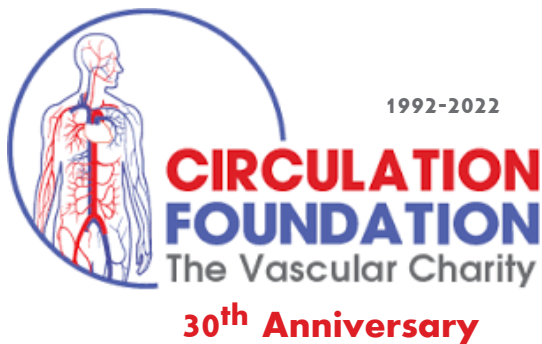




OF GREAT BRITAIN AND IRELAND

# Yearbook 2022



1992-2022

**CIRCULATION  
FOUNDATION**  
The Vascular Charity

**30<sup>th</sup> Anniversary**



30TH ANNIVERSARY

THE SVT 1992-2022

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## Elected Council 2021/22



From left to right: **Back row** Alistair McCleary (Honorary Treasurer), Douglas Orr, Ian Hunter, Ciaran McDonnell, Marcus Brooks (Honorary Secretary), Patrick Coughlin and Sadasivam Selvakumar. **Front row** Keith Jones, Meryl Davis, Ansy Egun, Jon Boyle (President), Rachel Bell (Vice-President) and Arun Pherwani. Absent: Ian Chetter, Andrew Garnham (Vice-President Elect), Lucy Wales and Donald Adam. Kaji Sritharan is on parental leave, re-joins Council in 2022/23.

### Admin team (Executive Business Support)

VS administrator	Louise Collins	<a href="mailto:admin@vascularsociety.org.uk">admin@vascularsociety.org.uk</a>
ASM administrator	Gemma Bell	<a href="mailto:ASM@vascularsociety.org.uk">ASM@vascularsociety.org.uk</a>
CF administrator	Liz Nichols	<a href="mailto:info@circulationfoundation.org.uk">info@circulationfoundation.org.uk</a>
Accounts administrator	Julia Pembrington	<a href="mailto:accounts@vascularsociety.org.uk">accounts@vascularsociety.org.uk</a>

The Vascular Society of Great Britain & Ireland  
 c/o Executive Business Support Ltd  
 City Wharf, Davidson Road, Lichfield,  
 Staffordshire,  
 WS14 9DZ

Telephone 02072057150

## President's Report

### Jonathan Boyle



It hardly seems a year ago that we all met in Manchester for a very successful ASM. The role of the President is to lead and represent the Society, keep the plates spinning, and respond to whatever flak comes our way. There is little scope for delivering dramatic change in a year. However, it is fair to say that I was not expecting to see three Prime Ministers and two Monarchs during my tenure.

Last December we were still facing significant pressures on our practice and personal lives from Covid-19. Whilst these have eased somewhat over the last few months, we are now facing mounting pressures from the resulting backlog of both outpatient and inpatient work.

Despite this the VS Council has been working extremely hard to benefit both our patients and our members. I have been lucky to be supported by a fantastic team of councillors, who have achieved a significant amount in the last year as set out in the detailed Committee reports below.

The year started on a difficult note, with the results of the **Rouleaux Club's survey on Bullying, Undermining and Harassment (BUH) in vascular surgical training**. The findings of this report particularly saddened me as I had faced the same issues as SAC Chair in 2017. Despite concerted efforts to address these issues involving the Rouleaux Club, Vascular SAC and the VS the problem appeared to be getting worse. We are not alone, however, this is a wider problem across surgery. I am very pleased that the FSSA (Federation of Surgical Speciality Associations) has set up a group to address BUH in surgery. I am also very grateful for the hard work undertaken by Ciaran McDonnell, Chair of the Workforce Committee, and the whole workforce committee, for addressing these issues head on.

Close work with the FSSA and RCS England on **surgical prioritisation** at the back end of 2021 meant that people with abdominal aortic aneurysms (AAA) were prioritised as 'P2' and carotids as 'P1b', which has provided members with ammunition to fight for limited surgical resources. The Council has continued to work with key stakeholders including the Vascular CRG (Clinical Reference Group), BSIR, the UK surgical Royal Colleges throughout the year.

As Covid restrictions were relaxed, I have been fortunate enough to travel to represent the VS at the RCS Edinburgh, RCPS Glasgow and at RCS England. Some of you will be aware that I have made a special effort to engage with the devolved nations and Ireland during my tenure. We are a Society of Great Britain and Ireland, and I will be reflecting this in the Lifetime Achievement Awards presented on behalf of the Society in Brighton. I am also delighted that the VS Council have chosen **Dublin** for the ASM Meeting in 2023 after more than a 30-year gap.

The year has seen many other significant VS achievements. I am very grateful to Keith Jones and Paddy Coughlin for developing and maintaining ASPIRE Digital and all the ASPIRE Courses during the Covid-19 pandemic.

Ian Chetter has been an outstanding Chair of the Research Committee, achieving many things during his tenure, but he should be very proud of the new **Journal of the Vascular Societies of Great Britain and Ireland**, which is still not a year old.

The Audit Committee has remained extremely busy producing 2nd Aortic devices report and further Covid-19 reports under Arun Pherwani's leadership.

I am also very grateful for Rachel Bell's work on the **NHS England Aortic Dissection Tool Kit**. Rachel will stand down as Chair of the Circulation Foundation in November. I am delighted that Neeraj Bhasin has been appointed to take the CF forward. Neeraj brings a wealth of experience in the Charitable sector.

I am very much looking forward to the ASM in Brighton and very grateful for the endeavours of Douglas Orr, EBS and the small ASM team in putting such an excellent programme together.

There is a palpable desire amongst the membership of the VS and our allied Societies for a face-to-face meeting. I am sure Brighton will be a great success. Finally, I wanted to put on record my thanks to Marcus Brooks for his hard work and diligence over the last year. Marcus was aware of my desire to professionalise the Society and I am very grateful for the work that has gone on behind the scenes to make our internal processes more robust and transparent, particularly around the appointment of committee chairs. Marcus is an excellent communicator and I hope our regular e-mailed newsletters and tweets have kept the membership up to date with the Societies activities.

On a personal note, I am very grateful for the opportunities I have had as a member of the VS Council, and will step down proud of the **PAD Quality Improvement work, NVR aortic device capture** and of the impact the **CLTI-CQUIN** has had this year in England on timeliness of revascularisation for patients with CLTI. This is work that started under my tenure as Chair of the Audit and QI Committee but put on hold due to Covid-19. Work is already underway to extend the CLTI CQUIN into 2023-24.

The Council has become more inclusive, and therefore more diverse, since I was first elected in 2012, but there remains work to be done. It will give me great pleasure to pass on the Society's Chains of Office to Rachel Bell, a close friend and colleague, however Rachel will become only the **second female President** of the Society in 56 years. The Council has been reflecting on our Presidential election processes in light of the RCS Eng. commissioned Kennedy Report. We are only one of two surgical specialty associations who do not elect their President through a whole membership vote. We are going to discuss this at the AGM in Brighton. I hope the membership will support the Council's resolution that future Presidents will be elected by the entire membership from 2023.

The Society is in excellent health, and I wish Rachel every success for the year ahead and Andy Garnham for 2024.



Mr Jonathan Boyle  
President of VSGBI

 [@jonnyboyle1](https://twitter.com/jonnyboyle1)

## Honorary Secretary's Report

### Marcus Brooks



This year has seen the Council, under the Presidency of Jon Boyle, transition from a focus on the recovery of vascular services affected by Covid-19 to tackling two fundamental issues faced by UK and Irish vascular units. The first, is the **workforce concerns** highlighted by the Vascular Society Workforce Survey (2021) led by Denis Harkin. The second, is the report of **unprofessional behaviour** persisting in the workplace identified in the Rouleaux Club members survey (2021).

The Council has committed to 'zero tolerance' of unprofessional behaviour in the workplace and in the Society. All Council members have completed the RCS Edinburgh on-line anti-bullying training module.

Fantastic progress has been made with engaging allied Societies through their full participation in both the **Annual Scientific Meeting** (SVN, SVTGBI and BACPAR) and **the Journal of the Joint Vascular Societies of Great Britain and Ireland** ([www.jvsgbi.com](http://www.jvsgbi.com)). An updated memorandum of understanding (MoU) to be signed at this year's ASM will further strengthen our working relationship with the **Royal College of Podiatry**. I would also like to take this opportunity to congratulate the **SVTGBI** on their 30<sup>th</sup> anniversary. We also celebrate the 20th anniversary of the Circulation Foundation at the 2022 ASM.

The Council recognises that more needs to be done to make the Society accessible to all vascular specialists, consultant and non-consultant grade ('SAS doctors'), working in the UK and Ireland. The Council understands some of the changes needed, especially those highlighted in the Baroness Kennedy report for the Royal College of Surgeons of England. We now have two SAS representatives on Council, Ibrahim Enemosah and Tatiana Martin, who are actively engaging with SAS vascular doctors. Rachel Bell, during her Presidential term, will champion wider Society engagement. The first step planned for this work is a survey to better understand what the Society is doing well, and where we need to improve.

One of the roles of the Honorary Secretary is to organise **Society elections**. This year has seen the appointment of new chairs for the Audit and Quality Improvement Committee and Professional Standards Committee. From 2023, Denis Harkin and Chris Imray will continue the work of Arun Pherwani and Ian Loftus who have led these committees so ably. Matt Bown, Patrick Coughlin and Neeraj Bhasin have completed their one year terms as shadow chairs and takes over from Ian Chetter (Research), Keith Jones (Education and Training) and Rachel Bell (Circulation Foundation) respectively as Committee Chairs after this year's ASM.

