

Research and Innovation Strategy

ONCE PRINTED OFF, THIS IS AN UNCONTROLLED DOCUMENT. PLEASE CHECK THE INTRANET FOR THE MOST UP TO DATE COPY

Target Audience: All staff and interested research and innovation collaborators

Version	2
Issue	1
Approved by	Research & Innovation Committee
Date Approved	October 2018
Ratified by	Trust Board
Date Ratified	January 2018 (pending changes made)
Author	Research & Innovation Manager
Lead Director	Medical Director
Name of Responsible Committee	Research & Innovation committee
BHT Document reference	BHT S029
Department Document Reference	RS02
Date Issued	30 October 2018
Review Date	1 September 2021
Target Audience	All Trust staff and potential collaborators
Location	Swan Live Intranet Policies & Guidelines/Policies & Strategies and Research/strategy. Also on trust internet page under research section

CONTENTS

1. Introduction
 2. Background
 3. Definitions
 4. Objectives
 5. How objectives will be met:
 - a. Partnerships
 - b. Research Support
 - c. Innovation Support
 - d. Infrastructure and Capacity Building
 - e. Intellectual Property
 - f. Patient Partnership
- Appendix 1 Organisational performance measurement
- Appendix 2 How we will support non-portfolio studies
- Appendix 3 Allocation of commercial income
- Appendix 4 Governance structure
- Appendix 5 Team structure
- References

1. INTRODUCTION

Our vision is that the Trust will establish itself as an integrated trust which is recognised for its research and innovation activity. At the core of this vision is the fostering of a culture in which research and innovation are embedded in routine clinical practice and the creation of an environment in which research findings lead to sustained improvements to the quality of patient care. Central to this approach will be the Research & Innovation (R and I) Department which will drive the trust ambition. The strategy deliverables will be monitored by the trust Research & Innovation Committee, the committee reports to the Quality committee.

2. BACKGROUND:

Research and innovation has increased in ten years, along with the departments aspirations for growth and activity being part of routine care, it is also part of wider national and local objectives.

Trust

The trust objectives for 2018/2021 include the creation of an innovation hub to increase an innovation culture within the trust. Research and Innovation can support more trust objectives through research and innovation projects which the R&I department will support.

Adopting an innovative culture within the trust through research and innovation can contribute to achieving our three strategic priorities of **quality, people and money**.

Quality

- Early adoption of new products and service
- Improved patient outcomes as research has shown that trusts with higher levels of staff engagement in change have lower mortality rates reference?
- Treating patients with novel treatments for better outcomes
- Increase evidence based care

People

- Recruitment and retention of talent, where a culture of research and innovation with associated support services will attract staff and help retain a pool of local talent
- A culture that sees problem solving, creativity, new ideas as essential to deliver our CARE values
- Increasing research and innovation educational and development opportunities for staff

Money

- Accessing external capital (e.g. research and European and International grants) to support trust development
- Building commercial research income for reinvestment
- Financial benefits from development and introduction of new technologies, as BHT can become a test bed/showcase for innovations addressing issues such as care at home to avoid readmissions,

- A focus on greater partnership working between commercial, academic and public sector on key areas of our strategy
- New businesses attracted and created within Buckinghamshire leading to higher levels of economic growth, employment and subsequent impact on health.
- Adoption of proven service and financial efficiencies to deliver value.

The strategy will support the trust values:

COLLABORATE Build internal and external partnerships to improve healthcare through research and innovation

ASPIRE Strive to be an attractive partner and trust for research and innovation activity. Through research and innovation, improve our evidence base to improve the healthcare we provide and how we provide it

RESPECT Respecting ideas and providing support or find collaborations to support staff explore and work on their ideas. Respect time staff are engaged with research and innovation through a transparent system to ensure this is valued.

ENABLE Provide training and education to staff to participate in research and innovation activity. Enabling staff with tools, knowledge and support to get their ideas from concept to dissemination.

