

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

DATE OF TRUST BOARD MEETING: 26 April 2012

COMMITTEE: UHL RESEARCH AND DEVELOPMENT COMMITTEE

CHAIRMAN: Mr M Hindle, Trust Chairman

DATE OF COMMITTEE MEETING: 2 April 2012

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

There were no specific recommendations identified by the Committee for consideration by the Trust Board.

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

There were no key issues identified by the Committee for consideration by the Trust Board.

DATE OF NEXT COMMITTEE MEETING: 14 May 2012

Mr M Hindle, Trust Chairman
18 April 2012

UNIVERSITY HOSPITALS OF LEICESTER NHS TRUST

**MINUTES OF A MEETING OF THE UHL RESEARCH AND DEVELOPMENT COMMITTEE
HELD ON MONDAY 2 APRIL 2012 AT 2.30PM IN THE BOARD ROOM,
VICTORIA BUILDING, LEICESTER ROYAL INFIRMARY**

Present:-

Mr M Hindle – Trust Chairman (Chair)
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
Mr P Panchal – Non-Executive Director
Mr S Sheppard - Assistant Director of Finance
Dr A Tierney – Director of Strategy (up to and including Minute 45/12)
Mrs J Wells – Patient Adviser.
Professor D Wynford-Thomas – UHL Non-Executive Director and Dean of the University of Leicester Medical School

In attendance:-

Mrs G Belton – Trust Administrator
Dr M Hughes – University of Nottingham Business School (for Minute 45/12)
Ms D Johnson – PhD Student, University of Nottingham Business School (for Minute 45/12)
Dr A Lockett – University of Nottingham Business School (for Minute 45/12)

RESOLVED ITEMS

ACTION

42/12 APOLOGIES AND WELCOME

Apologies for absence were received from Professor R Baker, LNR CLAHRC Programme Director, Professor C Brightling, Professor of Respiratory Medicine, Professor N Samani, BRU Director, Professor D Rowbotham, Director of Research and Development, Dr A Thomas, Reader and Consultant in Medical Oncology and Mr M Wightman, Director of Communications and External Relations.

The Chairman welcomed Ms Johnson, Dr Hughes and Dr Lockett from the University of Nottingham Business School.

43/12 MINUTES

Resolved – that the Minutes of the Research and Development Committee meeting held on 5 March 2012 (paper A refers) be confirmed as a correct record, subject to Minute 31/12/1 (d) being amended to reflect the fact that discussions had been held with Professor M Morgan (and not Professor B Morgan, as currently stated).

TA

44/12 MATTERS ARISING

44/12/1 Matters Arising Report

In discussion on the matters arising report at paper B, it was noted that:-

- (a) Minute 32/12 (that further discussion on the current translational approach to the study (What is Lean in UHL – The Experience of Implementing the Productive Ward) take place between the Chief Executive and Ms Sitton-Kent, PhD Student) – the Chief Executive confirmed that he had a meeting planned for this purpose on 4 April 2012;
- (b) Minute 33/12 (contact to be made with Dr Barwell, Senior Lecturer / Honorary Consultant

- to reinforce the Research and Development Committee's support for his work) – the Chief Executive confirmed that he had held a discussion with Dr Barwell in this respect and awaited confirmation from Dr Barwell of any further action he could take to assist;
- (c) Minute 37/12 (relating to potential slippage to the Oncology Clinical Trials Facility building programme) – the Director of Strategy confirmed that all outstanding issues had been resolved and the building would be ready for the planned opening;
 - (d) Minute 38/12/2 (relating to the R & D implications of the site usage development plans to be discussed at a future Research & Development Committee meeting when available) – the Director of Strategy noted that the Estates Strategy would not be complete for several months, however input would be sought from the Research and Development Committee as part of the development process, as appropriate. An urgent issue concerned the relocation of the Management Offices at the Glenfield Hospital;
 - (e) Minute 18/12/1 of 6 February 2012 (concerning the scheduling of national guidance regarding 'The Management of Intellectual Property' in the NHS onto the next available R & D Committee agenda following its receipt) – it was agreed that the Director of Research and Development would submit this guidance to the Committee upon receipt (the timescale for which remained unknown) and that this item could be removed from the Matters Arising report in the meantime;
 - (f) Minute 04/02 of 9 January 2012 (concerning the formation of a sub-group to give consideration to the Trust's options in relation to the Academic Health Innovation Networks) – the Director of Strategy confirmed that this Group would be launched following completion of the significant work required as part of year-end, as per discussions at the Executive Team when considering the Group's terms of reference, and
 - (g) the actions associated with Minute references 70/11/1 from 13 June 2011 and 73/10/5 from 13 September 2010 would be removed from future iterations of the Matters Arising Report at the request of the Chairman.