The appointment of Committee Chairs is by competitive interview from amongst current and past Council members. The election of the Society Presidents is also from current and past Council members by an election ballot of current elected Council. This process now needs to change, and a resolution to for this has been tabled by the Council for the Annual General Business Meeting (see below).

The Vascular Society is a nominating body for the new NHS England and Wales **National Clinical Impact Awards**. It was inspiring to read the submissions from those requesting the Society support and ranking for their applications. The Society would like to encourage more members to consider making an application in 2023, this can be for local, regional or national achievements.

<https://www.gov.uk/government/organisations/advisory-committee-on-clinical-impact-awards>

The **VS website** needs a refresh, both of its online content, and of the functions it performs in administering membership data, direct debit payments, and distributing newsletters. The Treasurer has identified funds (circa. £30K) for a new Society website in 2023. The tender process for this will have closed by the time of the 2022 ASM. I look forward to working with the chosen provider to develop a modern VS website with the 'backroom' functionality needed to run the Society. If any member has expertise in website design, or would simply like to be involved, I would be delighted to hear from you ([secretary@vascularsociety.org.uk](mailto:secretary@vascularsociety.org.uk)).

Many of the issues that the Society deals with are first identified by our members. Examples this year, have been the difficulty of recovering operating capacity lost during the Covid-19 pandemic, shortages of Alteplase for thrombolysis, and most recently the packed red cell shortage in England. As Honorary Secretary, I have also dealt with privacy concerns from two men regarding data sharing between the NHS AAA Screening Programme and the Vascular Society. An Emergency Department Consultant asked the Society if it was reasonable that their local vascular unit, based in a different hospital, was asking for patients with suspected ruptured AAA to have a CT scan prior to transfer.

**Reconfiguration of vascular services** into networks in England is mostly complete. This year Sophie Renton and I, on behalf of the Society, reviewed the planned centralisation of Southeast Wales inpatient vascular services into the University Hospital of Wales, Cardiff. I was invited to Manchester to talk at their city-wide reconfiguration event. The Society also influences how services are delivered through the **review of job plans for RCS Eng. approval**. In the last 12 months, fifteen job plans have been reviewed by Council members and subsequently approved by the RCS of England. I am extremely grateful to all Elected Council members for their input into this process.

Much of the Council's 'day to day' work goes unrecognised by members. **Many UK and Irish vascular surgery consultants are not Vascular Society members**. This means that as a Council we are not able to voice the views of all UK and Irish vascular specialists. I hope that after reading about the work being undertaken by the Society's Committees that you will be inspired to encourage colleagues to take up membership, stand for election to Council in the future, or get involved with the VS in other ways.

You have had a fantastic Council working for you this year. I have greatly enjoyed working closely with Jon, Rachel, Andy, Paddy and all the Society's executive team. As a Society we receive excellent administrative support from Gail, Phil, Louise, Gemma, and the entire Executive Business Support (EBS) team. I am certain Douglas will recognise the work Fran and now Gemma have put into organising this year's ASM. I could not perform the Honorary Secretary role without the support of Louise.



Marcus Brooks  
Honorary Secretary VSGBI

 [@BrooksMedBris](https://twitter.com/BrooksMedBris)

## ANNUAL GENERAL BUSINESS MEETING 2022

Wednesday 23<sup>rd</sup> November 2022

17:15-18:00

Hilton Brighton Metropole

### AGENDA

1. Apologies
2. [Minutes of the AGM 2021](#)
  - 2.1. Matters arising from the minutes
3. Officers' reports:
  - 3.1. President: **Jon Boyle**
  - 3.2. Honorary Secretary: **Marcus Brooks**
    - 3.2.1. Results of voting in the Council elections
    - 3.2.2. Your executive team 2022/23
    - 3.2.3. In memoriam
  - 3.3. Honorary Treasurer: **Alistair McCleary**
    - 3.3.1. Society Finances and Spending plans
    - 3.3.2. Membership and Subscriptions 2022/23
4. Committee Chairs' reports:
  - 4.1. Education and Training: **Keith Jones**
    - 4.1.1. Non-NTN Trainee Representative: **Ibrahim Enemosah**
  - 4.2. Research: **Ian Chetter**
  - 4.3. Audit and Quality Improvement: **Arun Pherwani**
  - 4.4. Workforce: **Ciaran McDonnell**

*Committee reports for the Annual Scientific Meeting, from **Douglas Orr**, and Circulation Foundation, **Rachel Bell**, are published in the yearbook.*

5. Resolutions:
  - 5.1. **Adoption of the Annual Report and Financial statements 2021/22**
  - 5.2. **Vote for election of President by Ordinary Members**
6. President Elect plans for 2022/23: **Rachel Bell**
7. Any other Business

Annual General Business Meeting 2023

Wednesday 23<sup>rd</sup> November 2023

The Convention Centre, Dublin



## In Memoriam

I must regrettably inform members of the passing of three Society members during the last year. The VS would also like to recognise the death of Professor Sir Peter Morris who whilst most recognised for his work as a transplant surgeon set up the academic vascular surgery department in Oxford and gave the 1986 Kinmonth Memorial Lecture 'Whither Carotid Endarterectomy'. The Society would also like to pass on their sincere condolences to two past Presidents of the Society: Professor Sir Peter Bell, for the passing of his wife Lady Anne in April, and Peter Taylor whose wife Kok-tee passed in mid-November.

The Society also acknowledges the death of Queen Elizabeth II in September.



**Andrew (Sandy)  
McLaren Jenkins**

February 2022

Sandy's quiet and friendly approach towards everyone with whom he worked made him immensely popular. In the mid-1980s, Sandy, Bernard Nolan and Vaughan Ruckley helped the Edinburgh Vascular Surgery Unit become one of the first to break away from the umbrella of general surgery. A passion for fishing began, aged five, when he first spied salmon from a bridge over the Moffat Water. In later life, he travelled the world in pursuit of the king of fish and his love of remote and wild landscapes. Sandy was devoted to his wife Pat, their children and to his grandchildren. He leaves behind an impressive surgical legacy, his much-loved small farm near to West Linton and a loving family.

*With acknowledgement to The Scotsman (Kate Jenkins & Rod Chalmers)*

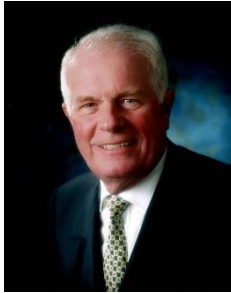


**Steve Michael  
Jones**

April 2022

Steve was appointed as a general surgeon with an interest in vascular surgery at Musgrove Park Hospital, Taunton, in 1979. He rapidly set up the Vascular Surgery department and ran it single-handedly before being joined in 1991 by his close friend and colleague John Chester. He had an amazing capacity for attention to detail. This can be seen in his operation notes. Prior to his retirement in 2003, he served as Trust Medical Director. Steve had a dry and mischievous sense of humour. He was extremely popular in the local community, as well as in the hospital. He sang with his church choir and in Taunton Deane Male Voice Choir. He was an accomplished artist and a leading light in the local art group. He was a keen golfer. He will be forever missed and loved by his wife Paddy, his three children and seven grandchildren.

*With acknowledgement to Ian Hunter*

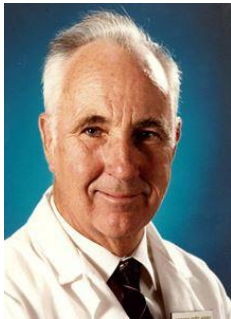


**John (Ian) Millie  
Dow Galloway**

August 2022

Known by the Gaelic, 'Ian', John trained in Edinburgh, Glasgow and Dundee. In 1967, he went to Aberdeen where he was attached to George Mavor, known particularly as a pioneer of the more aggressive approach to the management of deep venous thrombosis. After completing a ChM in Aberdeen, he completed training in general and vascular surgery. In 1969, he was appointed to Hull Royal Infirmary, initially single-handed, and then with Alan Wilkinson. After 15 years, he stopped general surgery and became a full-time vascular surgeon. **In 1998-9 he served as President of the Vascular Society.** He subsequently became Medical Director in Hull for four years. John enjoyed golf, and after retiring played many courses in Great Britain and Ireland. He was predeceased by his wife Margaret of 60 years (Oct 2021) and leave two sons and five grandchildren.

*With acknowledgement to Peter Galloway, his son, a metabolic physician*



**Professor Sir Peter  
Morris**

October 2022

Peter, who trained in Australia (Melbourne) and then the USA, became the Nuffield Chair of Surgery in Oxford in 1974. He established the Oxford transplant programme. He was also a vascular surgeon and set up an Academic Department of Vascular Surgery. Soon after arriving in Oxford, he was called in to see a patient whose aortic aneurysm was bleeding into his stomach. The terrified junior doctor who had called him in, later became his first Oxford DPhil student. For a time, he was the only surgeon in Oxford to perform carotid endarterectomy. He gave the 1986 John Kinmonth Memorial Lecture entitled '*Whither Carotid Endarterectomy*'. After his retirement, Peter became President of the RCS Eng. from 2001-4. As Chairman of the RCS England Research Board, he drove the implementation of the Research Fellowship Scheme. He will be remembered as kind, down to earth, and with a great sense of humour. He had many passions, including good food and wine, and of course cricket. He is survived by his wife Jocelyn and five children.

