ABN ANNUAL REPORT 2014

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Date of publication
May 2015

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President’s Introduction

This introduction serves to review the activities of the Association in 2014. It seems appropriate to use the ABN Strategy that was introduced at our 2013 AGM as the framework for this review (the summary of the Strategy is appended) whilst focusing on the issues from the last year.

To improve clinical neurological services

This year we published the findings from our survey of acute neurology services (thank you to all of you who contributed). If we can document the variability of service provision this may help fill the gaps that are identified. We plan to update the study later in 2015 to enhance the newly created national overview of availability of acute neurological services. As part of this document we issued generic ABN Quality Standards for scheduled and unscheduled care.

The Specialty Sections have continued to respond to consultations from wide variety of sources, NICE, NHS England and the Department of Health particularly. In addition, the Myasthenia section and MS section have produced clinical guidelines. Many thanks to all those involved, in particular the Chairs of the Sections.

The Audit and Revalidation committee, a subcommittee of the SSC, now meets before each SSC meeting and has proved a valuable forum for these critical topics.

To provide leadership in neurology

Our collaborations with other professional societies have continued. This year we ran a successful autumn meeting in Stratford-upon-Avon. The meeting was held in conjunction with the British Association of Stroke Physicians and was attended by 200 delegates.

The regular teleconferences with the Neurological Alliance, attended by the President, Chair of SSC and Executive Director, continue to add value. We are grateful to the NA for their expertise and support.

Our Special Interest Groups and affiliated societies rose magnificently to the challenge of conducting their own sessions during the 2014 Annual Meeting. Eight groups participated in the parallel sessions which were well supported by fellow delegates. The 2015 meeting will host 13 groups in three separate sessions to allow more people the chance to attend multiple sessions.

To champion outstanding training and education in neurology

The Annual Meeting in Cardiff was attended by over 600 delegates and was very well received. The trainee half day, GP teaching session and inaugural Research workshop were successful and will be repeated in 2015. The Autumn Meeting, held in conjunction with the British Association of Stroke Physicians, was well attended and evaluated. We also took the opportunity to run an additional GP teaching session at this time.

The Shape of Training review continues as a source of considerable concern and we have made very strong representations to the Royal College of Physicians to prevent the dilution of neurological training proposed. This is the subject of ongoing debate at the meeting and will be revisited during the AGM.

The future of neurology depends on our trainees. We have introduced junior and student membership to help us to engage with medical students and junior doctors before they become specialist registrars. The ABNT successfully launched its mentoring scheme to try to encourage and support junior doctors interested in neurology. A mentors’ training session was held at the ABN offices and the scheme progressed with 41 mentor-mentee pairs.

To promote world class research in clinical neurosciences

Following the launch of the ABN Clinical Research Fellowship Fund in 2014 we have been grateful for the support of members, industry partners and interested friends. We believe this will allow us to
encourage and support young neurologists going into research. Interviews for the first ABN Clinical Research Training Fellows were held in March 2015 as well as fellowships funded by the Guarantors of Brain and the Patrick Berthoud Trust. Five fellowships were offered on this occasion.

To represent and promote the aims of the Association internationally

The ABN has provided speakers for the Association of Sri Lankan Neurologists and through the ABN Australasian Fellowships has provided the opportunity for registrars to spend time training in the southern hemisphere. This is a useful opportunity to remind members of the travel fellowships that are available. Five fellowships of up to £1000 are available each year; deadlines for proposals are 1 January and 1 July.

Other issues

You will receive an update on the developments relating to Practical Neurology later in the AGM.

There have been elections to the Training and Education Committee and to the Clinical Research and Academic Committee both of which are now based on geographical representation.

Finally I would like to thank my fellow Officers and Council members and Trustees and all of you who have worked for the Association on Committees and in the Sections. I would like to thank Josie and Dawn for their work on our behalf in the office. I would particularly like to thank Joanne Lawrence our Executive Director who has been quite outstanding in running the Association. It has been a privilege to work on your behalf for the ABN and to hand over to an excellent new President and a most supportive Council.

Dr Geraint Fuller
President 2013-2015
Association of British Neurologists Strategy 2013

Mission: ‘to promote excellent standards of care, and champion high-quality education and world-class research in neurology.’

1) To improve clinical neurological services, by
   • encouraging the nationwide availability of excellent, patient-centred services in neurology;
   • setting and promoting evidence-based standards for neurological care;
   • supporting members in developing and delivering high quality services.

2) To provide leadership in neurology, by
   • providing an expert voice to represent neurology to Government and other agencies;
   • promoting public engagement and involvement with neurology;
   • facilitating links with other professional societies involved in neurology;
   • collaborating with neurological charities in advocacy for neurological services.

3) To champion outstanding training and education in neurology, by
   • providing and supporting high quality continuing neurology education, disseminating neurological research and sharing best practice;
   • setting and promoting high standards of training;
   • encouraging the best neurological education and training in medical schools and medical training programmes.

4) To promote world class research in clinical neurosciences, by
   • supporting trainee and trained neurologists in both independent and collaborative research;
   • enabling patients to participate in research;
   • promoting and co-ordinating research training in neurology;
   • providing a forum to present, discuss and develop collaborative research
   • promoting collaborative neurological research, lobbying for neurological research funding and translation into practice

5) To represent and promote the aims of the Association internationally, by
   • establishing links with, and offering support to, comparable associations overseas, both individually and through European or global organizations;
   • encouraging and supporting international collaborations to develop neurological care, education, and research
AGENDA

1  Election of President Elect 2015 – 2017, President 2017-2019
   Election of 2 councillors 2015-2019

2  Officers of Council for 2015-16
   President             Professor PEM Smith  2015-17
   President Elect       Professor M Reilly  2015-17
   Immediate Past President  Dr G Fuller  2015-16
   Honorary Secretary    Professor K Talbot  2014-16
   Honorary Assistant Secretary  Professor D Burn  2014-16
   Honorary Treasurer    Dr T Pickersgill  2015-19
   Chair, Services and Standards Committee  Dr RP Gregory  2014-17
   Chair, Training and Education Committee  Dr RJ Davenport  2013-16
   Chair, Clinical Research & Academic Committee  Professor HR Morris  2012-15

3  Minutes of the Annual General Meeting, Thursday 8 May, Millennium Centre, Cardiff

4  President’s Report

5  Nominations for Membership of the Association

6  Treasurer’s Report
   To consider and adopt Annual Accounts
   To re-appoint Griffin Stone Moscrop & Co as auditors
   To authorise the Directors to agree auditors’ remuneration for forthcoming year
   To agree subscription rates for 2015-16

7  Association Rules
   To discuss and vote upon proposed amendments to the Rules

8  ABN Strategy for Development
   To update on progress with Practical Neurology co-publishing agreement

9  The ABN Clinical Research Training Fund

10 Date of the next Annual General Meeting:
    18 May 2016, Brighton
The Directors (Dr G Fuller, Dr R Gregory and Professor L Ginsberg) met at the Wales Millennium Centre on 8th May 2014. They approved and signed the Annual Accounts for the year ended 31 December 2013. The Directors resolved that the approved accounts should be put before Members at the Annual General Meeting. A letter of representation to the auditors was approved and signed by the Honorary Treasurer on behalf of the Directors.

Dr Geraint Fuller opened the meeting at 1545hrs and confirmed that the meeting was quorate. Dr Fuller invited those members present to stand in memory of their late colleagues: Professor Sen, Professor Marshall and Professor Langton-Hewer.


The President congratulated and welcomed Professor David Burn as Honorary Assistant Secretary 2014-16 and Honorary Secretary 2016-18, and Dr Trevor Pickersgill as Honorary Treasurer Elect 2014-15 and Honorary Treasurer 2015-19.

The President welcomed Elisabeth Baltay, ABN Trustee and thanked her for her input and advice. Dr Fuller also thanked Lord Stanley Fink, ABN Trustee, who was not present.

2. **Officers of Council for 2014-15**

The Officers of Council for 2014-2015 were approved:

<table>
<thead>
<tr>
<th>Office</th>
<th>Name</th>
<th>Term</th>
</tr>
</thead>
<tbody>
<tr>
<td>President</td>
<td>Dr G Fuller</td>
<td>2013-2015</td>
</tr>
<tr>
<td>President Elect</td>
<td>Professor P Smith</td>
<td>2013-2015</td>
</tr>
<tr>
<td>Honorary Secretary</td>
<td>Dr H Manji</td>
<td>2014-2016</td>
</tr>
<tr>
<td>Honorary Assistant Secretary</td>
<td>Professor D Burn</td>
<td>2014-2016</td>
</tr>
<tr>
<td>Honorary Treasurer</td>
<td>Professor L Ginsberg</td>
<td>2011-2015</td>
</tr>
<tr>
<td>Honorary Treasurer Elect</td>
<td>Dr T Pickersgill</td>
<td>2014-2015</td>
</tr>
<tr>
<td>Chair, Services and Standards Committee</td>
<td>Dr RP Gregory</td>
<td>2014-2017</td>
</tr>
<tr>
<td>Chair, Training and Education Committee</td>
<td>Dr RJ Davenport</td>
<td>2013-2016</td>
</tr>
<tr>
<td>Chair, Clinical Research &amp; Academic Committee</td>
<td>Professor HR Morris</td>
<td>2012-2015</td>
</tr>
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3. **Minutes of the Annual General Meeting, Thursday 23 May, SECC, Glasgow Matters Arising**

The President accepted the minutes of the previous meeting as an accurate record with the following correction: Roberto Guiloff should read ‘Guiloff’.

4. **Nominations for Membership of the Association.**

The President welcomed new members to the Association and members approved the following nominations:

<table>
<thead>
<tr>
<th>Category</th>
<th>Number</th>
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</thead>
<tbody>
<tr>
<td>Ordinary Members (new)</td>
<td>3</td>
</tr>
<tr>
<td>Associate Members (new)</td>
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<tr>
<td>Overseas Members (new)</td>
<td>1</td>
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<tr>
<td>Overseas Members (from AM and OM)</td>
<td>21</td>
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<tr>
<td>Affiliate Members (new)</td>
<td>36</td>
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<tr>
<td>Ordinary Members (from AM)</td>
<td>39</td>
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</table>

ABN Membership as at 31st December 2013 stood at:

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<tr>
<td>Honorary UK</td>
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<tr>
<td>Honorary Foreign</td>
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<tr>
<td>Senior</td>
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<tr>
<td>Ordinary</td>
<td>730</td>
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<tr>
<td>Overseas</td>
<td>69</td>
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<tr>
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<td>452</td>
</tr>
<tr>
<td>Affiliate</td>
<td>4</td>
</tr>
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</table>
New Member: 29
Total: 1555

5. President’s Report

The President stated that the ABN is meeting its strategic direction, as detailed in the ABN Annual Report 2013. Dr Fuller explained that the ABN Clinical Research Training Fellowship has been launched and the ABN will underwrite the process, with a suggestion of input from other small charities. He alerted the membership to the new ABN website that had been launched at the meeting and thanked everybody for their responses to the Acute Neurology Survey, on display at the meeting. The President thanked the ABN sections for their hard work and their work on ABN Quality Standards, currently in development.

6. Treasurer’s report

The Treasurer reported a reserve of £812,000 and reiterated that the ABN needs to maintain a reserve that is one to two times its annual expenditure. The Treasurer stated that expenditure was stable, that income and expenditure had been balanced effectively with a small net surplus of £800 and that the Association’s investment income accumulated £107,000, giving an overall surplus of £108,000. Professor Ginsberg explained that there had been savings made in ABN running costs and that there had been an improvement on the collection of annual subscriptions. Combined with additional income from the SCE exam and from our partners in the pharmaceutical industry this meant that there would not be an increase in member subscriptions in 2014.

The Treasurer thanked Professor Huw Morris, Chair of CRAC for his hard work on the ABN Clinical Research Training Fellowships. Professor Ginsberg stated that there will be pharmaceutical sponsorship, neurological charities’ involvement, the opportunity for members to identify whether a patient or a patient’s family want to make a donation and the opportunity for individual donations from members. Professor Ginsberg explained that if a member makes a donation to the fund, it will be gift aided. The Treasurer thanked Joanne Lawrence and Dawn Moore for their hard work on the finances of the ABN.

7. Association Rules

Dr Fuller asked members for permission to give members reaching NHS retirement age the option to elect to become a senior member, pay no subscription and lose the right to vote, or remain an ordinary member, retain the right to vote and pay full subscription fees. Members that have retired from hospital appointment, academic appointment and the practice of clinical neurology will automatically become senior members.

Proposer: Ralph Gregory, Seconder: Bill Gibb
The rule was passed after a vote from the membership.

Dr Fuller asked members for permission to create a junior category, to separate junior doctors from the Affiliate category. Dr Trevor Pickersgill suggested that the phrase ‘Associate specialists – staff grade’, be changed to ‘Associate specialists – staff grade / specialty doctors’.
Proposer: Lionel Ginsberg, Seconder: Mary Reilly
The rule was passed after a vote from the membership.

Dr Fuller asked members for permission to lower the barrier for entry to membership for Student and Junior members.
Proposer: Richard Davenport, Seconder: Neil Scolding
The rule was passed after a vote from the membership.

