



BOARD MEETING

Minutes of the teleconference held on Wednesday 14 November 2018

Members:

Prof M Grocott	Chair, NIAA Board
Mrs J Dorey	Royal College of Anaesthetists' Lay Committee rep
Dr K Ferguson	Association of Anaesthetists
*Prof H Galley	<i>British Journal of Anaesthesia</i>
*Prof J Hall	Royal College of Anaesthetists' Council
Dr A Klein	<i>Anaesthesia</i>

Co-opted members:

Ms S Drake	Director of Clinical Quality & Research, Royal College of Anaesthetists
Dr A Macfarlane	Specialist Society Representative
Dr D Martin	Academic Training Coordinator
Prof R Moonesinghe	Director, Health Services Research Centre
Dr M Wilson	NIAA Grants Officer

In attendance:

Mr J Goodwin	Research Manager, Royal College of Anaesthetists
Ms P Hines	Committee Secretary (NIAA Coordinator)

Apologies:

Dr M Nathanson	Chair, NIAA Research Council (to June 2019)
Prof R Pearse	Director, UK Perioperative Medicine Clinical Trials Network
Dr J Yeung	Deputy Director, UK Perioperative Medicine Clinical Trials Network
*Present for part of the meeting	

NIAAB/11.2018/1 WELCOME AND APOLOGIES

Chair welcomed all to the meeting. Apologies were noted as above.

NIAAB/11.2018/2 MINUTES OF THE PREVIOUS MEETING

The confidential and non-confidential minutes of the meeting held on 13 July 2018 were approved as an accurate record.

ACTION: Ms Hines to upload the confirmed non-confidential minutes of the meeting held on 13 July 2018 to the NIAA website.

NIAAB/11.2018/3 MATTERS ARISING

3.1 NIAAB/07.2018/7 NIAA Specialist Society Membership

Ms Hines provided an update on this topic, noting that the proposed application form had been revised following discussion at the previous meeting. Concerns raised around voting rights being tied to the level of research funding contribution have now been addressed and reference to voting rights has been removed from the application form. Clarification on expected participation in the NIAA grants administrative process where an applicant society's level of research funding contribution is above the minimum annual threshold (£10,000) had also been added to the form. Members were asked for any comments on the revised document; no objections or further suggestions were made and the members present agreed to approve the revised document as final.

ACTION: Ms Hines to upload the revised final version of the specialist society membership application to the NIAA website

NIAAB/11.2018/4 NIAA EXTERNAL REVIEW

The Chair updated members on this item noting that subsequent to previous Board discussions on the proposed review there had been delays on its progress, due to simultaneous discussions on a

scoping exercise and a national review of research capacity being held at the RCoA Council and Clinical Quality & Research Board level. Prof Grocott shared that discussions with Dr Harrop-Griffiths and Prof Pandit had led to the decision that the NIAA review and a scoping exercise would be carried out first, which would in turn inform the College's overall review of the wider research landscape. Prof Grocott clarified that the paper circulated for this meeting had been revised from earlier versions discussed by the Board, in light of the decisions noted above, and was now being presented for approval. Prof Grocott noted the main areas where Board comments are sought were the aims of the review – these have been developed into five main points – and the revised composition of the review panel.

Potential conflicts of interest with the proposed chair were discussed due to his involvement with the HSRC Board, and concerns over the budget were raised. Dr Klein suggested Prof Alan Merry as a potential candidate for the chair role due to his involvement with the ANZCA grants review and as someone who has a good overview of global anaesthesia. This is to be discussed with Prof Merry who has yet to be approached.

Ms Drake also suggested the RCoA's membership panel, which consists of highly engaged RCoA members that meet relatively frequently and can provide input on the review panel from the perspective of the everyday jobbing anaesthetist. A possible application process conducted amongst this cohort was discussed, involving circulation of an outline proposal and a set of criteria, with members self-identifying and explaining their reasons for wanting to take part in the review exercise. Dr Klein raised the topic of lay representation and it was noted this can come from either the Association or the College lay membership – Dr Ferguson noted it would be important to recruit someone who is not already involved in any of the NIAA's processes, and possibly a layperson who is not necessarily a patient. Prof Moonesinghe put forth the suggestion of identifying two lay representatives, who can provide adequate support to each other in voicing opinions in meetings etc. and that this could possibly be achieved by recruiting one each from the Association and the College.

