**INTELLECTUAL PROPERTY POLICY**

<table>
<thead>
<tr>
<th>Category:</th>
<th>Policy</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Summary:</strong></td>
<td>The Policy sets out the procedures that the Trust has adopted to ensure that Intellectual Property (IP) generated using the Trust’s resources is identified and managed effectively in accordance with the Department of Health guidance. It also underlines the importance of the Trust’s staff respecting the IP of third parties in order to avoid unauthorised use of IP which could lead to infringement action being taken against the Trust.</td>
</tr>
<tr>
<td><strong>Equality Impact Assessment undertaken:</strong></td>
<td>20th July 2012</td>
</tr>
<tr>
<td><strong>Valid From:</strong></td>
<td>24th August 2012</td>
</tr>
<tr>
<td><strong>Date of Next Review:</strong></td>
<td>24th August 2015</td>
</tr>
<tr>
<td><strong>Approval Date/ Via:</strong></td>
<td>24th August 2012; Trust Management Executive 1st November 2012; Trust Board</td>
</tr>
<tr>
<td><strong>Distribution:</strong></td>
<td>Trustwide Via Trust distribution network to: • Divisional Management Teams • HR intranet site • Procurement intranet site The Policy will also be publicised as part of a process of raising awareness of intellectual property among staff within the Trust.</td>
</tr>
<tr>
<td><strong>Related Documents:</strong></td>
<td>n/a</td>
</tr>
<tr>
<td><strong>Author(s):</strong></td>
<td>Trust IP and Contracts Lead Trust Principal Research and IP Legal Advisor</td>
</tr>
<tr>
<td><strong>Further Information:</strong></td>
<td>Trust IP and Contracts Lead</td>
</tr>
<tr>
<td><strong>This Document replaces:</strong></td>
<td>Management of Intellectual Property v3 of March 2003</td>
</tr>
</tbody>
</table>

**Lead Director:** Medical Director

**Issue Date:** 2 November 2012
Introduction.

1. Intellectual Property (referred to in this Policy as “IP”) is the general term used to describe a range of legal rights which protect certain types of information, new inventions and the physical expressions of ideas. In an innovative organisation like the NHS, staff from any discipline or engaged in any activity can generate new ideas, innovative solutions to problems or better ways of working and these ideas and solutions will invariably include IP in one form or another. Likewise, most NHS staff will make use of IP belonging to third parties whilst undertaking their day to day duties.

2. This Policy deals with the way in which IP is handled by the Trust and is presented in three sections:
   2.1. The Intellectual Property Framework
   2.2. Management of Intellectual Property created using Trust resources
   2.3. Use of third party Intellectual Property

Policy Statement

3. In accordance with the establishment of the Joint Research Office and the signing of the Joint Working Agreement and the Framework Intellectual Property Agreement with the University of Oxford and Isis Innovation; It is the policy of the Trust that:
   3.1. Innovation should be encouraged.
   3.2. Processes and systems are developed as described in this Policy to ensure that Trust staff have access to the advice and support that they need in order to maximise the benefits derived from their innovative ideas whilst ensuring that the legitimate needs and interests of the Trust are protected.
   3.3. IP identification and management processes should be reflected and recorded in an IP Policy.
   3.4. Staff must recognise and respect IP belonging to third parties and only use such IP where they have permission to do so.
   3.5. All Trust staff and service providers working on behalf of the Trust are expected to give due consideration to the IP rights of others when performing their duties.
   3.6. The Trust’s IP Lead is responsible for overseeing the management of Trust IP.
   3.7. This Policy will replace the Trust’s Policy on the Management of Intellectual Property v3 (issued March 2003).

Scope

4. This Policy applies to all IP which is used by the Trust or created by Trust staff in the course of their duties. All Trust staff are required to comply with this Policy in order ensure that innovation within the Trust is managed effectively and to avoid exposing the Trust to the risk of infringement claims made by the owners of IP used by the Trust. The Trust also expects contract workers and other suppliers of services to the Trust to abide by the principles set out in Section 17.

