

Minutes

Applied Research Collaboration Kent, Surrey, Sussex Board (ARC KSS)

Thursday 7th November 2019, 1:00 - 16:00

SSPSSR Boardroom, CHSS, 1st Floor, Cornwallis East Building, University of Kent, Canterbury, Kent CT2 7NF

Chair: Professor Sir Nick Black

	Agenda Item	Action
1	Welcome, Introductions and Apologies (Nick Black)	
	Attendees: Nick Black (NB) (Chair) Stephen Peckham (SP), Sally Flint (SF), Helen Griffiths (HG), Guy Boersma (GB), Des Holden (DH), Kate Jones (KJ), Mark Hamilton (MH), Malcolm Reed (MR), Stephen Shute (SS), Karen Cox (KC), Darrell Gale (DG),	
	In attendance: Victoria Hare (VH), Melanie Rees-Roberts (MRR), Sammie Williams (SW)	
	Apologies : Samantha Allen (SPFT), Rick Fraser (SPFT), Rebecca Bradd (Kent & Medway STP); Claire Fuller (Surrey Heartlands STP); ; Laura Hill (Sussex & East Surrey STP), Anjali Melethil (West Kent CCG)	
2	Matters Arising and Action Log Minutes ARC KSS Action Log for Board Board 13th June FIN/7th Nov 19 v0.1 031 Minutes are approved from previous meeting. Actions to be covered within agenda	ACTION: Follow up on invites to Directors of Social Services, PCN Chairs and lay representatives for membership by Feb 20 (VH/SP)
3	Terms of Reference (information only) ARCKSS Board ToR v1.2 FINAL Sept 2019 Terms of Reference updated with Board recommendations.	
4	Questions from Members of the Public Information for the public ARC KSS FINAL	ACTION: Advertise Board meetings to public (VH/SW)
	 Board meetings are now held in public. No questions from the public today. 	
5	Progress including Executive Group update Directors Report 7-11-19.docx	
	 SP presented Director's Report: ARC has been live since 1st October (37 days). A lot is happening within KSS and nationally. Building the core structure and addressing the broader ARC aims as to how we reach out and engage with our partners within the region. The ARC's remit is not just around our research themes but also implementation 	



- and capacity building.
- A strong emphasis that the work we do is implementable; has an impact; and engagement with our partners and local communities with a focus on out of hospital care.
- We already have a strong partnership with AHSN around implementation but less developed around capacity and we welcome support from Sally Kendall at University of Kent who is leading this challenging element of the work. There is a lot of commitment to training so a need to assimilate this to bring back to local communities. Sally is engaging HEE KSS and developing a strategy for engaging not only academic research but how we think about research in practice. SP, JH, DH and Rowena Merritt will talk to Kent social services that are keen to develop their capacity, the theme leads met on the 24th September and are starting to develop and action programmes of work. Current resource per theme lead is 1 day per week. We shall be holding an extended themes lead event to bottom out objectives for the next 2 years.
- The intention is to bring updates of each theme to Board meetings annually starting February 2020.
- Newsletter ready to engage regional partners and are in the process of developing a website.
- Two Information Session webinars in December 2019 for those organisations pledging co-funding in the initial ARC application.
- It is a huge job to actually reach out in our community which needs to be done in a number of ways, for example, AHSN implementation and existing projects and theme research leads to start to build up the contacts and links they have across academic research and other networks.
- o ARCS that were previously CLARHRCs are further ahead than us in many aspects. There is a push from the NIHR to act locally and think nationally. There is a strong sense that CLARHRCs worked autonomously and are being steered by NIHR to increase their national impact moving forward as an ARC. In other words, where is the value that goes out to rest of country? Many cross-ARC meetings have taken place with some opportunity to share impact and ideas on particular research issues with similar regions.
- ARC KSS was awarded the national theme of Social Care for which we have no additional resource although we have allocated an additional 0.2 wte from year 2 onwards from the core budget.
- o There will soon be a call to all ARCs to bid for further national funding (total available is £15m) for themed national work with emphasis on cross-ARC; implementation; local and national benefit. The intention is that KSS will bid for some additional funding for national social care to stimulate the implementation of service delivery change into practice. There will be further discussion at the next ARC Directors meeting in mid-November. The ARC/ AHSN meeting yesterday was attended by SP and DH which emphasises the link between ARC's developing research and AHSN's innovation and implementation remit. Possibly delivering answers to some of NHSE's remit.

