



BOARD & RESEARCH COUNCIL MEETING

Minutes of the meeting held on Thursday 18 July 2019

NIAA Board:

Prof M Grocott	Chair, NIAA Board
Dr G Ackland	Experimental Medicine Lead
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
Prof R Pearse	Director, UK Perioperative Medicine Clinical Trials Network
*Dr M Wilson	NIAA Grants Officer

NIAA Research Council:

*Dr M Nathanson	Chair, NIAA Research Council (to September 2020)
*Prof F Gao	NIHR Senior Investigator
*Dr P Kumar	Society for Education in Anaesthesia UK
*Dr A Owen	NIAA Trainee Representative
*Dr A Macfarlane	Regional Anaesthesia UK
Dr F Laat	Obstetric Anaesthetists' Association
Dr K Samuel	Research & Audit Federation of Trainees, Chair
Lt Col T Woolley	Royal Centre for Defence Medicine
*Attended meeting remotely	

In attendance:

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

Apologies:

Dr J Coles	Neuroanaesthesia & Critical Care Society of Great Britain and Ireland
Dr M Davies	Association of Anaesthetists
Dr A Docherty	NIAA Trainee Representative
Ms S Drake	Director of Clinical Quality & Research, Royal College of Anaesthetists
Dr K El-Boghdady	Difficult Airway Society
Prof T Engelhardt	Association of Paediatric Anaesthetists of Great Britain & Ireland
Prof A Klein	<i>Anaesthesia</i>
Dr G Kunst	Association for Cardiothoracic Anaesthesia and Critical Care
Prof D Lambert	<i>British Journal of Anaesthesia</i>
Dr D Martin	Academic Training Coordinator
Prof D Menon	NIHR Senior Investigator
Prof R Moonesinghe	Director, Health Services Research Centre
Dr R Mouton	Vascular Anaesthesia Society of Great Britain & Ireland
Dr B Ratnayake	Specialist Society Representative (2019 – 2020)

NIAAB/07.2019/1 WELCOME AND APOLOGIES

The Chair welcomed all to the meeting and introductions were made. Apologies were noted as above.

NIAAB/07.2019/2 MINUTES OF THE PREVIOUS MEETINGS

Minutes of the Research Council meeting held on 13 December 2018 were discussed, where there was a query on an action point under item 9: Academic Trainees. It was discussed that although the agreed letter had not been drafted, events had moved on and been overtaken by other

developments since the last meeting. Dr Martin had met with Programme Directors during the summer and has been involved in discussions about the curriculum with the RCoA Training Committee, on which he had consulted extensively with both the NIAA Board & Research Council. Prof Grocott provided an update on the action under item 11: NIHR Specialty Group, noting that he had held discussions with the RCoA Head of Communications re: promotion of the NIHR patient recruitment statistics and success stories. There were no further comments and the minutes were approved.

There were no comments on the minutes from the Board meeting held on 11 April 2019, and all actions either had been completed or would be discussed under the relevant agenda items in this meeting.

ACTION: Ms Hines to upload the confirmed non-confidential Research Council minutes of the meeting held on 13 December, and the Board minutes of the meeting on 11 April 2019 to the NIAA website.

NIAAB/07.2019/3 MATTERS ARISING

There were no matters arising as previous actions were completed or were to be discussed as agenda items in this meeting.

NIAAB/07.2019/4 NIAA RESEARCH COUNCIL CHAIR

Members discussed Dr Nathanson's proposal to extend the Research Council chair role rotation to two years, from one year, in order to allow for greater continuity and more time for the post holder to embed into the role. This had previously been discussed at the most recent Board meeting and was being raised at this meeting for discussion with Research Council members. There was agreement from the members present that this should be effective immediately and therefore Dr Nathanson's term will continue until September 2020, after which the next partner representative (RCoA) will be nominated to the role.

