

NATIONAL INSTITUTE OF ACADEMIC ANAESTHESIA

Board Meeting

Minutes of the teleconference held at 2 pm on Wednesday 8 July 2015

Members:

Prof M Mythen	Chairman
Dr T Clark	Co-optee: Research & Audit Federation of Trainees
Dr T Clutton-Brock	Royal College of Anaesthetists
Dr A Hartle	Association of Anaesthetists of Great Britain and Ireland
Mr D Hepworth	Co-optee: RCoA Lay Committee
Dr D Highton	Co-optee: Trainee representative
Dr R Moonesinghe	Co-optee: NIAA Academic Trainee Coordinator & Deputy HSRC Director
Prof R Pearse	Co-optee: Director, UK Perioperative Medicine Clinical Trials Network
Dr J Rangasami	Co-optee: Specialist Society Representative
Prof R Sneyd	Chairman, NIAA Research Council

In attendance:

Dr A Klein	Attending on behalf of Dr S Yentis for <i>Anaesthesia</i>
Mrs M Bell	Perioperative Medicine Programme Coordinator
Miss C Bunnell	Committee Secretary (NIAA Administrator)
Miss M Casserly	Royal College of Anaesthetists, Education & Research Manager
Mr J Goodwin	Royal College of Anaesthetists, Project Manager, Education & Research
Miss C Marasingan	Royal College of Anaesthetists, HSRC & NAP Administrator

NIAAB/14/2015 WELCOME

The Chairman welcomed members to what was the Board's first teleconference, particularly new members Dr Tom Clutton-Brock (The Royal College of Anaesthetists, RCoA), Mr James Goodwin (Project Manager, Education & Research, RCoA), Dr Andy Klein (attending on behalf of Dr Steve Yentis for *Anaesthesia*), Miss Cheryl Marasingan (Health Services Research Centre & National Audit Project, HSRC& NAP, Administrator), Dr Mike Nathanson (attending as an observer on behalf of the Association of Anaesthetists of Great Britain & Ireland, AAGBI), Professor Rupert Pearse (Clinical Trials Network, CTN, Director) and Dr Jairaj Rangasami, joining as the new specialist society representative (on behalf of the Difficult Airway Society, DAS).

NIAAB/15/2015 APOLOGIES

Apologies were received from Ms S Drake (Director of Education & Research, RCoA), Professor Mike Grocott (HSRC Director), Professor Phil Hopkins (Anaesthetic Research Society, & National Institute of Academic Anaesthesia sub-committee, ARS & NIAA, Chairman), Professor Dave Lambert (NIAA Grants Officer), Colonel Peter Mahoney (Royal Centre for Defence Medicine, RCDM), Professor Nigel Webster (*British Journal of Anaesthesia, BJA*), Lieutenant Colonel Tom Woolley (RCDM), Dr Steve Yentis (*Anaesthesia*).

NIAAB/16/2015 MINUTES

The confidential and non-confidential minutes of the meeting held on 29 January 2015 were approved as a correct record.

ACTION: Miss Bunnell to upload the non-confidential minutes of the meeting held on 29 January 2015 to the NIAA website.

NIAAB/17/2015 MATTERS ARISING

- (i) NIAAB/05/2015 (iii) The Anaesthesia & Perioperative Care Priority Setting Partnership

It was noted that the results of the James Lind Alliance Anaesthesia & Perioperative Priority Setting Partnership (JLA PSP) were available on the NIAA website at: <http://www.niaa.org.uk/Results>.

- (ii) NIAAB/06/2015 Governance

Due to the scheduling of the NIAA Board meeting prior to individual meetings with the NIAA founding partners due to take place on 16 and 30 July, it was noted that the Terms of Reference would be discussed at a later date and any decisions regarding the Terms would be communicated via email.

ACTION: Professor Mythen to communicate any outcomes following the NIAA founding partner meetings on 16 and 30 July by email as appropriate.

- (iii) NIAAB/11/2015 ARS & NIAA Sub Committee

Mr David Hepworth enquired whether any progress had been made in terms of formalising the NIAA's links with the Sixth Form Open Days. Miss Mary Casserly confirmed that sessions on research would be incorporated into the forthcoming meetings in London and Manchester. Dr Tom Clutton-Brock suggested that any sessions should be kept as general as possible however, since the students were only just beginning their medical training and the majority would be undecided on their chosen specialty.

