

The Royal College of Anaesthetists, Churchill House, 35 Red Lion Square, London WC1R 4SG

NATIONAL INSTITUTE OF ACADEMIC ANAESTHESIA

BOARD MEETING

**Minutes of the meeting held on Thursday 31 January at 13:30 pm
in the 6th Floor Council Chamber at the Royal College of Anaesthetists**

Members:

Prof R P Mahajan	Royal College of Anaesthetists, Chairman
Dr E Carter	Co-optee - Trainee Representative
Ms S Drake	Royal College of Anaesthetists, Director of Education and Research
Prof M Grocott	Co-optee - Health Services Research Centre
Dr W Harrop-Griffiths	Association of Anaesthetists of Great Britain and Ireland
Mr D Hepworth	Co-optee - Lay representative, Patient Liaison Group
Prof P Hopkins	Co-optee – Anaesthetic Research Society
Dr F Plaat	Obstetric Anaesthetists' Association
Prof N Webster	British Journal of Anaesthesia

In attendance:

Dr P Clyburn	Representing <i>Anaesthesia</i> on behalf of Dr S Yentis
Miss M Humphrey	HSRC & NAP Administrator
Ms C Bunnell	Committee Secretary (NIAA Administrator)

NIAAB/01/2013 WELCOME

The Chair welcomed members to the meeting including Dr Paul Clyburn, representing the journal *Anaesthesia* on behalf of Dr Steve Yentis and Professor Phil Hopkins, representing the Anaesthetic Research Society (ARS).

NIAAB/02/2013 APOLOGIES

Apologies were received from Professor Julian Bion (Royal College of Anaesthetists, RCoA); Miss Mary Casserly (RCoA, Education & Research Manager); Professor Dave Lambert (National Institute of Academic Anaesthesia, NIAA, Grants Officer & Communications Lead); Colonel P Mahoney (Royal Centre for Defence Medicine); Dr Rob Sanders (Trainee Representative); Wg Cdr Simon Turner (Royal Centre for Defence Medicine); Dr Ramani Moonesinghe (NIAA Academic Trainee Coordinator) attended for part of the meeting by phone; Professor Rob Sneyd (NIAA Research Council, Chairman); Dr Steve Yentis (*Anaesthesia*).

NIAAB/03/2013 MINUTES

The confidential and non-confidential minutes of the meeting held on 27 September 2012 were approved as a correct record with one amendment.

ACTION: NIAA Administrator to upload the non-confidential minutes of the meeting held on 27 September 2012 to the NIAA website.

NIAAB/04/2013 MATTERS ARISING

NIAAB/31/2012 (iv) DAS Professorships

The Chair confirmed that he had written to the President of the Difficult Airway Society (DAS) acknowledging the changes they had made to their original proposal regarding professorships.

NIAAB/39/2012 NIAA Partnership Funding

Professor Webster confirmed that Professor John Norrie, Director of the Health Services Research Unit at the University of Aberdeen, would be attending the next NIAA Board meeting on 25 April to inform the NIAA's research into clinical trials units.

NIAAB/05/2013 CHAIR'S REPORT

The Chair reported on the following item from the Research Council meeting that morning:

Proposal for a Second Research Priority Setting Exercise

The Research Council had received a detailed proposal from Dr Simon Howell, Dr Mike Galsworthy and Professor Mike Grocott, outlining the case for a second research priority setting exercise.

The Research Council had welcomed the proposal, agreeing that it would be timely given that the National Evaluation, Trials, and Studies Coordinating Centre (NETSCC) was now overseeing the James Lind Alliance Priority Setting Partnerships (PSP), making the process more structured and transparent. The Chair invited the Board to approve the exercise and asked members to consider how it should be funded.

A discussion then followed around the necessity of conducting a second exercise and whether tangible results could be guaranteed. Board members were keen for assurance of this before approving the proposal.

Professor Grocott acknowledged that whilst a second exercise was not mandatory, it would bring a number of benefits by providing access to National Institute for Health Research (NIHR) funding, boosting the NIAA's profile, and offering funding partners an opportunity to feed in the research priorities that had been collated in 2012. He also reported that funding partner members had expressed enthusiasm for the project at the Research Council that morning.

The Chair encouraged members to approve the proposal, arguing that one of the reasons why the first exercise had been less successful was the low level of communication prior to and immediately after the exercise. The new NETSCC process had in-built mechanisms for ensuring the proper communication of plans and outcomes however, and a dedicated advisor would be available to provide guidance throughout the project. Furthermore, the new Health Services Research Centre (HSRC), would provide additional support and Dr Mike Galsworthy, HSRC Associate, would lead the project on behalf of the NIAA.

