

Trust Board Paper O

UNIVERSITY HOSPITALS OF LEICESTER NHS TRUST

REPORT BY TRUST BOARD COMMITTEE TO TRUST BOARD

DATE OF TRUST BOARD MEETING: 28 June 2012

COMMITTEE: UHL RESEARCH AND DEVELOPMENT COMMITTEE

CHAIRMAN: Mr M Hindle, Trust Chairman

DATE OF COMMITTEE MEETING: 14 May 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:

- Ophthalmic Research at UHL (Minute 59/12 refers);
- Acute Division Strategy: Respiratory Medicine (Minute 60/12 refers), and
- Consideration re: CCG representation at the R&D Committee (Minute 68/12/2 refers).

DATE OF NEXT COMMITTEE MEETING: 9 July 2012

Mr M Hindle, Trust Chairman
22 June 2012

UNIVERSITY HOSPITALS OF LEICESTER NHS TRUST

**MINUTES OF A MEETING OF THE UHL RESEARCH AND DEVELOPMENT COMMITTEE
HELD ON MONDAY 14 MAY 2012 AT 2.30PM IN THE BOARD ROOM,
VICTORIA BUILDING, LEICESTER ROYAL INFIRMARY**

Present:-

Mr M Hindle – Trust Chairman (Chair)
Professor R Baker – LNR CLAHRC Programme Director
Professor C Brightling – Professor of Respiratory Medicine
Professor D Field – Professor of Neonatal Medicine
Dr D Hetmanski – Assistant Director of Research and Development
Mr M Lowe-Lauri – Chief Executive
Mr M Maynes – Research and Development, Finance Lead
Professor B Morgan - Professor of Cancer, Imaging and Radiology
Mr P Panchal – Non-Executive Director
Professor D Rowbotham - Director of Research and Development
Professor N Samani - BRU Director
Dr A Thomas – Reader and Consultant in Medical Oncology

In attendance:-

Professor I Gottlob – Professor of Ophthalmology, University of Leicester (for Minute 59/12)
Mrs H Majeed – Trust Administrator
Dr F Proudlock – Lecturer in Ophthalmology, University of Leicester (for Minute 59/12)

RESOLVED ITEMS

ACTION

56/12 APOLOGIES

Apologies for absence were received from Dr K Harris, Medical Director; Mr S Sheppard, Assistant Director of Finance; Dr A Tierney, Director of Strategy; Mrs J Wells, Patient Adviser; Professor D Wynford-Thomas, UHL Non-Executive Director and Dean of the University of Leicester Medical School.

57/12 MINUTES

Resolved – that the Minutes of the Research and Development Committee meeting held on 2 April 2012 (paper A refers) be confirmed as a correct record.

58/12 MATTERS ARISING

58/12/1 Matters Arising Report

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

- (a) Minute 48/12 – the Director of Research and Development confirmed that extended screening and genetic study were the two elements to this screening study. The Divisional Manager, Clinical Support was in liaison with appropriate colleagues and it had been agreed that public health representatives should also be involved in this discussion. The Director of Research and Development agreed to provide a further update on progress at the Research and Development Committee in September 2012, and
- (b) Minute 04/02 (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) – on behalf of the Director of Strategy, the Chief Executive confirmed that the timescales had now changed and this was under review, pending further advice.

DRD

Resolved – that the contents of the matters arising report be noted and any

TA

associated actions reported above be undertaken.

59/12 OPTHALMIC RESEARCH AT UHL

Professor I Gottlob, Professor of Ophthalmology and Dr F Proudlock, Lecturer in Ophthalmology attended to present an update on ophthalmic research and the space issues for the Ophthalmology Group which was based in the Knighton Street Outpatient Building since 1999 (paper C refers). The need for offices and lab space to be located together for the efficient functioning of this group was particularly stressed to the members of the Committee.

Professor Gottlob presented members with the background of the Ophthalmic Group and also listed the clinical activity, NIHR portfolio studies, commercial studies, other research and teaching undertaken by the members of this Group. The Group was in discussion with commercial partners in respect of interventional RCT for optic neuritis. However, in order for these activities to be undertaken there was a need for additional space. She suggested a short term and long term proposal for the resolution of this issue.

