

NCRI Consumer Forum Steering Group meeting

Minutes for Meeting Held in Room 2.22, Angel Building, 407 St John Street, London EC1V 4AD
Tuesday 26 April 2016, 10.45 – 14.30. Followed by Key Consumers' meeting; 14.45 – 16:00



Attendees

Helen Bulbeck (HB)	- Consumer Forum
Margaret Grayson (MG)	- Northern Ireland (<i>teleconference</i>)
Nicola Keat (NK)	- NCRI Head of Clinical Research Groups
Vee Mapunde (VM)	- NCRI Associate Consumer Lead
Natalie Salhov (NSa)	- NCRI Consumer Administrator
Natalie Simon (NS)	- Wales (<i>teleconference</i>)
Richard Stephens (RS) (Chair)	- NCRI Consumer Lead; Chair, Consumer Forum
Vacant Place	- Consumer Forum

Apologies

Matthew Baker (MB)	- Consumer Forum
Zena Jones (ZJ)	- NIHR PPI Lead
Stuart Griffiths (SG)	- NCRI Partners
Peter Rainey (PR)	- Scotland
John Rouse (JR)	- Conference Committee Consumer Representative

1. Introductions

1.1. Minutes Update

1.1.1. The actions table was considered

1.1.1.1. Action 3: NK advised that Nicola Harris has struggled to garner a contact list from the comms network, she is now escalating her outreach to senior Partners contacts.

1.1.1.2. Action 4: Instead of defining a new Theory of Change for the Consumer Forum, SG will align with the NCRI strategy development, headed by Susan Kohlhaas. Hence, this action is not required, but rather SG will offer his input to Susan.

1.1.1.3. Action 5: NK has spoken to Lorna Fern and James Adams regarding a better outreach for recruiting consumers to the TYA CSG. James identified a consideration for advertising, whereby this age group tends to respond to emails communications by deleting them hastily. Instead, a better approach would be face-to-face contact regarding such opportunities. The conversation had three outcomes:

- Lorna is to approach the Bright Light Projects
- VM is to help with consumer recruitment to the TYA CSG

Action: NK to put VM in contact with Lorna

- The advert for a TYA CSG consumer representative is to be rewritten by Lorna and VM.

1.1.1.3.1. NS suggested the Wales Alpha Group, which has an interest in cancer research, as an avenue for outreach.

1.1.1.3.2. HB plans to attend the Teenage Cancer Trust Conference in Edinburgh, 5-7 December, 2016, and suggested having a NCRI stand at the conference. In addition, HB offered to cover a stand at the Young Person Cancer Conference in September.

Action: HB to update the CFSG at the next meeting as to whether she will be covering the stand and the conferences.

Post meeting note: Lorna will be submitting an abstract to the December conference and, should this be accepted, will be provided with a display area.

1.1.1.4. Action 3.1.16: the mentoring guide project was considered a good group effort by those involved and a good outcome. Effort needs to be taken to monitor the progress of how the guide is used as a working document. NK added that Karen Inns (NIHR) has suggested resources to include in a future version of the guide.

Action: NSa to put snapshot of mentoring guide onto a slide for the CSG meetings and strategy days.

1.1.1.5. Action 4.3.5: survey monkey will be used for annual survey and will include the request for a name.

1.1.1.6. Action 4.4.2: the group considered the purpose for a contacts list is to develop informal links made and for circulating the NCRI newsletter. Attention is needed to see how to add and build this up in the future, when to use it and how to use it.

1.1.1.7. Action 4.5.2.3: the group considered the website update to be a big job, in order to make it more functional and restructured. It was suggested to take first steps and consider it in the work plan.



1.1.1.8. Action 4.9.5.1: NK has not yet contacted the CSG Chairs, regarding subgroup consumer input, but will do once a proposition has been put in place.

1.1.2. Minutes approved by the Steering Group.

Action: NSa to publish minutes on website.

