



BOARD MEETING

Minutes of the meeting held on Tuesday 5 February 2019

Members:

Dr P Clyburn	Association of Anaesthetists
Mrs J Dorey	Royal College of Anaesthetists' Lay Committee rep
*Prof H Galley	<i>British Journal of Anaesthesia</i>
Prof M Grocott	Chair, NIAA Board
*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
Prof R Pearse	Director, UK Perioperative Medicine Clinical Trials Network
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 K Ferguson	Association of Anaesthetists
Prof J Hall	Royal College of Anaesthetists' Council
Dr M Nathanson	Chair, NIAA Research Council (to June 2019)

*Joined the meeting remotely

NIAAB/02.2019/1 WELCOME AND APOLOGIES

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

NIAAB/02.2019/2 MINUTES OF THE PREVIOUS MEETING

The confidential and non-confidential minutes of the meeting held on 14 November 2018 were approved as an accurate record.

Actions from the previous meeting were confirmed as complete, in progress, or as items on the agenda to be discussed, with the exception of item 7.1 where Dr Clyburn confirmed that the Association had previously looked at AMRC membership some years ago but had found what was felt to be the onerous burden of completing the necessary financial reporting. Ms Drake offered to liaise with the Association staff to provide guidance in this regard if this would be helpful.

ACTION: Ms Hines to upload the confirmed non-confidential minutes of the meeting held on 14 November 2018 to the NIAA website.

ACTION: Ms Drake to liaise with Association staff for guidance re: AMRC reporting requirements.

NIAAB/02.2019/3 MATTERS ARISING

3.1 NIAAB/11.2018/8 Macintosh Professorship

Ms Hines advised members that the nominations for two Professorships discussed at the last meeting had now been approved by the RCoA Nominations Committee and the Clinical Quality & Research Board. These were confirmed as Dr Andrew Klein, Cambridge and Dr Robert Sanders, USA who will each deliver a lecture and be presented with their Professorships at RCoA Educational events/meetings over the next year.

NIAAB/02.2019/4 ATHENA SWAN

Prof Grocott opened discussion on the topic of current diversity imbalances within academic anaesthesia, and specifically how the NIAA can play an active role in addressing these. It was noted that the RCoA are making attempts at this by including more female speakers on the programme for events and meetings, but that gender should not be the only inequality to focus on. Dr Klein mentioned that the NIAA grants analysis paper published in *Anaesthesia* last year showed that the rate of success is relatively comparable between male and female applicants; however the rate of actual applications between genders shows a marked difference and this is felt to be the area where more encouragement for women is needed. The discussion continued with comments noting the generally good gender balance across the speciality, however this appears to be mostly at trainee and early career level where women are well represented but reverses at more senior levels; this can generally be seen across the NIHR on the whole. It was countered that encouraging trainee development is within the remit of both parties, but the opportunity to promote diversity in gender and other areas feels less so. Suggestions for promoting these opportunities through the NIAA were discussed, including publishing a *BJA* special issue on women in anaesthesia, incorporating female representation in the PRATO meeting programme, and developing a Professorship opportunity targeting female applicants. Offering financial support to individuals involved in research activity – perhaps covering costs during maternity – was a suggested way to aid greater inclusion; it was pointed out that most Universities already have these provisions, but this does not always apply in NHS settings. Collating and promoting data on the NIAA's current rates of diversity in terms of the grants portfolio and broadening this to include both applicants and peer reviewers was also suggested, as a way of carrying out a gap analysis against the existing Athena SWAN framework to identify where efforts need to be directed. It was also suggested that publicising the career profiles of women who appear to have 'bucked the trend' in academic anaesthesia and what they did to achieve this may prove encouraging to others. A suggestion was made to develop a form of guidance outlining an expected speaker gender balance for any NIAA badged meetings, noting that the College currently has an ambition of at least 40% female speakers for educational event programmes. Developing a roster of diverse speakers for meetings and other events, and more support for speaker invites which are turned down in favour of suggesting a more diverse alternative were encouraged. The issue of positive discrimination was raised, and Prof Galley mentioned she would be happy to share a diversity report for a meeting she had recently attended, and Dr Wilson agreed to look at the diversity issue from the NIAA grants perspective – it was suggested this should include geographic as well as demographic data. Following the general discussion Prof Grocott asked for members who would form a task and finish group and take this work forward. Prof Moonesinghe, Prof Pearse, and Prof Galley volunteered themselves, and Prof Moppett and Dr Docherty were also suggested as additional members to be part of this group.