Professor N Samani, BRU Director acknowledged the space issues and suggested that some clinical space would be made available in the Robert Kilpatrick Clinical Sciences Building. The Director of Research and Development noted that this could be taken into consideration. He also advised that he had been in liaison with Mr A Powell, Deputy Director of Facilities in respect of some potential solutions to resolve this issue. In further discussion on this matter, the Committee Chairman suggested that discussions be held with the Director of Research and Development, Professor of Ophthalmology and the Deputy Director of Facilities in order to get a pragmatic solution and an update on progress be provided to the Committee in July 2012. The BRU Director suggested that Professor T Robinson, University of Leicester be copied into all emails and informed of all discussions on this matter.

DRD

Responding to a query from the Professor of Neonatal Medicine, it was noted that consideration was being given to a designated children's ophthalmic facility at the LRI.

The Chief Executive commented that succession planning for senior staff in the Ophthalmology Group needed to be considered.

In conclusion, the Chairman thanked Professor Gottlob for attending and presenting at today's meeting and assured her that the issues raised would be appropriately considered.

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

(B) the Director of Research and Development be requested to progress the action highlighted above and an update on progress be provided to the Research and Development Committee in July 2012.

**DRD/
TA**

60/12 ACUTE DIVISION STRATEGY: RESPIRATORY MEDICINE

The Professor of Respiratory Medicine presented paper C, the strategy for adult respiratory medicine in Leicester. The following were detailed in particular:-

- (i) highlights of respiratory research in Leicester;
 - airway disease (asthma and COPD);
 - tuberculosis;
 - pneumococcal pneumonia, and
 - lung cancer.
- (ii) future strategic overview, and
- (iii) future strategy – TB research.

In discussion on this item, members:-

- (a) queried the scope for further development of research relationship with CCGs – in response, it was noted that this was being progressed and it was confirmed that UHL was one of the lead centres for the severe asthma programme;
- (b) noted that there was a need to retain and support key existing staff and further develop internationally renowned research programme in asthma and COPD;
- (c) also noted the need to invest in the Child Health Group;
- (d) were advised that laboratory space was constrained and discussions were on-going to resolve this issue, and
- (e) noted that there was a successful and cohesive adult respiratory group with focussed research programme. There was a strong imaging team with close interaction with colleagues in Radiology.

Members expressed concern in respect of joint governance issues between the University and the Trust specifically in relation to funding of posts. Further to a lengthy discussion on this matter, the Committee Chairman agreed to liaise with the Vice Chancellor of the University of Leicester in respect of determining a joint research strategy between both the organisations.

Chair

In relation to the discussion on the opportunities for growth in TB and lung cancer research, the Professor of Respiratory Medicine agreed to ensure that Health Protection Agency (HPA) colleagues were involved in discussions.

PRM

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

(B) the Committee Chairman to liaise with the Vice Chancellor of the University of Leicester in respect of determining a joint research strategy between both the organisations, and

Chair

(C) the Professor of Respiratory Medicine to ensure HPA colleagues were involved in discussions in respect of TB research.

PRM

61/12 CHILDREN'S BUSINESS CASE

The Director of Research and Development reported that the Children's CBU had presented a detailed plan, however the business case would be based on the number of studies that would be undertaken. The Professor of Neonatal Medicine advised that the facilities were available and more studies could be undertaken. The Director of Research and Development agreed to work with the CBU in order to take forward the business plan. The Chairman requested that an update be presented to the Committee in August/September 2012.

DRD

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

(B) the Director of Research and Development to provide an update on progress with the Children's business case to the Research and Development Committee in August/September 2012, as appropriate.

**DRD/
TA**

62/12 UHL BIOMEDICAL RESEARCH UNITS (BRUS): AN UPDATE

The Director of Communications and External Relations advised that as an in-house resource was not available, an external company had been asked to prepare a proposal to develop a robust R&D brand proposition for the Trust. A proposal was now available and the Communications team was in liaison with the Research and Development department colleagues on taking it forward. The company recommended that a one day creative workshop with UHL internal stakeholders be organised in order to bridge the gap between the aspiration to create a clear differentiated brand from the R&D portfolio and the current

capacity to engage the relevant teams to develop and deliver this. The Director of Communications and External Relations would liaise with the Director and Assistant Director of R&D in respect of inviting internal stakeholders for the one-day workshop. The Chairman requested a copy of the proposal to be forwarded to him.

