

**MINUTES OF THE NINTH MEETING
OF THE OP TELIC HEALTH RESEARCH
REVIEW BOARD,
11 APRIL 2006**

Present:

Board:

Professor A J Silman	Manchester University	Chair
Professor P Jones	Cambridge University	
Mr P Jones	Veterans Policy Unit (VPU)	
Surgeon Commander M Groom	Defence Medical Services Directorate	
Professor D Coggon	Southampton University	
Professor R Littlewood	University College London	
Mr N Smith	Project Manager	
Mr N Blatchley	Defence Analytical Services Agency (DASA) (Health Stats)	
Dr P Howarth	VPU	Sec

In Attendance:

Prof Simon Wessely	King's Centre for Military Health Research (KCMHR)
Miss Lisa Hull	KCMHR

Apologies:

Dr R Willcox	British Red Cross
Mrs S Freeth	Royal British Legion
Brig (Rtd) R Garnett	Royal British Legion
Surgeon Captain R Johnston	British Liaison Officer (Gulf & Deployment Health) Washington

Item	Discussion and Decisions	Actions (Action date)
1. Introduction	<p>Introductions were made.</p> <p>Apologies</p> <p>Dr R Willcox, Mrs S Freeth, Brig (Rtd) R Garnett and Surgeon Captain R Johnston were absent.</p>	
2. Minutes of the previous meeting	<p>The Minutes from the previous meeting were agreed.</p> <p>Action 7.3 VPU agreed to produce a short paper for the Board setting out MOD's response to IEH's recommendations. VPU have almost completed this task and would write to the Chairman with its response by July 06.</p> <p>Action 8.1 Prof Coggon confirmed that he had spoken to Prof Wessely at King's College about the DU Normative Values Studies report. This action was now complete.</p> <p>Action 8.7 VPU had asked KCMHR to provide more detail of the costings for its proposals, and particularly the “add-ons” which KCMHR did and presented later in this meeting.</p> <p>Action 8.5, 8.8, 8.10, 8.12 The Chair had written to Dr Vedhara, Prof Wessely, Dr Rushton and Mr Blatchley with the Board's recommendations on their research proposals.</p> <p>Action 8.6, 8.9, 8.11 The Chair confirmed he had written similarly to MOD (VPU - Director) with the Board's recommendations on the above proposals.</p>	VPU
3. Results update on TELIC study	<p>Prof Wessely gave a presentation updating the Board on the progress of the TELIC study. Main data collection ceased on March 2 nd and the first papers have been submitted to the Lancet titled “ The health of UK military personnel who deployed to the 2003 Iraq War” and “Is there an ‘Iraq War Syndrome’?” Prof Wessely stated that he was also writing papers on DU, pre deployment screening, alcohol, risk taking behaviours, reservists, early service leavers and retention and medical counter measures amongst others which he expects</p>	

to publish over the summer.

4. KCMHR Proposals

Prof Wessely continued his presentation focussing on the possible next phase of the research. He summarised KCMHR's response to MoD's Statement of Requirement which had been issued on March 30th. Prof Wessely pointed out that there was agreement between MoD and KCMHR that the following should be covered in any Phase 2 research requirement: Multi symptom outcomes, Psychological injury, Risk taking behaviours and alcohol, Injuries/downgrading, Side effects/confidence in MCMs, Use of/barriers to health care and Validation of outcomes and HSR. But he said MoD remained undecided on a number of areas which (in his view) could be provided at little or no extra cost: Pre service social adversity and adverse outcomes, Work stress/job satisfaction, Career intentions, Influence of Op Tempo, Transition to civilian life and Early Service leavers

Continuing, Prof Wessely said overall costs, time scale, replenishment and the qualitative sub studies were areas where there was still further work to be done. He noted the importance of having the Board's views on these issues and set out in more detail the basis for the proposals.

Prof Wessely and Miss Hull then left the room and the Board discussed the main issues to arise concluding:

That the King's College team had delivered the scientific results expected from them from the first phase of the TELIC investigations to a very high standard. The timeliness, completeness and quality of what had been produced thus far was exemplary.

That MoD should seek to secure an agreement with King's College for the TELIC data to be made available to other academic or research organisations.

The time scale proposed by the King's team of 3 years commencing September 2006 was reasonable for a new round of data collection and analysis, and indeed is at the optimistic end given the scope involved.

That enrichment of the sample to monitor the health of successive waves of new members of the armed forces was not part of the SOR and would not be of prime importance in

addressing the key question as to whether the lack of difference between the serving and non serving cohorts in ill health would alter with increasing follow-up to 5 years. The Board also did not accept that the replenishment sample could be surveyed at such a little additional cost, given the costings put forward in the project plan.

The qualitative study of the reservists was of potential major interest, but was also outside the scope of the main study for the follow up put forward by the MoD.

It was noted there were high levels of academic time in the proposal. The costings can be divided into two portions, one for the collection of the data, and the second for the more academic exploitation of the material although there was obviously a need to allow for the costs of the analyses needed by MoD. One option for MoD if it wished to reduce costs was that work necessary to capture data could be funded under one contract from VPU; and that required for analysis could be funded separately either from grant giving bodies or other parts of MoD.

A substantial contribution to the costs came from the Institutional add-on costs following the introduction of full economic costing (FEC). This includes the true costs of recruiting additional staff such as research assistants as well as reimbursement for academic time of tenured scientists. It was considered inappropriate for the costings to include both the actual proportionate cost of HEFCE funded academic time and the indirect costs for this item. Further clarification would be useful to determine whether King's had correctly applied FEC. NB Further advice was provided after the meeting about the handling of PI costs in research proposals.

Some of the salaries proposed for the survey team were at a level more appropriate for scientific staff, although it appreciated that this reflected their special skills and experience, which were important to the successful prosecution of the proposed research. It was also not felt appropriate that the funding should cover the costs of a clinical research fellow, and that the plan should be changed accordingly.

In summary the costs submitted by the King's team would permit a substantial and important contribution to the scientific literature on the determinants of health in

servicemen, and those with similar occupational exposures. However, this was a gold-plated approach, which whilst desirable from an academic standpoint, was in excess of the MoD's stated current requirement. As a guide it was felt that trimming £0.5 million off the total would be reasonable by cutting the clinical fellow post and removing some PI salaries, although there should be substantial scope for trimming costs by reducing the institutional costs.

King's would need to be advised that there was unlikely to be a case for further funding of this research beyond the 3 years currently proposed within the TELIC research programme and that they might wish to consider their long term future in this light.

Action 9.1 The Chair would write to D VPU with the Board's recommendations.

5. Any Other
Business

None

6. Update on
King's TELIC
Study

To Be Confirmed.

Chair