The following persons are affected:
4.1. All Trust staff with full or part time contracts of employment, whether employed in research & development, clinical, managerial, administrative or support roles;

4.2. Staff with Trust contracts of employment whose payroll costs are wholly or partially funded by another party (including, but not limited to: a commercial sponsor, government department, or medical charity) although specific arrangements may apply in respect of the ownership of IP created by such employees;

4.3. Trainees and students hosted by the Trust subject to any specific arrangements agreed with their academic institutions;

4.4. Staff which are seconded to the Trust from another organisation where the agreement with such other organisation provides that IP created by the secondee shall be owned by the Trust; and

4.5. Contractors, bank staff and employees of Independent Providers of NHS Services working on behalf of the Trust insofar as they are expected to abide by Section 17.

Aim

5. The purpose of this Policy is to ensure that:

5.1. IP generated using the Trust’s resources is identified and managed effectively in accordance with the Department of Health guidance;

5.2. Staff respect the IP of third parties and do not make any unauthorised use of IP as this could lead to infringement action being taken against the Trust.

Definitions

6. The terms in use in this document are defined as follows:

6.1. Contractor(s) – shall include, but not be limited to, any person providing services to the Trust under a contract for service or otherwise;

6.2. Independent Providers –contracts with the Trust to provide a particular piece of work;

6.3. Inventors – This term is used broadly to describe the person or persons responsible for creating IP as a matter of law whatever the nature of the IP right.

6.4. IP Lead – The individual within the Trust responsible for the effective management of IP in the Trust. This individual is also known as the IP and Contracts Lead;

6.5. NIHR – The National Institute of Health Research;

6.6. Trainee(s) – one who is being trained within or by the Trust;

6.7. Patient Benefit IP Manager – The individual within the Trust who is responsible for working with Isis Innovation Ltd (the technology transfer company wholly owned by the University of Oxford) in order to promote the development, dissemination and, where appropriate, commercialisation of IP owned by the Trust;

6.8. PIPAC – Partnership Intellectual Property Advisory Committee formed by the Trust and University of Oxford to address joint IP issues.
Responsibilities

7. The **Trust Board** is responsible for approving the Policy.

8. The **Trust Management Executive** will approve and recommend the Policy to the Trust Board.

9. The **Chief Executive** has overall responsibility and final accountability for ensuring that IP generated by the Trust is managed appropriately for the purpose of income generation and patient benefit. Ownership of this Policy is delegated to the Medical Director.

10. The **Medical Director** has delegated authority and is responsible for ensuring that this Policy is developed by the IP Lead and other relevant individuals, approved, reviewed and generally followed.

11. The **R&D Director** has delegated authority and is responsible for ensuring that this Policy is generally followed.

12. The **IP Lead** (with support from the Patient Benefit IP Manager and the Principal Research and IP Legal Advisor) is responsible for:
   12.1. Developing the Policy in accordance with guidance from Department of Health and NIHR;
   12.2. Advising the Trust on issues arising from the Policy;
   12.3. Ensuring that systems are in place to audit or monitor compliance;
   12.4. Undertaking monitoring of the Policy;
   12.5. Reviewing and updating the Policy in line with review timescales set at the time of approval or as a result of changes to best practice or organisational changes.

13. **All Managers** are responsible for ensuring the document is brought to the attention of staff and that staff attend all training developed to implement this Policy.

14. **Individual Staff** are responsible for:
   14.1. Reading and complying with this Policy as relevant to their job as required by their conditions of employment. Failure to follow a Trust Policy could result in disciplinary action being taken, up to and including dismissal;
   14.2. Attending training where required to familiarise themselves with, and comply with, this Policy as relevant to their jobs and responsibilities;
   14.3. Reporting the creation or development of new IP to the IP Lead as and when appropriate;
   14.4. Raising with their line manager any queries about the implementation of this Policy.

Content of the Policy

15. **The Intellectual Property Framework**
   15.1. **Nature of Intellectual Property**
   15.1.1. IP protects the product of intellectual activity. Some IP rights arise automatically on creation of a new innovation, whilst others are only obtained through registration at official bodies such as the UK Intellectual Property Office. Once secured, IP rights can be a valuable asset as they give their
owner the right to control the way in which the innovation they protect is used. IP rights can also be bought, sold or licensed in order to generate revenue.

