Present:

- Tony Andrade (TA), Consultant Hip Surgeon, Reading
- Sue Banton (SB), Patient Representative
- David Beard (DB), Director of Surgical Interventions Trials Unit and Professor of Musculoskeletal Science, NDORMS, University of Oxford
- Mark Bovey (MB), Acupuncturist and Research Manager for the British Acupuncture Council
- Sally Crowe (SC), James Lind Alliance Chair
- John Dickson (JD), Community Specialist in Rheumatology & Clinical Manager for the NICE OA Management Guidelines by ‘phone
- Sion Glyn-Jones (SGJ), Consultant Hip Surgeon, Nuffield Orthopaedic Centre (NOC) and Professor of Orthopaedic Surgery, NDORMS, University of Oxford
- Becky Harmston (BH), Patient Representative by ‘phone
- Tracey Howe (TH), Professor of Rehabilitation Sciences, Glasgow Caledonian University
- Will Jackson (WJ), Consultant Knee Surgeon, NOC, Oxford University Hospitals Trust

- Jan Lawrence (JL), Chartered Society of Physiotherapists
- Fraser Old (FO), NOC Network Steering Group
- Andrew Price (AP), Consultant Knee Surgeon, NOC; Professor of Orthopaedic Surgery, NDORMS, University of Oxford; NIHR Oxford Biomedical Research Unit; & British Association for Surgery of the Knee (Funding Partners)
- Sandra Regan (SR), James Lind Alliance Project Manager, NIHR Oxford Biomedical Research Centre
- Jenny Watson (JW), Surgical Care Practitioner, Sheffield Teaching Hospitals; representative of the Arthroplasty Care Practitioner’s Association (ACPA)
- Fiona Watt (FW), Consultant Rheumatologist, NOC; and Senior Lecturer, University of Oxford
- Elspeth Wise (EW), General Practitioner involved with NICE OA Management Guidelines and Arthritis Research UK OA Clinical Studies Group by ‘phone

Apologies:

- Julia Newton, Consultant in Rheumatology/Sport and Exercise Medicine, Oxford University Hospitals Trust
- Bob Green, Patient Representative

Observers:

- Adrian Taylor, Consultant Orthopaedic Surgeon (Hip and Knee), Nuffield Orthopaedic Centre
- Paul Monk, NIHR Academic Clinical Lecturer in Orthopaedic Surgery, Nuffield Department of Orthopaedics, Rheumatology and Musculoskeletal Science (NDORMS), University of Oxford
- Elena Benedetto, M-PROM Study Co-ordinator, Nuffield Department of Orthopaedics, Rheumatology and Musculoskeletal Science (NDORMS), University of Oxford
### 1. Welcome
- Sally welcomed everyone to this first Steering Group (SG) meeting, and asked for introductions to be made to include interest in the area of osteoarthritis of hips/knees.
- Some members of the SG were involved with the preceding Priority Setting Partnership (PSP) on Hip and Knee Replacement for Osteoarthritis (OA), which identified the need for a follow-up PSP on early OA.
- Tracey highlighted that she uses Twitter, tweeting as The Musculoskeletal Elf and would be tweeting during the meeting. She set up the label #PSPearlyOA.

### 2. Partnership process
- Sally gave an overview presentation of the James Lind Alliance (JLA) and the PSP process, which brings together patients, carers and health professionals to develop the top ten priorities for future research funding.
- Patient and carer groups, professional associations, charities, Cochrane Review Groups, and Clinical Research Networks are all invited to get involved in the collective process of deciding which uncertainties are most worth trying to resolve through research.
- For this PSP, Andrew has obtained funding from the NIHR Oxford Musculoskeletal Biomedical Research Unit (BRU), the British Hip Society (BHS), the British Orthopaedic Association (BOA), and the British Association for Surgery of the Knee (BASK).
- Following the initial scoping being done today, treatment uncertainties are then gathered via online survey. Some were already identified in the PSP on Hip and Knee Replacement for OA. There follows a process of refining the questions, checking the evidence base to see if answers are already known, interim prioritisation through another online survey, and final prioritisation at a workshop. Results are then published in the UK Database of Uncertainties about the Effects of Treatments (DUETs) as well as in journals and via networks to stimulate applications for funding.
- In answer to questions raised, Sally clarified that the Top Ten from the PSP on Hip and Knee Replacement for OA have been published on UK DUETs, are listed on the JLA website, are with the Cochrane Musculoskeletal Review Group, and that the OMERACT (Outcome Measures in Rheumatology) group have asked about them.
- In addition, Sally is checking with the NIHR Evaluation, Trials and Studies Coordinating Centre (NETSCC) - who manage the JLA – to see where things stand in terms of potential uptake into their funding cycle. Andrew, who is leading the development of an article for the BMJ, clarified that the BOA, BASK, BHS and Arthritis Research UK are all taking up the priorities into their research strategies.
- In response to a question about PSP impact - Sally explained that some PSPs have had 3 or 4 priorities funded, and some have had the Top Ten. Whilst the NIHR can be seen as the biggest funder, each PSP can influence its own research community.