National Institute of Health Research

Best Research for Best Health (2006) ⁽¹⁾, led to the formation of the National Institute of Health Research (NIHR) and Local research networks which provide funding streams and regional functions to enable facilitation to research using new systems and national guidance. Buckinghamshire Health Research is part of Thames Valley and South Midlands clinical research network.

NHS England

The NHS Document Innovation for Wealth ⁽²⁾ has set a framework for NHS organisations to embed innovation within their activity.

NHS England's Five Year Forward View is a vision for the transformation of the NHS that all of us can get behind. It sets out how NHS England and its partners will commit to driving improvements in health through developing, testing and spreading innovation across the health system. (*George Freeman, Minister for Life Sciences 3 September 2015*)

'Innovation is critical to enabling NHS England to achieve the ambitions set out in the Mandate, to ramp up the pace and scale of change, and deliver better outcomes for patients across all five domains of the NHS Outcomes Framework. The NHS remains a major investor and wealth creator in the UK, and in science, technology and engineering in particular.

The Board's objective is to ensure that the new commissioning system promotes and support participation of the NHS in research, translating scientific developments into benefits for patients, and contributing to economic growth by exporting innovation and

expertise internationally. The Innovation programme is the only mainstream activity in NHS England that directly supports delivery of these benefits.' (*NHS England Innovation*)

DH Mandate 2017/2018

DH Mandate for 2017/2018 has seven objectives one of which is 'To support research, innovation and growth'. The R&I department will work through this strategy to drive an increase in the research and innovation portfolio of the trust.

3. Definitions

To support staff to understand how their programme of work is classified and provide clarity, this document lays out the definitions of research, innovation, clinical audit, service evaluation and service improvement.

Research

Research is designed and conducted to generate new knowledge and should follow the systems for approval of NHS Research, with "the attempt to derive **generalisable new knowledge** including studies that aim to generate hypotheses as well as studies that aim to test them". Research involves any of the following:

- The aim of the study is to derive generalisable new knowledge
- The treatment / service is new with little support / evidence
- The study involves treatment allocation
- The study involves randomisation into different treatment groups

(*Health Research Authority*)

Innovation

Innovation is the process of developing an idea to meet a technical or operational need. In the NHS this is usually a healthcare need.

Innovation in the NHS can take different forms. Often innovation may be related to process and service management, but it may also take place through the development of new medical technology or clinical tools. Examples of healthcare innovations might be software, surgical equipment, self-management handbooks, new drugs and new therapeutic uses for drugs or medical devices.

Innovation in healthcare should make the patient experience better and improve safety. It should also have commercial potential not only to save costs but also to bring in income for the Trust and the innovators.

(*UCL (University College London) Business*)

Clinical Audit

“is a quality improvement process that seeks to improve patient care and outcomes through systematic review of care against explicit criteria...Where indicated, changes are implemented...and further monitoring is used to confirm improvement in healthcare delivery.”

(Principles for Best Practice in Clinical Audit (2002, NICE/CHI)

Service Evaluation

Service evaluation is designed and conducted solely to define or judge current care. Designed to answer- “what standard does this service achieve?”. It measures current service without reference to a standard. Service evaluation involves an intervention in use only. The choice of treatment is that of the clinician and patient according to guidance, professional standards and/or patient preference. Usually involves analysis of existing data but may include administration of interview or questionnaire. There is no allocation to an intervention: the health professional and patient have chosen intervention before service evaluation. No randomisation and does not require ethical review

(National Research Ethics Service)

Service improvement:

Improvement is any method that brings about a measurable benefit against a stated aim. The model for improvement asks three questions

- What are you trying to achieve?
- How will you know a change is an improvement?
- What changes can you make that will result in the improvement that you seek?