TA

TA

Resolved – that the contents of the matters arising report be noted and any associated actions reported above be undertaken.

TA

45/12 **DEVELOPING CORPORATE ENTREPRENEURSHIP IN THE NATIONAL HEALTH SERVICE: A STUDY OF UNIVERSITY HOSPITALS OF LEICESTER NHS TRUST**

Ms D Johnson (a PhD student at the University of Nottingham Business School) attended to present progress on her research relating to the Development of Corporate Entrepreneurship in the NHS: A Study of University Hospitals of Leicester NHS Trust (paper C refers).

In discussion of this item, members:

- (i) noted that Ms Johnson's research was very pertinent to the challenge the Trust was facing, recognising the need to transform the way in which care was delivered;
- (ii) noted the additional verbal information provided by Ms Johnson in relation to the specifics of her study, including the review of 'blockers' to entrepreneurial behaviour and the sporadic nature currently of activity that could be considered as entrepreneurial in UHL;
- (iii) noted, with interest, the resistance to the term 'entrepreneurial' as encountered by Ms Johnson in her interviews with staff, particularly given that a number of the staff interviewed were those considered to be leading entrepreneurs within the Trust;
- (iv) noted that the models of entrepreneurship which currently existed had nearly all been developed within the private sector – there was a need to understand the context and functionality and how people became receptive to and identified with entrepreneurship. Further note was made of the risk averse culture of the public sector, and the fact that cultural change was critical;
- (v) noted that the most significant barrier to the development of corporate

entrepreneurship was creating a narrative that staff could buy into and support, and Professor Wynford-Thomas made note of particular parallels with the University culture in this respect, and work being undertaken to encourage the evidence of enterprise as one of the factors involved in achieving a Professorship;

- (vi) noted Ms Johnson's findings in that monetary reward (for entrepreneurship) was not a central concept for those people interviewed in UHL, rather their ideas of what determined success related to patient benefit;
- (vii) queried the means by which entrepreneurship could be encouraged within UHL and bought into by those resistant to such a concept (note also being made of the recruitment processes and psychometric testing utilised by those in private industries when employing individuals as described by Ms Johnson, and also the need to be appreciative of the fact that different cultures and communities would have a different view of, and perspective on, potential questions which could be asked as part of the employment process, and the need therefore for caution and potential adjustment in this respect should any such processes be adopted within UHL);
- (viii) acknowledged the need for a system to listen to, and test, new ideas – the Chief Executive confirmed that the Trust would be changing its approach in this respect, and queried the relevance of any of the power literature (much of which was public sector based) in this respect. He also noted the benefit in examining the reason for low entrepreneurial tendencies within UHL, and how these could instead be encouraged. He particularly queried the variations in entrepreneurial tendencies within UHL dependent upon different contextual settings, and whether an examination of such could enrich the advice provided through Ms Johnson's research;
- (ix) noted that competition was one of the key elements to creating entrepreneurship and queried the possibility through relevant CEO networks in undertaking a comparison with other similarly sized NHS organisations;
- (x) queried the process by which subjects would be identified and approached to be involved in the second phase of the project – subjects would be identified across Divisions and sites based on those who had exhibited entrepreneurial activity and in consultation with the Director of Strategy;
- (xi) queried any potential disadvantages (or balancing metrics) to the fostering of entrepreneurship – it was noted that this would be dependent upon which aspects of entrepreneurial behaviour people were displaying, e.g. risk taking, if not controlled risk taking, could be disadvantageous. It was therefore important to adopt risk taking within the Trust's governance structure, and
- (xii) in response to a query raised, Ms Johnson confirmed that she would be examining the changing landscape as part of her study.