The President asked members for permission to list the geographical NHS regions in England in the SSC section.
Proposer: Hadi Manji, Seconder: Alastair Coles
The rule was passed after a vote from the membership.

Dr Fuller asked members for permission to replace the role of SSC Secretary with Vice Chair.
Proposer: Wojtek Rakowicz, Seconder: Paul Worth
The rule was passed after a vote from the membership.

The President asked members for permission to add rules to reflect the new SSC sub committee – Audit and Revalidation.
Proposer: Phil Smith, Seconder: Neil Scolding
The rule was passed after a vote from the membership.
8. **ABN Strategy for Development**

Dr Fuller and Professor Smith left the meeting for this discussion, chaired by Dr Ralph Gregory. Dr Gregory explained to the membership that negotiations with BMJ group have been conducted by himself, Joanne Lawrence, Lionel Ginsberg and Elisabeth Baltay. Dr Gregory reiterated that the ABN does not own and has never owned a journal, and that Practical Neurology is currently distributed free to all ordinary, associate and affiliate members of the ABN. The arrangement can no longer continue and the current proposal is at least a two year period of co-publishing as opposed to co-owning, with an ABN subscription rate of £40,000 and an agreed share of profits. Depending on the outcome of co-publishing, the opportunity of co-owning would be put forward at a future AGM. Dr Gregory confirmed that co-publishing would allow us to be a more active partner. A short discussion followed. *The membership voted in favour of the proposal, with one member voting against.*

Dr Fuller and Professor Smith then re-joined the meeting and Dr Fuller resumed the role of chair.

9. **Introduction to the European Academy of Neurology, Professor R Hughes**

Professor Richard Hughes, President of the EFNS alerted those members present to the joint congress of the EFNS and the ENS in Istanbul. A new organisation, founded on the last day of the congress in Istanbul, will be called the European Academy of Neurology and will have a general assembly consisting of 45 national members and 45 individual members who have been elected electronically from the members of the European Neurological Society. The board will be elected on Tuesday 3rd June, Chris Kennard and Richard Frackowiak are candidates for EAN President, Martin Rossor is a candidate for Vice President and Nin Bajaj is a candidate for the Secretary General position. There will be two members of the board appointed to be Chair of Programme and Chair of Education Committee.

10. **Shape of Training**

The President congratulated Richard Davenport and Tom Hughes for their enthusiastic debate on Shape of Training earlier in the day. The President explained that the Shape of Training document is proposing to change the current training scheme (F1, F2, two years of core medical training, 5 years of specialty training, perhaps with out of programme research) to 3 years of general medicine before entering specialty medicine, continuing to study general medicine for 25% of the time for the remaining three years, one of which can be spent studying teaching, management or leadership, not specialty related. Dr Fuller asked for the Association to give their opinion on the following two statements: 1. A sound background in general medicine is needed for the practice of clinical neurology; 2. Neurology is distinct from general medicine and requires adequate time and training dedicated to clinical neurology and related neuroscience.

*Ordinary members voted unanimously in favour of Statement 1.*

*Trainee members voted unanimously in favour of Statement 1.*

*Ordinary members voted unanimously in favour of Statement 2.*

*Trainee members voted unanimously in favour of Statement 2.*

11. **Date of the next Annual General Meeting**

21 May 2015, Harrogate
## NEW MEMBERS, CHANGES AND DEATHS 2014

### ORDINARY

<table>
<thead>
<tr>
<th>Name</th>
<th>Position</th>
<th>Hospital</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dr Georgios Tzimas</td>
<td>Consultant</td>
<td>Scarborough District Hospital</td>
</tr>
<tr>
<td>Dr Mary O'Driscoll</td>
<td>Consultant</td>
<td>Birmingham Woman's Hospital</td>
</tr>
<tr>
<td>Dr Marco Mula</td>
<td>Consultant</td>
<td>St George's Hospital</td>
</tr>
<tr>
<td>Dr Ellen Hagen</td>
<td>Consultant</td>
<td>National Hospital for Neurology</td>
</tr>
</tbody>
</table>

### ASSOCIATE

<table>
<thead>
<tr>
<th>Name</th>
<th>Position</th>
<th>Hospital</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dr Duncan Austin</td>
<td>Clinical Research Fellow</td>
<td>National Hospital, Queen Square</td>
</tr>
<tr>
<td>Dr James Bashford</td>
<td>SHO</td>
<td>St Thomas's Hospital</td>
</tr>
<tr>
<td>Dr Rachel Brown</td>
<td>SHO</td>
<td>National Hospital, Queen Square</td>
</tr>
<tr>
<td>Dr Michael Cliff</td>
<td>Specialist Registrar</td>
<td>Royal London Hospital</td>
</tr>
<tr>
<td>Dr Rupert Oliver</td>
<td>Locum Consultant</td>
<td>St Thomas's Hospital</td>
</tr>
<tr>
<td>Dr Aine Merwick</td>
<td>Honorary Clinical Fellow</td>
<td>National Hospital, Queen Square</td>
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<tr>
<td>Dr Tee How Mok</td>
<td>Specialist Registrar</td>
<td>Royal Free Hospital</td>
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<tr>
<td>Dr Athanasios Papathanasiou</td>
<td>Locum Consultant</td>
<td>Queens Hospital, Romford</td>
</tr>
<tr>
<td>Dr Gregory Scott</td>
<td>Specialist Registrar</td>
<td>Hammersmith Hospital</td>
</tr>
<tr>
<td>Dr Lorena Flores</td>
<td>Specialist Registrar</td>
<td>Kings College Hospital</td>
</tr>
<tr>
<td>Dr Kristina Rannikmae</td>
<td>Specialist Registrar</td>
<td>Western General Hospital</td>
</tr>
<tr>
<td>Dr Khalid Eltayeb</td>
<td>Specialist Registrar</td>
<td>Queens Medical Centre</td>
</tr>
<tr>
<td>Dr Christine Lo</td>
<td>Specialist Registrar</td>
<td>Royal Hallamshire Hospital</td>
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<tr>
<td>Dr Tim Wilkinson</td>
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<tr>
<td>Dr Cosimo Maggiore</td>
<td>Clinical Research Fellow</td>
<td>Moorfields Eye Hospital</td>
</tr>
<tr>
<td>Dr Vinod Metta</td>
<td>Specialist Registrar</td>
<td>Charing Cross Hospital</td>
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<tr>
<td>Dr Mireya Losada Lopez</td>
<td>Locum Consultant</td>
<td>Croydon University Hospital</td>
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<tr>
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<td>Dr Shahid Mehmood</td>
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<tr>
<td>Dr Olivia Poole</td>
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<td>Dr Evangelia Theochari</td>
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<td>Dr Hassan Zafar</td>
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<tr>
<td>Dr Thomas Cope</td>
<td>Specialist Registrar</td>
<td>Addenbrooke's Hospital</td>
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<td>Dr Sergios Gargalas</td>
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<tr>
<td>Dr Philip Weston</td>
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<td>Dementia Research Centre</td>
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<tr>
<td>Dr Don Halahakoon</td>
<td>Specialist Registrar</td>
<td>Leicester Royal Infirmary</td>
</tr>
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<td>Dr Philip Ambrose</td>
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<td>Queen's Medical Centre</td>
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<tr>
<td>Dr Shahd Hamid</td>
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<td>Dr John Williamson</td>
<td>Specialist Registrar</td>
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<tr>
<td>Dr Ivona Horackova</td>
<td>Specialist Registrar</td>
<td>Medway Maritime Hospital</td>
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<tr>
<td>Dr Natalie Lakomska</td>
<td>Specialist Registrar</td>
<td>Southern General Hospital</td>
</tr>
<tr>
<td>Dr Catherine Morgan</td>
<td>Specialist Registrar</td>
<td>Gloucestershire Royal Hospital</td>
</tr>
<tr>
<td>Dr Laura Sewell</td>
<td>Specialist Registrar</td>
<td>Great Western Hospital Swindon</td>
</tr>
<tr>
<td>Dr Wilson Fung</td>
<td>Specialist Registrar</td>
<td>University Hospital of Wales</td>
</tr>
<tr>
<td>Dr Mikail Weston</td>
<td>Specialist Registrar</td>
<td>Queens Medical Centre</td>
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<tr>
<td>Dr Mazen Matar</td>
<td>Specialist Registrar</td>
<td>Kent &amp; Canterbury Hospital</td>
</tr>
<tr>
<td>Dr Jananee Sivagnanasundaram</td>
<td>Specialist Registrar</td>
<td>Kent &amp; Canterbury Hospital</td>
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<tr>
<td>Dr Priya Bangalore</td>
<td>Clinical Fellow</td>
<td>St George's Hospital</td>
</tr>
<tr>
<td>Dr Riffat Tanveer</td>
<td>Specialist Registrar</td>
<td>Royal Preston Hospital</td>
</tr>
<tr>
<td>Dr Hena Ahmad</td>
<td>Clinical Research Fellow</td>
<td>Charing Cross Hospital</td>
</tr>
<tr>
<td>Name</td>
<td>Position</td>
<td>Affiliation</td>
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<tr>
<td>--------------</td>
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<td>--------------------------------------------------</td>
</tr>
<tr>
<td>Dr Julia Greenland</td>
<td>Trust Grade SHO</td>
<td>Bedford Hospital</td>
</tr>
<tr>
<td>Dr Amit Batla</td>
<td>Locum Consultant</td>
<td>St Peter's Hospital, Chertsey</td>
</tr>
<tr>
<td>Dr David Bargiela</td>
<td>FY2</td>
<td>Royal Victoria Infirmary, Newcastle</td>
</tr>
<tr>
<td>Dr Nikunj Davda</td>
<td>Core Medical Trainee</td>
<td>Queen Alexandra Hospital, Portsmouth</td>
</tr>
<tr>
<td>Dr Rachelle Shafei</td>
<td>Core Medical Trainee</td>
<td>North Middlesex Hospital</td>
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<tr>
<td>Dr Luca Li</td>
<td>ACF Neurology</td>
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<tr>
<td>Dr Melanie Wood</td>
<td>Clinical Assistant</td>
<td>Middlesex University Hospital</td>
</tr>
<tr>
<td>Dr Claire Allen</td>
<td>Foundation Yr 1 ACF Trainee</td>
<td>Epsom Hospital</td>
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<tr>
<td>Dr Isobel Sleeman</td>
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<td>Senior House Officer</td>
<td>Royal Hallamshire Hospital</td>
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<td>Dr Fizzah Ali</td>
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<td>Dr Nattanit Gregoris</td>
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<td>Dr Saadnah Naidu</td>
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<td>Wexham Park Hospital</td>
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<td>Dr William Scotton</td>
<td>CT2</td>
<td>Queen Elizabeth Medical Centre</td>
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<tr>
<td>Dr Maria Stavrou</td>
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<tr>
<td>Dr Lucy Beishon</td>
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<td>Dr Angeliki Zarkali</td>
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<td>Dr Stefano Carini</td>
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<td>Dr Elkommos Samia</td>
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<tr>
<td>Dr Muhammed Kinan</td>
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<tr>
<td>Dr Selda Ahmet</td>
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<td>Dr Helen Nightingale</td>
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<tr>
<td>Dr Sarah Healy</td>
<td>FY2</td>
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<td>Dr Thomas Payne</td>
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<td>Dr Duncan Street</td>
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<tr>
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<td>Dr Sonia Kumari</td>
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<td>Dr Gashirai Mbizvo</td>
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<td>Dr Laura Best</td>
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<td>Dr Amit Samani</td>
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<td>Dr Stephen</td>
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<tr>
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<td>FY2</td>
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</tr>
<tr>
<td>Miss Amy</td>
<td>Student</td>
<td>Guys Campus</td>
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<tr>
<td>Mr Carl</td>
<td>Student</td>
<td>John Radcliffe Hospital</td>
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<tr>
<td>Miss Anastasia</td>
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<tr>
<td>Mr Paul</td>
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**STUDENT**

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<tr>
<td>Dr Dafydd</td>
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**OVERSEAS**

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<tr>
<td>Dr Arunas</td>
<td>Part time Locum in UK</td>
<td>Ipswich Hospital</td>
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**CHANGE FROM ASSOCIATE TO STUDENT**

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<td>Dr Lokesh</td>
<td>Wijesekera</td>
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<td>Dr George</td>
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<td>Dr Baba</td>
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<tr>
<td>Dr Andrew</td>
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<tr>
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<td>Dr Mohammad</td>
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**CHANGE FROM ASSOCIATE TO ORDINARY**

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<tr>
<td>Dr Wei Jia</td>
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<tr>
<td>Dr Diane</td>
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<tr>
<td>Dr James</td>
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**CHANGE FROM AFFILIATE TO ASSOCIATE**

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**CHANGE FROM ASSOCIATE TO OVERSEAS**

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<tr>
<td>Prof Michael Aminoff</td>
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<td>Dr Simon Nightingale</td>
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<tr>
<td>Dr Muhammad Chowdhury</td>
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<td>Prof Graham Venables</td>
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<tr>
<td>Dr Richard Petty</td>
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<tr>
<td>Prof Chris Hawkes</td>
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<tr>
<td>Dr Kirstie Rauvala</td>
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<td>Dr John Graham</td>
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<tr>
<td>Dr Brian Moffat</td>
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<tr>
<td>Dr Iain Ferguson</td>
<td>Consultant</td>
<td>Litfield House Med Centre, Bristol</td>
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<td>Dr Marcus Bradley</td>
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<td>Dr Stephen Hunt</td>
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<td>Dr Liberty Jenkins</td>
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<td>Dr Ivan Draper</td>
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<td>Dr Ayesha Ejaz</td>
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<td>Dr Gabriel Shaya</td>
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<tr>
<td>Dr Magalena Niestrata-Orbitz</td>
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<td>Dr Jacquie Deeb</td>
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<td>Prof Michael Sharpe</td>
<td>Warneford Hospital</td>
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<td>Dr Ben Tsang</td>
<td>Royal Free Hospital</td>
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Honorary Secretary
Kevin Talbot

The ABN received just over 30 requests in 2014 to contribute to consultations which included NICE Scoping Consultations, Guidelines and Quality Standard reviews as well as Technology Appraisals, and providing opinions on documents from the RCP, DH and other bodies. The ABN specialist sections (see appendix) which are appointed by Council to provide expert reviews, allow us to respond rapidly, often despite very short deadlines. During 2014 the ABN published Generic Quality Standards for scheduled care and for un-scheduled care. Other quality standards are in development. The MS section, led by Neil Scolding, has been particularly busy and its revised MS guidelines are scheduled for publication in mid 2015.

