



## BOARD MEETING

### Minutes of the teleconference held on Wednesday 8 November 2017

#### Members:

Prof M Mythen	Chair, NIAA Board
Dr P Clyburn	Association of Anaesthetists of Great Britain & Ireland
Mrs J Dorey	Royal College of Anaesthetists' Lay Committee rep
Prof M Grocott	Royal College of Anaesthetists' Council
Prof N Webster	<i>British Journal of Anaesthesia</i>

#### Co-opted members:

Ms S Drake	Director of Clinical Quality & Research, Royal College of Anaesthetists
Prof I Moppett	Deputy Director, Health Services Research Centre
Prof D Lambert	Chair, NIAA Research Council
Dr D Martin	Academic Training Coordinator
Dr R Mouton	Specialist Society Representative
Prof R Pearse	Director, UK Perioperative Medicine Clinical Trials Network

#### In attendance:

Mr J Goodwin	Head of Research, Royal College of Anaesthetists
Ms P Hines	Committee Secretary (NIAA Coordinator)
Dr G Minto	NIHR APOMP SG Trainee Network Liaison

#### Apologies:

Dr A Klein	<i>Anaesthesia</i>
Dr R Moonesinghe	Director, Health Services Research Centre
Dr M Wilson	NIAA Grants Officer

#### NIAAB/11.2017/1 WELCOME AND APOLOGIES

The Chair welcomed all to the meeting and apologies were noted as above.

#### NIAAB/11.2017/2 MINUTES OF THE PREVIOUS MEETING

The confidential and non-confidential minutes of the meeting held on 13 September 2017 were approved as an accurate record.

#### **ACTION: Ms Hines to upload the confirmed non-confidential minutes of the meeting held on 13 September 2017 to the NIAA website.**

#### NIAAB/11.2017/3 MATTERS ARISING

Prof Mythen raised the Research Excellence Framework (REF) 2021 exercise that was mentioned at the previous meeting. It was agreed that the NIAA would draw up a long list of candidates which would be narrowed down to a short list of suitable names. Prof Mythen stressed the importance of putting forward candidates who would do the hard work required and best represent the speciality, as well as increasing diversity. Effort is to be made to cross-reference the long-list with the AAGBI via Dr Ravi Gill, and members were encouraged to suggest people not previously nominated. Prof Pearse made a suggestion that the NIAA should encourage the Universities of the shortlisted candidates to add their support to the submissions. Prof Lambert also suggested that effort should be made to include the sub specialities in order to increase the range of nominees.

#### **ACTION: Ms Hines to work with NIAA Board members to draft long and short list of nominations for REF 2021 exercise, including AAGBI and subspecialty suggestions.**

#### NIAAB/11.2017/4 NIHR SPECIALTY GROUP

Dr Minto introduced his paper discussing anaesthesia research career pathways, for which he was seeking endorsement and co-branding from the NIAA alongside the NIHR Specialty Group. The document's main aims were signposting anaesthetists on ways to become involved in research – for example via POMCTN and the trainee research networks; and to act as a 'call to arms' to encourage

anaesthetists to get involved in research by championing those who already are. It was discussed whether the document should be presented as an online electronic version and/or as a hard copy, perhaps within the RCoA *Bulletin*.

It was suggested that this document should join up Dr Martin's guidance document presented under Item 5, as there were significant areas of crossover. Dr Minto explained that the latter focuses on research engagement at trainee level whereas his proposed document is aimed at all grades of anaesthetists; however it's important to make that distinction clear. Prof Webster questioned the progress being made on increasing the level of research competencies in core training; Dr Minto clarified that Dr Moonesinghe had begun working on this with the RCoA Training Committee during her tenure as Academic Training Coordinator, and this was being continued by Dr Martin.

Prof Pearse mentioned that there is very little difference between the requirements for an MD (Res) and a PhD at his institution, and suggested it would be worth clarifying whether this is the case at other Universities so one qualification is not misconstrued as being 'lesser than' the other in Dr Minto's document. Prof Pearse also discussed how QMUL is attempting to address an apparent lack of appointable candidates for clinical lecturer posts, by encouraging trainees to take time out to undertake a PhD earlier on – at the end of F2 level training – following which trainees can focus on their clinical core training and achieving the Final FRCA, all of which helps to equip trainees as stronger candidates for senior lecturer posts and aligns more closely with specialties such as oncology and surgery. Prof Pearse mentioned that a national strategy to identify undergraduate intercalating students to encourage in this way would be worth undertaking.

