

AF Charitable Research Trust Board MEETING MINUTES

8 May 2017:

Present: Jim, Anju, Margaret, Kyle (on Skype), Ngaire

7.10 pm Welcome from Jim meeting started 7pm

Introduction:

- intentions of constitution – constitution of the Trust Fund and its purpose try and encourage not only "grass roots" research, and GP education but also to support existing GP research and researchers who may not have adequate funding to complete and publish various projects if these projects are considered to have relevance to GP in the Greater Auckland and Northland areas
- the application process is evolving and that in this funding round the application process was a bit rushed.
- Thanks expressed to members for coming, this Research Trust Board (AFRTB) does a real service to GP to make sure relevant, new or interesting primary care research gets a bit of funding, even though it is often just seed funding. It is real work to prepare and attend meetings and is remunerated at an appropriate level for medical professionals.

Discussion – the application process was clarified – now members of the research board can access applications directly from the Trust's website:

<http://www.northland-rnzcgp.org/charitable-trust/>

Jim proposed an agenda for the evening meeting and apologised for not having circularised this prior to the meeting - seconded (Anju). Margaret kindly agreed to take the minutes of this meeting.

There were three applications that, considering the circumstances of sorting out the applications process were considered eligible for consideration

Applications: 1. Dr Orna McGinn – application for implementation funding to practically promote implantable contraception (Jadelle, IUCDs, and Mirena IUCD) through the framework of the Goodfellow Unit.

2. PhD funding of student fees – Application Dr Kyle Eggleton

3. Application for Evaluation of Northland Neighbourhood Healthcare Homes (NNHH) – Prof Ngaire Kerse

1 Request by Orna McGinn – who was directed to website by Kyle via e-mail communications

- Requesting funding for her time to develop training module (Jadelle mirena)
- discussed email from Dr McGinn as well (read out by Kyle)
- each panel member discussed application
- Proposal: Accept but brief letter back but with expected reporting framework
- All agree huge area of need and provided report can be filled within our the requested timeframe –application to be accepted

****Accepted in entirety \$3500, reporting made clear to be billed as one-off (½ now and ½ on completion of the project

ACTION: Jim will draft letter

2. Kyle presented application verbally and then withdrew from the meeting so others could discuss.

The official document request was sent in in required timeframe)

- Request for PhD fees \$1900, this allows for staff discount (Kyle is a part time SL)
- A role of the trust is to fund expenses for academic undertakings, recognising that time spent in academic pursuits is often paid less well than clinical work.
- Questions by members of group regards any negative feedback (none) and applicability to wider group nationally
- Separate request for Kyle to please send copy of research that is being published tomorrow for all members to see as we are interested in Kyles work (see published paper *Ann Fam Med* 2017;15:255-257. <https://doi.org/10.1370/afm.2075>. - Impact of Gaps in Merit-Based Incentive Payment System -Measures on Marginalized Populations)

*****Support for continued personal PhD funding agreed unanimously

3. Ngaire presented the outline of the proposal on behalf of her co-investigator AP Tim Tenbensel and then withdrew from the meeting for the discussion

Representation by Ngaire regards Northland neighbourhood healthcare home...

- Request is for evaluation of implementation

- DHB is funding the implementation but no funding for evaluation
- Where implemented previously (Pinnacle) has been evaluated, but no interviews were done in this analysis and is a very different socioeconomic population
- The current request is to fund interviews for 2 Whangarei (city) practices to see if the health care home initiative working, by structured interviews and then process evaluation... financial request is for time/travel/accommodation
- Discussion : came in 1 week after 1st May Deadline ** issue raised re making clearer about application deadline in future application deadline[Need to advertise deadline – now on website, make e-Pulse aware]
- Merit in project important to evaluate public health measures is crucial – clearly GP researchers have a role in this
- Recognition that although this is core University Department work there is often little spare money for study incidentals, travel funding for presenting results etc
- Please reapply in November re analysis component and this could be considered for funding providing progress in the research is being made.
- There may be merit in looking at early data before committing totally to funding the analysis
- That there are some risks in funding health services research where the implementation or the theoretical framework behind the project is not thoroughly discussed with the researchers – often difficult to achieve in reality

***** Accepted in part

- Fund \$6800 for interviewer data collection etc. to get the data flowing,
- Discussed process – University needs to invoice AFCRTB
- Discussed structure so all money goes to purpose not elsewhere
- Report needs to be received by October if AFCRTB is to consider further support (certainly before next AFRTB meeting)

General Business - Discussion

- Process for future applicants /closing dates publicised more widely (e-Pulse and website)
- Brief report – Finances for fund in good shape. Current funding round can be largely met without impacting on base capital of the fund.
- Verbal report (Kyle) on Dr Tania Quinn's project – application ethics, literature review, interviews – Kyle does she have an update paragraph for our annual report?
- Auckland Faculty Meeting AGM Auckland Faculty 15th June – Jim to circularise our Annual Report to members before this meeting

9.00 pm

Meeting Closed