## Maidstone and **MHS** Tunbridge Wells

Ref: FOI/GS/ID 5172

NHS Trust

Please reply to:

FOI Administrator Trust Management Maidstone Hospital Hermitage Lane Maidstone Kent ME16 9QQ Email: mtw-tr.foiadmin@nhs.net

18 December 2018

#### Freedom of Information Act 2000

I am writing in response to your request for information made under the Freedom of Information Act 2000 in relation to Freedom of Information requests.

You asked:

- 1. The number of requests made in each of the financial years 2015-16, 2016-17 and 2017-18;
- 2. The percentage of requests that have been accepted, rejected or held pending in each of the financial years 2015-16, 2016-17 and 2017-18;
- 3. A breakdown of the form, size and sector type of the entities that made the requests in each of the financial years 2015-16, 2016-17 and 2017-18; and
- 4. A breakdown of the form, size and sector type of the entities whose requests were successful in each of the financial years 2015-16, 2016-17 and 2017-18; and
- 5. A percentage of those successful requests which resulted in the trust, or its constituent hospitals, entering into a commercial or financial relationship with the requestor or its affiliates in each of the financial years 2015-16, 2016-17 and 2017-18.
- 6. Notwithstanding the above, can the trust confirm whether it, or one of its constituent hospitals, has entered into a commercial or financial relationship with any of the following entities as a result of the requests made in each of the financial years 2015-16, 2016-17 and 2017-18? Google; DeepMind; Sensyne Health; Benevolent AI; Orion Health; IBM;
- 7. Can the trust supply a copy of the trust's intellectual policy document/s, if any covering the period 2015-present?

Trust response:

1. Please see the following table.

Year	2015-2016	2016-2017	2017-2018
Received	586	709	676

2, 3, 4, 5, 6.

The information requested in the above numbered questions is not held in a reportable format. The Trust has estimated that it will cost more than the

appropriate limit to consider this part of your request. The appropriate limit is specified in regulations and represents the estimated cost of one person spending 3½ working days in determining whether the Trust holds the information, locating, retrieving and extracting the information. Under Section 12 of the Freedom of Information Act 2000 the Trust is not obliged to comply with this part of your request and we will not be processing this part of your request further.

7. Please note: This is our current policy. The policy is currently being revised.

#### MAIDSTONE AND TUNBRIDGE WELLS NHS TRUST

### Innovation and Intellectual Property Policy and Procedure

Requested/	
Required by:	Research and Clinical Audit Department, Clinical Governance
Main author:	Research and Clinical Audit Manager
Other contributors:	Research Governance Co-ordinator
Document lead:	Research and Clinical Audit Manager
Directorate:	Corporate
Specialty:	Clinical Governance
Supersedes:	Innovation and Intellectual Property Policy and Procedure (Version 3.0: June 2012)
Approved by:	Standards Committee (Chair's approval), 24 <sup>th</sup> September 2014
Ratified by:	Policy Ratification Committee, 1 <sup>st</sup> October 2014
Review date:	October 2016

### **Document history**

Requirement for document:	<ul> <li>To comply with national recommendation for good practice</li> <li>Department of Health Policy Framework for Managing Intellectual Property in the NHS (2002)</li> </ul>	
Cross references:		
Associated Documents:	Maidstone and Tunbridge Wells NHS Trust documents on the Trust intranet (Q-Pulse):	
	<ul> <li>Research and Development policies and procedures</li> </ul>	
	<ul> <li>Interventional Procedures, Policy and Procedure for Approval of New [RWF-OPPPCS-C-CG1]</li> </ul>	
	• Equality and diversity policy and procedure (incorporating Single Equality Scheme (SES)) [RWF-OPPPCS-NC-WF70]	

Version control:				
Issue:	Description of changes:	Date:		
1.0	First iteration of policy	March 2003		
2.0	Complete re-write in line with changes to the wider Clinical Governance and management structure within the Trust, particularly within the Research and Audit Department	April 2009		
3.0	Review and document update	June 2012		
4.0	Review and document update and reference new DH Research and Innovation Strategy	October 2014		

#### **Policy statement for**

## **Innovation and Intellectual Property Policy**

This policy / procedure outlines processes for the local management of Innovation Development and Intellectual Property (IP). This policy encourages and enables all staff to participate in generating new innovations and benefit from any resulting Intellectual Property Rights that contribute to the improvement of patient care. Any innovations and intellectual property will be protected and exploited appropriately.