2. Updates from 4 Nations

2.1. Scotland - No update given

2.2. Northern Ireland (updates from MG)

2.2.1. NI Cancer Research Consumer Forum (NICRCF) hosted a public information evening on Breast and Ovarian Cancer Research in the Centre for Cancer Research and Cell Biology, Queens University, Belfast, on April 13, 2016. The programme included presentations by Dr Gerry Hanna (Consultant Clinical Oncologist), Mr Stuart McIntosh (Consultant Breast Surgeon), Dr Stephen Dobbs (Consultant Oncological Gynaecologist), Dr Lisa Jeffers (Genetic Nurse Counsellor), Professor Richard Kennedy (Consultant Medical Oncologist), Dr Laura Feeney (Medical Oncology Registrar). A patient shared the impact of inheritance of an abnormal BRCA gene and another patient gave her personal experience of taking part in ICON8 trial. The evening gave Forum members the opportunity to explain their involvement in partnering with researchers to enhance the quality of research for patient benefit.

2.2.2. Prostate Cancer Research NICRCF PPI Advisory Group has its inaugural meeting on April 27, 2016. It will take the form of three formal meetings considering presentations and information from three local investigator led studies currently being conducted in Belfast. Forum members have had input to these studies from the design stage. The group will look at study progress including research amendments, recruitment and communication plans. Minutes of the meeting will be fed into the wider research oversight processes.

2.2.3. HSC Public Health Agency R&D Division are holding an Implementation Workshop on May 16, 2016, to introduce the new R&D Strategy and seek consultation on the implementation plan from the R&D Community, including the public.

2.2.4. Plans are underway for Clinical Trails Day when Forum members will link with CRUK, NI Cancer Trials Network and Ulster University to hold an event in the foyer of the NI Cancer Centre.

2.2.5. HSC R&D Pier group and NICRCF are holding a joint training event in June – Sally Crowe on Influencing and Critical Review.

2.2.6. HSC R&D Building Research Partnerships – involving the public in the design and conduct of research, planned for June.

2.2.7. HSC Public Health Agency and R&D and Division of Clinical Psychology, QUB are sharing a one day conference to focus on “Involving you and improving care” exploring the impact of involvement. The event is scheduled for June 22, 2016.

2.3. Wales (updates from NS)

2.3.1. Wales Cancer Research Centre is still recruiting lay representative Theme Leads to work alongside the themes leads for: pre-clinical, translational, clinical and community. The public and researchers have been invited to the Centre’s events, with the aim to boost engagement.

2.3.2. CRUK, NCRI and Tenovus events and opportunities have been promoted in Wales.

2.3.3. Work continues with researchers to advertise opportunities and engagement, including adverts in the public sector section in the Healthwise in Wales website.

2.3.4. Weekly bulletins and newsletter have been circulated.

2.3.5. Cancer Focus edition will be published in August. NS will discuss with the Consumer Forum Steering Group about ideas for the Welsh audience.

2.3.6. A review is to be conducted later on in the year, which will examine processes, functions and to see if systems are fit for purpose, with the aim of supporting network members.

2.3.7. NS is involved in a methodical study group, which is focused on clinical trials, across all diseases, and will share information with the group. The aim of the study group is to identify gaps in knowledge, in terms of researching public involvement methodologies in clinical trials (areas for further research). MG and HB are involved in the studies group too. There is a publication plan with journals, with the aim to have it out as soon as possible.

2.4. NIHR - No update given

3. Update on Forum Activities and Work in hand

3.1. Appointment of Consumer Lead

3.1.1. NK confirmed the Consumer Lead and Associate Consumer lead appointments, along with VM’s introduction, which was made at the Consumer Forum meeting on Tuesday 22 March, 2016. The appointments commenced on 1 April 2016, and were initiated with the meeting of NK, RS, VM and Karen Kennedy, in which they discussed how to introduce VM to the Forum and develop her role.