ACTION: Prof Grocott to approach Prof Merry to ascertain his availability and interest in being involved in the NIAA external review

ACTION: Prof Grocott to identify appropriate lay person(s), and consider approaching the College membership engagement panel

NIAAB/11.2018/5 NIAA SCIENTIFIC MEETINGS & ANNUAL RESEARCH AWARD

The Chair introduced this item, presenting a revised paper following earlier discussions by Board at previous meetings where it had been proposed to consider replacing the NIAA's Scientific Meeting that has been run annually since 2016 to varying degrees of success, with an alternative research meeting across 2 days. Prof Grocott advised that early conversations had taken place to explore integrating sessions for the NIAA's public activities into the programmes of the founding partner's existing larger annual events, namely the RCoA's *Anaesthesia* meeting and the Association's Winter Scientific Meeting. Alongside this, Prof Grocott proposes a 2-day meeting aimed at research-active enthusiasts that will take place in a location yet to be decided during the latter part of 2019 and will include breakout sessions for NIAA projects such as the POMCTN and HSRC, and the annual NIAA Research award presentation. It is also proposed that the new meeting would include some of the BJA's Research Forum meeting. A working group has been convened to start the planning process. There was discussion over the format of the meeting programme and the frequency (whether annual or biannual), the expected audience and location. The positives and drawbacks of a range of locations including York, Birmingham and Leicester were raised for consideration in discussing the location. However, it was agreed it should be outside of London to extend a message of inclusivity amongst the wider research community, as well as attempting to reduce costs. Dr Wilson pointed out that the success of the meeting can be assessed outside of just attendance figures. Prof Grocott clarified some of these decisions could only be taken after attempting this style of meeting at least once, after which its success can be gauged on a number of factors. Dr Ferguson pointed out that developing a strategy on the aims of the meeting programme and sets out what is being measured would be helpful in this regard. In conclusion, members were supportive of the general aims of the meeting as proposed and agreed to proceed on the basis that there is more detail to be ironed out as outlined during the discussion.

ACTION: Prof Grocott to return the Board's comments on the NIAA meeting proposal to the working group for further consideration and planning

NIAAB/11.2018/6 RESTRUCTURING OF NIAA BOARD AND RESEARCH COUNCIL MEETINGS

Prof Grocott introduced his paper, which was a proposal to make some modifications to the current structure and format of the NIAA's internal meetings. The three main new suggestions involve introducing a longer 1-day meeting twice a year for both Board and Research Council, removing the separation between both Chair roles, and for the Chair to actively manage the agenda of both meetings to avoid duplication of discussion items. It is proposed to retain the biannual Board teleconference meeting. It was noted that the Research Council agenda is to focus on engagement and consultation, and the Board on accountability and governance. The ambition is to streamline the number of meetings and increase efficiency. The current arrangement of a biannual Board meeting held remotely by teleconference was proposed to continue alongside the suggested new arrangements. The reasons it was felt necessary for separate chair roles in the first place were explored; the distinction between the remit for each group was discussed as being a factor, as well as there being a necessary separation of accountability. The difficulty with the recent recruitment to the Research Council chair role was highlighted; Prof Moonesinghe suggested this could be addressed in future by drawing up a shortlist of suitably independent candidates that could be encouraged to apply for the role once the current rotating arrangements come to an end. Members were content to support the proposal in principle, with the exception of point 4 regarding one single Chair role which there was not a consensus on. A question over whether it was necessary for Board members to also attend Research Council meetings was raised; for consistency, it was felt necessary for at least both Chairs to attend both meetings. It was suggested that depending on the topics of discussion on the agenda, members of the Board could be invited to attend Research Council meetings where appropriate to encourage cross communication between both parties. It was decided to present the proposal to the next Research Council meeting for discussion, following which a further revised paper will be brought for approval to the next Board meeting.

