

James Lind Alliance Priority Setting Partnership – Renal Transplant

Steering Group Teleconference, 22nd July 2014, 10:00hrs - 11:15hrs

<u>Participants</u>

Leanne Metcalf (LM) Simon Knight (SK) Peter Morris (PM) Angela Beale (AB)O Katriona O'Donaghue Rachel Hilton (RH) Keith Hodkinson (KH) Fiona Loud (FL) Simon Ball (SB) Rosamund Snow (RS)	Chair	James Lind Alliance (JLA) Centre for Evidence in Transplantation (CET) Centre for Evidence in Transplantation (CET) Patient Representative, NKF Centre for Evidence in Transplantation (CET) British Transplantation Society (BTS) Patient Representative, KRUK Patient Representative, BKPA British Renal Society (BRS) PiiAF
Simon Ball (SB)		British Renal Society (BRS)

Minutes

Agenda Item	Discussion	Actions
1	Apologies	
	No apologies received	
2	Update on recruitment of Partners (Hilary Cullen)	
	Prospective partner organisations have been contacted, with several organisations confirming their involvement as partners, with specific contact details, agreement for their logos to be used, and interest in assisting with publicity and survey dissemination confirmed. Other organisations, including those with volunteer members have taken some time to respond, or have not given full contact details.	
	HC will circulate an up to date list of confirmed partner organisations, those who have expressed an interest but full contact details not yet confirmed, and those organisations who have been contacted, but no response received so far. The contact list continues to grow, and the Steering Group are asked to let HC know of have any further contacts to invite to participate in the PSP.	
	Current confirmed partners include: Alport UK British Association for Paediatric Nephrology Give a kidney Kids Kidney Research	



	Oxford Transplant Foundation	
	PKD charity	
	South West Thames Kidney Fund	
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	Contact made but pending confirmation of partnership (eg: contact not	
	available) :	
	Kidney Wales	
	NBTA (patient organisation for black, Asian and ethnic minorities)	
	Renal Social Workers - BASW Renal Special Interest Group	
	Transplant Sport	
	Invitation sent to the following organisations, awaiting response :	
	AKPA – Addenbrookes Kidney Patients' Association	
	British Renal Society	
	British Society for Histocompatability and Immunogenetics	
	British Society for Immunology	
	Darlinda's Charity for Renal Research	
	Human Tissue Authority	
	Intensive care society	
	NHS England (Director of Renal services)	
	NHSBT	
	Royal College of Nurses - Renal Nurses	
	Transplant Alliance	
	Transplant Support Network	
	SK gave an update on other partners recruited to the PSP:	
	Scottish Kidney Federation	Action 1:
	Carrel Club – (Transplant Surgeons in Training)	SG members to
		forward further
	FL suggested that the Renal Pharmacy Group be contacted and invited to	contact details to
	participate also.	HC for further
		follow up.
	HC will circulate the updated list of contacts for all organisations. Steering	
	Group members are invited to forward further suggested organisations /	
	contacts to HC for follow up.	
3	Feedback and final agreement on the draft survey (Simon Knight)	Action 2: SK to redraft the
	SK thanked the SG members for their feedback on the draft survey and as	survey for the (a)
	far as possible comments have been reflected in the amended version.	remove the
	There was one 'transplant' example of a submitted survey research	'transplant'
	question given in the draft survey. SK asked for comments and whether	example; (b) add
	the SG were happy with the examples as set out.	a feedback
	· · · · · · · · · · · · · · · · · · ·	questionnaire
	FL commented that she was unhappy to include an example question	
	relating to 'compliance with anti-rejection drugs regime'.	
	SK advised these were just example / representative questions, but open	



	to suggestions.	
	Following further discussion it was agreed that the 'transplant' example question be taken out, and when the survey was piloted, one of the 'feedback' questions for those participating in the pilot would ask if the examples were helpful in completing the survey.	
4	Pilot strategy for the draft survey (all)	Action 3:
	LM advised that a pilot study on the survey was helpful to check the accessibility / user-friendliness of the survey. It would need only a small number of a diverse group of people to complete the survey, and suggested that if each member of the Steering Group could ask 3 – 5 people of the group of people they represent (clinician / organisation members) to complete the survey this would be enough.	Each Steering Group member to Approach 3 – 5 individuals (clinician / patient / carer) to ask them to complete the pilot survey.
	SK will prepare a short covering email which can be sent to all those asked to participate in this 'pilot', with a link to the dummy survey. As it is holiday time, they will be asked to respond in about 3 weeks, and a reminder will be sent in 2 weeks time to anyone who has been sent this covering email and 'pilot survey' link, to ensure that all pilot responses are received, and reviewed promptly. The responses to the pilot survey will be reviewed and discussed at next Steering Group teleconference.	SK to draft a covering email to be sent to each person volunteering to complete the pilot survey, asking for their assistance, giving the survey link, and a response time.
5	Publicity strategy for initial survey (all)	
	LM / SK outlined the possible ways to publicise and promote the survey. Each partner will asked to assist through their communication links and networks.	Action 4: HC to prepare a list of contacts for each partner
	HC will prepare a list of contact person/ address or link from each of the partner organisations already identified, and include their different means for publicising the survey, to include: newsletters, news feeds, conferences, social media.	organisation, and confirm the routes for publicity for each organisation, so
	 A discussion raised the following points: Paper versions of the survey would be available, or could be printed out from the web site. Posters and leaflets may be helpfully displayed in clinics Articles in local / organisational magazines could be written / cont to the printed point inclusion 	that appropriate information circulated (news, announcements etc)
	sent to the organisations for inclusion.A QR (Quick Response digital link) could be set up for display	



	on posters which could then be accessed via visual links on	
	phones giving information	
6	PiiAF update (Rosamund Snow / subgroup)	
0	PIAF update (Rosamund Snow / Subgroup)	
	RS summarised the discussion that was held by the Steering Group sub-	
	group on 2 July 2014, as set out in the document circulated with the	
	agenda: "Measuring the impact of patient and public involvement in the	
	Kidney Transplant PSP".	
	It may not be possible to consider further all the four main issues as	
	outlined in the document above. Most on the call expressed a preference	
	for option 4 (Impact of different types of survey participant on suggested	
	priorities), with varying second-choice preference for either option 1	
	(Impact of JLA PPI on funding decisions) or option 3 (Impact of	
	patient/carer involvement on what counts as a treatment uncertainty).	
	There was general agreement that option 2 (Impact of patient/carer	
	involvement in general within the JLA steering group) would be difficult to	
	quantify and assess.	
		Action 5:
	RS suggested that she discuss internally the available funding to assess	
	how many of these options could be explored in the impact assessment	DC to investigate
	exercise. If funding is not available for all 3, a vote by email will be taken	RS to investigate
	among the Steering Group members to confirm which issues were	how many options could be
	considered priority for further work.	explored and
	RS thanked the Steering Group for their input and advised that she now	report back to the
	had much to put to the PiiAF team when considering further work.	Steering Group
7	Any other business	
	The next teleconference would be held in early September, to be	
	confirmed in due course, once the deadline for the pilot survey has been	
	set.	