

Management Board

The confirmed minutes of the third meeting held at 10.00 on Friday 19th June 2009 via video-conference in meeting room 8, the John Bull Building, Tamar Science Park, Plymouth and the WK Norman Conference Room, PMS building, St Luke's campus, University of Exeter.

Attendees

Peninsula College of Medicine and Dentistry	Professor Sir John Tooke College Dean (in the Chair)
Peninsula CLAHRC	Professor Mike Depledge Lead for Environment & Human Health
Torbay Care Trust	Anthony Farnsworth Chief Executive
University of Exeter	Sean Fielding Director, Research & Knowledge Transfer
South Devon Healthcare NHS Trust	Sasha Karakusevic Director of Performance & Development
Peninsula CLAHRC	Professor Stuart Logan Director
Plymouth Hospitals NHS Trust	Dr Alex Mayor Medical Director
Peninsula Dental School	Professor David Moles Director, Postgraduate Research & Training
Royal Devon and Exeter NHS Foundation Trust	Dr Vaughan Pearce Joint Medical Director
NHS Devon	Tracey Pollock Public Health
Torbay Care Trust	Louise Wilson Public Health
NHS South West	Nikki Woodward Interim Assistant Director of Finance
Peninsula CLRN	Professor Tony Woolf Clinical Director
Secretary to the Management Board	Helen Papworth Operational and Finance Manager

Apologies:

Peninsula CLAHRC	Dr Peter Aitken Lead for Improvement
NHS South West	John Bewick Director of Strategic Development
Peninsula CLAHRC	Professor John Campbell Lead for Primary Care
Peninsula CLAHRC	Professor Andrew Hattersley Lead for Diabetes & Cardiovascular Risk
University of Exeter	Professor Janice Kay Deputy Vice Chancellor
NHS Plymouth	Debra Lapthorne Director of Public Health
NHS Cornwall	Felicity Owen Director of Public Health
NHS Devon	Dr Virginia Pearson Director of Public Health
Peninsula CLAHRC	Professor Rod Sheaff Co-Lead for Implementation
NHS Devon	Dr Kevin Snee Chief Executive
Peninsula CLAHRC	Professor Ken Stein Lead for Question Generation & Prioritisation and Co-Lead for Implementation
Devon Partnership Trust	Iain Tully Chief Executive
University of Plymouth	Professor Mary Watkins Deputy Vice Chancellor
Peninsula CLAHRC	Professor John Zajicek Lead for Neurology

23/08-09 Minutes

APPROVED:

The minutes of the second meeting of the Peninsula CLAHRC Management Board held on Wednesday 25th March 2009 (PCMB 14/08-09).

24/08-09 Membership and Terms of Reference

RECEIVED:

The revised membership and terms of reference of the Peninsula CLAHRC Management Board (PCMB 01/08-09) noting the amendments requested at the last meeting.

25/08-09 National Developments

RECEIVED:

An oral report from the Dean of the Peninsula College of Medicine and Dentistry (PCMD) regarding the development of Health Innovation and Education Clusters (HIECs), noting:

- (a) That the Department of Health had published the HIEC prospectus on 7th May 2009 and a regional stakeholder meeting had been convened by the Strategic Health Authority (SHA).

Secretarial Note: The prospectus is available to download from http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH_098887

- (b) That there was significant connection between the CLAHRC and HIEC agendas as education and innovation were key instruments in the implementation of change.
- (c) That the health service would support the development of a HIEC linked to PenCLAHRC if it could help to solve questions of improving service quality within the context of increasingly limited resources.
- (d) That there was a willingness in the region to avoid further layers of bureaucracy with the new initiative: One mechanism could be to utilise the PenCLAHRC Management Board as a stakeholder reference group.
- (e) That discussions had been initiated with representatives from Bristol, given that only one HIEC was likely to be awarded to the south-west, in which the PenCLAHRC model was a crucial feature of the innovation landscape in generating clinical questions.
- (f) That the application process would involve interested parties applying to the SHA suggesting ways to develop a HIEC, and that advice would be sought from members of the PenCLAHRC Management Board as the regional case was developed.