Staff are expected to inform the Trust of any 'good idea', new invention or new technology that they have which may have the potential to be exploited commercially.

Trust employees who think they have produced a new innovation and/or can claim intellectual property rights should notify the Trust Research and Development Department (R&D) in the first instance. The Trust R&D Department will contact Innovations South East

(www.innovationsoutheast.nhs.uk) for support and advice. If the IP/innovation is thought to be commercially viable then the R&D Department will support the staff member in setting up an innovation budget and facilitate meetings with Innovations South East to fully advance the idea.

Where an innovation is proven, by research, to be beneficial to patient health, outcomes and/or service provision, but is not provided as standard care within the NHS or at Maidstone and Tunbridge Wells NHS Trust, the R&D Department will support staff to develop an application to the Trust New Interventional Procedures panel for local adoption if required

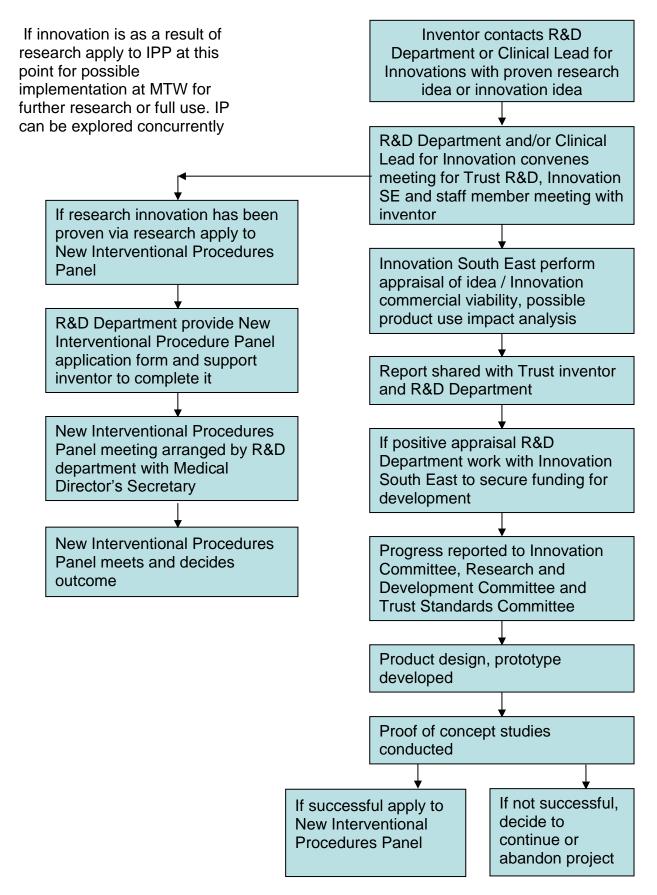
The Trust R&D Department will support staff in applying for, and arranging funding for innovation development via Innovations South East including product development, proof of concept studies and manufacture.

Compliance with this policy will be monitored by the Trust Innovations Committee reporting to the Trust Research and Development Committee then to Trust Standards Committee.

## Innovation and Intellectual Property Procedure

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#### Innovation and intellectual property application process



#### **1.0** Introduction and scope

This policy/procedure outlines the Trust process for the local management of new innovation and intellectual property (IP). It encourages and enables all staff to participate in generating new ways of working to improve patient care. Any innovation and resulting intellectual property will be protected and exploited appropriately and according to the Department of Health Policy on the Management of Intellectual Property (2002).