15.1.2. The principal types of IP which are relevant to the NHS are patents, copyright, trade marks, design rights and rights in confidential information. The following are examples of how such IP may be used or created within the Trust:

<table>
<thead>
<tr>
<th>Nature of IP</th>
<th>Relevant IP right</th>
<th>Examples</th>
</tr>
</thead>
<tbody>
<tr>
<td>New invention</td>
<td>Patent</td>
<td>A new medicinal substance devised as a result of a research project could be protectable by patent.</td>
</tr>
<tr>
<td>Literary works</td>
<td>Copyright</td>
<td>The source code for computer software, the text from a patient leaflet and research papers produced for medical journals will all be protected by copyright provided that they are original.</td>
</tr>
<tr>
<td>Artistic works</td>
<td>Copyright</td>
<td>Photographs and other images appearing on the internet will be protected by copyright.</td>
</tr>
<tr>
<td>Designs</td>
<td>Design rights</td>
<td>The design for a new medical device.</td>
</tr>
<tr>
<td>Brand names</td>
<td>Trade marks</td>
<td>The NHS logo or the brand name of a particular drug.</td>
</tr>
<tr>
<td>Know-how</td>
<td>Confidentiality</td>
<td>New surgical techniques or methods of working which are not patentable but which have been kept confidential and are not generally known.</td>
</tr>
</tbody>
</table>

15.2. **Ownership of IP**

15.2.1. The English law in general provides that IP created by employees in the course of their employment belongs to the employer. Accordingly, the Trust will normally be the first owner of any IP that is created by Trust employees in the course of carrying out their normal duties or the duties assigned to them irrespective of whether they are employed in research & development, clinical, managerial, administrative or support roles. While the Trust owns such IP, the Trust will recognise the contribution of individuals to the creation or development of the IP in accordance with the terms of this Policy. In particular this means that individuals shall be entitled to share in any revenue received by the Trust from the commercialisation of IP that the individual has contributed to.

15.2.2. The Trust also claims ownership of the IP created by students and trainees hosted by the Trust for training and/or research purposes except where it has agreed otherwise with that student or trainee’s academic institution. Although such students and trainees are not employees, they are required by the terms of their agreement with the Trust to assign any IP rights that they create to the
Trust. In consideration of such assignment, the Trust shall treat such students and trainees on a par with Trust staff and they shall be entitled to share in revenue received by the Trust from the commercialisation of any IP that they create in accordance with this Policy.

15.2.3. IP created by secondees, contractors, bank staff and employees of Independent Providers of NHS Services will not automatically be owned by the Trust unless this has been specifically agreed. Where this is the case, such persons shall not automatically benefit from the revenue sharing arrangement set out in this Policy but the Trust may in its absolute discretion elect to extend such arrangements to that person.

15.2.4. The Trust does not claim ownership of any IP that is created by a member of Trust staff which is unconnected with his or her normal employment activities.

15.2.5. The default position at law is that the copyright in any work produced by an employee in the normal course of employment belongs to the employer. Where a Trust employee has created copyright material, Trust will normally assign the copyright in that work to the author copyright where the work is intended for publication in a professional or academic journal (including an electronic journal) and Trust will normally waive any claim it may have to benefits arising from the publication. However, Trust will retain the right to reproduce and use this copyright material at no cost for Trust's own non-commercial purposes, including for research and training.

15.2.6. This default position only relates to copyright material intended for publication in a professional or academic journal (including an electronic journal) and Trust will not assign any of its other copyright to the author including, without limit, copyright in:

15.2.6 i course or training materials or patient information leaflets which are produced, used or disseminated within or outside the Trust;

15.2.6 ii any software program generated by an Trust employee in the normal course of their employment;

15.2.6 iii any designs, specification or other works which may be necessary to protect rights in commercially exploitable IP.

15.2.7. Where IP arises from activities funded by another organisation, the Trust may be required to assign such IP to the funding organisation under the terms of the relevant funding agreement.

15.2.8. Similarly, where IP arises from activities undertaken jointly with another organisation, for example University of Oxford, the Trust may have agreed to assign IP arising from such collaboration to the other organisation under the terms of the collaboration agreement. In such circumstances the Trust would normal expect to receive a share of any revenue derived from exploitation. That share will be applied in accordance with this Policy.

