

**UNIVERSITY HOSPITALS OF LEICESTER NHS TRUST**  
**REPORT BY TRUST BOARD COMMITTEE TO TRUST BOARD**

**DATE OF TRUST BOARD MEETING: 2 February 2012**

**COMMITTEE: UHL RESEARCH AND DEVELOPMENT COMMITTEE**

**CHAIRMAN: Mr M Hindle, Trust Chairman**

**DATE OF COMMITTEE MEETING: 9 January 2012**

**RECOMMENDATIONS MADE BY THE COMMITTEE FOR CONSIDERATION BY THE TRUST BOARD:**

There were no specific recommendations for the Trust Board arising from the Research and Development Committee meeting held on 9 January 2012.

**OTHER KEY ISSUES IDENTIFIED BY THE COMMITTEE FOR CONSIDERATION BY THE TRUST BOARD:**

The following items were highlighted for the attention of the Trust Board:

- Matters Arising Report (Minute 03/02 refers), in particular, reference to Minute 127/11 point (c) relating to commercial approaches to R&D;
- National Centre for Sports and Exercise Medicine: East Midlands (NCSEM-EM) – Minute 07/12 refers;
- Additional Capital Support for New BRUs (Minute 09/12 refers) and
- Proposed Financial Reporting System for R&D (Minute 10/12 refers).

**DATE OF NEXT COMMITTEE MEETING: 6 February 2012**

**Mr M Hindle, Trust Chairman**  
**27 January 2012**

**UNIVERSITY HOSPITALS OF LEICESTER NHS TRUST**

**MINUTES OF A MEETING OF THE UHL RESEARCH AND DEVELOPMENT COMMITTEE  
HELD ON MONDAY 9 JANUARY 2012 AT 2.30PM IN CONFERENCE ROOMS 1A AND 1B,  
GWENDOLEN HOUSE, LEICESTER GENERAL HOSPITAL**

**Present:-**

Mr M Hindle – Trust Chairman (Chair)  
Professor M Barer – College Director of Research, University of Leicester Medical School  
(representing Professor D Wynford-Thomas, UHL Non-Executive Director and Dean of the University  
of Leicester Medical School)  
Professor C Brightling – Professor of Respiratory Medicine (excluding Minute 01/12 and Minute 10/12  
(part))  
Professor D Field – Professor of Neonatal Medicine  
Dr K Harris – Medical Director  
Dr D Hetmanski – Assistant Director of Research and Development  
Mrs S Khalid - Chief Pharmacist  
Mr M Lowe-Lauri - Chief Executive  
Professor B Morgan – Professor of Cancer, Imaging and Radiology (excluding Minute 01/12)  
Mr P Panchal - Non-Executive Director  
Professor D Rowbotham – Director of Research and Development  
Professor N Samani - BRU Director (up to and including Minute 10/12 (part))  
Mr S Sheppard - Assistant Director of Finance  
Dr A Tierney – Director of Strategy (excluding Minute 01/12)  
Mrs J Wells – Patient Adviser  
Mr M Wightman – Director of Communications and External Relations

**In attendance:-**

Mrs G Belton – Trust Administrator  
Ms S Enright – Diabetes Research Network Manager (for Minute 09/12)  
Mr M Maynes – R & D Finance Lead (for Minute 10/12)

**RESOLVED ITEMS**

**ACTION**

**01/12      APOLOGIES**

Apologies for absence were received from Professor R Baker, LNR CLAHRC Director;  
Dr A Thomas, Reader and Consultant in Medical Oncology; Professor D Wynford-Thomas,  
UHL Non-Executive Director and Dean of the University of Leicester Medical School.

**02/12      MINUTES**

The Minutes of the previous meeting held on 5 December 2011 (paper A refers) were  
confirmed as a correct record subject to the amendment of point (c) of Minute 126/11 and  
its associated resolution, at the request of the Chief Pharmacist, to reflect the point that the  
opportunity to develop smarter ways of working (in respect of intellectual property) when  
advising on formulation development would continue to be explored by the Chief  
Pharmacist.