*With acknowledgement to Nuffield Department of Surgical Sciences*

## Treasurer's Report

### Alistair McCleary



Despite the turbulence in the world economy the finances of the Society remain in good health. This is due to the sound management by previous Treasurers and members of the Elected Council and Executive.

The Vascular Society of Great Britain and Ireland (VS) with the Circulation Foundation currently run as a single registered charity ('The Vascular Society'). The Annual Scientific Meeting is run as a separate, limited company known as **VSGBI Ltd** with all profits passing to the VS.

The accounting year for both VSGBI Ltd and the Vascular Society run from 1<sup>st</sup> July to 30<sup>th</sup> June each year.

In 2021/22 the total turnover for The Vascular Society was **£523 686** with an operating profit of **£122 167**. These figures include several large legacies (£100 000) and a significant grant to the ASPIRE programme from the Health Education England Covid Recovery Fund.

The Society's income is largely derived from membership subscriptions, profit from the ASM, members donations to the Circulation Foundation, and fund-raising activities by the Circulation Foundation.

Expenditure has mainly been on administrative costs and supporting research (Fellowships) and education. Running the ASPIRE teaching programme and the Circulation Foundation Research Grants are expensive. This year, the launch of the **Journal of the Vascular Societies of Great Britain and Ireland** has incurred costs in the order of £50 000. We have also increased the number of research fellows to four, with two Fellows in partnership with the Royal College of Surgeons of England, one with the Royal College of Surgeons of Edinburgh and one with the Royal College of Physicians and Surgeons of Glasgow.

The first **ASM** after Covid restrictions were relieved in November 2021 was a great success both academically, socially and financially. The Society is very grateful to all those who attended and industry sponsors. Turnover was £404 000 and generated a profit of £115 000 which will be distributed to the Vascular Society, SVN, SVTGBI and BACPAR in the next accounting year.

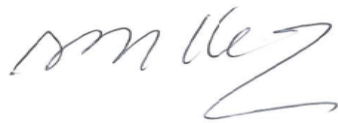
The Vascular Society holds **reserve funds** that ensure administrative costs and obligations to research grants and other commitments can be met for a 2-year period. These are invested through Rathbones, and although their value has fallen in recent months there are no concerns about our financial stability.

In the coming year our challenges are to ensure the financial viability of the ASPIRE programme and to provide a steady income stream to support CF Research Fellowships. At the moment, ASPIRE depends on irregular funding from industry and ad hoc grants from Health Education England. This puts huge pressure on the local organisers and the Society would like to form partnerships with industry to secure funding over a 3 to 5 year time frame. This is a challenge.

The CF fellowships are supported by member donations, fund raising legacies and cross funding from the Vascular Society. Expert advice is that the capital required to build a fund large enough to support research fellowships through dividend income would take 20 years to build, and therefore the VS will continue with the current funding model. The Society would encourage all members to consider donations to the CF using Gift Aid, and for those interested in fund raising to contact the CF committee.

The JVSGBI has been a great success, and as it gains traction, it is expected to generate a profit from advertising revenue in another 2 to 3 years. Any profit will be used to support research and education.

The aims of the Vascular Society are to support its members, to educate and to encourage research into vascular disease. The aims are not to make a profit and build up large reserves, but clearly it is important to have financial stability. At the moment I believe that has been achieved.



AJ McCleary  
Honorary Treasurer VSGBI

**Membership Fees 2022-23**

Ordinary	£ 250
Affiliate	£ 115
Associate	£ 140
Senior	£ 45
Honorary	-
Overseas	£ 115

A regular donation of £50 to the Circulation Foundation, the UKs only dedicated vascular charity, will be automatically added to your membership for ordinary members unless you opt out.

*giftaid it*

**CHARITY DETAILED INCOME AND EXPENDITURE ACCOUNT  
YEAR ENDED 30 JUNE 2022**

	2022		2021	
£	£	£		
<b>£ INCOME</b>				
<b>Voluntary income</b>				
Membership CF donations	15,800		16,200	
Donations and Gift aid	61,599		29,936	
Legacies	<b>100,000</b>		34,727	
ASPIRE programme income	155,191		5,000	
Gift aid payment from VSGBI Limited	53,521		114,669	
		386,111		200,532
<b>Charitable activities</b>				
Subscriptions		115,377		109,855
Advertising income (JVSGBI)		7,000		-
<b>Fundraising income</b>				
Marathons and events	15,925		7,007	
Other	1,530		-	
		17,455		7,007
<b>Investment income</b>				
Interest - Bank interest	436		65	
Interest - Fixed interest securities	645		567	
Dividends	8,936		6,751	
		10,017		7,383
<b>TOTAL INCOME</b>		<b>535,960</b>		<b>324,777</b>
<b>EXPENDITURE</b>				
<b>Fundraising expenditure</b>				
Marathon and events	3,580		2,220	
Other	9,648		1,026	
		13,228		3,246
<b>Cost of charitable activities</b>				
Grants awarded	30,064		103,293	
ASPIRE expenditure	65,684		1,362	
Review costs	-		-	
Journal costs (JVSGBI)	<b>48,323</b>		-	
Prizes	5,225		1,641	
CF project and communication support	14,862		15,987	
Committee, secretariat, and admin costs	116,807		107,491	
Travel & subsistence	17,019		5,069	
Stationery, printing, postage	688		174	
IT support costs	9,515		9,410	
Depreciation of fixed assets	1,636		7,006	
Advertising and marketing	6,284		837	
General expenses	7,530		2,236	
Bank fees	1,982		1,309	
Bad debts written off	2,280		-	
		327,899		
<b>255,815 Governance costs</b>				
Fees payable to independent examiner	5,187		5,984	
Legal and professional fees	1,918		1,190	
		7,105		7,174
<b>TOTAL EXPENDITURE</b>		<b>348,232</b>		<b>266,235</b>
Gain/(loss) on revaluation of investments		(49,109)		55,973
<b>Surplus for the year</b>		<b>138,619</b>		<b>114,515</b>
Brought forward funds		1,132,827		1,018,312
<b>Carried forward funds</b>		<b>1,271,446</b>		<b>1,132,827</b>

## Education and Training Committee

### Keith G Jones



When I looked back at last year's Committee report, I had recognised the ongoing challenge of Covid-19 catch up in relation to training and education. I now recognise that there is an on-going legacy from the Covid-19 pandemic and operative numbers being undertaken by trainees have still not reached the pre pandemic levels. This continues to focus our committee activities to support the delivery of training.

**ASPIRE** I would like to thank all colleagues that have given their time and energies as ASPIRE faculty, and all the ASPIRE course organisers.

In the last year we have delivered a full complement of ASPIRE courses face to face with a combination of **Health Education England** (HEE) funding for Covid-19 catch up and industry sponsorship and support.

We have run the Cadaveric **ASPIRE 4** and **ASPIRE 6** courses twice this year (December 2021 and September 2022) to ensure trainees had not missed these important exposures courses. The Society is very grateful to Paddy Coughlan for not only running these but also securing the funding through HEE.

**ASPIRE 3** ran in Bristol again in September 2022 under the excellent guidance of Tim Beckett. As ever the course feedback was great and highlights the value that the trainees place upon the whole series as they can develop through the curriculum as a group. **ASPIRE 5** was able to return post COVID and ran at the Midlands Arts Centre in Birmingham at the beginning of May, led by Anna Murray. Again, the course feedback was excellent, and the course will run at the same venue on 26<sup>th</sup>-28<sup>th</sup> April 2023. The ASPIRE 3 and 5 courses are also linked through the research of our joint RCS Ed., VS and CF research fellow, Fiona Kerray, who has successfully completed her first year.

The exam preparation course, **ASPIRE 7**, ran in Worcester and I am grateful to Julien Alshakarchi, Natasha Charlwood and Jack Fairhead for leading this, and to the additional on-line support provided by West Midlands learning resources. **ASPIRE 8** ran in June at the Royal Free Hospital, London, under the organisation of Kaji Sritharan and local chairing of Meryl Davis.

In the organisation of ASPIRE, we have found that GDPR restrictions have made it difficult to keep an accurate list and contact details of all the trainees, but we hope to generate a more accurate method with the help of the Rouleaux Club to ensure that all trainees are linked to their appropriate year course.

All the courses ran with great feedback. It was fantastic to be in the face-to-face environment again, but we continue to recognise the importance of running an on-line resource and so **ASPIRE Digital** has been adapted and at present is running monthly.

We sponsored the leading candidate of the last ASPIRE 8 course, Gemma McKeivitt, through the RCS Edinburgh's **Future Leaders Programme**. Since Gemma has found this very beneficial, we will look to continue this link in the future.

**Simulation** Moving forward there is still the challenge of how to use simulation to support development and mitigate against some of the case number reductions. We are actively involved in the development of two simulation models, one related to open aortic aneurysm surgery, that we hope to help validate and use to compensate for the loss in open AAA numbers,

**Non-NTN trainees** We hope to have more information through our two non-NTN representatives, such that we can develop learning resource and ensure support to this group of doctors in training.

On a much wider level, it is also clear that further work is needed to ensure that the learning environment within vascular surgery is supportive and appealing to all.

In addition to the ASPIRE programme:

1. Mr Karim El Sakka ran another highly successful **cadaveric vascular access course**. We continue to look at how to increase the support for and exposure to this course.
2. The **"So you want to be a Vascular Surgeon"** courses and **ASPIRE Junior** online teaching run with the support of the Rouleaux Club.
3. We are delighted that **"An introduction to vascular ultrasound"** is running at the 2022 ASM.