Director's Report Discussion:

- MR: There are national links with other medical schools and links with Chris Whitty. MR stated he picked up a similar theme with Chris keen to improve access to people in cold spots of country and access to research where whole populations have equal access to clinical research. What he wants is centres to buddy up with other areas to give critical mass; and more geographically even NIHR funded research whilst not diluting quality of research.
- SP: The push is to get research done where research is needed giving an opportunity for regions like KSS to get engaged in research that may have gone to other areas previously. For example Harm de Marwijk is talking to ARC NWC



- about a potential piece of research that could involve KSS so here is where national initiatives may be of benefit to us.
- o KJ: There are cold spots in KSS, for example, a prevalence of lung disorders in the region but we do not do any respiratory research at all. CRN future funding may depend on investing in areas of need. Therefore any opportunities to invest in local or national research in which patients can take part would be ideal going forward. Also participation in public health research is challenging.
- o GB: I think SP is being modest. There is a sense that we are in more than a strong place even though ARC KSS was late to the club. This looks very attractive as we do not have CLAHRC transition and have a good suite of themes of interest to other ARCs. Often surprised on how quickly colleagues in other regions become interested and we end up ahead.
- SP: How can we get evidence into practice? There is an example of mental health workers coming out of secondary into community which is a successful piece of work so how do we pull that evidence and get it out there to wider community.
- NB: A key challenge of the ARC is engagement with the ICSs and PCNs as these
 are the organisations implementing transformation of health and social care. The
 average PCN will not be aware of much scientific evidence so key role for ARC is
 this ongoing discussion/interface with PCNs and ICSs.
- o GB -If leave it too long we will see other ARCs doing it.
- NB: Publication is not sufficient. How does ARC have a regular discussion with pioneering PCNs (around 100 in KSS) and ICSs?
- o HG: Is there any strategy to build these communities.
- o SP: in regards to PDRA and PhD researchers we want to replicate what the NIHR is doing. Sally Kendall is developing the KSS academy in a way that they can benefit from cross fertilisations across HEIs. We want people to engage with the core and then bring in the activity followed by other universities and Trusts. This would also involve cross organisation supervision and engaging with some of the Trusts and local authorities to retain a link for development of that person. Most of HEIs have committed studentships but Sally plans for a trainee academy for researchers and a structure and bringing trainees together rather than separated across the HEIs. This will support a new group of people who are researchengaged coming through the system.
- SF: Key theme for Sussex is mental health. How do we weave that in as we move on and keep the connections going?
- SP: We need something about this and yes we have a limited capacity. We can respond better if they are demand led issues, for example, within Kent social care there are many people with a researchable question and with a little stimulus we might be able to get this right.
- SF: The national ARC connection will be able to help.
- MH: Our research strategy includes ARC and we can talk further about embedding trainees within PCN structures. At the moment we don't see a lot of primary care organisations thinking that research is part of their job.
- NB: Enormity of task. We need to work with those who recognise the need for research inputs. Unallocated funding process may contribute as there are many things a PCN could come up with.
- o KJ: We have opportunities to develop ARC social care in particular and the opportunity to bid for national funding. How do we transfer our expertise in clinical research into a social care environment? Are there models of recruiting patients outside of clinical services as it is a completely different strategy?
- KJ: The way in which you search within primary care only detects people with a
 dementia diagnosis and not those with dementia but only receiving social care.
 Also GP databases do not pick up carers of people living with dementia.
- Recently CRN worked with RDS to offer funding for research time and received around 35 applications from all sectors and individuals, for example, experienced