15.2.9. In the event of any dispute between the Trust and its staff regarding the ownership of IP, the member of staff concerned may request a meeting with the IP Lead in a good faith attempt to resolve the dispute.

15.2.10. If the matter remains unresolved after that meeting then either the Trust or the member of staff concerned may request in writing to the other that the matter be referred to an independent legal expert to be agreed by both parties who shall finally determine ownership.
15.2.11. In the event that the parties cannot agree on the identity of the expert within thirty days of such written request, the expert shall be a barrister specialising in intellectual property law who is nominated by the independent chair of PIPAC.

15.2.12. The expert's fee shall be paid by Trust, but shall be deductible as an expense from any revenue which may be obtained from the exploitation of the IP in question.

16. Management of Intellectual Property created using Trust resources

16.1. Innovation within the NHS

16.1.1. The NHS is a naturally innovative organisation that generates IP which, if managed properly, can lead to significant improvements in patient benefit and in the provision of healthcare. To ensure that innovation within the NHS is managed effectively, the Department of Health published a Framework and Guidance on the Management of Intellectual Property in 2002 and supported changes to the law, which together empower NHS organisations to take appropriate steps to ensure that new ideas are identified, IP rights are protected, and avenues are opened for exploitation and dissemination.

16.2. Procedures for Trust Staff

16.2.1. The Trust has appointed an IP Lead to act as the first point of contact for information and advice on any matters regarding the IP which is used within the Trust or created utilizing Trust resources.

16.2.2. The Trust aims to raise awareness amongst its staff as to the importance of IP and has developed a range of approaches aimed at helping employees to bring their ideas, in confidence, to the attention of the IP Lead through such means as opportunity assessments, training seminars and competitions.

16.2.3. Trust staff should notify the Trust’s IP Lead of any new innovation that they create either in writing or orally as soon as possible to ensure that they receive the best support and advice in connection with the development of their idea. It is essential that this is done before the innovation is disclosed or discussed with any party outside the Trust that has not signed a confidentiality agreement as this may prejudice the ability of the Trust to obtain legal protection for the innovation. This is particularly critical in the case of technical innovations that could lead to a patent.

16.2.4. Once such potential IP has been identified, it is important to keep full records, including copies of all correspondence and notes of telephone conversations and meetings and progress of development should be reported to the IP Lead regularly.

16.2.5. Trust staff must not make any attempt to sell, license or otherwise commercially exploit IP owned by the Trust without the approval of the IP Lead.

16.3. Protection and Exploitation of Innovations

16.3.1. The protection and commercial exploitation of IP can involve significant costs and legal risks and must always be ancillary to the Trust’s primary activity of providing healthcare services. Staff should be aware that it will not always be appropriate for the Trust to protect and commercially exploit IP generated by Trust employees.
16.3.2. When an innovation is sufficiently advanced, the Trust’s IP Lead will, after consultation with the employee or employees responsible for creating such innovation, determine the best method of protecting and exploiting the innovation in a way which ensures that NHS patients benefit from the innovation. In some cases this may be achieved by disseminating the innovation throughout the NHS either without charge or at a nominal charge designed only to ensure that the Trust covers its costs. In other cases, where the innovation has potential for commercial exploitation, it may be preferable to register and protect any IP arising in the innovation in order to develop the innovation into a commercial product.

16.3.3. As part of this process, the IP Lead shall undertake due diligence in order to confirm the Trust’s ownership of any IP arising in the innovation and in order to identify any third parties with an interest in such innovation (for example, funders or other contributors). In cases where the innovation has been developed in conjunction with a university or other partner, such partner may be involved in the due diligence process. The Trust employee or employees responsible for creating the innovation will be required to complete forms developed by the Trust and its partners in order to assist with this process. All Trust employees are required to provide the IP Lead with such information as may be reasonably required as part of this process.