**Curriculum** We have had the challenge of the new 2021 GMC Vascular Surgery Curriculum. After a slow start, we have had very good transition to the new curriculum and uptake of the MCR (Multiple Consultant Resource) process. We would like to see how to promote local or regional champions that may optimise the delivery and the standard of MCR feedback.

### Challenges

Moving forward as I hand over the Committee Chair to Paddy Coughlin, we are close to having a sustainable funding model for ASPIRE that can hopefully incorporate the non-NTN trainees also. We hope we can address and resolve the Covid-19 legacy, potentially with simulation training to help with the learning curve for open aortic aneurysm repair and endovascular skills training.

As ever we would ask for feedback upon the educational and training portfolio delivery and whether there is anything further that you as members would want to see done.

Keith G Jones  
Chair Education Committee

[Keith.jones4@nhs.net](mailto:Keith.jones4@nhs.net)

## Non-NTN Trainee Representative Report

### Tatiana Martin and Ibrahim Enemosah

It has been an exciting year representing non-NTN trainees and CESR candidates (Specialty and Associate Specialist (SAS)) on the VS Council. We started our role just before the return to face to face meetings last year after a protracted hiatus from Covid-19 which had affected training for trainees and non-trainees alike.

The role of SAS surgeons in vascular surgery cannot be understated. The GMC 2022 Workforce Report highlights the current **workforce challenges** and importance the role of **SAS surgeons** plays, and how vital supporting their personal and professional development is. SAS surgeons are involved in running independent vascular clinics and theatre lists. In some vascular networks, they make up half of the middle grade vascular surgery workforce. The VS Workforce Report (2021) has also reiterated the need to increase national training numbers (NTNs) to meet future workforce goals. We were a part of the first independent Vascular Surgery ST3 interview panel earlier in the year which aims to achieve this.

**Identifying SAS surgeons in the UK** Our journey has built bridges and enhanced collaboration between UK nations. We have identified 60 non-trainees around the UK and have been their voice during Council meetings and at the RCS Eng. SAS educational forum. We appreciate the cooperation of Open council, VS Education and Workforce Committees, SAS representatives, the Rouleaux Club and network clinical leads. We estimate there are about **200** non-trainees around the UK committed to vascular surgery. These trainees have the potential to bridge the workforce gaps currently threatening the specialty. We have surveyed their **educational and training experience** and will be presenting our results during the 2022 ASM. This is the first VS ASM with a dedicated SAS session, which is a leap in the right direction!

**RCS Eng. SAS Education Committee** This has involved us contributing to re-write the RCS Eng. Job Planning Quality Indicator Guidance Document and the SAS strategy. The AoMRC/RCS Eng. CESR conference (12th May) and the SAS conference (13th May) held by RCS Eng. were well attended by SAS surgeons in vascular surgery. Both conferences provided mentorship and clarification regarding the CESR process and Associate Specialist roles, whilst also providing a good forum for networking.

**Bullying undermining and harassment** The VS is against incivility in the workplace. We have been surveying SAS doctors and working with the Workforce Committee and the Rouleaux Club BUH representative to support surgeons and nip this behavior in the bud. The future is one where no one should experience BUH at any level during their career.

We look forward to the coming year as we plan to broaden the access to the ASPIRE series, provide CESR guidance and mentorship, and launch the VS associates' website page. Retaining skilled SAS surgeons within the specialty would enable us to achieve the provisions of service, impact positively on patient outcomes and meet workforce targets. It's a new horizon and we are proud to be part of it.

### Tatiana Martin and Ibrahim Enemosah

Non-NTN and CESR Representatives

RCS of England Vascular Surgery SAS Representatives



## Vascular Research Committee Report

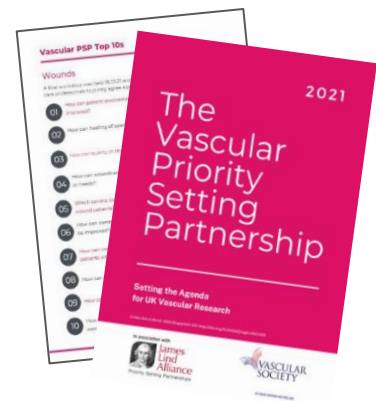
### Professor Ian Chetter



It has been another fantastic year of progress for the Research Committee, who continue to raise awareness of the research priority setting results. Our RCS Surgical Speciality leads continue to support a portfolio of research activities and the **Journal of Vascular Societies of Great Britain and Ireland (JVSGBI)** goes from strength to strength.

In my final report as Chair of the Research Committee, I am pleased to highlight our key achievements for 2022.

**Research priority setting work** My previous report shared the results of the first UK-wide Vascular research priority-setting project in association with the James Lind Alliance. Subsequently these priorities have been promoted at various national conferences and full individual Special Interest Group's (SIGs) results published in the JVSGBI. These papers provide vascular researchers with key reference documents to focus research efforts and strengthen future funding applications. The outcomes from this process have come at an opportune time, as projects that address these priorities are all suitable for the NIHR James Lind Alliance Priority Setting Partnerships rolling call.



**RCS Surgical Specialty Leads (SSLs) and Special Interest Groups (SIGs)** Our three SSLs (Matt Bown, Dan Carradice and George Smith) have been busy developing and promoting a portfolio of research projects. The Vascular SSL team and SIG chairs continue to drive forward the research programme arising from the JLA PSP process, submitting three suggestions to the NIHR HTA panel, two have been advertised as commissioned calls and the third is expected soon. The SIG work continues with almost all SIGS supporting major funding applications. The vascular research portfolio increased its funding by £11.7 million over the last 12 months. The **UK Vascular Clinical Trials Network** has been established to support an expanding collaborative research community, promote inclusivity, and facilitate communication and dissemination. A YouTube channel (<https://youtube.com/@VascularResearchUK>) was recently launched, a broad based social media presence is under development, and a new website is approaching release.

Four Associate SSLs (ASSLs) were recently appointed; Lauren Shelmerdine, Louise Hitchman, Nina Al-Saadi and Panagiota Birmpili; to support the SSLs in this work. It is immensely satisfying to observe the progress of the future generation of vascular researchers – our trainees.

The academic abilities, drive and commitment of these active young researchers is hugely impressive and outlined in their VERN report.



**Vascular Research Priorities to Evidence Event** This was hosted at the RCS England (13<sup>th</sup> September) and attended by colleagues from across all areas of the vascular profession. This meeting addressed SIG progress, examples of funded priority related projects and presentations from the RCS, NIHR Academy and NIHR Industry who provided valuable insights about different opportunities available for support and collaboration.

## Journal of the Vascular Societies of Great Britain and Ireland

[www.jvsgbi.com](http://www.jvsgbi.com)

The JVSGBI has had an incredibly successful first year and is on track for submitting a PubMed application. The journal is free, open-access and is published online quarterly. It represents the whole vascular community.

Although predominantly aimed at UK based vascular activities, this has not prevented its global appeal, with data showing user access in over 80 countries.

Over 50 articles have been submitted including original research, survey reports, case reports, literature reviews, editorials, news and commentaries. The top 3 most popular articles are:

1. The Vascular PAD-QIF CQUIN: what is it, why is it important, what does it mean for vascular units?
2. Wifl scoring: a reliable tool for risk stratification in the diabetic foot clinic
3. Research priorities for aortic diseases: results of the James Lind Alliance/Vascular Society GBI priority setting exercise

Time to on-line publication is approximately eight weeks and is accompanied by a Twitter notification via @VSjournalGBI. This is thanks to the tremendous efforts of the reviewers and Editorial Board; an enormous amount of work goes on behind the scenes and I am hugely appreciative of the commitment and enthusiasm of everyone involved.

Finally, I offer a very warm welcome to ProfMatt Bown as the next Chair for the Research Committee. Through his leadership and passion for research, I am certain that the VS research community will continue to thrive and increase the quality, impact and reach of UK vascular research. A huge thank you to all Research Committee members for their hard work and support throughout my time in post. Together we have achieved an incredible amount and I look forward to what happens next.

Professor Ian Chetter

Chair Research Committee



## Audit and Quality Improvement

### Arun Pherwani



This year, 2022, has been another busy and productive year for the Committee and the NVR team. I am pleased to present your 2022 NVR annual report, which continues the theme of reporting data from the second year of the Covid-19 pandemic. NHS vascular services have been severely affected and that is reflected in the increase in wait times to AAA repair and carotid endarterectomy.

For 2022, we are extending to our interventional radiology colleagues reporting of individual consultant data by email as we do with our surgeons, whilst publishing **unit data** alone in the public domain on our website.

We have focussed on three areas in the 2022 NVR report; **lower limb CLTI interventions (CLTI-QIF)** and the five-day inpatient revascularisation target; a 'state of the nation'

report on **Type B aortic dissection (TBAD) management** with 6-year data from units that treat TBAD depicted in an interactive map; and the results from the **organisational survey** where all 69 vascular units in the country have participated. A lot of the credit for this goes to Ellie and our vascular network leads (surgeons and interventional radiologists) for patiently completing the survey data which demonstrate wide variation in staffing and services across the country.