A meeting of Section Chairs was held in January 2015 to revisit the objectives of the ABN Sections and develop a plan for future action. Due to ongoing confusion between Sections (advisory groups appointed by Council) and Special Interest Groups (open to all ABN members) it has been proposed to rename sections ‘ABN Advisory Groups’ (subject to ratification at the forthcoming AGM). Membership of Sections/Advisory Groups runs on a 2 year cycle. Please keep a look out for the invitation for new applications in the summer.

The Specialist Interest Groups are organised by ABN members for themselves and continue to run separately from the Sections/Advisory Groups. If a group involves non ABN members amongst their number, they run in a similar fashion to the SIGs, but are referred to as ‘Affiliated Societies’. Please contact the Chairs directly if you are interested in joining (see appendix). Following a successful session dedicated to and run by Special Interest Groups a the 2014 Annual Meeting in Cardiff, we have expanded the sessions available to Special Interest Groups at the 2015 meeting where 13 groups will run individual talks over 3 different time slots.

It is approaching a year since I took over the role of Honorary Secretary from Hadi Manji, whose term as Honorary Secretary was cut short by commitments overseas. During the year activities have included publication of the first ABN Acute Neurology survey, generic Quality Standards for scheduled care and for un-scheduled care, we have launched the ABN Clinical Research Fellowship Training fund and set up an ABN committee for consideration of honours.

My thanks go to Joanne Lawrence and her team for making the job of Honorary Secretary so much easier and for the excellent way in which they keep the ABN functioning. I would particularly like to acknowledge Ralph Gregory, Hon Secretary 2012-014 and the rest of the ABN Executive committee for guiding me through the first year.

Honorary Treasurer
Lionel Ginsberg

In 2014, the ABN's incoming resources were £606,318 (£589,053 unrestricted income, £17,265 ABN Clinical Research Training Fellowship fund) with total resources expended of £528,163, giving a net surplus before revaluation of investment assets of £78,155 (£60,890 plus £17,265). Contributory factors towards this healthy balance included a successful annual meeting in a cost effective location, enhanced collection of subscription fees and ongoing rigorous control of income and expenditure. Our investments performed well in 2014, gaining £24,350. Taken in conjunction with the continued control of income and expenditure, this means that the ABN's reserves have increased from £811,718 at the beginning of the year to £896,958 (plus £17,265 restricted funds) at the end. In line with financial and legal advice, the ABN aims to maintain a reserve of around one to two times its normal annual expenditure. This is considered a safe margin which would allow for remote contingencies, such as the financial failure of an annual meeting. Our funds remain within this window but year-on-year improvement affords increasing flexibility.

One area where this flexibility is being used is in the Association’s commitment to supporting clinical research training. In 2013, the ABN trustees agreed to underwrite a Clinical Research Training...
Fellowship (approximately £60,000 per fellow per year, plus university fees and consumables). The 2014-15 round of fellowship recruitment (which has now been completed successfully) coincided with the official launch of our fellowship fund, aimed at recouping this initial outlay and providing a sound financial basis for future fellowships. Initial donations to the ABN Clinical Research Training Fellowship fund in 2014 amounted to £17,265, being composed mainly of donations from individual members. Following the formal launch of the fund, the ABN is working with members, industry partners and interested individuals to support this key component of ABN strategy, and donations are continuing.

Services and Standards Committee
Chair: Ralph Gregory
Deputy: Adrian Wills
Administrator: Josie Shew
Regional Representatives:

Council Officers: Geraint Fuller (President), Phil Smith (President-elect), Kevin Talbot (Honorary Secretary), David Burn (Honorary Assistant Secretary), Richard Davenport (CRAC Chair)

Co-opted members: Arlene Wilkie and Alex Massey (Neurological Alliance); David Bateman (National Clinical Director for neurology); Graham Venables (Clinical Reference Group)

New members elected this year were:
David Nicholl (West Midlands), Tracey Graves (East Anglia), Giles Elrington (Thames NE), David McKee (North West), and Stephan Hinze (Oxford) We warmly welcome them to the SSC. We thank Paul Davis, Jeremy Gibbs, Brendan Davies, Mark Manford and Jon Sussman for their contributions and commitment to the SSC over the last 6 years.

The SSC has an important role in providing ABN members with advice and I would encourage you to contact your representative or the ABN office if there is any issue causing you concern in your work as a consultant neurologist or if you have any suggestions regarding suitable topics for review in relation to services that impact on patient care.

Over the last 12 months, the SSC has been actively involved in the following:

Strategic Clinical Networks (SCNs)
Major changes continue to occur within the NHS structure in England. We are indebted to the Neurological Alliance for their ongoing hard work in ensuring that we are kept up to date with developments. Appointed neurology clinical leads are listed below.

It is vital that neurologists engage with their local SCN as clinical input is crucial to its success. If you are interested, please contact your SCN lead or Dr David Bateman, National Clinical Director for neurology (david.bateman@nhs.net).

Regional SCN leads are:

Cheshire & Merseyside
Mark Lawden (mark.lawden@btinternet.com)

East Midlands
Max Damian (msdd2@cam.ac.uk)

London
Nicolas Losseff (nicholas.lossseff@uch.nhs.uk)

Greater Manchester, Lancashire & South Cumbria
Mark Kellett (mark.kellett@me.com)

Northern England
Paul Goldsmith (paul.goldsmith@cantab.net)

South East Coast
Neil Munro (neil.munro2@nhs.net)

South West Coast
Peter Heywood (peter.heywood1@virgin.net)
Commissioning
There is continuing uncertainty regarding which highly specialised neurological services are to be commissioned by NHSE. From April 2015, consultant to consultant referrals for services at the prescribed Regional Neuroscience Centres will be commissioned nationally, and GP referrals by their local CCGs. All services commissioned elsewhere will be funded by CCGs. This represents a significant change, and the financial implications are yet to be clarified. It has recently been announced that neurology services will be commissioned in three and not two tiers. Some services will be “co-commissioned” by CCGs and NHSE. Exactly how this will work, and how individual services will be affected is still unknown, and is likely to change again after the General Election. An ABN Commissioning support pack for neurology has been prepared but remains in draft form until these uncertainties are clarified.

Acute Neurology Survey
Across UK neurology, an increasing number of departments are adapting their work to allow input into acute neurology (including thrombolysis for stroke) and seven day working. The ABN Acute Neurology Survey which was published in November 2014, provides an insight into what is happening. This should be considered a first iteration, and a document that will be continually updated. Please review your data, and let the office know of any updates or inaccuracies. The survey document also includes the ABN Quality Standards for scheduled and unscheduled care.

Neurology Intelligence Network
Public Health England launched the National Mental Health Dementia and Neurology Intelligence Network last year. This is already proving to be a very useful resource and you are encouraged to visit their website to see how well your unit and local CCGs are performing. The spreadsheets provided have been refined and updated and can be used to assist negotiations with commissioners and highlight potential areas for audit. (http://fingertips.phe.org.uk/profile-group/mental-health/profile/neurology/data)

New Audit and Revalidation Committee (ARC)
Audit remains a key activity and in order to more effectively harness high quality audit that is being undertaken across the UK (local, regional and national) it was agreed that a new structure was needed and ARC has been created. Under the umbrella of the SSC, it also has a role in developing/approving new guidelines. Nick Silver (Nicholas.silver@thewaltoncentre.nhs.uk) has been appointed as its chair (2014-2017) and Paul Worth (paul.worth@addenbrookes.nhs.uk) is the lead for ABN guidance and guidelines group which is currently being assembled. Lucy Kinton has replaced Jenny Quirk as the ABN Revalidation Representative and Peter Enevoldson is to serve as a Revalidation Advisor to Council.

Job Planning
Job plans are quite varied – most are now 4 clinics/10 PAs with pressure to reduce SPAs to 1.5 per week. In Scotland, new consultant posts are only offered 1 SPA which covers CPD/audit/appraisal/revalidation/teaching. Additional SPAs should be gained in the job planning process, but unfortunately this is not happening in some areas. Representation has been made to the Scottish Health Board. The ABN job planning document published last year, is available on the website.
ABN Meetings Committee
Chair: David Burn
Committee: Geraint Fuller, Phil Smith, Kevin Talbot, Ralph Gregory, Keith Brews, Trevor Pickersgill, Lionel Ginsberg, Huw Morris, Helen Devine, Dawn Moore, Joanne Lawrence, Keith and Jenni Brews (Affinity Events).

The 2014 annual meeting was held in Cardiff (7-9 May) and attracted over 600 delegates. The 20th Gordon Holmes Lecture was delivered by Professor Martin Samuels (Professor of Neurology, Harvard Medical School). The ABN Medallist Lecture was given by Professor Michael Hutchinson on endophenotypes in dystonia. A session was devoted to Commissioning and Shape of Training. On Tuesday 6 May, the Student Roadshow, a trainee session, a GP "Need to know" Neurology, and a Research Workshop, entitled "How to get ahead in research" were enthusiastically received by attendees. A single evening Special Interest Groups (SIGs) parallel session proved so successful that plans are in place to spread these sessions out over three slots in future to allow more delegates to attend multiple sessions. The gala dinner included an after dinner speech from Professor Emeritus Dafydd Thomas and a surprise, breathtaking musical performance by Josie Shew.

A joint two day meeting was held the British Association of Stroke Physicians on ‘Stroke Neurology’ in Stratford (30th September and 1st October 2014) with over 200 delegates. Again, feedback from this event, which included a preceding GP Session was very positive.

The 2015 Annual Meeting will be held in Harrogate (20-22 May) and will again be preceded by a Trainees Session, GP “Need to know” Neurology, and a Research Workshop. A subtle difference in the Tuesday programme compared with Cardiff will be a session targeting Foundation Doctors who may be considering a career in Neurology. The sessions in the main meeting will address cross-cutting themes: Neurosurgery for neurologists; a clinician’s guide to emerging diagnostic investigations; channelopathies: an open and shut case?; and the psychiatric borderlands of neurology. Professor Anthony Lang (Western General, Toronto) will give the Gordon Holmes lecture (supported by the Guarantors of Brain), whilst Professor Andrew Lees will be this year's ABN Medallist (citation by Dr William Gibb). Professor Jeremy Farrar, Director of the Wellcome Trust will speak on world health and the neurologist (supported by Practical Neurology).

The autumn meeting will be held at the Institute of Education in London (10th September) with a theme of Neurological Updates. The programme for this is at an advanced stage.

Training & Education Committee
Chair: Richard Davenport
Elected members: Michael Lunn, Jon Winer, Tom Warner, David Nicholl, Chris Allen, Daniel Blackburn, Haider Katifi

TEC membership: Chris Allen ended his term with TEC in February 2015, and John Winer will come to end of his term in August 2015, thank you to both for all their help, and we shall look forward to fresh elections.

ABN TEC Undergraduate prize: Submissions for this year were as follows: Audit (2), Clinical (8) and research (6). Once again, this was a reduction in applicants from previous years.

ABN Australasian Fellowships: The three further posts were appointed to start in 2015 although only 2 took up posts due to unexpected illness. Interviews for 2016 are now underway.

ABN self-assessment exercise: updated exercise will be launched at Harrogate meeting for 2015.