16.3.4. The Trust has engaged a number of organisations (including Isis Innovation, the University of Oxford’s technology transfer company) to advise the Trust on whether or not IP generated by its employees has potential for commercial exploitation. Where the IP Lead considers that commercial exploitation is appropriate, the Trust will either exploit the IP directly or engage an appropriate organisation to exploit the IP on behalf of the Trust and may assign the IP to such organisation for such purposes. Commercialisation will normally be achieved by selling the IP, by granting licences to use the IP or by forming a spin-out company to develop and market the IP. There may however be occasions where, despite having commercial potential, the Trust considers that patient benefit is best served by freely disseminating such IP.

16.3.5. In the case of innovations which are created or developed by Trust staff in collaboration with the University of Oxford, the Trust recognises the University’s experience and expertise in this field and has agreed that the University will take the lead on any commercial exploitation through its technology transfer company, Isis Innovation. In such circumstances, the Trust will normally receive a share of any revenue received as a result of the commercialisation and that revenue will be shared in accordance with this Policy.

16.3.6. Where the Trust elects not to pursue the exploitation of a particular innovation, the employee or employees responsible for creating such innovation will always be informed of the rationale behind the decision. The Trust may also, at its sole discretion, offer the individual(s) the opportunity to exploit the innovation themselves in their own time and without the use of Trust resources. In such circumstances and subject to any third party rights or interests in the IP, the Trust may agree to assign ownership of the IP to the individual(s) at the individual(s)’ cost subject to the grant of a non-exclusive licence back to the Trust permitting the use of the IP for further research and for the provision of healthcare services to NHS patients.
16.4. **Sharing the benefits of exploitation**

16.4.1. The Trust wishes to encourage innovation by rewarding individuals employed by the Trust with a share of any net revenue that is received by the Trust from the commercial exploitation of the IP that they have created during their employment.

16.4.2. This section describes how net revenue will be shared. In recognition of the fact that much of the research and development activity of the Trust is undertaken in collaboration with the University of Oxford, the Trust has adopted a revenue sharing arrangement with its staff which is comparable with the revenue sharing arrangements within the University. It is intended that this will ensure that there will be no material advantage or disadvantage resulting from the employment status of those working on collaborative research projects undertaken by the Trust and the University.

16.4.3. The Trust shares any revenue derived from the exploitation of IP in accordance with the version of this Policy that was in force on the date that such IP is created irrespective of when it is actually exploited. Accordingly any IP which has been created before the implementation of this Policy will continue to be exploited in accordance with the Trust’s earlier policies for the management of IP.

16.4.4. For the purposes of this Policy, the term “net revenue” means the revenue actually received by the Trust from the successful exploitation of IP from options, licences or assignment agreements after the deduction of:

- the out of pocket costs of managing, protecting and exploiting the IP including search fees, patent and other registration costs, legal and other professional fees;
- the deduction of a 30% technology transfer charge to cover the overheads of the Trust or any third party technology transfer offices engaged by the Trust to assist with the commercialisation of the IP;
- payments made to third parties contributing to the development of the IP.

16.4.5. Net revenue does not include any revenue generated by the Trust from the provision of healthcare services which utilise the IP or any payments which are received by the Trust for performing research in a particular area or conducting clinical trials.

16.4.6. Section 5 of the Health and Social Care Act 2001 enables NHS organisations to participate in the formation of companies for the purposes of generating income from IP. Where IP owned by Trust is to be exploited by means of forming a spin-out company, Trust inventor(s) who have made a significant contribution to the IP shall be invited to participate in the formation of the company in recognition of their contribution or where they may play an important role in the success of the spin-out. The respective shareholdings of the Trust and the inventor(s) shall be negotiated at the time of formation of the company. Revenue received by the Trust from shareholdings (such as dividends or proceeds of sale) is not considered as “net revenue” for the purposes of this Policy.

16.4.7. Where a single employee is responsible for the creation of IP exploited by the Trust, that employee must sign a declaration confirming that he or she is the sole inventor in order to participate in the Trust’s revenue sharing scheme.
16.4.8. Where multiple inventors contributed to the creation of the IP, it is the responsibility of those inventors (whether or not employed by the Trust) to agree upon their respective contributions and to express these as a percentage.

16.4.9. The inventors’ share of net revenue shall be divided between the inventors in such proportions. Inventors employed by the Trust will then be required to sign a declaration confirming their respective contributions.

