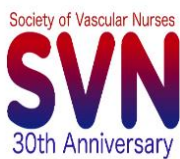




OF GREAT BRITAIN AND IRELAND

Yearbook 2023

1992-2023



Registered Charity Number 1102769

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Vascular Society

----- New for 2023 -----

VSGBI tie



£20.00

Silver brooch



~~£60.00~~ £50.00
Introductory price at ASM

Gold brooch



~~£60.00~~ £50.00
Introductory price at ASM



Left to Right: Front row - Andrew Garnham, Anselm Egun, Bridget Egan, Rachel Bell, Kaji Sritharan, Neeraj Bhasin and Arun Pherwani. Back row - Alistair McCleary, Douglas Orr, Prof. Sadasivam Selvakumar, Prof. Ciaran McDonnell, Ian Hunter, Patrick Coughlin, Prof. Denis Harkin, Prof. Srinivasa R Vallabhaneni and Marcus Brooks. Absent – Ian Chetter, Matt Bown and Lucy Wales.

Admin team (Executive Business Support)

VS administrator

Louise Collins

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 @VSGBI

President's Report

Rachel Bell



It has been an honour and a privilege to be the President of this society in 2023. My year has gone by in the blink of an eye, and it only seems like yesterday that Jon was handing me that remarkable chain of office in Brighton. When you wear it, you notice all the engraved names of Past Presidents and I have felt the metaphorical weight of responsibility of being the society's temporary guardian and leader. It seems fitting that in the year the second woman became President of the Vascular Society the first ever female president, Professor Averil Mansfield became a Dame

Commander of the Order of the British Empire (DBE) for services to surgery and equality in medicine in His Majesty the King's Birthday Honours List. I was Averil's SHO in 1997 and for me, there is no one more deserving of the praise and celebration she has had this year, winning a Lifetime Achievement award at the Pride of Britain Awards, and publishing her autobiography 'Life in Her Hands'. For me, she is going to be an extremely hard act to follow.

This year has been a difficult one for the National Health Service with the perfect storm of ongoing recovery from the pandemic, a financial crisis, increasing costs of living, escalating surgical waiting lists, an exhausted workforce and industrial action. I have been a doctor for 30 years and this year has been like no other. I have been heartened by the solidarity between teams and across professions, but it has been a hard year and I, like many of you, have had to dust off my stethoscope, learn how to electronically prescribe, cope with computers on wheels and be resident on call. I am grateful for the current pause in industrial action, and I hope that the current talks and negotiations with the government reach some acceptable conclusions.

It has been such a pleasure and an inspiration working with VS Council and the committee chairs this year. One of the highlights has been the proactive way the Workforce Committee, led by Ciaran McDonnell, have taken forward the work around Bullying, Undermining and Harassment (BUH). They have participated in the joint FSSA working group and joined forces with the Royal College of Surgeons of Edinburgh to develop and trial a course on conflict resolution to help equip us with the skills to tackle difficult situations. I was proud to participate in the inaugural course and that vascular surgeons formed the majority of the participants on the facilitator's course in September in Birmingham. A few weeks later the next shocking revelation was the published report¹ and paper² by Professor Carrie Newlands and the Working Party on Sexual Misconduct (WPSMS) describing the surgical workforce members' experiences with sexual misconduct (sexual harassment, sexual assault, and rape) in the last 5 years in the UK. As a woman in medicine, I would like to take this opportunity to thank Professor Newlands and her team for publishing this important work. I was unsurprised by the findings and that is because I know of no female colleague who does not have an ugly story about inappropriate behaviour, misogyny or gaslighting in their career.

This report has made people sit up and listen. There is no doubt that we need to actively work to change surgical culture as we need to ensure that our fantastic, talented workforce feels safe, supported, and protected at work. **The responsibility for that culture change lies with all of us.** In addition, many of us are canvassing for an independent body for confidential reporting and investigation of sexual misconduct within our profession as it is done universally poorly within hospital trusts.

We know that we have a workforce problem in vascular surgery, which has got worse after the pandemic. As eloquently stated by Denis Harkin in his leading article for the JVSGBI 'Repairing the vascular surgery workforce: attract, recruit and retain'³ we have problems at all stages. This was reinforced by the RCS Eng. Workforce Survey which showed we have significant problems with burnout, stress, and disillusionment because of a lack of resources for us to provide the quality of care for our patients that we aspire to. I think this is going to be an ongoing project of work for the council to ensure that we have a strategy for ensuring we are canvassing and pressurising for the right complement of staff to keep our services running at the highest level.

The Circulation Foundation has a new memorandum of understanding that includes our allied societies and the joint board, this will be an excellent way to collaboratively develop the charity to advocate for our patients. I am grateful to Neeraj Bhasin for his leadership and vision.

The Audit and Quality Improvement Committee under the excellent leadership of Arun Pherwani has produced the annual NVR report and a State of the Nation Report. Next year the NVR data collection system will become integrated with the NHS England system for collecting data on implanted medical devices, the Medical Device Outcome Registry platform (MDOR). The NVR has already been collecting data on devices implanted during AAA repair and this facility will be extended to other procedures in the coming year. It is important that we maintain our excellent case ascertainment rates as this will provide valuable insight into durability and potentially allow identification of failing devices at the earliest stage.

On a personal note, I would like to thank Marcus Brooks for the incredible job he does as secretary of the society. He keeps us all on the straight and narrow and is the 'power behind the chain'; from reviewing job descriptions, orchestrating the new website development, developing the new voting procedures for the Presidential election, ensuring that all council and committee chair posts are advertised at the correct times, liaising with our allied societies and a myriad of other things that just get seamlessly done in the background. Marcus, you are a superstar and the backbone of the society, and you have been a wise council for me throughout this year.

It gives me great pleasure to welcome Andy Garnham as your new President. Andy is incredibly accomplished and has been a great support to me this year. We have represented the society on visits to Cairo & Chennai . I know Andy will be an excellent President of the society and will continue to work with council to continue to push the society forward.

I wanted to improve the inclusivity and diversity of the society and now I look around the room at council meetings and I smile as the council is representative of our workforce, if a little short of women. I hope that one of the legacies of my Presidency is to inspire other women to get involved and help us run the society. The society is thriving, and the future looks really bright. As I hand the chain of office to Andy, I wish him every success for the year ahead and Ian Chetter for 2025.

Miss Rachel Bell

President of the VSGBI

X @rebelvascular



May VS Council Meeting, Newcastle (Photographs by Graham Brown)

References

1. Sexual harassment, sexual assault and rape by colleagues in the surgical workforce, and how woman and men are living different realities: observational study using NHS population-derived weights. Begeny C et al. British Journal of Surgery Nov 2023: 110(11); 1518-26.
2. Breaking the silence: Addressing the sexual misconduct in healthcare
The Working Party on Sexual Misconduct in Surgery (WPSMS)
<https://www.wpsms.org.uk/>
3. Repairing the vascular surgery workforce: attract, recruit and retain.
Harkin D et al <https://jvsgbi.com/wp-content/uploads/2023/07/2-Harkin.pdf>

Lifetime Achievement Award 2023

The Society has awarded this year's lifetime achievement award to Syed Waquar Yusuf.

Professor Syed Waquar Yusuf MB BS DM FRCS Consultant Vascular & Endovascular Surgeon, University Hospitals Sussex.



Professor Yusuf is a pioneer in vascular and endovascular surgery. He trained in Nottingham and Perth, and in 2002 joined the Royal Sussex County Hospital in Brighton as a Consultant Vascular & Endovascular Surgeon.

Even prior to becoming a consultant, he had played a pioneering role in the development of endovascular aortic surgery. Before the availability of commercially available devices, he was pivotal in training many vascular centres across the country, often supplying his own handmade grafts to get endovascular programmes up and running. Of note he performed the first endovascular repair of a ruptured abdominal aortic aneurysm in the world in 1994 and went on to demonstrate the feasibility of EVAR in the emergency setting. He also went on to perform the first endovascular repair of a thoracic and popliteal aneurysm in the UK.

He was a Hunterian Professor of the Royal College of Surgeons in 1999 and a visiting Professor University of Texas Houston USA in 2006. He has edited some of the early books and has numerous high impact publications on Vascular and Endovascular surgery. He served as the Tutor in Vascular Surgery (2006-2009) at the Royal College of Surgeons of England and Director of Vascular & Endovascular Courses at the RCS, developing many of the successful college courses including EVAR planning, vascular ultrasound, and team training for ruptured aneurysm repair. He also served as a Member Court of Examiners RCS, Professional Affairs Board (Southeast) and Appointments advisory committee of the Royal College of Surgeons of England. He was an active member of Vascular Society Council (2009-2011) and contributed to the development of the vascular curriculum at the time when vascular was applying for speciality status. More recently, he has helped develop a successful regional vascular service for Sussex, integrating five hospitals across the county. He has been actively involved in the Brighton & Sussex Medical School for 10 years developing the surgical module and campaigning to keep surgery in the undergraduate curriculum.

He is thoroughly deserving of this award as his contribution to UK vascular surgery over the years has been outstanding.

Honorary Secretary's Report

Marcus Brooks



The theme for the Society in 2022-3 has been to become more inclusive and accessible. We must have a Society which is aligned and in tune with its members, be they early years Consultants, mid-career Consultants, or Consultants approaching the twilight of their careers. We must also not forget that doctors are just one part of the wider vascular multi-disciplinary team (MDT). At our Annual Scientific Meeting Consultants are outnumbered by Trainees, Nurses, Clinical Vascular Scientists and Physiotherapists! We are also seeing the expansion of new roles within the health service, including Advanced Nurse Practitioners (ANPs), Physicians

Associates (PAs) and Surgical Care Practitioners (SCPs). Change is needed to meet the huge challenges, that we all know too well, of recruitment and retention of the workforce in the face of pay erosion and an ever more complex patients and treatments. The Workforce Committee has put together a recruitment strategy and this will be discussed by Council with involvement of the Rouleaux Club.

Industrial action prompted by workforce concerns has been a backdrop to Council meetings this year. We have made great progress as a Society in engaging with SAS and LED doctors. This has been largely thanks to the brilliant work of Ibrahim Enemosah and Tatiana Martin, we are grateful to both, and sad to see Tatiana step down from this role. With changes to the CESR process and the development of the Specialist Doctor role we look forward to supporting all SAS/LED doctors through career progression, something that has not been so accessible to them in the past. In 2023, Kaji Sritharan and Paddy Coughlin, along with the Education and Training Committee, will be launching an early year's Consultant ASPIRE programme. A questionnaire has just been circulated to find out what this group want included in this education. The Society is working with RCS Eng. on how to define and improve mentorship provision for new consultants.

An important theme for all consultants (and their teams) is support when adverse events happen. Without this support the cost is great to both the individual and their ability to care for future patients. The Society's Professional Standards work has in the past been more focussed on setting or enforcing standards than developing colleague support. Working with the RCS Ed. and the Workforce Committee we have a new "*Conflict Resolution Course*" under development and under the leadership of Prof. Ian Loftus and Prof. Chris Imray the Professional Standards Committee has been refreshed. We are grateful to Ian for all that he has done for the Society and wish him well for his year as ESVS President.

