



BOARD MEETING

Minutes of the meeting held on Friday 13 July 2018
6th Floor Meeting Room at the Royal College of Anaesthetists

Members:

*Prof M Mythen	Chair, NIAA Board (to July 2018)
Dr P Clyburn	Association of Anaesthetists of Great Britain & Ireland
Mrs J Dorey	Lay Representative
Prof H Galley	<i>British Journal of Anaesthesia</i>
Prof M Grocott	Royal College of Anaesthetists' Council
*Dr A Klein	<i>Anaesthesia</i>

Co-opted members:

Dr D Martin	Academic Training Coordinator
Dr A Macfarlane	Specialist Society Representative
*Dr M Nathanson	Chair, NIAA Research Council (from June 2018)
Dr M Wilson	NIAA Grants Officer
*Dr J Yeung	Deputy Director, UK Perioperative Medicine Clinical Trials Network

In attendance:

Mr J Goodwin	Head of Research, RCoA
Ms P Hines	Committee Secretary (NIAA Coordinator)
Dr M Mariyaselvam	The Queen Elizabeth Hospital, King's Lynn

Apologies:

Ms S Drake	Director of Clinical Quality & Research, RCoA
Prof D Lambert	Chair, NIAA Research Council (to June 2018)
Dr R Moonesinghe	Director, Health Services Research Centre
Prof R Pearse	Director, UK Perioperative Medicine Clinical Trials Network

*Joined meeting by telephone

NIAAB/07.2018/1 WELCOME AND APOLOGIES

The meeting was chaired by Prof Grocott, following his confirmation as incoming NIAA Board Chair, who welcomed all to the meeting. Apologies were noted as above.

NIAAB/07.2018/2 MINUTES OF THE PREVIOUS MEETING

The confidential and non-confidential minutes of the meeting held on 18 May 2018 were approved as an accurate record.

ACTION: Ms Hines to upload the confirmed non-confidential minutes of the meeting held on 18 May 2018 to the NIAA website.

NIAAB/07.2018/3 MATTERS ARISING

3.1 NIAAB/05.2018/5 NIAA Away Day

Following the previous Board meeting, a decision had been taken to postpone the NIAA Away Day that had been scheduled to take place at the end of July, which had been communicated electronically between meetings. Prof Grocott confirmed this verbally to members, inviting comments, however there were none. A new date has not been set as this will depend on the timetable of the proposed external review of the NIAA which has yet to be determined.

NIAAB/07.2018/4 NIAA INNOVATION RESEARCH AWARD

Dr Mariyaselvam had been invited to attend the meeting to enter discussion with members re: a proposal for an innovation award that had been discussed at the previous Board meeting in May.

Dr Mariyaselvam with a colleague Dr Peter Young has developed a number of safety innovations, predominately devices relating to anaesthesia and ICU, some of which are available on the market in the UK and internationally and a number still in progress. Following informally discussing these with Presidents of both the RCoA and AAGBI at the 2017 GAT meeting they had touched upon the problems encountered with implementation of these devices, noting that funding currently tends to lean towards primary research and supporting the proof of concept and idea testing stage. Dr Mariyaselvam had been in email correspondence with Ms Drake, who had referred the matter to the NIAA.

Dr Mariyaselvam gave an example of a particular arterial connector device that she and her team at Queen Elizabeth hospital had developed and patented 10 years ago, and passed through a number of competitive stages - for example getting the device accepted onto the NHS Innovation Accelerator programme and the NHS Innovation Technology Tariff. However, despite this leading to the device being freely available there is a continued struggle to get it taken up into hospital practice. The issue of implementation is where Dr Mariyaselvam wished to obtain support and advice from the NIAA. Prof Grocott reiterated the status of the NIAA in that as an entity itself it does not have any funding of its own, however individual partners may be in a position to offer support. Prof Grocott asked which other funders have been approached in this regard, however Dr Mariyaselvam admitted there have been difficulties for the team to find the right place for this work to fit, for example they were declined for NIHR funding as it was felt to be outside of their remit. Dr Mariyaselvam noted that others are likely to encounter similar problems. Prof Galley queried whether this implementation work could be supported through existing NIAA funding streams; Dr Wilson responded there would be no specific exclusion to this and questioned whether the difficulties are limited to lack of funding, or if other issues are at play such as patent/ownership which could be causing blockages. He also noted the NIHR funding stream Invention for Innovation (i4i) is specifically available for such purposes, and offers funding at a far greater level than that available within the NIAA.

