

Research Strategy

Item 20f

Governing Body meeting

5 September 2019

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| Author(s) | Dr Michelle Horspool, Deputy Director: Research |
| Sponsor Director | Mandy Philbin, Chief Nurse and Executive Lead for Research |
| Purpose of Paper | |
| To inform the Governing Body of the development of Sheffield CCG Research Strategy 2019-21 | |
| Key Issues | |
| <p>The CCG has continued to develop a research presence within the city and regionally – building collaborations for research development and delivery</p> <p>Research Strategy Group has been established to oversee the delivery of a 3-year Research Strategy</p> <p>We are expecting Research Capability Funding allocation from NIHR for the next four years – this will support delivery of the research strategy with focus on building research capacity</p> | |
| Is your report for Approval / Consideration / Noting | |
| For noting | |
| Recommendations / Action Required by Governing Body | |
| The Governing Body is asked to note the Research Strategy. | |
| What assurance does this report provide to the Governing Body in relation to Governing Body Assurance Framework (GBAF) objectives? | |
| <p>Objective 1 To improve patient experience and access to care</p> <p>Objective 2 To improve the quality and equality of healthcare in Sheffield</p> <p>Objective 3 To work with Sheffield City Council and other organisations to reduce health inequalities in Sheffield</p> <p>Objective 4 To ensure there is a sustainable, affordable healthcare system in Sheffield</p> <p>Objective 5 Organisational development to ensure CCG meets organisational health and capability requirements.</p> | |
| Are there any Resource Implications (including Financial, Staffing etc)? | |
| Financial risk given non-recurrent nature of research funding. | |

Have you carried out an Equality Impact Assessment and is it attached?

No direct impact although individual Research projects may impact depending on nature of project

Have you involved patients, carers and the public in the preparation of the report?

No

Research Strategy

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5 September 2019

1. Introduction / Background

- 1.1.** Research is a core function of health and social care and is essential for our wellbeing and the care we receive. Clinical Commissioning Groups have a duty to promote research and enable participation of NHS organisations and patients into research. NHS England's research plan emphasizes the importance of research in providing evidence for commissioners to aid in decision making and commissioning health services.
- 1.2.** Research is vital in providing the evidence we need to transform services and improve outcomes. The CQC have also included research activity within its well led domain thus there is a requirement for all health and social care organisations to actively raise awareness and provide opportunities to engage in research and to facilitate improvement.
- 1.3.** Sheffield CCG continues to be the most research active CCG across South Yorkshire and Bassetlaw (SY&B) in terms of research delivery (recruitment and engagement) and the only CCG in the SY&B region to have an active research function.
- 1.4.** Sheffield Health & Social Care NHS Foundation Trust, Research Development Unit are commissioned to support Sheffield CCG with research governance arrangements (this has also included supporting research host and sponsor activity) and oversee research development activities through the Deputy Director for Research post.

2. Identifying Research Priorities for Sheffield

- 2.1.** The development of a research strategy and action plan for Sheffield CCG will identify research priorities for the next 3-years (2019-2021).
- 2.2.** The focus will be on increasing capacity and capability, embedding research within core business and to ensure we offer research opportunities, across all sectors of primary and community care, to enable Sheffield patients to benefit from research and innovation.
- 2.3.** A research strategy has been developed which identifies research priorities for the next 3-years is focusing on the following themes:

- Research as Core Business
- Maximising research income
- Increasing participation in research
- Increasing capacity and capability
- Maintaining excellence in research standards and management
- Building relationships for Applied research
- Knowledge Mobilisation

2.4. NIHR Research Capability Funding could be used to support the delivery of the Strategy to maximise research development and delivery.

3. Research Strategy Group

3.1. A Research Strategy Group has been established (first meeting December 2018) to enable the development and delivery of the research strategy based on identified research priorities.

3.2. Membership includes members of the CCG Executive and Senior leads to enable priorities to be identified alongside commissioning intentions, so that it fits the vision of the CCG.

3.3. The Research Strategy Group will report annually (end of year) to the Governance Sub Committee as part of the overall research report.

4. Action / Recommendations for Governing Body

4.1 The Governing Body is asked to note the Research Strategy 2019-21

Paper prepared by: Dr Michelle Horspool, Deputy Director: Research

On behalf of: Mandy Philbin, Chief Nurse and Executive Lead for Research

27 August 2019

NHS Sheffield Clinical Commissioning Group

Research Strategy

2019 – 2021

Version control

| Version | Date | Author | Status | Comment |
|---------|----------|-------------------------|----------------------------|---|
| v1 | 12.03.19 | M Horspool | Strategy development draft | On-going modifications throughout whilst developing the draft document |
| v1.2 | 15.03.19 | | | |
| v1.3 | 20.03.19 | | | |
| v2 | 11.04.19 | M Horspool & P Magirr | draft | Added section: Strategic direction for research (major) |
| v2.1 | 17.04.19 | M Horspool | draft | Added bullet point in Capacity/Capability & Knowledge mobilisation sections following comments in Research Strategy Group meeting (minor) |
| v2.2 | 30.04.19 | M Horspool / John Soady | draft | Added bullet point to Capacity and capability evidence: use of routine data in research development/proposals (minor) |
| v2.3 | 01.05.19 | M Horspool | Final | Add Research vision No further comments – final version v2.3 |
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Vision for Research in Sheffield CCG

To promote an active research culture, build our research capacity and capability and strengthen our research collaborations to improve health outcomes and reduce health inequalities.