Arun Pherwani has had a challenging year due to changes to the National Vascular Registry contract from the Healthcare Quality Improvement Partnership (HQIP) and the move of medical devices out into the NHS Medical Devices Register. This has been indicative of wider NHS England changes, such as the mergers of Health Education England (HEE) and NHS Digital with NHS England, and the move of commissioning for most vascular services in England to Integrated Care Boards (ICBs). One relief is that high-cost medical devices remain in the current system of procurement and the supply chain.

The Vascular Society / Circulation Foundation clinical fellows (Celia Welsh – Glasgow, Joe Norton – Edinburgh and Ellie Atkins – London) continue to deliver excellent work. It has been a huge disappointment for the Society that RCS Eng. has not appointed a vascular research fellow through their Research Fellowship Programme for next year. This came despite the close working relationships forged by the VS with the RCS England Clinical Effectiveness Unit (who deliver the National Vascular Registry) and our research connections through our three RCS Eng. Surgical Speciality Leads (Matt Bown, Dan Carradice and George Smith).

The vascular speciality has never had better representation on RCS England Council and in Prof. Rob Sayers has a superb representative to take forward our views. On a positive note, the Society will be reappointing to the RCPS Glasgow 'Frailty' Fellowship in 2024 and has agreed a new joint fellowship with BSIR and the Royal College of Radiologists (RCR).

Neeraj Bhasin and the Circulation Foundation (CF) Committee have worked hard 'behind the scenes' to develop a charity that is more patient focussed. This will be most evident when the new CF website launches next year. I am delighted that the SVN, SVTGBI and Rouleaux have signed memorandums of understanding (MoUs) to work more closely with the CF. All these allied societies will have formal representation on the CF Board. A huge thank you must again go out to all members, active and retired, who support the CF. A special additional thank you goes to George Gunnel for a £5000 legacy donation.

The JVSGBI goes from strength to strength, with an application submitted for PubMed. Prof. Denis Harkin wrote an excellent editorial entitled '**Repairing the vascular surgery workforce: attract, recruit and retain**' <https://jvsgbi.com/wp-content/uploads/2023/07/2-Harkin.pdf>. '**The journey to greener vascular surgery**' by VERN, Becky Sandford and Andy Garnham is another important read. <https://jvsgbi.com/wp-content/uploads/2023/07/3-VERN-Al-Saadi.pdf>. Congratulations to David Russell and the team at Leeds for the most read article '**Wifi scoring: a reliable tool for risk stratification in the diabetic foot clinic**'. <https://jvsgbi.com/wp-content/uploads/2022/04/4-Williams-PRINT.pdf>

The Societies 2025-6 President will be voted for by members. This followed a resolution at last year's AGM and subsequent poll of members. It is a change to make the Society's leadership process more transparent. Nominated for the ballot are Prof Alun Davies, Douglas Orr, Arun Pherwani, Prof. Ciaran McDonnell and Keith Jones. Each has made their case via a statement and video as to why they should be elected to lead the Vascular Society. The ballot result will be announced at the AGM.

The following Society appointments have already been made this year:

- **Rachel Bell** and **Jon Boyle** have been appointed jointly by NHS England and the Vascular Society as joint Vascular GIRFT Leads from December 2023.
- **Prof Ian Chetter** has been appointed as Vascular Society representative to the Surgical Research Society (SRS)
- **Ansy Egun** has been appointed as the next Workforce Committee chair.
- **Prof Sadasivam Selvakumar** has been appointed as the next ASM Committee chair.

Looking forward to 2024

The biggest change members will see next year is the launch of a new society website. The website has had a complete redesign over several workshops held this summer. I am enormously grateful to members of Elected Council, Philip Baker and Louise Collins from EBS, Nina Al-Saadi and the LightMedia team for their work on the website. Not only will the new website work equally well on mobile devices, the redesigned members area and renewal process will provide a much-improved user experience (this has been long overdue). This will include on boarding new speciality trainees and Consultants without the need to seek nominations, a new bulletin board and secure committee areas.

The Society will also be launching an engagement survey. We want to hear from both members and non-members on their view of the Society and the changes they want to happen for the VS to feel like their professional home.



Please look out for the survey launch and encourage colleagues to engage!

It remains for me to thank just some of the people who have committed their time and energy to the Vascular Society in 2023. Rachel Bell has been an exemplar President, never more so than when as her alter-ego 'Red Rachel' she took up the fight for pay restoration and improved working conditions on behalf of nurses, trainees, and consultants. It has been a pleasure to work with you Rachel, and I am delighted that you and Jon Boyle will continue to support and develop vascular services through your GIRFT roles. Alongside Rachel, Louise Collins has been my greatest support ensuring the smooth running of the secretariat, council meetings and membership. Louise's editing of my writing is invaluable and my apologies to Louise for my dreadful spelling! I will not list all the Executive Committee by name, they are a superb team and an absolute pleasure to work with. The length and breadth of their activity over the last 12 months is set out in their committee reports. Thank you to all committees' members.

Executive Business Support (EBS) provides excellent support for the VS. Enormous thanks go to Louise, Gemma, Laura, Amy, Liz, Julia, Phil and Gail. Phil Baker has done an exceptional job of steering the website tender process and development. Gail Ryan's enthusiasm is boundless and can be seen in the development of both the Circulation Foundation and JVSGBI. The EBS team will be out in Dublin and please do say hello to them. I am always keen to hear your views...

Mr Marcus Brooks
Honorary Secretary VSGBI

 @BrooksMedBris

Paul Anthony Edmund Hurst

9th August 1946 – 7th September 2023



The admiration and respect for this talented late friend: polymath, vascular surgeon, teacher, artist, musician, motoring enthusiast, fisherman, ornithologist, raconteur, and wit and above all, family man was enthusiastically celebrated. A busy enthusiastic man, recounting amusing stories, sculpting a bust, creating an artwork, extravagantly illustrating a set of surgical operation records, or doodling a candid cartoon of one of his friends. Paul was brought up in Essex, industrious and with fine academic ability and musical talents gaining him entry to St Mary's Hospital Medical School. Paul received the distinguished Hepburn Memorial Prize in Surgery. He moved to St Thomas' Hospital as a rotating surgical registrar having achieved the FRCS, but also the MRCP. He was important in the invention of an operation with Professor JB Kinmonth for lower limb

lymphoedema, "*the mesenteric bridge*", transplanting lymphatics from ileal and mesenteric tissues, bypassing the iliofemoral blockage.

Paul was appointed to the Royal Sussex County Hospital, Brighton, as consultant. Paul was thrilled and not just a little amused to be based in a colourful Kemptown with a contemporary, diverse population, in a district general hospital with excellent colleagues, and able to live in rural Sussex. As a general and vascular surgeon, he will be remembered for his great care of the patients, his attention to detail, his diagnostic clinical skills, his teaching, his patience, his wit and his humour.

The students recognised him in the Top Teacher Awards as Best Overall Teacher, which was repeated year on year recognising his inspirational style.

Paul was President of the Royal Society of Medicine, Surgical Section. His masterful academic year included the traditional President's speech "*A View from the Beach*", illustrated with numerous quirky cartoons and was dispensed with his inscrutable cutting delivery. He was an active of the RSM, the Vascular Society, the Surgical 60 Travelling Club (over two dozen members attended Paul's memorial), the local MedChi Society and the Jaguar XK Club. In his own time, he enjoyed sport on his "state of the art television and sound system" which had every conceivable optional extra, but impossible to understand multiple remote controls. His favourite relaxation perhaps, was being at his Cornwall home overlooking St Michael's Mount watching barn owl, deer, buzzard and rabbits, when he would reminisce.

Paul's final slides in his ASM Presidential presentation were entitled: "*Behind every man...*" followed by not just photographs of his wife Sandra, but his beloved Jaguar XK140... Paul would always inject some humour into an occasion! And as Sandra said, "*he was such a funny man!*".

Professor Roger Malcolm Greenhalgh

6th February 1941 - 6th October 2023



Roger Greenhalgh, born in Derbyshire, was not from a medical background. He went to Ilkeston Grammar School and was the first in his family to attend university. At Clare College, Cambridge, his medical tutor predicted that he would be a surgeon. He moved from Cambridge to St Thomas's Hospital (London). The pioneer vascular surgeon, Peter Martin, inspired him. Whilst in training he won the prestigious ASGBI Moynihan Travelling Fellowship. Roger joined the surgical consultant staff as senior lecturer at Charing Cross Hospital in 1976. He went on to become Professor of Surgery and Dean of the Charing Cross & Westminster Medical School (1993-7).

At the time of his death, he was emeritus Professor of Surgery at Imperial College in London and head of its Vascular Surgery Research Group. His long-time research partner, Professor Janet Powell (Imperial College, London) described him as a "brilliant" clinician with a "long and distinguished" research career, as well as highlighting his prowess as an educator and mentor, noting that "medical students and junior doctors have queued for the opportunity to work in his team". His research, with more than 300 original published papers, spanned all areas of vascular surgery. The most important of his trials were the UK Small Aneurysms Trial (UKSAT) and the UK endovascular aneurysm repair (EVAR 1 & 2) trials. He was also the principal investigator of the MIMIC trials.

Roger played a pivotal role in the creation of both the European Society for Vascular Surgery (ESVS) and its journal. He was chairman of the EJVES editorial board (1987-2003). He was President of the European Board of Surgery for the European Union of Medical Specialists (1998 -2002) and the European Board of Vascular Surgery (2002-6). He was the millennium president of the Vascular Society, an honorary Fellow of the American College of Surgeons and the first "Living Legend", an International Lifetime Achievement Award, from the Society for Vascular Surgery (SVS).

He founded the Charing Cross series of international symposia (CX). He presided over the 45th symposium earlier this year and was working on the CX 2024 programme up to his last days. He was always in his element at the CX podium, his secret passion for the theatre on full display, enjoying the cut and thrust of discussing the current, hot-button issues in the vascular field with global experts. Speakers feared his acerbic wit and the tolling of the bell if they overran on their talks!

Roger rowed at St Thomas's Medical School and remained a long-term supporter of the Imperial College Boat Club. His love of skiing saw him create the Association of International Vascular Surgeons (AIVS). Roger was supported throughout by his Austrian wife, Karin, who died in April 2020 from COVID-19. They were happily married for over 55 years. Karin's constant support was integral to Roger's success. He is survived by his two children, Stephen and Christina, and three grandchildren Sebastian, Francesca and Marcus of whom he was immensely proud.

Simon Sai-Hang Lau

1989-2023



Simon studied medicine at King's College, London. His career then spanned the United Kingdom via Wales, Plymouth, Glasgow, Scunthorpe, and Sheffield. Simon was in his ST4 year of vascular surgery speciality training on the Sheffield Vascular Institute (SVI) when he became ill. Just shy of his 34th birthday, pancreatic cancer robbed Simon of his future that seemed so clear and so very tangible, within touching distance.

