

## Cover Sheet

Trust Board Meeting in Public: Wednesday 28 September 2022

TB2022.076

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**Title:**           **Hosting Oxford Academic Health Science Network**

**Status:**         **For Decision**

**History:**

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**Board Lead:**   **Chief Medical Officer**

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**Confidential:**  **No**

**Key Purpose:**  **Performance**

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## Hosting Oxford Academic Health Science Network

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### 1. Purpose

- 1.1. Oxford Academic Health Science Network (AHSN) has been hosted by Oxford University Hospitals NHS Foundation Trust (OUH) since it was established and first licenced by NHS England, along with 14 other Academic Health Science Networks, in 2013. In 2013, as host of the AHSN, OUH entered into a Master Licence Agreement with NHS England.
- 1.2. The AHSNs will complete their second 5-year licence period in March 2023. NHS England is expected to relicence the AHSNs for a third 5-year period possibly with a 2-year break clause. The re-licencing process will entail a submission to NHS England by each AHSN under a closed (uncompetitive) tender process. As Oxford AHSN's host, OUH will be asked to agree to the terms in the tender process.
- 1.3. The AHSN Chair, CEO, COO and AHSN senior management team request that OUH considers and approves the continuation of the existing hosting arrangements.
- 1.4. If agreement by the OUH Board to continue to host the AHSN is reached, the decision will be put to the full AHSN Board for approval.

### 2. Background

- 2.1. AHSNs were commissioned by NHS England in 2013 to increase uptake of innovation in the NHS. AHSNs are commissioned by NHS England to deliver a portfolio of national programmes and locally commissioned programmes. NHS England (previously NHS Improvement) also commissions each AHSN to deliver its Patient Safety Collaborative. The Office for Life Sciences commissions the AHSNs to operate an NHS national Innovation Service which includes working with innovators and the NHS identifying NHS needs, signposting innovators and evaluating innovation.
- 2.2. AHSNs work with NHS providers in all care settings and innovators from industry and academia across the innovation pathway. AHSNs have expertise in change management and adapting clinical pathways to support adoption of innovation.
- 2.3. An example of AHSN support is the pre-eclampsia diagnostic, Placenta Growth Factor (PIGF), which underwent clinical trials in OUH. Although a licenced commercial product supported by NICE had been launched, the product had not been adopted by the NHS including OUH. Oxford AHSN worked with the maternity/neo-natal team in OUH to undertake a real

world evaluation of the product to understand the barriers to adoption. Following this, the AHSN supported the spread and adoption of the diagnostic in the maternity units in the Thames Valley and then supported the national rollout to almost all maternity units in England. Ufonia for AI assisted perioperative pathway management is another example of an innovation emerging from OUH that the AHSN has supported.

- 2.4. Oxford AHSN has a portfolio of about 40 programmes supported by an establishment of 60 staff. Oxford AHSN serves the health and care systems of BOB ICS, Frimley ICS and shares support for Bedford, Luton and Milton Keynes ICS with Eastern AHSN. The AHSN is a critical link between innovators in industry and academia and NHS clinical leaders and commissioners.
- 2.5. During the current licence period the AHSN has strengthened its links with NICE, the NIHR Oxford and Thames Valley Applied Research Collaboration and the NIHR Thames Valley Clinical Research Network.
- 2.6. The AHSN has three programmes and two themes each of which has an oversight group chaired by a member of the AHSN's Board. The Board has an independent Chair and the OUH CEO is the Deputy Chair. Other members of the Board are local Trust NHS CEOs, the Medical Director of Berkshire Healthcare, the Executive Lead of BOB ICS, the CEO of the Association of British Health Tech Industries, the Director of Corporate Affairs for Bayer UK and Ireland, and the Director of Oxford Academic Health Partners. The AHSN CEO and COO are also members of the Board.
- 2.7. Oxford AHSN has a very experienced and established senior team comprising a CEO, a COO (who deputises for the CEO), three Programme Directors, a Medical Director, a Director of Community Involvement, a Senior Finance Manager, a Head of Corporate Affairs, and a Head of Communications.
- 2.8. The AHSN successfully delivers its nationally and locally commissioned programmes and projects and as part of the AHSN Network, the AHSN leads in key areas; Oxford AHSN's CEO is the current chair of the AHSN Network and responsible CO for national programme of Cardiovascular Disease (CVD) work, Oxford AHSN's Director of Patient Safety and Clinical Improvement is the maternity/neonatal lead for the Network, and Oxford AHSN is leading the national asthma biologics programme.
- 2.9. Currently the AHSNs collaborate much more closely than was the case in the first licence period and the AHSN network has developed an overall strategy and a new governance framework.
- 2.10. Regionally, in the South of England, Oxford AHSN, Kent Surrey & Sussex AHSN, and Wessex AHSN collaborate in many areas; with the South East

Regional Medical Team they led the rollout of covid oximetry at home and covid virtual wards during wave 2 of the pandemic. The approach was then adopted nationally. About half the patients admitted to virtual covid wards and oximetry at home were in the South East.