After further discussion the Board approved the proposal and agreed to invite the specialist society funding partners to make a financial contribution towards the exercise. The larger founding partners; the Association of Anaesthetists of Great Britain & Ireland (AAGBI), *Anaesthesia*, the British Journal of Anaesthesia (BJA) and the RCoA, would be approached to make up the short fall.

ACTIONS: **Ms Drake** to send a formal request to the four founding partners of the NIAA; the AAGBI, *Anaesthesia*, the BJA and the RCoA, and to the specialist society members, inviting them to make a financial contribution to a second research priority setting exercise.

NIAAB/06/2013 **NIHR CONSULTATION: PROPOSALS FOR THE DESIGNATION OF CLINICAL THEMES**

The Chair reported that the Research Council had discussed the National Institute for Health Research's (NIHR) plans to reorganise the NIHR Clinical Research Network. This would involve introducing 15 geographically-based Local Clinical Research Networks in place of the current structure of over 100. As a result the speciality groups would be reorganised into 10-12 clinical themes. Research Council members had been keen to find a way of embracing the changes positively and of bringing about greater recognition for anaesthesia.

Professor Mike Grocott, Dr Simon Howell and Professor Martin Leuwer had agreed to prepare a short paper voicing the NIAA's support for the changes and calling for greater recognition of anaesthesia, including a change to the theme name. The paper would be presented at a meeting with the NIHR to be held at the College on Friday 8 February and then submitted by the consultation deadline on 10 February.

NIAAB/07/2013 **MEMBERSHIP OF THE ASSOCIATION OF MEDICAL RESEARCH CHARITIES**

Ms Sharon Drake reported that Professor Dave Lambert had written to the Association of Medical Research Charities (AMRC), to argue the case for accepting a collective application on behalf of the NIAA. If this was not approved on the basis that the NIAA lacked charitable status, then Ms Drake confirmed that the NIAA could co-ordinate an application on behalf of all those specialist societies with charitable status who wished to apply.

NIAAB/08/2013 NIAA STRATEGIC PLAN

The Board received an updated action plan which set out progress against the NIAA Strategic Plan. It would remain an internal document to be reviewed regularly and used to identify outstanding action points. The Chair was pleased to report that the NIAA was on target for most areas. He mentioned a suggestion received from Mr David Hepworth at the Research Council meeting that the NIAA explore potential opportunities for collaboration with the Department for International Development (DIFD).

Under Aim 3, Point (s), 'supporting research active NHS colleagues', Professor Phil Hopkins suggested that Trusts could be encouraged to allocate a portion of SPA (Supporting Professional Activities) time for research. This allocation of dedicated research time would act as a marker of quality for departments and benefit trainees. The Chair invited Professor Hopkins to prepare a formal proposal for consideration at the next meeting.

Under this item Mr David Hepworth drew attention to Aim 2, Point (m), on developing a synergy with military anaesthesia. He emphasised the importance of publicising the NIAA's connection with the military as a way of promoting the NIAA. He suggested the benefits of having a civilian military representative who could attend Board meetings more regularly, and the Chair agreed to discuss this with Colonel Peter Mahoney.

ACTIONS: **Professor Hopkins** to circulate a proposal for encouraging the allocation of SPA time for research.

The Chair to speak to Colonel Peter Mahoney regarding military representation on the NIAA Board.

The Board to review the NIAA Strategic Plan at its October meeting.

NIAAB/09/2012 NIAA PARTNERSHIPS

(i) It was noted that the next NIAA partnership meeting to discuss collaboration with the Medical Research Council and intercalated iBScs would take place on Thursday 7 February.

(ii) The Board received a copy of the guidance for grant funding from the Rosetrees Trust. It noted that contact had been made with the Trust through Dr Anna Maria Rollin, the College's Professional Standards Adviser. The Trust's Chief Executive, Sam Howard, had suggested that the NIAA might like to apply for funding.

The Board discussed how collaboration might benefit the NIAA and whether the NIAA should advertise a grant as part of its current funding rounds.

ACTION: **The Chair** to give further consideration to the possibility of collaborating with the Rosetrees Trust.

(iii) The Board noted a letter to the Chair received from the Medical Academic Staff Committee (MASC) of the British Medical Association, seeking input from the RCoA on the appraisal and revalidation process as it applies to medical academics, comments on enhancing the role of women within academic medicine and representation from the NIAA on the committee itself. It was agreed that a

representative from the Board should attend a future MASC meeting and Dr Felicity Plaat kindly volunteered to do this.

ACTION: **NIAA Administrator** to contact the MASC informing them of the NIAA's interest in finding out more about possible collaboration and arranging for Dr Plaat to attend a future meeting.

NIAAB/10/2013 COMMUNICATIONS

The Research Council received a progress report on the NIAA Communications Plan and a verbal update from Ms Sharon Drake.