Professionally, he would have been the colleague people turned to, well-liked across the team, and the trainer trainees wanted to be in theatre or on-call with. He would have made a truly tremendous

training programme director and worked earnestly at leaving the system better than when he found it. Further, Simon's nature would effortlessly have been an antidote to the poor cultures, toxicity and rampant ruinous egos that we hear about in surgery. These were the antithesis to him.

In the words of Caitlin MacLeod, one of Simon's many close friends, written shortly before Simon died, *'Simon is someone who embodies the very best of us and makes the world a better place, with his true kindness, compassion and genuine gentleness (he can barely pull himself up just now, but he is more concerned about those around him). Beyond being a thoroughly decent person with such unshakable integrity, he is also a lot of fun, with a cheeky smile and a quick laugh. He was excellent at his job, hard-working, caring, reliable and technically able. But the disease has ravaged him and robbed him of his future, and what hope we had to secure more time is now gone. What we hope for now is comfort and peace.'*

Welsh rugby, the gym, dogs (especially corgis) and a rum were favourites of Simon's, and he always made time for people. His friends have asked for support for Pancreatic Cancer UK's **"Don't Write Me Off"** campaign: <https://www.pancreaticcancer.org.uk/get-involved/make-a-difference/join-our-campaigns/dont-write-me-off/>

Wendy Hayes (SVN)

Died 8th July 2023

Wendy was a Nurse Consultant at Worcestershire Acute NHS Trust. She was such an amazing role model for nurses & has made an enormous contribution to nurse training. Her expertise in nursing & the vascular specialism along with her good-hearted nature never ceased to make an impact on the people that she met. She will be missed by so many people, not just locally but across the UK.

The Vascular Society

ANNUAL GENERAL MEETING

Wednesday 22nd November 2023 16.30-17.00
Auditorium, Convention Centre, DUBLIN

Chair: Rachel Bell

1. President

Rachel Bell

1.1. Welcome

2. Honorary Secretary

Marcus Brooks

2.1. Sign off minutes of 2022 AGM (23rd Nov 2022)

2.2. New elected council members

2.3. Membership category changes

2.4. Engagement survey

2.5. In memoriam

3. Honorary Treasurer

Alistair McCleary

3.1. Financial report

3.2. Membership subscriptions

RESOLUTION 1: Agree finance plan for 2023/24

4. Vice-President

Andrew Garnham

4.1. Election of Society President for 2025-6

5. Any Other Business

Marcus Brooks

Date and venue of next AGM:
Wednesday 27th November 2024
Hilton Metropole, BRIGHTON

Honorary Treasurer's Report Alistair McCleary



Despite inflation and the general state of the world economy, the finances of the Society remain in good health.

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 1st July to 30th June each year.

In 2022/23 the total turnover for The Vascular Society was **£448 000** with an operating profit of **£117 167**.

These figures include a further large grant (**£120 000**) to the ASPIRE programme from the Health Education

England Covid Recovery Fund. This grant is discretionary, and we do not expect to receive it every year.

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. However, I am pleased to report that the **Journal of the Vascular Societies of Great Britain and Ireland** is close to breaking even this year and hopefully will generate income in the future.

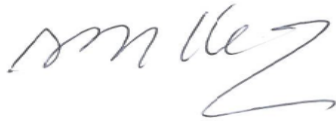
We have been supporting four research fellows in recent years, with two Fellows in partnership with the Royal College of Surgeons of England, one with the Royal College of Surgeons of Edinburgh and one with the Royal College of Physicians and Surgeons of Glasgow. We are not renewing the partnership with the RCS England this year, but we will be supporting a fellow in partnership with the Royal College of Radiologists and the Society of Vascular Interventional Radiologists. An additional large cost is to build new websites for both the Vascular Society and Circulation Foundations. After a lengthy competitive tendering process, the contract for approximately **£60 000** was awarded to LightMedia. It is important that the charity presents a modern face to the world so Council believes that this expenditure was essential.

The **ASM** which took place in Brighton, November 2022 was a great success both academically, socially and financially. The Society is very grateful to all those who attended and industry sponsors. Turnover was **£395 000** and generated a profit of **£53 000** which will be distributed to the Vascular Society, SVN, SVTGBI and BACPAR in the next accounting year.

The policy of the Vascular Society is to hold **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. However, over the last 2 years we have received unexpected grants from Health Education England totalling £250 000 and benefitted from a legacy of £100 000. Without these we would have traded at a significant loss. The administrative costs have increased significantly due to the expansion of the Societies activities, and the ASM is making less profit than previously. Thus, while the Council will endeavour to control expenditure and maximise income, it will be necessary to increase the membership fees for Ordinary members, for the first time in many years from £250 to £300. Membership fees for 2023-24 are shown below.

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.



Alistair McCleary
Honorary Treasurer VSGBI

Membership Fees 2023-24

Ordinary	£ 300
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 30th June 2023

THE VASCULAR SOCIETY

DRAFT 13.11.23

COMPANY LIMITED BY GUARANTEE

CHARITY DETAILED INCOME AND EXPENDITURE ACCOUNT

YEAR ENDED 30 JUNE 2023

	2023		2022	
	£	£	£	£
INCOME				
Voluntary income				
Membership CF donations	14,500		15,800	
Donations and gift aid	53,929		61,599	
Legacies	11,172		100,000	
Aspire income	187,408		139,231	
Gift aid payment from VSGBI Limited	<u>45,931</u>		<u>53,521</u>	
		312,940		370,151
Charitable activities				
Subscriptions		110,040		115,377
Advertising income (JVSGBI)		4,250		7,000
Fundraising income				
Marathons and events	1,110		15,925	
Other	<u>858</u>		<u>1,530</u>	
		1,968		17,455
Investment income				
Interest - Bank interest	6,727		436	
Interest - Fixed interest securities	980		645	
Dividends	<u>11,036</u>		<u>8,936</u>	
		18,743		10,017
TOTAL INCOME		<u>447,941</u>		<u>520,000</u>
EXPENDITURE				
Fundraising expenditure				
Marathon and events	830		3,580	
Other	<u>4,892</u>		<u>9,648</u>	
		5,822		13,228
Cost of charitable activities				
Grants awarded	10,000		30,064	
Aspire expenditure	92,583		49,724	
Review costs	-		-	
Journal costs (JVSGBI)	25,180		48,323	
Prizes	20,286		5,225	
CF project and communication support	13,537		14,862	
Committee, secretarial and admin costs	107,270		116,807	
Travel & subsistence	23,521		17,019	
Stationery, printing, postage	1,598		688	
IT support costs	11,729		9,515	
Depreciation of fixed assets	1,667		1,636	
Advertising and marketing	5,651		6,284	
General expenses	2,670		7,530	
Bank fees	1,352		1,982	
Bad debts written off	-		2,280	
		317,044		311,939
Governance costs				
Fees payable to independent examiner	5,556		5,187	
Legal and professional fees	<u>375</u>		<u>1,918</u>	
		5,931		7,105
TOTAL EXPENDITURE		<u>328,797</u>		<u>332,272</u>
Gain(loss) on revaluation of investments		(1,740)		(49,109)
Surplus for the year		<u>117,404</u>		<u>138,619</u>
Brought forward funds		1,271,446		1,132,827
Carried forward funds		<u>1,388,850</u>		<u>1,271,446</u>

Education and Training Committee Report

Patrick Coughlin



It has been a very productive year for the Education & Training (E&T) Committee, one which has resulted in us broadening our education portfolio.

The ASPIRE programme has continued delivering a residential education course for all our higher surgical trainees from years 3-8.

Each course addresses specific aspects of the curriculum (ASPIRE 3-6), is focused on FRCS Vasc. preparation (ASPIRE 7) or is focused on preparation for consultant practice (ASPIRE 8).

A detailed review of each course can be found in the ASPIRE yearbook which can be accessed on

the education part of the VS website. Well worth a read to see all the excellent work our course convenors have put together. I am specifically grateful to all of them:

ASPIRE 3: Mr. Tim Beckitt, Bristol.

ASPIRE 6: Miss Diane Hildebrand, Cambridge.

ASPIRE 4: Miss Diane Hildebrand, Cambridge.

ASPIRE 7: Mr Julien Alshakarchi, Worcester.

ASPIRE 5: Miss Anna Murray, Birmingham.

ASPIRE 8: Miss Kaji Sritharan, Liverpool.

We say an extra thanks to Tim, Julien and Kaji who hand over the reins of their respective course. Next year, ASPIRE 3 will take place in Leeds, ASPIRE 7 in Cardiff (Mr Lewis Meecham & Mr Huw Davies) and ASPIRE 8 in Manchester (Mr Jon Ghosh). More details for each course will be provided through the Rouleaux club and on the E&T twitter account (@VascularWebinar).

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A key part of this year was to develop our training portfolio for our SAS & LED doctors working alongside non-consultant grade council representatives Ibrahim and Tatiana. At last year's ASM we had the first session at an ASM focused solely on SAS & LED doctors. This will be repeated again this year with an excellent programme and I would encourage all to attend. We also ran our first on-line SAS / LED session in the Summer of this year with some excellent speakers and a focus on clinical aspects of vascular surgery alongside discussions on the FRCS exam and CESR. Moving forward, we will be repeating our online sessions but also providing an opportunity for those SAS / LED doctors who are planning on sitting the FRCS exam to attend the ASPIRE 7 course in March in Cardiff. We will be reaching out to those who are eligible soon.

We also supported our first joint SVN and VS education day. Again, this was undertaken online with excellent attendance and positive feedback. The day focused on a range of clinical topics including aortic disease, CLTI and management of the diabetic foot. Plans are already in place to undertake a second education day in the summer of 2024. Many thanks to Kaji Sritharan and Vicky Bristow from the SVN for organising this.

We have also helped support a number of other courses this year. The renal access course lead by Karim Elsakka in Coventry where trainees underwent an intensive cadaveric course across all aspects of renal access. Secondly, we are also running a training day on the management of superficial venous reflux which will take place the day prior to the start of the ASM. Both these have been supported based on feedback from trainees and training bodies who have identified these as training areas of need.

We continue to focus on new areas where we can help education and training of all our members. We are in the process of developing a programme of education and support for our new consultants (within 5 years of starting in post) and we would be grateful for all of this consultant group to complete our questionnaire (QR code will be visible throughout the VS ASM) so that we can tailor this course appropriately.

We also continue to develop an open AAA simulator which we hope will be ready for use in 2024 and we plan to trial this at one of the ASPIRE courses.

ASPIRE digital continues specifically used to comment on newly published trials and seminal data. Our last webinar focused on the BEST-CLI and BASIL-2 system. NHS England have advertised for a national digital TPD with the aim of delivering digital content for senior trainees. In vascular surgery, given the success of ASPIRE digital we are seen as a specialty who can help drive forward the delivery of this programme of education. It would be our hope that we would work with the successful candidate to streamline the digital output alongside the ASPIRE courses.

