

St George's Healthcare NHS Trust: the next decade

Research Strategy 2013 – 2018



July 2013

Page intentionally left blank

Contents

Introduction	4
The drivers for change	5
Where we are currently with research	7
Where we want research to be	10
Components of the Research Strategy	11
1. Develop a culture that places research at the core of St George's work	12
2. Maximise the benefits of our partnership with St George's, University of London	13
3. Partner with an Academic Health Sciences Centre at the heart of a vibrant South London Academic Health Science Network	14
4. Increase the success of research funding from grant giving bodies	15
5. Become a preferred partner with industry for pharmaceutical research and medical innovation	16
6. Establish a robust infrastructure to support research	17
Implementation	18

Introduction

Overview

St. George's Healthcare NHS Trust provides a wide variety of specialist and community hospital based services. The Trust provides more specialist tertiary services on a single site than any other London Hospital including the regional service for acute stroke, the regional major trauma centre, the Wolfson Neurorehabilitation Centre and Wandsworth Community Services.

St. George's Healthcare NHS Trust (St George's) and St. George's, University of London (SGUL) are co-located in Tooting, South-West London. The organisations have a number of staff with joint substantive or honorary contracts. Research success is critical for both organisations. Collaboration between basic scientists in SGUL and clinicians provides an ideal location for translating bench science to clinical studies and patient care.

Research is an important part of the Trust's tripartite mission as delivery of the highest possible care and outcomes for people relies upon continuous research and implementation of best practice. Research active organisations are able to offer leading edge care and also attract the highest calibre staff.

The major research areas for the Trust include stroke/neuroscience, oncology, cardiology, neonatal/paediatric medicine, GUM/HIV, and infection. However, there is research activity throughout the breadth of the Trust's services. St. George's is involved as sponsor and/or host site in more than 200 new studies each year, of which approximately 25% are commercial.

The purpose of this strategy is to set out the key aspirations for the Trust over the forthcoming 5 years in relation to research. We want to ensure that we are maximising the opportunities for patients to benefit from new advances and evidence in medicine and health. In order to achieve this we need to increase the volume of research within the Trust and increase the speed of translation into clinical practice. We also want to be recognised as a leading research based healthcare organisation, with increased income from research.

Process to develop the strategy

Research has a key role in driving the delivery of high quality innovative clinical services and is a key part of the Trust's refreshed mission and vision (2012). Considerable work was undertaken to understand the current barriers and facilitators to research in the Trust and from this the key research strategic aims emerged, which support delivery of the Trust's mission and vision.

Implementation

A key thrust of this Research Strategy is to increase the amount of research across the Trust. We will need to harness the enthusiasm and capacity of individuals to do this, supported by a strong infrastructure. Annual plans will be developed at Trust and Divisional level and these will be overseen by a newly established Research Strategy Committee with regular reports on progress to the Trust Board.


The drivers for change

There are a number of drivers for change, some internal and some external, and these have influenced the development of this Research Strategy. Key drivers for change are discussed in turn below:

1. The importance the Trust places on research

In refreshing the Trust's Strategy during 2012, the importance of research and our tripartite mission was emphasised. This is shown in Figure 1, below.

Figure 1 : The Trust's mission, vision and values

Mission Our purpose	Mission To provide excellent clinical care, education and research to improve the health of the populations we serve
Vision What we want to be	Vision An excellent integrated care provider and a comprehensive specialist centre for south west London, Surrey and beyond with thriving programmes of education and research
Values These guide the way in which we work and the behaviours we would expect to see	Values <ul style="list-style-type: none"> ◆ kind ◆ excellent ◆ respectful ◆ responsible 

The vision for 2022 emphasises the importance of research and education to support innovation and the delivery of the highest quality clinical services. Evidence shows that research active organisations attract the highest calibre clinicians who provide the highest quality care and outcomes for patients. Therefore research plays an important role in enhancing the reputation of the Trust, which is important at a time of potential considerable change in the configuration of services in South West London. Also this ensures that GPs and patients chose to be cared for by staff at St George's.

Whilst more detail is set out in the **Trust Strategy 2012-2022**, the following extract is worth noting:

'Thriving research, innovation and education driving improvements in clinical care

By 2022 the Trust will:

- *Be recognised as an organisation with research at its core*
- *With St George's University of London be a partner of the King's Health Partners Academic Health Sciences Centre (AHSC)*
- *With St George's University of London (SGUL) be a proactive member of the South London Academic Health Science Network (AHSN) ensuring the dissemination of innovation and best practice across health and social care*
- *Have education programmes that meet the changing clinical needs.'*

This strategy sets out what we need to do in relation to further strengthening research within the Trust.

