

Joint Clinical Research Board

Monday 11th December 2017
BCI Boardroom, Charterhouse Square

Present:

Nick Croft (NC), Coleen Colechin (CC), Nick Lemoine (NL), Jo Martin (JM), Rupert Pearse (RP), Anju Sahdev (AS)

In attendance: Paul Astin (PA), Sharon Barrett (SB), Mays Jawad (MJ), Jo Morgan (JMO), Felicity Sartain (FS)

Apologies: Alistair Chesser, Sean Collins, Sandra Eldridge, Nick Good, Gerry Leonard, Jonathan Morgan, Neeta Patel, Mauro Perretti, James Rickard, Steffen Petersen, Steve Thornton

Agenda Item	Action
<p>1. Minutes and Actions from the last meeting</p> <p>RP, as the new Joint Clinical Director of R&D, had been asked to jointly chair the meeting with JM. In future he will be chairing these meetings.</p> <p>The minutes of the last meeting were agreed.</p> <p>Actions from previous meeting:</p> <ul style="list-style-type: none"> (i) Ensure that Task and Finish Group recommendations are implemented: Rolled to the next meeting – task and finish group CC (ii) Minutes from the RD meetings across the Clinical boards/institutes Action: minutes to be emailed to Nick Good (NG) All (iii) Need representation from CSS to retain a RD Director (Rupert to action) RP (iv) Metrics – agreed that the board are happy with the format (v) Andy Bowlen is trying to find a home for pharmacy immediately. Jo Martin is working to address this (Action) JM (vi) (Action) the risk register for pharmacy is a 20 and the board reviewed and firmly agrees that it should be at a 20 Pharmacy (vii) Backlog of pharmacy approvals are on the risk register. (Action) Sharon Barrett to find out if it is with the CRN. Will be on the next exec CRN board meeting. SB (viii) Training has gone live but no-one seems to know about it. (Action Mauro) Mauro Peretti 	

<p>2. Clinical Sciences update</p> <p>FS outlined the LSI from the Trust perspective. (Action - her presentation to be circulated).</p> <p>LSI is looking to appoint ‘fellows’ for the Artificial intelligence work by March 2018. Wish to focus on digital technology.</p> <p>(Action) Felicity to identify how the board can assist her with the LSI and the AI fellowships.</p>	<p>FS</p> <p>FS</p>
<p>3. Update on pharmacy</p> <p>Last minute apologies had been received from James Rickard.</p> <p>RP suggested that a meeting be held ASAP to discuss the challenges within pharmacy as it appeared that some senior members of CSS staff were being unhelpful. (Action) Jo Morgan to take this forward and a full update report to be made to the next JCRB.</p> <p>(Action) CC to move forward with the work to have the post award team invoice for pharmacy. Meet with Gerry, Anju and Col to take stock of the situation and move invoicing to JRMO.</p> <p>(Action) Paul Astin to give Col the company names that are keen for the invoicing to be done centrally</p>	<p>JMO</p> <p>CC</p> <p>PA</p>
<p>4. CTU Strategy</p> <p>Apologies from Sandra Eldridge (SE). JCRB was informed that, to fit with the ambition of senior staff within SMD and Barts Health, SE is leading a clinical trials strategy aiming in increase capacity, improve quality and ensure efficiency of clinical trials research. Given the loss of the Director of one of the two registered trials units this includes a review of how the units work together and one objective is to improve collaboration all round</p>	
<p>5. CRN</p> <p>Changes internally will be done to work more within study set up with the costing and contracts and governance teams.</p> <p>Data still not matching with ODP and EDGE and the team within the CRN are trying to see why this is. (Action) Double entry on both EDGE and ODP and for Nick Lemoine to take this forward again to avoid double entry – to feed back to the coordinating centre.</p> <p>(Action) For researchers to understand what these platforms are for (EDGE and ODP)so the research teams understand what is required of them</p>	<p>SB</p>
<p>6. CRC</p> <p>(Action) Jo Martin to have a discussion with Skanska, the charity and the Trust regarding the profit Skanska are making from the proposal.</p> <p>(Action) Paul Astin to brief Kieran McCafferty regarding the current situation with the CRC challenges. Rupert has assign Kieran to assist with the CRC strategy and challenges</p>	<p>JM</p> <p>PA</p>

<p>7. Imaging</p> <p>RCF is being used to fund an MRI assistant band 6 and a microbiology research assistant 0.5WTE band 7.</p> <p>(Action) AS to ensure Mays and the board understand what particular individuals cover.</p>	<p>AS</p>
<p>8. JRMO finance reporting</p> <p>Trust summary was not available but Coleen will forward to the board. (Action)</p> <p>(Action) The patient numbers to be added to the report. Need to look at the figures that are provided and what value it brings – to highlight and map the CSS work and specialties.</p>	<p>CC</p> <p>CC</p>
<p>9. JRMO reports</p> <p>MJ reported that that governance team keen to work better for the researchers and identify the impact of their work.</p>	
<p>10. Next meeting</p> <p>19th March, Whitechapel.</p>	

JMO
19th December 2017

NG
12th April 2018