



## Minutes ICS Fistula Committee Meeting Minutes

Monday 20th October 2014,

Venue: SulAmérica Convention Centre

(Room D 1200-1400)

**In Attendance:** Sohier Elneil (Chair) (SE), Chris Payne (CP), Gill Brook (GB), Jacqueline Cahill (JC), Abubakr Elmardi (AEM), Jacques Corcos (JC2)

**Apologies:** Hassan Shaker, Ahmed Saafan, Daa Rizk, Ervin Kocjancic, Jenny Ellis (JE)

**Sitting in:** Elise De (ED)

1. Committee Picture
  - a. Performed
2. Welcome new members and thank old members who have left
  - a. Abubakr El Mardi welcomed to the committee
  - b. Sherif Mourad thanked for his contribution
3. Approval of Barcelona and February Teleconference Committee minutes
  - a. 1st Gill Brook 2<sup>nd</sup> Jacquie Cahill
4. Terms of Office & Terms of Reference review
  - a. All committee happy with TOR provided by ICS
5. Outstanding actions dealt with:

### **Videos and Fact Sheets**

*JE To work on the wording of the email for the fistula video mail out with SE and ED*

*ED 5 films available on the microsite and more coming in the next few months. SE and GB will make some films in Bristol in December/January 2015 to help complete the film profile. SE thanked ED for all her hard work and her support with collaboration with the Education Committee*

**Action SE, JC, GB and ED (EK) to work collaboratively**

### **International Work and Collaboration**

*JC2: Feels that working in the international arena would not be helpful*

*SE suggested that the focus for 2015 can be on fistula videos and factsheets;*

*He also requested that SE to provide details of the Fistula meeting in Dar-es-Salaam to the Trustees*

**Action SE will provide the report**

He also said that ICS does not have money for most projects, but suggested that ICS could build its own institution in sub-Saharan Africa, if money could be retrieved from an external source JC2 also stated that there should be a minimum set of requirements for any centre; define a project for building a centre of excellence for work and ICS will deliver the manpower.

**Action SE will look into it**

(Already put to various agencies, but none happy to support such a project but would be keen to include ICS professional support in Fistula Work in the Developing World).

SE stated that we need to identify the need in the developing world, and for ICS to recognize its 'unique role'.

CP Suggests that international work needs to incorporate ICS work

To make a criteria list of 'What is a centre of excellence for ICS involvement?' To guide on the need for modern anaesthesia, registered nurses, physio, blood banking, etc.

We need to ask for 'surgeons from Africa to access us' not 'for us to access them'

We need to reconsider zonal work and develop better defined projects per region.

**Action CP to help develop criteria for standards of excellence with other committee members**

AEM There should be standards of excellence for care delivery provided by ICS

Problem of selecting which hospitals should be the best to work with, but committee members could look into it.

We also need to be associated with another society

**Action AEM will liaise with FIGO members**

GB The work in fistula is not cohesive and needs to be more brought together. We must be networked better with our collaborators in order that ICS can achieve more.

**Urodynamics in under-resourced settings**

AEM Suggests that international work should incorporate urodynamics, as it is critical for post-fistula repair continence. ICS intervention in the under-resourced settings needs to be strengthened.

CP Teaching the physiology of UDS is very difficult to develop in under-resourced settings. Maybe everything should be in the University setting

**Action CP and AEM to look at developing guidelines for UDS in under-resourced settings, along with support of committee (AS and HS to help)**

6. Progress Reports:

- a) SE: To update on progress of technical book (chapters already allocated).
  - a. 4 out of 16 chapters received by ICS 2014.
  - b. Final editing should be done by December 2014
- b) SE: Guideline developments on managing post-fistula repair incontinence.
  - a. *SE to start working on a scoping document*
  - b. *CP What evidence is there; unmet needs; Lit review of African Journals ; East African Journal of Medicine, FIGO Journal*
  - c. *AEM ICS needs to step in and take the role of managing continence globally as the only other professional body involved is FIGO. Unfortunately other bodies like IUGA are not fully engaged at the moment.*

**Action SE, JC, AEM, CP to look at developing a scoping document for fact sheet development**

- c) GB: Update on physiotherapy training/teaching for fistula centres globally
  - a. *An MDT approach is needed urgently and there is a need for expert trainers to develop the service; develop physio aid and attain sustainability.*
  - b. *Most of the training work has been done at Hamlin Hospitals in Addis. Has contacted The Rehab advisory council of the Worldwide Fistula Foundation in working with different physiotherapists (the textbook chapter really helped galvanise thoughts and ideas).*
  - c. *Lack of evidence of role of physio care in fistula care, but increasing impact in the literature in physio being used in care pathways.*
  - d. *Profile of physios should be developed within the MDT setting of fistula care.*

**Action GB to help develop ICS fistula care physio guidelines**

7. Fistula workshop arrangements for 2015-2016

- a) Selection of ICS team for each site – *unknown; still pending, but at Trustees meeting the Treasurer said we will only have funds for one meeting – therefore Nairobi meeting in July 2015 chosen*

**Action SE to finalise paper work for ICS office**

- b) Confirmation of the schedule timetable and arrangements – to be confirmed.

8. Collaboration with international organizations: how can the ICS committee work closely in developing care strategies for patients undergoing complex fistula surgery – see above.

9. Committee's vision of fistula work in 2015-2016 – see above

10. AOB

*Arrangements for 2 Skype or WebEx calls in January 2015 and June 2015*

**Action Provisional dates: Friday 16<sup>th</sup> January 2015 and Friday 12<sup>th</sup> June 2015**