Prof Mythen identified the support NIAA could offer as a positive critical reviewer of any further proposals Dr Mariyaselvam may wish to develop. Dr Nathanson suggested a proposal paper identifying other funding available, the current landscape and what the barriers are to this, and a specific request to the NIAA along with some proposed funding partners as a possible next step. Prof Grocott directed a question to the partners present, asking if the NIHR i4i programme were keen to co-fund this work, whether the NIAA would be amenable to this. Dr Clyburn responded that the Association would be open to consideration, but has fixed research funds available and this would take away from other funding. He also noted that there seems to be facilitation/access issues rather than lack of funding itself.

Prof Grocott summarised that it seemed unlikely the NIAA would be able to offer support around device implementation in general, as this is outside of the research remit of the NIAA, however support could be given towards the earlier innovation stage of the process should Dr Mariyaselvam wish to develop a proposal to this effect. Prof Grocott also offered to provide links in to relevant NIHR innovation areas.

NIAAB/07.2018/5 RCoA COUNCIL REPRESENTATIVE FOR NIAA

Mr Goodwin updated members on the current situation re: the vacant position of RCoA representative on the NIAA Board, given Prof Grocott's appointment as Board Chair. The issue was discussed at the recent Clinical Quality & Research Board meeting, however further discussions need to take place before a representative can be confirmed. Members will be notified once this has been resolved.

NIAAB/07.2018/6 NIAA EXTERNAL REVIEW

Prof Grocott provided an update following discussion at the previous meeting, where he had suggested convening an expert international panel to conduct a formal independent external review of the NIAA from the perspective of both past, present and future activities. Prof Grocott had addressed a number of comments made at the recent Research Council meeting, with the revised proposal being presented to Board members namely addressing geographical and gender imbalance and the panel chair's level of independence. Comments on the revised review were invited. Prof Galley asked whether the proposed panel members had been approached and the anticipated duration of said review; Prof Grocott advised that a number of individuals had expressed support and with appropriate planning and preparation a number of interviews would

be expected to take place over a couple of days, with the write up of a report to follow over the subsequent weeks. Funding of the review was discussed, with agreement that any significant costs should be met by all founding partners so as to retain an equitable process. Members present at the meeting generally agreed with the framework and revised proposal as presented by Prof Grocott. It was also agreed that the panel would be provided with a series of questions to answer and an overall brief to outline the requirements of the review.

ACTION: Prof Grocott to develop a brief and initiate the process of approaching panel members to begin the review

NIAAB/07.2018/7 NIAA SPECIALIST SOCIETY MEMBERSHIP

Ms Hines updated members on the membership form that had been drafted and discussed at the recent Research Council meeting, in order to address the lack of an existing process for new societies joining the NIAA. The form asks questions including the society's research priority areas and expected spend on research funding annually. It was noted that associate level membership would primarily be for societies with less than £10,000 annual spend on research funding and would not include voting rights but would enable the society to advertise and promote their grant funding available, through NIAA channels. Full membership would be considered for societies with an annual spend above £10,000 and also would include voting rights. Any final decisions and approvals on NIAA membership, including level of membership, would be retained by Board members following review of the completed application form. Dr Nathanson expressed concern over whether smaller specialist societies may feel disadvantaged by the minimum spend as indicated on the form, and wanted to understand the process for this decision. It was clarified that on discussion at the Research Council meeting, the £10,000 threshold was agreed overall and set based on current levels of funding contributed by existing specialist society partners. It was queried on balance whether decisions at Research Council level are likely to require a vote and whether the Council has sufficient independence to warrant this distinction, considering any decisions will ultimately be presented at Board level. Dr Wilson queried whether societies making the annual threshold contribution will be part of the NIAA grants administrative process; it was understood the intention is that by completing the application form this would be the case, and these would therefore be eligible for NIHR portfolio status. A suggestion was made to clarify this in the guidance notes on the form. It was also suggested that the form should be amended to remove the distinction between associate and full membership voting rights, and that societies with any level of funding available should be afforded a Research Council vote so as not to be disadvantaged, and the revised form is to be brought back for further Board discussion.