Introduction

This document will outline the key priorities for research across 2019-2021 and provide a framework for research delivery over the next 3-years. The focus will be on embedding research within core business, increasing capacity and capability and to ensure we offer research opportunities, across all sectors of primary and community care, to enable Sheffield patients to benefit from research and innovation.

Research is a core function of health and social care and is essential for our wellbeing and the care we receive¹. Clinical Commissioning Groups have a duty to promote research and enable participation of NHS organisations and patients into research^{2,3}. NHS England's research plan emphasizes the importance of research in providing evidence for commissioners to aid in decision making and commissioning health services.⁴ Research is vital in providing the evidence we need to transform services and improve outcomes⁵. The CQC have also included research activity within its well led domain thus there is a requirement for all health and social care organisations to actively raise awareness and provide opportunities to engage in research and to facilitate improvement .

Benefits of Research

Evidence shows us that research active organisations are safer, improves quality of care, health outcomes^{6,7} and healthcare processes⁶. Improvements in quality, innovation and performance can all be initiated or significantly boosted by using or engaging in research⁸. Patients in research-active institutions have better outcomes than those in other institutions⁹ and benefit from access to clinical trials including cutting edge treatments and interventions whilst the NHS benefits from new medicines, technologies and processes. Sheffield CCG wants to be able to offer

research and innovation opportunities to improve health and wellbeing outcomes for patients and staff.

Strategic Direction for Research

Commissioning strategies for research will of necessity take account of the developing structures and funding flows introduced within the NHS long term plan and other relevant DHSC policy. This may for example include changes to the scale of research governance and management from locally delivered services to a larger footprint mapping onto Integrated Care Systems. Thus enabling greater efficiencies across the system and better focus on the use of evidence to improve health outcomes and reduce health inequalities.

Research as Core Business

SCCG will promote a culture of research whereby it recognises the importance of evidence in improving clinical and health related outcomes for our patients. Putting research evidence at the heart of commissioning and decision making, ensuring outcomes are identified to enable objective measurement of impact on investment and quality improvement. We will recognise where research can support and impact the CCGs ambitions and engage with stakeholders to build research collaborations and maximise opportunities for development of research and innovation. We will raise awareness of opportunities for our patients and healthcare professionals to participate in research and innovation.



We will do this by focusing on the following research themes and areas of development to provide strategic direction for research development and innovation;

- Increasing participation in research
- Increasing capacity and capability
- Maximising research income
- Maintaining excellence in research standards and management
- Building relationships for Applied research
- Knowledge Mobilisation

Increasing participation in research

Support the delivery of portfolio research in primary and community care offering research and innovation opportunities for our patients, staff and public.

Increasing capacity and capability

Identify opportunities for engagement in research activities, training and development across all sectors of primary and community care workforce. Raising awareness of research through effective communication and making use of routine data to identify areas for research development.

Maximising research income

Invest in research development and increase the number of NIHR grant applications where SCCG is the host organisation to enable a virtuous cycle of research income

Excellence in research standards

Maintain progress towards achieving NIHR metrics, in relation to primary care, to monitor research activity and targets against delivery and recruitment to studies

Building Relationships for Applied Research

Seek out opportunities for engagement and collaborative working; building strong academic and network partnerships. Focus on the development and implementation of research and innovations that support our strategic objectives and commissioning priorities.

Knowledge Mobilisation

Making use of research to encourage evidence informed commissioning and decision making: working with translational Networks to support implementation of research and innovation into practice.

Delivery of the Research Strategy

A Research Strategy Group has been established to oversee the development and delivery of a research strategy based on identified research priorities. To raise the profile of research within the organisation to promote a culture of evidence based decision making. The focus will be on growth by increasing capacity and capability to develop and deliver research including grant capture, development of research skills and evidence based practice.

Membership will include members of the CCG Executive and Senior leads to enable priorities to be identified alongside commissioning intentions, so that it fits the vision of the CCG. Stakeholders from academic institutions and research Networks will be included to build strong strategic partnerships for research development.

Delivery of the strategy will be measured through identified objectives and outcomes based on the research priorities. Annual report of performance will be submitted to the Governance Sub Committee to assure Sheffield CCG on the progress of implementation.