Learning about Neurological Disorders: this document for been extensively revised, and will be submitted for Council approval in April 2015, with launch at Harrogate 2015.
Clinical Research & Academic Committee (CRAC) Report for 2014
Chair: Huw Morris; Chair BNSU: Rustam Al-Shahi Salman
Committee Members: Huw Morris, Rustam Al-Shahi Salman, Yusuf Rajabally (North West & West Midlands), Martin Turner (South Central & South East Coast), Nin Bajaj (East of England & East Midlands), Donald Grosset (Scotland & Northern Ireland), David Burn (North East & Yorkshire & the Humber), Khalid Hamandi (Wales & South West), John Zajicek (CLRN rep), Claire Galtrey (ABNT rep)

ABN Clinical Training Fellowships
The ABN Clinical Research Training Fellowship scheme was relaunched in Nov/December 2014 and fellowships were offered together with the Guarantors of Brain and the Patrick Berthoud Trust. Thirteen applications were received and interviews of six short-listed candidates were held in March 2015. Fundraising for the 2015/2016 scheme is ongoing, with a plan to advertise again in November 2015. We are continuing to engage with potential donors, the pharmaceutical industry and charities.

ABN Research Training Workshop
The inaugural research training workshop - "How to get ahead in research" was well attended and received at the Cardiff ABN meeting with feedback rated from good-excellent. A similar workshop well be held at the Harrogate meeting, covering multi-centre studies and translational medicine

Intercalated Degree Bursary
Two bursaries were awarded for 2015 to Rachel McAughtree, Glasgow University and Rebecca Webb-Mitchell, Newcastle University.

BNSU
The BNSU continues to be a very valuable way of recruiting patients to research studies. The overall proportion of members participating in the British Neurological Surveillance Unit (BNSU) who responded to monthly emails was around 40% throughout 2014, which was lower than 2013.
BNSU surveillance has ceased for Transient Epileptic Amnesia in June 2014 and Congenital Cranial Dysinnervation Disorders in May 2014. The numbers of cases ascertained for the conditions under surveillance over 2014:

<table>
<thead>
<tr>
<th>Condition</th>
<th>Cases</th>
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<tbody>
<tr>
<td>Transient Epileptic Amnesia</td>
<td>22</td>
</tr>
<tr>
<td>Familial Alzheimer's Disease and Familial Fronto temporal Dementia</td>
<td>40</td>
</tr>
<tr>
<td>Demyelination complicating anti-TNF therapy</td>
<td>16</td>
</tr>
<tr>
<td>Severe Hypersensitivity Reactions to Antiepileptic Drugs</td>
<td>19</td>
</tr>
<tr>
<td>Lambert-Eaton Myasthenic Syndrome</td>
<td>39</td>
</tr>
<tr>
<td>Neurological problems occurring within one month of influenza infection in adults</td>
<td>19</td>
</tr>
<tr>
<td>Drug-induced Liver Injury Reactions to Antiepileptic Drugs</td>
<td>36</td>
</tr>
<tr>
<td>Congenital Cranial Dysinnervation Disorders</td>
<td>3</td>
</tr>
<tr>
<td>Myoclonus Dystonia Syndrome</td>
<td>15</td>
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<tr>
<td>Severe Hypersensitivity Reactions to Antiepileptic Drugs</td>
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At the time of going to press, annual reports had been received from those investigating Familial Alzheimer's disease and Familial Frontotemporal Dementia, Myoclonus Dystonia Syndrome, Drug-induced liver injury reactions to antiepileptic drugs, Lambert-Eaton myasthenic Syndrome, particularly lung cancer-related and Severe hypersensitivity reactions to antiepileptic drugs. Annual reports indicated that the proportions of responses received from ABN members to questionnaires sent following the notification of a case to BNSU ranged from 79-100%, although these percentages are based on small numbers. Of the 71 patients ascertained by studies submitting annual reports, 25 patients were successfully recruited to the studies.

**Association of British Neurologists Trainees**

Chair: Helen Devine

Committee members: Emma Tallantyre (Secretary), Rhys Thomas (Treasurer), Clare Galtrey, (Research Rep), Alex Foulkes (Training and Education Rep), Marianne Novak (BMA/Liaison Rep), Ann Donnelly and Zhaleh Khaleeli (Media and Communications Reps), Jessica.Redgrave@sth.nhs.uk (BASP Rep)

ABNT committee members have continued to participate in all ABN committees, representing the views of trainees in the Association. A new ABN committee has recently been set up looking at audit and guidelines and the Liaison rep now sits on that committee. Our work has been supported by a network of regional representatives who provide trainees with a local point of contact with the ABN. The committee has put in an enormous amount of hard work in developing initiatives to make neurology more approachable to junior doctors as well as addressing issues relevant to trainees.

**ABNT website and twitter feed**

The ABNT Committee has continues to contribute to the trainee section of the new ABN website. We also continue to run our parallel website www.abnt.org.uk which provides additional information and a forum to discuss part-time job-shares. The twitter account @ABNTrainees now has over 400 followers and provides information about courses, conferences and jobs as well as regular clinical nuggets in the form of #neurogems and research updates. A regular ABNT email newsletter has provided updates to neurology trainees throughout the year in addition to the ABNT section on the ABN newsletter. Committee members have contributed articles to the ACNR related to training issues.

**ABNT Survey of neurology registrars**

An extensive ABNT survey is almost complete and we have had almost 200 responses, which is a 72% response rate. This response is higher than previous years. The aim of the survey was to look at current training and trainees plans for the future. The survey also explored the reasons for trainees choosing neurology so that the committee can use this information to guide further initiatives to recruit junior doctors and medical students into the specialty.

**Mentoring**

The ABNT mentoring scheme has just finished its first year with 41 mentor-mentee pairs and we are about to evaluate the strengths and weaknesses of the program. Most pairings were for two years and will continue. There was a successful training session on how to be a mentor which was supported by the ABN. We are currently recruiting the second round of mentor-mentee pairs.
Shape of Training
The ABNT Committee members have been involved in ABN discussions about the proposed changes to training outlined in the Shape of Training Report and will contribute to the discussion at the ABN meeting. We collaborated with other trainee groups to write a consensus statement outlining our concerns about SoT which was supported by the BMA.

Training day at the ABN meeting in Harrogate
There will be two training afternoons running concurrently at the ABN meeting in Harrogate: one for Neurology trainees and one for junior doctors and medical students. This will be followed by a session on research methodology after the success of the first research session last year. There will be a trainee dinner at the conference on Wednesday 20th May 2015.

New initiatives – the next step!
As we have achieved our objectives in initiating the mentoring program, increasing our online presence and completing the ABNT survey the committee has been working on new initiatives which we plan to launch at the ABN conference in Harrogate:
1. An audit of the month prize
2. A research initiative connecting junior doctors interested in completing a small research project with a research mentor
3. An educational e-learning module development program
4. Advertising the potential role of taster days.

Joint Royal Colleges of Physicians Training Board: Specialty Advisory Committee in Neurology
Chair: Richard Butterworth
Vice Chair: Tom Hughes

Shape of Training Proposals
The Shape of Training (SoT) proposals were debated at last year’s ABN Annual Conference. Very little information has been forthcoming subsequently until a communiqué from the SoT Steering Group was released in the last two weeks broadly supporting the proposals, but acknowledging that much work still needs to be done including piloting a number of themes. Importantly the communiqué states that any changes in the curricula of specialties will require GMC approval; this means that any shortening of training programmes will need proper scrutiny before any amendments are made.

The SAC, in line with the responses from the ABN Council & ABNT, has expressed concerns about the changes in the quality and competence of trainees reaching their Certificate of Specialist Training (CST). However the SAC has also looked into whether parts of the proposals could be used to enhance training amongst UK trainees. The major idea that the SAC has forwarded to the JRCPTB executive is that the 4th year of ‘general medicine’ within the proposed 4-year higher specialty training should be targeted towards acute stroke care and front door acute neurology. This proposal would chime with the combined ABN/RCP London 2011 document *Local adult neurology services for the next decade*. This would ensure the 48 months of higher training is utilised as fully as possible in managing patients with neurological symptoms and disease and at the same time reduce some of the pressures in general medicine.

The SAC has also considered which parts of the current curriculum could be moved into the post-CST (credentialing) year. Examples suggested include epilepsy surgery programmes, DBS for movement disorders and perhaps disease modifying therapies for MS.

Trainee Recruitment in 2015
Health Education England (HEE) has radically streamlined the options for recruitment at ST3 level for all specialties in 2015. In contrast to the regional clusters model adopted by neurology in 2014, the SAC had to choose between super-clusters (e.g. north England, south England and pan-Scotland) or a co-ordinated single national centre model. The SAC opted for the single centre approach but with clear safeguards to eliminate a repeat of the very negative experience of Elland Road, Leeds in 2007. The ABNT representatives of the SAC endorsed the option chosen.
Two days of interviews are scheduled for mid-April at The Kassam Stadium, Oxford and the results of the recruitment programme will be known by approximately mid-May 2015 for August 2015 start dates.

**ABN Australasian Fellowships**
The third group of the ABN Australasian Fellowships have recently commenced their fellowships and the recruitment process for the 2016 placements is underway with interviews scheduled for late March 2015. The recipient cities will be Melbourne (x2) and Perth.

**Training Numbers**
In September 2014 the SAC and representation from ABN Council presented the case to HEE executives for not just the retention, but actually the expansion, of UK training numbers in neurology. It was argued that the failure to recruit into stroke fellowships (and consultant stroke physician posts) in the UK was in part due to an inadequate number of trainees in potential parent specialties including neurology and that the wider burden of neurological disease in the UK population is rising. Against a backdrop of the need for HEE to decommission up to 15-20% of funded specialist training positions nationally in favour of general practice and general medicine, neurology ended up losing 2 posts in the West Midlands. On further scrutiny these were actually posts used for backfilling when trainees go out-of-programme (OOP) and were not being used currently; hence neurology did not lose any training posts overall in England. A further review with all specialties is planned for autumn 2015.

**SAC Developments**
In response to a failure to adequately recruit into 1-year stroke fellowships in London in 2104, neurology is piloting a number of joint neurology/stroke training programmes in the 2015 recruitment round. These positions will enable trainees to get dual training in 60 months (rather than the 72 as traditionally is the current case) because of shared competencies across the two curricula. The pilot has full GMC approval. The idea echoes previous developments with the creation of joint neurology/clinical neurophysiology and neurology/neurorehabilitation training programmes in specific regions.

**SAC Concerns**
An immediate concern is the removal of LAT posts by HEE from 2016. This will directly affect the ability of training programme directors (TPDs) to manage rotations and build in flexibility allowing trainees to go out-of-programme for research or other reasons. The SAC is currently canvassing the UK wide Deans to allow TPDs to backfill (‘mortgage’) posts for trainees going OOP particularly in response to the results from the 2014 GMC Trainees’ Survey which heavily ‘red-flagged’ a number of training programmes in neurology. The common theme centred on training programmes trying to manage with relatively large percentages of trainees OOP or with unfilled posts.

**ABN Sections**
The responsibilities of the ABN Sections are to report on designated consultation documents, NICE guidelines, and other requests for information received by the ABN and to provide these responses in time to meet imposed deadlines.

**Acute Neurology**
**Chair:** Ed Dunn  
**Members:** David Dick, Dominic Paviour, Kirsty Harkness, Robin Howard, Adrian Wills, Maxwell Damian, David Nicholl, Graham Venables, Stuart Weatherby

The Acute Neurology Section has had fewer workstreams this year than last, when a number of important documents were published relating to acute care. We have proposed the first ABN Quality Standards for Acute Neurology and approved the NICE Quality Standard – Transient Loss of Consciousness. In terms of raising wider awareness of the importance and impact of neurologists working in acute settings, members of the section have given talks at a number of major symposia for general/acute physicians - two for the RCP (Edinburgh) and 3 for the RCP (London), following on from successful joint ABN/RCP Acute Neurology meeting held in October 2013.
Cognition
Chair: Chris Butler
Members: Engelbert Puschmann, Cath Mummery, Jeremy Isaacs, Paresh Malhotra, Adam Zeman, Liz Coulthard, Andrea Cavanna, Jerry Brown, Michael O'Sullivan

Epilepsy
Chair: Susan Duncan
Members: Tony Marson, Michael Johnson, Howard Faulkner, Kasia Sieradzan

Headache and Pain
Chair: Brendan Davies
Members: Anish Bahra, Fayyaz Ahmed, Manjit Matharu, Giles Elrington, Sam Chong, David Bennett, Nick Silver

Movement Disorders
Chair: Carl Clarke
Members: Malcolm Steiger, Paola Piccini, Donald Grosset, Oliver Bandmann, Sophie Molloy, Prasad Korlipara, Jeremy Stern, David Burn, Marie-Helene Marion
During 2014-15, the ABN Movement Disorders Section provided advice to the MHRA on their consultation regarding domperidone, the Clinical Prioritisation Advisory Group (CPAG) on their intrajejunal levodopa gel infusion (Duodopa) consultation, and NICE regarding the scope of their Parkinson's disease guidelines update. It provided the ABN with quality statements on Parkinson's and Huntington's diseases. The Section also hosted a video session at the Cardiff ABN Annual Conference.