### 3. Scope and timing
- The name for this PSP was agreed as Early Osteoarthritis of Hip and Knee.
- Following a wide-ranging discussion on the breadth and scope of this PSP, the...
following conclusions were reached:
- surgical and non-surgical interventions need to be included
- people affected range from those with congenital conditions, younger people, people who are active in sports, older people
- pain/mechanical thresholds will emerge in relation to intervention
- some interventions/outcomes will apply to both hip and knee

- It was decided therefore that there should be 2 Top Tens – surgical and non-surgical, keeping in view age, pain and mechanical thresholds, ensuring that the necessary target audiences are reached with the survey and represented at the Final Workshop. The Final Workshop should aim to work in two groups accordingly, but with an opportunity for interaction.
- The aim is to complete by the end of this year, which would mean Final Workshop in December 2015.

4. Gathering the research questions and target audience
- As discussed this will be primarily via online survey as it has proven to be most cost-effective.
- Reaching the desired members of the public and health professionals requires a wider partnership of organisations who don’t sit on the SG.
- Discussion highlighted that the following health professionals need to be represented in addition: Occupational Therapists, Orthotics, Occupational Health (Department of Work & Pensions), Nurses (Practice Managers/ OA Specialists/ Health & Wellbeing), Pharmacists, Pain Management, Radiology, Podiatry, Osteopaths, Chiropractors, Paediatricians.
- In addition, non-professional bodies that can help to reach the target communities, including: STEPS (via Sue), a young people’s charity with active Facebook and Twitter presence; those that access 60-70 year olds (e.g. University of the Third Age, Womens’ Institute), 20-30 year olds and those in between (e.g. Sports Associations, which Sion/ Julia/ Andrew can access through the Arthritis Research UK Centre for Sport, Exercise and OA).
- Other ideas include: reaching out through other Arthritis Research UK Centres; flyers in various clinics; e-mail lists that SG members have access to; social media such as Facebook and Twitter through SG/ wider partners.
- Sally has drafted a first version of the survey for review and a steer. Paper copies will be available on request, but experience to date shows that there is little take up.
- The Oxford University Hospitals Trust (OUHT) is hosting websites for the suite of PSPs being managed out of the Oxford Biomedical Research Centre (BRC). The survey will be set up in Survey Monkey and linked to from the dedicated PSP website, which can be linked to by wider partners. The survey link can also stand alone if needed – e.g. Tweeting the link to the survey and requesting retweets is proving effective from wider experience.
- The SG reviewed and discussed the draft survey. This feedback will be used to revise the survey, which will be circulated to the SG by e-mail for one round of comment before finalising with a view to first piloting (and further revision) and going live in March and running to the end of April, with a review in late March/early April to assess breadth of response.

1. SC/SR to amend Protocol in light of scoping discussion
2. SC/SR to consider Final Workshop design
3. SC/SR to work on developing the routes to find the target communities
4. SR to draft website for SG review
5. DB/SC/SR to revise survey & circulate for SG review
6. SC/SR to draw up timeline
5. Survey data management
- Sally highlighted that this is a key area of work for each PSP, requiring a person dedicated to the task under SG guidance where appropriate.
- Andrew offered Elena’s services to co-ordinate this, with access to other internal support as needed.
- It was agreed that a data analysis sub-group would be useful. Initial members to include; Andrew, Elena, Paul, Sally, and Mark. Anyone else who might like to be involved to please let Sally know. A first meeting could be useful in February.

6. PSP Support/ AOB
- It wasn’t possible to cover all the Agenda items so this was not discussed. For SG information, Sally is the JLA Advisor who will Chair meetings and provide oversight and guidance to the PSP. Sandra is employed by the BRC to co-ordinate their “hub” of PSPs, and will provide some level of support. An outline of this is provided as an attachment.
- Sandra will circulate a request for Biographies and photos to use on the website, and for Declarations of Interest to be signed.

7. Next meetings
- March/April – a teleconference to review survey results to date
- June – a face to face meeting to review the preliminary data analysis, demographics etc, plan the interim voting process, and discuss the Final Workshop
- September

7. SC/EB to meet
8. Sub-group to meet
9. SR to circulate requests for info; ALL to respond
10. SR to circulate a doodle poll for the first week in June