ACTION: Dr Nathanson to continue as Research Council Chair to September 2020, effective immediately

NIAAB/07.2019/5 BOC CHAIR OF ANAESTHESIA AWARD 2020-2024

Prof Grocott introduced the paper that had been circulated, which outlined a number of options for awarding the next round of BOC grant including the resources available and how these could be distributed to provide the best value for money and to make the grant award more attractive to applicants by increasing its value from previous years'. There was lengthy discussion on many issues related to the awarding of the grant including managing potential conflicts of interest within the suggested panel, where it was decided that any panel member from the same institution as any applicant should not be involved in the review of the application at all. It was also suggested that a clinical academic from outside of the speciality should also be part of the panel, as well as a possible representative from a blue chip funder such as MRC or NIHR, and a representative from the RCS. Members discussed the implications for the options presented, noting that the number of eventual applicants will have an effect on how the funds can be distributed, but that the review panel should be afforded sufficient flexibility within the funds that are available. A discussion on the grant award period followed, where it was considered whether the BOC grant should be advertised and awarded every two years – for a four-year programme of work – rather than every four years that it has been to date. There was discussion on how the award can affect an individual's career progression, demonstrating the investment and support for the awarded individual(s) from the speciality, which can lead to greater additional resources being invested into them. Board members eventually agreed that the next BOC grant should be awarded at £320,000 to one candidate across a four-year period, and it will be re-advertised in 2022 with the intention to award at the same level again then.

NIAAB/07.2019/6 EQUALITIES, DIVERSITY & INCLUSION

Members discussed Prof Moonesinghe's written update on the EDI work, in her absence. It was noted that Prof Moonesinghe had held 1:1 phone calls with most members of the working group, and that a face-to-face meeting with the whole group would be held in September to agree a final output and recommendations, which will be presented to NIAA partners and external bodies. Prof Gao

queried whether the NIHR's EDI group, of which she is a member, would be useful in this regard and offered to contact Prof Moonesinghe to provide any support where required.

ACTION: Prof Gao to contact Prof Moonesinghe to discuss potential NIHR support available for EDI

NIAAB/07.2019/7 GLOBAL HEALTH RESEARCH

Prof Pearse advised members that following the previous Board meeting, the agreed actions on this topic had been overtaken by the funding application deadline, which meant there had only been 8 weeks to put a funding bid together which did not allow other NIAA members to be as involved as they would have liked. The bid was led by Prof Pearse due to Prof Moonesinghe's other commitments. Further information will be provided where necessary, but otherwise this item will only be discussed when there is anything of relevance to update NIAA members on.

NIAAB/07.2019/8 NIAA GRANTS

Dr Wilson advised members that the most recent NIAA grant round, which closed in April and met for committee discussion in June, had the highest number of applications submitted to any NIAA grant round to date. This had made decision-making particularly difficult especially for the partners who had received the largest number of applications – the Association and the BJA. The success rate in this round was lower due to higher numbers and greater competition. Dr Wilson advised that a discussion on active demand management had taken place at the grant committee meeting, for example by implementing external measures such as restricting departments/units to only one application per round, or only one submission per lead applicant/Principal Investigator. Another option discussed was to add guidance to the NIAA grants forms and website outlining the committee's expectation that departments would discuss internally before any individual submits an application, to avoid unknowingly competing for the same funding. Members discussed whether it was fair to implement these suggested measures, especially if the final decisions made in the meeting are based on the scientific merit of the submitted applications rather than being managed before the submission stage. Members agreed it would be useful to know whether there is an increasing number of credible applications being submitted or just larger numbers of poor applications, which could support a case for increased resources such as the Association's external funding from Barema. It was also discussed whether the feedback given to applicants is helpful and whether there is a formal way of tracking this. Dr Wilson responded that this is not currently the case but could be investigated as a future possibility.

NIAAB/07.2019/9 JOHN SNOW AWARDS

Ms Hines advised members of the students that had been successful in their John Snow award applications this year, as outlined in the circulated paper. Nine students from six UK institutions (Edinburgh, Glasgow, Imperial, Bristol, Sheffield, and Leicester) had been awarded £2,000 each from either the BJA/RCoA or the Association/Anaesthesia, or £1,000 from NACCSGBI. All applicants had been notified and details have been uploaded to the NIAA website. There was no further discussion on this item.

NIAAB/07.2019/10 NIHR SPECIALTY GROUP

Prof Grocott noted that he will be stepping down from his role as NIHR national specialty lead in April 2020. The role will start to be advertised from the autumn and Prof Grocott explained he would like NIAA support with this in due course. He also noted that the APOMP portfolio is now very large with over 60 studies and almost 40,000 patients recruited. Of note, Prof Grocott advised that a Critical Care NIHR special interest virtual group is being developed and will be meeting in September, and that the joint RCoA/NIHR research award winners had recently been announced. Dr Louise Savic won the Consultant category, Dr Jennifer Noyes won the Trainee category and Severn Trainee Anaesthetic Research (STAR) Group won the Trainee Network category. All awards will be presented at the Anaesthesia Research 2019 York meeting in December.