Research Priorities 2019 – 2021

Activity and Evidence

1. Increase participation in Research (Commercial and Non commercial)

Activity

- Work with partners to develop and attract NIHR portfolio studies to Sheffield.
- Maintain and support Sheffield research active general practices and identify any new research sites across all primary care sectors
- Work with Sheffield Cluster leads and Clinical Research Network to ensure Sheffield has adequate numbers of studies to deliver recruitment requirements
- Maximise opportunities for Sheffield populations to benefit from new innovations and interventions

Evidence

- The number of portfolio studies opening
- The number of patients recruited into portfolio research
- Horizon scanning for suitable portfolio studies to bring to Sheffield
- Monitor level of funding acquired to support delivery of research through Cluster funded practices and other funded activity through the CRN
- Engagement with AHSN Innovation Lead to identify new innovation.

2. Increase Research Capacity and Capability

Activity

- Consider mechanisms for development/delivery of research within all professions across primary care

Evidence

- Increased numbers of portfolio studies opening in Sheffield

(specific interest in development of pharmacy research)

- Establish Research Strategy meetings to raise awareness of research, promote research opportunities and encourage joint working
- Raise CCG research profile with local and national stakeholders to ensure Sheffield CCG is represented as an active research partner
- Identify and promote any opportunities for primary care research training and workforce development; including Fellowships
- Work with Patient Experience and Engagement leads to ensure that patients are given opportunities to participate in research
- Identify opportunities to explore the use of routine clinical data for research purposes
- Numbers of health professionals involved in research development / delivery
- Research strategy meeting minutes
- Attendance local at events and forums to raise awareness of research opportunities
- Active engagement with NIHR, Academic Institutions and other support/research and innovation networks
- Effective communication strategies for dissemination of research opportunities
- Promote patient engagement and support the CRN Patient Research Ambassadors scheme
- Links into Applied Research Collaboration themes
- Use of routine datasets within research development / proposals.

3. Maximise Income Generation

Activity

- Support research development to maximise applications to NIHR and other portfolio eligible funding streams which

Evidence

- Monitor the number of grant submissions to NIHR where SCCG is lead organisation

- would be hosted by the CCG
- Identify collaborations for research development that fit with CCG ambitions and priorities
- Investment of NIHR Research Capability Funding that supports and maintains a virtual cycle of research income.
- Maximise opportunities for research collaborations and identify appropriate funding calls

- The number of research collaborations with primary care staff as co-applicants
- Monitor the success rate of research submissions
- Numbers of development projects that have been funded through RCF
- Identification of commissioned calls

4. Maintain Excellence in Research Standards

Activity

- Work with the Research Development Unit at Sheffield Health and Social Care NHS Foundation Trust to ensure targets are met in line with NIHR guidance for primary care
- Ensure systems are in place to enable studies to recruit to time and target and that any NHS authorisations required for study delivery are obtained.
- Ensure there is support for hosted grants to enable efficient set up, delivery and management oversight of

Evidence

- Numbers of studies open within sheffield primary and community care
- Number of general practices delivering NIHR portfolio studies
- Use of EDGE for reporting and monitoring research activity in primary care
- Efficient set up of successful grant applications including contracting, finance and governance oversight
- Monitor delivery of studies to time and target

studies.

- Support local stakeholders to facilitate research and navigate through NHS requirements for research delivery

- Commissioning of support systems to facilitate research management and governance

5. Collaborations for Applied Research

Activity

- Maximise relationships across the Integrated Care System (ICS) to identify priorities for research across the locality.
- Maintain and develop strong working relationships with HEIs for joint working and research collaborations
- Work with the NIHR Clinical Research Networks (CRN), Applied Research Collaborations (ARC), Academic Health Science Networks (AHSN), ICS Innovation Hub to maximise opportunities for development and delivery of applied research and innovation.
- Engage with local Universities, and other stakeholders, to promote CCG research interests and priority areas for research
- Develop links with community and provider services

Evidence

- Proactive engagement with stakeholders and attendance at partnership meetings
- Strengthen and identify networking opportunities and areas for research collaboration
- Joint working and co-applicants on research grants
- Link to Innovation Hub for identification of innovation opportunities

6. Knowledge Mobilisation

Activity

- Contribute to Sheffield's Place Plan where appropriate to identify Research and Innovation opportunities
- Ensure that opportunities for research outcomes and impact are maximised
- Champion evidence based commissioning and ensure this is at the heart of commissioning decisions
- Develop a framework for knowledge mobilisation / Health Impact Assessment to assist commissioners in using research to inform decision making.

Evidence

- Use of website and practice bulletins to disseminate
- Use of Quality Equality Impact Assessment (QEIA) tool to measure quality and impact assessment
- Publications, presentations, abstracts

References

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