

**Trust Board Meeting: Wednesday 13 March 2013**  
**TB2013.42**

<b>Title</b>	<b>Oxford Academic Health Science Network</b>
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<b>Status</b>	For information and to update the Board on the activities and plans of the Oxford Academic Health Science Network (OAHSN)
<b>History</b>	The Board received a report in September 2012

<b>Board Lead</b>	Sir Jonathan Michael, Chief Executive			
<b>Key purpose</b>	<b>Strategy</b>	Assurance	<b>Policy</b>	Performance

## Summary

1	The detailed AHSN prospectus was submitted on 1 October 2012, initial feedback was received in November 2012, and in response to the feedback, additional information was provided in advance of the Panel Interview held on 18 February 2013. (Copies were made available to Board members)
2	It is hoped that an update on the assessment process will be available in time for the Board meeting.
3	The Chairman for the OAHSN has now been appointed and steps are underway for the recruitment and appointment of the Chief Executive and two independent members. Sir Jonathan remains the interim Senior Responsible Officer pending this appointment.
4	A number of activities have continued building on the increasing partnerships across the Network. These include programmes and theme related events and locality meetings within the Network, building on the existing local networks. A significant number of business partners have now joined the AHSN and are attending the events.
5	Full information on the OAHSN is available on <a href="http://www.oxfordahsn.org">www.oxfordahsn.org</a> established late last year. Regular updates on events and news items are posted together with information on new partners. A recent post is a short DVD highlighting the Wealth Creation workshop held on 29 January.
6	OUH remains the hosting organisation for the AHSN pending any decision to move to an incorporated status and will therefore hold the employment contracts for key AHSN personnel.

## Oxford Academic Health Science Network

### Introduction

1. This report updates the Board on the OAHSN since the previous report in September 2012, and covers the main areas of activity.

### Assessment process and Governance

2. Mr Nigel Keen has agreed to become Chairman of the Oxford AHSN Board. Nigel has a long and distinguished career as an engineer and in investment banking and corporate finance. He is Chairman of a number of listed companies including Oxford Instruments Plc.; Laird Group Plc.; Deltex Medical Group Plc. and Bioquel Plc. many of whom supply equipment and services to the healthcare sector. Nigel is also a Non-Executive Director of Isis Innovation and has recently been appointed Chairman of Syncona, a wholly owned subsidiary of the Wellcome Trust. Nigel has agreed to join the AHSN as Chairman for an initial period of 3 years.
3. On Monday 18th February a team from the AHSN met the national panel to discuss our application. The AHSN team consisted of Nigel Keen, myself, Dr Nick Edwards, the Wealth Creation lead, Professor David Sines from Buckingham New University, Professor Alastair Buchan, Head of the Medical Sciences Division of Oxford University, Mr Stuart Bell, Chief Executive of Oxford Health, and Mr Chandi Ratnatunga. Additional information covering the development of clinical networks, the activities of the AHSN and the draft business plan had been circulated to the Panel in advance together with a short DVD produced to explain the nature of the AHSN and the partnerships between the NHS, academia and business. This can be viewed [http://www.youtube.com/watch?v=d\\_DiWljpTcU](http://www.youtube.com/watch?v=d_DiWljpTcU)
4. The national panel was chaired by Sir Alan Langlands, former CEO of the NHS and now Chief Executive of the Higher Education Funding Council. Other members were Sir Ian Carruthers, CEO of NHS South of England, Russell Hamilton, Director of R&D at the DH, Peter Ellingworth, CEO of the Association of British Healthcare Industries, Carol Blount, the NHS liaison lead for the Association of British Pharmaceutical Industries and Richard Gleave who has been running the AHSN programme.
5. We reviewed the AHSN's structure and governance, our plans and approach to the development and diffusion of innovation and to the support of research. We discussed our proposals for delivering innovation and improved outcomes through a series of clinical networks and our current discussions with the Commissioning Board (CB) and local area teams as to how we best work with existing and future strategic and operational networks.
6. We have had no formal feedback on this meeting as yet but informal comments have been positive. Some national communication is expected within the next week or two as it is believed that the CB wishes to have AHSNs launched by the beginning of the next financial year. It is hoped that some firm information will be available for the Board meeting.
7. The Interim Management Board held its second meeting on 14 February and welcomed Mr Keen for part of that meeting. The IMB has membership from all health and academic sectors and from business. The meeting considered the process for the appointment of the Chief Executive and the two independent Board members and agreed to seek external support for the process. It is intended that the Chief Executive appointment can be made by the end of March.

8. The OAHSN welcomed the appointment of Sandra Hatton as the Managing Director of the Thames Valley LETB. In addition, an Education Expert Reference Group has been established to report into the LETB. A preliminary meeting has taken place with Ms Hatton and further discussions will be aimed at ensuring collaboration and joined-up working, particularly in relation to the continuous learning requirements of the AHSN's partners' workforce. Ms Hatton is a member of the Interim Management Board. The OAHSN will be presenting at the March LETB meeting.
9. The OAHSN is considering its future location and is in discussions with the TVLETB about the potential for sharing accommodation in the short term on an Oxford site.

### **The Business Plan**

10. A draft business plan has been submitted to the Interim Management Board following circulation for comment to Network partners. It has been drawn up on the basis of an income of £10m per annum as advised during the process. However, further information has not yet been made available from the Commissioning Board on funding sources and amounts. However, plans are being developed on the basis of £10m with proposals included for the development and support of the programmes and themes outlined in the prospectus. This approach has been endorsed by the Management Board.