- (i) The Chairman reported that a working group had met at the beginning of June to continue developing a revised Strategic Plan for the NIAA. The plan brought together the NIAA's wide-ranging ambitions and the group had endeavoured to set out a five-year budget. Professor Mythen explained that the draft plan presented was for information at this stage and invited requests for clarification from members of the Board. He confirmed that the plan would be discussed in finer detail at the founding partner meetings scheduled for later in July. No comments were received.
- (ii) The Chairman described the ARS & NIAA sub-committee's ongoing role within the NIAA structure and asked members to be mindful of the function the committee provides. As work on the NIAA Strategic Plan continued, members would be asked to consider whether this was the most appropriate forum to oversee the coordination of research-related meetings.

- (i) The Board received the minutes of the NIAA Trainee Strategy Working Group meeting held on 28 January 2015, for information. Members noted the range of areas covered in the meeting, including the emphasis on Good Clinical Practice (GCP) training for all and a desire to see research more clearly embedded within the curriculum.

Dr Ramani Moonesinghe reported that she would be following up on a number of the actions arising from the meeting over the coming months, and that she would be attending the College's Training Committee in December as part of this.

Dr Tom Clutton-Brock supported the actions set out in the minutes, and advocated the inclusion of a broad introduction to research within the curriculum.

- (ii) Dr Tom Clark provided a verbal report on the activities of the Research & Audit Federation of Trainees (RAFT).

Dr Clark began by thanking Dr Mike Nathanson and members of the NIAA Board who had been involved in short listing for the next RAFT annual project at the recent Group of Anaesthetists in Training (GAT) Annual Scientific Meeting in June. The successful project had been presented by the Pan-London Perioperative Audit & Research Network (PLAN) and would be on intraoperative hypertension in the elderly. This national study would form the group's main focus over the next 12 months and activity would centre on identifying regional leads, collaborating with other networks and finalising governance matters. The group would be grateful for an opportunity to present the project to the HSRC's Executive Management Board (EMB) for advice and this request was welcomed by the Board.

Dr Moonesinghe offered to discuss how the Quality Audit & Research Coordinator (QuARC) network might be able to support this outside of the meeting. Professor Pearse also indicated that in future the new CTN could provide support for this kind of endeavour, however he was also mindful of the need to ensure that the individual networks retained their identities.

Dr Clark was pleased to see strong links being built between RAFT and the GAT committee. Dr Nathanson echoed this and looked forward to the development of closer working between the two groups.

In addition, Dr Clark reported that RAFT was seeking to do more to raise its profile in order to encourage more trainees to engage in research. He requested permission to submit some promotional content for inclusion in a future NIAA eNewsletter and this request was approved by the Board.

ACTIONS: **Dr Highton** to seek advice and guidance from the HSRC's EMB as part of planning the next RAFT national project.

Dr Clark to submit some promotional text regarding RAFT for inclusion in the next NIAA eNewsletter.

Dr Clark and **Dr Moonesinghe** to discuss the potential for collaboration with the QuARC network as part of planning the next RAFT annual project.

- (iii) It was noted that interviews for the trainee representative vacancy would be held on Monday 13 July. Six candidates had been shortlisted and the interview panel consisted of Professor Monty Mythen, Dr Ramani Moonesinghe and Miss Mary Casserly.

NIAAB/20/2015 MILITARY ANAESTHESIA

- (i) The Chairman reported that a panel consisting of members of the NIAA Board was currently undertaking a CV review for the upcoming Defence Professor of Anaesthesia and some additional lecturer roles. The NIAA had supported this exercise on two previous occasions and Professor Sneyd provided some further background for information. Reviewers were called to assess the applicants on the basis of their academic standing and to offer advice on any areas for improvement. Professor Mythen supported the current assessment procedure and described it as being consistent with a university appointments process.

- (ii) The Board noted the availability of a new resource on combat anaesthesia which could be accessed free of charge: and might be of benefit to civilian personnel working with civilian colleagues managing blast and ballistic casualties at:
<http://www.cs.amedd.army.mil/borden/Portlet.aspx?id=4f129d5e-973b-48d9-9fb1-514e6daf90e6>. Dr Hartle enquired as to whether it might be appropriate to advertise this more widely, for example via *Anaesthesia News*.