Our successful **CQUIN application for 2022-2023** has resulted in the widespread adoption of the 5-day target for inpatient revascularisation for patients with CLTI. We hope to repeat this CQUIN for next year. I am confident the PAD-QIF assisted by the CQUIN will deliver similar long-term benefits to the care of people with CLTI that the AAAQIP delivered to people with AAA. I am very grateful to all our surgical, radiological and anaesthetic colleagues, post graduate doctors and data support teams along with our incomparable fellows Penny Birmpili and Ellie Atkins, who have helped deliver this key quality improvement initiative. I am very grateful to Rachel Bell, Neeraj Bhasin, Andy Garnham, Paddy McCleary, Matt Bown, Marcus Brooks and our President Jon Boyle in supporting the appointment of our next PAD-QIF fellow, generously funded by the CF and RCS England, to complete this project

It is increasingly viewed internationally that the responsibility for reporting on devices to ensure patient safety, accountability and governance falls upon registries such as ours. Our work with aortic devices and reintervention datasets has reinforced our reputation as one of the leading vascular registries worldwide. The credit for this goes to all of you who input your data diligently and our award-winning NVR team. The update to the aortic devices report is due for publication next month followed by a Covid-19 update.



**NVR contract renewal** I am very pleased to announce that our contract with HQIP was successfully renewed this year for a period of 3 years. Going forwards, we aim towards three independently funded workstreams:

1. Our core HQIP funded function on reporting of procedures and outcomes for UK Vascular Surgery.
2. NHS England and the Outcome Registries & Patient Safety Programme led by Jon Boyle and the GIRFT team with devices
3. Supporting Registry based research.

In respect of the third of these aims, Kaji Sritharan & the NVR team are part of a collaboration with colleagues from the BSIR on developing the datasets to capture lower limb devices, a key target for 2023.

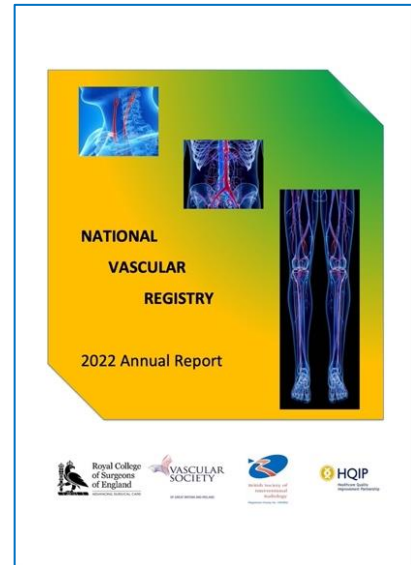
The NVR team will be looking to develop a **PPI group** where Ian Hunter will be helping. The NVR has supported the NHIR application for a TBAD trial submitted by Colin Bicknell from Imperial.

Jon and I, as part of NCIP (National Consultant Information Programme), are working to deliver data for colleagues on varicose vein and TOS procedures along with longer term outcomes and readmissions for on index procedures to complement NVR data which will be available on the Model NHS website next year.

Lastly and by no means the least, as Chair it is with gratitude, that I thank the members of the Audit and Quality Improvement Committee and the NVR team; Donald Adam, Lucy Wales, Kaji Sritharan, Ian Hunter, David Cromwell, Robin Williams, Amundeeep Johal, Qiuju Li, Ellie Atkins, Penny Birmipili (who we wish all success with her PhD) and of course Sam Waton.

Mr Arun Pherwani

Chair Audit and Quality Improvement Committee



## Workforce Committee Report

### Professor Ciaran McDonnell



I took over from Professor Chris Imray as Chair of the Workforce Committee at the Society's ASM in Manchester 12 months ago. I wish to pay tribute to Chris, who established and chaired the committee through its inception. On behalf of the committee, I wish him well on his latest adventure, an expedition to the South Pole! (<https://www.inspire22.co.uk>) As the newest committee, I feel the Workforce Committee is still finding its feet in terms of defining its' role and I am fortunate to have an extremely talented and committed group of people to work with. I am constantly reminded of one of my old boss's sayings that "If as chair of a group you are the smartest person in the room, then you are in the wrong room". I never feel that I am in the wrong room.

### Bullying Undermining & Harassment

My first year as Workforce chair has been dominated by this issue. A survey conducted by the Rouleaux Club is published in the November issue of the JVSGBI (available online) and will also be presented at the 2022 ASM in Brighton. The findings make for extremely uncomfortable reading, particularly when one realises that the incidence of such behaviours appears to have increased when compared to a previous study from several years ago. The response of the Society to the survey was circulated to members on September 29<sup>th</sup> to coincide with the online publication of the Rouleaux Club article.

In addition to this, there will be a session on the Wednesday afternoon at the ASM to highlight the issue and we have been working closely with the Royal College of Surgeons of Edinburgh to produce a one-day course which we hope to roll out nationally. All elected members of VS Council have undertaken the RCS Ed's online module on Tackling Bullying and Undermining in Surgery and Dentistry, and I would encourage all society members to follow suit.

The Federation of Surgical Specialty Associations (FSSA) has also taken this issue extremely seriously and a Trainee Representative (Marta Madurska from the Rouleaux Club) and myself represented VS at its' inaugural meeting. This was very much an introductory/exploratory meeting to attempt to obtain a sense of what different surgical societies were doing to combat this issue. It is envisaged that future meetings will take place with a view to implementing strategies to combat these behaviours.

Behavioural change is something which takes time, and it will require a sustained effort from us all over a prolonged period to ensure that behaviours such as those highlighted in this survey are ultimately eradicated.



### **Professional Standards**

Professor Chris Imray will succeed Professor Ian Loftus as Professional Standards Committee Chair. Reports conducted under the aegis of 'Professional Standards' are often of a sensitive nature. The information relayed back to Council tends to be confined to themes and trends rather than containing specifics for what are obvious and understandable reasons. An updated terms of reference for this Committee has been drawn up and agreed. The Workforce Committee chair will automatically become a member of the Professional Standards Committee and will Chair the committee in their absence.

### **ASPIRE 8**

*"Addressing the Challenges of equality and Diversity in Vascular Surgery"* was one of the topics included in the ASPIRE 8 course in June. I am grateful to Mr. Arun Pherwani for delivering this on behalf of the Workforce Committee.

### **Non-NTN CESR Representatives**

The input of our two representatives, Tatiana Martin and Ibrahim Enemosah has proven to be invaluable in the functioning of the Workforce Committee. They have been actively engaging with their fellow SAS Doctors to heighten the profile and better the lot of this extremely important group of contributors to vascular Surgery services across Great Britain and Ireland.

### **Future Planning: Workforce Recruitment & Retention**

We are all aware of a potential looming workforce crisis in Vascular Surgery. It is my intention to devote most of the February meeting of the Workforce Committee to discuss this issue and attempt to identify long term strategies to try and combat this. I welcome any contribution from members in advance of this. Please feel free to contact me directly, or via the secretariat with suggestions or opinions.

Prof. Ciaran McDonnell

Workforce Committee Chair

## Annual Scientific Meeting Committee Report

### Douglas Orr



We warmly welcome everyone to the 2022 ASM in Brighton. The ASM committee has worked extremely hard to build on the success of the last ASM in Manchester and produce an exciting and relevant meeting. The theme of the meeting, chosen by our President, is **Quality Improvement**, and this is reflected in many of the presentations from speakers of both national and international standing.

There are some familiar recurring sessions in the programme but also some innovations, tackling issues which currently affect our specialty, such as problems in the workplace including **bullying, undermining and harassment** in a session supported by the Rouleaux club.

There is a joint session with the European Society of Vascular Surgery and, in recognition of the importance of colleagues who are not in national training, a session addressing challenges for **non-NTN trainees and CESR applicants**.

We also celebrate the success of the CF which, with joint funding from the Surgical Royal Colleges, has funded four research fellows this year all looking into different aspects of vascular practice.

Over 200 abstracts were submitted and those scored highest will be presented at the abstract sessions on the Wednesday morning and, as usual, the best of these will then be selected to present at the two prize sessions on the Thursday. This year **posters** will be displayed electronically on monitors in the exhibition hall and PDFs of each poster will also be available on the conference app. Those who have submitted a poster will give a short presentation of their work during the Thursday lunch break.

Our allied societies, the SVN, SCTGBI and BACPAR will all run their programmes in parallel, and we continue to see increasing collaboration with them in keeping with the multidisciplinary approach now seen in vascular care. This collaboration will develop and future joint sessions involving all the Societies are being explored. The full programmes are on the website and on the **conference app**, which is available to download in advance of the meeting. We encourage you to do this early.

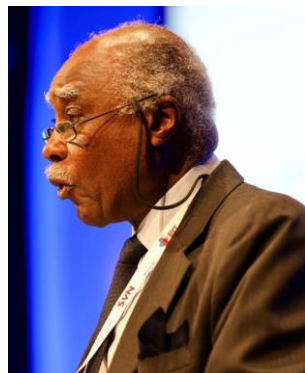
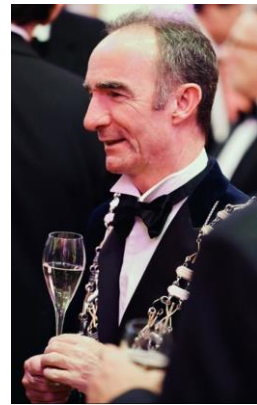
An important part of the ASM is the exhibition and industry sponsored sessions. This year we have seen excellent participation from our colleagues in industry and we encourage you all to explore the exhibition hall and engage with our sponsors. A huge amount of time and effort has gone in to preparing this ASM, and central to this has been the help and support of the team at EBS and their highly efficient professionalism. In addition, the commitment and hard work of Council, Committees and those in the allied societies is hugely appreciated.