### **Activities**

11. January saw three very well attended events take place; some 200 people from across the Network took part: R & D on 15 January, Programmes, Themes and Clinical Networks on 23 January and Wealth Creation and Healthcare Innovation on 29 January. Outcomes for the meetings are being posted on the OAHSN website and circulated to attendees. A short video from the Wealth Creation event has been posted on the website; additional material showing the whole of the workshop, discussion groups and 'talking heads' providing feedback at the end of the event is also to be made available.
12. The first Locality meeting took place on 13 February 2013 in Buckinghamshire, hosted by Buckinghamshire New University with Buckinghamshire Healthcare NHS Trust. The meeting was extremely successful with great engagement shown from all sectors and over 40 people attending. Of particular interest was the proposal that tackling the problems of the ageing population through a clinical network was a piece of work that the Bucks locality wishes to lead on.
13. The second Locality meeting for the Milton Keynes and Bedford partners will be held on Tuesday 26 March 2013 between 17.30 and 19.30. It will be hosted by Mr Joe Harrison, Chief Executive of Milton Keynes NHS FT. Engagement across the geography has been very positive and encouraging. Future locality meetings in Berkshire and Oxfordshire are planned.
14. Dr Nick Edwards, the Wealth Creation Programme lead, attended a meeting organised by the National Institute for Innovation and Improvement on the development of high impact innovations, a key area of focus for the NHS partners in the AHSN. Discussions continue with this organisation which will be wound up at the end of March 2013.
15. A meeting was held with Becton Dickinson at their European HQ in Oxford on 14 January and a number of additional activities are now planned, including discussions on the genomics cross cutting theme.

16. Mr Stuart Bell and Mr Chandi Ratnatunga attended a national AHSN round table meeting organised by the NHS Confederation on 31 January 2013. Mrs Megan Turmezei presented an update on the OASHN activities, goals and plans to a NHS South of England Libraries Network meeting and Mr Ratnatunga has also met with the South of England's Lead Scientists. Both groups have been added to the distribution lists for continuing engagement.
17. A further Network of Networks meeting is being planned.
18. The OAHSN website ([www.oxfordahsn.org](http://www.oxfordahsn.org)) is being developed with regular news postings on events and new partners, which include a number of medical devices companies, including BD and Mediplus. Plans for a Network forum/blog are underway as are proposals for the use of other forms of social media to support communications (including You Tube, Twitter and Facebook), the sharing of best practice and collaborative working. It is expected that the blog will be in place by the end of February.
19. Plans are underway for the development of a Communications and Media Plan for the Network to be implemented following the interview and clarification of the license date. In addition, the communications and media support for individual programmes and themes and events is also being developed.
20. The OAHSN is to sponsor a number of important events including BioTrinity 2013 (May 2013) and VentureFest Oxford 2013 (June 2013). The OAHSN has demonstrable strengths in clinical, translational and discovery research, life sciences and industry. Both NHS and academic activities already link into life sciences and industry and one of its key areas of activity in support of the delivery of best care to the population is in Wealth Creation and Healthcare Innovation. Its activities over the few months have highlighted the importance of listening to industry and the life sciences and working to ensure that the NHS becomes more accessible and responsive to the requirements of this important sector. The engagement of the life sciences industry at OAHSN events has shown that the interest is strong and that much can now be done to take this forward.
21. The OAHSN will be the exclusive "Host Region Sponsor" of BioTrinity 2013, garnering an early output by supporting and associating with the nation's most significant and successful biobusiness conference. By virtue of this association, the introduction by the OAHSN of our region's Clinical Networks including clinicians/academics into BioTrinity 2013 will transform the conference into the triple helix environment ideal for sparking innovation and clinical and research collaborations, while providing the best platform for promoting the Oxford AHSN to the exclusion of its competitors AHSNs, and giving ample opportunity to pursue, develop and promote the OAHSN's Wealth Creation activities. The positioning of the Oxford AHSN that will result from this association should support the AHSN's ambitions for partnering with industry. ([www.biotrinity.com](http://www.biotrinity.com))
22. The VentureFest Oxford 2013 ([www.venturefestoxford.com](http://www.venturefestoxford.com)) has three streams: learning, funding and innovations with a further focus on four key areas that are not only important locally but nationally. The four are space, motorsport and high performance engineering, cryogenics and bioscience. The OAHSN is to sponsor a breakfast meeting with a focus on innovations within the NHS – the aim being to bring clinicians, scientists and other healthcare professionals from across the

Network together with the bioscience and life sciences industry with a view to improving the adoption and diffusion of innovations.

23. Information on NICE compliance is being gathered from all NHS partners so that progress can be monitored and appropriate steps taken by NHS partners. Compliance across all NHS providers is crucially important and will be an area of focus from the centre building on the work done to date, particularly in relation to the adoption of innovations aimed at reducing face to face contacts and using assistive technologies.

### **Hosting arrangements**

24. In September 2012, the Board agreed that OUH act as the NHS host body for the OAHSN. The future governance model for the AHSN might include the option of incorporation into a Company limited by Guarantee, but at present there are no plans to move away from the current hosted arrangement. The Business Plan makes provision for resources to support the core activities of the AHSN, largely currently provided by the OUH. Discussions are being held to put in place arrangements to recharge the AHSN members for these resources.

### **Recommendations**

**The Board is asked to note the progress with the establishment of the AHSN and to note its current activities and plans**

**Sir Jonathan Michael, Chief Executive**

**Mrs Megan Turmezei, Assistant Director, Special Projects**

**February 2013**