ACTION: **Miss Bunnell** to contact Colonel Peter Mahoney regarding the advertisement of a new combat anaesthesia resource in *Anaesthesia News*.

NIAAB/21/2015 HEALTH SERVICES RESEARCH CENTRE

- (i) The Board received and noted the minutes from the Executive Management Board meetings held on 27 January, 25 February, 25 March, 23 April and 21 May 2015.

Under Item 6 on the minutes of the 27 January meeting Mr David Hepworth queried whether anything had been done to recruit in the 20% of hospitals that did not currently have Airway Leads. Miss Mary Casserly reported that a call for Airway Leads had been included as part of a recent letter to all hospital Chief Executives and that numbers were increasing.

- (ii) Dr Ramani Moonesinghe provided a verbal report on HSRC activities which included the following main points:
- a) The First Patient Report of the National Emergency Laparotomy Audit was launched on 1 July 2015.
 - b) A Steering Group had been established to take forward the 6th National Audit Project on perioperative anaphylaxis and the project would be formally launched in November 2015.
 - c) In relation to NAP3, a document mapping the patient pathway for the management of epidural anaesthesia which included a checklist that could be beneficial in situations where epidural was not standard practice had been circulated to the EMB for comment.
 - d) The National Pain Audit had been assisted by the HSRC in preparing an application for refunding by the Healthcare Quality Improvement Partnership, but had unfortunately been unsuccessful.
 - e) The Perioperative Quality Improvement Project (PQIP), supported by a Health Foundation grant was underway. The first clinical reference group meeting would be held in September. The project would be run with the support of various stakeholders, including the Royal College of Surgeons.
 - f) The Hip Fracture Perioperative Network (HiPEN) was currently in the process of publishing several papers.
 - g) A systematic review by Dr Matthew Oliver was due to be published in the BJA shortly.
 - h) Dr Olly Boney would be leading a systematic review in support of the Core Outcomes in Perioperative and Anaesthesia Care (COMPAC) project.
 - i) The outcomes of JLA PSP had been published as noted under Matters Arising.
 - j) The main results from the SNAP-1 project would be submitted for peer review in the next few months. SNAP-2 would commence in November 2016 and there had already been significant interest in the project. The project was being supported in part by an AAGBI grant.
 - k) Five Research Fellows had been appointed to assist with NELA, PQIP and SNAP-2. The salaries for these roles were supported by private hospital fellowships.

The Chairman thanked Dr Moonesinghe for her report and was particularly pleased to see that there had been international interest in both SNAP-2 and NELA.

- (iii) The Board received and approved the revised Terms of Reference for the HSRC's EMB.
- (iv) The Board noted that Professor Tim Cook would formally take up the position of Director of the National Audit Projects from 1 August 2015 – 31 March 2018, and received a copy of the job description and person specification for the role, for information. No further comments were received and it was noted that the appointment would be ratified by RCoA Council at its meeting on 15 July.
- (v) The Chairman invited Board members to comment on the NIAA's data handling policy as part of an annual review process agreed in April 2014 when the document was initially approved.

Professor Sneyd welcomed the move towards the increased sharing of data, particularly given growing demands for 'open data' from funders and policy makers in today's research climate. He was keen for the NIAA to encourage principal applicants to adopt

this policy, and to communicate its support for data sharing. However, he felt it was important to remain realistic as it might not be feasible for all investigators to follow the recommendations.

The Chairman supported this pragmatic approach and said that it was the NIAA's role to advocate data sharing, but also to listen to any concerns that investigators might have, and to acknowledge that the protocol could not be enforced. Professor Mythen also invited Dr Hartle to seek further comment from the AAGBI Council.

ACTION: Dr Hartle to submit the NIAA data handling policy to the AAGBI's Foundation Board for further discussion.

NIAAB/22/2015 RCP AND NATIONAL INSTITUTE FOR HEALTH RESEARCH CLINICAL RESEARCH NETWORK AWARD SCHEME

The Board noted this new scheme for the recognition of NHS consultants and trainees. The Chairman sought views on whether the College should consider establishing a similar joint award to recognise the outstanding contributions of NHS clinicians involved in NIHR Clinical Research Network Portfolio studies.

Although there was interest from colleagues it was agreed that more information about the scheme was required before a decision could be made.