ACTION: Task and finish group to be assembled to take forward NIAA's plans to promote diversity within academic anaesthesia

NIAAB/02.2019/5 NIAA EXTERNAL REVIEW

Prof Grocott drew members' attention to the previously circulated paper that included a slightly larger review panel than had originally been planned. He noted that it is now planned to conduct the review alongside the RCoA's 'Anaesthesia 2020' meeting, which is likely to take place in May 2020, in order to neutralise costs for international review panel members who will also be speaking at the event. It was acknowledged that this will delay the review, but this was not felt to be a critical delay as the quality of the review is deemed to be more important, and streamlining the activities overall in order to maximise costs and time will be a benefit to the overall process. Following the earlier discussion on diversity, it was pointed out that the external review will provide an appropriate opportunity to include female representatives on the panel and with some targeted 'recruitment' the College's membership engagement panel could be approached in this regard.

NIAAB/02.2019/6 NIAA SCIENTIFIC MEETINGS & ANNUAL RESEARCH AWARD

Prof Grocott updated members on the most recent developments of the planned 2-day meeting, which will replace the previous NIAA Annual Scientific Meeting. It was noted that the date is likely to be across 2 days in early December but is still subject to budget confirmation; Dr Howell has been involved in early discussions with a possible venue and has been liaising with Prof Grocott over other details. It was noted that all parties who will be involved in the programming of the event would need to be in agreement over the content, i.e. HSRC, POMCTN, BJA Research Forum, plus NIAA partners.

NIAAB/02.2019/7 RESTRUCTURING OF NIAA BOARD & RESEARCH COUNCIL MEETINGS

Prof Grocott informed members that the previously discussed proposal had mostly been agreed when presented at the Research Council meeting in December; however, there had been some modifications as the group had not agreed to the proposal for having one overall chair and the conclusion had been to retain separate chairs for both meetings. It was agreed to continue with the Research Council chair role being rotated in turn through each founding partner, and that the next representative should be from the College once Dr Nathanson's term ends in June. Dr Klein noted there could be some difficulties in identifying a representative from *Anaesthesia* due to there being a smaller pool of candidates, and for this reason it may be necessary to nominate an individual from the Association.

ACTION: NIAA Coordinator to request that the RCoA Clinical Quality & Research Board nominate a College representative for the NIAA Research Council role from June 2019

NIAAB/02.2019/8 NIAA GRANTS

Dr Wilson informed members that the financial information contained within the Grant Officer report circulated for this meeting supersedes that in the report presented at the previous meeting in November. An administrative error, which was not picked up until after the grant committee meeting in December, had led to an unexpected underspend reported on the *BJA/RCoA* PhD Studentship category. The error had arisen due to difficulties in reviewing the application forms for this particular grant stream, as the total grant amounts being requested were not very clearly presented. Dr Wilson assured members that the error had been rectified very swiftly once it had been identified, noting that colleagues at the *BJA* had been gracious in their understanding of the situation and following internal discussions had agreed to honour awarding the corrected (increased) total requested amount on the basis that the scientific merit of the projects approved funding in the meeting was not in question. Dr Wilson also assured members that internal quality control measures would be introduced for each grant round going forwards. Prof Galley noted that she had been required to justify the consumable costs in the budget for the application submitted to the round, and questioned whether this had been required of all applicants. Dr Wilson responded this had only been necessary, as there was a noticeable discrepancy between the requested sums of this application, against the others submitted in the category, due to the previously mentioned shortfall error. Dr Wilson also pointed out that no grants had been awarded under the joint *BJA/College of Anaesthetists of Ireland* grant call, as the only application submitted was outside of the criteria so the budget for this call will be held over for a future NIAA grant round. Dr Wilson updated members on the implementation of the Researchfish platform to monitor outcomes and reporting for NIAA grants, noting that successfully funded applicants from 2019 Round 1 onwards will be required to utilise Researchfish to submit reports on the outputs of their NIAA-funded research. It was confirmed that historic grant-holders would not be required to report through Researchfish retrospectively.