MS & Inflammation
Chair: Neil Scolding
Members: Waqar Rashid, Jeremy Chataway, Klaus Schmierer, Carolyn Young, Alasdair Coles, Eli Silber, David Miller, Abhijit Chaudhuri, David Barnes, Abdullah Shehu, Sarah Cader, Gavin Giovannoni, John Zajicek
The MS & Inflammation section has over the past year provided continuing input into the NICE processes concerning dimethyl fumarate and alemtuzumab. (Both appraisals concluded with positive recommendations.) However our principal task has been to prepare updated guidelines for disease modifying treatments in MS, a document now complete and to be released in the early spring 2015

Neuromuscular
Chair: David Hilton-Jones
Members: Richard Orrell, Aleksandar Radunovic, Michael Rose, Michal Hanna, John Winer, Andria Merrison, Fiona Norwood
The Neuromuscular section has commented on the following consultations: Interventional Procedures Consultation - Transcutaneous Neuromuscular Electrical Stimulation (NMES) for oropharyngeal dysphagia [IP1033] and CG105 Motor Neurone Disease - Review Proposal Consultation.

Neuro-oncology
Chair: Robin Grant
Members: Fiona McKevitt, Nick Gutowski, Oliver Hanemann, Jeremy Rees, Paul Hart, Alison Parry, Bridget MacDonald, Paul Maddison, Katia Cikurel
The Neuro-oncology section has commented on the following consultation in the past year:
- NICE Cancer Referral Guidelines
- NICE: CSGBRAINCNS Service guidance for improving outcomes for people with brain and other central nervous system tumours – update requirement
- Proposing Neuro-Oncology sessions for future meetings

The Neuro-oncology Section of The ABN may develop a Special Interest Group (SIG) in 2015.

Neurorehabilitation and Traumatic Brain Injury
Chair: Diane Playford
Members: Martyn Bracewell, Judith Allanson, Nick Ward, Val Stevenson, Collette Griffin, Richard Greenwood
The section attended the section leads meeting. The section will be working with the Neuro-oncology section to provide guidance around the rehabilitation needs of neuro-oncology patients.
Stroke
Chair: Cathie Sudlow
Members: Richard Hardie, Mark Willmot, Pankaj Sharma, David Werring, Hedley Emsley, Liqun Zhang, Martin Punter
The Stroke section has commented on the following consultations over the past year: Review of NICE technology appraisal guidance NO. 210; Clopidogrel and modified-release dipyridamole for the prevention of occlusive vascular events; Vorapaxar-atherothrombotic events after myocardial infarction; Electrical Stimulation for oropharyngeal dysphagia; Atrial Fibrillation (non-valvular, stroke and embolism prevention) edoxaban tosylate.

Members of ABN Council 2014-15

President Dr G Fuller 2013-15
President Elect Professor Phil Smith 2013-15
Honorary Secretary Prof K Talbot 2014-16
Honorary Assistant Secretary Professor D Burn 2014-16
Honorary Treasurer Professor L Ginsberg 2011-15
Honorary Treasurer Elect Dr Trevor Pickersgill 2014-15

Chair, Services and Standards Committee Dr RP Gregory 2014-17
Chair, Training and Education Committee Dr RJ Davenport 2013-16
Chair, Clinical Research & Academic Committee Professor HR Morris 2012-15
Elected Councillor Professor N Scolding 2009-15
Elected Councillor Professor MM Reilly 2011-15
Elected Councillor Dr W Gibb 2012-16
Elected Councillor Dr W Rakowicz 2012-16
Elected Councillor Dr A Coles 2013-17
Elected Councillor Dr P Worth 2013-17

Chair, Association of British Neurologists Trainees Dr H Devine

Co-opted, Chair SAC Neurology Dr R Butterworth

ABN Office – Members of Staff

Joanne Lawrence
Executive Director
Full-time
Appointed January 2013

Dawn Moore
Finance Administrator & Membership Administrator
Full-time
Appointed April 2006

Josie Shew
Administrative Secretary
Full-time
Appointed April 2009
Appendix 1

Council Minutes 2014-15

Minutes (unconfirmed) of the Council meeting held on Wednesday 15 January 2014 at Ormond House, 27 Boswell Street, London WC1N 3JZ

Those present: Dr GN Fuller (President, Chair), Professor PEM Smith (President Elect), Dr Ralph Gregory (Honorary Secretary), Dr Hadi Manji (Honorary Assistant Secretary), Professor L Ginsberg (Honorary Treasurer), Dr RJ Davenport (Chair TEC), Professor Huw Morris (Chair CRAC), Dr G Llewelyn (Chair SSC), Professor NJ Scolding, Professor MM Reilly, Dr William Gibb, Dr Wojtek Rakowicz, Dr Paul Worth, Dr Alasdair Coles, Josie Shew (ABN), Joanne Lawrence (ABN), Anthony Pereira (BASP)

Professor MN Rossor (Past President) joined the meeting late.

Lord Stanley Fink (lay trustee) joined the meeting at 11.30.

Elisabeth Baltay (lay trustee) joined the meeting at 11.30.

1. Apologies for Absence

Apologies were received from Dr Helen Devine (ABNT), Dr Richard Butterworth (SAC), and Dr Patrick Cadigan (RCP).

2. Minutes of the Council Meeting 17.09.13

Minutes of the last meeting were approved with the following corrections: 11.4, spelling of Victor Pattison, should be ‘Patterson’. 5.3a, should read ‘unopposed’ not ‘unanimous’, 10.1 SCN letter was sent to English regions, not UK regions, 9. RD ‘testing’ should read ‘editing’, 6.2; ‘our’ Gordon Holmes lecture should be changed to ‘the’ Gordon Holmes lecture, Professor ‘Graham Warner’ should read ‘Tom Warner’.

2.1 Matters arising

GF opened the meeting by welcoming two new members of council, Dr Paul Worth and Dr Alasdair Coles, and congratulating them on their appointment.

3. Standing items

3.1 SSC Minutes, 23 July 2013, confirmed as for information only.
3.2 CRAC Minutes, 26 September 2013, confirmed as for information only.

4. Meetings Committee

4.1 Report from RCP/ABN Joint Meeting London 23/24 October 2013

Hadi Manji (HM) reported that over 200 delegates attended the Acute Neurology day on 23 October, one of the highest number of delegates for a specialty meeting at the Royal College of Physicians. 198 delegates attended the ABN meeting on 24 October, with excellent feedback. The ABN received no financial benefit from the Acute Neurology day however, following a teleconference with John Wass and administrators of the RCP (attended by Lionel Ginsberg (LG), Geraint Fuller (GF) and Joanne Lawrence (JL) it was agreed that the RCP would develop a financial model for future joint meetings for discussion with the ABN. Phil Smith (PS) reiterated that it was a very successful meeting with great potential for future meetings, provided we adhere to ground rules, set by the ABN.

4.2 Programme, ABN Annual Meeting, Cardiff, 7-9 May 2013
4.2a Medical student & trainee sessions

HM reviewed the Cardiff programmes including the student roadshow and the trainee session on 6 May 2014. New for 2014, Huw Morris (HRM) and Will Whiteley have organised a research session at the end of the trainee session.
4.2b  GP session

The GP “Need to know Neurology” session has been organised by Ralph Gregory (RG).

4.2c  Main meeting

HM confirmed all speakers as attending and Marty Samuels as the invited speaker. HM confirmed that the Guarantors of Brain were not funding the 2014 Gordon Holmes Lecture this year. HM suggested an early meeting with the Guarantors of Brain prior to the 2015 meeting. Matthew Kiernan will give the annual lecture. Michael Hutchinson is the ABN medallist. There will be a video link of Michael’s lecture to the Irish Neurology meeting in Belfast. Dafydd Thomas has been confirmed as the after dinner speaker at the Gala Dinner. The Special Interest Groups each have a session available at the meeting. There will be five symposia, two parallel lunchtime sessions and one breakfast session. The meetings app will be managed by Josie Shew.

4.3  ABN/BASP Joint Meeting October 2014.

HM has been finalising the programme for the Stratford meeting on 30 Sept/1 Oct 2014. The finances will be shared between the ABN and the BASP. 215 delegates will be needed to break even, trainees will be encouraged. There will be a limited number of posters and an opportunity for case presentations. Maximum capacity is 330.

5.  ABNT Report

Helen Devine (HD) sent a report in her absence. GF commented that the mentoring scheme is a very positive step forward and the launch will coincide with the Cardiff meeting. Trainees are concerned about the Shape of Training report. (ref item 7).

6.  CRAC Report

HRM confirmed that CRAC was now quorate; current members being Nin Bajaj, Donald Grosset, David Burn, Martin Turner, Khalid Hamandi, John Zajicek (CLRN rep), Rehiana Ali (ABNT rep), Huw Morris (London rep and chair).

6.1  BNSU

Rustam Salman (RS) is in Australia on sabbatical. HRM and RS will be trialling the new BNSU database when ready for testing. RS and HRM were in discussion with Janet Messer of the Health Regulation Authority about the method of notification of cases with the BNSU. With the advent of Patient Identification Centres, the guidelines were rewritten to confirm that it is not necessary for each BNSU case to receive individual ethical approval.

ACTION: HRM and RS to circulate revised BNSU guidelines to council.

Dr Nick Gutowski has stepped down for notification of Duane syndrome and HRM congratulated him on his work in this area.

HRM reiterated that CRAC has a new seminar in the Cardiff meeting entitled “How to get ahead in research”, primarily directed towards SpRs and trainees interested in research but is open to everybody to attend.

7.  TEC Report

There are a number of different student groups around the UK; TEC is hoping the new ABN website will be able to bring the various groups together. ABNT has created a document that can be used as a poster and a leaflet to encourage students to study neurology. Applications for the Undergraduate prize have been lower than previous years. Winners of the Prize will be celebrated on the website.

7.1  New constitution and members

Richard Davenport (RD) confirmed that TEC is now quorate, with three new members, Daniel Blackburn, Haider Katifi and Brendan McLean.

7.2  Self-assessment exercise

Joanne Lawrence (JL) demonstrated a new format for the self-assessment exercise which will be available through the members’ only area of the ABN website. The result will appear on a printable...
certificate, only accessible once the questions have been answered. The format of the certificate will be agreed with council before launch of the new exercise.

7.3 Undergraduate teaching review
The last document the ABN produced was in 2006, it has been agreed that this should be updated. RD has been working on it and Mark Wiles has expressed an interest. Julia Pakpoor conducted a survey among medical students regarding attitudes to neurology and a career in neurology, which has been accepted. The result of the survey confirms that neurology still remains a desirable specialty, but neurophobia still exists.

7.4 Shape of Training
RCP has issued a set of questions on SoT to be returned by 20th Jan, ahead of a meeting on 30 January (GF will attend). Richard Butterworth (RB) on behalf of the SAC has already submitted some comments. RJD has drafted an ABN response and invited council to comment on the draft. It was agreed that the ABN’s response would be critical of the Shape of Training proposal.

Action: RJD to rewrite response based on council’s discussion and circulate to council.

8 SSC Report

8.1 Audit and Revalidation
GL explained that the Audit and Revalidation Committee (ARC) will be chaired by Nick Silver as a subgroup of the SSC. PS has created a document to explain the aim of the committee. Jenny Quirk is currently revalidation representative for the RCP. As she has left SSC her role will be taken by the chair of ARC. GL queried whether ARC should review guidelines produced by the ABN. GF suggested this might be done by a separate group, in communication with ARC. GF mentioned that the SSC’s proposal for the Acute Headache Guideline from NCEPOD has been provisionally accepted. GL explained that all members of SSC are welcome to attend the first meeting of ARC.

8.2 Job planning
GL thanked Anthony Pereira, NS and HRM for their input. A discussion followed regarding the detail of the job planning document.

8.3 Commissioning
8.3a Specialist and CCG
8.3b ABN commissioning guidelines

GL confirmed that the ABN has responded to the specialist commissioning document produced by David Bateman and Graham Venables. GF gave a background to the CCG document, explaining that almost all of neurology will be CCG commissioned, as opposed to all of neurology performed at neuroscience centres being specialist. David Bateman’s strategy is to create a commissioning document that clearly outlines responsibilities.

8.4 Strategic clinical networks
GL explained that the SCN letter sent to ABN members last year contributed to people becoming involved. RG suggested sharing the different SCN models of how mental health, dementia and neurology have been split with members. JL stated that the ABN had been approached by an independent research company which had been asked by East Midlands to put together a study about neurological services in the region. It was agreed that data collated from the Acute Neurology Survey should be held at the ABN, the question being who should have access to this data.

9 Honorary Secretary’s Report

9.1 NICE Accreditation Generic guidelines Section
RG explained that NICE has offered accreditation to bodies that write guidelines and has accredited 60 processes to date. The British Thoracic Society (BTS) has achieved accreditation. Once accreditation (and the NICE kitemark) is awarded, the individual guidelines will not be individually reviewed by NICE. 36 ABN members responded to an email asking for interest in the process of guideline development within the ABN more generally. Paul Worth (PW) has been looking into the accreditation process which is fairly exhaustive and can take up to 6 months. Applicants are invited to send guidelines that they have already developed in support of the accreditation application; NICE will consider guidelines developed within the last three years, of which the ABN has developed only one, as evidence of
rigorous guideline development. BTS has developed a guideline development document and a ‘Standards of care committee’. It has the role of guideline development as its first remit, with research and responsibility for identifying gaps in knowledge exposed by the guideline development process. It is possible that we would need to write more guidelines before applying for NICE accreditation. NS expressed reservations, believing that the ABN’s expertise and experience is sufficient in itself to produce authoritative guidelines without NICE endorsement and that NICE accreditation could compromise the ABN’s independence. Martin Rossor (MR) asked if the ABN could choose which guidelines have the NICE kite mark as this would eliminate the problem.