#### Scope

Staff covered by the Intellectual Property Policy and Procedure:

- All staff with Trust contracts of employment, whether employed in clinical, managerial, administrative or support roles.
- 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); unless the contract of employment between the Trust and that party assigns ownership of intellectual property to that party.
- Staff who have a part-time Trust contract who are self-employed, or employed part-time elsewhere.
- Trainees and students hosted by the Trust for training purposes are subject to the management arrangements for intellectual property of Trust staff (see below).
- Staff who generate intellectual property outside normal working hours and/or away from their place of work where the intellectual property relates to their normal course of duties.
- Where Trust staff are seconded to another organisation or are working in partnership with other organisations, the Trust will agree an arrangement for sharing intellectual property and revenue.
- Independent Providers of NHS Services.
- Individuals issued with a Licence to Operate.

#### Trainees and students

Students, who are not employees of the Trust, are not subject to the provisions of the 1977 Patent Act. However, students engaging in research for the Trust will sign a confidentiality agreement that will also require the student to disclose details of the invention and assign the rights to the Trust on request. In consideration of all issues relating to IP the student is treated on a par with Trust staff. Other researchers at the Trust who are neither staff nor students e.g. Senior Research Fellows and other emeritus staff will be brought within the scope of this agreement.

#### 2.0 Definitions

• Innovation: Innovation may be a novel treatment, a new diagnostic, a device, a drug, new software, training materials, treatment protocols or a

new management system. All innovation will be of benefit to patients and/or staff in the NHS.

• Intellectual Property (IP): IP is used to describe the output of all creative or innovative human activity, which might be used for commercial purposes. The inventor holds the intellectual property rights even if they are developed as part of the individual's contract of employment unless the employer (the Trust) has specifically reserved the rights. It is important that the Trust owns the intellectual property it generates to maintain the ability to exploit the invention and any financial return.

Maidstone and Tunbridge Wells NHS Trust reserves right of ownership of all intellectual property created by an employee if:

- a) it arises from them carrying out their normal duties or
- b) is directly related to their duties or
- c) it arises from research and development activity supported by the Trust.

The Trust does not reserve right of ownership of IP created by an employee for which the employee can demonstrate:

- a) it has been created in their own time, and
- b) is unrelated to their normal duties, and
- c) has not been supported by the Trust in any way.
- Department of Health Framework for Managing Intellectual Property in the NHS: The NHS recognises that staff, from any discipline or activity, can generate new ideas, innovative solutions to problems, inventions or just better ways of working which might, if given the opportunity, lead to improvements in the running of hospitals or the delivery of healthcare. To ensure that this potential is given the best chance of being recognised, the Department of Health produced a framework for the management of IP which is supported by changes in the law, allowing NHS organisations to take appropriate steps to ensure new services, expertise and knowledge base are put to maximum use.
- Intellectual property exploitation: Realising the benefit of a new innovation can be anything from dissemination throughout an organisation, or the NHS, to commercial exploitation in order to access wider markets and other healthcare systems to spread good practice and encourage remuneration.
- Intellectual property arising from research and development funded by the NHS: In order to comply with the DH Framework for Managing Intellectual Property in the NHS, it is essential that all members of Trust staff, undertaking research, comply fully with both national and Trust Research Governance regulations and submit all research proposals to the Trust Research and Clinical Audit Department. Researchers must also ensure compliance with the 'Research Governance Framework for Health and Social Care'. This states that Researchers must consider the appropriate exploitation of intellectual property rights at protocol writing stage. (Please see **Appendix 4**)

#### 3.0 Duties

#### 3.1 Trust staff

All Trust staff are expected to inform the Trust of any 'good idea', invention or new technology that is related to their employment and may have the potential to be exploited commercially by the employing organisation.

#### 3.2 The Research and Clinical Audit Manager

The Research and Clinical Audit Manager is responsible for ensuring all potential intellectual property and new innovations development is forwarded to Innovations South East for full review. The Research and Clinical Audit Manager is also responsible for ensuring the R&D Department provide support to staff for innovation application funding, arranging Trust innovation budgets and supporting applications to the New Interventional Procedures panel.