(Gillian Granville Associates)

4. OBJECTIVES

- We will provide an excellent environment for research and innovation, leading to the creation of mutually beneficial partnerships between the NHS, academia and Industry. We will promote research and innovation to broaden staff engagement and support staff with an interest in carrying out research and innovation.
- We will manage delivering projects to agreed targets, through managed feasibility at the point of approach by sponsors and collaborators. We will use benchmarking data to manage our performance in delivering research.
- We will promote ourselves as a research and innovation active trust with commercial companies and clinical research organisations, this will include sending out trust R&I publications (e.g. bi-annual report) and keeping the trust internet site up to date.
- The R&I department will use part of the commercial income earned to support staff to carry out research and innovation. This will be managed through the trust Research & Innovation Committee.

- Specialties who generate income will be able to reinvest their income earned for research and innovation studies, training and equipment.
- We will increase patient participation in research by 60% over 5 years (baseline with key performance indicators)
- We will embed patients in the research and innovation activities and feedback journey via Patient and Public Involvement and increased use of Patient Research and Innovation Ambassadors
- We will identify and protect intellectual assets (known as Intellectual Property) arising from research and development activity hosted by BHT, so that the trust, researchers and services benefit from any revenue raised through this activity
- We will ensure that the evidence base emerging from studies is disseminated across the trust so that our patients may benefit from treatment and care underpinned by the best evidence of clinical effectiveness.
- Through partnership working we will secure funding streams to offer Clinical Academic and Clinical Fellowship posts within the trust
- We will work closely with partner Higher Education Institutes (HEI's) and the Local Enterprise Partnership (LEP) to ensure strategic co-ordinated investment in research capacity and creation of the infrastructure and resources required to support and add value to research and innovation across Buckinghamshire
- We will build partnership with industry and HEI's within Buckinghamshire for a shared commercial vehicle.
- We will develop and embed an innovation culture across the trust, delivering high impact innovations in specialist areas. This will necessitate building the governance and infrastructure for innovation including offering training opportunities
- We will maintain good governance in line with national frameworks and legislation, ensuring robust governance arrangements around patient data.
- We will work with partner organisations (e.g. Oxford Academic Health Science Network or commercial/innovation organisations) to identify collaborative innovation opportunities in the trust
- We will develop a business plan for a trust facility to support the trust vision for research and innovation
- We will produce an annual research report for the Board
- We will strengthen the skills of the Research and Innovation department to deliver the new agenda

5. How objectives will be met

a) Partnerships

In order to meet the objectives of increased partnerships, R&I will build on the strong existing relationships with local Higher Education Institutes (HEI's), the local research network, the Oxford Academic Health Sciences Network, the Buckinghamshire Lifesciences Innovation Centre partnership members and other key stakeholders within the 5 year term of this strategy. This clear and consensual basis for partnership working between organisations will be achieved as below:

HEI's

Building strong research partnerships between the Trust and HEI's, and the resulting opportunities to efficiently translate research, play a central role in attracting support from the NIHR and other major funders.

Research and Innovation will:

- Promote strategic and operational working relationships with the Trust and HEI boards
- Underpin the Trust/HEI partnership by strategic investment in opportunities for joint appointments for clinical research posts
- Work with HEI's to produce and update a strategic document describing how the Trust and HEI's can together create a platform to enhance first class clinical research and attract further major research funding into Buckinghamshire
- Facilitate working relationships with HEI's in key areas through a series of Memoranda of Understanding (MoU), in which the interests of each organisation are recognised and their roles in pursuit of common goals agreed. Suggested areas for MoUs include:
 - joint research strategy
 - financial agreements between Trust and HEI for the efficient processing of jointly funded research, including sub-agreements between Trust and HEI where required
 - Intellectual Property agreements for joint research, including alignment of Trust and HEI policy for the remuneration of inventorship
 - HR policy and honorary contracts
 - Performance management and quality assurance

Clinical Research Network (CRN)

In contrast to the active research partnership with HEI's, the Trust effectively acts as a provider of services commissioned and funded by the LRN for the support of high quality clinical trials and studies adopted onto the national research portfolio ('portfolio studies'). Research staff who are funded by the LRN are employed by BHT.