**TA**

**Resolved – that (A) the Minutes of the Research and Development Committee  
meeting held on 5 December 2011 (paper A refers) be confirmed as a correct record  
subject to the amendment of point (c) of Minute 126/11 and its associated resolution  
as described above, and**

**TA**

**(B) the contents of the associated action notes (paper A1 refers) be confirmed as a  
correct record subject to the above amendment to the Minutes also being reflected  
within the action sheet (and matters arising report – paper B refers).**

**TA**

## 03/12 MATTERS ARISING REPORT

Members reviewed the contents of the Matters Arising report (paper B refers) and discussion took place regarding the following items:-

- (a) Minute 125/11 (regarding opportunities to obtain funding for an onsite MRI scanner at Loughborough University as part of the Olympic legacy) – members noted that this issue would be considered under discussion relating to Minute 07/12 (National Centre for Sports and Exercise Medicine) below;
- (b) Minute 125/11 (relating to the invitation extended to Mr Lotto, Consultant Cardiac Surgeon to attend the R & D Committee meeting in February 2012 to report on progress in respect of the East Midlands Congenital Heart Centre Research Strategy) – members noted that the Trust Administrator was awaiting a response from Mr Lotto to this invitation, and she was requested to contact Mr Lotto again to seek an urgent response as the Committee was very keen to receive an updated presentation on this item; TA
- (c) Minute 127/11 (relating to a review of the internal arrangements / pathways for handling commercial approaches and assessing feasibility and development of the external website accordingly) – the Assistant Director of R&D updated members regarding the work of the 'Mutual Recognition Group' one of the aims of which was the acceleration of R&D permissions, and he reported on the outcome of a recent meeting of the group, including the response of industry representatives to various proposals put forward by the Group. The industry representatives wished to continue handling the feasibility of studies, however were keen to fast-track approvals. It was therefore intended to continue utilising the Quintile model. The industry representatives had also been very keen for R&D representatives to be involved in the site selection meetings, and this issue would be addressed over the coming months. The external website was being updated and would include the operational capability statement. Further updates would be provided to the Committee as appropriate. The Assistant Director of R&D was requested to make appropriate cross references to other key documents in the progression of this work, and to reflect on the suggestion raised of providing a presentation on UHL to relevant industry representatives, and ADRD
- (d) Minute 44/11 (relating to progression of the issue of intellectual property as arising from Professor Mellon's presentation to the R&D Committee in April 2011) – members noted the advice provided by Professor Morgan, Professor of Cancer Imaging and Radiology in respect of intellectual property issues specifically relating to Professor Mellon's work, which it was noted could potentially provide a useful case study. The Director of R&D and the Medical Director were requested to discuss with the Chairman, outwith the meeting, relevant matters concerning a future presentation to the R&D Committee by Professor Mellon. The Assistant Director of R&D noted that regular meetings took place with the University of Leicester regarding relevant projects, so the issue of intellectual property remained on-going. It was also noted that the R & D Committee would review the national guidance (when issued) regarding the management of Intellectual Property in the NHS. DRD/MD  
/Chair

**Resolved** – that (A) the matters arising report (paper B) be received and noted and the actions described above (points (b), (c) and (d) refer) be taken forward accordingly, and DRD/TA

**(B) Minute 127/11 point (c) relating to the commercial approaches to R&D be highlighted to the Trust Board on 2 February 2012 through these Minutes.** ADRD/D  
RD/TA/  
Chair

## 04/12 ACADEMIC HEALTH INNOVATION NETWORKS

The Chief Executive reported verbally on this item, noting the Trust's interest in the Academic Health Innovation Networks, and he outlined a number of ways through which the Trust could progress its ambitions in this respect. He noted the need to give detailed consideration to this matter before March 2012 when a process for applying for Academic

Health Science Network status with accompanying criteria would be announced. It was therefore agreed that the Director of Strategy would form and chair a sub-group to give consideration to the Trust's options in respect of this issue and would report back to the R&D Committee as appropriate, including the presentation of the sub-group's terms of reference to the R&D Committee meeting due to be held on 6 February 2012.

