





OF GREAT BRITAIN AND IRELAND

- 1. Covid-19 FSSA Guide to Surgical Prioritisation
- 2. Vaccination for all healthcare workers (England)
- 3. Improving Non-Consultant Grade representation
- 4. Delphi research study: TRAVERSING: TRansfer of thoracic Aortic Vascular Emergencies to Regional Specialist INstitutes Group
- 5. Promotion of Vascular Surgical Innovation
- 6. ACS John D. Corson Guest Scholarship (Early years vascular researchers)
- 7. Calling all Band 5 Vasculasr Nurses

1. Covid-19 – FSSA Guide to Surgical Prioritisation

The FSSA updated its guidance on surgical prioritisation on 28th January. This update can be downloaded from https://fssa.org.uk/covid-19_documents.aspx. Recommended prioritisation of people with symptomatic internal carotid artery stenosis and CLTI is P1b (< 72 hours) and for people with threshold asymptomatic aortic aneurysm is P2 (< 1 month).

This guidance also recommends that:

- Elective surgical patients should have been pre-assessed, pre-habilitated as required and, ideally, fully vaccinated at least 2 weeks before their planned procedure.
- Patients on waiting lists shall be regularly reviewed to assess the need for re-prioritising.
- General anaesthesia should be avoided for at least 7 weeks after Covid-19 infection.

P1a <24hrs	Vascular injury or occlusion, Major haemorrhage, Ruptured AAA, Diabetic foot
	sepsis and Arterial thrombolysis for ALI
P1b <72hrs	Acute on chronic limb ischaemia, Symptomatic carotid disease, Amputation
	(ALI/CLTI), venous thrombolysis for phlegmasia, Symptomatic AAA, and Acute
	Type B aortic dissection
P2 <1mth	Revascularisation for CLTI, AAA > 5.5cm and Diabetic foot surgery
P3 <3mth	-
P4 Elective	Varicose vein surgery, Thoracic outlet surgery, Claudication procedures and
	Uncomplicated AVM

Guidance on vascular access procedures is included in the FSSA document

2. Vaccination for all healthcare workers (England)

The Vascular Society recognises the wealth of evidence in support of the benefits of healthcare worker vaccination against Covid-19 for the individual, for their family, and for patients.

The Government passed legislation that on 1 April, all NHS England frontline staff must have received two Covid-19 vaccinations, unless they are exempt. This 2022 amendment to the Health and Social Care Act (2008) included non-clinical staff with face-to-face patient contact and applies to bank and agency staff, contractors, volunteers, locums, honorary contract holders, students, and trainees.

On 31st January 2022 the Secretary of State announced that this is being reconsidered.





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The change to the law was made to protect both patients and healthcare staff. However, a possible consequence if enacted is that unvaccinated staff (non-exempt) are moved out of vascular multidisciplinary teams (MDTs). If VCOD regulations are introduced then vascular services that are significantly affected should engage early with their Trust Management and Human Resources teams and with regional NHSEI Specialised Vascular Services Commissioners.

If any members of the Vascular Society feel that they would benefit from speciality specific advice and support, please contact us by e-mail (admin@vascularsociety.org.uk) and we will arrange for an experienced member of the Society to provide confidential support.

3. Improving Non-Consultant Grade representation within the VS

Ibrahim Enemosah and Tatiana Martin have identified 32 non consultant grade (NCG) vascular surgeons working in the UK. They are keen to contact all vascular network leads to ensure that no one has been missed, please **do respond** if you have been approached.

They have identified mentors to support CESR applicants and have been invited to the next RCS England SAS Forum. They are full members of elected Vascular Society Council and ensure that the voice of NCG vascular surgeons and CESR applicants are heard during VS Council discussions.

4. Delphi research study: TRAVERSING: TRansfer of thoracic Aortic Vascular Emergencies to Regional Specialist INstitutes Group

TRAVERSING is a Delphi research study by a multi-disciplinary group of vascular surgeons, emergency medicine physicians, interventional radiologists, cardiologists and intensivists from Bristol, Southampton, Frimley, Portsmouth, Sheffield, Liverpool, Newcastle, and Imperial College London. The purpose of this project is to examine the pathway and develop consensus on the transfer of patients with confirmed acute aortic syndrome from diagnosis until their arrival at the specialist centre providing definitive management ('aortic centre').

The TRAVERSING group are asking for wide engagement with their survey:

https://sscmredcap.bris.ac.uk/redcap/surveys/?s=TMJYN7MYAC784XFC

Please note that this study is only open to clinicians working in the UK.

5. Promotion of Vascular Surgical Innovation

Dan Carradice, Senior Lecture Hull York Medical School and RCS Eng. Vascular Surgical Specialty Lead, is in touch with media organisations aiming to try and increase awareness of both vascular disease and the great work that we all do around the nation.

One area which the media are always keen to hear about is surgical innovation, specifically technique and technological innovation. This is an opportunity to capture public imagination and promote vascular surgery outside of our professional community.

If you have an example you would like to put forward for promotion, then please get in touch with Dan (d.carradice1@nhs.net).





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6. ACS John D. Corson Guest Scholarship (Early years academic vascular surgeons)

The American College of Surgeons is looking to award the John D. Corson Guest Scholarship, of up to US\$10,000, to provide an academic Vascular surgeon residing in UK or The Republic of Ireland with the opportunity to attend and participate fully in the educational activities of the ACS annual Clinical Congress and additionally to travel to academic medical institutions in the USA to share knowledge of best practices and current surgical research.

The candidate selected should meet the following preferred qualifications:

- Under 40 years of age at the time the completed application is submitted.
- Is a member in good standing of a Royal Colleges of Surgeons in the UK or ROI.
- Holds a full-time academic or teaching appointment.

For more information on this scholarship, please visit the ACS website:

http://preview.acs.siteworx.com/member-services/scholarships/international/john-d-corson

8. Callling all Band 5 Vascular Nurses

The SVN have 2 places for a staff nurse to join the committee each year for 1 year. It is a great learning and network opportunity. You will be invited to attend the committee meetings (approximately 4 per year) via teams and face to face, gain entry to the annual SVN conference and be part of a supportive, innovative team that is shaping vascular nursing services and education. Email Gail.curran@nhs.net for more information or to express an interest.

Please share the flyer below with your colleagues.

https://www.vascularsociety.org.uk/ userfiles/pages/files/Newsletters/2022/SVN%20A5%20flyer(1).pdf

With best wishes,

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