In conclusion, the Chairman thanked Ms Johnson, Dr Lockett and Dr Hughes for attending and presenting at today's meeting, and requested that Ms Johnson let the Committee know of any ways in which they could offer any assistance in her study. The Director of Strategy noted that the issue as highlighted in the Matters Arising report (paper B refers) under Minute 32/12 of the previous meeting (i.e. observations regarding UHL and the Nottingham University processes for obtaining ethics approval) was also applicable to Ms Johnson, and the need for discussion with the Assistant Director of Research and Development was confirmed in this respect.

ADRD

Resolved – that (A) the contents of the presentation (paper C refers) and additional verbal information provided be received and noted, and

(B) the Assistant Director of Research and Development be requested to progress the action highlighted above.

ADRD

46/12 PUBLICATIONS / CITATIONS UPDATE

The Assistant Director of Research and Development made reference to the request made previously by the Committee (Minutes 31/12/1 of 5 March 2012 and 70/11/1 of 13 June 2011 refers) that the reporting of publication data, as currently detailed within the R & D scorecard reports, was expanded to provide an indication of the quality and impact of the articles. The use of citation numbers and impact factors had been explored as simple indicators, and the outcome of this work was detailed within paper D for the information of members. The Assistant Director of Research and Development sought a view from members as to whether this information was useful, and if they desired its inclusion in future iterations of the R & D scorecard (noting limiting factors relating to the time lag between publication and citation in other papers, and the fact that multiple citation was not always for positive reasons).

In discussion on this item, members:

- (i) queried any potential comparison of these results with other similarly-sized teaching Trusts – the Assistant Director of Research and Development considered that this would be possible with appropriate filtering to remove non-clinical papers;
- (ii) considered that this information was useful and reinforced what was already known, particularly with regard to Leicester's dependence on a small number of researchers, and recognition that there were few publications for which a Leicester-based researcher was the first author. Note was also made of the under-representation of the Respiratory BRU in the work presented;
- (iii) queried any potential trade-off between widening the field to search for additional publications without reducing the quality of the journal in which studies were published. It was considered by some members that many of the good publications were being ignored at the expense of high impact publications, and it was recognised that many disciplines did not have journals of the level noted within the report (i.e. those with 'high' impact factors) and instead researchers would publish in popular journals read within their professions (which were graded as having a 'low' impact factor but which could frequently be very competitive to achieve publication in), and
- (iv) in light of the discussion summarised under point (iii) above, the Assistant Director of Research and Development was requested (in conjunction with the Library Staff) to take a sample of three or four specialties and review how many publications they had published in any given year and their top five citations, in order to review the feasibility and usefulness of providing this information on a trust-wide basis to the Research and Development Committee. The Assistant Director of Research and Development was also requested to review (as a secondary issue) the options for benchmarking such data. It was agreed that a report on the progress of this work would be submitted to a future meeting of the Research and Development Committee, as appropriate.

**ADRD/
TA**

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

(B) the Assistant Director of Research and Development be requested to undertake the action outlined under point (iv) above, and report on the progression of this work to a future meeting of the Research and Development Committee, as appropriate.

**ADRD/
TA**

47/12 UHL BIOMEDICAL RESEARCH UNITS (BRUS): AN UPDATE

In the absence of the Director of Research and Development and the Director of Communications and External Relations, it was agreed to defer this item until the next meeting (14 May 2012) of the Research and Development Committee.