Finally, I am delighted to announce that next year's ASM, acknowledging the fact that we are the Vascular Society of Great Britain and Ireland, will be in Dublin. It has 31 years since the Society's ASM was last there and preparations for our return visit are already underway.

Douglas Orr

Chair ASM Committee

ASM 2021 in Manchester © Richard McBride 2021 <https://rsmcbride.zenfolio.com/f893881578>





## Circulation Foundation Report

Rachel Bell



I would like to thank you all for the continued support of the Circulation Foundation. We have had a successful year with many fundraising activities going ahead and I would like to pass on the foundation's thanks and gratitude to all the runners and riders that have fundraised for us in 2022.

Sean Pymer and Laura Stirling for running the Manchester Marathon and the Edinburgh half marathon respectively.

Ian Chetter, Georgina Chetter, Debbie McDonald, Bankole Akomolafe, Rakesh Kapur our runners in the Great North Run.

RideLondon cyclists Michael Jenkins, Jon Boyle, Safa Salim, and Fang Lam and the London Marathon runners –Paddy Coughlin, Becky Sandford, Maisie Boast, Yanyan Jiao, Amanda Wen, Pete Holt, Yue Sun. The effort and the commitment that goes into training for these events is amazing and we feel very honoured as a charity that you choose to support us.

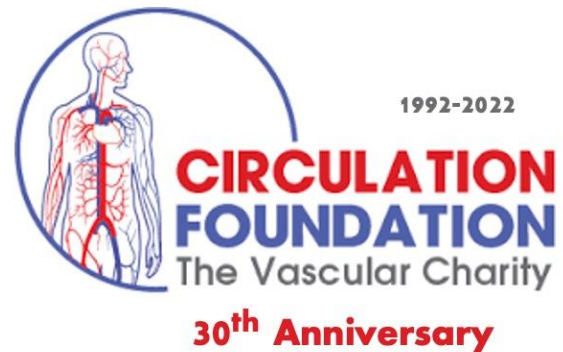
The **Body Walk 2022** was organised for Vascular Awareness Month to help raise awareness for vascular disease. We raised £2,393 and walked/run and cycled a total of 6,743.9 miles this year. Miss Rosie Darwood and the Leeds Vascular Institute need to be congratulated for walking the furthest and raising the most money.

We had 11 very festive submissions for the Christmas Card competition, and we have picked the top three to be printed and available for purchase at the AGM and from the website. Our three winners were Nick Jenkins for a beautifully drawn cardiovascular star; Jessica Douglas Year 4H from Huddersfield Grammar, Prep School for her cheery snowman and for the second year, Nina Al Saadi for her vascular themed Christmas tree.

As regards **plans for the charity going forward**, we are still looking into how we alter our charity status so that the CF can run as an independent charity alongside the VS. We also hope that a change in accountancy software will mean that there will be transparent CF accounts. Our future intentions are to partner with SVN, SVTGBI, BACPAR, Rouleaux, VERN, and potentially VASGBI, BSET and BSIR asking for a representative from each to join our committee to help shape the charity going forward.



We are so pleased to be celebrating our **30<sup>th</sup> anniversary** this year. The Circulation Foundation was the dream child of Mr Tony Chant, a vascular surgeon from Southampton. He named it the British Vascular Foundation and the aim was to develop a vascular charity to help fund vascular research. Mr Chant was aided and abetted by Professor Roger Greenhalgh, Professor Peter Bell and a non-vascular benefactor who was a friend of Peter Bell's and they were the first trustees of the charity. After a few years the name of the foundation was changed because apparently benefactors and patients did not understand the term 'vascular' and hence the change to The Circulation Foundation.



We will be celebrating our anniversary in our session at the ASM.

This is my last Circulation Foundation report as I hand over to Mr Neeraj Bhasin at the ASM 2022. I know that Neeraj is absolutely the right man for the job, and it has been a pleasure having him shadow the role for the last year. He comes with a wealth of charity experience and a whole host of new ideas. For me I handover with a tinge of sadness as it has been a wonderful experience to be the Chair of the Circulation Foundation and to gradually form the vision of a bigger and bolder charity that educates and advocates for patients. We have a way to go but it has been a genuine pleasure to be part of the journey and I know that Neeraj will smash it out of the park, to use a cricketing metaphor, whilst wearing one of his newly designed CF hoodies!

It goes without saying that none of this would happen without the help and support of Liz, Emily, Amy, Gail and Phil for Executive Business support – you are all fantastic and so vital for the success of the charity.

Rachel Bell

Chair Circulation Foundation, President Elect VSGBI

## Our patrons



**Mr George Davies**  
Has generously provided research funding for over 10 years, after his mother, who suffered from vascular disease, sadly passed away. He has funded both the **Mary Davies Award**, in memory of his mother and the **George Davies Award for Visionary Research**.



**Professor Sir Peter Bell**  
Emeritus Professor of Surgery at the University of Leicester. Past President of the Vascular Society and founders of the Circulation Foundation, along with fellow vascular surgeon Mr Antony Chant.

**Professor Roger Greenhalgh**  
Emeritus Professor of Surgery at Imperial College London. Past President of the Vascular Society and has been the driving force behind multi-centre clinical vascular surgery trials. Organiser of the Charing Cross Vascular Symposium.



**Professor Averil Mansfield**  
The first woman in the UK to become Professor of Surgery and a leading figure in encouraging more women to become surgeons. Past President of the Vascular Society and Vice-President of the Royal College of Surgeons.



## Professional Affairs Report

### Professor Ian Loftus



The work of the Professional Standards element of the Society has always been somewhat shrouded in mystery. It is very important that this perception changes. Now is the perfect opportunity to make the working of the committee much more transparent. I am coming towards the end of my tenure as Professional Standards Chair. I will formally hand over to Professor Chris Imray in 2023, and Chris will shadow for the next 12 months. It was gratifying to see a very strong interest in the role from other senior members of the Society. Chris is a perfect choice to take the baton. As a past President of the Society, with extensive experience of review processes nationally, and a great understanding of surgical politics and effective team working, he will ensure that the Society continues to support vascular services and Society members formally and informally.

As part of the handover process, The Society Council has endorsed a new **Terms of Reference** for the Professional Standards Committee. The Committee itself needed a revival, and will now comprise the Chair, the Honorary Secretary, the President Elect, the Chair of the Workforce Committee and at least one other member of VS Council. They will meet at least twice a year, with the defined remit to support service reviews, provide professional support, develop policy around issues of Professional Standards, and advise Society Council accordingly.

The formal '**Invited Review Mechanism**' or IRM, either run through the auspices of the Vascular Society or the Royal Colleges of Surgeons, is an important and independent review service. The latter mechanism generates reports that are owned by the Trust or body requesting the review. These are not always made fully available to others, including those under review. This process can be extremely stressful for those involved, and indeed can take its toll on the reviewers in a different way. We see a vital role for this Committee going forward, to provide a robust support mechanism for all those surgeons that find themselves part of a review process.

It is also essential that we provide an easily accessible, fair and independent support structure for any members of the Society who need help, advice or guidance, for whatever the reasons may be. That should be anonymous should the member prefer. This is especially important for those who find themselves the target of abuse, discrimination, bullying or intimidation in the workplace.

Professor Imray and I will make it our priority over the coming months to ensure these mechanisms are in place in a timely manner and made easily accessible, with the help of past and present Council members and experienced service reviewers.

I am pleased to report that it has been another relatively quiet year from the perspective of requests for professional or performance issues, though a few 'high profile' reviews remain ongoing and have gained media attention. I also sit on the Royal College of Surgeons Council, which provides me with a direct link to the Chair of the IRM process. This can be very useful.

The work of the College is remarkable and largely unrecognised by members and fellows. I genuinely believe that most reviews provide an unbiased and fair interpretation of the challenges faced within clinical services.

Throughout my time as Professional Standards Chair, I have been deeply gratified to observe first-hand, across the country, a caring profession, battling against extreme odds at so many levels. You, the members of this Society do your very best to provide high quality clinical services and good outcomes for our patients. Despite worsening challenges and political turmoil, which directly impact on our health care system, I continue to believe that our vascular services are in a good place.

Professor Ian Loftus

Professional Standards Committee Chair

## RCS Eng. Speciality Lead in Vascular Surgery Report

Professor Robert D Sayers



Royal College  
of Surgeons  
of England



The RCS Council meets ten times per year, and I have attended all Council meetings on behalf of the VS either face-to-face or remotely. A wide variety of topical issues are discussed at Council, usually led by the President or one of the three Vice Presidents.

We have discussed the lasting effects of **Covid-19** on the backlog of surgical patients waiting for operations and possible solutions including surgical hubs, increased financial support and better use of facilities including the private sector. We have also looked at the recent **blood shortages** and the role of tranexamic acid and correction of pre-operative anaemia as possible solutions.

**Training issues** have included loss of training opportunities due to the pandemic, trainee working conditions and the RCS response to a possible junior doctor's strike. We have had regular updates on other surgical issues including the intercollegiate exam, peri-operative care and workforce.

I also represent the VS on two sub-committees – research and workforce. I have shared (with permission) some of our own data on workforce issues with the RCS and they have used it to complement their own data on workforce. The College has plans to survey the surgical workforce to better understand the issues, has explored the benefits of surgical care practitioners and is raising awareness of the pension trap for senior surgeons. All these discussions try to reach a consensus so that the President and VPs can then lobby NHSEI, DoH and the Government to support surgeons.