ACTION: Ms Hines to revise the specialist society membership form based on Board comments

NIAAB/07.2018/8 NIAA SCIENTIFIC MEETINGS

Prof Grocott presented his proposals for consideration that include revising the current model for the NIAA annual scientific meeting, by including more research in both the main RCoA and Association annual meetings such as Anaesthesia 2019 and Annual Congress, and to avoid the timetabling clash between the NIAA annual meeting and RCoA Anaesthesia meeting as experienced this year. Prof Grocott suggested convening a group to look at the feasibility of holding a 2-day meeting towards the end of 2019 outside of London, which would encompass a widely ranging aspect of research/innovation. Suggestions were made over the title of the event, as it was felt it may need revision to attract a wider audience who may be put off by a 'Scientific' named meeting. Discussion continued on considerations for including the proposed research content in the suggested meetings as the programmes are planned up to 12 months in advance and would have to be factored in. The importance of offering the research community the opportunity to gather and discuss relevant projects and topics, as well as building up and increasing the existing research community was highlighted as a bonus plus point, following queries on the benefits of yet another separate meeting. It was discussed that careful programme planning will be needed to encourage attendance from research enthusiasts and to make the content interesting. A suggestion was to combine sessions from the existing HSRC and CTN meetings, and include content on discovery science and experimental medicine. It was established the meeting is envisioned to take place outside of London, across 2 days to allow more opportunities for networking, in the Autumn of 2019. Prof Grocott also noted that the planned meeting would be an opportunity to partner with the BJA Research Forum, and suggested forming a small working group to develop a proposal further.

ACTION: Prof Grocott to assemble a working group to develop a proposal for future NIAA research meetings**NIAAB/07.2018/9 NIAA GRANTS OFFICER REPORT**

Dr Wilson updated members on the 2018 grant Round 1 which was recently completed, in which less applications were funded than usual despite a higher number of bids received overall. There were a number of reasons for this including fewer applications to the BJA/RCoA category, and a less than desirable outcome transpired on the day of the grant committee meeting when the DAS representative announced that despite a number of applications received for their category they had insufficient funds to take any of them forward. However, some positives included a number of grants being co-funded between multiple partners, an indication of the flexibility of the NIAA grants process that is welcomed. Dr Wilson sought approval from the Board in establishing a process to ensure the caveat that going forward any funder advertising grants in any particular round should guarantee that funds will be available for allocation on the day. Especially given the administrative burden that will already have been undertaken in obtaining peer reviews for the applications, and the potential disadvantage experienced by those who have applied in good faith. Dr Wilson noted that DAS had advised during the committee meeting that were the funds available, they would not have deemed any of the applications strong enough to take forward in any case.

Dr Wilson sought guidance from the Board with regards to introducing Researchfish as the tool to monitor and track grants awarded, asking to what extent this should be applied to retrospective grants. In general it was agreed this should primarily be implemented for prospective grants going forward, however it was recognised this would exclude a small number of larger grants for example the BOC and BJA/RCoA Career Development grants that are likely to boost the overall picture of the NIAA's impact. Dr Wilson also put forward a tentative suggestion, based on recent discussion at the grant committee meeting, to run a specific grants call for trainee networks in future due to the large number of applications received from trainee groups in any given round. Members were broadly supportive but there were some concerns from the BJA, e.g. resistance to funding audit projects outside of clear research work, and that encouraging a specific stream of funding is not altogether necessary and could potentially lead to an uneven playing field with trainee applications being considered outside of the wider competitive process.

NIAAB/07.2018/10 2018 JOHN SNOW AWARDS

Ms Hines updated members on this year's John Snow winners for information, noting the positive gender and geographic spread. NACCSGBI were able to fund one application this year, following a number of years where no neuro applications were received at all. Ms Hines expressed thanks to the reviewers who had contributed their time and expertise to the exercise. No further comments were made.

NIAAB/07.2018/11 NIHR SPECIALTY GROUP

Prof Grocott updated members on current NIHR activity, noting that his second term as chair of the specialty group had recently begun and ends in July 2020. To that end, both himself and Prof Smye are considering succession planning for the role by appointing deputy roles focused on a number of areas such as research training and communications. Also in developing a pain medicine subgroup given the relatively significant differences between anaesthesia and perioperative medicine, and a growing number of requests for peer review in the pain category. There were no further comments.