NIAAB/02.2019/9 NIHR SPECIALTY GROUP

Prof Grocott provided a brief update for members, noting that three deputy leads have been appointed for the specialty group to take forward the group's work in the areas of commercial studies, pain medicine and research training – these leads are Dr Gudrun Kunst, Dr Sam Eldabe and Dr Dan Martin respectively. A pain medicine sub-group is currently in development, chaired by Dr Eldabe and involving Prof Lesley Colvin, which will be holding parallel meetings with other related specialty groups where there is a crossover. An 'incubator' special interest group is currently being assembled which will focus on the broader acute medicine agenda to include anaesthesia, perioperative medicine, critical care, and surgical emergencies, similar to the existing Public Health NIHR Incubator. More updates will follow in future meetings as this work develops.

NIAAB/02.2019/10 ACADEMIC TRAINING

Dr Martin updated members on the contents of his written report, noting that he had written a first draft of an article for the *Bulletin*, which was intended to outline the barriers to academic anaesthesia that trainees experience. On review, RCoA Training Committee Chair Dr Carey had suggested that the article should have a more positive message so it is currently being revised and will be resubmitted to Dr Carey. Dr Annemarie Docherty will be speaking at the College Tutors meeting in June, which will enable greater engagement with TPDs and will encourage the message around triple accreditation. Dr Martin mentioned the BMA academic trainees meeting he recently attended, which had mainly focused on the subjects of contracts, fair pay and maternity pay. A BMA national clinical academic trainee conference is to be held in London, which has been advertised on the NIAA website and is being promoted through social media.

Dr Martin advised that the College's curriculum review is ongoing and a draft version of the revised Annex G will be presented for discussion at the next NIAA Board meeting; the final deadline for the overall review is October 2019. Prof Grocott queried whether the Board will be expected to comment on the draft document once it is presented or if this will be for information only. Dr Martin clarified that it would be useful for others to comment but that it will ultimately need sign off from the RCoA Training Committee. It was discussed that it would be useful to highlight personal stories from HSRC Fellows who have achieved triple accreditation, to illustrate that this can be done and to help encourage others.

NIAAB/02.2019/11 CLINICAL TRIALS NETWORK

Prof Pearse updated members on recent CTN activities, including the 2-day Annual meeting in November, where there was high engagement from those in attendance and the feedback had been positive, although it was noted that delegates from the North West region had found it difficult to travel to attend. The CTN's first trial – a feasibility study – had been submitted for HTA funding in the past month, and there are a few other trials that will be submitted for funding bids in the coming months. These applications are part of the CTN's financial strategy to generate income through its clinical trials portfolio. It was noted that the CTN is slightly overspent on its projected budget over the next three years. Mr Goodwin clarified that it is expected to be possible to offset this overspend across the 3 year period. Prof Pearse noted that the outcome of the planned grant funding applications would help determine the CTN's future strategy, and they plan to add a 'CTN fee' to the grant application. It was queried whether this is in fact a sustainable solution, which led to a discussion on how best to address the CTN's funding situation whilst retaining the full intentions of the Network. It was raised whether sponsorship for the trials being supported by the Network is a possibility; Prof Grocott clarified that the NIAA is not in any position to sponsor any trials. The CTN is currently conducting open recruitment for the next round of Chief Investigators and vacancies on its Board and interviews are to be held later this month.

NIAAB/02.2019/12 HEALTH SERVICES RESEARCH CENTRE

Prof Moonesinghe advised members that the NAP7 clinical lead, Dr Jasmeet Soar, has been recruited. Three trainees have also been appointed to support the NAPs in fellowship roles. Three-quarters of funding requested from the College towards future SNAPs has been granted, with the potential for additional funding to be approved if no other external funds are secured. A SNAP-2 manuscript has been published and one other is in review. There are currently over 100 sites recruiting patients to PQIP and the study is now on the NHS England Quality Account List. Eight regional HSRC Fellows have been recruited, who will start in August and will be based in NHS hospitals in Bath, Exeter, Middlesbrough, Nottingham, UCL, St George's and two London private partner hospitals. CASAP will be starting later in the spring; data governance issues that needed to be resolved caused a delay however it is expected that CASAP will be applying for ethical approval in the next month. It was noted that there is a requirement to increase HSRC's funding for its leadership in order to plan for successors, and possibly increase this up to 5 PAs across the next few years.