NIAAB/07.2019/11 ACADEMIC TRAINING

11a. Academic Training

Prof Grocott introduced the academic training discussion paper in Dr Martin's absence. The main points to note were that the research section of the 2020 curriculum document had been viewed and commented on by both NIAA Board and Research Council members. This feedback has been discussed with Dr Penfold and the final agreed revised version will be refined and re-presented to the NIAA in due course, following submission to the GMC. Dr Owen had a query on Dr Martin's update

regarding the review of ACF that had been undertaken, and it was suggested that he should contact Dr Martin directly to raise the query with him.

11b. RAFT

Dr Samuel advised members that RAFT has now fully appointed a new committee since the start of the year, which includes a Vice Chair for ICM as well as Anaesthesia. This new committee has also introduced a new model of working, in which RAFT will aim to run a project more regularly, every three years, with the intervening years being spent collaborating with other groups that are interested in delivering national trainee projects. They are also aiming to set out RAFT's level of support for portfolio studies more clearly, so as to clarify for trainees what is expected in terms of participating on national portfolio studies. RAFT have also introduced 3-year terms for committee members so that they serve a term that is parallel with a project term, and to help make sure that most of the committee are still in training posts whilst carrying out RAFT duties rather than trying to manage all of their other commitments as Consultants as well. The next RAFT project will be SQUEEZE, planned for Q2 in 2020, and will be an international project supported by ESA. Although a recent grant application for this project was unsuccessful RAFT are seeking alternative funds.

NIAAB/07.2019/12 CLINICAL TRIALS NETWORK

Prof Pearce introduced the new style of report that had been circulated to members, which going forward will now report on CTN performance metrics. A short CTN strategy document is currently being compiled, which will be informed by the metrics that are now being collected. Some feedback on the new report included perhaps developing it to include some narrative to put the stats into context, rather than just reporting on numbers. Lt. Col. Woolley noted that he is trying to do a similar exercise in pulling stats together to demonstrate the impact for military anaesthesia being made by his department. It was agreed that these more detailed reports should be presented at future face-to-face NIAA meetings, rather than teleconferences, where they can be discussed in more detail and should include the metric's running totals and some brief narrative content on success stories.

NIAAB/07.2019/13 HEALTH SERVICES RESEARCH CENTRE

Prof Grocott provided a brief overview of the HSRC's update report, in Prof Moonesinghe's absence. Prof Pearce noted the recent SNAP3 topic selection exercise and queried whether any support could be given to the unsuccessful topic suggestions and what this could look like. It was put forward that feedback could be provided to the HSRC suggesting that they could circulate the list of topics, and/or put the unsuccessful applicants in touch with each other to suggest mutual support for developing the topics that had been proposed and may be suitable for further development in alternative ways.

NIAAB/07.2019/14 EXPERIMENTAL MEDICINE & DISCOVERY SCIENCE

Dr Ackland advised that the draft paper outlined in his update report is to be reviewed by Prof Galley and Prof Lambert, and will look at the capacity for experimental medicine in the UK as compared to the US. It will provide an assessment of the current landscape as it is felt that there are currently very few PIs engaged in the MRC recognised definition of experimental medicine, suggesting a lack of capacity and indicating that the specialty currently would not be particularly well placed to take advantage of the advances being made in this field of research. Prof Grocott suggested making contact with the acute care special interest group to support this developing work and carry out a scoping exercise. Dr Owen suggested that looking at the barriers to engaging with this type of research earlier in a trainee's career might help to identify what the barriers could be further down the career path; Dr Ackland noted that he had experienced difficulties in gathering this information in the first place and welcomed Dr Owen's support in developing this work further where possible.