NIAAB/07.2018/12 ACADEMIC TRAINING

Dr Martin updated members on a number of brief points of discussion including dissemination of the now complete academic anaesthesia guidance booklet where suggestions included making use of the Gas trainee newsletter to promote it, support from NIAA partners in this regard, and the possibility of uploading the booklet to e-portfolio whilst still in use. It was noted that the brochure is available electronically on the NIAA website and has been promoted through social media. Dr Martin also discussed his paper on NIHR ACFs and CL posts circulated at the previous meeting and now considering how to foster links with other organisations particularly to encourage trainees who are interested in pursuing dual specialties anaesthesia and ICM along with research, and queried whether it's possible to discuss the possibility of initiating an equivalent counterpart to Dr Martin for the FICM Board that would be responsible for training issues whom he could work alongside. Prof Grocott suggested approaching the FICM research lead or alternatively the specialty lead Prof Paul Dark. Dr Martin also touched on the wide regional variation of experiences for academic

trainees in relation to ARCPs. Prof Grocott suggested that Dr Martin approach the RCoA training committee chair, Dr Chris Carey, to discuss having a presentation slot at the next College Tutors meeting to address this audience directly and broach the issue. It was also suggested that the ARCP guidance on the NIAA website could be referred to and framed to demonstrate to CTs the benefits of academic training and how best to manage such trainees at ARCP panels.

Dr Martin also reported on the national data gathering exercise he has been undertaking on rates of application for NIHR ACF and CL posts has suffered from a deficit of centralised information available from the NIHR who have advised that such data is not routinely kept. Prof Grocott suggested that Dr Martin should contact the NIHR Academy as a potential route to this information. Dr Martin also reported on the planned update of trainee content for the NIAA website, which is expected to include trainee's personal stories, videos and animations as a resource on academic training.

ACTION: Dr Martin to contact Dr Carey re: presentation slot at 2019 College Tutors meeting

ACTION: Dr Martin to contact NIHR Academy re: available data on ACF and CL posts

NIAAB/07.2018/13 CLINICAL TRIALS NETWORK

Dr Yeung spoke to Prof Pearse's written report in his absence and updated members on the CTN Trials Development Day which had been a success amongst members of the Network and has led to further development of the proposals discussed on the day, some of which could lead to increased external funding for the Network; discussions on funding from NIAA partners is still ongoing. The CTN's Autumn meeting in November will be held over two days for the first time, and is responding to the Network's requests for more research trial methodology training and networking opportunities, alongside trial presentations. The Chief Investigator scheme is making good progress. Prof Grocott noted it would be useful to discuss with Dr Yeung and Prof Pearse how the 2019 CTN autumn meeting may be combined into the proposed NIAA meeting as discussed under item 8. There were no further comments or questions.

NIAAB/07.2018/14 HEALTH SERVICES RESEARCH CENTRE

Prof Grocott briefly drew members' attention to the circulated report from Prof Moonesinghe in her absence, highlighting the NAP7 topic selection which will be presented for approval to RCoA Council in the coming days; outputs from SNAP2 are now being published; there will be a special HSRC-themed pullout in the November RCoA *Bulletin*, and six new HSRC Fellows will be starting in August. There were no further comments or questions.

NIAAB/07.2018/15 NIAA COMMUNICATIONS

Ms Hines provided a brief update to members on the circulated written report, noting the planned NIAA website updates as mentioned earlier by Dr Martin and will also include an update on any outdated NIAA membership content.

NIAAB/07.2018/16 ANY OTHER BUSINESS

No other business was discussed, however Dr Clyburn noted this as his last Board meeting given his term as the Association's President will be ending in September. He will be working with incoming President Dr Ferguson to update her on NIAA matters. Prof Grocott thanked Dr Clyburn for his contributions during his tenure.

NIAAB/07.2018/17 DATES OF FUTURE BOARD MEETINGS

Prof Grocott noted the upcoming meeting dates as below, and suggested that future meeting venues should alternate between the College and the Association to help foster collaborative working between both partners. There was agreement to pursue this as a course of action for meetings subsequent to January 2019.

ACTION: Ms Hines to schedule future meetings to include Portland Place

Next meetings:

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 18 May 2018.	Next meeting
6	NIAA External review	Prof Grocott	Develop a brief and initiate the process of approaching panel members to begin the review	Next meeting
7	NIAA Specialist Society Membership	Ms Hines	Revise the specialist society membership form based on Board comments	Next meeting
8	NIAA Scientific Meetings	Prof Grocott	Assemble a working group to develop a proposal for future NIAA research meetings	Next meeting
12	Academic Training	Dr Martin	Contact Dr Carey re: presentation slot at 2019 College Tutors meeting	Next meeting
			Contact NIHR Academy re: available data on ACF and CL posts	Next meeting
17	Future meetings	Ms Hines	Schedule future meetings to include Portland Place	2019