[GF welcomed Elisabeth Baltay and Lord Fink, who joined the meeting from this point.]
Mary Reilly (MRe) asked for clarification of the benefits of accreditation for the next council meeting. PW confirmed that the standards required for NICE accreditation are exacting but to some extent generic, and would be useful for the ABN to follow, even if it were to decide not to apply for accreditation. PW suggested that the ABN should focus on writing guidelines to these high standards in the first instance. GF and council agreed that the primary objective was writing guidelines that the ABN felt could be important. HRM suggested asking BTS why they felt accreditation was important.

**ACTION:** PW to circulate his findings to council.

9.2 ABN neurology Quality Standards
David Bateman had asked that the ABN consider Quality Standards for areas not yet covered by NICE. RG confirmed that the ABN sections have been writing quality standards for approval by the executive committee and explained that the quality standards will tie in with the Commissioning Toolkit. They will be called ‘ABN working guidelines’ to emphasise that there may be a NICE quality standard or a change.

9.3 Consultations
RG informed council that the ABN has been asked to contribute to 50 consultations for NICE and other bodies, each year since 2011.

9.4 ABN sections, special interest groups and affiliated societies
RG defined the 3 types as:
- Sections: appointed by council and answerable to council,
- Special interest groups and affiliated societies are separate from council and are independent eg would not be asked to contribute to guidelines
  - Special Interest Groups only consist of ABN members
  - Affiliated societies can be ABN and non ABN members.
Three new special interest groups/affiliated societies have requested recognition from the ABN. Council agreed that Movement Disorders (currently BRING) and Traumatic Brain Injury should become special interest groups, and British Myology Society be recognised as an affiliated society.

9.4.a Section questionnaire review
RG informed council that sections had responded to a recent questionnaire as follows:
- Writing guidelines: there was a general lack of interest regarding guidelines, with the exception of one or two sections.
- Lay person on section: Sections generally didn’t want a lay person unless they already knew of a suitable candidate.
- Generalist on section: there was general enthusiasm amongst sections to have a generalist. RG suggested a specific council member be in each group to help with consultations. GF suggested that a generalist from the Acute Neurology section join each section.

**ACTION:** RG to speak to Ed Dunn

9.4.b Ratify Movement disorder, TBI SIGs and Myology Affiliated Society
This was ratified by council under section 9.4.

9.5 Membership – amendments to rules
RG suggested the following changes to rules
- only one signature of support be required for student and junior membership, as opposed to the existing two. Council agreed this change.
that members can elect to resign ordinary membership and become a senior member when they reach retirement age, even if still working. ABN Articles of Association state that only ordinary members may vote. A discussion followed regarding membership fees for all categories. Elisabeth Baltay (EB) confirmed allowing members still in practice the option to continue to pay and receive the right to vote was acceptable from a legal perspective. NS suggested the term ‘practising’ should refer to those members still on the specialist register. This was agreed by council. EB asked if the category ‘senior’ should be changed to ‘non practising’. HRM agreed. GF suggested that council establish a watertight and acceptable definition for senior member for 2014, and suggest adjusting membership fees at a later date.

**ACTION: JL to rewrite suggestion of membership rule change.**

9.6 Practical Neurology update
RG updated council that negotiations are underway with BMJ with further negotiations taking place on the afternoon of council, to co-own Practical Neurology. EB added that we need clarity about editorial and care management. MRe added her strong support to the proposal. RG added that only senior members do not have online access to Practical Neurology, the proposal being that we allow them access to the journal online. NS added his support to the proposal. Alastair Coles (AC) expressed his concern over the ABN's lack of editorial input. EB confirmed that point will be discussed at the upcoming meeting.

9.7 Nominations for EAN forthcoming elections
RG explained that we have been invited to nominate people for the EAN elections. A notice was circulated in the newsletter and proposals for nominations are Christopher Kennard for President, Martin Rossor for Vice President and Nin Bajaj for Secretary General and Member at Large. Council approved the nominations.

9.8 Risk Register
The Risk Register was presented to council for information, with no issues arising.

10 Treasurer’s Report

10.1 Draft Management Accounts to December 2013
LG updated council with the draft management accounts. LG stated that there was a small deficit in 2013.

10.2 Financial report from 2013 meetings (Glasgow and RCP)
LG stated that both meetings in 2013 made a small loss. JL explained that we are slightly changing how expenditure is counted, by looking at in house and management costs. LG thanked JL and Dawn Moore for successfully chasing subscriptions. LG stressed that the figures are draft, with audit starting at the end of January.

10.3 Office Remuneration
JS left the meeting for this discussion.

11 Items for Discussion:

11.1 Elections (ABN Council, TEC, CRAC) Not discussed

11.2 Acute Neurology Survey
JL stated we are close to covering all UK Health trusts/Health Boards with over 200 responses at the time of the meeting. The results will be presented at the AGM.

11.3 International relations
11.3a Brazilian exchange
RD updated council that the Brazilian exchange has been running for four years; Martin Turner has applied for 2014. Council ratified the decision. GF suggested that the Brazilian exchange discontinue after this year. This was supported by council.

11.3b Sri Lanka
GF, RG and NS attended the Association of Sri Lankan Neurology meeting. The ABN has been instrumental in the development of neurology in Sri Lanka. The suggestion was that we were investing
too much energy into Sri Lanka and not broadening our international links with other countries. GF explained that they have built their training schemes on the British system, with most of them attending the UK during their training. The relationship has been very helpful but there have been increasing problems for the trainees getting access to the UK due to visa problems. So Sri Lanka is beginning to explore relationships with Australia, Singapore and other countries. GF suggested that we had ABN Sri Lankan fellows, that facilitated their ability to obtain a visa, and would allow us to help them to find appropriate appointments. GF asked for council’s approval. JL reported a discussion with Laura Bailey at the RCP: they perceive greatest need of help to be in the allocation of posts (currently takes 6 to 9 months). The RCP would welcome any formal support from the ABN in identifying or directing people towards posts. GF suggested inviting fellows to the ABN annual meeting. AC expressed concern about investing so much in one international relationship, at the detriment of other relationships. GF asked if we should be actively seeking out relationships with other countries. LG confirmed that a number of different members in addition to council have participated in the scheme.

**ACTION: GF to create an SOP of the Sri Lankan scheme.**

11.4 Fellowship Scheme 2014  
HRM proposed, following discussion with Lord Fink, that the ABN underwrite an ABN Fellowship and then seek to replenish funds via industry and individuals. Donations may be invited at time of Annual Subscriptions via an ‘opt in’ tick box. A letter will be sent in Q1, alerting people to the scheme, a launch of the scheme in Cardiff, and initiating collection of the finance with the Annual subscriptions in June 2014. The possibility of a patron’s day was discussed as well as industry sponsorship and fund raising events. Richard Butterworth suggested that the timetable was brought forward slightly, to be more in line with recruitment of LATs. GF congratulated HRM and LG on their hard work. Council approved allocation of £50,000 for the first three years to underwrite the fellowship scheme.

11.5 Neurological Alliance  
11.5.a ABN representation – not discussed.

11.6 ABN Strategy – update  
GF updated council that we are making progress with the strategy.

11.7 ABN website  
The website is progressing well.

11.8 Update of Year of the Brain  
Council agreed to have the Cardiff meeting badged with the Year of the Brain logo.

**12 Any Other Business**

Closing dates for Treasurer Elect and Honorary Assistant Secretary are 31 January 2014.
Minutes (unconfirmed) of the Council meeting held on Wednesday 16 April 2014 at Ormond House, 27 Boswell Street, London WC1N 3JZ

Those present: Dr GN Fuller (President, Chair), Professor PEM Smith (President Elect), Dr Ralph Gregory (Honorary Secretary), Dr Hadi Manji (Honorary Assistant Secretary), Professor L Ginsberg (Honorary Treasurer), Dr G Llewelyn (Chair SSC), Dr Richard Butterworth (SAC), Dr Helen Devine (ABNT), Professor NJ Scolding, Professor MM Reilly, Dr William Gibb, Dr Wojtek Rakowicz, Dr Paul Worth, Dr Alasdair Coles, Josie Shew (ABN), Joanne Lawrence (ABN)

Lord Stanley Fink (lay trustee) joined the meeting at 11.30.
Elisabeth Baltay (lay trustee) joined the meeting at 11.30.

1. Apologies for Absence

Apologies were received from Professor Huw Morris (Chair, CRAC), Dr RJ Davenport (Chair TEC), Professor Martin Rossor (Immediate Past President), Dr Anthony Pereira (BASP) and Dr Andrew Goddard (RCP).

2. Minutes of the Council Meeting 15.01.14

Minutes of the last meeting were approved with the following corrections: Dr Gareth Llewelyn was present; Page 1: 200 delegates should be changed to ‘over 200’, ‘the highest’ should be changed to ‘one of the highest’; 8.3b: last sentence should remove reference to money. Page 6: ‘EB added that we need clarity about editorial and care management’ should be changed to ‘EB added that we need clarity about management and editorial decision making.’

2.1 Matters arising

NICE Accreditation
Paul Worth (PW) reported a discussion about the advantages of NICE accreditation with Sally Welham, Deputy Chair of BTS. BTS feels that being NICE accredited increases the robustness of its guideline development process and adds weight to its guidelines. PW will attend a NICE Accreditation Workshop (29 April 2014) and will check if the ABN must use the NICE kitemark with every guideline produced, or if discretion can be used. Post discussion it was agreed to create a guidelines section.

ACTION: PW to look at the previously collated list of interested parties and contact those who expressed general interest.

Sri Lanka relationship
GF updated council with an SOP for Sri Lanka. The Medical Training Industry, run by the college, facilitates Sri Lankan trainees travelling to the UK. AC suggested adding at statement that the motivation is to promote academic interest and not to endorse a political situation. This was agreed.

ACTION: GF to reword SOP.

Section generalist
RG suggested picking volunteers from the acute neurology section and council to be a generalist on each of the ten ABN sections. Council agreed with this idea.

3. Standing items

3.1a ARC minutes (unedited), 11 February 2014.
PS informed council that the introductory meeting of ARC was successful. It introduced the idea that we need to engage more with national audits and also have a co-ordinating and encouraging role in local audits. Suggestions included developing audit protocols / templates (GL). including the new guideline committee in the process (WG) and introducing an audit and quality improvement prize at the Annual Meeting (HD).

ACTION: RG to ask sections for suggestions for audit templates.
ACTION: HD to ask SSC ABNT rep to sit on ARC.

3.1b SSC unedited minutes, 11 February 2014, confirmed as for information only.
3.2 CRAC minutes, 27 January 2014, confirmed as for information only.

3.3 TEC minutes, 25 March 2014, confirmed as for information only.

4. Meetings Committee

4.1 ABN Annual Meeting, Cardiff, 7-9 May 2014

4.1a Medical student & trainee sessions
HM confirmed 70 applicants have applied for the new research workshop.

4.1b GP session
HM confirmed 40 delegates to date.

4.1c Main meeting
HM confirmed Marty Samuels as the Gordon Holmes Lecturer, funded by BMJ rather than Guarantors of BRAIN, Michael Hutchinson as the ABN medallist and Dafydd Thomas as the after dinner speaker. 9 SIGS will have been organised. GL will chair a parallel session on commissioning, followed by a debate on Shape of Training.

**ACTION:** HD to ask Emma Tallantyre to introduce the debate.

4.1d AGM

4.2 ABN/BASP Joint Meeting October 2014
HM confirmed that plans were in development, liaising with Cathie Sudlow and Anthony Pereira of BASP.

4.3 BNA Festival of Neuroscience 2015
This will be in Edinburgh.

4.4 International meetings
HM stated that future plans include Australia and South Africa.

Future ABN venues are Harrogate 2015, Brighton 2016 and possibly Liverpool 2017.

After discussion it was suggested to explore the possibility of making the Autumn meeting a shared meeting with other specialties, e.g. stroke, paediatric neurology etc.

AC suggested a day based around drug development with scientists invited from pharmaceutical companies.

5. ABNT Report

HD reported good progress on the mentoring scheme with 22 mentors and 26 mentees. RCP will provide clinical mentoring training for a training day held at the ABN, half funded by the ABN, half funded by the mentors at the end of June. HD introduced council to the interim trainee website and Twitter feed and asked for suggestions for tweets. An outline for a taster week in neurology is being developed as a follow up to the mentoring programme.

6. CRAC Report

HRM sent a report in his absence. LG reported that the research workshop is on track with 70 plus delegates having registered.

6.1 BNSU
BNSU components of the website are currently being tested and are working well.

7. TEC Report

7.1 Shape of Training

GF reported in RD’s absence on Shape of Training and the dramatic shift in response from the RCP. This will be debated and voted upon at the Annual Meeting.