16.4.10. The relevant forms will be made available by the Trust’s IP Lead (or in the case of IP created in collaboration with the University of Oxford, by Isis Innovation) as part of the due diligence process. In the event of any dispute between inventors as to their respective contributions, the Trust shall determine such proportions in its discretion.

16.4.12. Net revenue will be distributed by the Trust in accordance with the following table:

<table>
<thead>
<tr>
<th>Total Net Revenue received by the Trust</th>
<th>Share paid to Inventor(s)</th>
<th>Share retained by the Trust for general use</th>
<th>Share retained by the Trust for use by the CU/Directorate of the inventor(s)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Up to £50K</td>
<td>86.2%</td>
<td>13.8%*</td>
<td>0%</td>
</tr>
<tr>
<td>From £50k to £500k</td>
<td>45%</td>
<td>30%</td>
<td>25%</td>
</tr>
<tr>
<td>Over £500k</td>
<td>22.5%</td>
<td>40%</td>
<td>37.5%</td>
</tr>
</tbody>
</table>

16.4.13. *The percentage marked an asterisk above is intended to represent the employer’s National Insurance contributions payable by the Trust in respect of payments made to the Inventor(s). The Trust’s share will be increased (and accordingly the Inventor(s) share reduced) in the event of any increases in the rates of National Insurance contributions payable by the Trust.

16.4.14. The inventor’s share of net income can be distributed as personal income (which is subject to income tax), or it can be placed (untaxed) in a ring-fenced Trust account for sole use by the inventor for R&D and related purposes approved by the Trust.

16.4.15. The Trust will normally continue to pay the appropriate share of net revenue to the inventor should he or she leave the employment of the Trust and in the event of death the inventor’s share of net revenue will be paid to his or her estate. The Trust shall use its reasonable endeavours to maintain up to date contact details for inventors but it is the responsibility of the inventor (or in death the administrator of the inventor’s estate) to notify the Trust of changes in contact details. In the event that the Trust is unable to contact an inventor or a beneficiary of the inventor’s entitlement for six consecutive months such entitlement shall cease and the inventor’s share of net income shall be retained by Trust.

17. **Use of IP owned or controlled by a third party**

17.1. **Role of the IP Lead**
17.1.1. The Trust’s IP Lead is available to provide advice and guidance to Trust staff on the use of IP belonging to third parties. All staff members are encouraged to contact the IP Lead when procuring goods or services which are likely to result in the creation of IP or which necessarily involve the use of IP belonging to a third party (for example, software licences).

17.2. **NHS owned IP**

17.2.1. Trust staff should be aware that there is no such thing as “NHS owned IP”. Trust employees are not entitled to use IP belonging to another NHS organisation without the permission of that organisation. Permission may be expressly provided or it may be implied when IP is made available to the Trust by another NHS organisation for a particular purpose. In such circumstances, the IP made available to the Trust must only be used for that specific purpose. In the event of any doubt, the NHS organisation owning the IP should be contacted.

17.3. **Procuring goods and services involving the creation or use of IP**

17.3.1. Staff must be aware that the IP created by service providers, contractors and other persons not directly employed by the Trust will not belong to the Trust unless the contract expressly provides for the Trust to own it or the IP is assigned to the Trust in writing. This applies even where such persons are engaged specifically for the purpose of creating the IP in question. For this reason, it is the Trust’s policy that all agreements for procuring goods or services which are likely to result in the creation of IP (including consultancy appointments) must be documented by a written contract which includes a clause dealing with the ownership of IP.

17.3.2. It is also important that any arrangement or agreement which enables the Trust to use IP belonging to a third party is recorded in writing in order to enable the Trust to monitor compliance with the agreed terms of use.

17.4. **Unauthorised use of third party IP**

17.4.1. Trust staff are reminded that the use or copying of any IP that is owned or controlled by a third party without the permission of that third party is an infringement of that third party’s right. The unauthorised use of IP creates a risk that legal action will be taken against the Trust and exposes the Trust to the risk of having to pay damages. It risks the withdrawal of the Trust’s access to resources and will cause damage to the Trust’s reputation.