- consultants to nurses, mental health professionals, physiotherapists, pharmacists etc.
- o NB: Can we request an anonymised list of these?
- DH: In 2014 the KSS AHSN call for novel partnerships to bring people and organisations which had not previously worked together brought in 44 applications and we awarded 5.
- NB: there are overlaps between all organisations. We want to make sure everyone is talking to each other.
- o HG: Is there an opportunity for national health economics work?
- SP: We want the ARC KSS health economists to build links with Manchester which is the national lead. Most regions will not be undertaking social care so links with Manchester national lead will be good.
- KJ: We are hoping to do some pilot work with Hastings, Medway and KCC. Do we helicopter a facilitator in or grow from within. What is needed in terms of academic support possibly depends on what the team needs. Need to feel confident there is research ready to go (Hastings) whereas Medway grow from within. We are engaging Jackie Cassell in some of this.
- DG: There is a problem getting registrars to leave London. Many come with great experience academically but no work experience. How do we bring in a research component, grow our own and turn our teams into a learning organisation.

ACTION: Share bids that were received from CRN (KJ)

6 Operations Update

- NIHR Contract
 - VH: Awaiting fully executed contract back from NIHR. SPfT added an addendum as it was not clear that the 15% reduction would be reinstated once Athena Swan silver was awarded.
 - The 15% reduction has been taken out of the unallocated funding which is now at £900k, with consultation with SPfT. NIHR has approved revised funding schedule.
 - The Collaboration Agreement between SPfT and lead HEIs is drafted and being reviewed by University of Kent currently. Once final costings are confirmed by SPfT finance then it will be distributed to all relevant parties.
 - Athena Swan silver requirement was challenged by NB and SP but DH&SC were not prepared to revisit this. The organisation at which the ARC Director is substantially employed has to have Athena Swan Silver. SP's part-time contract with another organisation which holds Athena Swan silver was not considered to be sufficient.
 - There is a current Review of Athena Swan by Universities UK, responses were elicited by September and outcome is currently pending. The University of Kent is applying for the silver award in April 20 (already has bronze) but will be November 20 before a decision is made. As we do not know when the Review will be reported this may affect contractual decisions at the NIHR ARC KSS 1-year review in September 20.
 - The most troubling operational aspect is that there are multiple review panels so standardisation across these review panels is under question as there does seem to be significant differences about feedback of applications. Some organisations are clearly further down the road than the others but possibly not reflected in their level of award.
 - SS: This is message we get too but it is not a comparison between institutions, rather the distance travelled from last assessment and not about the same thresholds getting the same recognition.

Co-Funding

VH: Two Information Session Webinars targeted at co-funding organisations are scheduled in December 2019 to discuss how they will spend and report

ACTION: Cc HEI leads when sending out collaboration agreement to contract departments (VH)

ACTION: Send map of ARCs to Helen Griffiths (SW)



their pledge. 37 organisations pledged a total of $\mathfrak{L}5.5m$ million in the initial application.

Also there several organisations within the region which we have not engaged yet even though all received the invite letter to become a co-funding member of ARC KSS at the time of initial application in summer 2018.

The MoU for all co-funders is currently in draft.

Surrey Heartlands signed an overarching pledge but we have contacted each individual organisation with the Information Session invite

Engagement with CCGs is tricky and not all local authorities are on board. Some Sussex/Surrey boundaries are also changing

NIHR annual reporting requires a co-funding response stating their match funding has been allocated to ARC KSS research or implementation.