ACTION: The office to conduct some further research into the scheme and form a proposal for the establishment of an RCoA and NIHR research network award scheme.

NIAAB/23/2015 NIAA EVENTS

Non-confidential minute

The Chairman invited Board members to suggest potential content for a two-day education meeting on 14-15 April 2016 and several ideas were received. It was agreed that he would liaise with Professor Sneyd on an outline programme and that this would be taken forward by members of the NIAA Research Council.

ACTION: Professors Mythen and Sneyd to compose an event outline and Research Council members to be asked to provide finer detail regarding content.

NIAAB/24/2015 COMMUNICATIONS

- (i) The Board received an update on NIAA communications and noted that the NIAA Twitter account had gained 340 followers and the number of subscribers on the mailing list had increased to 1400.

Under this item Dr Hartle highlighted that the paper incorrectly stated that certain adverts and articles had been approved for publication in *Anaesthesia* and *Anaesthesia News*. Unfortunately, due process had not been followed as some content had been submitted to the publisher rather than to the Editor-in-Chief for *Anaesthesia* and the Managing Editor for *Anaesthesia News*, and Dr Hartle outlined the correct procedure for placing copy in both publications.

The Chair thanked Dr Hartle for highlighting this error and requested that the document be amended to reflect the intention for these items to be advertised with an acknowledgement that they would be subject to due process.

ACTION: **Miss Bunnell** to record the request to amend the communications paper and to ensure that due process is followed in relation to advertising content in *Anaesthesia* and *Anaesthesia News* in the future.

(ii) Board members were asked to consider whether a policy is required to judge whether courses and meetings from external organisations should be advertised on the NIAA website, such as intercalated BScs and Masters courses, as there was no assurance mechanism in place to assess these.

It was agreed that it would be useful to have a policy in place to maintain quality, however it should be kept fairly broad as some courses would be of interest and essentially the decision should be made at the Chair's discretion.

ACTION: **Professor Rob Sneyd** to draft a short statement outlining the NIAA's policy towards advertising on the NIAA website.

NIAAB/25/2015 DATES OF FUTURE BOARD MEETINGS

The following meeting dates were noted and members agreed to experiment with other methods of teleconferencing in the future.

Thursday 5 November 2015, 1.30 pm, RCoA
Thursday 4 February 2016, 1.30 pm, RCoA
Thursday 21 July 2016, 1.30 pm, AAGBI
Thursday 10 November 2016, 1.30 pm, RCoA

NIAAB/26/2015 ANY OTHER BUSINESS

(i) The Board received a list of studies funded via the NIAA that have been accepted on to the NIHR portfolio, for information.

GLOSSARY OF ACRONYMS

AAGBI	Association of Anaesthetists of Great Britain and Ireland
ACTA	Association of Cardiothoracic Anaesthetists
AMRC	Association of Medical Research Charities
ARS	Anaesthetic Research Society
ASG	Anaesthesia Speciality Group
ASIG	Anaesthesia Special Interest Group
BJA	British Journal of Anaesthesia
BOC	British Oxygen Chair
BSOA	British Society of Orthopaedic Anaesthetists
CCRN	Comprehensive Clinical Research Networks
CLRN	Comprehensive Local Research Networks
CRN	Clinical Research Network
CTG	Clinical Trials Group
DAS	Difficult Airway Society
DMA&CC	Department of Military Anaesthesia and Critical Care
EMB	Executive Management Board
EPICOT	Evidence, Population, Intervention, Comparison, Outcome, Time stamp
FPM	Faculty of Pain Medicine
JLA	James Lind Alliance
NCRPSE	National Clinical Research Priority Setting Exercise
NELA	National Emergency Laparotomy Audit
NIAARC	National Institute of Academic Anaesthesia Research Council
NIHR	National Institute for Health Research
NTNs	National Training Numbers
OAA	Obstetric Anaesthetists' Association
RA UK	Regional Anaesthesia UK
RAFT	Research & Audit Federation of Trainees
RCoA	Royal College of Anaesthetists
SEA UK	Society for Education in Anaesthesia, UK
SNAP	Sprint National Anaesthesia Projects
UKPRF	UK Perioperative Research Forum
VASGBI	Vascular Anaesthesia Society of Great Britain & Ireland