



Meeting of the AXREM Executive Committee		
Held at:	Rotherwick House, 3 Thomas More Street, London, E1W 1YZ	
Date:	Wednesday 20 th June 2018	
Time:	11:00am – 14:00pm	
Chairperson:	Peter Harrison	
Draft Minutes Issue Date:	23 rd July 2018	
Confirmed Minutes Issue Date:	26 th October 2018	Signature:

PRESENT:	
Name	Company
Peter Harrison - Chairman	Siemens
Karen Middlehurst	Agfa
Steve Kennedy	Bracco
Ila Dobson	GE
Ian Graves	Philips
John Victor	Carestream
David Wilkins	Siemens
Rick Cumberbatch	Xograph
Alan Birks - Secretary	AXREM
Teleconference attendees for Item 6	
Charles McCaffrey	Carestream
Jane Rendall	Sectra
Jessica Baldry	Soliton IT
Mark Edwards	Med Imaging
Apologies were received from the following Executive Member Companies:	
Canon	
Elekta	
FujiFilm	
Med Imaging	
Varian	

0 Competition Law Guidance

Copies of the AXREM Guide to Competition Law were available for member's reference. This guide gives a do's and do not's and is designed to help members understand the legal obligations, related to European and UK Competition Law. More detailed information on the subject is available in two documents published by the Office of Fair Trading (OFT) and both are available to members on request or on www.offt.gov.uk.

1 Apologies were received from the following:

See details on front page of the minutes.

2 Minutes

The Minutes from the previous meeting held on 19th March 2018 were accepted as a true record. In line with the constitution these minutes will be made available to all AXREM members.

3 Actions from the previous Minutes

3.1 Code of Conduct

In line with the updated COCIR Code of Conduct the Secretary had circulated prior to the meeting an updated draft for consideration and this was for discussion in Item 6

3.2 LSI Credentialing Registration

The Secretary has made contact with a couple of members to coordinate registration process and discussions with other members are planned in the months ahead.

3.3 MedTechScan (HealthTech Connect)

Members were requested to contact DS/SW at NICE to get involved in company testing of the HealthTech Connect project and the secretary advised that this has taken place.

3.4 Forward Operating Model

A Joint meeting of DH&SC / DHL / Akeso took place on Wednesday 6th June at the offices of DHSC, Skipton House and was attended by Peter Harrison, Grant Witheridge, Ila Dobson, Ian Graves and Alan Birks on behalf of AXREM.

3.5 Arrangements have been made for Chris Woodgate ISAS Officer RCR & SCoR to attend the PACS RIS SFG in July on the back of the UKRCO2018 event.

4 Credentialing

The Secretary explained that the LSI Credentialing Register is now fully up and running and that by request he had introduced a number of member companies to the registry administration team in order to progress their employee registrations. The Secretary

would welcome further introduction requests and will be contacting members to progress this.

Action: Secretary to contact members and coordinate LSI Credentialing registration process **AB**

5 Feedback Forums and Bodies AXREM participates in

5.1 NICE

The Secretary advised that there had been no recent NICE/Industry meetings to report upon although there have been a number of HealthTech Connect Project User Group meetings held this year. Details of the progress made on this project are covered in Item 7 below.

5.2 Medical Supplier Board

A Medical supplier Board meeting was held on 14th June 2018 wherein it was confirmed that Alan Wain, who formally works for the Cabinet Office, has been appointed the interim CEO for Supply Chain Coordination Ltd (SCCL) which was previously referred to as the Intelligent Client Coordinator (ICC). It is likely that Alan will be in this post for the next two years.

Alan provided an update now that the first six Category Tower Service Providers and SCCL, the Management Function of the new NHS Supply Chain have been set up.

There followed three presentations from the new Category Tower owners covering CT's 1 & 3, CT's 2,4 & 5 and CT 6.

Jo Gander who works for the Clinical and Procurement Assurance (CaPA) team provided an overview of the CaPA vision and function, which looks to ensure that the voice of the patient is informing procurement and that the safety, health and care agendas are met.

CaPA are looking to create an early warning system that will ensure there is pre-emptive action regarding product performance in the market place, to avoid "never events", compromises to patient safety and safeguarding against product related problems that should be intercepted before reaching the end user.

Questions were raised regarding funding for innovation and where the benefit is felt. Alan Wain, emphasised that the budget question is key, but is being recognised as an issue. There are moves to identify where the alignment of budgets could facilitate these savings and that shared budgets were a work in progress. This is a matter that affects us particularly when Capital Equipment expenditure is being considered.

For further information the minutes of the Medical Supplier Board meeting are shown in Appendix 1.

5.3 MHRA / MDILG

The Secretary advised that the Medical Devices Industry Liaison Group (MDILG) had met on 26th April 2018 and a copy of the minutes from this meeting is shown in Appendix 2.