ACTION: Prof Grocott to present proposal paper to Research Council for discussion, with a further revised paper to be presented for approval at the next Board meeting

NIAAB/11.2018/7 NIAA GRANTS**NIAAB/11.2018/7.1 GRANTS OFFICER UPDATE**

Dr Wilson provided members with an update on the current round of grants. The difference between applications received to each category was noted, particularly the larger than usual number for the Association of Anaesthetists/*Anaesthesia*. Prof Moonesinghe wondered whether the difference in the Association/*Anaesthesia*'s relatively open criteria and the BJA/RCoA guidance stating a prioritising of basic/translational science projects might possibly have led to this. Members discussed whether the increased number of applications meant that funders would be more prepared to share financial resources. Dr Wilson responded that there is capacity for flexibility in this regard and has been part of the intention of the NIAA's collaborative nature since its start, which is expected to be retained. Concerns over the implications for transparency in adopting this approach were expressed, as it was felt applicants may be at a disadvantage if they are not aware of this possibility at submission stage. Dr Wilson assured members that the scientific merit of any project is always the first consideration before any budget implications. There were questions on the decision making process undertaken at grant committee meetings, and it was noted that none of the smaller specialist societies were participating in this round which is unusual. Ms Hines explained this was most probably due to all specialist societies funding grants in Round 1 leaving no budget available for Round 2, however all partners had been provided with equal opportunity to participate in the round. Prof Moonesinghe mentioned that along with the NIAA's NIHR partnership status being a benefit, she has found that studies funded through the NIAA by an AMRC member charity are afforded an advantage in being entitled to additional NHS funding. It was queried whether the Association and/or *Anaesthesia* could possibly consider AMRC membership, as per the RCoA and BJA. Dr Ferguson agreed to discuss this internally with the relevant colleagues.

ACTION: Dr Ferguson to discuss with Association/*Anaesthesia* colleagues re: AMRC membership

NIAAB/11.2018/7.2 GRANTS REVIEW UPDATE

Ms Hines updated members on the grants review survey, drafted to consult with previous grant applicants along with NIAA funding and founding partners. Both sets of survey questions had been circulated for members' further comment. Dr Ferguson questioned whether the issues relating to transparency that had been discussed under item 7.1 could be addressed through the questions

being asked, and suggested the survey could be amended to capture stakeholder views on this subject.

ACTION: Ms Hines to amend survey to include questions on transparency

NIAAB/11.2018/8 RCoA MACINTOSH PROFESSORSHIP

[Dr Klein and Dr Martin were asked to remove themselves from the call during this item due to a conflict of interest].

Prof Grocott provided members with an update on the Macintosh Professorship, for which five applications had been received. An anonymised score/ranking sheet had been circulated in advance. One applicant had been ranked in first place, with a very close runner up and members discussed whether it was possible for both to be awarded the Macintosh. Following discussion it was agreed both would be winners this year as there are no direct financial implications for this award and this had been set as a precedent in previous years. It was suggested that going forward the rubric should be updated to clarify that up to two Macintosh Professorships may be awarded in any one year depending on the quality of applications received, so that this is clear to applicants.

ACTION: Ms Hines to update Macintosh Professorship rubric to clarify that the NIAA reserves the right to nominate more than one candidate for the Macintosh Professorship in any given year

NIAAB/11.2018/9 RCoA PAYNE STAFFORD TAN AWARD

Prof Grocott provided a brief update to members on the applications received for the Payne Stafford Tan Award, which included one from a medical student. Members discussed the overall view that one applicant was preferred over others and the eligibility of the student applicant was queried. It was clarified that the College's membership categories now includes medical students, and the rubric states that applicants must be a member or fellow of the College so does not specifically exclude medical students. It was suggested that the membership status of the medical student applicant should be checked, and members will be asked to review their original score with this information clarified. It was agreed that a final decision on the nominee for this award is to be sought by email following this course of action outside of the meeting.