**DCER/
DRD/
TA**

Resolved – that this item be deferred until the next meeting (14 May 2012) of the Research and Development Committee.

**DCER/
DRD/
TA**

48/12	REPORT FROM THE MEDICAL DIRECTOR	<u>Resolved</u> – that this item be classed as confidential and taken in private accordingly.	CE/ DRD
49/12	NATIONAL CENTRE FOR SPORTS AND EXERCISE MEDICINE (NCSEM-EM): AN UPDATE	The Chief Executive reported verbally to advise that Professor M Morgan had been requested to report back to the Research and Development Committee by exception, and that there was nothing further to report on this issue currently.	CE/ DRD
	Following further discussion on this item (in response to specific queries raised by members) the Chief Executive and Director of Research and Development were requested to discuss the ideas raised at the meeting (regarding the potential inclusion of patients aged under 18 at the NCSEM-EM, utilising the opportunities afforded by the NCSEM-EM to attract candidates to vacant consultant posts and potential synergy with the Lifestyle BRU) with Professor M Morgan at their next meeting with him.		CE/ DRD
	<u>Resolved</u> – that (A) this verbal information be noted, and		
	(B) the Chief Executive and Director of Research and Development be requested to raise the issues summarised above at their next meeting with Professor M Morgan.		CE/ DRD
50/12	REPORT FROM THE PROFESSOR OF CANCER, IMAGING AND RADIOLOGY	<u>Resolved</u> – that this item had been covered during consideration of Minute 48/12 above.	
51/12	ONCOLOGY CLINICAL TRIALS FACILITY: UPDATE	<u>Resolved</u> – that, in light of the absence of the Reader and Consultant in Medical Oncology and the Director of Research and Development from today’s meeting, this item be deferred until the next meeting (14 May 2012) of the Research and Development Committee (albeit noting that progress had been reported by the Director of Strategy under discussion of the Matters Arising report (Minute 44/12/1 point (c) above refers).	RMO
52/12	MINUTES FOR INFORMATION		
52/12/1	<u>Partnership Committee</u>	The Chief Executive reported verbally to confirm that the first meeting of the Partnership Committee had been held. The Minutes of this first meeting and confirmation of dates of future meetings would feature on the agendas of future meetings of the UHL Research and Development Committee.	TA
	<u>Resolved</u> – that the Minutes of the first meeting of the Partnership Committee and details regarding future meeting dates be included on the agendas of future meetings of the Research and Development Committee.		TA
52/12/2	<u>Biomedical Research Unit Board</u>	<u>Resolved</u> – that it be noted that the first meeting of the Joint BRU Board had been held on 2 March 2012, the Minutes of which would be submitted to the next meeting of the Research and Development Committee.	TA

52/12/3 LNR CLAHRC Management Board

The Chief Executive provided a brief verbal update on the meeting of the LNR CLAHRC Management Board held on 23 March 2012, noting the attendance at this meeting of the NDL CLAHRC Director, and of discussions relating to opportunities for future joint working. The Minutes of this meeting would be submitted to the next meeting of the Research and Development Committee.

TA

Resolved – that (A) this verbal update be noted, and

(B) the Minutes of the LNR CLAHRC Management Board meeting held on 23 March 2012 be submitted to the next meeting of the Research and Development Committee.

TA

53/12 **ANY OTHER BUSINESS**

Resolved – that there were no further items of business.

54/12 **IDENTIFICATION OF KEY ISSUES THAT THE COMMITTEE WISHES TO DRAW TO THE ATTENTION OF THE TRUST BOARD**

Resolved – that there were no key issues which the Committee wished to draw to the attention of the Trust Board.

55/12 **DATE OF NEXT MEETING**

Resolved – that the next meeting of the Research and Development Committee be held on Monday 14 May 2012 from 2.30pm in the Board Room, Victoria Building, Leicester Royal Infirmary.

The meeting closed at 3.50pm.

Gill Belton
Trust Administrator