties experienced with waiting times and ongoing maintenance.

A meeting will be arranged with David Kelmlesley, the pan-London Specialist Commissioner to discuss whether there may be a role for a National Commissioner for cochlear implantation and to discuss the National situation in terms of the population and current provision, any failings and future funding problems.

It was agreed that the Guidelines for new centres are too prescriptive and that standards required of a CI centre are already addressed in the existing Adult and Paediatric Quality standards. **Action LC, JL, CR.**

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10) Guidelines to host the BCIG meeting and BCIG contribution to the AGM

The Council discussed the document written by Chris Raine. It was agreed that this is an extremely helpful document covering all aspects of the organisation of the annual meeting. A copy of the document will be made available on the BCIG website. **Action JL.**

11) BCIG Membership Update

Currently there are 39 non professional members; 156 Professional (formerly Full) members; 4 full overseas members (receive the journal); 31 honorary members and 4 individual corporate members.

There is a problem currently that some members are not receiving the journal. Once these members have been identified they will receive backdated copies of the journal.

Council agreed to encourage their Team colleagues to join BCIG.

The category of honorary membership was discussed. Historically this has been awarded to the invited overseas speaker at the annual BCIG meeting. Recently it has also been awarded to retiring surgeons who have made a significant contribution to the field. Since there are often several International Guest Speakers at the BCIG meeting and also key figures retiring in other professional groups, it was agreed that there needs to be a fairer system for awarding Honorary membership. In future, nominations will be invited from Members at the conference and considered by council. Forms may be sent to members with the meeting information. **Action SR.**

12) Bi Ci Audit and BCIG

NBRUH can no longer support the audit and the University of Southampton will contribute instead. A steering group meeting will be held at UCL in Nov to discuss data collection. John Briggs will liaise on behalf of BCIG with the non surgical group about the study. Shak Saeed is currently on the steering group. BCIG have been asked to contribute financially to the project. It is not known what the current funding requirements are and this needs to be determined. **Action JB.**

13) Bilateral Implantation in adults

A study involving bilateral CI's in adults is being proposed by Quentin Summerfield. The National Institute for Health Research (NIHR) will provide costs of 2nd implant for adults over next 3 years & provide 10 years of maintenance. NICE may defer the review of bilateral implantation due in 2011 until this study is completed.

14) Sequential Implant Profile (SIP)

It was recognised that there are problems securing funding for sequential bilateral implantation in some parts of the country. The SIP is a document that was devised by the Scottish CI Programme and can be sent to commissioners to support the request for funding a second CI. With the permission of SCIP, the document will be put on website and can be modified to suit local requirements. **Action LC / JL.**

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15) Change in Publisher for CI International

The publisher has changed from Wiley to Maney publishing. Maney approached Wiley to buy out the CI International journal. Maney are a smaller publishing house and they specialise in niche journals. There is a new agreement between BCIG and Maney which was discussed by Council and signed off by LC. The cost of producing the journal is £57 pp which includes publishing and postage. There has been no increase compared to the previous cost. The annual payment to Maney by BCIG is due at the end February. Information about the BCIG in the front of journal needs to be updated. **Action:** LC

16) International Affiliations

Similar groups in other countries would like to adopt the BCIG's CI International journal and make it their own official journal. Requests have been made by the William House Ear Group, the Canadian Cochlear Implant group, the South African CI Group and the Indian CI Group (CIGI). It was agreed that this would be a very good idea for developing international relations and exchanging academic work and would also boost the readership of the journal.

17) Membership query

A long standing BCIG member would like to cancel her membership to BCIG but still obtain copies of the journal. It is possible to subscribe to CI International without being a member of BCIG.

18) ICTOD guidelines

In the process of being revised and will be circulated to TOD group.

19) ICSALT guidelines

In the process of being revised and will be circulated to SLT group.

20) PbR tariff

Paediatric implantation is no longer subject to a 78% top up. It is apparent that the cost of providing a CI to either adults or children varies throughout the UK. At least one centre charges for the cost of the speech processor separate to the PbR tariff.

Tracey Twomey (Nottingham CI team) is currently collecting costs of impanation from CI centres. It was agreed that the information from centres about their costs is extremely important to collect. It is likely that if some centres are not charging enough this may lower the PbR tariff even further.

It is possible that the NHS supply chain may be able to bring the cost of the device down by purchasing on behalf of all UK teams. They would be able to supply the device within 24 hours although they would charge a distribution fee. Because they contract on behalf of UK teams they will be able to pay back some of the savings of the bulk purchase to CI teams. It is not likely that the busier implant centres will benefit from pro rata payments.

Action: CR to liaise with TT about costs.

21) MR scanning of CI patients

SS reported that there is no uniformity about whether radiology departments are able to scan CI patients. The practice is very variable across the UK. Some radiology departments are prepared to scan with a bandage in place. Others are not prepared to scan at all. Manufacturers may need to demonstrate unequivocally that it's safe to scan a patient who has been fitted with a cochlear implant.

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JB reported that the Cambridge team are doing studies in this area and that they would be interested to collaborate with other centres in this.

SS will summarise the responses he's received from radiological CI centres across the UK.
Action SS.

22) UK Auditory Brainstem Implant (ABI) working group

The UK programmes involved in the provision of ABI's are to meet to pool data and share experiences at a meeting to be held on 2nd December in Manchester. Barry Nevison will attend from Cochlear. A National commissioning bid has been submitted to fund NF2 programmes in the UK and this is being ratified by Parliament. At the meeting in Manchester SS will present a consensus report from an ABI meeting in Istanbul in August this year which discussed ABI's in non NF2 patients.

The ABI Group will report back to BCIG after the meeting in December.

23) Freedom of information request

A request for information has been received via email from a member of the public concerning outcomes of implantation. As a Professional organisation, BCIG are not obliged to reply to FOI requests. Individual Trusts, however, must respond within 21 days. Despite LC seeking clarification of what information is needed no further communication has been received.

24) Article in GP journal about CI's

LC had received an invitation to sponsor a 2-page article in a free journal (National Association of Primary Care Review) which is sent to all GP's - 15,000 copies. It was felt that a) the cost at approx £5,000 was too high and b) the journal was not of a good calibre but that this information may be useful for another GP journal. AR to contact the GP journal Update to ask if they would like an article about CI's. **Action AR.**

25) Feedback from co-ordinators meeting

Discussions at the coordinators meeting included the bilateral audit; PbR tariffs; cost of System 5; QS adult bilateral implant study. Cochlear presented a service development tool kit which may enable teams to demonstrate to commissioners the effectiveness of CI's and will assist in budget planning. Cochlear will run training workshops for CI centres about the toolkit.

26) AOB

27) Date of next meeting

28th January 2010. Venue TBC: Boardroom RNTNE.

28) Close of meeting

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