At the ASM this year, we launch a new book entitled “All you need to know about Vascular Surgery – a guide for medical students, early year doctors and allied healthcare professionals”. The book will initially be a digital book and will be able to be accessed during the ASM. The title is self-explanatory, and is drive for us to be an outward facing specialty with the aim of showcasing the specialty to medical student, newly qualified doctors and allied health care professionals. The chapters are concise, written on the whole by those people who the book is aimed at and is part of the society drive to showcase the speciality to as many people as possible.

We continue to receive financial support for these courses from NHS England (formerly Health Education England) and we have developed strong relationships with key people and we hope to be able to secure ongoing funding for the ASPIRE programme. Alongside this, we are also very grateful for continued funding from a number of our industrial partners and these have been recognised in the ASPIRE yearbook.

Finally, I am forever indebted to all my colleagues who have given up of their time to act as faculty in the courses that we deliver. It is appreciated not only by the committee but by all our trainees and course attendees. I am also indebted to the E&T committee for all their hard work over the year, most of it goes unseen but without it the portfolio of courses would not be as broad as it is. I would like to thank Gail and the EBS team for all their help and support.

Patrick Coughlin
Chair Education and Training Committee

X @coughlin_pa



ASPIRE 3 Delegates and Faculty (Photograph by Anthony Anthony)

SAS/LED Representative Report

Ibrahim Enemosah



It has been a great year for SAS/LED vascular surgeons with our first SAS session at the VSASM at Brighton last year which was well attended with excellent feedback. We are excited about our upcoming breakout session in Dublin at this year's ASM where we will be talking about autonomous practice with a range of brilliant speakers. We look forward to seeing you there.

RCS England SAS Strategy

RCS England launched their SAS Strategy in June which we had the opportunity to attend. This showcased the Launch of the new RCS England SAS and diversity website which covered the work the Vascular society has done so far in supporting SAS Surgeons in their career and education and an interview and an interview of our representative on council. Links below:

Vascular Society's strides:

<https://diversity.rcseng.ac.uk/get-involved-in-our-diversity-equity-and-inclusion-work-rcs-england/sas-get-involved/>

RCS England Vascular SAS/LED representative Interview:

<https://diversity.rcseng.ac.uk/get-involved-in-our-diversity-equity-and-inclusion-work-rcs-england/ibrahim-enemosah/>

Courses

ASPIRE SAS digital ran for the first time in June. This was a well attended event with brilliant engaging faculty and excellent feedback. We would like to thank everyone who was involved in making this a reality.

The first **SAS ASPIRE 7** (digital) is scheduled to run in November prior to the Section 2 of the FRCS Vascular. We have 20 candidates attending and we believe this will significantly improve their chances of success in the upcoming exam. Our hope is for this to go face to face next year.

ASPIRE 8 has been open to SAS surgeons and many candidates benefited from the pre consultant interview course this year. We are delighted with the great strides the educational committee has achieved this year with supporting SAS surgeons in their career progression.

ISECSN

We would like to highlight the newly formed Intercollegiate Surgical Education Committee for SAS/LED/non-consultant grade doctors (ISECSN) which we are members of representing vascular surgery SAS surgeons. ISECSN Educational committee has put together resources on its official website

(www.ISECSN.org) providing key information, resources, and various access to support, helping those in SAS grade posts to enhance their skills and progress in their career.

SAS/LED Representation

Tatiana Martin resigned from council this year as SAS representative due to her other professional and personal commitments. Her passion has been the driving force behind the great strides we have achieved and we wish her all the best in her future endeavours. We are sad to see her go and look forward to future collaborations.

Associate Specialist/FRCS/CESR

We would like to congratulate everyone who has started an associate specialist role, has passed the FRCS and those who were successful in their CESR application this year. We look forward to collaborating with you in supporting the 78 brilliant SAS surgeons we support around the 4 nations.

Ibrahim Enemosah
SAS/LED Representative

sas@vascularsociety.org.uk

Workforce and Education committee

RCS England Vascular Surgery SAS Representative

[SAS Get Involved - Royal College of Surgeons of England \(rcseng.ac.uk\)](http://rcseng.ac.uk)

Ibrahim Enemosah

SAS doctors and surgical specialty associations

"Within the last year, word of mouth has created an informal network. This has made more SAS doctors aware of the support provided by the Vascular Society – and my work easier."

Read More →



Miss Fiona Kerray, Research Fellow
Human Factors Science/Ergonomics



I'm grateful to the Vascular Society, RCS Edinburgh and the Circulation Foundation for jointly supporting a 2-year Research Fellowship which has allowed me to work towards an MD in Human Factors Science and Digital Education in Vascular Surgery.

It is recognised that outcomes in surgery are the product of the interactions between people and the systems and environments within which they work. Human factors/ergonomics (HFE) is the scientific discipline that explores these relationships. Understanding relevant HFE principles in the operative context can optimise individual and team performance, enhance wellbeing, and improve patient safety. At present, HFE education in surgery largely comprises standalone, unfunded courses which are typically based around team training, or avoiding errors and adverse events. Although a positive addition, these opportunities often fail to highlight other less obvious elements such as biomechanics, thermal or noise environment, and human computer interactions, and rarely promote the role of HFE in successful outcomes.

Understanding and being able to apply HFE principles relevant to vascular surgery would provide trainees with knowledge and skills to optimise their theatre, improve their performance and enhance their wellbeing. My research aims were therefore to:

- (i) Identify elements of HFE which impact operative performance in vascular surgery.
- (ii) Establish which HFE elements surgeons perceive as contributors to adverse events.
- (iii) Ascertain a baseline knowledge of HFE amongst vascular surgery trainees and identify barriers and motivators to participating in non-mandatory training.
- (iv) Design and deliver a relevant, engaging, and accessible HFE education programme.

Other Opportunities

Time out of programme for research has allowed me to develop my own skills in academia (and time management), however it has also afforded me several unique opportunities to meet and work with a range of people whom I would never have otherwise met. The experience, advice and knowledge that they have shared regarding not just human factors/ergonomics, but also lessons from sporting achievements, legal and political influences, and challenges [and successes] encountered on a world stage have been unparalleled. In particular, the Global NOTSS Group - a team of psychologists, medics and educationalist from Boston, Rwanda, Nigeria, Malawi and the UK - kindly allowed me to work with them to deliver training in non-technical skills for surgical teams in several sub-Saharan countries. In addition, we have established a new multidisciplinary team in Blantyre, Malawi, with whom we are undertaking a local research project and collaborating with other groups, including Lifebox, to both improve safe surgical care and advance access to research opportunities for clinicians.

I'd like to take this chance to thank my advisory group, including Andrew Garnham, Keith Jones and Rachel Bell, and my supervisors Prof. Steve Yule and Andrew Tambyraja.

Vascular Research Committee Report

Prof. Matthew Bown



It has been an excellent year for vascular research.

The publication of the BASIL2 trial results in the Lancet, a trial widely supported by the members of the society, is a landmark in the evidence base for the management of people with peripheral arterial disease. Combined with data from the BEST-CLI trial, we now have considerably stronger evidence that will ultimately be of benefit to our patients.

Other key trials are currently underway and vascular research is well represented in the NIHR portfolio with 7827 participants recruited in 2022/23 across 24 research studies, half of which were randomised trials. Key ongoing studies include DM-PAD, ARIA, PHAST, DOMINO, ACCESS,

PAVE, THRIVE, PCAAAS and SHOCC. Details for many of these studies and others can be found on the Vascular Research UK website (www.vascular-research.co.uk).

In the last year members of the society have secured significant funding for several new randomised trials and research studies that will now develop the future evidence base for vascular clinical practice (listed below). Currently in setup or recently opened are: the WARRIORS trial of EVAR vs surveillance for women with small AAA (Janet Powell/Colin Bicknell); the EVOCC trial of endovascular vs open surgery for aorto-iliac occlusive disease (Thanos Saratzis); MAT, a trial of metformin vs placebo for people with small AAA (Matt Bown); the PLACEMENT trial of stump infusion catheters in major limb amputation (Dave Bosanquet); ADVANCE trial of Endurant vs Excluder endografts (PJ Howard). Additional trials in uncomplicated type B aortic dissection, colchicine in peripheral arterial disease.

The POPS intervention and antithrombotic management in peripheral arterial disease are in the pipeline and will be contracted in 2024.

Members seeking to open any of the above studies in their unit should contact the investigators listed above or the VSGBI Research Committee.

The Surgical Speciality Leads and SIGs continue to support the development and delivery of research across the UK and beyond. The ASPIRE Academic training day was held in March 2023 at the Royal College of Surgeons of England and involved over 50 delegates. A free to register vascular trials conference was held in Leicester in June and included details of upcoming trials, and training on trial design and delivery issues.

The SIGs continue to work to support the development of new research aligned to the James Lind Alliance priorities. Importantly three NIHR HTA platform trial development grants have been awarded to members of the society and the full platform trial applications (PAD, venous disease, wounds) have been strongly supported by the SIGs.

Mechanisms of complex endograft failure; Individualised decision making for AAA repair; Virtual contrast for CT imaging; PCSK9i for small AAA management; Enhanced recovery after open AAA repair; AAA prehabilitation programmes; Understanding non-intervention in AAA management; Palliative care in CLTI; Venous service organisation; Improving consent in venous surgery; CEA vs medical therapy in symptomatic carotid artery stenosis; Carotid plaque vulnerability.

Prof. Matthew Bown
Chair of the Research Committee

X @Matt_J_Bown

VASCULAR RESEARCH UK



Connecting The UK Vascular Research Community

LEARN – COMMUNICATE – COLLABORATE

JOIN OUR COMMUNITY

<https://www.vascular-research.co.uk>

Audit and Quality Improvement Committee Report Prof. Arun Pherwani



They say time flies when you are having fun and the last three years have certainly gone by in a blur.

Three Annual Reports, two Covid updates, two Aortic Devices reports and several papers later, I come to the end of my term as Chair of the Audit and Quality Improvement Committee and Clinical Lead for the NVR.

The 2023 National Vascular Registry (NVR) State of the Nation Report has a different feel to it, and is now a short, pithy document, in keeping with other HQIP commissioned reports. However, as before, the online Supplementary Material's section has all the information at provider unit level that consultant colleagues are well used to and that are needed for benchmarking and quality improvement. Individual consultant data continue to be provided to colleagues from Vascular Surgery and Interventional Radiology by personal email from

the NVR team.

In 2022, we have seen timelines to aneurysm repair, carotid surgery, and even to intervention for CLTI, slip a little bit as we recover from the pandemic and deal with numerous challenges in the NHS such as industrial action and long waiting lists. Despite these challenges and the lack of data support, I'm pleased to report that for the first time the number of angioplasties has increased, and the NVR has a case-ascertainment of 54% and I'm very grateful to IR colleagues and surgeons who diligently enter their angioplasty data. We have also seen a reduction in case ascertainment rates in England where data entry is mandated and AAA and carotid numbers are at 90%. I thank colleagues from devolved nations Wales and Northern Ireland where case ascertainment rates are at 100% and urge data support for our colleagues in Scotland who require data support for engagement with the NVR.

