

# National Institute of Academic Anaesthesia

## Research Priority Setting Exercise

Howell et al. (2012)  
<https://doi.org/10.1093/bja/aer418>

**For which topic were research priorities identified?**  
anaesthesia

**In which location was the research priority setting conducted?**  
Europe - Ireland; Europe - United Kingdom

**Why was it conducted at all?**  
Formal research priority setting is a recognized way of identifying important clinical research questions and promoting these as topics for commissioned research. This paper describes a research priority setting exercise conducted by the National Institute of Academic Anaesthesia (NIAA). Based on the recommendation of The Royal College of Anaesthetists' Academic Strategy Report, the National Institute for Academic Anaesthesia (NIAA) was established in 2008 as a joint venture between The Royal College of Anaesthetists (RCoA) and the Association of Anaesthetists of Great Britain and Ireland (AAGBI). Initial discussions within the Research Council of the NIAA recognized the value of conducting a formal research priority setting exercise in order to establish priorities in the fields of anaesthesia and perioperative medicine and to direct the attention of both researchers and research funding bodies to these priorities.

**What was the objective?**  
to identify research priorities for which funding for commissioned research should be actively sought

**What was the outcome?**  
a list of 5 research questions

**How long did the research prioritization take?**  
June 2008 - May 2009

**Which methods were used to identify research priorities?**  
JLA method

**How were the priorities for research identified exactly?**  
Step 1: gathering clinical questions: via survey, participants were asked: What do you think are the important questions for clinical research in anaesthesia?, 447 questions submitted. Step 2: data processing: submitted questions sorted and collated, then assigned to categories, questions proposed by five or fewer people were removed but considered in discussions with funding body representatives, questions already being addressed by current study removed. Step 3: interim ranking: survey asking participants to indicate their level of support for each question. Step 4: preparation of vignettes: brief vignettes prepared for each question. Step 5: final prioritization: expert panel convened to review longlist of research questions and to review vignettes summarizing each question and scores from second survey, expert panel was then asked to produce a shortlist of research priorities, small group discussions resulting in final list of 5 questions, then original questions were re-reviewed and all research questions identified were listed

**Which stakeholders took part?**  
Clinical anaesthetists and patients. Survey: 477 participants. Interim ranking: 2226 participants. Workshop: expert panel: 16 clinical anaesthetists and 3 lay representatives.

**How were stakeholders recruited?**  
The first survey was sent by post to Fellows of the RCoA; it was also sent to members of the AAGBI. It was promoted at the AAGBI Annual Congress and through links on both the RCoA and AAGBI websites. Also, the questionnaire was sent to the 14 lay members of the Patient Liaison Group (PLG) of the RCoA.

**Were stakeholders actively involved or did they just participate?**  
Stakeholders were mere participants of the research prioritization process; they were not actively involved in the process.