

Management Board

The confirmed minutes of the fifth meeting held at 14.00 on Wednesday 18th May 2016 via video-conference in Meeting Room 9, John Bull Building, Plymouth Science Park; WK Norman Conference Room, St Lukes Campus, Exeter; F083, Knowledge Spa, Truro.

Attendees

Mr Adrian Harris (in the Chair as deputy for Baroness Watkins)	Ms Claire Higdon, South West Peninsula Academic Health Science Network
Mr Tariq White, NHS England South (South West)	Mr Andy Harewood, Somerset Partnership NHS Foundation Trust
Professor Stuart Logan, Director, PenCLAHRC	Mr Nick Thomas, Plymouth Hospitals NHS Trust
Professor Oliver Hanemann, Plymouth University	Professor Richard Byng, Deputy Director, PenCLAHRC
Mr Jim Harris, Peninsula Patient & Public Involvement Group	Mr Nigel Reed, Peninsula Patient & Public Involvement Group
Professor Charles Abraham, Theme Lead, PenCLAHRC	Dr Roope Manhas, Northern Devon Healthcare NHS Foundation Trust
Dr Tamsyn Anderson, Kernow Clinical Commissioning Group	Dr Richard Laugharne, Cornwall Partnership NHS Foundation Trust
Mrs Jo Shuttleworth, Operations & Finance Manager, PenCLAHRC (Secretary)	Dr Kristin Liabo, Senior Research Fellow in Patient & Public Involvement, PenCLAHRC

Apologies

Baroness Watkins of Tavistock Chair	Professor Ken Stein, Deputy Director, PenCLAHRC
Professor Angela Shore, University of Exeter	Mrs Jenny Winslade, South Western Ambulance Service NHS Foundation Trust
Dr Helen Smith, Devon Partnership NHS Trust	Mrs Barbara Williams-Yesson, Yeovil District Hospital NHS Foundation Trust
Dr Rob Parry, Royal Cornwall Hospitals NHS Trust	Dr Matthew Dolman, Somerset Clinical Commissioning Group
Dr Tim Burke, NEW Devon Clinical Commissioning Group	Dr William Lee, Plymouth Community Healthcare CIC
Professor Kevin Elliston, Public Health England South West	Dr Justin Pepperell, Taunton & Somerset NHS Foundation Trust
Professor Dave Richards, Theme Lead, PenCLAHRC	Professor Chris Hyde, Theme Lead, PenCLAHRC

01/16-17 Minutes

APPROVED:

The minutes of the fourth meeting of the Peninsula CLAHRC Management Board held on Wednesday 4th November 2015 (**MB16**) were approved.

02/16-17 Matters Arising

- (a) Confirm contacts within Somerset CCG (
- minute 30/15-16(c)*
-).

REPORTED:

The Director reported that contacts within Somerset have been formed both through the Patient and Public Involvement team and via Professor Britten.

- (b) The Director to share Professor Tom Walley's list of 'implementation-ready' research amongst all members as soon as it becomes available (
- minute 32/15-16(c)(ii)*
-).

REPORTED:

As a result of Tom Walley's digest of recently published NIHR funded work, the Director reported that 1 potential piece of 'implementation-ready' research is now being discussed between PenCLAHRC and local clinicians.

The PROFHER trial reported that there was no difference in the outcome of surgical vs conservative management of proximal humerus fractures. Initial meetings with PenCLAHRC and the Upper Arm Group of Orthopaedic Surgeons in the RD&E have taken place. This was helpful in developing an understanding of the specific situation and more generally in informing practice around implementation. An initial piece of work is being planned using routine data to investigate changes in practice.

- (c) To report on the progress of Dissemination and Implementation (D&I) discussions between the AHSN and PenCLAHRC at the next meeting (
- minute 33/15-16(b)*
-).

REPORTED:

The Director reported that ongoing discussions are being held with the AHSN, particularly in relation to the implementation project mentioned above, as well as the wider topic of 'inappropriate care': stopping the use of interventions which have been reported to be ineffective. Collaboration with the AHSN is vital in this area of work.

03/16-17 Update from the Director

- (a) NIHR Strategy Board:

CONSIDERED:

An oral report from the Director summarising the latest news from the NIHR, noting:

- (i) That Professor Chris Whitty has now assumed his position as Chief Scientific Advisor, leading the NIHR. Dame Sally Davies will still continue in her role as Chief Medical Officer. Dr Louise Wood has replaced Dr Russell Hamilton as NIHR Director.
- (ii) That, despite the changes in senior roles, the work of the CLAHRCs is likely to continue post 2018 but the structure and composition currently remains uncertain.
- (iii) That the funding position within the NIHR has been largely protected (flat cash) despite significant cuts elsewhere in the Department of Health. It is likely that NIHR funding will become available in the future for research which is of benefit to LMIC (low and middle-income countries) as well as the UK but the rules have yet to be decided.