5.4 The UK MedTech Forum

The Secretary reported that the UK MedTech Forum met on 12th June 2018 and focussed mainly on the progress of the LSI Credentialing Register, MD/IVD Regulations implementation, Brexit and NHS Procurement.

A copy of the minutes of the UK MedTech Forum is available in Appendix 3.

A number of the other items discussed at the Forum are subjects of these minutes.

5.5 Department of Health

This item is covered in Item 8

5.6 NHS Improvement

The provision of minutes and information from the National Imaging Optimisation Board is embargoed but the Chairman did briefly report that the NHSI 2017/18 data collection process should be complete by end June 2018 after which the data would have a clinical health check before release. The Chairman advised also that he had made the members of the NIOB aware of our market statistics findings (see Item 9) as a matter of concern.

6 AXREM Code of Conduct

At this point in the meeting a teleconference was opened for AXREM members wishing to discuss and contribute on the discussion regarding the AXREM Code of Conduct.

6.1 Proposed Amendments based on COCIR

The Secretary had previously circulated a draft update to the AXREM Code of Conduct taking into account the changes introduced in the COCIR CoC. The latest changes made by COCIR have been prompted by the decision of COCIR members to end direct sponsorship. This means they will no longer cover the registration fees, travel or lodging costs for individual healthcare professionals attending conferences organised by third parties. These changes to the COCIR CoC will be effective from 1st January 2019 and it was proposed and agreed that an amended AXREM version would take effect at the same time.

Whilst a number of the members were happy with the proposed amendment drafted by the Secretary a more formal agreement is requested before the changes are adopted. This will be an agenda item in the next Executive Committee meeting

Action: Secretary to include AXREM CoC proposed changes in agenda for next meeting

AB

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6.2 Compliance with the AXREM Code of Conduct

As participants in an industry largely funded from public funds, AXREM members recognise that adherence to the highest levels of integrity and ethical standards and compliance with all industry and procurement laws are critical and essential for the conduct of business.

Members welcome the guidance provided to Health Service staff by the Department of Health and the Common Service Agencies for Scotland, Wales and Northern Ireland in their Standards of Business Conduct for NHS Staff. Members also fully endorse the Code of Conduct issued by COCIR, the European umbrella trade association for the industry.

The AXREM Code of Conduct provides procedural guidelines to cater for potential users, procurement officers or their scientific and technical advisers, to visit working installations of innovative equipment for the purpose of assessing, testing or forming subjective opinions on the suitability of the equipment to meet clinical needs.

These guidelines detail that the number of visitors funded by members will not exceed three (per procured system) unless the equipment is radiotherapy equipment where this could be increased to four to accommodate an engineering presence.

For modality Capital Equipment the above guidelines have served the industry well but for IT Solutions over multiple sites there is a need to cater for an increased number of different departmental specialists. This issue was recently evident in a procurement in which the tender documents implied that all costs for supplier visits be covered by the supplier. As a result of this procurement exercise and the likelihood of similar procurements in the future, AXREM agreed to discuss whether the current Code of Conduct was appropriate or required changes to cater for IT Solutions over multiple sites

During the discussion that ensued a number of points were aired as follows:

- A simple PACS procurement could involve a number of specialists including the Imaging Manager, Radiology Specialist, IT specialist, Project Manager and Radiology Administrator
- Describing a PACS procurement is difficult because it is not tangible like a modality procurement
- IT Solution procurements are getting bigger
- Should our CoC cater for single site procurements and multi site procurements
- Should we check the 'average' number of people that attend a site visit
- Should we have an exception approach to the number of visitors which could be arbitrated by AXREM beforehand
- Is our CoC looking to cover 'ethical business practice' or be a method of controlling cost – it was agreed that both were of significant importance
- What about non AXREM competitors covering the costs of more people
- No point having a CoC if it is not complied with

The consensus was that a PACS procurement needs to be treated differently and that there should be specific guidance in the CoC which differentiates between modality and IT procurements.

The current CoC serves modality procurement well and specifies the number of funded visitors taking account the need for an additional person when radiotherapy equipment is involved, i.e. 3 / 4 funded visitors. It was proposed that a similar approach could be included for IT solutions in which 6 / 7 people could be funded.

The number of 6 / 7 was an acceptance that the following personnel would want to be involved in the procurement process:

- Radiology Manager
- PACS Manager
- IT Manager
- Radiology Services Manager
- Procurement
- Clinician
- AN Other

In both modality and IT procurements more visitors would be allowed but the funding for the additional visitors would be the responsibility of the customer.

It was agreed that this issue be revisited but in the meantime the Secretary was requested to draft a suitable note for inclusion into the CoC based on the above and circulate for comment.

Action: Secretary to draft a note for inclusion into the CoC to cater for funded visitors during IT Solution procurements **AB**

7 NICE

7.1 HealthTech Connect Project Progress

The Secretary advised that he was continuing to work on the HealthTech Connect User Group, which was progressing well towards its launch in October this year.