We have seen the benefits of the CQUIN supporting delivery of the PAD QIF with all units making attempts to improve timelines to intervention for CLTI. NHS England have extended the CQUIN scheme for a second year 2023-24 and I request all colleagues to continue their efforts to treat patients with CLTI expeditiously and enter their data on NVR, as this is the only reliable marker that commissioners use to monitor performance. Building on the theme of reporting for CLTI and the CQUIN, in the next year the NVR will aim to provide quarterly reporting of timelines to urgent carotid (14 days) and AAA intervention (8 weeks).

One cannot make mention of the PAD QIF and the CQUIN without acknowledging the great work that our fellows, Penny and Ellie put in. Penny has successfully obtained her PhD and I expect Ellie to submit her thesis shortly; both have published extensively. We were unsuccessful with the 2023 Royal College of Surgeons of England Fellowship application. However, I'm very happy to report our successful joint Vascular Society, Circulation Foundation, BSIR, and the Royal College of Radiologists (RCR) Kodak application towards an IR fellowship with the NVR with joint supervision from vascular surgical and IR colleagues and the NVR team. The fellowship will be advertised shortly.

We have made great strides with building strong foundations with the BSIR and kept our promise to provide angioplasty and EVAR data to our IR colleagues. The BSIR in their own generosity have recognised our efforts and I am very grateful to the BSIR for the award of an Honorary Fellowship of the BSIR in November 2023 for leading on the commitment and support we have provided to our vascular interventional radiology colleagues, their trainees and their Society. This is a collective honour and a lot of the credit goes to Vascular Society Council and the NVR team, and I want to thank our President Rachel; Andy, Paddy and Neeraj for their financial commitment to the IR fellowship, Ian and David Cromwell for the supervision, and Marcus along with other Committee Chairs, Paddy, Douglas, and Matt for their kindness and support.

We had great plans for my final year as Audit and Quality Improvement Committee Chair. A lot of progress has been made with the updated lower-limb and the revision angioplasty datasets limited to a single page, aiming to build functionality to generate an operation note and a record for hospital EPR systems along with the ability to capture device information. Unfortunately, we have been stymied by the continuing delays in moving the NVR to the new IT platform, with our providers NEC solutions having to spend more time than expected on the Outcome Registries Programme (ORP). I'm very grateful to my colleagues from the Audit Committee Kaji, Ian and Rao along with Robin and James Harding from the BSIR who have helped contribute to these revised datasets and have patiently waited.

We successfully negotiated the new NVR contract with HQIP for our core function of providing information on procedures and outcomes. We are still in the process of negotiating contracts with NHS England and the ORP to collect, expand and report on device data.

There is plenty of work ahead for the Audit and Quality Improvement Team and with that I welcome Denis, my successor, a brilliant colleague, a good friend and an all-round good guy who I'm sure will do very well leading the Audit and QI Committee and the NVR over the next three years. I request all our friends and colleagues from surgery, radiology and anaesthesia to support him as you have supported me. I also thank colleagues on the Audit Committee Neil, Peng, Declan from ABHI, Rajiv from VASGBI, Akhtar from NAAASP and the ever kind and helpful Louise Collins from EBS for their help and support.

And lastly, by no means the least, my heartfelt thanks to the NVR team, who have put up with my every whim and fancy over the last three years. For me personally, along with looking after patients on the NHS, this role with the Audit and QI Committee and the NVR has been a real privilege. Over the years our profile of the NVR as the world leading international vascular registry has grown, and I'm very grateful to David, Amundeeep, Qiuju, Robin, Denis and Sam.

Arun Pherwani
Chair of the Audit and Quality Improvement Committee

X @adpherani

National Vascular Registry

State of the Nation Report 2023

Results for patients who had vascular procedures during 2022 in NHS hospitals in England, Wales, Scotland and Northern Ireland

<https://www.vsqip.org.uk/reports/2023-nvr-state-of-the-nation-report/>



November 2023



Creative



Workforce Committee Report Prof. Ciaran McDonnell



The Vascular Society remains committed to eradicating Bullying, Undermining and Harassment in Surgery. To this end we have engaged with the Royal College of Surgeons of Edinburgh in developing a training module in Addressing Conflict in Teams. The first iteration of this took place in the Birmingham Offices of the RCS Ed in September. The VS was well represented with half of the twenty participants being Vascular Surgeons. It is intended that a training day for potential faculty members to deliver this module will take place in Edinburgh in early 2024.

The findings of the RCS report on Sexual Misconduct within surgery made for harrowing reading. The position of the Vascular Society on this issue has been clearly articulated in the statement by Council of September 13th. Sexual misconduct is not merely abhorrent behaviour but is a criminal offence and cannot be tolerated and I would encourage anyone who is a victim or who witnesses such behaviour to report it.

The issue of workforce recruitment and retention remains a topical one for the profession in general. The Workforce Committee has produced a strategy on this which will be discussed at the next council meeting. We hope to collaborate closely with the Rouleaux Club on developing this. The most recent addition of the JVSGBI contains an article by Professor Denis Harkin highlighting the problems we face. The solutions will ultimately prove to be multi-faceted. I am happy to receive any suggestions as to how we might attract more medical students and trainees into the specialty.

The area of mentoring is another area where I feel we need to concentrate our attention. While I have looked for funding for this from NHS England, particularly to support our Non-NTN/CESR applicants but unfortunately didn't receive a positive response.

I wish to thank all the members of the Workforce Committee for the time and energy they have given over the last twelve months. I would like to especially mention one of our two Non-NTN reps, Tatiana Martin, who has stepped down during the year for her contribution to the work of the Committee.

Finally, I want to congratulate Mr. Ansy Egun from Preston who has been elected as Chair of the Workforce Committee and will shadow me for a twelve month period before taking over at the ASM in Brighton next year.

Ciarán McDonnell
Chair Workforce Committee

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

Annual Scientific Meeting Committee Report

Douglas Orr



It has been many years since the Vascular Society was last in Dublin and so we are delighted to be making a return this year. Rachel Bell, our President, has chosen the theme of compassionate leadership and this is reflected in much of the content of the meeting. We welcome three international speakers, Anahita Dua and Alan Lumsden from the USA, and Kak Khee Yeung from the Netherlands, and they will each deliver one of our invited lectures. Along with many familiar sessions in the programme, we also have a number of less formal, breakout sessions where interaction and debate is encouraged. We also have more innovative themes such as green surgery and celebrate 10 years of AAA screening. Chairs for all sessions

have been encouraged to ensure there is plenty time for questions and audience participation and, to help this, we are using the Slido conference app for many of the sessions. It will still be possible to come up to strategically placed microphones in the hall to ask questions, but Slido allows delegates to ask questions electronically in real time. This can be done either by including your name or by remaining anonymous. In addition, where appropriate, it can be used to participate in live polls. Each Slido session across all the different Societies has a unique entry code and these are listed in the programme.

There is a joint multi-disciplinary symposium for all the Societies in the main auditorium on the Wednesday afternoon entitled “The ideal amputation/ amputee”. This will be followed by a Welcome Reception in the conference centre and then the SVN Evening Symposium where Fiona Kerry, one of the research fellows sponsored by the Circulation Foundation and Royal College of Surgeons of Edinburgh, will tell us about human factors. This is an opportunity for everyone to get together and renew old acquaintances and meet new colleagues.

We had the highest number of abstracts submitted this year, with over 260 for the Vascular Society alone, and so competition for an oral presentation has been considerable. These will be presented on the Wednesday morning as usual, with the best from each of the sessions getting through to one of the prize sessions on the Thursday. In addition, there are more posters than ever, and they will be displayed on electronic monitors in one of the foyers. Poster presenters will give a brief presentation of their work on the Thursday at lunchtime.

This year both BACPAR and SVN celebrate their 30th birthdays and they will be marking this milestone at the ASM. They and SVT have many interesting sessions in their programmes and, if interested, delegates from the different societies can attend these. We have deliberately looked to have greater collaboration with all the societies and the joint session on amputation will bring us all together in the main auditorium followed by the drinks reception for an opportunity to network and mingle. There is also the Gala Dinner on Thursday evening in the Guinness Storehouse where the social side of the conference can continue.

The conference app contains all the information required for the conference, including programmes for all the societies, instructions on how to use Slido, abstracts and posters and speaker profiles.

We are delighted that we will run four sponsored symposia organised by our major sponsors Medtronic, W.L. Gore, Shockwave and Penumbra. In addition, the exhibition area contains stands from our industry colleagues and I encourage everyone to take time to visit the exhibition to see what is on offer.

Again my sincere thanks go to the team from Executive Business Support who have put in a huge amount of effort to ensure that the Dublin ASM is a success. In addition, the dedication and commitment of the members of Council, the various sub-committees and the organising committees from BACPAR, SVN and SVT are hugely appreciated and I hope that this will all come together to give us a memorable conference.

Next year we return to Brighton and plans are already underway for the venue following that. Lastly, I am delighted to announce that Professor Sadasivam Selvakumar has been elected as the next Chair of the ASM Committee. He will shadow me for the Brighton meeting and then take over the organisation of subsequent meetings.

Douglas Orr
Chair Annual Scientific Meeting Committee



Convention Centre Dublin - Céad Míle Fáilte – by night

Professional Standards Committee Report

Prof. Chris Imray



I took over as Chair of the Professional Standards Committee from Professor Ian Loftus earlier this summer. I would like to thank him on behalf of the Society for his hard work, his leadership and his discrete stewardship. In the past the work of the Professional Standards element of the Society has always been somewhat shrouded in mystery, and Ian started a process of making the workings of the Committee more transparent.

The Society Council has now endorsed a new **Terms of Reference** for the Professional Standards Committee. The Committee itself needed a revival, and now comprises the Chair, the Honorary Secretary, the President Elect, the Chair of the Workforce Committee

and at least one other member of VS Council. They 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, which can be 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.

The Professional Standards Committee has a number of surgeons trained to assist with either RCS or VS reviews, but we would like to expand this pool so if there are individuals who are interested in helping I would be keen to hear from them.

Chris Imray
Professional Standards Committee Chair

X @chrisimray



RCS Eng. Speciality Lead in Vascular Surgery Report Prof. Robert D Sayers



I have attended all Council meetings on behalf of the Vascular Society either face-to-face or remotely. A wide variety of topical issues have been discussed at Council including:

COVID - The effects of COVID on NHS recovery, lack of return of surgical capacity and the large number of patients waiting for surgical procedures has been discussed. We have discussed solutions including surgical hubs, increased financial support and better use of facilities including the private sector.

Workforce & capacity – The workforce survey had a very good response and the results are being collated. Initial data suggest significant concerns for the future of the surgical workforce. We

have discussed wider sharing and use of the data and possible solutions to the crisis.

Kennedy reforms – These have been discussed and widely adopted.

Industrial action – Generally the industrial action to improve pay and working conditions has been supported. Concerns remain about patient's safety and numbers waiting for procedures.