17.4.2. If any member of Trust staff becomes aware of any infringement or alleged infringement of any IP owned or controlled by a third party or of any use of IP owned or controlled by a third party without permission or outside the terms of the relevant licence granted to the Trust, then they must immediately report it to the Trust’s Head of Legal Services. Trust staff must not respond to any notice or allegations that they receive themselves and should direct all enquiries to the Trust’s Head of Legal Services.

### Training

18. There is no mandatory training associated with this Policy.

### Monitoring Compliance

19. Compliance with the document will be monitored in the following ways.

<table>
<thead>
<tr>
<th>Aspect of compliance or effectiveness being monitored</th>
<th>Monitoring method</th>
<th>Responsibility for monitoring (job title)</th>
<th>Frequency of monitoring</th>
<th>Group or Committee that will review the findings and monitor completion of any resulting action plan</th>
</tr>
</thead>
<tbody>
<tr>
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</tr>
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<td>-----------------------------------------------------</td>
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<td>--------------------------------------------------------------------------------------------------</td>
</tr>
<tr>
<td>The process for identifying and managing Trust IP and this Policy include:</td>
<td></td>
<td></td>
<td></td>
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</tr>
<tr>
<td>• Number of IP disclosure files reported to the Trust IP Lead</td>
<td>Audit of number of IP disclosure case files, revenue letters and Assignment agreements completed</td>
<td>IP Lead and Patient Benefit IP Manager</td>
<td>Annual</td>
<td>PIPAC, Medical Director and Director of Research &amp; Development via the Research &amp; Development Committee</td>
</tr>
<tr>
<td>• Number of revenue sharing letter completed with University of Oxford or another party</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Number of Assignment agreements completed with Isis Innovations and/or another relevant party</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Review**

20. This Policy will be reviewed in 3 years unless required earlier.

**References**

21. Health and Social Care Act 2001 (Section 5)
24. NIHR programme standard contracts
25. University of Oxford: Regulations for the Administration of the University's Intellectual Property Policy

**Equality Impact Assessment**

26. As part of its development, this policy and its impact on equality has been reviewed. The purpose of the assessment is to minimise and if possible remove any
disproportionate impact on the grounds of race, gender, disability, age, sexual orientation or religious belief. No detriment was identified (See Appendix 1).

### Document History

<table>
<thead>
<tr>
<th>Date of revision</th>
<th>Version number</th>
<th>Reason for review or update</th>
</tr>
</thead>
<tbody>
<tr>
<td>2003</td>
<td>v3</td>
<td></td>
</tr>
<tr>
<td>2012</td>
<td>v5.0</td>
<td>Approved policy published</td>
</tr>
</tbody>
</table>
## Appendix 1: EIA Report

### EQUALITY ANALYSIS

<table>
<thead>
<tr>
<th>Policy / Plan / proposal name: Intellectual Property (IP) Policy</th>
</tr>
</thead>
<tbody>
<tr>
<td>Date of Policy: August 2012</td>
</tr>
<tr>
<td>Date due for review: August 2015</td>
</tr>
<tr>
<td>Lead person for policy and equality analysis: IP and Contracts Lead</td>
</tr>
<tr>
<td>Does the policy/proposal relate to people? If yes please complete the whole form. YES</td>
</tr>
</tbody>
</table>

1. **Identify the main aim and objectives and intended outcomes of the policy.**
The Policy sets out the procedures that the Trust has adopted to ensure that Intellectual Property (IP) generated using the Trust’s resources is identified and managed effectively in accordance with the Department of Health guidance. It also underlines the importance of the Trust’s staff respecting the IP of third parties in order to avoid unauthorised use of IP which could lead to infringement action being taken against the Trust. This Policy affects all Trust staff.

2. **Involvement of stakeholders**
   - **NHS Innovations South East (NISE)** – Early discussions
   - **University of Oxford & Isis Innovations** – General discussions and review of the University IP policy
   - **Unison** – Draft of Policy was supplied but no comments received to date

3. **Evidence**

   **Disability**
   - N/A

   **Sex**
Section 4  Summary of Analysis

Does the evidence show any potential to discriminate? No

How does the policy advance equality of opportunity?

The policy will not impact unequally on any protected group

How does the policy promote good relations between groups?

The policy ensures that Trust employees/students/trainees who are inventors have a share from the net revenue received by the Trust from the exploitation of the inventions.