#### 3.2 Trust Clinical Lead for Research and Development

The Trust Clinical Lead for Research and Development will oversee the new innovations resulting from Research undertaken by Trust staff and staff as defined in the 'Scope' section of this policy. Working with the R&D Department, the Trust Clinical Lead for Research and Development will support researchers throughout the innovation and IP process and will liaise with the Trust Clinical Lead for Innovation to ensure all avenues for innovation development following research are explored.

#### 3.3 Trust Clinical Lead for Innovation

The Trust Clinical Lead for Innovation will support all innovation and intellectual property exploitation and provide encouragement and guidance to clinical colleagues in particular who have developed new ways of working through their clinical work. Chairing the Trust Innovation Committee, the Trust Clinical Lead for Innovation will have an overview of all innovations at every stage of their development.

#### 3.4 Medical Director

The Trust Medical Director is responsible for chairing the Trust New Interventional Procedures Panel and for ensuring new innovations are fully costed, safe and proven before being undertaken at Maidstone and Tunbridge Wells NHS Trust.

#### 4.0 Training / competency requirements

Advice on all aspects of innovation development and intellectual property can be sought from the Trust Research and Clinical Audit Department and from Innovations South East (www.innovationssoutheast.nhs.uk).

#### 5.0 Procedure

## 5.1 Process of new innovation development/exploiting intellectual property

• It is not always essential that a new innovation be fully developed before it can be commercially exploited. However, it **is** essential that all potential applications are identified and the Research and Development

Department informed in the first instance, regardless of whether the new innovation resulted from research.

- The Trust will not seek to cause any unnecessary delay in the publication of an article or publication relating to the work carried out, but the employee should not publish any details of the invention before taking advice, as once inventions or research results are publicised in any form, legal protection cannot be obtained. The employee should seek approval from the Medical Director to submit for publication and ensure that the Trust's contribution is acknowledged.
- The following detail will be required by the Research and Clinical Audit Manager in the first instance:
  - 1. Description of invention.
  - 2. Names of inventors.
  - 3. Relative contributions of inventors.
  - 4. Other interested parties.
  - 5. Whether or not there has been any public disclosure of the invention.
- The Research and Clinical Audit Manager will meet with the individual(s) concerned and a representative from Innovations South East to gain an understanding of the innovation/IP potential. It is at this first stage that a decision is taken as to whether the idea can be further explored by Innovations South East, if further local development is required or if the innovation is ready for application to the Trust New Interventional Procedures Panel.
- Once an understanding has been gained the representative from Innovations South East will carry out further development work, whatever the status of the new product or process. With this in mind it is important that researchers keep the Trust informed of progress with emerging technologies that may impact on the new innovation being investigated.
- Work undertaken at this stage by Innovations South East includes assessment of idea (is it original?), testing (will it work in practice?), market analysis, funding (what is the likely project value and cost?), what type of partnerships are required, patent benefit and clinical impact.
- Innovations South East will keep all confidential information confidential unless it is given consent to the contrary.
- The representative from Innovations South East will provide the Trust with a full report as to the value of the innovation/IP and details of the next steps to be taken to secure funding for business case development and legal support for any resulting IP.

#### 5.2 Innovation and intellectual property finance

 Ideas arising out of routine work as well as research may result in commercially valuable IP which could lead to improvements in patient care through new innovations and the possibility of significant financial benefits to the inventor and the NHS.

