

BRACE Rapid Evaluation Centre
Steering Group Meeting: Minutes
Thursday 21st February 2019, 10am - 1.30pm

Chair: Angela Coulter

Attendees: Sophia Christie, Anna Dixon, Mary Dixon-Woods, Nick Mays, Mark Platt, Adrienne Skelton, Judith Smith

Observers: Jo Ellins, Manbinder Sidhu, Jon Sussex, Carla Cureton (minutes)

Apologies: Dawne Garrett, Bert Vrijhoef, Jeremy Taylor, Daniel Reynolds

Welcome and introductions

Angela Coulter welcomed everyone to the meeting and introductions were made. The group went around the table to declare any conflicts of interest – no material conflicts were declared. It was agreed that in future, group members will be asked to declare by email any conflicts of interest when they receive the agenda and papers for the meeting.

ACTIONS

- No comments regarding minutes from the previous meeting
- Cathy Dakin to send email to steering group members to update their details on the BRACE website
- In future, declarations of conflict of interests will be made via email in advance of meetings
- Within meeting minutes, names will be used only where necessary, and will be written in full (not as initials)

Update on progress and activities

An update on BRACE progress and activities was provided, including the Centre's current work plan and outcomes from meetings with the NIHR and RSET rapid evaluation centre. The subsequent discussion focused in particular on two linked issues: i) team capacity, and ii) how to be rapid.

On the issue of capacity, concerns were noted about ability of the team to deliver what may be up to 10-12 projects over a five year timescale with just over 3 full time equivalent staff. Steering group members encouraged the team to consider partnerships with other teams and organisations and/or the possibility of bringing in additional resources to support projects. JE noted that the NIHR had agreed that the Centre could draw down from its budget to recruit additional staff to support delivery of the Children and Young People's

Mental Health Trailblazers evaluation, which was expected to be larger in scope and more resource intensive than a typical BRACE evaluation.

It was agreed that work to scope projects and agree clear parameters was vital, and that some projects may have to be single site evaluations. It was also suggested that the team could offer different costed options for a project for a range of budgets. Steering group members were in agreement about the importance of carefully managing expectations about the scale and rapidity that was possible for projects (the expectations of the team themselves, the NIHR and local study site stakeholders) from an early stage, to avoid over-promising and under-delivering.

On the issue of being rapid, there was a discussion about the process for project approval – which currently involves three stages (initial project outline, topic specification form, and full protocol). Steering group members encouraged the team to discuss this process with the NIHR, and explore where it could be rationalised and/or consider what a ‘proportionate’ protocol should look like (i.e. what level of detail should be reasonably expected in a rigorous yet *rapid evaluation* protocol).

It was also suggested that certain elements of a project could get under way as soon as the topic specification form had been approved, with early project work taking place alongside protocol development. The team was also encouraged to take a learning approach to scoping and seeking approval of projects – reflecting on and applying the learning from early studies to improve how projects are developed and protocols produced for later ones.

ACTIONS

- BRACE team to discuss with the NIHR whether/how scoping and approval processes might be adapted to support rapid working.

Prioritising and selecting topics for evaluation and the 2019/2020 work programme

A short presentation was given about the work undertaken in 2018 to set thematic priorities for the Centre, and identify and select innovations (within the priority themes) to put forward to NIHR as potential evaluation topics. The presentation also included proposals for how horizon scanning and prioritisation of innovations for evaluation would be undertaken going forward, including a set of criteria developed by the team to help support selection and prioritisation of identified innovations.

In terms of selection and prioritisation criteria, steering group members suggested that:

- The criteria that innovations be ‘evaluable’ should be amended to ‘rapidly evaluable’.
- As well as asking whether innovations align with national policy priorities, we should also ask if they align with the BRACE priority themes.
- Under the ‘evidence’ criterion, add ‘Is there a need from the health and care system for learning about this evaluation’.