DS/TA

**Resolved – that (A) the contents of this verbal report be noted, and**

**(B) the Director of Strategy be requested to form and chair a sub-group to give consideration to the Trust's options in relation to the issue of Academic Health Innovation Networks, and to report back to the R&D Committee as appropriate (including the presentation of the sub-group's terms of reference to the R&D Committee meeting due to be held on 6 February 2012).**

DS/TA

#### 05/12 FOLLOW-UP PRESENTATION ON R&D – PLANNED CARE DIVISION

Further to Minute 71/11 of 13 June 2011, and in the absence of the Reader and Consultant in Medical Oncology, the Director of Research and Development presented paper 'C', which provided an update on progress relating to Research and Development within the Planned Care Division.

Particular discussion took place regarding the following points in relation to the contents of this report:

- (i) the intended external review planned (at the request of the Trust in agreement with the relevant CBU) with the aim of identifying a means by which to similarly progress the oncology clinical service in light of the significant academic success achieved in this field;
- (ii) the areas where significant progress had been made since the Division's last presentation to the Committee (e.g. portfolio work) and where further attention and focussed work was required (e.g. structure - in terms of research board meetings etc), and
- (iii) in terms of achieving a strategic view in relation to the relevant specialties, it was agreed that a further report on progress in relation to the Surgical Specialties would be requested and submitted to the R&D Committee in six months' time.

DRD/TA

**Resolved – that (A) the contents of this report be received and noted, and**

**(B) a further report on progress in relation to the Surgical Specialties be requested and submitted to the R&D Committee in six months' time (July 2012).**

DRD/TA

#### 06/12 ONCOLOGY CLINICAL TRIALS FACILITY – UPDATE

**Resolved – that it be noted that an update on this item had been included within the preceding report presented to the Committee (paper C, Minute 05/12 above refers).**

#### 07/12 NATIONAL CENTRE FOR SPORT AND EXERCISE MEDICINE: EAST MIDLANDS (NCSEM-EM)

The Chief Executive presented paper 'D', as prepared by Professor M Morgan, which provided an update on progress regarding the establishment of a National Centre for Sport and Exercise Medicine: East Midlands (NCSEM-EM), which would be one of a network of three intended centres, the proposal for which had been developed as part of the legacy bid for the 2012 London Olympics. The East Midlands Consortium involved in this development included University Hospitals of Leicester NHS Trust, University Hospitals Nottingham NHS Trust, Nottingham Healthcare NHS Trust, and Loughborough, Nottingham and Leicester Universities. In the case of the East Midlands Centre, it was intended that this would be housed in a building development already in progress on the

Loughborough University campus.

Particular discussion took place regarding the organisational and governance arrangements to be agreed between the partners within the East Midlands Consortium. Also discussed were the opportunities to bring an international dimension to this development in terms of the international sportsmen and women who would be training at Loughborough University as part of their preparations for the Olympics. It was considered that this should be explored and that the Trust should ensure that this type of initiative was congruent with its R&D strategy. Also queried was whether this facility would be utilised for children as well as adults, and debate centred on the potential advantages for the Trust in terms of its ability to attract employees for vacant posts due to the attractiveness of this facility (where such posts could be appropriately linked to this development). It was agreed that the Chief Executive and the Director of Research and Development would address the relevant issues raised under the discussion on this item with Professor Morgan, and would request that Professor Morgan kept the UHL R&D Committee informed of progress.

CE/DRD

**Resolved** – that (A) the contents of this report be received and noted,

(B) the Chief Executive and Director of Research and Development be requested to address the relevant issues raised under discussion on this item with Professor Morgan, and request that Professor Morgan kept the UHL R&D Committee informed of progress, and

CE/DRD

(C) this item be highlighted to the Trust Board on 2 February 2012 through these Minutes.

## 08/12 FSF ALLOCATION

The Assistant Director of R&D presented paper 'E', which detailed information in respect of the process for the allocation of UHL FSF (Flexibility and Sustainability) funding for 2012/13. He noted that, since the production of this report, FSF had been abolished and replaced, however the same criteria for use would apply, plus agreement for broader use that had not previously been in place (e.g. backfill for those on maternity leave or long-term sickness absence).