Mr Goodwin suggested that both documents were probably too long to be turned into brochures that can be easily distributed, but could be combined into one longer resource to act as a guide to support anaesthetists at all levels throughout their academic career. Alternatively, Dr Minto's document could be produced as an article for the *Bulletin* with Dr Martin's document serving as academic guidance to trainees. There should be clarity about the purposes and audiences for each and that both cross-reference each other where appropriate.

Prof Mythen sought agreement from members on overall NIAA endorsement for Dr Minto's proposed paper, for which there were no objections. It was agreed that the work should be taken forward with input from RCoA Comms to decide on the best way to communicate the messages of both items. Both the BJA and AAGBI expressed their support to help communicate the work once completed. Thanks were also expressed to Dr Minto for the effort that had been put into his piece.

**ACTION: Dr Minto & Dr Martin to work together on aligning both documents to minimise duplication of work and agree how messages in each are to be conveyed.**

**ACTION: NIAA office team to discuss with RCoA Comms on the best way to publish both pieces.**

#### **NIAAB/11.2017/5 ACADEMIC TRAINING**

In Dr Martin's absence and given the discussion that had already taken place under Item 4, there was no further discussion on this item.

#### **NIAAB/11.2017/6 EXPERIMENTAL MEDICINE GROUP PROPOSAL**

Prof Grocott outlined this item for discussion, which proposes an experimental medicine group for the specialty, to add to the clinical trials and health services research work already being undertaken at either ends of the spectrum. It was noted that anaesthesia does not have an early experimental/translational work stream, such as the critical care specialty, and the NIHR are supportive of this being developed for anaesthesia and perioperative medicine. An NIHR experimental medicine workshop is taking place on 1<sup>st</sup> February 2018. Prof Lambert was particularly supportive of Prof Grocott's proposal, and felt it shouldn't just be restricted to clinicians – there is enough good work being done within the specialty to establish a separate group but take a lead from the existing networks. Questions were asked on how the proposed group might crossover with the Anaesthetic Research Society/BJA Research Forum's work; however it was felt this is a discussion that needs to be held with ARS, with a view to remaining collaborative. Board members were supportive of the proposal, and it was agreed that suggestions should be made for people who may be suitable to lead on this work and take it forward.

**ACTION: Prof Grocott with support from Prof Lambert to develop the proposal further, with a view to advertise for person(s) to lead the work on experimental medicine**

**NIAAB/11.2017/7 NIAA CHAIR POSITIONS**

Prof Mythen introduced the item for information, outlining a timeframe for recruitment to the NIAA Board Chair role which is anticipated to be advertised and recruited by July 2018. There were no objections to this plan. The item also outlined a planned order of rotation for the Research Council Chair, with the AAGBI being next to take this role following the BJA representative Prof Lambert's term ending in June 2018. Dr Clyburn advised he will discuss this with the AAGBI Board and aims to return with a named nominated representative before the end of the year.

**ACTION: Dr Clyburn to advise on the AAGBI representative taking the NIAA Research Council chair role for a year from June 2018.**

**NIAAB/11.2017/8 NIAA ANNUAL SCIENTIFIC MEETING & RESEARCH AWARD**

Prof Mythen outlined the item which was a skeleton programme for the 2018 ASM, being held at the RCoA on 21<sup>st</sup> May 2018 and will again include the Research Award. Prof Lambert commented on the lack of basic science in the planned programme, Prof Mythen agreed but noted that basic science was well represented in the Research Award section of this year's event. Prof Grocott commented that adding a slot for the proposed experimental medicine group to future years' events would also address this gap. Discussions commenced on whether some of the programme sessions could accommodate a basic science element; however it was acknowledged that a relatively full audience would be needed for this to be effective.

**ACTION: Prof Grocott and Prof Pearse to work on incorporating elements of basic science into sessions for 2018 Annual Scientific Meeting.**

**NIAAB/11.2017/9 NIAA-RCS**

Ms Drake provided an update to the Board following her meeting with the Royal College of Surgeons' Head of Research. An invitation had been extended to the NIAA of a co-opted seat on the RCS' Research Committee – it was agreed that Prof Pearse and Prof Grocott could attend an initial meeting to establish whether this would be worth pursuing. A progress report is currently being drafted on the NIAA co-funded systematic reviews; although so far only projects in round 1 have published reports, there had been progress in round 3 which was the joint RCS-NIAA round. It was suggested that an invitation should be extended to Prof Kreis, research supervisor of these systematic reviews, to a future Board meeting to report on progress and answer questions from Board members directly.