Ms Drake reported that plans were underway to run an NIAA session at the AAGBI's GAT (Group of Anaesthetists in Training) meeting on Thursday 4 April. This included a lecture from Dr Ramani Moonesinghe and drop in sessions during the afternoon open to trainees with questions about research. Professor Lambert and Dr Eleanor Carter would lead these sessions although more volunteers were needed to answer clinical questions. She asked colleagues to encourage trainees to send their questions in advance and to let the office know if they could help on the day.

In addition, Dr Mike Nathanson had taken on the role of 'Editor' for the NIAA and would be coordinating a schedule of publications for the *Bulletin* and *Anaesthesia News*. The first *Bulletin* article would be on the subject of the NIAA grants, whilst the first article for *Anaesthesia News* would be from Professor Michael Wee, a successful applicant from Round 1 2012.

Ms Drake also reported that work was underway on an Annual Report and a call for articles had been sent out for this. A draft flyer had been circulated to members of the Communications Group and was tabled for members to comment on. This would be circulated via *Anaesthesia*. It was noted that several visits had been made to district general hospitals last year, and that these had been well received. Ms Drake concluded by thanking Professor Lambert and Dr Nathanson for their help in moving the communications plan forward and welcomed further suggestions from the Research Council as well as contributions for the next eNewsletter.

ACTION: **Ms Sharon Drake/NIAA Administrator** to contact Dr Sam Shinde, Chair of the AAGBI's Education Committee, to ask if she could encourage trainees to send their questions to the office in advance of the GAT meeting.

NIAAB/11/2013 ARS & NIAA SUB-COMMITTEE

(i) Professor Phil Hopkins introduced this item explaining that impetus for the new ARS & NIAA sub-committee had arisen from the need to coordinate educational activities within anaesthesia more effectively. The Board received the minutes of the ARS & NIAA sub-committee meeting held on 30 November 2012 and noted the group's terms of reference.

Dr Felicity Plaat expressed concern on behalf of the specialist society members that the ARS had its own representative on the Board which placed it in a unique position. The Chair reminded members that this new collaboration would help the NIAA to meet one of its core objectives and help to avoid duplication between ARS and NIAA events. It was also noted that the remit of the ARS differed to that of the other funding partners, in that its main focus was on conducting research. The Chair

emphasised that the ARS would not gain any advantages in terms of receiving grants or decision making but would purely advise on matters relating to educational activity.

Professor Hopkins referred to Dr Moonesinghe's proposal for an annual course aimed at core foundation year trainees, and welcomed this as a way of providing educational activity. In addition to this, he suggested that the NIAA consider partnering with a university to run an MA in Research. Modules could be designed and run by the NIAA. Dr Plaat welcomed this suggestion as a way of promoting collaboration between the funding partners. Initial scoping would be required to find out how this would be tied in with the university fee structure and the NIAA would need to put out a call for expressions of interest from universities to gauge interest.

ACTION: Professor Hopkins to draw up a proposal and circulate to the ARS & NIAA Sub-committee for comment in the first instance.

- (ii) Professor Hopkins summarised the programme for the 'NIAA Research Week', which would be held on 30 September – 3 October 2013 and would bring together four events which had previously been run separately; the BJA Research Methodology Workshops, BJA Peer Review Workshops, the ARS research presentations and the HSRC UK Peri-operative Research Forum. It was hoped that scheduling the courses consecutively would encourage more attendees.

The Chair congratulated the sub-committee on what was a very aspirational programme.

NIAAB/12/2013 MACINTOSH PROFESSORSHIP

The Board received a copy of the revised criteria for the Macintosh Professorship and noted that these had been approved by the Nominations Committee at its meeting on 21 November 2012. The Chair highlighted the change in the last paragraph which encouraged nominations from national and/or specialist societies in Anaesthesia within the UK. If successful the title of the Professorship would reflect a joint award from the College and the nominating body.

NIAAB/13/2013 MILITARY ANAESTHESIA

In the absence of Wg Cdr Simon Turner there was no report under this item, however the Board noted that Professor Peter Mahoney's position as Defence Professor of Anaesthesia would conclude in 2014 and that plans to recruit a replacement would be discussed at the April meeting.

Members also noted that numbers for the Academia and Armed Conflict Conference scheduled for Wednesday 8 May were disappointingly low and that a decision about whether or not to cancel the event would be taken soon. *(NB. This event has now been cancelled).*

ACTION: To discuss the recruitment of the next Defence Professor of Anaesthesia at the April Board meeting.

NIAAB/14/2013 ACADEMIC TRAINEES

Dr Moonesinghe joined for part of this item by phone. She explained that she was currently working with Ms Maddy Humphrey, HSRC & NAP Administrator, to establish a list of academic trainees. Once in place, trainees will be invited to register on the NIAA database and asked to submit an annual training update so that their progress can be monitored.