ACTION: Ms Hines to update the Payne Stafford Tan rubric to clarify the award eligibility

ACTION: Ms Hines to check applicant eligibility and recirculate details to Executive Board for further consideration

NIAAB/11.2018/10 RCoA SMALL RESEARCH GRANTS AND MAURICE HUDSON PRIZE

Ms Hines provided an update to members, advising that a small grants sub-committee panel had been formed consisting of a number of funding partner members and chaired by Dr Felicity Plaats from the OAA, that had reviewed and scored all applications received. Scores and rankings had been circulated for members' information in advance. The Maurice Hudson rankings were a very close call between the applicants however Dr Plaats had taken a chair's decision on the overall winner, which will be presented to the RCoA Nominations Committee and CQR Board for ratification in December after which all applicants will be notified of the outcome, so are to remain confidential until then. There were no further comments from the membership.

NIAAB/11.2018/11 NIHR SPECIALTY GROUP

Prof Grocott informed members that he will be stepping down from his role as Chair of the Specialty Group within the next 18 months and succession planning will take place during 2019-20. Three individuals have been recruited to take various Deputy Lead roles within the Group in 3 areas of activity: Dr Gudrun Kunst in Commercial, Dr Sam Eldabe in Pain Medicine and Dr Dan Martin in Research training, which is complementary to his role with the NIAA. Dr Eldabe will be forming a pain medicine sub-group, which will complement the Commercial strand, as these types of studies often require input that the rest of the group may not be able to provide. The portfolio metrics are performing well and the specialty continues to perform well against other groups. Dr Martin provided a brief related update following a recent meeting he had attended, which had highlighted good examples of stratified medicine in various specialties and noted that considerable levels of funding

from the NIHR is being directed towards this area and is therefore worth the APOMP speciality considering how best to utilise this and apply for this funding. Prof Grocott shared that the recent Senior Investigators meeting had discussed the topics of public health, mental health and multi-morbidity, which are high on the Specialist Group agenda.

NIAAB/11.2018/12 ACADEMIC TRAINING

Dr Martin advised that updates to the Trainee pages on the NIAA website had been undertaken, with support from Mr Goodwin and Ms Hines, and now includes updated trainee stories as well as the academic training guidance publication which is available to download from the site. Dr Martin had recent discussions with Dr Chris Carey and Dr Carl Waldmann to address the issues, which had become apparent following the report Dr Martin had undertaken to identify the barriers to pursuing academic training in anaesthesia, both of which were supportive conversations. In light of this, Dr Martin has authored an article for the RCoA *Bulletin* to highlight some of the issues identified in the report, and he will be attending the College Tutors meeting in 2019 to deliver a presentation on academic anaesthesia and illustrate how CTs can help address some of these issues. He will also be organising a stakeholders meeting with senior academics, particularly those who manage ACF and CL posts to discuss some of the national/regional variations experienced by trainees. Dr Martin had attended the recent BMA Pan Profession meeting of academic trainees with Dr Sam Clark and Dr Annemarie Docherty, which had covered issues such as contracts, pay protection and honorary contracts. A BMA survey is currently being circulated, attempting to collect views on the junior doctor contract review amongst other issues, and support has been requested particularly from academic trainees, for which Dr Martin would like to utilise the NIAA's social media channels to publicise and encourage participation in the survey. The BMA is also organising a national clinical academic trainees meeting in February 2019. Dr Martin also mentioned the credentials in research system for clinicians, currently being developed by the RCP that will complement their pathway. Dr Wilson questioned which grade the credential system is being aimed at. Dr Martin explained that his perception is that it will be aimed at anyone engaged in research, but this will become clearer at the next cross-college academic leads meeting which he will attend. Members were keen to understand how the credential system will impact on research in the anaesthetic speciality.

NIAAB/11.2018/13 CLINICAL TRIALS NETWORK

Mr Goodwin provided a brief updated on CTN activity in Dr Yeung and Prof Pearse's absence. There were no further questions or comments from members. A decision was sought on the wording of a paragraph of text, which is planned to be appended to any published papers from trials that the Network has adopted, to acknowledge POMCTN support and outlines the infrastructure funding relationship between the CTN and NIAA founding partners. As there were a number of founding partners absent from this part of the meeting, it was agreed that views will be sought by email outside of the meeting so that all partners are represented in the decision.