The annual Society of Academic & Research Surgery (SARS) meeting was also discussed; Prof Pearse is speaking at the meeting in January 2018 taking place in Nottingham. Ms Drake advised that the RCS is keen to develop a strong perioperative medicine and anaesthesia session at the 2019 meeting, which will be taking place at the RSM. Ms Drake had developed an administrative link between NIAA and the RCS in this regard, and work should begin on developing this session soon. Board members were supportive of all progress outlined.

**ACTION: Ms Hines to make contact with SARS admin lead in order to take forward a perioperative medicine session for SARS 2019 meeting.**

**ACTION: Prof Grocott and Prof Pearse to attend RCS Research Committee meeting to establish feasibility of NIAA taking co-opted seat.**

**NIAAB/11.2017/10 CLINICAL TRIALS NETWORK**

Prof Pearse provided a brief verbal update on CTN activities including the 2<sup>nd</sup> annual meeting held the previous week where there was a good level of engagement from those in attendance. Eight new trial proposals were discussed at the meeting all of which had a good geographical spread, and Prof Pearse also shared that candidates for the Chief Investigator interviews being held later that day were also from outside of London and are all strong candidates which was encouraging. Prof Pearse agreed that including metrics to better demonstrate CTN activities and successes in future reports to the Board would be beneficial.

The advert for CTN Deputy Director is close to being finalised and will be ready for publication once an interview date is confirmed. Both this role and a CTN Board member role will be advertised at the same time, with the intention that should the Deputy Director role be filled externally this will also fill

the Board member role, however should the Deputy Director position be filled by an internal candidate a Board position will become vacant.

#### **NIAAB/11.2017/11 HEALTH SERVICES RESEARCH CENTRE**

Prof Moppett gave a brief verbal update on HSRC activities. HSRC Regional Fellowships had now been advertised, with hospitals outside of London offering posts, meaning more positive examples of geographical representation. The NAP7 call for topics would go out shortly, with a final topic decision made at the end of March 2018. NIAA Board support and suggestions for the wider promotion of the topic call were welcomed, as Prof Moppett explained that the aim is to involve the medical community in the call as broadly as possible including nursing and midwifery for example. Dr Clyburn mentioned that he would soon be attending a meeting with Barema, at which he agreed to draw attention to the call and encourage responses. The *NELA Third Patient Report* had been published with very good publicity including exclusive coverage in *HSJ*.

#### **NIAAB/11.2017/12 RCoA MACINTOSH PROFESSORSHIP**

#### **NIAAB/11.2017/13 RCoA PAYNE STAFFORD TAN AWARD**

#### **NIAAB/11.2017/14 RCoA SMALL RESEARCH GRANTS AND MAURICE HUDSON PRIZE**

Prof Mythen introduced these items for information, drawing attention to the ranking summary for the 11 candidates that had applied for the Macintosh Professorship this year. The information had been anonymised for confidentiality due to a number of the applicants being NIAA Board members and given that these decisions have not yet been approved by the RCoA Nominations Committee and Council, after which announcements can be made publicly. NIAA executive board members had been involved in the Macintosh ranking exercise and it was clarified that the anonymised information had been provided for this meeting to demonstrate that a due process had been followed, also that there was a clear winner. Members noted that there were some very strong applicants. Dr Mouton questioned whether feedback is provided to unsuccessful candidates; Ms Hines clarified that this is the case and reviewers are asked to include comments with their returned scores for this purpose. All reviewers were thanked for their input into the process. No further comments were made on these items.

#### **NIAAB/11.2017/15 NIAA AWAY DAY**

Prof Mythen opened the discussion by mentioning that an NIAA away day had been raised at the previous meeting, and is being proposed to take place in early summer 2018 as a way of bringing members together to review the recently revised NIAA strategy, check in on progress with this, and to provide the expected incoming Board and Research Council chairs with some suggested guidance for further developments. It was discussed whether the day should involve both Board and Research Council members and possibly other stakeholders, and suggestions were made that it should be held offsite to avoid other distractions and a social element, e.g. a shared meal afterwards, should be factored in to the planning. Dr Clyburn suggested a section of the day should be allocated for the board to discuss more strategic matters, and other members should be included in the rest of the day. It was agreed that a proposed agenda should be worked up and brought to the next meeting, and some possible dates are to be circulated.