NIAAB/02.2019/13 EXPERIMENTAL MEDICINE AND DISCOVERY SCIENCE GROUP

There was nothing to update under this item, however Prof Galley noted that an article on the subject had been published. During the recent Research Council meeting it had been suggested that the experimental medicine lead, Dr Gareth Ackland, should be invited to attend future Board meetings in order to facilitate continued engagement and reporting in this area. Members agreed with this suggestion.

ACTION: Ms Hines to extend invitation to Dr Ackland to attend NIAA Board meetings going forward

NIAAB/02.2019/14 3RD ANNUAL REF FORUM

Following the NIAA's nominations to the REF2021 exercise an invitation for the 3rd Annual REF Forum had been received by the College. It was discussed whether any Board members would be prepared to attend this meeting, which will provide an opportunity to discuss the latest REF developments and how to optimise institutional research practices and will be taking place in London in March. Prof Grocott volunteered to attend and will report back at the next meeting.

ACTION: Prof Grocott to attend REF Forum meeting on 20th March 2019

NIAAB/02.2019/15 NIAA COMMUNICATIONS

Ms Hines presented the standard communications report, and Mr Goodwin made members aware of the new redesigned NIAA, HSRC and Research project logos. There were no further comments made.

NIAAB/02.2019/16 ANY OTHER BUSINESS

Prof Pearse mentioned some international research work he has been involved in, working with Dr Bruce Biccard. The NIHR-funded global surgery unit in Birmingham has now started carrying out perioperative work and Prof Pearse noted that he will likely be the CI for the first trial that will come from this unit (chlorhexidine mouthwash).

It was mentioned that the NIHR are likely to issue a future grant call for global health units in research, and that there have been discussions with the unit in Birmingham on setting up an anaesthesia-perioperative medicine unit for global health. It was discussed whether the NIAA should be involved in this work, to help with identifying relevant researchers where necessary and provide opportunities for cross working. As the College and the Association both have an interest in global health this could be a useful way to share information on progress from different parties; however, it was questioned whether this should focus on research, rather than education given both partners' different focus.

Prof Moonesinghe mentioned that the HSRC is developing a global health strategy, which will aim to provide mentoring, long-distance support for overseas researchers, UK fellowships. There have been recent discussions regarding future partnerships in India. A review of the HSRC strategy document is to be discussed at the next EMB meeting and will include these conversations.

Dr Wilson advised that there is opportunity to include perioperative medicine in global women's health, relating to caesarean sections.

The discussion included the best way to coordinate all the activity currently taking place in this area of work and whether this may be to convene a meeting with all relevant parties. Dr Clyburn advised that the Association's focus is on international education, noting that an East African College of Anaesthetists is in the process of being developed. The Association's International Relations Committee (IRC) meet every quarter and Dr Clyburn extended an invitation for members to attend. It was noted that these conversations and meetings would potentially enable a well-networked group to respond to a future NIHR funding call.

ACTION: Prof Pearse and Prof Moonesinghe to develop a proposal for future Board discussion on the topic of NIAA involvement in global health research

NIAAB/02.2019/17 DATES OF FUTURE MEETINGS

NIAA Board, Thursday 11 April 2019, 14:00 – 16:00, Teleconference

NIAA Board & Research Council, Thursday 18 July 2019, 10:00 – 13:00, Portland Place

ACTION POINTS

Item		Responsible	Action	Due
2	Minutes of the previous meeting	Ms Hines	Upload the confirmed non-confidential minutes of meeting on 14 November 2018	Next meeting
		Ms Drake	Liaise with Association staff for guidance re: AMRC reporting requirements	ASAP
4	Athena Swan	Prof Moonesinghe Prof Pearse Prof Galley	Task and finish group to be assembled to take forward NIAA's plans to promote diversity within academic anaesthesia	ASAP
7	NIAA Research Council	NIAA Coordinator	Request that the RCoA Clinical Quality & Research Board nominate a College representative for the NIAA Research Council role from June 2019	Next meeting
13	Experimental Medicine and Discovery Science	Ms Hines	Extend invitation to Dr Ackland to attend NIAA Board meetings	Next meeting
14	3 rd Annual REF Forum	Prof Grocott	Attend meeting on 20 th March 2019 and report back to Board	Next meeting
16	Any Other Business	Prof Pearse Prof Moonesinghe	Develop a proposal for future Board discussion on the topic of NIAA involvement in global health research	ASAP