In order to manage these resources for the mutual benefit of both organizations, the Trust and network have agreed that:

- LRN funded staff working in the Trust will be managed by the Trust
- CRN funded staff will be performance managed by the Trust against a set of criteria and performance measures agreed with the CRN.
- The Research and Innovation Department and the CRN will review infrastructure support and agree future funding requirements. These principles will form the basis of a written agreement between Trust and CRN.

Local Academic Health Science Network (AHSN): Collaboration with the Oxford AHSN will focus on:

- High impact innovations and technologies
- Supporting knowledge exchange networks
- Supporting industry research
- Supporting pump priming innovation projects, similar to the Regional Innovation Fund
- Applying NHS initiatives around innovation
- Providing consistent advice around intellectual property
- Identifying and supporting the development, testing and commercialisation of ideas that have potential to become best practice
- Work with procurement teams to support systematic adoption and spread across partners

Buckinghamshire Life sciences Innovation Centre

As one of the partners with Buckinghamshire New University, Bucks County Council and the local Clinical Commissioning Group (CCG), the trust will work as a key partner offering an opportunity to Small and Medium sized Enterprises (SME's) through providing access to our clinicians and patients whilst ensuring sound governance for all activities. The trust will provide space under the Local Growth Fund (LGF) Capital programme, to allow SMEs space to rent to develop their innovations

Internal

For successful growth, adoption and delivery of research and innovation more integrated working is required by the Research and Innovation Department, specialties and staff groups. With this in mind Research & Innovation Champions will be created in specialties and representing different staff groups to ensure representation of all staff. This will enable communication and integration of research and innovation within everyday activity.

We will develop a programme for multidisciplinary research and innovation with the Nursing, Midwifery and Therapy Board.

b) Research support

BHT research and innovation department will provide a framework for research which complies with good clinical practice, without restricting the freedom of individual researchers to develop ideas which can improve clinical care. This will be in line with national guidelines (e.g. DH Research Governance Framework ⁽³⁾, GDPR⁽⁴⁾, Human Tissue Act ⁽⁵⁾ and the MHRA guidance ⁽⁶⁾). The trust framework enables fast turnaround of studies and facilitates more successful delivery to studies, this is achieved by:

- An expert team of professional governance staff who engage with investigators in the Trust to develop a culture of support and mentorship.
- A structured risk assessment approach adopted in order to identify key issues very early in the project lifecycle in order to minimise bureaucratic delays.
- A structured feasibility meeting where key staff from all departments involved in the study, identify potential barriers and solutions are found to ensure we can successfully deliver the study within agreed parameters.
- As part of the approvals of research submissions procedure, all projects will be approved within a median period of 15 days of their full and valid submission
- To ensure good research governance is being carried out, the research and innovation department will audit 15% of open studies and will report findings and put in place any training needs identified.
Reporting the trust research risk register through the Research & Innovation committee to ensure that it is managed

Simple measures for the performance management of research activity in BHT are described in Appendix 1.

c) Innovation Support

The trust Research & Innovation department will support innovation by staff and those that can be tested, adopted or developed in partnership with external innovation teams.. We will achieve this by:

- Developing and embedding an innovation culture across the trust, by building the governance and infrastructure for innovation including offering training opportunities, awareness sessions and communicating innovation activity trust wide.
- Working with partner organisations (e.g. Oxford Academic Health Science Network or commercial/innovation organisations) to identify collaborative innovation opportunities within the trust. The Research and Innovation department will support individuals and teams through these processes
- Partnerships with higher education institutes
- Developing a business plan for a trust facility that supports the trust research and innovation vision
- Providing sound governance to strengthen cases for adoption of innovations
- Strengthening the skills within the Research and Innovation department to deliver the new agenda
- Building a business case and employing an Innovation manager.

d) Infrastructure and Capacity Building

The Trust receives funding from the Thames Valley & South Midlands local research network for the provision of research infrastructure and service support for NIHR portfolio studies. The Trust currently has limited discretion in the allocation of these funds. For the duration of this strategy to enable appropriate support for the research

and innovation infrastructure in the trust, the Research and Innovation department through the Research and Innovation Committee will:

- Map areas for research and innovation investment
- Allocate research and innovation infrastructure to provide in depth support for areas identified
- Create a system for research and innovation time in job plans for active clinicians which will be monitored annually for continuation through the job planning process or annual appraisal
- Create research and innovation leads to champion and promote research and innovation within Directorates
- Create an environment of 'peer review' of research performance within divisions
- Manage support in key research support departments, such as Pharmacy, Radiology and Pathology Services with key member of staff in each support department to be a point of contact for feasibility and delivery issues.
- Actively engage nursing and allied health professionals with the research and innovation strategy
- Engage with the estates team to build sustainable and appropriate long term plans for housing research and innovation
- Co-ordinate and manage a balanced portfolio of research including:
 - high quality non-portfolio studies, including proof of principle and feasibility studies,
 - studies of different complexity according to the National Institute of Healthcare Research Clinical Research Network (NIHR CRN) criteria
 - commercially sponsored and non-commercial research
 - promotion and management of multidisciplinary working

Increasing the infrastructure and building capacity to support research and innovation will be underpinned by:

i. Training and education

- Pro-actively engage with researchers and innovators, particularly those at an early stage of their careers
- Develop a research fellow scheme within the trust
- Develop a Research Practitioner career pathway in the trust.
- Co-ordinate UKCRN and local training schemes to ensure education of our workforce in the appropriate national and international quality standards such as; good clinical practice (GCP), GMP (Good Medical Practice) and the Human Tissue Act
- Provide regular advice clinics
- Provide research and innovation training workshops
- Introduce Research and innovation into Trust induction programmes for all clinical staff
- Work with the education team to identify opportunities for staff development in research and innovation

- Work with the Nursing, Midwifery and Therapy Board to develop researcher and innovator clinicians within the trust
- Liaise closely with regional innovation and educational initiatives i.e. Oxford Academic Health Science Network

ii. Early phase and non-portfolio studies

As of 1st April 2009, funding for research support services and infrastructure no longer comes to NHS Trusts but from the NIHR Local Research Network for the exclusive support of studies adopted onto the NIHR research portfolio, (i.e. those studies funded by the NIHR, Research Councils or major research charities open to national competition and high standards of independent scientific review). The Trust therefore has no resources to support studies which do not qualify for portfolio funding.

The Trust does, however, wish to actively promote high quality early phase feasibility and pump priming projects with the potential to build research capacity and generate further competitive grant funding for the organisation - such studies will generally not attract portfolio status. In order to do so R&I will:

- Work with trust charities to establish a charitable fund to offer a 'pump priming' facility accessible to all researchers and innovators in the Trust. This will be facilitated through bids submitted to the Research & Innovation committee
- Utilise a proportion of net commercial income that R&I receive to contribute to the above fund
- Review the size of the pump priming fund on an annual basis
- Work with the HEI's to support student projects A more detailed strategy for non-adopted studies is set out in Appendix 2.

iii. Knowledge Management and Transfer

The fundamental aim of the Research and Innovation strategy is to facilitate translation of research findings into improvements in safety and health outcomes for our patients. To do so effectively requires a coordinated approach to mapping and evaluation of knowledge transfer and implementation within the organisation and, in particular, a critical interrogation of the role of clinical and non-clinical managers in this process to develop a programme of innovative research aimed at systematically increasing knowledge transfer and implementation of research findings across the trust. BHT also seeks to develop a strategy for the transfer of research, innovation, clinical skills and knowledge from BHT to provide a benefit to the economy and health of the region and the UK. Key strategic objectives for the trust to achieve knowledge transfer will be:

- To raise the national profile of BHT clinical research by ensuring that research results, data and other information and outputs, are of high quality and are made accessible to the wider public to encourage and support knowledge transfer in order to maximise health and economic impacts for the benefit of patients, the Trust and its partners.
- To promote, publicise & raise awareness across BHT of all aspects of knowledge transfer (economic development, provision of policy advice and public

engagement) and to embed knowledge transfer activities into research grant applications.