I have attended Diplomates Day where trainees receive their MRCS and FRCS diplomas and have had several remote meetings with the Rouleaux Club.

Professor Rob Sayers

RCS Eng. Speciality Lead in Vascular Surgery

## President's Report

### Gail Curran



Having been elected to be President back in 2019, we decided to postpone the handover of presidency for a further year because of Covid-19 to maintain some stability for members in a time of huge uncertainty. It has been a daunting task to take over at a time when we are trying to return to a 'new normal'.

I would like to thank the members of the SVN committee for supporting me in this first year which has continued to have its challenges, but we are now enjoying the opportunity of holding meetings that provide opportunity for all to attend either face to face or virtually a huge positive as a result of the pandemic.

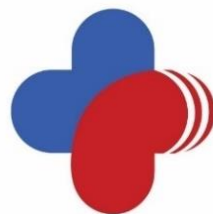
Last year at conference I presented on a vision of our project for this year in producing a framework for vascular nursing, this has become a major piece of work and has developed into a document to be launched at the ASM, the **Position Statement in the Provision of Vascular Specialist Nursing**. I must thank the SVN committee for the hard work put in to producing this document and for the support of the VS in endorsing it. This endorsement demonstrates the growing partnerships between the allied vascular societies. I am excited by the launch of this document to support all vascular nurses in their personal development plans and career progression. It is a document to support the standardisation of a nationwide curriculum for academic and in house training along with other objectives set out in the document. In the year ahead we will be supporting this with a **competency document**, for which groundwork has started by looking at documents that are already in use in some centres.

We will be holding our **ASM evening symposium** on Wednesday 23<sup>rd</sup> November in the conference venue directly after the reception drinks has been enjoyed, please bring yours along and join us. This year's speakers are from a charity that ran the **Revival Rehabilitation Centre in Chernihiv, Ukraine**. The purpose of the centre was to implement a set of rehabilitation measures aimed at preventing and correcting disabilities of a child with a disability, a child whose condition is at risk of disability, teaching basic social and household skills, developing abilities, and creating prerequisites for integration into society. We look forward to welcoming you all to attend to hear the story of this charity and how the war in Ukraine has affected their work. We aim to provide support for the future of this project in the uncertain future that currently faces all of Ukraine.

Our new committee members that were elected at last year's AGM have all settled in well, but we again find ourselves with a space on the committee. We will look at how we can ensure we have enough support on the committee and provide opportunities for vascular nurses who are interested in being part of the committee but are unsure regarding the commitment. The SVN also has opportunities for staff nurses to join our committee, this is a secondment position for a year, and we have enjoyed having Rebecca Leigh with us this year. Rebecca is based in the community and has helped bring a different perspective to us. If you wish to apply or explore this option, please speak to any of the committee members during the conference or please feel free to contact us anytime.

Gail Curran

SVN President



## President's Report

### Emma Waldegrave



It has been a true honour undertaking the first year of my Presidency for the SVT and I am very much looking forward to The ASM in Brighton. I am very fortunate to work with an exceptional group of volunteers who give their time, expertise, and initiative to the SVT for the benefit of our patients and colleagues. I would like to thank my fellow committee members for all their hard work, support, and encouragement.

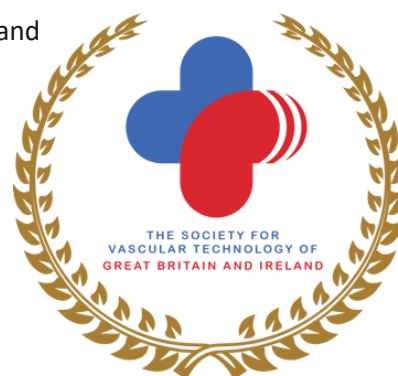
I would also like to thank the VS, EBS events team and the entire ASM committee, chaired by Douglas Orr, for their support of the SVT and hard work in planning such a large event for all the societies.

This year will be the **30th Anniversary of the SVT**, a huge achievement and one we intend to celebrate. We have taken a walk down memory lane and reflected on how far the field of Vascular technology, now known as Vascular Science, has come and how this has been championed by the SVT with support from our affiliated vascular societies. We have produced posters of the past 30 years of the SVT that will be displayed at the ASM in Brighton.

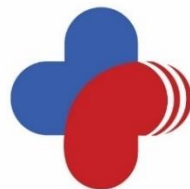
The **PAD-QIF** written by the VS, BSIR, VASGBI and Podiatry with input from the SVN and SVT will no doubt accelerate change to the clinical pathway for patients with PAD and promote best practice across the UK and Ireland. We thank the VS for supporting and including the SVT in this work.

This year the SVT worked with the NHSE **Physiological Science Transformation Programme** which forms part of Diagnostic Transformation Programme assembled following the Richards Review commissioned by NHSE in 2019. The review highlighted the need for radical change in diagnostics and its timely release in the endemic environment served to further amplify the dire need for change in the provision of diagnostic services. The pandemic highlighted the significant contribution of the healthcare science workforce in delivering key diagnostic services and this alongside the Richards review promoted the need to review physiological science diagnostics. It became apparent there were inconsistencies and lack of data capture on these diagnostics by the DM01 or ESR. The workforce data was also sparse or not coded consistently as healthcare scientist on ESR so getting a read of the current workforce, the capacity and current backlogs was not going to be straight forward.

Starting with a stocktake tool, the Physiological Science team worked with the SVT to gain insight into vascular science; information on the types tests we perform, the coding of these tests and how they are recorded, the workforce and where they sit divisionally, equipment and facilities; digitisation and connectivity. This stocktake tool is currently being tested and in the new year will be disseminated nationally to Trusts.



**30TH ANNIVERSARY**  
THE SVT 1992-2022



In most recent communications *'The office of the CSO is committed to working with our Professional Bodies to discuss their concerns and plan for the future of their profession, which will help our response to the LTWP and potential need for specialisms to join the National shortages list for the NHS.'*

The SVT are working with **Gloucestershire University** to produce the curriculum content for the new **Healthcare Science (Vascular Science) BSc (Hons) degree**. This realises discussions held in previous SVT Heads of Service meetings. This new qualification will help increase the workforce nationally by allowing career progression through all levels. With full support of the NSHCS we will be aiming for AHCS and CASE accreditation to ensure graduates get automatic registration with the AHCS practitioner register. The course will run as both a distance learning apprenticeship and direct entry degree with the aim of opening for the first intake in Sept 2023.

The **Equivalence award** will continue to run in 2023 for our AVS members, and in addition we will have a broader education grant open to all our members looking to further their education. Details of the grant will follow in due course. The SVT are working on an equivalence resource for our members to guide evidence mapping, hopefully making the process smoother and less daunting, we hope to have this available next year.

This year the SVT has taken on **administrative support** to assist us in delivering our education and training objectives. Through our close relationship with the British Medical Ultrasound Society, we were lucky to procure administrative services from their experienced team. This dedicated support has benefitted the SVT membership in many ways; delivery of virtual training days and revision webinars, updates to the website and implementation of a new newsletter to name just a few. BMUS and the SVT have closely aligned aims in the promotion of science, education, and training in ultrasound to benefit the public. As the leading profession in Vascular science/ultrasound, the SVT are dedicated to delivering vascular education to the wider ultrasound audience at BMUS's annual scientific meeting each year.

The SVT continues to award **research grants** to Clinical Vascular Scientists, and we are fortunate to be able to award up to £10 000 per annum. This year we awarded two £4000 grants, and we look forward to receiving more applications in the next grant window this year. We believe that this funding is crucial in supporting / encouraging the membership to continue their research activities whilst offering a clinical service within the NHS with the outcomes presented at the ASM. An SVT ambition for 2023 is to deliver a **research webinar series** to compliment the SVT Research Series released this year for the membership. This educational content will support our members looking to gain more understanding of research design and theory and will hopefully spark innovation.

This year we host our **advanced skills workshop** at the ASM in Brighton and will focus on thoracic outlet syndrome and popliteal entrapment. In 2023, we aim to run an Upper limb arterial and Venous workshop and a CEUS EVAR workshop.

Three committee members will be stepping down this year. I would like to extend my sincerest thanks to them all for their tireless work and support of the SVT; Richard Simpson, Chair of the Research committee, who will be passing the position to Steven Rogers; Asif Dilshad and Davinder Virdee, training and revision day organisers for the education committee.

Emma Waldegrave

President of the SVT GB & I

**Louise Tisdale**  
**BACPAR Chair**



The BACPAR membership agreed to change its name to British Association of Chartered Physiotherapists in limb Absence Rehabilitation at the 2021 AGM, to be more inclusive of the rehabilitation of individuals with congenital limb absence.

The author of this report in 2021; Julia Earle, is now Vice Chair and I am in the position of Chair again. Julia and Hayley Crane (PRO BACPAR) continue to ensure that BACPAR is well represented at the Vascular Societies' Open Council meetings. Julia has led BACPAR from strength to strength in her 6-year

tenure - and kept us together through the Covid years.

BACPAR's regional representatives continue to utilise initiatives and resources developed in 2020 to support members' CPD alongside a resumption of face to face training in some regions.

2022 Membership numbers are consistent with those of 2021; the majority of whom are Physiotherapists working in acute or rehabilitation settings.

BACPAR looks forward to holding its conference programme within the VS ASM again this year and we hope that it's content will be of interest to the vascular and rehabilitation MDT. Our members look forward to networking with the same.