ACTION: Ms Hines to circulate the CTN acknowledgment text by email to Founding partners for a final decision on the wording

NIAAB/11.2018/14 HEALTH SERVICES RESEARCH CENTRE

Prof Moonesinghe advised that the NELA Year 4 report had been published in the previous week. The NAP7 topic has been confirmed as Perioperative Cardiac Arrest and the Clinical Lead post is currently open for applications, and the NAPs will also appoint a trainee role for first time. Publications from SNAP2 were published in September. PQIP will have its first Scottish site on-board soon. There is a 12-page HSRC supplement in the November *Bulletin*. HSRC will be appointing Fellows for next year, in partnership with regional hospitals. There will be a collaboration with APA to launch in the Spring – representatives will come from the OAA and a research fellow. Resources are becoming stretched – the HSRC will be launching PIRL next year, Iain is leading their work on developing registries (FONA), and they are planning to expand international collaborations. HSRC have submitted a paper to College finance committee for increased budget on the SNAP programme. Scientific Advisory Board will provide regular external review of their activities and there has been agreement over who will be on this board.

NIAAB/11.2018/15 EXPERIMENTAL MEDICINE AND DISCOVERY SCIENCE GROUP

Prof Grocott advised members for information that Dr Gareth Ackland has taken the lead on the early science group, which has held two meetings so far this year. There will be an Editorial published in the *BJA*, and a related grant call which will be led by the *BJA* in the future.

NIAAB/11.2018/16 NIAA COMMUNICATIONS

Ms Hines provided a brief update to members on NIAA communications activity. Members discussed the draft version of the NIAA Comprehensive Review that had been circulated in advance of the meeting, which included the full published *Anaesthesia* analysis paper on NIAA grants, which had led to some contention from some partners on original publication. As not all partners were present for this discussion, Prof Grocott agreed to discuss this outside of the meeting in an attempt to reach some agreement.

ACTION: Prof Grocott to discuss BJA views on including the *Anaesthesia* NIAA grants analysis paper in the NIAA Comprehensive Review with Prof Galley

NIAAB/11.2018/17 ANY OTHER BUSINESS

It was discussed that the length of the meetings are not always clear, so the agenda should include the meeting start and end time for clarity in future to help members with planning other activities/meetings.

ACTION: Ms Hines to update meeting agenda template in future to include start and end time

NIAAB/11.2018/18 DATES OF FUTURE BOARD MEETINGS

*Tuesday 5 February 2019, 13:00, RCoA (**Executive Board meeting follows main meeting**)

*N.B. change of date from previously scheduled meeting

Further meeting dates TBC

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 July 2018	Next meeting
3	Matters Arising	Ms Hines	Upload the revised final version of the specialist society membership application to the NIAA website	Next meeting
4	NIAA External Review	Prof Grocott	Approach Prof Merry to ascertain availability and interest in being involved in the NIAA review	Next meeting
			Identify appropriate lay person(s), and consider approaching RCoA membership engagement panel for input	
5	NIAA Scientific Meetings & Annual Research Award	Prof Grocott	Return the Board's comments on the proposal to the working group for further consideration and planning	Next meeting
6	Restructuring of NIAA Board & Research Council	Prof Grocott	Present proposal paper to Research Council for discussion, with further revised paper to be presented for approval at next Board meeting	Next meeting
7.1	NIAA Grants	Dr Ferguson	Discuss with Association/ <i>Anaesthesia</i> colleagues re: AMRC membership	Next meeting
7.2	Grants Review update	Ms Hines	Amend survey to include questions on transparency	Next meeting
8	RCoA Macintosh Professorship	Ms Hines	Update rubric to clarify that the NIAA reserves the right to nominate more than one candidate for the Macintosh Professorship in any given year	Next meeting
9	Payne Stafford Tan Award	Ms Hines	Update the Payne Stafford Tan rubric to clarify the award eligibility	ASAP
		Ms Hines	Check applicant eligibility and recirculate details to Executive Board for further consideration	ASAP
13	Clinical Trials Network	Ms Hines	Circulate the CTN acknowledgment text by email to Founding partners for a final decision on the wording	ASAP
16	NIAA Communications	Prof Grocott	Discuss <i>BJA</i> views on including the <i>Anaesthesia</i> NIAA grants analysis paper in the NIAA Comprehensive Review with Prof Galley	ASAP
17	Any Other Business	Ms Hines	Update meeting agenda template in future to include start and end time	Next meeting