The formation of a sub-group to review and recommend on the use of the Trust's 2012/13 allocation to the Trust's R&D Committee for ratification had been agreed at the R&D Committee meeting held on 10 October 2011 (Minute 114/11 refers). Paper E detailed the proposed membership of this sub-group and noted that a call for bids had been issued to all researchers and Divisional and CBU managerial staff. A deadline of 20 January 2012 had been set after which all requests would be reviewed by the sub-group and their recommendations presented to the R&D Committee at the next available meeting. The Committee was requested to consider the contents of the report and agree the membership of the sub-group.

In terms of the membership of the sub-group, it was suggested that the Assistant Director of R&D should consider the inclusion of a representative from Cardio-Vascular and also input from a Senior Investigator. It was noted that the sub-group would work on the basis of an assumed allocation to prioritise the bids and that when the funding was released, it would be issued on the basis of the priorities already agreed. In further discussion, the Assistant Director of R&D was requested to ensure that the proposals linked appropriately with the Trust's R&D strategy and the University of Leicester's R & D strategy.

ADRD

**Resolved** – that the proposals detailed within the report be supported, subject to the following action being undertaken by the Assistant Director of R&D:

1. consideration of the inclusion of the following members on the proposed sub-group: a representative from Cardio-Vascular and input from a Senior Investigator, and

ADRD

**2. ensuring that the proposals linked appropriately the Trust's R&D Strategy and University of Leicester's R&D Strategy.**

ADRD

**09/12 ADDITIONAL CAPITAL SUPPORT FOR BRUs**

The Professor of Respiratory Medicine reported verbally on the invitation made to NHS organisations awarded new National Institute for Health Research (NIHR) Biomedical Research Unit (BRU) designation and funding by the NIHR in 2011 to apply for DH/NHS capital funding. This funding was to support and enhance the organisation's ability to deliver high quality patient-focused research for the NIHR via the BRU. The capital funding application form and supporting information was to be submitted by 11 January 2012 and any capital awarded by the Department of Health under the scheme would be provided to the organisation in the financial year 2011/12 and must be spent before 31 March 2012.

The Professor of Respiratory Medicine tabled paperwork which briefed members of the bid being submitted by Respiratory Medicine. In response to a query raised by Mr Panchal, Non-Executive Director, the Director of Strategy confirmed that a new build option provided the only viable solution in light of various estate-related considerations on the required Trust site, and advised that money saved from the costs of a building requiring demolition would be utilised towards the running costs of the new build (should the application be successful).

Ms Enright, Diabetes Research Network Manager, attended on behalf of Professor Davies, Chair of Diabetes Medicine, to brief R&D Committee members of the contents of the application being submitted by the Trust's Nutrition, Diet and Lifestyle BRU to assist in the housing of the Leicester Diabetes Centre at the Leicester General Hospital site. Discussion ensued regarding the benefits this development and its associated equipment would bring to patients, staff and other UHL services. In further discussion it was agreed beneficial for relevant staff to have contingency plans in place dependent upon the outcome of the bid process.

Relevant  
UHL  
staff

Members congratulated the staff involved in working up their bids within the available timeframe, and discussed potential learning points for the future in strategic / process terms in relation to the BRU bids (and ensuring that research and development comprised a core part of strategic thinking and planning). The Director of Strategy undertook to take forward these issues with relevant colleagues.

DS

**Resolved – that (A) the contents of the tabled paperwork and supporting verbal information be received and noted,**

**(B) relevant staff be requested to have contingency plans in place dependent upon the outcome of the bid process,**

Relevant  
UHL  
staff

**(C) the Director of Strategy be requested to undertake discussions with relevant colleagues regarding the potential learning points for the future in strategic / process terms in relation to the BRU bids (and ensuring that research and development comprised a core part of strategic thinking and planning), and**

DS

**(D) this item be highlighted to the Trust Board on 2 February 2012 through these Minutes.**

**10/12 PROPOSED FINANCIAL REPORTING SYSTEM FOR R & D**

Mr Maynes, R&D Finance Lead, attended to present paper 'F', which detailed the outcome of a review of financial governance relating to research and development and presented proposals for transforming the current system by addressing the key findings from the review.