**ACTION: Ms Hines to circulate proposed dates to members for NIAA Away Day in June 2018**

**ACTION: Prof Mythen to work on outline agenda to present to Board at next meeting**

#### **NIAAB/11.2017/16 ANY OTHER BUSINESS**

Prof Mythen raised the subject of Dr Klein's NIAA grants review manuscript which had been in preparation for some time and a finished draft had recently been shared with some members of the NIAA Board. Prof Grocott outlined his recent discussion with Dr Klein during which it was clarified that the exercise didn't include larger research funding awarded through the NIAA for example fellowships or the BOC Award. The paper focuses on the number of publications and citations achieved for the grants included in the study, and these outputs have been mapped to individual departments with a calculation made on the value of each output.

There were concerns over how this exercise had been carried out, the methodology used, the value of grant awards included and excluded and how this may misrepresent the NIAA. There was also discussion on whether the results should be presented as a transparent paper or anonymised and how it would be received by the departments concerned if all are named. The manuscript had been presented as being authored on behalf of the NIAA Board; however it was noted that it had not been directly commissioned by the Board, though the NIAA secretariat had been open and

cooperative in providing data for analysis. Members also expressed that they wanted an opportunity to respond to the results, particularly where they could be viewed as negative. It was accepted that the NIAA could not have any influence over whether the paper is published in *Anaesthesia* as planned but could present its own response to the results if it felt the paper could not be supported.

It was discussed that as the BJA are not supportive of the paper in its current form it could not be endorsed by the NIAA Board as a whole but only by named individuals at this stage. Members agreed in conclusion that the NIAA does not accept the manuscript as presented currently.

**ACTION: Board members to review Dr Klein's manuscript and feedback comments within three weeks.**

#### NIAAB/11.2017/17 DATES OF FUTURE BOARD MEETINGS

Wednesday 17 January 2018, 12:30pm, RCoA (**Executive Board meeting to follow main meeting**)

Friday 18 May 2018, 11:30am, Teleconference

Friday 13 July 2018, 11:30am, RCoA/AAGBI (venue TBC) (**Executive Board meeting to follow**)

Wednesday 14 November 2018, 11:00am, Teleconference

Wednesday 23 January 2019, 11:00am, RCoA (**Executive Board meeting to follow**)

### ACTION POINTS

Item		Responsible	Action	Due
2	Minutes of the previous meeting	Ms Hines	Upload the confirmed non-confidential minutes of meeting held on 13 September 2017	Next meeting
3	Matters Arising	Ms Hines	Work with NIAA Board members to draft long and short list of nominations for REF 2021 exercise, including AAGBI and subspecialty suggestions	End of December 2017
4	NIHR specialty group	Dr Minto Dr Martin	Work together on aligning both academic research documents to minimise duplication of work and agree how messages in each are to be conveyed	Next meeting
		NIAA office team	Discuss with RCoA Comms the best way to publish both pieces of work	Next meeting
6	Experimental medicine	Prof Grocott Prof Lambert	Develop proposal further, with a view to advertise for person(s) to lead the work	Next meeting
7	NIAA Chair positions	Dr Clyburn	Advise on the AAGBI representative taking the NIAA Research Council chair role for a year from June 2018	Next meeting
8	NIAA Annual Scientific Meeting	Prof Grocott Prof Pearse	Work on incorporating elements of basic science in to sessions for 2018 Annual Scientific Meeting	Next meeting
9	NIAA-RCS	Ms Hines	Establish admin contact and develop perioperative medicine session for SARS 2019 meeting	Mid-2018
		Prof Grocott Prof Pearse	Attend RCS Research Committee meeting to establish feasibility of NIAA taking co-opted seat	Next meeting
15	Away Day	Ms Hines	Circulate proposed dates to members for NIAA Away Day in June 2018	Next meeting
		Prof Mythen	Work on outline agenda to present to Board at next meeting	Next meeting
16	Any Other Business	Board members	Review Dr Klein's manuscript and feedback comments	End November