ACTION: Prof Grocott to link Dr Ackland with representatives from the acute care special interest group, to undertake a scoping exercise on experimental medicine

NIAAB/07.2019/15 MILITARY ANAESTHESIA

Col Woolley updated members on current military activities, noting that the new Director General of Defence Medical Services, Peter Homa, has been recruited. Col Woolley advised that Mr Homa has a keen interest in research and innovation. Previously this role had the title Surgeon General and has been held by military officers; it is not clear why the role title has been changed. Col Woolley also advised that Caldicott data issues which had been previously reported appear to be reaching a resolution. It is intended that the MOD will be treated as a 'virtual hospital' for which the associated data regulations would apply, and it has been confirmed that the 'section 251' form to be used for

accessing confidential patient information without consent will also apply to the MOD. Col Woolley confirmed that his post expires in February 2021 and provided a recruitment outline for succession planning which will include a number of potential candidates being put forward for each of the military divisions: Navy, Army, and RAF. Col Woolley requested the NIAA's support for academic guidance in recruiting these posts, as a CV review of potential successors would be required - similar to the exercise undertaken by NIAA Board members one or two years ago.

NIAAB/07.2019/16 RESEARCH EVALUATION FRAMEWORK – REF

Prof Grocott advised members that he had circulated a summary of the comprehensive notes he had taken whilst attending the 3rd Annual REF Forum earlier in the spring. Any members who wish to know more about this were advised to contact Prof Grocott directly. Prof Pearce expressed his view on the difficulties of writing an impact statement to support an individual's application for an exercise such as the REF, and that the NIAA could consider how it could support potential candidates in this regard. It was noted that the most recent REF exercise was more reliant on metrics and the next one likely to be even further still.

NIAAB/07.2019/17 ANAESTHESIA RESEARCH 2019

Prof Grocott advised members that a skeleton programme for the 2-day event had been drafted, and circulated for members' information. Discussions had been taking place between members of the content/organising group who had been allocated sessions to fill on the programme namely HSRC, POMCTN and ARS/BJA Research Forum. Members of the Association/*Anaesthesia* expressed some discontent with the current format of the programme and the sessions available to them. It was discussed that due to the nature of this particular event and its multiple strands it has been necessary to share the available time slots as fairly as possible, which may mean that some of the event partners may not have as much space on the programme as they would be used to for other organised events. Prof Grocott reiterated that the intention of the event is to bring the constituent parts of the NIAA together rather than running separate events as there would usually be. It was agreed that further conversations between relevant parties would take place offline outside of this meeting, and further discussions about the future of the event will be held once this year's event has taken place.

NIAAB/07.2019/18 NIAA EXTERNAL REVIEW 2020

Prof Grocott provided a brief verbal update on the external review, advising members that it is proposed this should be undertaken in tandem with the RCoA's *Anaesthesia 2020*, which will take place in May 2020. It is expected that as some of the international members of the review panel will potentially be approached as speakers for *Anaesthesia 2020* and will therefore be present in the UK, this will offset some of the financial costs of the review. Further details will be discussed with the NIAA Board in due course.

NIAAB/07.2019/19 SARS MEETING, MARCH 2020

Prof Grocott advised members that he had received an invitation from Prof Hill of the Society of Academic & Research Surgery (SARS), for the NIAA to collaborate on the SARS Annual Meeting on 19 & 20 March 2020. Prof Pearce expressed some hesitation over this and members questioned what kind of collaboration was being sought – speakers, delegates/attendance, funding support – as this was not clear from the request. Prof Grocott expressed a keen interest in collaborating with SARS for this event, but noted the limited enthusiasm from those present during the discussion.

NIAAB/07.2019/20 NIAA COMMUNICATIONS

Ms Hines briefly noted the contents of the Communications report, for members' information. No further comments were made on this item.

NIAAB/07.2019/21 ANY OTHER BUSINESS

No other business discussed

NIAAB/07.2019/22 DATES OF FUTURE MEETINGS

- NIAA Board, Wednesday 30 October 2019, 14:00 – 16:00, Teleconference
- NIAA Board & Research Council, Monday 24 February 2020, 10:00 – 13:00, RCoA (Followed by Executive Board meeting)

ACTION POINTS

Item		Responsible	Action	Due
2	Minutes of previous meeting	Ms Hines	Upload the confirmed non-confidential minutes of Research Council meeting held on 13 December 2018 and Board meeting held on 11 April 2019, to the NIAA website	Next meeting
4	NIAA Research Council Chair	Dr Nathanson	To continue as Research Council Chair until September 2020	Effective immediately
6	Equalities, Diversity & Inclusion	Prof Gao	Contact Prof Moonesinghe to discuss potential NIHR support available for EDI	ASAP
14	Experimental Medicine & Discovery Science	Prof Grocott Dr Ackland	Prof Grocott to link Dr Ackland with representatives from the acute care special interest group, to undertake a scoping exercise on experimental medicine	ASAP