iv. Commercial Funding and Financial Management

Pump Priming capacity and support of the clinical trials management pathway within R&I requires an efficient process for the capture and utilisation of income from commercially funded clinical trials. This process is set out in Appendix 3. The Research and Innovation department will set up a charitable donations fund for research within the trust charities site to seek funding to support research and innovation activity (where appropriate under charity rules).

e) INTELLECTUAL PROPERTY

The Trust Research Review Board will assess trust led studies for potential intellectual property and work with the Oxford Academic Health Science Network to explore possible routes for commercialisation. The Trust Intellectual Property Policy lays out the roles, responsibilities and arrangements around all intellectual property. The Trust Research and Innovation Department will arrange Intellectual Property awareness sessions and issue guidance on required procedures in relation to intellectual property engagements.

f) PATIENT PARTNERSHIP

The purpose of the Research and Innovation Patient Partnership within the strategy is to foster an active, on-going involvement of patients and/or their representatives with researchers and other clinical research stakeholders for the sustained improvement of quality of care for our patients. To achieve this, the Research & Innovation Department will work with the Trust Patient Public Involvement strategy to:

- Create Patient Research Ambassadors to support patient involvement in research
- Create research information and marketing drives
- Involve patients as co-researchers
- Change peoples' perception of research
- Increase the use of Lay members on committees and groups
- Work with patient engagement groups to promote research
- Change researchers' perception of the place of patients in research
- Embed patient and public involvement in job descriptions
- Use multiple forms of communication media to reach patients
- Use media to promote the patient story

Appendix 1

ORGANISATIONAL MEASURES

National metrics

- 100% of studies to be approved to commence within the trust within 15 days of valid application (which will include the HRA approval system when it comes into force)
- 80% of studies to be open to recruitment within 1 month of valid application to the trust
- 80% of studies to recruit first patient within 70 days of valid application (this may be reviewed when the HRA approval system is clear on national metrics)
- 15% of the number of open studies to be audited in a financial year with monitoring reports submitted to the Research and Innovation Committee as a governance agenda item

Infrastructure

- % of recruitment into allocated research posts completed within 6 months: Target 100%
- Funding to move from 90% NIHR to 65% by year 5
- number of clinicians with recognised allocation of research and innovation time within the job plan : Target to increase the number by 5

Performance

- Increase the capture of commercial income to 100% within 2 years
- Increase commercial income to the Trust by 50% over the next 5 years
- Open all new trials and studies within 1 month of approval
- 80% of studies achieve 100% of predicted accrual at planned close of recruitment
- Increase in accrual of BHT patients to portfolio studies by 60% over 5 years

STAFF

Allocated research time and other infrastructure support are open to clinicians of all backgrounds. Criteria for the performance management of clinicians will be developed together with the appropriate partners.

Research time for consultant staff will be managed through the annual appraisal/job planning process. Appraisal of research during the cycle will be formative, but all holders of research PAs will be required to re-apply at the end of the cycle. Appraisals

will be conducted in line with the trust Medical Revalidation and Appraisal Policy with feedback and input provided from the Clinical leads for Research.

Research time for other clinical staff will be reviewed by the SDU lead with the Associate Medical Director of Research & Innovation

Criteria for quality assessment will be selected to enhance the delivery of a programme of first class research and will take account both of the nature of the research and the requirements of funding partners..

Assessment of researchers funded in partnership with the HEI's will be in line with the University research appraisal process.

The research and innovation department manages the research passport system and honorary contracts relating to research and innovation for cross organisational working to ensure governance is in place with relevant supervision.

All research has to be published and staff will have to give the research and innovation department evidence of publications, failure to do so will result in no future studies being sponsored.