BACPAR members are strongly representing the role of Physiotherapists in the rehabilitation on individuals with limb absence within the development of guidelines and support of research.

The Amputee Rehabilitation Research Network continues to meet; sharing good practice in research and supporting individuals in their consideration of new projects.

The Journal of the Vascular Societies Great Britain and Ireland has BACPAR representation from Dr Miranda Asher, one of BACPAR's research officers. Themes featured in the JVSGBI will be followed up in the BACPAR ASM Programme.

We continue to publish the BACPAR Journal twice a year and since the Spring Journal we have carried out a survey of the membership re it's value and attained members' objectives and ideas for it for future editions.

The inclusion of BACPAR in the Vascular Societies has enabled stronger representation in the Provision of Services with Vascular Disease document initially disseminated at the 2021 ASM and subsequently online, we hope that this has been successful in raising the awareness of commissioners in the role of Physiotherapists in associated conditions, thereby improving patient outcomes.

BACPAR has agreed to support SPARG (Scottish Physiotherapy Amputee Research Therapists Group) to enable the development of their database to understand the effects of COVID on the rehabilitation and outcomes of individuals undergoing lower limb amputation in Scotland.

Outside of the UK, BACPAR members have been supporting the education of Therapists in Ukraine through online teaching and the collation of resources.



## Vascular Society Affiliate Representative

Claire Dawkins



ROULEAUX CLUB  
UK Vascular Trainees' Association



**ASPIRE Junior** continues monthly with good attendance and good feedback. **ASPIRE Core** launched with a ST3 application webinar and further webinar planned in New Year around interviews. An introduction to Vascular Surgery course is planned for the 2022 ASM. Introduction to Vascular Surgery courses also run at the ASiT conference, the Charing Cross Vascular Symposium, and in Birmingham and Edinburgh in collaboration with RCS Ed.

Plans are in place to pilot a Vascular Surgical Course to Foundation Trainee Surgical Society in Northeast – if successful then may roll out to other UK regions.

The Rouleaux club was invited to **Global Vascular Training Meeting** to discuss sharing/creating educational resources for vascular trainees/surgeons worldwide. Plans for further meeting Sept with initial ideas for a “Global MDT webinar”. We are in a collaboration with CST Hub - latest plan for national CST training. Presented 25/8/22 as part of multidisciplinary introductory teaching for CST Hub & will have further afternoon of teaching later in the year. We have medical student fellowships in conjunction with RCS Ed. with two fellowships undertaken at St Thomas’ Hospital, London.

The Rouleaux **BUH paper and infographic** were published in the JVSGBI in August, along with an accompanying editorial by Andy Garnham and Rachael Forsythe. We are working with the SAS team regarding BUH aspect to their survey to compare results in future. We are also working with the SAC on the development of more WBAs, especially to fit with new curriculum. Aiming to get them uploaded onto ISCP ASAP (teething issues!).

Response to MSRA and changes to CST applications in conjunction with ASiT.

**VS ASM** Joint Rouleaux-VS session at the 2022 ASM with BUH focus. MDT case competition received 11 entries with 3 cases to go through for presentation. If successful, then would hope to continue in future years. Essay competition for Med students and Foundation trainees – submissions closed and marking underway. Twenty-five £50 medical student bursaries available.

The **end of year survey** was circulated to members in September. Topics surveyed included radiation protection; the impact of dual consultant operating on training; and interventional training access.

Plans are to continue to run ‘*Introduction to Vascular Surgery*’ to improve exposure to vascular surgery for Medical Students and Junior Doctors. Next year’s ASPIRE Junior to be a “Vascular and...” series to highlight the breadth of specialities vascular surgeons work with. Second ASPIRE Core to be run with aim to repeat in future years. Hope to run Global MDT sessions in conjunction with World Federation of Vascular Societies. Further work with VS regarding BUH issues and continue to work with SAC/JCST to improve ISCP resources/WBAs.

Claire Dawkins

Rouleaux Club Vascular Society Affiliate Representative

**Vascular Society Annual General Meetings and Officers**

<b>Year</b>	<b>ASM Location</b>	<b>Society President</b>	<b>Honorary Secretary</b>	<b>Honorary Treasurer</b>
1966	The Middlesex Hospital, London	Mr Sol Cohen	Mr JA Gillespie	Mr JA Gillespie
1967	Edinburgh	Mr Sol Cohen	↓	↓
1968	Hammersmith Hospital, London	Mr PGC Martin	↓	↓
1969	Royal Infirmary, Glasgow	Prof AW Mackay	Mr A Marston	Mr A Marston
1970	University College, Dublin	Prof FP Fitzgerald	↓	↓
1971	St Mary's Hospital, London	Mr HHG Eastcott	↓	↓
1972	The University, Dundee	Prof Sir D Douglas	Mr DGA Eadie	Mr DGA Eadie
1973	St Thomas's Hospital, London	Prof JB Kinmonth	↓	↓
1974	Queen Elizabeth, Birmingham	Prof G Slaney	↓	↓
1975	St Bartholomew's, London	Prof GW Taylor	Mr CV Jamieson	Mr CV Jamieson
1976	Royal Infirmary, Bristol	Prof JH Peacock	↓	↓
1977	Pfizer Foundation, Edinburgh	Mr AI Macpherson	↓	↓
1978	Liverpool	Mr CR Helsby	Prof A Mansfield	Prof A Mansfield
1979	John Radcliffe Hospital, Oxford	Mr D Tibbs	↓	↓
1980	St Thomas's Hospital, London	Mr FB Cockett	↓	↓
1981	University Hospital of Wales, Cardiff	Mr G Heard	↓	↓
1982	University Hospital of South Manchester, Manchester	Mr S Rose	Mr SG Darke	Mr SG Darke
1983	St Mary's Hospital, London	Mr JR Kenyon	↓	↓
1984	Medical School, Birmingham	Prof F Ashton	↓	↓
1985	The Middlesex Hospital, London	Mr A Marston	↓	↓
1986	The Institute of Education, London	Mr M Birnstingl	Prof CV Ruckley	Prof CV Ruckley
1987	Civic Centre, Newcastle-upon-Tyne	Mr PH Dickinson	↓	↓
1988	The University of Leeds, Leeds	Mr J Shoesmith	↓	↓
1989	Ninewells Hospital, Dundee	Prof W F Walker	↓	↓
1990	Kensington Town Hall, London	Mr EJ Williams	Mr PL Harris	Mr PL Harris
1991	Royal College of Surgeons, Dublin	Mr WP Hederman	↓	↓
1992	Metropole Hotel, London	Prof NL Browse	↓	Mr MH Simms
1993	Royal Northern College of Music, Manchester	Mr D Charlesworth	↓	↓
1994	Assembly Rooms, Edinburgh	CV Ruckley	Prof L de Cossart	↓
1995	Kensington Town Hall, London	Mr CW Jamieson	↓	↓
1996	Bournemouth International Centre, Bournemouth	Mr SG Darke	↓	Mr MJ Gough
1997	Royal Lancaster Hotel, London	Prof A O Mansfield	↓	↓
1998	City Hall, Hull	Mr JMD Galloway	Prof WB Campbell	↓
1999	De Montfort Hall, Leicester	Prof PRF Bell	↓	↓

Year	Venue	Society President	Honorary Secretary	Honorary Treasurer
2000	London Arena, Docklands, London	Prof RM Greenhalgh		Mr RB Galland
2001	Hilton Brighton Metropole, Brighton	Mr RN Baird		
2002	Waterfront Hall, Belfast	Prof AA Barros D'Sa	Mr PM Lamont	
2003	Scottish Exhibition and Conference Centre, Glasgow	Prof KG Burnand		
2004	Harrogate International Centre, Harrogate	Mr PL Harris		Mr DC Berridge
2005	Bournemouth International Centre, Bournemouth	Prof M Horrocks		
2006	Edinburgh International Conference Centre, Edinburgh	Mr JHN Wolfe	Mr JJ Earnshaw	
2007	Manchester Central Convention Complex, Manchester	Prof G Hamilton		
2008	Bournemouth International Centre, Bournemouth	Mr MJ Gough		Mr SD Parvin
2009	BT Convention Centre, Liverpool	Mr PR Taylor		
2010	Hilton Brighton Metropole, Brighton	Prof C Shearman	Mr M Wyatt	
2011	Edinburgh	Mr PML Lamont		
2012	Manchester Central Convention Complex, Manchester	Prof AR Naylor		Mr T Lees
2013	Manchester Central Convention Complex, Manchester	Prof JA Scott		
2014	Glasgow	Prof J Beard	Mr K Varty	
2015	Bournemouth International Centre, Bournemouth	Mr P Blair		
2016	Manchester Central Convention Complex, Manchester	Mr M Wyatt		Mr A Garnham
2017	Manchester Central Convention Complex, Manchester	Prof R Sayers		
2018	Glasgow	Mr K Varty	Miss S Renton	
2019	Manchester Central Convention Complex, Manchester	Prof I Loftus		
2020	<b>Virtual meeting (Covid-19)</b>	Prof C Imray		
2021	Manchester Central Convention Complex, Manchester	Mr Mike Jenkins	Mr M Brooks	Mr A McCleary
2022	Hilton Brighton Metropole, Brighton	Mr Jon Boyle		
2023	Convention Centre, Dublin	Miss R Bell		
2024	Hilton Brighton Metropole, Brighton	Mr A Garnham		
2025				

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GREAT BRITAIN & IRELAND

