**Report from Oxford Academic Health Partners May and June 2022**

The OAHP Board met in May and June and highlights are given below:

1. The Board said goodbye to Bruno Holthof who was attending his final meeting as CEO of the Oxford University Hospitals. The Board commented on the enormous contribution he had made not only within the OUH but across the region and beyond, particularly in terms of developing partnerships that now underpin the OAHP and its activities. The Board was delighted that he would be remaining in the area and so able to continue his contribution to the local systems.
2. The Board noted with pleasure that Professor Meghana Pandit had been appointed Interim Chief Executive wef 1 July 2022 and looked forward to welcoming her to the Board meetings.
3. In discussions in a number of matters it was agreed that the Board should take an opportunity towards the end of the year to consider its progress and position and to refine plans in preparation for the second half of the designation and preparation for any redesignation process. This ‘Retreat’ is to be held in November.
4. The Board continued its focus on two key areas: the [**Life Sciences Vision**](https://www.gov.uk/government/publications/life-sciences-vision) and Missions and the proposals for Data currently being discussed across England. With reference to the first, a list of resources and strengths is being drawn together by the Chief Operating Officer working across all partners. It is expected that announcements on the individual missions – for example, mental health and dementia – may be made within the coming few weeks. Partnerships with industrial partners will be key features in the missions which will set out clear objectives.
5. A detailed paper has been prepared by the COO on the Goldacre Report [**“Better, Broader, Safer: Using Health Data for Research and Analysis”**](https://www.goldacrereview.org/)and its implications across the Region and indeed beyond. The development of the TRE programme is also underway and the OAHP is working to support all partners associated with this in the work being led by OUH~~. Both our Director and COO are actively engaged in this work.~~ The paper is being added to all the time and has been prepared for all partners to use in their own discussions and work in this important area.
6. The Board approved the Communications Strategy by Megan Turmezei with support from Gweld Communications at its May meeting. This has already proved invaluable in the coverage of the recent REF announcements and in the launch of the OAHP Research Development Award. The OAHP website is also being updated and refreshed as part of this work.
7. The Research Development Award Scheme from Oxford Academic Health Partners was launched on 23 May and offers funding for research skills training, so NHS staff can develop and pilot improved services for patients and service users. The scheme also offers short-term funding to support clinical research projects. It is open to clinical staff with a focus on nurses, midwives, allied health professionals, pharmacists and early-career staff. The award scheme is part of a national drive to improve the capability, capacity and support for NHS staff who are interested in research or who aspire to developing a clinical academic career. The scheme is part of the OAHP’s strategy of championing research literacy across the clinical and allied health disciplines to help build and maintain the foundations for robust, interdisciplinary health and care research. Funding of up to £5,000 will be awarded to individuals or teams, funded through the Oxford Academic Health Partners Charity and the scheme closes on 22 July. More information can be found [here](https://www.oxfordahsc.org.uk/our-plans/awards/).
8. The Board received an extremely helpful and informative update on the work of the NIHR [Community Healthcare MIC](https://www.community.healthcare.mic.nihr.ac.uk/) hosted by Oxford Health from its Director Professor Gail Hayward. Its work is particularly connected to diagnostics at point of care and in homes/care homes and is particularly important with developments in digital health and MedTech. The Board noted that links would be made into the Diagnostics work now being done across the ICS and noted the developing links with and support from the Oxford AHSN Teams. The MIC is part of the very rich NIHR infrastructure that the Partners benefit from and regular updates are now sought from these bodies. Updates are now being sought from the OUH hosted Clinical Research Network and the Clinical Research Facility in Experimental Medicine and the OH hosted Brain Health CRF.
9. The June meeting considered the Terms of Reference for the Board and approved these welcoming the continued focused and flexible approach involving the most senior members of the Partner organisation.
10. The Board considered the proposed changes in the NIHR Clinical Research Networks and their reconfiguration into Regional Research Delivery Networks covering a larger area. The impact on the CRN currently hosted by OUH could be considerable with a change to the South East Central region. The proposals were due to be discussed from October 2022 for implementation of changes from April 2024.
11. The Board also considered the first draft of its Annual Report for NIHR which would also be accompanied by up to three case studies. Work has been continuing on the development of case studies which showcase innovation, research, developments in patient care and partnerships across all aspects of the OAHP and its wider region. The recently published REF Impact Case Studies would also be reviewed. The Report submission deadline is 25 July and will also be circulated to the Boards of Directors.

Megan Turmezei, Senior Programme Manager

June 2022