Appendix 2

AUTHORISATION PROCESS FOR STUDIES THAT DO NOT QUALIFY FOR ADOPTION BY THE NIHR

As of 1st April 2009, funding for research support services and infrastructure no longer comes to NHS Trusts but from the NIHR Comprehensive Research Network to support studies adopted onto the NIHR research portfolio i.e. those studies funded by the NIHR, Research Councils or major research charities open to national competition and high standards of independent scientific review. The Trust therefore has no resources to meet the costs of R&I, financial and contracting services or service support for non-portfolio research. Further, the Trust is committed to supporting only high quality research with the potential to improve health outcomes for our patients. Research and Innovation recognises that, while non-portfolio research may be of high quality, it has by definition not been subjected to national competition and high standards of peer review. Research and innovation will therefore adopt the following approach:

Financial Requirements

- Commercial trials, whether adopted by the NIHR or not, need to be fully costed with the sponsor meeting all costs.
- Excess treatment costs to be assessed and agreed in line with NHS England guidance
- For non-commercial studies which do not qualify as NIHR portfolio or commercial, R&I needs to be assured, before embarking on the research governance process, that funding is available to meet all costs. These costs will include :
 - The direct research costs,
 - service support (including governance) costs, and
 - Trust overheads.

The Research and Innovation Department should be contacted in the first instance - and prior to submitting the project to R&I for approval completing the trust research review form- to provide advice and guidance about how to proceed with such projects. To facilitate this process, the Trust Research Review assesses protocols, patient information and costs and provides advice on potential sources of funding. All research studies' financial arrangements are in line with the national guidance AcoRD⁽⁸⁾

- Early phase studies supported by the BHT pump priming competition will be exempt from these requirements.

Quality Assurance

The Trust has a duty to support portfolio research projects. It has no such duty to support non-portfolio research. Research and innovation will therefore require Clinical Directorates to agree to host a non-portfolio research project before it can receive trust

approval. Research and Innovation will produce a set of clear criteria for quality assessment. This strategy will also create Research and Innovation Champions in active Directorates who will assume primary responsibility for this process.

Appendix 3

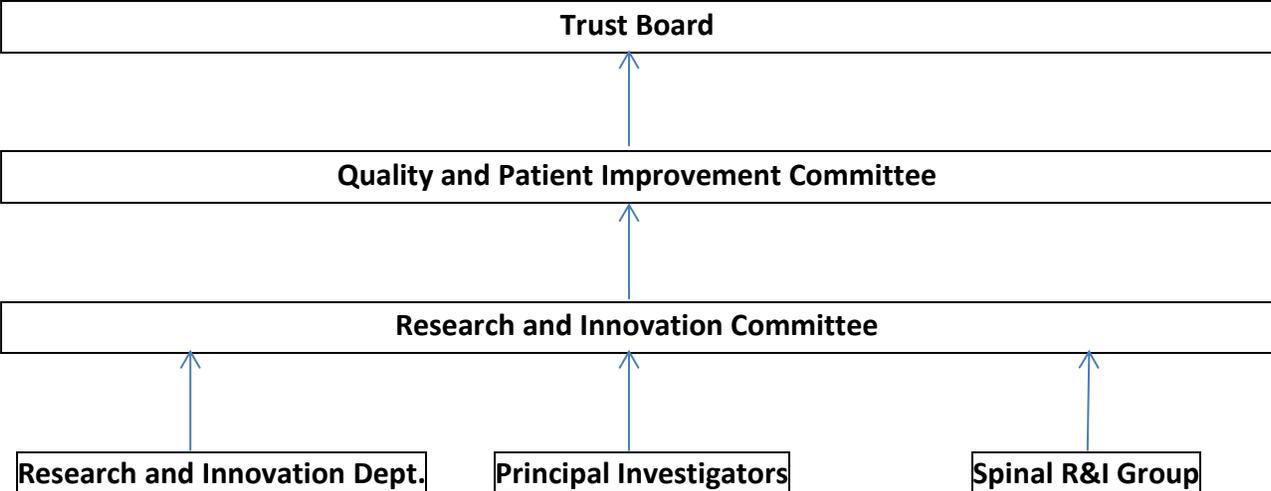
ALLOCATION OF COMMERCIAL INCOME

As described in Appendix 1, funding for research support services and infrastructure is only available to support studies adopted onto the NIHR portfolio. There is therefore no support from the research and innovation department for own account studies and student projects.