Pensions – The changes announced in the recent budget abolishing the lifetime allowance has been noted. It is hoped that this move will stop senior surgeons leaving the NHS and may attract back some who have already retired.

I also represent the society on several sub-committees including-

- Research & quality committee
- Membership & engagement committee
- Workforce & training committee

I am the RCS lead on several external projects and committees including-

- The role of tranexamic acid to reduce surgical bleeding
- NCEPOD steering committee
- The New Hospital committee – giving advice on the surgical requirements for new operating theatres and other facilities
- The management of low sodium conditions


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

Rob Sayers
RCS Eng. Speciality Lead in Vascular Surgery
NHS England Vascular Clinical Reference Group Chair

X @robsayers17

Society Meetings and Officers (2000-23)

Year	Venue	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	Virtual meeting (Covid-19)	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	TBC	Mr I Chetter		



Circulation Foundation

Circulation Foundation Report Neeraj Bhasin



Firstly, I would like to thank you all for continuing to actively support the Circulation Foundation.

I think it has been an exceptional year with such a bright future on the horizon.

I want to start with a thank you. This was my first year as Chair of The Circulation Foundation and I would like to thank the inspirational Rachel Bell for handing over the CF in such good health and being so supportive, both in my shadowing period and since she has been an amazing President of the VSGBI.

We continue work to support our 3 main aims:

- To support vital research into vascular disease.
- To support individuals living with vascular disease.
- To raise the awareness of the impact vascular disease has on our patients, their carers and the wider NHS.

I would like to start with what I believe is the main achievement this year, and a landmark moment for the CF, in amongst several firsts. I am delighted that we have agreed a partnership agreement with the Rouleaux Club, SVN and SVTGBI for the CF to become the charity of the vascular societies. This reflects the existing partnership arrangements with the ASM and journal, but also reflects the multi-disciplinary nature of our working lives. We believe this will make the charity stronger, more representative of the professional vascular community, more sustainable and resilient, as the wonderful Gail Ryan from EBS described it, “a single unified, louder, voice.” We look forward to our next committee meeting with colleagues from the Rouleaux Club, SVN, and SVTGBI and am hugely grateful for their open approach and being forward thinking.

A further significant development to make the CF ‘fit for the future’ is the wholesale refresh of our website. This will create something more modern that we can all be proud to signpost patients, relatives, MDT colleagues, partner organisations, and corporate organisations to. We are delighted be working alongside LightMedia and VS colleagues to bring this to life. We are grateful to the Specialist Interest Groups, Venous Forum, and other colleagues for refreshing the current patient information leaflets and creating new ones. I hope that all units will proudly use the patient information leaflets moving forward to help a shared decision making, informed approach.

With respect to our patient support activity, we know the self-directed exercise Infographic for Intermittent Claudication created in COVID, also relevant with a scattered provision of Supervised Exercise Programmes, is very valuable. We also know we serve an ethnically diverse population across our respective catchments. Therefore, to reduce health inequalities, this has been translated in to 15 different languages so we can support patients to self-care from a range of diverse backgrounds.

We will send these out to units and primary care facilities when completed but they are already available for you to use on our website. We are grateful to Nikki Fenwick, Senior Vascular Nurse Specialist at Sheffield Teaching Hospitals, for suggesting the idea.

We have made some valuable connections recently, mainly with the Vascular and Venous All-Party Parliamentary Group with whom we have created a very positive working relationship. We have also had an initial meeting with the British Heart Foundation Policy Team to see if we can commence some mutually beneficial work.

To cover some firsts: we have commenced the utility of QR codes for donations, launched Vascular Health Awareness Month with our first video podcast, made a radio appearance on BBC Radio Nottingham, and recorded an interview with Jim Shannon MP, Chair of the VVAPPG.

Our Podcast and interview are available on our website and well worth a watch. They obviously could not have happened without Gill Holman – one of our patients, Laura Shields and Sean Pymer – our inspirational fundraisers, Ellie Atkins and Penny Birmpili – our researchers, and Jim Shannon MP, as mentioned above. We are also grateful to Jai Singh, a journalism student at Salford University, who recorded, edited and produced the podcasts for us free of charge.

The Body Walk was a huge success again, Kaji Sritharan raising in excess of £1000 and participants covered 2281 Miles, raising over £3000, and raising our total coverage since the start of the initiative to 40,764 miles!

I would not want to inadvertently miss anyone who have pushed themselves and achieved great personal feats to complete the Great North Run and London Marathon, running to raise funds for the CF. We can not express how grateful we are, and how awesome you are!! That also includes Paul Bradbury, who completed the Newark Castle 100 bike ride in memory of his Father in Law, and raised £306.

I have the honour of Chairing the CF, and understand the responsibility that brings, but the heart behind all of this work is from Liz Nichols – continuing her vital dedication to the CF, Amy Williams – bringing a fantastic new energy, and Gail Ryan – with such great compassionate insight, from Executive Business support.

We continue to develop numerous exciting and novel methods to raise awareness and funds.

I will finish with some requests for all colleagues, which are:

- Please continue to help raise our awareness and profile.
- Please do follow us on our social media platforms if you engage with them.
- The amazing CF hoodys and T-shirts (pictured overleaf) are available to purchase.
- If you, or someone you know, would be willing to participate and fundraise on behalf of the CF in our events (Ride London, Great North Run, Swim Serpentine, London Marathon and Big Vitality) please do approach us.
- We have created some backgrounds for virtual meetings feel free to use them.

Thank you to everyone who continues to support The Circulation Foundation,



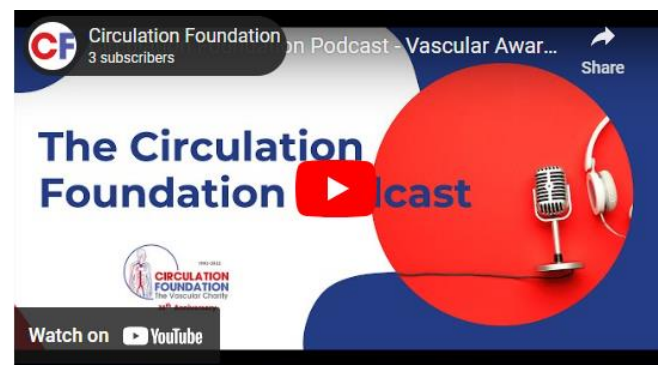
Neeraj Bhasin
Chair of The Circulation Foundation

X @8NBX



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Journal

Journal of the Vascular Societies of Great Britain and Ireland (JVSGBI) Prof. Ian Chetter



The JVSGBI has had an incredibly successful two years. The journal is free, open-access and is published online quarterly. It represents the whole vascular community.

MEDLINE application has been submitted and we are eagerly awaiting the outcome. After a hopefully successful application, PUBMed application will be submitted.

Time to on-line publication is approximately ten weeks. Ninety two articles have been submitted to-date. Eighty three are currently being processed, accepted or have

been published. Six articles have been rejected, and three were sent back to the authors but not resubmitted. Currently, the most popular article is by Williams P, Bakewell Z, Akinlade B and Russell DA: *'Wifl scoring: a reliable tool for risk stratification in the diabetic foot clinic.*

<https://jvsqbi.com/wp-content/uploads/2022/04/4-Williams-PRINT.pdf>

Breakdown of article types:

Editorials x 17
Original Research x 41
Systematic Review x 4
Trial Protocol x 8
Cohort Study x 3
Case Study x 9
Short Report x 3
Event Report x 1

Global access to the JVSGBI:



Although predominantly aimed at UK based vascular activities, this has not prevented its global appeal, with data showing user access in over 80 countries. The top five countries are: United Kingdom, United States of America, India, Australia and Indonesia.

The number of affiliated organisations has now increased and include: British Association of Chartered Physiotherapists in limb Absence Rehabilitation (BACPAR); British Society of Endovascular Therapy (BSET); British Society of Interventional Radiology (BSIR); Rouleaux Club; Society of Vascular Nurses (SVN); Society for Vascular Technology of Great Britain and Ireland (SVT); UK National Interventional Radiology Trainee Research (UNITE) Collaborative; Vascular Anaesthesia Society of Great Britain & Ireland (VASGBI); Vascular and Endovascular Research Network (VERN).

If the journal continues to publish online only, and JVSGBI can achieve two sponsored supplements each year, the financial forecast after three years is to publish at a breakeven capacity.

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.

Ian Chetter

 @Chetterlan

Vice President Elect of the Vascular Society

The Journal of Vascular Societies and Great Britain (JVSGBI)





Affiliated Societies

BACPAR

Louise Tisdale, Chair



BACPAR's representation to VS committees is through Julia Earle (to VS Open Council) BACPAR's Vice-Chair and PRO, and Dr Miranda Asher (to ASM Committee and VSGBI Journal) – BACPAR Research Officer.



BACPAR membership numbers remain healthy; members are Physiotherapists working both in Private Practice and the NHS and we are joined by non-Physios; including Prosthetists and Occupational Therapists which adds to the depth of understanding of the limb absence rehabilitation pathway.

Again, BACPAR looks forward to holding its conference programme within the VS ASM this year and we know that it is content will be of interest to the vascular and rehabilitation

MDT. Our members look forward to networking with the same and find themselves presenting in the non BACPAR programme.

Celebrating its 30th anniversary year the BACPAR Executive Committee will build upon feedback gained by the Journal editors to gather membership feedback about their priorities for the Professional Network's work plan. The 30th anniversary Journal edition was published in October and pays testimony to the advances in limb absence rehabilitation and the role of Physiotherapists in those developments.

Current work continues updating the Pre and Post op guidelines. Volunteers from the VS and SVN have been sought to support this. The literature search has taken place and the identified papers are being reviewed by the update group. A survey of how the current guidelines have been used is underway and one for users is also being promoted.

A webinar has been held in association with the CSP Advanced Physiotherapy Practice Network and representation from Health Education England. It was an excellent introduction to the potential of the role in limb absence rehabilitation and access to training and portfolio support to gain accreditation.

BACPAR's research officers have been involved with the Amputee Rehabilitation Research Network (ARRN) and disseminate opportunities to be involved in quality relevant research to the BACPAR membership. They participate in the VS regular research committee meetings.

Regional representatives continue to arrange peer support and CPD opportunities for the membership around the UK. BACPAR bursaries support members to attend training opportunities, conduct or disseminate their research and undertake post graduate training.

Outside of the UK, BACPAR members continue to support the education of Therapists in Ukraine through online and face-to-face training regarding the use of early walking aids.

If our work is of interest to you, we would love to welcome a wider variety of healthcare professionals so if you would like to join us or find out more about anything mentioned above then please see our website.

<https://bacpar.csp.org.uk>

BSIR

Philip Haslam, President



It's been a year full of change in the BSIR. The BSIR had the need for continuity and the need to establish policies and procedures involving the financial management of the BSIR, management of our employees and management of our committees and the Society's strategy. We have successfully employed a part time CEO, Nike Alesbury. She has already made a massive impression in all of these areas and is a fantastic addition to the BSIR.