- 3.1.2. VM's 25-day role will include a focus on enhanced digital technology, community outreach, TYA and impact (with HB and RS). NK confirmed that VM would also join the Prostate CSG as a consumer member, which would include a scientific mentorship. RK, VM, NK and NSa will have regular calls.
- 3.1.3. RS is to continue to chair the CFSG and CF meetings. His activities will continue, with input from VM.
- 3.2. Budget information
- 3.2.1. Last year, the NCRI Consumer activities totaled approx. £75K (£42k pa from NIHR for 3 years, matched by the NCRI), which means an underspend of approx. £7K. NK will look to roll this over to next year's budget, in consultation with the NIHR.
- 3.2.2. There was a need to be aware of consumer expenses, including training, especially in light of the additional Consumer Forum meeting scheduled for this summer.
- 3.2.3. HB considered that we need 2 events and the conference meeting every year, with time to reflect on activities. It was proposed that the meeting structure could include one inward looking meeting (such as impact reporting and mentoring) and one meeting focused on external activities (including speakers).
- 3.3. Feedback from Forum Meeting
- 3.3.1. The feedback survey was presented to the group.
- 3.3.1.1. MG was disappointed that not everyone filled in the feedback form. RS commented that the return rate had improved, given the change in method to collate feedback (survey monkey), however it remained that 1 in 4 attendees didn't reply.
- 3.3.1.2. The name section is optional, but allows for follow-up, however NK indicated that anonymity allows for honesty and doesn't believe it should be changed to being compulsory. RS stated that what is important is appreciating the feedback of the group, rather than of the individuals. This should be considered separate to conference feedback, which is tied to the financial award of the bursary and obligatory feedback.
- 3.3.1.3. RS indicated that the information gathered from the sessions appears to be "useful" rather than "informative" amongst consumers, and raised new aspects to items he was already aware of. The feedback scores were considered reasonable, with each item receiving high approval from some members. NK stated that the survey indicates the need for fewer items on the agenda and more time for discussion.
- 3.3.1.4. The survey was discussed in more detail. Given John Rouse had recently been appointed, as the survey pointed out, he was unable to provide new information to the topic on the conference, which was found to offer most consumers "no new information". Some items on the agenda were indicated as useful but not informative, such as the AZ apps.
- Action:** NSa is to anonymize commentary and replace it with themes/topics; and will publish on website.
- 3.4. Conference 2016 and 2017; Conference Bursaries (NK)
- 3.4.1. Conference bursaries were considered as a priority, given the early bird registration for the conference had been brought forward. The pros and cons as to whether only NCRI consumers should be allowed to apply, or if it should be open to the general public, were considered. 40 bursaries allocated amongst the 80 NCRI consumers was considered, including new consumers to be recruited in July. Consideration around prioritizing/ranking consumers according to need was raised. NS suggested that the number of conferences attended by a consumer should be included in the criteria for ranking, with more value added by those that have already attended, given they tend to be more informed.
- 3.4.2. RS suggested the need to advertise only amongst NCRI consumers, rather than more widely as has been the case in the past. However, RS considered the option to hold 4/5 bursaries back for new recruits, and those remaining (if any) to go to those that did not receive funding from any other source.
- 3.4.3. NK confirmed that the budget for the conference bursaries comes from the conference team, so they ultimately have the final decision.
- 3.4.4. SG suggested that priority should go to the NCRI Consumer Forum, as speaking on behalf of the Forum, this is what "we" should be requesting. MG agreed that the applications should not go out to the wider public.
- 3.4.5. VM commented that the bursaries should be restricted to the NCRI members, and it is important to do so as the money that goes out will see a stronger return, given that bursary holders, who are own members, will provide more useful feedback. The NCRI group is meant to bring a patient/public perspective, therefore feedback will be more informative. However the option to hold back a few is possible, however 90% should go to the NCRI.
- 3.4.6. RS highlighted that the aim for 2017 is to have 2 consumer led sessions at the Conference. SG considered the conference is not a public engagement event.
- 3.4.7. The Consumer Forum Steering Group agreed that the bursaries will be going to the NCRI Consumer Forum, with 4/5 fenced for new consumers.
- 3.4.8. JR's update NCRI Conference Scientific Committee meeting, April 14 2016, was sent via email and read to the group. The following points were covered:
- Speakers lined up for the 2016 conference.
 - Programme for the 2017 conference
 - Consumer opportunities lies in the parallel sessions