The Trust Commercial Research Policy outlines how commercial income will be used to build capacity and infrastructure for staff research and innovation activity within the trust.

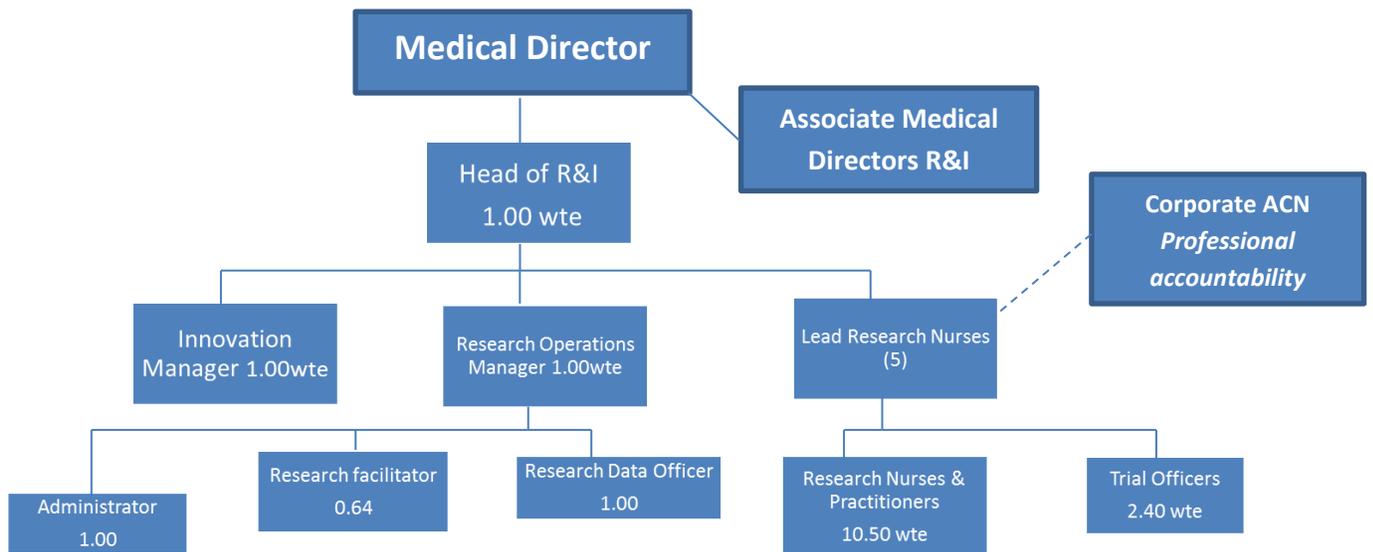
Appendix 4

Governance structure



Appendix 5

Organisation chart



References

- (1) <https://www.gov.uk/government/publications/best-research-for-best-health-a-new-national-health-research-strategy>
- (2) <https://www.gov.uk/government/news/accelerating-adoption-of-innovation-in-the-nhs>
- (3) https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/139565/dh_4122427.pdf
- (4) <http://www.hra.nhs.uk/resources/research-legislation-and-governance/questions-and-answers-the-human-tissue-act-2004/>
- (5) <http://www.legislation.gov.uk/ukpga/1998/29/section/33>
- (6) <http://www.hra.nhs.uk/research-community/applying-for-approvals/medicines-and-healthcare-products-regulatory-agency-mhra-medicines-clinical-trial-authorisation-ctimps/>
- (7) http://swanlive/sites/default/files/intellectual_property_policy-_bht_pol_120.pdf
- (8) <https://www.gov.uk/government/publications/guidance-on-attributing-the-costs-of-health-and-social-care-research>