Other comments included:

- The need to have a prioritisation process that is robust but also flexible.
- The importance of establishing whether there is strong interest from within the health and care system (including among patients and the public) to learn more about the innovations under consideration.
- The importance of having a balance between topics suggested by NIHR and those identified through BRACE horizon scanning, so that the portfolio of work includes innovations that are centrally driven and 'grassroots' innovations emerging within local areas.
- A suggestion that the team discuss, and be clear about, what is and is not possible methodologically within a 12-month evaluation with an approximate £125-£150k budget, as this will help in the selection of innovations and design of projects.
- Horizon scanning for innovations to evaluate should be an ongoing process, but the process of prioritising innovations to put forward to the NIHR only needs to happen periodically (e.g. every 2 years, or towards the end of the time period covered by the current work plan).
- The steering group was happy with the suggestion that prioritisation of shortlisted innovations is undertaken through engagement with the BRACE Health and Care Panel, following the model developed for the 2018 prioritisation workshop.
- The steering group did not see a formal role for itself in the process, but it was suggested that group members be invited to prioritisation workshops so they can participate in these if they wish.

ACTIONS

- Amend prioritisation criteria to reflect the comments made by the steering group
- Invite steering group members to the next prioritisation workshop

Framing the overarching BRACE programme

Judith Smith explained that, in the original NIHR call for a rapid evaluation team, it was proposed that the team would undertake several rapid evaluations and one long-term project. At a meeting with tNIHR HSDR in November 2018, the BRACE team put forward the idea of the team having a long-term thematic programme of work within which are nested a number of individual studies, instead of single long-term project. The team had proposed that this programme of work be focused on the overarching theme of service innovations for people with multiple long term conditions, as this was the highest rated topic in the BRACE prioritisation process. Steering group members were asked for their thoughts about how a BRACE long-term programme could be framed and focused. The main insights were as follows:

- Steering group members considered that there was considerable potential for synthesis of learning and findings across projects, and were all supportive of the proposal for an overarching thematic programme of work which would underpin and support this synthesis.

- A programme focused on service innovations for people with long-term conditions was supported, and steering group members agreed that this should include a focus on services for all age groups, not just older people and/or those with frailty.
- It was also suggested that the programme might specifically focus on innovations in primary and community settings, especially given the expertise of BRACE team members for service delivery and organisation in these settings.
- The team was encouraged to think about its methodological contribution. The long-term programme could enable the team to synthesise insights and learning from across the BRACE portfolio about how to evaluate rapidly, including how the Centre has set research priorities rapidly using an adapted version of the James Lind Alliance priority setting partnerships model, what approaches/methods work best, the implications for team skills and working, etc.
- It was agreed that the team would draft an outline paper about the long-term programme of work and seek comments from the steering group, with a view to presenting this to NIHR at the next meeting of the rapid evaluation teams (May 28th 2019.).

ACTIONS

- Draft proposal for a BRACE long-term programme to be circulated to steering group members for comment, in advance of the May 28th meeting with NIHR.

Evaluation of hospitals providing general practices – shaping the project design

Jon Sussex and Manni Sidhu explained that the BRACE team is currently designing a project to evaluate hospitals directly managing GP practices, and the steering group was asked for its views on the project scope and focus. Comments included:

- The project should be split into two rapid evaluations with the first evaluation focusing on implementation and early impacts, with the aim to develop a theory of change about this model of vertical integration. This could be followed by an impact evaluation.
- The need to collect data from a range of stakeholders and perspectives was emphasised.
- The question of whether/when changes would be felt by patients was raised – will patients in practices managed by an acute trust notice differences in their care? Developing a theory of change for the innovation will help the evaluation team to understand what outcomes the service innovation is expected to achieve and over what timeframe. This would help guide and focus the design of a subsequent impact evaluation.
- A key aim of the first stage of this project should be to describe the local approaches to hospitals taking on the management of general practices, including the contractual arrangements between the parties involved. Early scoping work suggests that there are a number of different approaches being taken.

Evaluation of the children and young people's mental health trailblazers – project overview

A presentation was given by Jo Ellins, summarising the work completed so far to scope/develop an evaluation of the children and young people's mental health green paper trailblazer programme. BRACE had been approached by NIHR HSDR to undertake this project, and was keen to do so as innovations in children and young people's mental health was a core BRACE priority theme. In partnership with the Policy Innovation and Evaluation Research Unit (PIRU) at the London School of Hygiene and Tropical Medicine, BRACE will lead an early evaluation of the trailblazers, exploring the models and approaches being developed within local sites, implementation processes, and early impacts. It was agreed that the project would be brought back to a future steering group meeting for further discussion.

Date of next meeting: Tuesday 18 June, 2pm to 5.30pm (Royal Society of Medicine, London)