The Board welcomed her proposal of holding an annual event aimed at attracting core and foundation year trainees in anaesthesia and ACCS into research. It was agreed however that the College could only recommend that trainees attend as opposed to making the course mandatory.

ACTION: **The Office** to liaise with Dr Moonesinghe regarding potential dates and arrangements for this event.

NIAAB/15/2013 HEALTH SERVICES RESEARCH CENTRE

- (i) The Board received the minutes of the HSRC Executive Management Board meetings held on 17 September, 13 October and 12 December 2012 for information.

- (ii) The Research Council received a written report on HSRC activities from Professor Mike Grocott which included the following points:
 - The National Emergency Laparotomy Audit was now up and running with a project team in place and meetings of the Project Group and Project Board underway
 - An exciting Anaesthetic Sprint Audit of Practice, being led by the NHS Hip Fracture Perioperative Network, was in progress with the main audit to take place between 1 May – 31 July
 - NAP5 was progressing well and over 50 topic suggestions had been received for NAP6 so far. Dr Iain Moppett had conducted a formal review of NAPs 3 & 4 and these would be reviewed by the HSRC Executive Management Board at its meeting on 12 February
 - A quality measures survey of practice, devised by Dr Jonathan Benn and Dr Claire Maloney, had been disseminated via the Quality Audit and Research Coordinators (QuARCs) and the deadline for returns was Monday 4 February
 - A joint HSRC - Patient Liaison Working Group, chaired by Dr Rupert Pearse, was being established to develop an NIAA/HSRC Patient Public Involvement strategy. The first meeting was planned for the end of April 2013
 - The success of the European Surgical Outcomes Study, led by Dr Rupert Pearse, was noted. The study had recruited 46,539 patients in total, 23% of which came from the UK. Findings had been published in the *Lancet* in September 2012
 - A fourth successful UK Perioperative Research Forum had been held on Monday 21 January in Birmingham. The event attracted 70 delegates making it the highest attended regional forum so far.

NIAAB/16/2013 TERMS OF REFERENCE

- (i) The Board reviewed its terms of reference in relation to membership. It was agreed that a formal recruitment process should be introduced for the Chair of the NIAA Board.

ACTION: **Ms Sharon Drake** to discuss the establishment of a formal recruitment process for the Chair of the NIAA Board with the RCoA President.

NIAA Administrator to update the Terms of Reference document and upload it to the NIAA website.

- (ii) The Board noted that Professor Lambert's term of office as NIAA Grant Officer would conclude this year. The Chair proposed that the Board renew this for another term of five years, in accordance with the governing principles for convened grant committees (<http://www.niaa.org.uk/article.php?newsid=375>). The Board approved the proposal unanimously and very much hoped that Professor Lambert would accept and continue his tremendous work.

NIAAB/17/2013

MEETING DATES

Thursday 25 April 2013

October date to be confirmed

NIAAB/18/2013

ANY OTHER BUSINESS

- (i) It was noted that documentation relating to the mandate from the government to the NHS Commissioning Board outlining the role of research within the new NHS system had been circulated to the Board and Research Council by email.
- (ii) It was noted that this would be Dr Felicity Plaat's last meeting as the specialist society representative on the NIAA Board. Dr Rob McCahon of the Society for Education in Anaesthesia UK, would attend the next meeting.
- (i) Members agreed to experiment with varying the day of Board and Research Council meetings as Thursdays were problematic for some members.

ACTION: **NIAA Administrator** to circulate alternative dates for the October 2013 meeting.

GLOSSORY OF ACRONYMS

AAGBI	Association of Anaesthetists of Great Britain and Ireland
ACTA	Association of Cardiothoracic Anaesthetists
ARS	Anaesthetic Research Society
ASG	Anaesthesia Speciality Group
ASIG	Anaesthesia Special Interest Group
BJA	British Journal of Anaesthesia
BOC	British Oxygen Chair
BSOA	British Society of Orthopaedic Anaesthetists
CCRN	Comprehensive Clinical Research Networks
CLRN	Comprehensive Local Research Networks
CRN	Clinical Research Network
DAS	Difficult Airway Society
DMA&CC	Department of Military Anaesthesia and Critical Care
EMB	Executive Management Board
EPICOT	Evidence, Population, Intervention, Comparison, Outcome, Time stamp
FPM	Faculty of Pain Medicine
JLA	James Lind Alliance
NCRPSE	National Clinical Research Priority Setting Exercise
NIAARC	National Institute of Academic Anaesthesia Research Council
NIHR	National Institute for Health Research
NTNs	National Training Numbers
OAA	Obstetric Anaesthetists' Association
RA UK	Regional Anaesthesia UK
RCoA	Royal College of Anaesthetists
SEA UK	Society for Education in Anaesthesia, UK
UKPRF	UK Perioperative Research Forum
VASGBI	Vascular Anaesthesia Society of Great Britain & Ireland