DCER/
DRD

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

(B) the Director of Communications and External Relations would liaise with the Director and Assistant Director of R&D in respect of inviting internal stakeholders for the one-day workshop.

DCER/
DRD

63/12 STRATEGIC PARTNERSHIP WITH THE UNIVERSITY OF LOUGHBOROUGH

The Chief Executive and the Director of Research and Development had met with the Director of Corporate and Legal Affairs to develop proposals for the governance requirements in respect of UHL's strategic partnership with University of Loughborough and the Lifestyle BRU. In discussion, the Research and Development Committee proposed that this work be taken forward as, appropriate.

CE/
DRD

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

(B) responsibility be devolved to the Chief Executive and Director of Research and Development to take forward UHL's partnership with the University of Loughborough, as appropriate.

CE/
DRD

64/12 FINANCIAL REPORTING SYSTEM FOR R&D

Mr M Maynes, Research and Development Finance Lead presented paper E, which updated the Committee on:-

- (a) financial governance project;
- (b) CLRN allocations 2012-13, and
- (c) RCF (formerly called FSF) allocations 2012-13.

A Project Manager had been appointed on a six month fixed term basis to take forward the financial governance project update. The detailed project plan had been finalised which would be circulated to the members of the Committee. Appendix 1 provided a summary of the progress against the project plan. A R&D staff database had been compiled which would map the funding stream for each individual. A commercial studies database had also been collated in order to record the studies sponsored by commercial companies and the income received. A project management group had been formed which would oversee the key project deliverables and provide effective interface with the wider organisation. The timeline for the delivery of the project had been brought forward to the end of October 2012. Responding to a query from Mr P Panchal, Non-Executive Director, it was noted that the costings had been included in the project plan.

R&D
FL

The CLRN allocation for 2012-13 was £3.7m which included 8% allowance for non-pay and 8% contribution to overheads. The following were the three important changes in the way that the CLRN allocations would be managed in 2012-13:-

- (a) unspent balances cannot be carried forward into the following financial year;
- (b) more detailed information would be required by NIHR on the use of non-pay allocations. The details of how this would be administered locally have yet to be determined, and
- (c) the annual monitoring exercise would take place in August 2012, rather than December as in previous years. This would allow earlier action to be taken to mitigate the possibility of under spends.

Responding to a concern raised by the Reader and Consultant in Medical Oncology, the Assistant Director of Research and Development agreed to follow-up discussions with the LNR Cancer Research Network Manager regarding issues with the fast track process for recruitment in Planned Care Division.

ADRD

In respect of the Research Capability Funding, UHL had been allocated £1,691,205 which was broadly similar to the allocation received in previous years. The RCF sub-committee had met on 29 March 2012 to consider how RCF funds could be best employed in 2012-13. The second table on page 3 of paper E detailed the split of the income between principal research areas as agreed by the sub-committee. The split reflected the current priorities and would be kept under review. The Research and Development Committee delegated responsibility for the final allocation and monitoring of Research Capability Funding (RCF) to the RCF Sub-Committee and progress updates be presented to the Research and Development Committee, as appropriate.

RCF
Sub-
Commi
tee/
R&D
FL

Resolved – that (A) the contents of paper E be received and noted;

(B) the R&D Finance Lead be requested to circulate the detailed R&D financial governance project plan to the members of the Committee, for information;

R&D
FL

(C) the Assistant Director of Research and Development be requested to follow-up discussions with the LNR Cancer Research Network Manager regarding issues with the fast track process for recruitment in Planned Care Division, and

ADRD

(D) responsibility be delegated to the Research Capability Funding (RCF) Sub-Committee for the final allocation and monitoring of RCF and progress updates be presented to the Research and Development Committee, as appropriate.