26/08-09 Governance

CONSIDERED:

- (a) An oral report from the Director describing the activities of the PenCLAHRC Executive Group since the last meeting, noting:
- (i) That momentum within the collaboration was increasing as more staff were appointed, and that a welcome lunch had been organised to bring together those involved.

- (ii) That the 2.6FTE health service researchers that formed the core of the Evidence Synthesis Team (formerly known as the Rapid Review Group) were due to start in September.
- (iii) That locality leads were now in place in Plymouth and Exeter, with the post for Cornwall was currently being re-advertised.
- (iv) That the Deputy Director, a University of Plymouth appointment, was in the process of being recruited with the assistance of head-hunters and that interviews were anticipated to be held in early September.
- (v) That there were continuing difficulties with securing health economists, reflecting the national shortage in this discipline, but that the University of Exeter had acknowledged the need for further investment and initiated discussions with the Business School regarding joint appointments.
- (vi) That, meanwhile, the three junior PCMD staff members were following an explicit training programme designed to increase internal capacity, and that further collaboration with the University of Bristol opened up the possibility of access to their expertise.
- (vii) That, however, an excellent appointment had been made to develop the Public Patient Involvement strategy, with academic leadership on the PenCLAHRC Executive Group provided by Professor Nicky Britten.
- (viii) That the strategy would be conceived expressly with the intention that activities would join up, not compete with, existing groups connected to the Department of Health's Folk.Us initiative, NHS trusts, and the local topic-specific and Comprehensive Research Networks.
- (ix) That PCMD had received approval to refurbish the Veysey Building, owned by the University of Plymouth, in Exeter to accommodate Institute of Health Service Research and PenCLAHRC staff from early 2010.
- (x) That the Executive Group received regular progress reports from projects and themes, which included the following highlights:
 - A That Dr Bob Freeman, Plymouth locality lead, was providing surgical input and facilitating clinical contact in the VTE project.

- B That, through Exeter locality lead Dr Mark Daly, the Royal Devon and Exeter NHS Foundation Trust had expressed interest in being involved.
- C That PenCLAHRC had received a number of requests from local primary care trusts to expand activity to consider obesity treatment packages.
- (xi) That, as part of its educational programme, PenCLAHRC had sent eight people on the University of Oxford's [Centre for Evidence-Based Medicine](#) training course in April and subsequently identified four candidates for the tutor development programme in September 2009.
- (xii) That a draft Communications Strategy had been developed, with the first outcome being the production of an internal staff newsletter which was freely available within the partnership.

Secretarial note: PenCLAHRC Post can be downloaded from <http://clahrc-peninsula.nihr.ac.uk/content/newsletter>.

RESOLVED:

- (xiii) That representative of the PCMD Graduate School would be invited to the next meeting to provide input into educational issues.
- (xiv) That a report would be received at the next meeting on the Public and Patient Involvement strategy.
- (b) An oral report from the Director as Lead for the [University of Exeter's Science Strategy Translational Medicine Theme](#).
 - (i) That two appointments had been made as part of this investment by the University of Exeter: a Senior Clinical Lecturer in Diabetes (Katarina Kos) and a Senior Lecturer in Exercise and Behaviour Change (Melvyn Hillsdon).
 - (ii) That the University and PCMD had recently taken the strategic decision to rethink the planned investment in behaviour change: By combining two unfilled Science Strategy vacancies with additional PCMD resources, it was hoped that a group could be attracted to Exeter.

RECEIVED:

- (c) A summary of the main business of the meetings of the PenCLAHRC Executive Group since March 2009 (PCMB 15/08-09).

- (d) The minutes of the University of Exeter's Science Strategy Translational Medicine Management Board meeting held on 30th March 2009 (PCMB 16/08-09).