- Option to see consumer representatives on the panels for all
 - Abstract review process
 - Suggestions for social events and catering
 - Need for sponsorship
- 3.4.9. RS raised the need for poster suggestions. HB suggested having a poster that conveys “our” role and/or the consumers’ impact on clinical trial proposals, which portrays what consumers do and how they have helped. RS agreed, and suggested that this should be a taster poster, with case studies for posters. NK considered that a new consumer could take this project forward. HB confirmed that she can write a couple of trials.
- Action:** RS will ask for volunteers to take the poster project forward in the newsletter.
- 3.5. Consumer Forum Steering Group ToR
- 3.5.1. RS raised that he perceives a lack of clarity about whether the Consumer Forum Steering Group deals with big strategic issues, e.g. which groups receive bursaries, versus operational issues e.g. which individuals receive bursaries, and which are the priorities for CFSG. He proposed that CFSG should meet formally to discuss strategic issues in the morning segment of the meeting and, in the afternoon, all can be invited to discuss operational topics, but final decisions would be with those responsible for implementation. SG and HM agreed that the role is more strategic. NS and MG agreed that RS’ suggestion would be a sensible approach and would fit in as required.
- 3.5.2. It was agreed that the work and topics would be split and there is no benefit for formal CFSG discussion or approval of operational issues. NK suggested that on a practical level, this will allow things to progress.
- Action:** NK/NSa to redraft the ToR and circulate to CFSG members for comment. The following Consumer Forum Steering Group meeting will be planned accordingly.
- 3.5.3. HB requested for the updates from the 4 nation updates to be circulated in advance, and we will then be able to comment on them at the next meeting. NS and MG agreed.
- Action:** NS, MG, PR and ZJ to circulate updates two weeks in advance of meeting, following a prompt from NSa.
4. Planning and Implementation
- 4.1. Impact assessments: HB confirmed that she had not dealt with this, but will work with VM moving forward on this project. 4/5 areas will be focused on and reported back at the end of the year.
- 4.2. Impact theme (areas to measure impact and topics to work on) will be developed for the next Consumer Forum meeting.
- Action:** NSa to distribute the Consumer Forum responses to the Impact item to the Consumer Forum Steering Group.
- 4.3. RS requested for nation representatives to send any possible working examples of impact (what impact they measure and how), or what value do they had. SG commented that proving better outcomes, such as those of patients, is difficult to measure.
- Action:** MG, PR, NS, ZJ to send examples of any metrics, measures or quality standards of impact or value added for/by PPI.
5. Sub-group Consumer Activity (NK)
- 5.1. Around 30 consumers are involved in subgroups and could be claiming an honorarium for such activity. In 2015/16, around £4000 was spent on this activity, so there needs to be a plan in place to structure such consumer involvement and plan costs.
- 5.2. NK would like the Consumer Forum Steering Group to think about a model for subgroup consumer activity. SG considered that a lot of work is going on in subgroups and this is not being captured, and so we are not aware of the impact of such involvement. However, the costs implications need considering, such as honoraria. There is a possibility to seek funding from site specific charities for the consumer places (rather than for the specific participants). It was agreed that there should be a maximum of 1 NCRI-funded consumer per subgroup.
- 5.3. NK suggested the possibility of having an intern working to scope possible funders, such as charities. HB raised the concern that if a charity is involved in funding, they may be motivated to drive the agenda. It was, therefore, proposed that charity funding could go into a single pot and be detached from funding particular meetings. Appointment of consumers on subgroups was considered and that perhaps they should only be recruited from the Forum, sitting on a CSG and appointed to a subgroup on that CSG. It was noted that this would restrict those involved. RS considered the control of appointment sits with the Chair of the CSG/subgroup Chair and they have to be onboard with any proposal for subgroup activity. HB suggested that the first port of call could be to select a member from a pool. If there is no appropriate NCRI consumer, then a Chair can make the case to find their own.
- 5.4. SG considered the impact of consumers on subgroups and that they are worth having on subgroups. Hence, we need to advocate how to have consumers involved in subgroups, by putting a process in place, and the NCRI should have funding for them. Three options need consideration: 1) a consumer can be 1 core member and treated like other consumer members, however not to receive an honorarium; 2) the budget to come from a consumer pot, however this should be covered by an increase in NCRI consumer budget, otherwise consumers won’t be able to be core members on subgroups, as budget will not allow; 3) budget to come from charities. And consideration should be given as to how we judge these three options.



5.5. HB raised that there is not necessarily a need for honoraria for consumers on subgroups, however travel should be covered, and they are appointed with the mutual understanding that they are not to receive an honorarium. They will go through the due-process of being appointed to a CSG, and then they can choose whether they are to join the subgroup. RS differentiated between the consumer voice on subgroups, working alongside researchers, and CSG involvement, which needs to be fully funded. There is therefore a need to differentiate between CSG meetings (honorarium and travel reimbursed) and subgroup meetings (only travel reimbursed). MG, NS and HB agree.

5.6. RS considered core consumers on subgroups, and such consumers who should not be considered core consumers, and therefore cannot claim certain travel expenses, such as those incurred when attending the Consumer Forum meeting. A concrete proposal, to set up a clear framework for consumer involvement on subgroups, is required to circulate amongst the Consumer Forum Steering Group, with initial consultation with CSG Chairs, in advance of the next CTSG meeting.