- 2.11. Oxford AHSN has developed its strategy setting out four priority clinical areas – CVD, Maternity/Neonatal, Mental Health and Respiratory which align with four of the five the Core20PLUS5 policy areas to tackle health inequalities. The AHSN describes itself as the innovation and improvement arm of the three ICSs that it supports and it also plays an important role as the gateway to industry innovators to the health and care system.
- 2.12. Forecast income and expenditure for 2022-23 is £6m of which, £4m is from the national commissions and £2m is from grants and local partners.

### **3. Hosting**

- 3.1. OUH employs all but two of the AHSN staff. OUH provides HR, financial accounting, procurement, and desktop IT support services. These are described in a Memorandum of Understanding (MOU) between OUH and the AHSN and the costs of the services are recharged annually. The MOU and the service charges are reviewed each year.
- 3.2. The AHSN has established an independent Company Limited by Guarantee which is governed by members of the AHSN Board. This CLG carries reserves of £2.9m to underwrite OUH against potential costs which might be associated with the termination of the Oxford AHSN activity as a result of a change in strategy by the AHSN's commissioners. Each year the AHSN calculates its potential termination liabilities and reviews these with OUH. The risk adjusted liabilities are currently £1.4m. This leaves £1.5m in the CLG which is earmarked to cover potential shortfalls in the AHSN operating accounts should there be a fall in income from a national commissioner, thus giving headroom and the time for the AHSN to find other sources of income or to redeploy staff. AHSN staff are very skilled and therefore deployable in the health system or in some cases to industry. The AHSN's potential liabilities compared with the CLG's reserves are reviewed by OUH annually.
- 3.3. The AHSN Chair and CEO have confirmed to the OUH CEO that the AHSN would like to continue to be hosted by OUH. It was agreed that the OUH CEO will remain on the AHSN Board as Deputy Chair. It was also agreed that there will be a lead OUH Executive to link with the AHSN, currently proposed to be the Interim Chief Medical Officer.

## 4. Relicensing

- 4.1. The option to develop a new five-year MLA (from 1 April 2023) with a two-year break clause has been approved by NHS England's CEO and Transformation Director.
- 4.2. On 12 September, NHS England sent each AHSN an Invitation to Tender (ITT). NHS England intends to award a contract to each of the existing providers of AHSN services as a result of this ring-fenced procurement. The ITT includes:
  - 1) Statement of Requirements, including need to provide detailed cost information and a technical response setting out how the AHSN will deliver the contracted services
  - 2) A form of tender
  - 3) A declaration that the contractor (OUH) will agree to the terms and conditions of the contract. The AHSN will complete the documentation and submit in the time frame. As host, OUH, will be required to sign off the documents, together with the proposed new Master Licence Agreement (MLA). The MLA will be reviewed for recommendation to the AHSN Board and to OUH.
- 4.3. It is intended that the MLA will be finalised in December 2022.
- 4.4. The relicensing timetable is set out in Appendix 1. The next key date is for each AHSN (and its host) to submit its completed documents by noon on 10 October 2023.

## 5. Conclusion

- 5.1. The OUH has hosted the Oxford AHSN successfully for the last 10 years and subject to the completion of the relicensing requirements has been asked to continue with host arrangements for 2023-28 period.

## 6. Recommendations

- 6.1. The Trust Board is asked to:
  - Agree to host the AHSN for the 2023-2028 licensing period
  - Pending the above decision, agree to the submission of the Statement of Requirement and MLA as the Host of the AHSN

**Appendix 1 NHS England Timetable for Relicensing AHSNs**

<b>Business Process</b>	<b>Deadline</b>
Notification Letter from NHS England	30 Jul 2022
Statement of Requirements published to Supplier	12 September 2022
Intention to Relicence Letter from NHS England	28 Sept 2022
Application by supplier (OUH/Oxford AHSN)	10 October 2022 (noon)
Master Licence Agreement (MLA)	Award decision approval Ratified 8 Nov 2022 (NHS England CEG)
Award Notification Letter	16 Dec 2022
MLA signed	Jan 2023