27/08-09 Development of the [Engagement by Design](#)[©] model

RECEIVED:

- (a) A report (PCMB 17/08-09) from Professor Ken Stein, Lead for Question Generation and Prioritisation (column 1), noting:
- (i) That since the last report, three complementary approaches to question generation had been developed:
 - An online web tool guiding users through a PICO¹ format (<http://question.penclahrc.com/>),
 - Targeted approach of commissioners to identify key priority areas,
 - Recruitment of locality leads to support clinicians and managers through workshops to define their issues.
 - (ii) That after collation of questions and topic areas from these sources, the Evidence Synthesis Team would develop vignettes for consideration by the Executive Group followed by a wider prioritisation meeting with representatives from all partners to be held in early October.
 - (iii) That members of the Management Board would shortly be invited to provide a suitable representative who could commit to the advance work required to review each vignette.
 - (iv) That the consideration of questions would need to include an awareness of the current economic environment and, more explicitly, the likelihood of improved productivity as a project outcome.
- (b) A report (PCMB 18/08-09) from Dr Peter Aitken, Lead for Improvement, regarding the development of the website and online community, noting:

¹ The PICO framework identifies and defines the essential components of a good clinical question:

- Patient population of interest or situation being addressed
- Intervention or phenomenon of interest
- Comparison intervention (if applicable)
- Outcome

- (i) That the development of PenCLAHRC online had focused on two sites; on the public or “white site”, and the community-focused and generated “red site”, designed to encourage conversation between researchers, clinicians and managers in the region and beyond.
- (ii) That the white site, which was appropriately branded in accordance with NIHR guidelines, was designed to provide key information about PenCLAHRC and access to the online question tool.
- (iii) That the key elements of the white site were then demonstrated to those present, including the stages of the question generation tool.

28/08-09 Reporting and Performance Management

RECEIVED:

The six-month financial report, covering the period October 2008 – March 2009, submitted to NIHR on 25th May 2009 (PCMB 19/08-09), noting:

- (a) That informal feedback received from NIHR had been positive with the flow of matched funding being only significant discussion point.
- (b) That the template for the annual report was due to be received by the end of June 2009, which would allow the Management Board to consider the draft report at its next meeting, prior to final submission in January 2010.

RESOLVED:

That the next meeting would include a progress report from the Environment and Human Health theme.

29/08-09 Risk Management

CONSIDERED:

The Risk Register for the Peninsula CLAHRC Project (PCMB 20/08-09), noting:

- (a) That the mitigation of the risk of PenCLAHRC partners failing to provide committed matched funding resource would be built into individual project plans through the participation of trust representatives from the earliest stages.

- (b) That the risk of failure to recruit high calibre key staff had been aggravated by an apparent lack of impetus within the system to action appointments and the capacity of the emergent PenCLAHRC organisation to influence this.
- (c) That PCMD would examine the efficiency of its recruitment processes within the context of its forthcoming administrative review.
- (d) That the risk of failure of PenCLAHRC to achieve buy-in from NHS organisations was related to a more fundamental problem of commitment to research and innovation at operational levels within the health service.

RESOLVED:

- (e) That NHS trust representatives would each identify a key contact for operational and finance matters related to PenCLAHRC.
- (f) That the Director would consider producing email bulletins for the information of the Management Board to highlight any current obstacles to progress within their organisations.

30/08-09 Project Plan

RECEIVED:

The Project Plan for the Peninsula CLAHRC (PCMB 21/08-09).

31/08-09 Date of Next Meeting

REPORTED:

- (a) That the dates of the meetings of the PenCLAHRC Management Board for 2009/10, had been arranged as follows:
 - Wednesday 4th November 2009, 1100 - 1300
 - Wednesday 21st April 2010, 1400 - 1600
- (b) That the venues for both meetings would be meeting room 8, the John Bull Building, Tamar Science Park, Plymouth, and the WK Norman Conference Room, PMS Building, St Luke's Campus, University of Exeter.