Action: NK, NSa, VM and RS to pull together an options paper.

6. Annual Work Plan

6.1. Spring Consumer Forum Meeting, Consumer Training in 2017, CTSG board and Chair Forum need to be listed in the plan, with a 2 week deadline for receipt of reports.

Action: NK/NSa to repopulate in plan.

7. AOB

7.1. SG introduced the Shared Learning Group of Involvement (TOUCAN), which involves a forum of individuals working outside of cancer and includes patient involvement.

Action: SG to share details with Consumer Forum Steering Group.

7.2. NSa presented the consumer training feedback from the March training. It was noted that all attendees felt that the training was informative, useful and well-delivered, although almost all commented about how full and intensive the two days were.

Key Consumer Meeting

(Attended by RS, VM, NS, NK, SG)

8. Affiliate membership

8.1. It was raised that consideration needs to be given to the end of the consumer term, as to how we decide if they can be invited as an affiliate member (noting that affiliate members do not have their travel reimbursed). RS raised the point to consider whether they are still committed to the NCRI and what their objectives are following 5 years of membership. Issues arise when people resign or come off a group. Second, a transition period could be considered for core members until they become an affiliate member.

8.2. A clear process was suggested, along with a review of membership/criteria of affiliate members.

Action: RS to send request to affiliate members for ideas on the best approach to affiliate membership.

9. Contact list

9.1. Next recruitment advert to be sent to those on the contact list. This opportunity could also be used advertise the existence of the NCRI newsletter.

9.2. Action: NSa to send recruitment advert to all on the contact list, and to include link to NCRI Newsletter

Action: RS to send a reminder to the Consumer Forum that the NCRI newsletter is available to sign up to.

9.3. Methods for recording a contact list were suggested, including Mail Chimp and Sales Force.

10. Webpage

10.1. NK suggested the option to call on the consumers or an intern, to be involved in building the webpage, once initial fixes have been carried out

10.2. Consideration was given to the priorities of the website: NCRI consumer usage as a first priority, public facing content as a second priority. NSa to work with the NCRI comms team and Matt Baker to develop this further.

Action: NK/NSa to have a teleconference with MB and the comms team.

11. Toolkit (RS pp MB)

11.1. The toolkit is to be updated, addressing the consumers' needs. It was raised whether it will be made more generic across all cancers, what will the rationale be and what we would lose. Furthermore, consideration should be given into how much time is needed to update it, so the document needs a specification.

Action: NSa/NS looking into options for the production of an editable version of the toolkit.

12. Summer Consumer Forum Meeting

12.1. HB recommended a meeting item focusing on value added and impact. For example, 1 hour covering clinical trials proposals and data in trials, such as power calculations, with the potential speaker, Cindy



Billingham (HB to invite). The session can address why you have difference in calculations, why certain things are missed out, and where we are with consent.

Action: HB/NSa to invite Cindy Billingham to speak on “Stats In Studies” (or similar).

12.2. The following agenda was proposed:

- 10:30 Welcome
- 10:45 Data presentation (30 min) and questions (15 min) – need a dynamic presenter (Sam Johnson gave a talk – 12 people attended – someone to present?)
- 11:30 Take 5s / Items consumers struggle with – trouble-shooting problems, which are previously sent anonymously
- 11:40 Value impact piece
- 12:20 Take 5s
- 12:30 Lunch
- 13:15 Stats piece (Cindy Billingham)
- 14:15 Take 5s
- 14:25 Tea and coffee break
- 15:45 NCRI strategy piece (Susan Kohlhaas)
- 16:00 End

13. Event Reimbursement Request Procedure Template

13.1. Suggestions were made to edit the template.

Action: NSa to make edits and circulate to the CFSG to approve. RS will then draft an email and circulate to the Consumer Forum after NCRI has decided on new policy and amounts.

14. Working closer with NCRAS/NCIN

Action: NK to follow up

15. NCRI Strategy Development

15.1. RS has started work on this as part of the NCRI Strategy Reference Group. It will include a Theory of Change consultation process across the NCRI. The direction of NCRI is to set a strategy for the next five years, which is being facilitated by Susan Kohlass. Peter Rainey is their second consumer rep on SRG.