Following the attendance of David Sissling and Sheryl Warttig at the Executive Committee in March, further company testing has been undertaken and the User Group has designed and undertaken a questionnaire regarding the security/confidentiality issues regarding the HealthTech Connect process and the feedback has been used to develop draft User and Accessor agreements.

8 Department of Health

8.1 Procurement Transformation Programme

Following the separate meetings that AXREM have had with both DHL and Akeso the Secretary was tasked at the last Executive Committee meeting to set up a joint DH&SC / AXREM / DHL / AKESO meeting and this took place on 6th June 2018 at the DH&SC offices in Skipton House.

The meeting covered agreed items including the coordination of procurement through Towers 7 & 8, alignment of Terms & Conditions, the pricing model and the running of service and maintenance contracts.

It was agreed that the meeting was useful for all parties and that a follow up meeting be arranged during the transition period.

Notes from the meeting are included in Appendix 4

Action: Secretary to set up follow up meeting with DH&SC / AXREM / DHL / Akeso **AB**

9 Market Statistics

9.1 Radiology Market Statistics

Following the publication of the Radiology statistics at the end of Quarter 1 an analysis showed that the overall UK radiology equipment market spend for the six months to the end of March 2018 is down by around 30% compared to the same period in the previous year. Further analysis showed that the decline was not a one off seasonal factor but part of a continual decline over the last few years.

9.2 Resulting Paper Reporting the Market Statistics

Based on the evidence provided by the Radiology market statistics a paper entitled '*Concerning Fall in UK Radiology Equipment Spend*' was drafted and issued to our press contacts and industry partners.

The paper is on the AXREM website, has been tweeted on @_AXREM, and can be found in Appendix 5.

10 Specialist Focus Groups

10.1 Service Managers SFG

The Service Managers SFG met on 8th May 2018 during which we welcomed Ruby Fong the Chair of the SRP Medical Committee, to discuss the design and content of the Ionising Radiation Equipment Handover form which was in need of update following the changes to the Ionising Radiation Regulations. Following a lengthy debate about the content of the Handover document we finally concluded on an agreed set of mutually acceptable amendments for the different sections.

10.2 PACS/RIS SFG

Nothing to report but the next meeting will be held on the evening of 2nd July on the back of UKRCO2018.

12.3 Marketing SFG

Nothing to report but the team is available to assist the Secretary as required.

10.4 Radiotherapy SFG

The Secretary reported that on 25th April members of the Radiotherapy SFG attended an all-party round table discussion, on the benefits of Radiotherapy treatment chaired by Tim Farron, MP. Following the meeting the SFG produced an AXREM

paper, which was submitted to TF who has subsequently produced a Radiotherapy manifesto for England.

This is the first topic for some time that has galvanised the Radiotherapy SFG to work together in promoting the benefits of Radiotherapy under an AXREM banner and on the back of this they have agreed to meet again to discuss further lobbying initiatives.

10.5 Ultrasound SFG

Nothing to report

11 UKRC 2018

Plans for 2018 including the AXREM Dinner are complete although a lower number of tables have been sold this year compared to 2017.

The Chairman reported that RCR have withdrawn from the event since they were unable to run their own subject stream.

It was agreed that the organisers be invited to our next Executive Committee meeting to receive our feedback on the event.

12 Any Matters Arising

Following the concern expressed regarding the Radiology market statistics the Secretary was asked to monitor the trend following the publication of the next quarter (end June) results.

Action: Secretary to monitor trend in Radiology market statistics

AB

13 Date and Location of Future Meetings

The Secretary advised that the meeting is scheduled for 27th September but this is not suitable for a number of members so it was suggested we put out a doodle poll to set a date for the next meeting some time in October.

Action: Secretary to put out doodle poll for date of next meeting

AB

Summary of Actions

- Action:** Secretary to contact members and coordinate LSI Credentialing registration process **AB**
- Action:** Secretary to include AXREM CoC proposed changes in agenda for next meeting **AB**
- Action:** Secretary to draft a note for inclusion into the CoC to cater for funded visitors during IT Solution procurements **AB**
- Action:** Secretary to set up follow up meeting with DH&SC / AXREM / DHL / Akeso **AB**
- Action:** Secretary to monitor trend in Radiology market statistics **AB**
- Action:** Secretary to put out doodle poll for date of next meeting **AB**

Appendices

Appendix 1 - Minutes of the Medical Supplier Board 14th June 2018

Appendix 2 - Minutes of Medical Devices Industry Liaison Group meeting 26th April 2018

Appendix 3 - Minutes of the UK MedTech Forum 12th June 2018

Appendix 4 - AB Notes from the joint meeting DH&SC / AXREM / DHL / AKESO meeting 6th June 2018

Appendix 5 - AXREM Paper: Concerning Fall in UK Radiology Equipment Spend

Copies of all the Appendices detailed above can be found using the following Dropbox link:

<https://www.dropbox.com/sh/shkgzubxo5swovx/AADfkaevet78JI3A3elsVaj4a?dl=0>