- Where a number of Trusts and organisations are collaborating as part of a research programme, a common agreement on the handling of IP may exist as part of the collaborative agreement.
- Any revenue generated through successful exploitation of IP will be shared with the members of staff responsible for the innovation and the Trust if a shared agreement with the organisation is in place.
- Where activity identified in this policy/procedure is undertaken, and external income is available, agreement should be reached in advance as to the ownership of the findings and the apportionment of any income from the work. The Trust Accountant for Research and the Research and Clinical Audit Manager can advise on a case by case basis.
- All staff that are successful in gaining support from Innovations South East will be given a dedicated innovation Trust budget into which will go any funding for the activity and from which costs will be paid appropriately and under the supervision of the Trust Accountant for Research and the Trust Research and Clinical Audit Manager.
- As a general rule, income from innovations will be split 40% to the inventor, 30% to the directorate, 20% to R&D and 10% to the innovations budget to invest in funding future innovations. This arrangement is just a guide as distribution of income will be dependent on parties involved and ownership of IP. Decisions on income split will be made by parties involved based on advice from the Trust finance department and Innovations South East

# 5.3 Reporting and sharing progress with innovations and intellectual property

- Awareness of innovation and IP opportunities are available via Trust research literature, in research documentation produced for each Chief and Principal Investigator at the time of research approval and via the Trust intranet for all Trust staff.
- Innovations South East representatives will attend the Research and Development Committee on a quarterly basis to update the Trust on progress with innovations and intellectual property rights and send the Trust Chief Executive a quarterly report of progress.
- Innovations South East representatives will meet with Trust staff on an ad-hoc basis to review progress with innovations and to provide training and learning events throughout the year.

#### 6.0 New Interventional Procedures Panel

Staff are encouraged and enabled to introduce new interventions and innovations to MTW as part of a commitment to delivering high standards of patient care.

Applicants can obtain a New Interventional Procedures template to complete from the Trust R&D Department or via the Trust Intranet. Staff are strongly advised to request support from R&D staff when completing the template to ensure all relevant and necessary information is provided

for the panel. Missing or inaccurate data will mean the panel refuse to review the case and request re-submission.

The Trust New Interventional Procedures Panel meets on an ad-hoc basis to review applications from staff to introduce a new innovative procedure or technique (non medicinal) that has been proven by research to benefit patient care. Examples of new interventions can be, but is not limited to:

- New surgical interventions realised from own account research trials
- New treatments approved for use by NICE
- New interventions that require a piece of equipment not currently in use in the NHS and or the UK

For further details of the New Interventional Procedures Panel, please consult the Trust *Policy and Procedure* for *the Approval of New Interventional Procedures (RWF-OPPCS-C-CG1).* 

#### 7.0 Monitoring and audit

Compliance with this policy / procedure will be monitored by the Research and Clinical Audit Manager reporting to the Research and Development Committee and will be informed by the Trust Innovation Committee. Reports will be presented to the Trust Standards Committee via the Research and Development Report. Reports will contain the following information:

- Number and type of draft proposals (where not commercially sensitive)
- Progress with each innovation
- Commercial companies working with the trust
- Types of staff involved in innovation/IP development
- New interventional procedures/innovations developed and in use
- Financial information re pay and income from each innovation/IP

#### Process requirements

#### **1.0** Implementation and awareness

- 1.1. Once approved the document lead or author will submit this policy/procedural document to the Clinical Governance Assistant who will activate it on the Trust approved document management database on the intranet, under 'Trust polices, procedures and leaflets'.
- 1.2. A monthly publications table is produced by the Clinical Governance Assistant which is published on the Trust intranet under "Policies"; notification of the posting is included on the intranet "News Feed" and in the Chief Executive's newsletter.
- 1.3. On reading of the news feed notification all managers should ensure that their staff members are aware of the new publications.
- 1.4. This policy / procedure will be bought to the attention of all key staff detailed in **Appendix Two** via the email system of dissemination. It will also be presented to members of the Standards Committee.
- 1.5. The policy / procedure will be held centrally on the Trust intranet (Q-Pulse) system, be available from the Research and Clinical Audit Department and be linked to the research and clinical audit pages of the Intranet.

#### 2.0 Review

This policy / procedure will be reviewed in line with changes to wider Trust processes as appropriate. A full review will occur every two years.

#### 3.0 Archiving

The Trust intranet retains all superseded files in an archive directory in order to maintain document history.