15.2. RS proposed a “Cancer ‘Commons’” day event, debating the issues around the progress of NCRI.



Actions

No.	Minutes and Action	Owner	Deadline/Progress
<i>Outstanding Actions</i>			
1	Plan and prioritise visits to CSG strategy days and CSGs with new consumer members during 2016. NSa to place in Consumer Diary. RS/HB to catch up.	RS/HB	Ongoing
3	SG would like to have a mechanism in place to feedback to NCRI Partners about the consumer work. Nicola Harris (NH) to pull together a list of Partner contacts for SG. NH did not have a good response, as comms level, so will be escalating outreach to partner relations.	PR/SG/NS NH	27/11/15 Ongoing
4	Theory of change principle: SG to be available to Susan Kohlass to consult over the consumer position for the NCRI strategy on Theory of Change. .	SG	During 2016
5	Underrepresented groups to be explored with NK, specifically the possibility of looking at affiliate/ associate membership, who the underrepresented groups are and how to find them Update: NK to redraft advert to address group and to circulate to specific groups over next recruitment round, e.g. Bright Light.	NK/Lorna	During 2016, before next recruitment
1.1.3.2	Circulate organisation websites focused on inclusivity	ZJ	Outstanding
2.4.1.1	Circulate NIHR PPI Strategy's visions and values for comment	ZJ	Outstanding
2.4.6.4	Discuss incorporating the role of patient ambassadors into the future role description of NCRI consumers.	NK/RS	Before next recruitment, September 2016.
4.2.6	Allocation of time to discuss conference and consumers in greater detail at next CFSG	NK/RS/NSa	26/04/2016
4.3.5	Streamline the surveys and investigate technologies to use to run the annual surveys. Survey Monkey used for Consumer Forum meeting. Annual survey needs name.	NK/MB	Outstanding
4.4.2	Collate contacts from earlier recruitment rounds to put together as part of a larger 'contacts' spreadsheet. Need to build up and look into when/how to use this.	NSa	Ongoing
4.5.2.3	Evaluate how to update to website.	MB/volunteer consumer	Ongoing
4.9.5.1	Contact Chairs to gage insight into how they are ensuring consumer input	NK	21/03/2016
<i>Current Actions</i>			
1.1.13	NK to put VM in contact with Lorna	NK	Ready for recruitment
1.1.1.3 .2	HB to update on covering the stand and the conferences.	HB	Next meeting
1.1.1.4	NSa to put snapshot of mentoring guide into a slide for the CSG meetings and strategy days	NSa	Prior to next CSG strategy day
1.1.2	NSa to publish minutes on website.	NSa	Completed
3.3.1.4	NSa to anonymize feedback and replace with themes/topics; and will publish on website.	NSa	Started
3.4.9	RS will ask for volunteers for poster involvement in the newsletter	RS	Upcoming newsletter
3.5.2	NK/NSa to redraft the ToR. The following Consumer Forum Steering Group meeting will be planned accordingly.	NK/NSa/RS	Prior to next CFSG meeting
3.5.3	NS, MG, PR and ZJ to circulate updates two weeks in advance of meeting, following a prompt from NSa.	NS, MG, PR and ZJ	Ongoing
4.2	NSa to distribute the Consumer Forum responses to the Impact item to the Consumer Forum Steering Group	NSa	Completed



4.3	MG, PR, NS, ZJ to send examples of any metrics, measures or quality standards of impact or value added for/by PPI.	MG, PR, NS, ZJ	Prior to next CF meeting
5.6	NK, NSa, VM and RS to pull together an options paper	NK, NSa, VM and RS	Next meeting
6.1	NK/NSa to prepopulate annual work plan.	NSa	Ongoing
7.1	SG to share details of the Shared Learning Group with Consumer Forum Steering Group.	SG	Next meeting
8.2	RS to send request to affiliate members for ideas on the best approach to affiliate membership.	RS	
9.2	RS to send a reminder to the Consumer Forum that the NCRI newsletter is available to sign up to.	RS	Ongoing
10.2	NK/NSa to have a teleconference with MB and the comms team.	NK/NSa/MB	Ongoing
11.1	NSa/NS looking into options for the production of an editable version of the toolkit.	NK/NS	
12.1	HB/NSa to invite Cindy Billingham to speak on "Stats In Studies" (or similar)	HB/NSa	Completed
13.1	NSa to make edits and circulate to the CFSG to approve. RS will then draft an email and circulate to the Consumer Forum.	NSa	
14.0	NK to follow up	NK	