8. SSC Report

GL raised the issue of follow up patients not being seen as planned because of new patient targets. Sally Percy is going to discuss this with the Neurological Alliance policy to collect patient information. After discussion GL will collect information from Sally Percy and take it to David Bateman. GL updated council that the two week cancer referral that had been taken to David Bateman and was being looked at. Tim Walls is collecting the number of less than full time consultants for the next SSC meeting.

8.1 Specialised commissioning
Next CRG meeting will be 1 May 2014. The five year strategy will be launched in July by each CRG. GL suggested a meeting between David Bateman, Graham Venables, Arlene Wilkie and others to promote collective working.

8.2 ABN Quality Standards
RG reported that David Bateman asked the ABN to create Quality Standards (in place of NICE, who are no longer creating them) that will supplement existing NICE Quality Standards. The MS guidelines are currently outstanding, NS explained that one or more members of the section have been separately contacted and asked to draft Quality Standards, using a very different framework to the ABN, contributing to the delay.

8.3 Commissioning guidelines
GL introduced the interim commissioning toolkit for information and explained an edited version is work in progress.

8.4 Dataset
A neurology dataset was published in March, saying 7% of acute admissions had a neurological problem, there were 1.5 million new patient / outpatient episodes with 25% DNA rate in neurology clinics, 45% of patients only have one outpatient appointment, 10% of people have ten follow ups per year. The data serves as a fairly inaccurate starting point. The ABN and Neurological Alliance will work on tightening the dataset.

8.5 National Clinical Director
David Bateman has been in post for a year and will give an update on his role at the ABN annual meeting.

8.6 Audit Committee
This has previously been discussed.

GF thanked GL for his hard work as SSC Chair over the past 6 years.

9. Honorary Secretary’s Report

9.1 Consultations
RG reported that consultations were all proceeding smoothly and reported a reduction in the number of consultations this year.

9.2 Membership – amendments to rules
All members have been sent proposed rule changes prior to AGM, in order to allow sufficient
time for arising problems. Council was happy with the proposed wording.

9.3 Practical Neurology update
RG reported on the meeting with Janet O’Flaherty. The idea was put forward to co-own
Practical Neurology for 1-2 years, with a view to re-evaluating the relationship at the end of
that period. EB expressed concern that the received contract needed to be clearer in legal
terms, and any ambiguity explained before being signed. LG highlighted an anxiety of the
clause regarding copyright infringement, stating that the BMJ is expert in copyright
infringement, not the ABN, so risk sharing is unfair RG confirmed that the contract will be
revised before presentation at the AGM. Lord Fink confirmed the usual approach is to start with
a general Heads of Terms, for all bodies to read and understand before the contract is written in
detail. A summary document will be included in the delegate bags at the Annual Meeting and
will be discussed at the AGM. It was widely agreed that the ABN will not be in a position for a
final vote at the AGM, EB suggested voting on Heads of Terms, with an electronic vote at a later
stage.

**ACTION:** EB will circulate her notes on the contract to the Executive Committee.

**ACTION:** JL will email delegate bag contents to all membership prior to the meeting.

9.4 Risk Register
RG confirmed this was for information only.

9.5 Register of interests
The Register of Interests was included for information.

9.6 Special interest groups
An application has been received for a neurological infection special interest group, RG asked
for council’s approval which was given.

GF thanked RG for his hard work as Honorary Secretary.

10. Treasurer’s Report

10.1 Annual accounts to December 2013
LG alerted council to the summary sheet of the annual accounts to December 2014 and
reported a total reserve of just over £800,000.

10.2 Budget 2014
LG explained the budget for 2014 and referred to the projection included in the council papers.

10.3 Annual Subscription Rates
LG updated council with the recent executive committee discussion about raising annual
subscription rates. After discussion based on pros and cons for both increasing and not
increasing subscriptions, it was decided not to increase subscription rates this year.

LG reported that Trevor Pickersgill has been elected as Treasurer Elect.

**ACTION:** JS to inform Trevor Pickersgill

11. Items for Discussion:

11.1 Acute Neurology Survey
GF thanked JL for her work on the Acute Neurology Survey. JL explained that we had no
responses for some sites, and duplicate responses for others. JL confirmed this will be used as
a springboard for a future iteration. JL will present the survey at the ABN.

11.2 Fellowship Scheme 2014
GF thanked LG and HRM for their hard work on the Fellowship Scheme. The Scheme will be
launched in Cardiff with a poster at the ABN stand, a page in the programme and donation
forms will be available. Members will also be encouraged to donate via the website and with
their annual subscription direct debit notices in June. A letter has been drafted to Medical Directors of Pharma companies and will be sent soon.

**ACTION: JS to ask council for names of Medical Directors**

11.3 ABN Strategy – update
GF introduced the strategy document and confirmed we are meeting our strategic aims.

11.4 ABN website
JL confirmed we are in the final stages of adding website content. JL explained we have three levels of data; public, ABN member and committee member. The website is fully responsive on mobile devices. MR suggested a ‘how to donate’ button, this could be included in a future update.

11.5 Twitter and social media
The ABN office has taken control of ABN tweets. JL urged members of council to contact the office with appropriate news to tweet.

11.6 Update of Year of the Brain
The Year of the Brain logo will be present on the Cardiff brochure.

12. **Any other business**
12.1 GL stated that the young adult and adolescent group run by the RCP is looking for a trainee representative.

**ACTION: GL to forward the email to HD.**

12.2 NS reported that Professor Richard Langton-Hewer passed away.
Minutes (unconfirmed) of the Council meeting held on Wednesday 17 September 2014 at Ormond House, 27 Boswell Street, London WC1N 3JZ

Those present: Dr GN Fuller (President, Chair), Professor PEM Smith (President Elect), Professor K Talbot (Honorary Secretary), Professor D Burn (Honorary Assistant Secretary), Professor L Ginsberg (Honorary Treasurer), Dr T Pickersgill (Honorary Treasurer Elect), Dr E Tallantyre (ABNT rep), Dr R Gregory (Chair SSC), Dr R Davenport (Chair TEC), Professor NJ Scolding, Dr William Gibb, Dr Paul Worth, Dr Alasdair Coles, Josie Shew (ABN), Joanne Lawrence (ABN)

Lord Stanley Fink (lay trustee) joined the meeting at 11.30.
Elisabeth Baltay (lay trustee) joined the meeting at 11.30.

1. Apologies for Absence

Professor M Reilly
Professor A Goddard
Dr R Butterworth
Dr W Rajowicz

2. Minutes of the Council meeting 16.4.14

The following corrections were noted:
Change ‘medical training industry’ to ‘medical training initiative’
Change ‘run by college to ‘co-ordinated by college’
Item 8. Add ‘policy group’, remove ‘that’.
9.3 Practical neurology, change ‘co-own’ to ‘moving towards co-running’.

3. Standing items

3.1 Draft minutes, Annual General Meeting 8.5.14
The following corrections were noted:
Change ‘Glasgow’ to ‘Cardiff’.
Item 9. Change spelling of Frakoviak

4. Meetings Committee (oral update)

4.1 ABN/BASP Joint Meeting October 2014
Delegate registrations for the ABN/BASP Meeting in Stratford stand at 213 with 21 GPs registered for the GP session. It was noted we are running below projected costs which had been on the pessimistic side to ensure the meeting partners were aware of potential costs and risks.
4.2 Harrogate 2015

The ABN annual meeting will be on 20-22 May 2015 at Harrogate International Centre. DB updated council with the discussions at the Meetings Committee.

ACTION: DB to change ‘Hannah’ to ‘Hanna’, change ‘Alan’ to ‘Allan’
ACTION: DB to find a space for a Practical Neurology launch
ACTION: DB to reserve one parallel session for audit and revalidation
ACTION: Office to email programme to council for suggestions for a range of topics and suggestions of speakers (gender and geographical balance)
ACTION: DB and Meetings Committee to explore after dinner entertainment

4.3 BNA Festival of Neuroscience 2015
The ABN is a partner at the BNA Neuroscience Festival on 12-15 April 2015.

4.4 AUTUMN Meeting 2015 tba

DB suggested a single day in London at the Institute of Education, as discussed at the Meetings Committee.
The ABN Medallist longlist was discussed at this point. Bill Gibb (WG) and many other members of council spoke strongly in favour of Andrew Lees. After discussion the decision was made to award the ABN medal to Andrew Lees in 2015. Other highly recommended names were noted for 2016 shortlist.

It was proposed to introduce an ABN lecture by a distinguished neurologist at ABN Autumn meetings as an additional opportunity to recognise and honour the contributions made to neurology by individuals.

5. ABNT Report

Emma Tallantyre (ET) noted the Shape of Training as a particular concern to be discussed later on the agenda.

5.1 Mentoring
Following the mentoring skills workshop, 41 mentors / mentees have made contact, the majority of which are Registrars and Foundation year 1 doctors respectively.

ABNT is conducting a trainee survey, partly as a census, partly looking at career plans and local access to training.

6. CRAC Report

6.1 BNSU
There are eight conditions currently being studied. Kevin Talbot (KT) suggested producing figures for the BNSU for inclusion in monthly newsletter.

ACTION: Josie Shew (JS) to add BNSU figures to newsletter and website.

6.2 Fellowships scheme
Huw Morris (HRM) updated council with the timeline; closing date for applications, mid December, interview dates in March 2015. We are awaiting contact from Guarantors of BRAIN, Patrick Berthoud Trust have agreed to participate in the 2014/15 fellowship process. Lord Fink has agreed to host a fundraising event at his penthouse in St. Pancras in March 2015.

ACTION: JS to liaise with HRM and send fellowship email to targeted academic departments.

7. TEC Report

7.1 Shape of Training
ET updated council that a steering group has been set up for implementation of Shape of Training, including 6 workstreams, each holding a workshop in September. Shona Scott represented the ABNT at a workshop in Edinburgh and reported that the proposal is 6 broad based training schemes; medical, surgical, psychiatry, women and children, anaesthesia and ITU, diagnostic. To become a neurologist, one would follow the medical training scheme; foundation training, 4-6 years of training, 5 of which are general medicine, 1 of neurology. An ABNT rep will attend the workshop in Wales.

ACTION: GF to broaden discussion of Shape of Training, including national press and the Neurological Alliance
ACTION: GF to create a one page position statement
ACTION: GF to check the situation with other specialties

7.2 Health Education England Update
GF, RB and RG attended a meeting and argued the need for more neurologists in the UK.

7.3 Undergraduate Document
RD asked council to read the document and feedback with any comments.

ACTION: RJD to continue editing of undergraduate document with ultimate goal of GMC support
8. **SSC Report**

ARC and SSC meetings will continue to take place the day before council.

8.1 **SSC Meeting 16 Sept 2014 (oral update)**
The Commissioning Toolkit is under discussion. The Generic Quality Standards have been published on the ABN website.

8.2 **Audit and Revalidation 16 Sept 2014 (oral update)**
ARC is chaired by Nick Silver, incorporating audit, revalidation and guidelines. Peter Enevoldson may be asked to be the revalidation advisor to ARC. Nick Silver had suggested at the ARC meeting that the ABN produce ‘guidance’ as opposed to ‘guidelines’, that may not need to meet NICE’s accreditation criteria. It was agreed that this requires further discussion. GF suggested we try to attain NICE accreditation in order to have the optionality to use the NICE kitemark.

9. **Honorary Secretary’s Report**

9.1 **Handover**
KT has assumed the role of Honorary Secretary from Hadi Manji.

9.2 **Sections and Special Interest Groups**
KT proposed a meeting of Heads of Sections in January 2015.

**ACTION:** KT to improve engagement with meeting of section chairs

9.3 **Risk Register**
Joanne Lawrence (JL) took council through the risk register, a number of obsolete risk were removed (relating mainly to office staffing issues) and introduced the fellowship fund as a risk.

9.4 **Consultations**
KT confirmed that there is a lower level of consultations.

10. **Treasurer’s Report**

10.1 **Budget and draft Management Accounts to June 2014**
LG took council through the budget and draft management accounts. Our total expenditure is projected to be just under the total income figure.

**ACTION:** JL to follow up with other societies re pharma sponsorship

10.2 **Financial report from the Cardiff Meeting**
LG confirmed a surplus of approx. £34k.

10.3 **Fellowship fund**
LG confirmed the fellowship fund is a separate amount that cannot be used to offset ABN expenditure. JL confirmed that the ABN is receiving donations from members but we need to make it easier for members to donate.
The Fellowship fundraising event was discussed and Lord Fink proposed a suitable running order for the event. Prompt follow up with thanks and information about the fund to be sent immediately post event.

**ACTION:** The office to create a rolling banner of previous fellows
**ACTION:** GF/JL to follow up with EB/SF for templates for thank you letters

11. **Items for Discussion**

11.1 **Practical Neurology update**
GF and PS left the room for this discussion. Council discussed the benefits of co-owning Practical Neurology and negotiations will continue.

11.2 ABN Strategy – development
GF reviewed an updated summary of actions taken in support of the ABN Strategy.

11.3 Honours – ABN process for nominating National and RCP awards + ABN Medallist
It was agreed that a mechanism for ABN nominations for national and RCP awards should be drafted and agreed.