The resignation of Mrs Ruth Moss last year left us looking for a professional conference organiser and out of 3 bids we appointed the PCO branch of CIRSE to take over the running of the ASM. This year's meeting will be held at the Welsh International Convention Centre near Newport.

Progress on specialty status still eludes us and it has become apparent that there is some resistance within the RCR to us attaining this. We continue to put pressure on the RCR to

support us in this area and we are slowly managing to get IRs embedded within various RCR committees increasing our influence.

Interventional radiology continues to evolve and we felt that it was time that we updated the provision of interventional radiology services document. Professor Rob Morgan set about this with real enthusiasm recruiting various BSIR members to contribute over a relatively short time scale. In the interests of time we proceeded to produce and publish the document on this occasion without formal RCR badging. This should be available to view at the ASM.

CR(I) recruitment continues with varying levels of success around the country. It is vital that these posts are put forward by deanery's so that we can attract the right candidates for IR.

The Vascular Society/Circulation Foundation generously offered a third of the funding towards an interventional radiology trainee to take up the post of NVR fellow. We campaigned over the last year to get the RCR to fund a third and we would fund the remainder. This was recently successful and will provide an excellent opportunity for a trainee to undertake quality research using the wealth of data from the NVR. This post will be advertised very shortly.

There has been much recent interest in physician associates and lots of activity on social media some of which has been unpleasant. The BSIR is very aware of the great contribution to IR and patient care by the many allied healthcare professionals we have working within IR departments. We are keen that our members voices are heard, and their concerns addressed so we recently produced a survey of the membership on this topic in order to form a BSIR position statement that represents our members views. You will no doubt have seen this statement that I produced with the help of the executive council members. We feel this is a fair and balanced position, but I am sure will not please everyone.

Professor Rob Morgan takes over as BSIR President from this November and I wish him every success in his future role.

<https://www.bsir.org>



Rouleaux Club

Claire Dawkins, VS Affiliated Representative



The Rouleaux Club has had a strong year supporting Vascular Trainees and aspiring Vascular Surgeons under the Presidency of Miss Leanna Erete. In addition to the annual events organised by the Rouleaux Committee, further opportunities have come to fruition with promising further developments.

The Introduction to Vascular Surgery Courses ran again at the VSASM, Charing Cross International Symposium, ASiT as well as in Edinburgh and Birmingham in conjunction with the Royal College of Surgeons of Edinburgh. The courses were well supported by faculty made up of Vascular Trainees from the UK and participants from Medical Students through to Junior Registrar level from both the UK and the international community. Rouleaux are looking forward to sharing the course in Dublin with our Irish colleagues, welcoming a greater proportion of faculty and participants from Ireland than previously.

Rouleaux enjoyed a successful VSASM 2022, with diverse and excellent submissions to the Annual Essay Competition, the winners' submissions being planned for publication in JVSGBI. We are delighted to have received a further selection of strong submissions for this year's competition and look forward to announcing the winners at the ASM. Last year was also the introduction of the Trainee led MDT at the Conference which was well received and there are three further trainees planned to discuss interesting cases this year. Rouleaux enjoyed a well-received dedicated session at the VSASM 2022 which sparked debate and is looking forward to a further dedicated session this year to explore excellence in Vascular Training.

The Hurting Leg Competition was launched this year with support from CX and BIBA Medical with two-minute infomercials and infographics created to educate members of the public about CLTI. The submissions were of incredibly high standard and the competition was well received by the wider Vascular Community. This has developed into further opportunities for trainees at CX2024 with free entry for trainees, with a "Worrying Foot Competition" and further courses for trainees planned in conjunction with the World Federation of Vascular Societies Training Committee.

Following the previous BUH survey results, the introduction of the Welfare Rep has provided a strong link with the Vascular Society in working towards elimination of this type of behaviour, with the Vascular Society to be commended in their part in supporting the development of a Conflict Resolution Course in conjunction with RCS(Ed). The results of the survey have been published in JVSGBI, along with infographics signposting individuals subject to this to the help and support they require.

Rouleaux continues to work with the BSET team, influencing training matters within endovascular surgery and organising the National Vascular Training Day, which was held prior to the BSET Annual Meeting and received good feedback from participants. The end of year survey from 2022 regarding Dual Consultant Operating and Radiation Protection were presented at BSET. ASPIRE Junior ran up until the summer break and will make a return in the New Year.



The Rouleaux Committee continues to represent trainee needs on various committees. As a member of the Speciality Advisory Committee there is continued work regarding the Vascular Surgical Curriculum and improvements being made to WBAs and Vascular Trauma TIG. Representation on the FRCS.

Committee has continued to support the exam process for trainees. Rouleaux have been welcomed into the Venous Forum and are looking forward to developing this relationship further, helping navigate the changing face of superficial venous intervention and the growing subspecialty of deep venous intervention. Our Medical Student Support has continued to increase, with Rouleaux launching online resources for students to develop local and regional Vascular links and seek Affiliation with Rouleaux. We also continue to contribute to the Circulation Foundation committee.

This year has been a difficult year for the NHS, with trainees recovering from the impact of the pandemic and navigating the complexities of industrial action. Rouleaux has supported its membership and the wider Vascular and NHS communities during this difficult time and wish to extend our support to our colleagues of all specialities and levels for the ongoing difficulties. This year we are introducing a new role of SAS rep in order to make our committee more representative and inclusive of our membership.

Rouleaux would like to thank the Vascular Society, BSET, CX and RCS Edinburgh, as well as our industry colleagues for their ongoing support.

<https://rouleauxclub.com>

Infographic Winner: Natalie Yonan

The £500 infographic prize was won by Natalie Yonan (Newcastle, UK) who created the "RING" infographic in collaboration with Jenny Linsley.

- **R**: Rest Pain
- **I**: Impaired Walking
- **N** Non-healing ulcers
- **G**: Gangrene

The RING acronym was created to educate members of the public in Chronic Limb Threatening Ischaemia (CLTI) and encourage patients to present early to their GP.



Infomercial Winner: Vaux Robertson

The £1,000 infomercial prize was won by Vaux Robertson (Leicester, UK) who created the infomercial titled

"Arterial Disease can Affect Anyone".

This infomercial highlights the warning signs of arterial in a creative, innovative way, congratulations to Vaux and all of the contributors!

You can watch Vaux's short film on YouTube:

<https://youtu.be/Krh74gkVt4?feature=shared>

Vascular Surgery SAC
Ginny Bowbrick, Chair



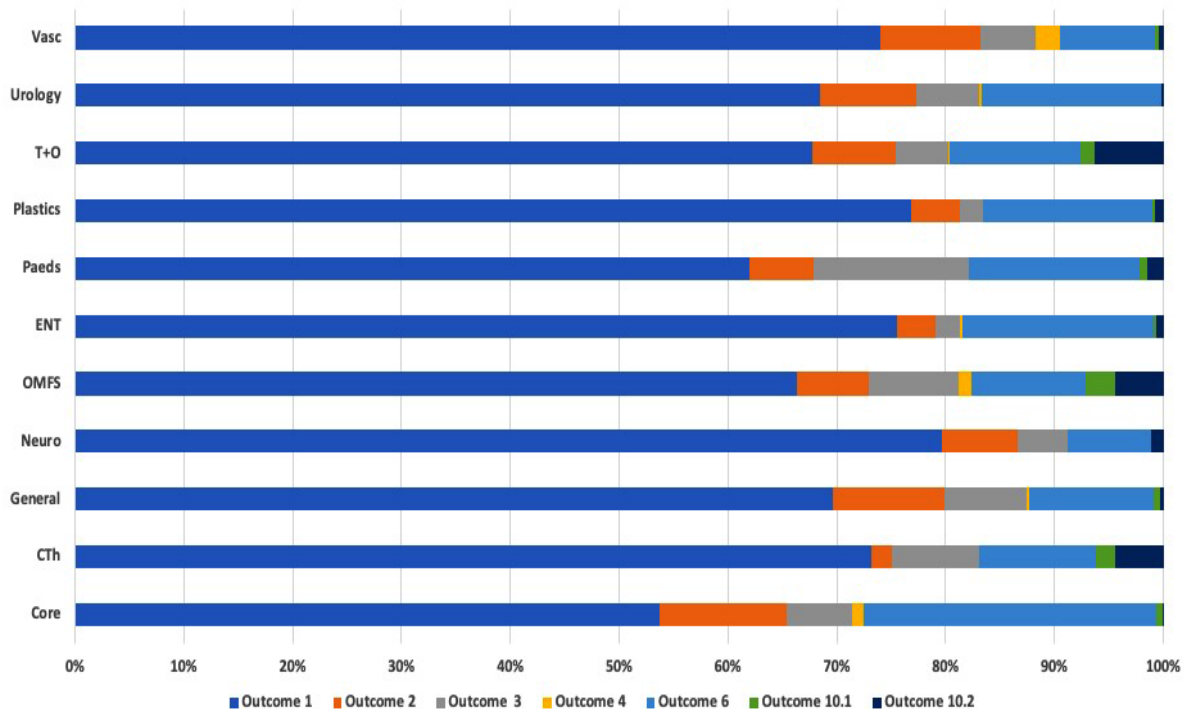
We currently have full membership but will be recruiting to three vacant Liaison Member posts for 2024 later in the year, and the recruitment process for a new Chair will commence in early 2024.

The next SAC meeting is due to be held on 6 December 2023 after the meeting planned for 4 October 2023 was postponed due to NHS industrial action (IA) in England.

1) Log books and ARCPs - Below is the latest ARCP outcome data received from JCST at the Chairs meeting in October. This shows a rise in Outcome 4s (top line yellow box) in Vascular Surgery which will be discussed further at our next SAC meeting.

We will also be discussing the impact of IA on training.

ARCP Outcomes recorded on ISCP by specialty as of end August 23



2) National Selection

Changes have been put forward to and agreed by the MDRS for the recruitment process next year. These include changes to how audits and QI projects are assessed in the self scored application form and the introduction of a virtual skills section which has been piloted successfully in the Urology recruitment process.

3) Workforce

We anticipate further expansion for 2024/25 of 15 tariff funded posts in England and there has also been limited expansion of Trust funded posts in our specialty. This follows on from the 20 tariff funded post expansion in 2022/23 and 15 posts in 2023/24. Distribution will also continue for Vascular Surgery posts in England as a Phase A specialty with until 2030 to achieve all post movements although distribution of posts has been buffered by expansion in most donor regions.

4) Endovascular training and IR Collaboration

A joint survey from the Vascular Surgery SAC and RCR has been sent to all vascular surgery and interventional radiology trainees in September and remains open. We will be meeting with the RCR shortly to discuss the results and next steps. The NVR has provided data to the SAC, which lists EVAR and peripheral endovascular procedure numbers. The data indicates that there are 3 regions where high numbers of peripheral endovascular procedures are undertaken by vascular surgeons which are London, the North East and the West Midlands.