(b) Question Prioritisation Round 2:

REPORTED:

The Director reported on the progress following the last Question Prioritisation round held in December 2015. The following questions were prioritised:

- (i) How can we best design, evaluate and implement a group-based programme for weight-management in Tier 3 obesity care?
- (ii) Is mindfulness based cognitive behaviour therapy effective in maintaining recovery and relapse prevention among young people who have recovered from an episode of emotional disorder?

PenCLAHRC staff are now spending time working up bids with the question originators, with an Academic Lead and Research Manager assigned for each question. Interested stakeholders from across the collaboration have been brought together and initial scoping work is progressing.

(c) Annual Reporting 2015/16:

REPORTED:

A written report (**MB17**) summarising the latest outputs and activities from the PenCLAHRC Annual Report 2015/16, specifically noting the following:

- (i) The funding position mid-way through the current round of funding looks encouraging, with an increase in matched funding and external income within the reporting period.
- (ii) The number of projects and publications submitted has also steadily risen over the reporting year. Five added value case studies, in the fields of Stroke, Paediatric Admissions, Blood Pressure Management, Cancer Diagnosis and Person Centred

Coordinated Care, were submitted and can now be viewed [here](#).

- (iii) Training activities have also significantly increased in numbers and diversity. Specifically noted was the launch of the new [Health Services Modelling Associates](#) (HSMA) Scheme: Six members of staff from partner organisations have been seconded for one day a week to undertake advanced modelling, simulation and analysis work on specific projects within their own organisations.

- (d) Pilot Internal Evaluation:

REPORTED:

A written report (**MB18**) summarising the work and achievements of the internal evaluation team from the pilot CLAHRC.

04/16-17 Person Centre Coordinated Care (PCCC)

CONSIDERED:

An oral presentation by Professor Richard Byng, Deputy Director, on the development of PCCC for individuals with long term conditions and care from multiple teams within the region through an interlinked programme of service redesign, evaluation and research, noting:

- (a) In collaboration with the AHSN, the development of theory, innovation, and a consistent evaluation framework for PCCC. Matched funding from the AHSN, NHS(E) and Torbay Hospital supports our work in helping to design and evaluate a series of PCCC initiatives in Somerset and Devon.
- (b) The development of two methods for evaluating the extent to which such services are succeeding in delivering person centred care. These are: a measure which aims to assess patients' experiences of person centred and coordinated care, and an implementation and a reporting tool to measure and support organisational change.

The slides from the presentation will be circulated with the meeting minutes.

05/16-17 Matched Funding (in kind):

CONSIDERED:

The Director proposed a procedure for recognising partner contributions to PenCLAHRC within 2015/16. Discussion and decisions were as follows:

- (a) That partners who formally agreed, via written confirmation, to have their contributions in kind recognised in 2014/15, would automatically have their contributions recognised within the current reporting year, 2015/16.
- (b) At the end of the financial year, PenCLAHRC will write to each contributing organisation with the proposed calculation of matched funding.

- (c) It was suggested that this procedure for recognising matched funding should be welcome in all Trusts, and that the reason for not having 100% sign up was perhaps due to pressure of time rather than an unwillingness to take part.

Action: PenCLAHRC to write to the partner organisations not yet signed up to the matched funding process in order that these 'in kind' contributions can be recognised in the future.

06/16-17 Patient Involvement/Engagement:

REPORTED:

- (a) The Director congratulated Mr Jim Harris, Peninsula Involvement Group (PenPIG), on his recent appointment as lay representative for NHS England Dental Services for Paediatric Commissioning Guides.
- (b) The Director noted the growing importance and remit of the Patient and Public Involvement Team and the subsequent planned expansion of the team in Summer 2016.
- (c) Mr Jim Harris noted the recent successful meeting with the public involvement team at CLAHRC North West Coast. Further collaboration is planned in order to share experiences and ideas for improvement.
- (d) Mr Nigel Reed commented that there was an appetite within PenPIG for further involvement in dissemination and implementation activities within the CLAHRC. This was strongly endorsed by the Director.
- (e) Mr Nigel Reed noted the significant involvement of PenPIG members in the recent Question Prioritisation round, and was highly complimentary about the process and its consideration of the 'patient voice' throughout. There was general agreement that the work of PenCLAHRC was hugely dependent on the contribution from members of PenPIG and other public and patient groups.

07/16-17 Risk Management

CONSIDERED:

A report, with appendix, on the current version of the Peninsula CLAHRC Risk Register (**MB19 (a & b)**), noting:

- (a) That Risk 1; PenCLAHRC partners fail to provide committed matched funding resources, was still one of the two most significant risks on the register despite an encouraging increase in matched funding for the previous financial year.
- (b) That Risk 2; Failure to demonstrate National level impact stories, particularly around implementation, was still one of the two most significant risks on the register. During the next 18 months, a further funding application is expected and, as such, it will be vitally important to be able to draw upon examples where improvements to healthcare and healthcare delivery have been made (or are in development).

08/16-17 Any Other Business

No other business was reported.

09/16-17 Date of Next Meeting

REPORTED:

That the date of the next meeting of the PenCLAHRC Management Board is:

- 14:00 – 16:00 on Wednesday 9th November 2016.