**ACTION:** Executive Committee to create a mechanism for Honours

11.4 Acute Neurology Survey
GF updated council with a summary of the Acute Neurology Survey.

**ACTION:** GF/JL to send a copy of acute neurology survey to health spokespersons of various political parties

GF summarised Shape of Training and asked Lord Fink’s advice regarding how best to advance the ABN’s concerns in parliament.

**ACTION:** SF to find names of Lords etc. for Shape of Training question in House of Lords

**ACTION:** GF/JL: Freedom of information request, information re shape of training meetings

11.5 ABN Executive Committee and Office
GF confirmed that the Executive Committee continues to meet once a week.

11.6 Dates of 2015/16 Meetings
21 January 2015, 22 April 2015, 23 September 2015, and 20 January 2016 were put forward as potential dates for future council meetings.*

12. Any Other Business
PW explained BRING is being rebranded to ABN Movement Disorders Special Interest Group, and asked if they can use the ABN logo. This was agreed but with the proviso that all external communications go through the ABN office, in accordance with the ABN communication guidelines.

*Subsequently altered to and agreed as 21 January, 29 April, 9 September 2015 and 20 January 2016*
Minutes (unconfirmed) of the Council meeting held on Wednesday 21 January 2015 at Ormond House, 27 Boswell Street, London WC1N 3JZ

Those present: Dr GN Fuller (President, Chair), Professor PEM Smith (President Elect), Professor K Talbot (Honorary Secretary), Professor D Burn (Honorary Assistant Secretary), Professor L Ginsberg (Honorary Treasurer), Dr T Pickersgill (Honorary Treasurer Elect), Dr H Devine (Chair ABNT), Dr R Gregory (Chair SSC), Dr R Davenport (Chair TEC), Professor NJ Scolding, Dr William Gibb, Dr Paul Worth, Dr Alasdair Coles, Josie Shew (ABN), Joanne Lawrence (ABN)
Elisabeth Baltay (ABN trustee) joined the meeting at 11:30

1. Apologies for absence
Professor M Reilly
Lord S Fink
Professor A Goddard

2. Minutes of the Council Meeting 17.9.14
The following corrections were noted:
Page 1: Rakowicz incorrect spelling
10.3 add discussion about trialling ‘opt out’

3. Matters arising
All dealt with in subsequent agenda items

4. Standing Items [for information]
4.1. SSC Meeting 16 Sept 2014
4.2. Audit and Revalidation 16 Sept 2014
4.3. CRAC teleconference minutes 6 October 2014
4.4. JCNC minutes

5. Meetings Committee
5.1. Harrogate 2015:
Speakers: All speakers are confirmed for ABN 2015. The medallist will be Andrew Lees, with Bill Gibb giving the citation. There will be a session for Foundation Year doctors and medical students on Tuesday 19 May.
ACTION: HD to confirm case based discussion session with Emma Tallantyre at 4pm will be in the main lecture theatre and will be a shared session

Gala dinner: There will be no after dinner speaker, but after dinner entertainment was discussed.
ACTION: ABN office to contact appropriate people

Practical Neurology: Time to be made available for Practical Neurology launch, ideally near AGM.

Symposia: There are 5 symposia, 3 of which are MS companies, 2 on Wednesday, 2 on Thursday and 1 Friday.

SIG/Affiliated Societies: There will be Special Interest Groups / Affiliated Societies sessions on Thursday morning, Thursday afternoon and Friday morning, running in parallel.

Posters: There will be a parallel session on Friday lunchtime, with presentations of 6 posters with a certificate awarded to the top 20 posters.

5.2. London 2015
10 September 9:30 to 5:30. Most speakers have confirmed. The ABN Autumn lecture will be given by Clare Fowler with a citation from Neil Quinn.

5.3. Brighton 2016
A ‘Circle of life’ / ‘7 ages of man’ theme was suggested and received well. DB asked council to think of possible lecturers to fit with the theme.
5.4. Future meetings
JL and DM will attend site visit in Liverpool on Friday 23rd January for ABN 2017; JS will answer phones remotely using new VOIP system.

Future strategy was discussed, including the need to establish an international profile. It was decided to have a autumn meeting in the UK; however, we will continue to seek out international opportunities and will deal with them on an ad hoc basis. NS suggested including Ireland in our rotation of sites.

Joint meetings with other groups such as surgeons, paediatrics were discussed.

It was agreed that the 2015 medallist lecture should be podcasted.

**ACTION: JL to ask Affinity to seek venues in Dublin and Belfast for 2019 / 2020**

6. CRAC Report
6.1. BNSU: ‘Hereditary Hyperekplexia and glycine-receptor antibody positive disease’ has recently been added to the study. HRM reported that the website is working well. Some emails are not being delivered due to incorrect email addresses on the ABN database.

**ACTION: JL to add email address update to letter with ballot mailing**

6.2. Fellowship Scheme 2014/15:
13 applications have been received for 3 fellowships, including a span of the whole country and a good range of conditions. JS sent each application to 6 reviewers and will collate first week in February.

**ACTION: JS to chase reviewers end of January**

CRAC members, members of Guarantors of Brain and Patrick Berthoud Trust will shortlist the applications. There will be 6 interviews, 30 minutes each.

**ACTION: HRM to find out fellowship decision date of MRC before deciding on interview date**

HRM suggested a panel of: HRM, GF, 2 CRAC or Council reps, 1 from ABNT, GOB PBT and a lay panellist.

**ACTION: JS to add other fellowships question to form for 2015**
**ACTION: HRM to explore if MRC would share reviews**
**ACTION: JS to ensure that 2016 schedule includes an earlier deadline with a bigger window for reviews**

HRM has written a formal application to Novartis for support, £15,000 per year for 3 years, currently under review. JL reported a similar scale for Biogen who wish to be totally transparent.

**ACTION: HRM to write to all charities again in February after all reviews received**

7. TEC Report

7.1. Shape of Training: ABNT has contributed to a statement along with 14 other training groups. GF drafted first version of consensus document; RCP sent letters to ministers and has written with other Royal Colleges. GF confirmed the ABN needs to react to this in a forthright way.

7.2. Undergraduate Document: The Undergraduate Document, presented at council in September, is being finalised and RJD expects to present to council in April in preparation for the launch in May at the Annual meeting.

7.3. Self assessment: RJD aims to have this live on the website prior to formal launch at the Harrogate meeting.

**ACTION: JL to liaise with HRM and RG re posters on stand**

7.4. Undergraduate prize has a number of submissions ahead of its deadline of 31st January.

7.5. RB noted that Australasian fellow interview will take place before mid April. ABNT survey 2012 indicated 50% of trainees would be interested in Australasian fellowship however we have only 6 applicants per year. Feedback about fellows from ANZAN is very positive.
8. **ABNT Report**

8.1. Communications: HD reported that the mentoring programme is progressing well with 41 pairs of mentors / mentees. ABNT now has 200 followers on Twitter with people using the hashtag neurogems and tweeting regularly.

9. **SSC Report**


9.2. Two week cancer waits: KT has formulated a response to the NICE consultation.

9.3. Revalidation: Peter Enevoldson is the revalidation advisor to the ABN. RG will canvas for another ABN rep for audit. Peter Enevoldson attended a meeting with the cancer tzar to try and advise on outcome measures that might be used.

9.4. ABN guidelines: Council had decided in Sept 2014 that there should be further discussion about whether to differentiate between guidelines and guidance. It was agreed that there should be clarity of definition between, for example, ABN guidelines and SCN recommendation. NICE had confirmed to PW that an ABN application for accreditation would be welcome, a positive start. NS expressed strong concern about the implications of NICE accreditation particularly that the ABN might find itself answerable to NICE. DB agreed with NS, expressing concern about potential legal implications. EB suggested a year’s trial. PW proposed to establish and chair a guideline section responsible for administering, reviewing and commissioning guidelines from other ABN sections.

10. **Honorary Secretary’s Report**

10.1. Sections and Special Interest Groups

Sections will be up for renewal in summer 2015. The meeting of section heads was active and lively with lots of enthusiasm. Council will be asked to approve section heads. There will be a face to face meeting at the annual meeting every year and sections will send suggestions for annual meeting topics to meetings committee.

**ACTION: Office to change ‘section’ to ‘advisory group’, to avoid confusion**

10.2. Risk Register: Presented for information, no change

10.3. Consultations: Presented for information, no change

11. **Treasurer’s Report**

11.1. Draft Management Accounts to December 2014: LG thanked JL and DM for their hard work. The accounts will be confirmed after the auditors have completed their work. LG reported increased income due to improvements in subscription management and to the Brain subletting agreement.

11.2. Draft Budget: Initial figures presented, ahead of presentation of the final budget at the AGM.

11.3. Fellowship fund: Fund currently stands at £17k. Fellowship fundraising event is scheduled for 5th March. It was discussed whether membership donations should be made opt out as part of subscriptions process. To be discussed further at April council meeting.

11.4. Staff salaries: JL and JS left the meeting for this discussion.

12. **Items for Discussion:**

12.1. Practical Neurology update: PS and GF left the meeting for this discussion and RG took over as chair.
Negotiations proceeding with BMJ. EB is positive that discussions are going well and is hopeful for an agreed contract before the meeting in May.

**ACTION: JL to organise teleconference between JL, EB, LG and RG in the next week**

GF and PS re-joined the meeting at this point and GF resumed the role of chair.

12.2. ABN Clinical Research Training Fellowship: 13 applications have been received. HRM and JS have organised reviews and the assessment process will be throughout March to coincide with Wellcome and MRC fellowships.

12.2.a. Fellowship applications: A pleasing array of applications has been received.

12.2.b. Fellowship fundraising event: HRM approached pharma and has received positive responses. Medtronic declined with regret and thanks.

**ACTION: JL to provide update to Stanley Fink and council**

JL encouraged council to suggest further potential attendees. GF suggested a message in the newsletter asking people with an interest in fundraising to step forward. JL suggested using LinkedIn to look for a fundraiser. NS suggested adding it to the stand in Harrogate.

12.2.c. Media: The Acute Neurology report was launched December 2014 and sent to press and political contacts.

12.3. Honours update: KT recommended a small honours committee, comprising the President, Executive Director, the secretary, a lay member and an ABN member with an honour, to meet once in year in timing with the national honours process. It was agreed the ABN should be proactive using newsletter and website to encourage members to nominate their peers.

12.4. ABN Strategy – development: Joint meetings and our interactions abroad will be revisited at the next council meeting.

12.5. Any Other Business: The meeting closed with no other business.
APPENDIX 2

ABN HONORARY MEMBERS (25)

Sir Roger Bannister
Professor Roger Boyle CBE
Dr Aelwyn Davies-Jones
Professor Alan Emery
Dr Richard Godwin-Austen
Dr Jeffrey Graham
Professor Peter Harper
Professor Michael Harrison
Professor James Heron
Mr James Kinnier Wilson
Dr Jonathan Miller

Dr Pauline Monro
Professor David Parkes
Professor Mark Rees
Dr Ralph Ross Russell
Professor David Shaw
Dr Sheldon
Dr John Spalding
Dr Gerald Stern
Professor Raymond Tallis
Mrs Susan Tann
Dr John Walsh
Lord John Walton of Detchant
Professor Simon Wessely

ABN HONORARY FOREIGN MEMBERS (50)

Professor Johan Aarli
Professor Yves Agid
Dr Art Asbury
Professor Henry Barnett Emeritus
Professor Sam Berkovic
Professor Bharucha
Professor Marie-Germaine Bousser
Professor Thomas Brandt
Professor Jagjit Chopra
Professor Geoff Donnan
Professor Mervyn Eadie
Dr Joseph Foley
Professor Freund
Professor Vivian Fritz
Professor Ranjani Gamage
Professor Glaser
Professor Saman Gunatilake
Dr Tsu-Pei Hung
Professor Richard Johnson
Professor Jun Kimura
Professor James Lance
Professor John Leigh
Professor Richard Lindley
Dr Mazziotta
Professor McLeod
Dr Millikan

Professor Jes Olesen
Dr Peiris
Professor Paolo Pinelli
Professor John Pollard
Dr Jerome Posner
Professor William Pryse-Phillips
Professor Marcus Raichle
Dr Udaya Kumara Ranawaka
Dr Mohamed Thowfeek Mohamed Riffsy
Professor Allen Roses
Dr Lewis Rowland
Dr Oliver Sacks
Professor Gerard Said
Professor Georges Serratrice
Professor Bhim Singhal
Professor Tolosa
Dr James Toole
Professor Ole-Bjorn Tysnes
Professor Jan van Gijn
Professor Athasit Vejjajiva
Dr Nashir Wadia
Professor Stephen Waxman
Professor Peter Whitehouse
Professor Shirley Wray
## APPENDIX 3

### ABN SECTIONS

Members interested in becoming involved in the work of ABN sections should contact the section chair either directly or via the ABN office (info@theabn.org)

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<thead>
<tr>
<th>Section</th>
<th>Chair</th>
<th>Location</th>
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<tbody>
<tr>
<td>Acute Neurology</td>
<td>Ed Dunn</td>
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<td></td>
<td>Dominic Paviour</td>
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