Unallocated funds:

- MRR/SP: Presented draft unallocated funding strategy document. We currently have around £900k that we can allocate from year 2 onwards. (Prior to 15% reduction available funding was £2.2 million). We are asking Executive and Board for comments initially and possibly consultation locally to work up a final approach. An initial scoping was undertaken to determine position of other ARCs.
- Fellowship funding is limited. The principles on how we distribute the money should have the maximum effect.
- NB: Need to first agree on the values and priorities that should underpin decisions about how these funds are to be used
- MH: Possibility of engaging citizens to lead research and build those communities. How could we work with citizens?
- SP: We are developing a regional framework around public involvement with focus on a non-traditional way of communicating with the community and we could consider opening up training funds for this.
- MRR: Recommendation to talk to all the people who would have a view as flexible funding is so rare these days.
- NB: This is just the first stage. Consult widely and prioritise principles that address areas not currently funded in other ways (e.g. NIHR HSDR).
- GB: Possibly around prioritising in response to a need from the front line; bids that address more than one theme; and some awareness of research undertaken in more than one region; focus on implementation.
- NB: Should it be confined to our themes?
- MR: Use of the funding on themes other than those we bid for could be read negatively.
- NB: Aim for first call in May/June 20.

Risk Log

- VH: Current risks are engaging cofunders and achievement of Athena Swan
- SP: Risk log will be reviewed at Executive Group every six weeks. The
 current risks are fundamental as they effect the operations. They will change
 but it should not be a long list.
- DH: Need a process to address risk to ensure we are making the right progress towards co-funding.
- NB: We will review risk log at every Board meeting.
- GB: is it worth us keeping an eye on the engagement risk and that ARC doesn't fulfil its promise that front line. It should diminish over time. At the moment it's a huge risk as we have not found our way with the engagement of the partners,
- SP: Executive Group Update: All theme leads were invited to the first meeting

ACTION: Cc MH into information session invitations for Surrey organisations (SW) and include MH in all correspondence with organisations moving forward.

ACTION: do not target CCGs at this point

ACTION: Send suggestions for principles on unallocated funding to MRR (All)

ACTION: Work up set of draft principles for unallocated funding (MRR)

ACTION: Discuss and finalise criteria at Board in Feb 20 (All)

ACTION: Update risk log including engagement. Exec group to review and analyse; bring to every Board meeting (VH)

ACTION: Schedule launch April/May (SW)

ACTION: Discuss joint AHSN/ARC launch (SP/GB)



	but in future they will meet separately and Executive Group will continue as an operations group Upcoming theme lead meetings in Jan and March 20. Membership includes SP, VH, MRR, DH, Sally Kendall (capacity), Mark Hayward (SPFT host), Patricia Wilson (Co-production), Monique Raats (University of Surrey) and PPIE representatives. Change in theme leads – Naji Tabet for Dementia (as Sube Banerjee has moved to Plymouth) and Jo Armes for Digitalisation (as Simon de Lusigan has moved to Oxford) Communications: Website spec is currently being developed with support from Trust's digital lead. Deadline of 28 th Feb 20 to be functioning. We will engage end users in its development for example research theme leads. Temporary holding page on the SPfT public website is almost ready. ARC KSS launch planned for spring 2020. Chris Witty declined keynote speaker invite. Discussions with AHSN to combine launch with their annual conference.	ACTION: Recommend keynote speakers and send suggestions to SW (All) ACTION: Collate recommendations for
7	- GB: Good engagement opportunity to grab the attention of the busy front liners. Future Meetings	keynote and other speakers (SW) ACTION: Schedule Nov
	6 th Feb 2020, 12:30-4:00: 13BB04 Seminar/Conference room, University of Surrey 4th June 2020, 12:30-4:00: Sussex (venue tbc) Nov 2020: Kent (date and venue tbc)	20 meeting Kent (SW)
8	AOB	ACTION: Send job link to
	AHSN is currently recruiting to four ARC Implementation Manager posts.	Board members, Kent County Council, DG to distribute on behalf of ESCC (SW)