ADVISORY GROUP TERMS OF REFERENCE: IMPLICATIONS FOR THE NHS OF INWARD AND OUTWARD MEDICAL TOURISM

Purpose

The role of the Advisory Group is to provide a view on the general strategy for the project team to achieve its overall objectives. It will act as a critical friend in relation to the overall shape, academic direction and policy relevance of the research project.

In practical terms this will include providing feedback on research conceptualisation, design, conduct and interpretation. The group is also envisaged as a supportive mechanism to ensure the project achieves successful outcomes (especially relevance for policy and practice vis-àvis the NHS).

Specifically its role may include:

- At the onset, reviewing the project protocol and timeline
- Feedback on recruitment strategies and progress
- Sharing contacts and facilitating connections on behalf of the project
- Ensuring the project is appraised of external influences and developments that may impact on its conduct (policy change; emerging developments within medical travel)
- Passing on any relevant research and/or policy papers
- Highlighting relevant conferences and other learning/dissemination opportunities
- Ensuring the prevailing NHS purpose and policy context are central to the research activity
- Offering pathways into particular user groups/stakeholders for dissemination purposes

Materials in scope

The Advisory Group will comment on the draft literature review, and the desk-based reviews of policy and legislation, and web-sites. The group will not have access to primary data from the study. The views of the advisory group on our preliminary approaches to analysis, and the contents and organisation of the final report will be sought. We will also ask views about dissemination strategy. The group will not be advised to review a final report. It is not envisaged to use the group to review a draft report.

Membership

The Advisory Group will comprise approximately twelve members from across the NHS, DH, professional, research and commercial sectors, with the appropriate level of expertise relevant to the project.

The membership of the Advisory Group is listed in Attachment A.

Reporting

Each meeting will have an agenda and written note of the meeting will be circulated for approval.

No member or members of the Advisory Group will provide public comment on behalf of research project or NIHR.

Meetings

The Advisory Group will meet three times during the life of the project. Outside of these meetings the Group may also contribute suggestions and comments in response to email requests from the team.

The role of member is unpaid but the project will reimburse members for all reasonable travel costs that they incur.

Register of Interests

The project manager will keep a register of any pertinent interests (e.g. personal, professional and/or financial) that Team and Advisory Group members wish to bring to his attention.

Attachment A: ADVISORY GROUP MEMBERSHIP

IMPLICATIONS FOR THE NHS OF INWARD AND OUTWARD MEDICAL TOURISM

Dr. Sudeep Chand - Consultant Research Fellow, Centre on Global Health Security, Chatham House

Prof. Lorraine Culley - Professor of Social Science and Health, De Montford University Leicester

Rob Dickman - Senior Policy Manager, Department of Health UK

Edgar Gordon - University tutor in dental risk management

Joanna Pearl - Senior health researcher, Which? consumer organisation

Stephen Peckham - Reader in Health Policy, London School of Hygiene and Tropical Medicine

Keith Pollard - Managing Director, Intuition Communication

Helen Sheldon - Senior Research Associate, Quality Assurance and Information Security Manager, Picker Institute Europe

Liz Thomas - Head of Policy & Research at AVMA

Laurence Vick - Partner and Head of Clinical Negligence team, Michelmores Solicitors

Leila Wilcox - Founder, Angelis Group

Michael Wood - European Policy Manager at the NHS Confederation

25th November 2011