

Management committee Thursday 11th May 2023 10am-12pm

Attendees: Fiona Davey, Mike Grocott, Kate Holmes, Alan Jackson, Martin Wiseman, Steve Wootton

Apologies: Vicky Coyle

Item	Actions	Person responsible	Deadline
Minutes of the last meeting	The minutes of the last meeting were approved.	responsible	
i doc meeting	Outstanding actions Prehabilitation strategy to be circulated	VC	
	Advisory committee AAJ will circulate a revised draft of the advisory committee proposal by the NIHR-ICONIC meeting	AAJ	
	(date TBC)		
	Charity engagement FD will send proposal to colleagues at WCRF. The resources required for the workshop also need to be considered.	FD	
	Proposal for UK Oncology Forum session – VC to circulate	VC	
	Matters arising CPOC-NIHR alignment MG reported that CPOC would welcome discussions about formally aligning with them. They have two types of partners – 1) partners who they seek contributions from, and 2) broader steering/advisory group members, which would be more appropriate for the Collaboration. Action: Write to Derek Alderson who is the previous Chair of RCS, and now is the Chair of CPOC. This should be addressed from VC but can be drafted by MJW/FD. MG will review draft before it is sent.	VC/MJW/FD/MG	
	Nutrition Society We have addressed the Nutrition Society's questions from the board and are awaiting their final decision. SAW will be interim Chair of the SIG to get the group going.		

	Succession planning	
	MJW has liaised with WCRF, who have	
	generously offered an honorarium of £2000pa	
	for the successor to the Management Committee	
	Chair.	
Prehabilitation	The Prehabilitation Strategy document is	
strategy	required for the cross-work stream meeting.	
	The purpose of this document is to capture the	
	common purpose around prehabilitation and	
	give structure and a framework to the research	
	needs.	
	The proposed Surgical and Devianerative Core	
	The proposed Surgical and Perioperative Care	
	TRC has a work stream on perioperative care and	
	mechanisms of injury, with an interest on	
	understanding role of fitness and inflammation. An initiative has also started based at the Royal	
	Marsden thanks to philanthropic funding.	
	The initiative focuses on three areas:	
	- basic science project (Southampton) –	
	discovery science and biological work	
	using samples from various RCTs.	
	- Mapping of implementation of services	
	around the country and health services	
	research (Imperial)	
	- Standardised screening, assessment,	
	intervention and outcome description	
	(Manchester, Sheffield, Canada)	
	These groups are all interlocking and could feed	
	into our prehabilitation strategy.	
	into our prenabilitation strategy.	
	Activities around the delivery of care, quality of	
	it, and ability to delivery care	
	Clinical processes and how to refine, develop and	
	understand the clinical processes	
	Activities around basic sciences	
	Psychological and behavioural science	
	Physical activity	
	Nutritional science	
	Our groups would want to know what is	
	happening within the matrix of these areas to see	
	where they can fit in. This will also help	
	demonstrate how the wider Nutrition Society	
	and SIG can be brought into this activity.	
	The question was raised of the best machanism	
	The question was raised of the best mechanism	
	to engage with the proposed TRC and how to	
	bring the Molecular Mechanisms, Toolkit and	
	LWBC groups in line with this programme of	

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	work. The cross work stream meeting will enable the groups to see how they fit in with the overall purpose. However, a designated person is still required to provide the link between the two		
	groups. Action: SAW to share matrix of activities	SAW	23/5/23
	Action: MG to share information about the activity with the Royal Marsden.	MG	12/6/23
	Action: SAW and MG to meet before the cross- work stream meeting to share what has already been done and to start to develop a gap analysis.	MG/SAW	26/5/23
Executive Committee	The outcome of the cross-work stream meeting will inform the key activities and priorities that will be the focus of the Executive Committee meeting.		
PPIE	The recent recruitment campaign has received good interest. This was advertised via the NIHR People for Research platform. One representative has been identified as a potential candidate for the WCRF Steering Group which currently lacks a PPIE representative. Their details have been forwarded to WCRF, who wish to have a call with Kate Allen to confirm their suitability.		
	The Executive Committee also needs a representative and we will get some experience of our new representatives' ways of working to see if any might be suitable candidates.		
	An online workshop to introduce new representatives to the Collaboration and get input on their priorities for engagement and outreach activities. FD has reached out to Heather Parsons, PPIE lead at Southampton BRC. We would like to ask the PPIE team to facilitate the meeting.		
	The Southampton BRC PPIE programme is developing an academy for patients and public to engage in research and this will be in place soon. We would like to be able to offer training to representatives to ensure they meet the expectations of NIHR. There may be some resource implications.		
WCRF partnership	The Partnership Steering Group meeting is in June. Points for us to raise include the suggestion that medical education could be brought under the Collaboration's activities of the Professionals		