The Committee was requested to consider the issues identified within the report, review

and endorse the emerging vision for R&D financial governance and approve the actions outlined in section 5 of the report (relating to the development of a detailed project plan - to be submitted to a future meeting of the R&D Committee - and the actions associated with its component stages). It was anticipated that the first full financial year with the new system in operation would be 2013/14, although it was expected to be functioning in shadow form by October 2012.

In discussion on this item, members:

- (i) noted that it would be beneficial to review the arrangements utilised by other NHS Trusts (to ensure consistency and allow appropriate benchmarking) – noting a visit to Sheffield planned for this purpose;
- (ii) agreed the direction of travel, however considered that this work should be implemented within the earliest possible timeframe (noting resource constraints and issues from a clinical support perspective) particularly in light of the timetable associated with the Trust’s FT application – it was agreed that relevant Executive Directors would give consideration to the potential re-prioritising of activities to allow this work to be undertaken within an earlier timeframe;
- (iii) noted that there was no direct funding for network activity, and
- (iv) noted the Chief Pharmacist’s comments that the most appropriate way forward (in terms of clinical support activities such as pathology and imaging) would be for relevant staff members to link with the R&D Finance Lead in the progression of this work.

Relevant  
Executive  
Directors

In conclusion, members supported the recommendations of this report, noting the need for the establishment of a project team at the earliest possible opportunity, and for the work to be progressed in accordance with the Trust’s FT timetable.

**Resolved – that (A) the proposals detailed within this report be supported,**

**(B) relevant Executive Directors be requested to give consideration to the potential re-prioritising of activities to allow this work to be undertaken within an earlier timeframe (particularly in light of the Trust’s FT timetable), and**

Relevant  
Executive  
Directors

**(C) this item be highlighted to the Trust Board on 2 February 2012 through these Minutes.**

## 11/12 CONSENT MONITORING

Further to Minute 74/11 of 13 June 2011, the Assistant Director of R&D presented paper ‘G’, which provided an update on actions undertaken by the Trust in response to the findings of the MHRA’s Statutory Routine GCP Systems Inspection at the Trust in March 2011, and was presented to the Committee for the purpose of information and assurance.

Members noted that they were very encouraged with the progress made, and of the outcome of the audit of consent forms.

**Resolved – that the contents of this report be received and noted.**

## 12/12 MINUTES FOR INFORMATION

12/12/1 Joint UHL / UL Research and Development Committee

**Resolved – that it be noted that there had not been a further meeting of the Joint UHL/UL Research and Development Committee since 1 July 2011.**

12/12/2 Biomedical Research Unit Board

**Resolved** – that it be noted that the Minutes of the BRU Board meeting held on 9 December 2011 would be presented to the Research and Development Committee at its meeting on 6 February 2012.

12/12/3 CLAHRC

**Resolved** – that it be noted that the LNR CLAHRC Management Board meeting due to be held on 12 December 2011 had been cancelled.

13/12 **ANY OTHER BUSINESS**

**Resolved** – that there were no further items of business.

14/12 **IDENTIFICATION OF KEY ISSUES THAT THE COMMITTEE WISHES TO DRAW TO THE ATTENTION OF THE TRUST BOARD**

**Resolved** – that the following items be brought to the attention of the Trust Board at its meeting scheduled for 2 February 2012:

- **Matters Arising Report - Minute 03/02 refers – in particular, reference to Minute 127/11 point (c) relating to commercial approaches to R&D;**
- **National Centre for Sport and Exercise Medicine: East Midlands (NCSEM-EM) – (Minute 07/12 refers);**
- **Additional Capital Support for New BRUs (Minute 09/12 refers), and**
- **Proposed Financial Reporting System for R&D (Minute 10/12 refers).**

15/12 **DATE OF NEXT MEETING**

**Resolved** – that the next meeting of the Research and Development Committee be held on Monday 6 February 2012 from 2.30pm – 4.30pm in the Board Room, Victoria Building, Leicester Royal Infirmary.

The meeting closed at 4.22pm.

Gill Belton  
Trust Administrator