RCF
Sub-
Commi
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R&D
FL

65/12 **NATIONAL CENTRE FOR SPORTS AND EXERCISE MEDICINE (NCSEM-EM): AN UPDATE**

The Chief Executive reported that progress was on track in respect of agreeing the organisational and clinical governance arrangements regarding the establishment of a National Centre for Sport and Exercise Medicine: East Midlands (NCSEM-EM). In case of the East Midlands Centre, it was noted that University Hospitals of Leicester NHS Trust would be taking the lead. Responding to a suggestion by the BRU Director, it was agreed that an update on the NCSEM would be included on the agenda for the next BRU Board meeting in order that the representatives of the 3 BRUs had a joint discussion on this matter.

DRD

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

(B) the Director of Research and Development be requested to ensure that the above item was included on the agenda for the BRU Board meeting on 25 June 2012 in order that the representatives of the 3 BRUs had a joint discussion on this matter.

DRD

66/12 **ONCOLOGY CLINICAL TRIALS FACILITY: UPDATE**

The Reader and Consultant in Medical Oncology reported that the first patient was treated in the Hope Unit on 18 April 2012 and to date 60 patient episodes had been completed. An official opening ceremony had been planned on 24 May 2012. Positive feedback had been received regarding this new facility. She stressed that the team was keen on developing a brand and agreed to liaise with the Director of Communication and External Relations, outwith the meeting.

R&CM
O/
DCER

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

(B) Dr A Thomas, Reader and Consultant in Medical Oncology and the Director of

R&CM

	Communications and External Relations to discuss the development of a brand outwith the meeting, in respect of Oncology Clinical Trials facility.	O/ DCER
67/12	MINUTES FOR INFORMATION	
67/12/1	<u>Strategic Partnership Joint Committee</u> Resolved – that the Minutes of the first meeting of the Strategic Partnership Joint Committee held on 9 March 2012 had not been received.	
67/12/2	<u>Biomedical Research Unit Board</u> Resolved – that the Minutes of the first meeting of the Joint BRU Board meeting held on 2 March 2012 be received and noted.	
67/12/3	<u>CLAHRC</u> In discussion, the Chief Executive agreed to seek an update on the review of CLAHRC 1 via the NIHR Board. In response to a query from the BRU Director, it was agreed that an update on CLAHRC 2 would be sought from appropriate colleagues. The Chief Executive reported that he had escalated concerns about irregular attendance at the LNR CLAHRC Management Board meeting. Resolved – that (A) the minutes of the LNR CLAHRC Management Board meeting (paper H refers) held on 23 March 2012 be received and noted; (B) the Chief Executive to seek an update on the review of CLAHRC 1 via the NIHR Board, and (B) Professor R Baker, LNR CLAHRC Programme Director be requested to seek an update from appropriate colleagues in respect of CLAHRC 2.	CE LNR CLAH RC PD
68/12	ANY OTHER BUSINESS	
68/12/1	<u>Recruitment to studies</u> The Director of Research and Development reported that despite the concerns in respect of achieving the recruitment to studies target, the number of studies recruited were well over the target. Resolved – that the position be noted.	
68/12/2	<u>CCG Representation</u> Mr P Panchal, Non-Executive Director suggested that consideration be given to invite a CCG representative to attend the July R&D meeting. In discussion, the Committee Chairman sought members' views on potential CCG representation on the R&D Committee. Members supported this proposal and it was suggested that it would be preferable for the Chair of the Joint CCG Research Committee to be invited, if such a Committee existed. Resolved – the Committee Chair be requested to give consideration for CCG representation on UHL's Research and Development Committee and confirm whether an invitation needed to be extended for the representative to attend the R&D meeting in July 2012.	Chair Chair/ TA
69/12	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 and highlighted accordingly within these Minutes:-

- Ophthalmic Research at UHL (Minute 59/12 refers);
- Acute Division Strategy: Respiratory Medicine (Minute 60/12 refers), and
- Consideration re: CCG representation at the R&D Committee (Minute 68/12/2 refers).

70/12 **DATE OF NEXT MEETING**

Resolved – that the next meeting of the Research and Development Committee be held on Monday 11 June 2012 from 2.30pm in Conference Rooms 1A and 1B, Gwendolen House, Leicester General Hospital.

Post meeting note: The above meeting was subsequently cancelled. The next meeting will therefore be held on Monday, 9 July 2012 from 1pm to 3pm in the Board Room, Victoria Building, Leicester Royal Infirmary.

The meeting closed at 4:34pm

Hina Majeed
Trust Administrator