#### **APPENDIX TWO**

CONSULTATION ON: Innovation and Intellectual Property Policy and Procedure

**Consultation process** – Use this form to ensure your consultation has been adequate for the purpose.

Please return comments to: Research and Clinical Audit Manager

By date: 16<sup>th</sup> September 2014

Name: List key staff appropriate for the	Date	Date reply	Modification	Modification
document under consultation. Select	sent	received	suggested?	made?
from the following:			Y/N	Y/N
Chief Executive and Directors	02.09.14	05.09.2014	Y	Y
Deputy Medical Director	02.09.14			
AD of Governance, Quality and Patient	02.09.14	12.09.2014	N	N
Safety				
Clinical Directors	02.09.14			
Clinical Lead for Research	02.09.14			
Clinical Lead for Innovation	02.09.14			
Trust Risk Manager	02.09.14	01.10.14	Y	Y
Patient Safety and Risk Manager	02.09.14			
Clinical Governance Assistant	02.09.14	03.09.14	Y	Y
Complaints Manager	02.09.14	04.09.14	Y	Y
The role of those staff being consulted u				
comments with all staff within their sphere development of the policy.	e of respon	sidility who would	d be able to contribi	ute to the

#### **APPENDIX THREE**

#### Equality Impact Assessment

In line with race, disability and gender equalities legislation, public bodies like MTW are required to assess and consult on how their policies and practices affect different groups, and to monitor any possible negative impact on equality. The completion of the following Equality Impact Assessment grid is therefore mandatory and should be undertaken as part of the policy development and approval process. Please consult the Equality and Human Rights Policy on the Trust intranet, for details on how to complete the grid. Please note that completion is mandatory for all policy development exercises. A copy of each Equality Impact Assessment must also be placed on the Trust's intranet.

Title of Policy or Practice         Innovation and Intellectual Property Policy           Procedure         Procedure		
What are the aims of the policy or practice?	<ul> <li>Increase awareness and understanding of IP issues</li> </ul>	
	<ul> <li>Encourage staff innovation;</li> </ul>	
	<ul> <li>Encourage staff innovation,</li> <li>Encourage staff innovation by with regard to</li> </ul>	
	<ul> <li>Encourage start innovation by with regard to research and publication;</li> </ul>	
	<ul> <li>Maximise the sharing of good practice and</li> </ul>	
	appropriate exploitation of Trust IP	
Identify the data and research used to	MTW Equality and diversity policy and procedure	
assist the analysis and assessment	(incorporating Single Equality Scheme (SES))	
Analyse and assess the likely impact on	Is there an adverse impact or potential	
equality or potential discrimination with	discrimination (yes/no).	
each of the following groups.	If yes give details.	
Males or Females	NO	
People of different ages	NO	
People of different ethnic groups	NO	
People of different religious beliefs	NO	
People who do not speak English as a first	Translations can be arranged on request	
language		
People who have a physical disability	NO	
People who have a mental disability	NO	
Women who are pregnant or on maternity	NO	
leave		
Single parent families	NO	
People with different sexual orientations	NO	
People with different work patterns (part	Special arrangements for staff without access to	
time, full time, job share, short term	the Q-Pulse – access via Trust R&D Department	
contractors, employed, unemployed)		
People in deprived areas and people from	NO	
different socio-economic groups Asylum seekers and refugees	NO	
V	NO	
Prisoners and people confined to closed institutions, community offenders	NO	
Carers	ΝΟ	
If you identified potential discrimination	NO YES	
is it minimal and justifiable and therefore	IES	
does not require a stage 2 assessment?		
When will you monitor and review your	With review of this policy / procedure	
EqIA?		
Where do you plan to publish the results	With this policy / procedure	
of your Equality Impact Assessment?		

#### FURTHER APPENDICES

The following appendices are published as related links to the main policy /procedure on the Trust approved document management database on the intranet (Trust policies, procedures and leaflets):

No.	Title	Unique ID
4	Policy Framework for Managing Intellectual Property in the NHS (Health Service Circular HSC 1998/106)	RWF-OWP-APP632
5	Categories of Intellectual Property	RWF-OWP-APP633