	work stream. This will help to ensure that the Collaboration's expertise can fully contribute to the project and drive it forward. We need to be clear which projects WCRF currently have resource for to confirm the workplan for the next year. It was noted that UK-based activities need to embrace diversity more. The Nutrition Society SIG on Ethnic Minorities would be suitable group to engage with and could help further develop		22/5/22
	the FAQs. Action: Request to add to Steering Group agenda. Mike Grocott left the meeting	FD	23/5/23
ICONIC	ICONIC has not yet heard from IUNS about the future of task forces, but are moving ahead on the presumption that it will be approved. The activities carried out so far have been piloting ambitions which have proved to be of value and have the potential to be upscaled.		
Work stream updates	Population Health The group is progressing on the FORALL study. This is aimed at the NIHR PDG call with a deadline of September. Equitable access for people from seldom-reached groups for breast cancer. Rebecca Beeken has written a first draft of the application. The group will be meeting again in June. An outcome of the PDG would be to submit to PGFAR.		
	Action: FD to circulate draft application John Saxton and Rebecca Beeken have agreed to co-lead the work stream. LWBC Jane Hopkinson's application to HS&DR has been successful. The Collaboration will be receiving.	FD	12/5/23
	successful. The Collaboration will be receiving about £14,000 to support the study in dissemination and engagement. JH would like guidance about what this would look like. Action: SAW, FD and JH to meet. We have received a request from Richard	SAW/FD/JH	12/6/23
	Skipworth about supporting AUGIS in the development of nutritional guidelines for patients with esophagogastric cancer undergoing surgery. The Committee confirmed that we would need to be fully involved in the project to be able to support it and get NIHR support.		

Molecular mechanisms

The group has now secured a PPIE representative. No volunteers have come forward to take on the role of co- or deputy chair. However, they confirmed they find value in the group and wish to continue. The opportunity to get expertise across a range of mechanistic considerations and get help with their own grants has been beneficial to members.

The group would like to develop a framework for prehabilitation which embraces the range of considerations through a lens of basic science – recognising all the exposures in prehabilitation either minimise stress from environment or maximise ability to cope with stress and explore ways for the dynamic relationship between the two shifts to the direction of coping, and how different exposures contribute to that.

The group also discussed the challenge of promoting their work to the public with the risk that messages might be misinterpreted by the public or media. Presenting the science within a balanced framework that recognises limitations is a challenge.

The group could consider learning from other groups about public engagement – Sense About Science might be able to help. We could also explore whether the WCRF comms team could provide support. **Action:** Ask to add to a future meeting agenda.

The PPIE group can also provide guidance in how public engagement is best carried out.

Toolkit

The group has been meeting regularly over the last few months. They currently do not have a cochair to work with SAW.

The group has made the decision to a) complete the toolkit manuscript (SAW is now completing edits) and b) focusing on next task of a briefing document on nutrition screening in relation to cancer. This has been narrowed down to the area with the greatest uncertainty – living with a heavier weight. "Principles and guidance of screening for patients living with overweight and obesity."

FD 31/5/23

	The group is also supporting Shelly Coe who has done a systematic review of screening tools in overweight/obesity and is now finalising the manuscript. The review has identified a lack of consistency and uniformity, with a need to have principles agreed and in place. A discussion has been had with Frontiers in Nutrition about publishing both the systematic review and the screening document.		
	CTYA The group will next be meeting at the end of June		
	Professionals LE and EM are trying to reconvene the group and confirm membership. The group would like further direction from the Executive Committee about their priorities. A suggestion was given to ensure we have an update about AfN's medical education activities. A conversation bringing all of the parties together might be beneficial. AAJ could explore this with AfN. The work stream does need to be constituted in a way that it can operate and function at an appropriate level within the broader considerations of other work going on in the area.		
AOB	Strategy with BRCs and platform trials Now that the perioperative care group is secure within BRCs we are keen to see how we can work together. One option is working on platform trial principles, without currently trying to develop a singular platform trial protocol. These conversations will continue and the first step might be to present to the BRCs. The cross work stream meeting will also provide an opportunity to contribute to this discussion.		
	NOCRI industry survey The Collaboration has received a survey from NOCRI Business Intelligence about working with industry and what sort of connections we would be interested in, and what we can offer to industry. Action: SAW, MJW and FD to work on response. Send guidance and principles for working with industry document to NOCRI for information.	SAW/MJW/FD	

PCUK			
The Pancreati	c Cancer UK workshop is taking		
	May. SAW will be attending. The		
_ ·	a mixture of presentations and		
discussions.			
Annual repor	t		
•	be beneficial to us in reflecting on		
•	riod of work and to mark the		
·	has been achieved.		
	n to finish this by October.		
	re-circulate the proposed template	FD	
for the annua	• • •		
Action: KH to	share TRC reporting template with	KH	
FD when read	lv		