5) Curriculum

Changes to the curriculum were discussed in our meeting in June. Specialty specific changes being discussed are removal or modification (such as making this optional) of the general surgery component in our curriculum, in light of advances in robotic and laparoscopic procedures in general surgery and revision of the venous surgery requirements which still include open venous surgery PBAs. To undertake these changes we will need further data and to consult with other stakeholders prior to taking forward to the GMC for their approval.

Major trauma TIG PBAs for extremity and neck vascular trauma have been reviewed and agreed by the Vascular Surgery SAC and the Rouleaux Club committee.

6) CESR

The new CESR process will be effective from 30 November 2023 from when every application will be considered under the new standard. The standard itself will be changing from equivalence to that of knowledge, skills and experience required for practicing as an eligible specialist in the UK. The number of CESR applications are expected to increase although currently this has not yet happened. Specialty Specific Guidance (SSG) for the Vascular Surgery New Standard has now been agreed with the GMC.

<https://www.jcst.org/committees/specialty-advisory-committees-sacs/>

SVN

Gail Curran, President



I have been truly honoured to have held the position of President of The Society of Vascular Nurses for the past 2 years and I am very much looking forward to this years' joint Societies conference in Dublin. I would like to thank the members of the SVN committee for their full support during my time in office and feel privileged to work with such a dedicated group of nurses, volunteering their time and expertise to benefit our patients and promote vascular nursing on a national level to improve outcomes and career opportunities.

I also must thank the VS and EBS for the continued support offered to the SVN and the VSASM which includes representatives from all societies in the organisation of the conference; they work extremely hard to organise such a successful large educational event open to all health

professionals involved in the care of vascular patients along with an enjoyable gala dinner.

Following on from last years' launch of the SVN Position Statement - The Provision of Vascular Specialist Nursing; this year we are launching a further document to support this, Vascular Specialist Nursing - Capability Framework 2023. For a number of years, the SVN has endeavoured to create a competency document to meet the needs of all nurses: from newly qualified to highly skilled specialist/consultant nurses. This has always proved challenging due to the variation in service provision, job descriptions and varying demographics of the patient group. The aim of the document is to promote a higher level of consistency with respect to the quality of service provision. We recognise that all vascular patients should benefit from best practice provided by appropriately skilled and trained individuals working as part of a vascular team. A huge thanks the SVN committee past and present for the hard work put in to producing this document. Our long term aim is to also launch this on an electronic platform to ensure it is fit for the future and adaptable to individual areas of practice.

This year we are celebrating the 30th Anniversary of the SVN, having started as a small group of dedicated nurses who established themselves as a vascular nurse 'interest' group to represent nurses nationally and to link with other nurses attempting to establish and standardise evidence-based practice within the speciality. The group consequently formalised the 'Society of Vascular Nurses' committee in 1993 to help develop regular nurse forums/study days, research groups and newsletters and later our first AGM. Links had been well established from the early years with the VSS, SVT and JVRG and this resulted in an invite for a collaborative AGM with the VSS and the SVT at the London Arena in 2000. Not only was this an opportunity to improve joint working practice but also to ensure a nursing 'voice' in care delivery. As a Society we continue to move from strength to strength and continue to look forward to further collaborative working with our allied societies.

In April this year we published our 2nd formal document 'A guide for establishing a nurse-delivered venous intervention service'. This was facilitated by Medtronic with a panel of experts and other contributors. The aim of the document is to help guide and support nurses interested in undertaking a nurse-delivered venous intervention service, to treat venous incompetence in services where there is an identified need for this.

The launch of this document has created lots of debate regarding extended roles in nursing and this continues and is on the agenda for further discussion again at this years' AGM. Also at this years' AGM we continue to hold our ASM evening symposium on Wednesday 22nd November in the conference venue. This year's speaker Ms Fiona Karray – Specialist Registrar NHS Lothian will discuss '*The Influence of Human Factors on Performance*'.

Last year we did not fulfil our outstanding committee roles and we also lost a valued member of the Committee in Louise Allen earlier this year who stepped down after many years of valued input to the Society. We do have nominees this year for these outstanding spaces however there will remain unfilled opportunities which we will advertise as secondment opportunities following the close of the AGM. I extend a huge gratitude to this years' secondees for their valuable hard work and input; it is always beneficial to have new individuals on the committee either as a short or long term post, as it enables us to ensure we are working for the best of our members as well as our patients.

We continue to offer opportunities for staff nurses to join our committee, this is a secondment position for a year, 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. Or if you have an enthusiastic band 5 in your team why not encourage them to apply, this provides new networking and development opportunities.

The SVN continues to provide bursaries to our members, these are of varying value and can be applied for at any time throughout the year, they can be used to enhance practice through educational training, attendance at conference, reference books or equipment that improves vascular patient care. This year has been very quiet with applications; however, we have awarded the Emma's gift bursary to two junior nurses to enable them to attend conference this year.

I hand over the role of President to Jane Todhunter in Dublin, leaving the committee in very capable hands with Siobhan Gorst having been elected as Vice President. The SVN truly is a team of dedicated, passionate vascular nurses who are supportive of the vision of the SVN and I have to thank each of them for their unwavering support during my time as President. I will be very sad to step down but feel the SVN is moving in the right direction with a greater voice to support change and practice for our profession resulting in improved outcomes for vascular patients.

<https://svn.org.uk>





SVTGBI

Emma Waldegrave, President



As we approach the end of 2023, I reflect on an exceptionally productive year for the SVT, filled with accomplishments we can all be proud of. Our primary focus was on expanding access to educational content for our members, and I am delighted to share the progress we've made.

Educational Initiatives: We launched a comprehensive study day program, offering face-to-face workshops, on-demand content, webinars, and fundamentals/revision day programs for trainees. Notably, the advanced skill workshops in London - the Upper Limb Arterial and Venous Day in March and the Giant Cell Arteritis Day in September - were resounding successes. Unfortunately, due to low registration numbers, the May EVAR workshop in Manchester did not proceed as planned. However, as part of a pilot initiative, we recorded workshop content, turning it into an on-demand

learning resource for our members and beyond. This effort proved successful and contributes to a valuable content library for Continuing Professional Development.

Research Initiatives: Our research committee finalized the AVS research curriculum, presented through a research series in the newsletter and a research webinar series - all accessible at no cost to our members. Keep an eye out for the new Bitesize research articles in the upcoming newsletters. We continue to award research grants to Clinical Vascular Scientists, supporting up to £10,000 per annum for research activities presented at the annual scientific meeting.

Professional Standards: The Professional Standards committee have worked hard throughout the year, updating professional practice guidance for safe Vascular ultrasound practice, and have also provided helpful documentation for individuals and services on Clinical Vascular Science Job Profiles, job planning guidance and generic job descriptions, alongside supporting the career structure framework. The SVT still recommend individuals to consider undertaking STP equivalence to allow registration with the HCPC, and the SVT are working with the AHCS on a Recognition of Prior Learning agreement to streamline this process.

Organisational Updates: An Extraordinary General Meeting was held on September 11th to propose a working name change for the society, aligning with our professional title as Clinical Vascular Scientist. The online ballot results will be shared, and further changes to our constitution will be addressed at the Annual General Meeting in Dublin. A website review and update is planned for 2024.

Charity Representation: Towards the end of 2022, Neeraj Bhasin, Chair of the Circulation Foundation, approached the SVT with a proposal that the CF assume the role of the charity representing all vascular societies. This proposal, aimed to align with existing partnership arrangements with the ASM and journal, while also recognising the multidisciplinary nature of our professional work. We believe that this step will enhance the charity's strength, make it a more representative body of the professional vascular community, and improve its sustainability and resilience.



As this marks my final Presidential address, I would like to take this opportunity to express my deepest appreciation for the commitment and support of my tremendous colleagues on all four committees of the SVT. A special thanks must go to Kamran Modaresi and Steven Rogers, and I wish them every success in their new roles.

Throughout my term, I've had the privilege of collaborating with several other key stakeholders, including the Professional Bodies Council of the AHCS, BMUS, SOR, CASE, the Vascular Society, the Circulation Foundation, and the Vascular CRG. Their collective efforts are instrumental in shaping the future of healthcare. I extend my heartfelt thanks for their inclusiveness and support.

Emma Waldegrave
President of the SVT (2021-2023)

<https://www.svtgbi.org.uk>

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WEDNESDAY**
OF EVERY MONTH
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<https://www.svtgbi.org.uk/mediacentre/events/svt-research-webinars-2023/>

RSM Venous Forum Manj Gohel, President



The Venous Forum is a section of the Royal Society of Medicine and was created >30 years ago. The main goals of the Venous Forum are to promote and support the evidence-based care of patients with venous disease, and to support the education of all healthcare professionals involved in the care of patients with venous disease. The focus is on optimal patient pathways and high-quality guideline-driven care of patients, in NHS and non-NHS settings in the UK. This is particularly relevant as the severe NHS waiting list challenges have affected venous treatment pathways enormously and challenges in the care of patients with venous conditions has been seen across all regions of the UK.

Several key issues have become topical in venous disease, including:

1. Training deficiencies in venous disease highlighted by Rouleaux Club surveys.
2. Severe disruption to existing primary and secondary care leg ulcer care pathways since the CoViD-19 pandemic.
3. Major workforce deficiencies with a global lack of clinical staff able to deliver assessment or treatment of venous disease.
4. Controversy regarding the expanding roles of non-medical team members in performing endovenous interventions.
5. Centralisation and referral pathways for the delivery of complex deep venous interventions.
6. Evidence-based and safe introduction of novel deep and superficial venous technologies.
7. Appropriate patient-centred care and avoidance of overtreatment of venous abnormalities on imaging.

The Venous Forum council, in collaboration with partners, is committed to support education in all aspects of venous disease and produce guidance in these topical areas. The 2-day summer meeting of the Venous Forum was held in the Royal Society of Medicine and delivered an interactive hands-on workshop, included trainee abstracts, joint sessions with the Society of Vascular Nurses (SVN) and British Society of Sclerotherapy (BAS), and sessions focussing on deep venous disease and complex cases.

The Venous Forum is also running, in collaboration with the VSGBI, the Aspire Venous training day at the VS ASM in Dublin 2023. At the VS ASM, venous sessions will specifically include multidisciplinary panel discussions regarding the role of non-Vascular Surgeons in performing endovenous interventions.

The prevalence of venous disease and venous ulceration is increasing, and the care of this patient population will form a greater part of vascular team workloads in the future.

The Venous Forum will continue to work in collaboration with the VSGBI, SVN, SVN, the Vascular and Venous All Party Parliamentary Group, Industry partners and other stakeholders to help drive improved pathways, more education and support, and better clinical outcomes for this population. I would like to extend my gratitude to members of the Venous Forum council and welcome all multidisciplinary panel discussions and colleagues involved in the care of patients with venous disease to engage with venous sessions at the ASM and other Venous Forum events.

<https://www.rsm.ac.uk/sections/venous-forum/>

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ROULEAUX CLUB
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Society of Vascular Nurses
SVN
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SVT

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