The drivers for change

2. There is a national drive to raise levels of research and innovation

There is a national drive to ensure that searching for and applying innovative approaches to delivering healthcare is an integral part of the way the NHS does business. Doing this consistently and comprehensively will dramatically improve the quality of care and services for patients. It will help deliver the productivity savings needed nationally to meet the growing demand for service, and it will also support wealth creation in the UK. NHS success in adopting innovation helps support growth in the life sciences industries. That in turn enables these industries to invest in developing the technology and services the NHS needs for its development. The *NHS Innovation, Health and Wealth* report sets out the actions the NHS must now take to make innovation and its spread core business.

Academic Health Science Centres (AHSCs) have been successful at developing partnerships within their local areas and are distinguished by their world class research capability, clinical excellence, strong collaborative governance, competitive approach to the management of intellectual property, strong track record of productive research collaborations with the life sciences industry and emerging clinical data informatics platforms.

In order to support AHSCs and build on their models of accelerating adoption and diffusion, the Department of Health has recently designated a number of Academic Health Science Networks (AHSNs) across the country. The AHSNs present a unique opportunity to align education, clinical research, informatics, innovation, training and education and healthcare delivery. Their goal is to improve patient and

population health outcomes by translating research into practice and developing and implementing integrated health care services. Working with AHSCs, they will identify high impact innovations and spread their use at pace and scale throughout their networks.

St George's is responding to this by being an active member of the South London AHSN and developing a Strategic Alliance with King's Health Partners AHSC.

3. Changes to the organisation and funding of National Institute for Health Research (NIHR) activity

The NIHR comprised both local networks (Comprehensive Local Research Networks (CLRNs)) and specialty specific networks, but these are all now being amalgamated into CLRNs. The funding implications of this are as yet unknown.

4. The public are keen to be a part of research

Giving patients access to clinical trials, if they are suitable for them, is in the NHS constitution. Patients have the right to be involved in research, both to take part in a clinical study or trial and to get actively involved and have a say in how clinical research is done.

According to an IPSOS MORI poll in June 2011:

- 97% of the public believe it is important for the NHS to support research into new treatments
- 93% want their local NHS to be encouraged or required to support research
- 72% would like to be offered opportunities to be involved in trials of new medicines or treatments, if they suffered from a health condition that affects their day-to-day life.

Where we are currently with research

Research Activity Overview

St George's intends to build on the research achievements of the past few years which include:

- Improved governance structures and significant reductions in approval times for research studies
- Establishment of a Clinical Research Facility (CRF)
- Increasing National Institute for Health Research (NIHR) accruals
- International reputation in a number of research areas (e.g. paediatric infectious diseases)
- South East Stroke Research Network
- Substantial collaborations with the London Medicines for Children Research Network, and the Primary Care Research Network.

Research Funding and Income

St George's currently receives the majority of research income from clinical trials activity involving NHS patients funded by commercial clients or trials funded by charities with additional funds allocated through the National Institute for Health Research (NIHR) for research support costs.

NHS funding comes from the NIHR through the South London Comprehensive Local Research Network (CLRN). The amount is proportional to the number of patients recruited into non-industry adopted studies in the preceding October-September recruitment years.

In addition to providing the support costs for adopted clinical studies, the NIHR also operates a number of competitive funding streams. Trusts which are successful in bidding for competitive NIHR grant initiatives qualify for additional NIHR Research and Capability Funding (RCF) the following year. This is a less restricted research income stream, enabling organisations to invest in building research capacity and infrastructure. Currently St George's only receives a small amount of RCF income.

A breakdown of the above NIHR income streams and income from other sources is shown overleaf.

Where we currently are with research

Total Research Income for past four years

The Trust's research income during the past three years is shown in Table 1. This is income to fund the research. NIHR core funding includes funds allocated via the CLRN together with Research Capability Funding. Project income consists primarily of income for commercial clinical trials, but also includes income for non-commercial projects, including grant income.

Table 1: Research income for past four financial years

Year	2009-10	2010-11	2011-12	2012-2013
NIHR core funding	2,084,827	1,812,208	2,226,626	2,214,945
R&D Project income	399,237	528,056	815,280	1,090,826
Total Income	2,484,064	2,340,264	3,041,906	3,305,771

Research Activity

There are around two hundred new studies registered with the Joint Research & Enterprise Office (JREO) per annum. The breakdown* is shown in the table below:

	Commercial		Non-commercial	
	Adopted	Other	Adopted	Other
2012 new project registrations (total 223)	22	14	31	156
2011 new project registrations (total 204)	23	17	63	101
2013 (Jan-June) (120)	16	2	24	78

*excluding Patient Identification Centres

Where we are currently with research

Our Strengths, Weaknesses, Opportunities and Threats

In the development of this strategy the strengths, weaknesses, opportunities and threats have been assessed and this is summarised in the table below:

Strengths <ul style="list-style-type: none">• Historical levels of CLRN accruals• International reputation for a number of research areas (eg stroke, infectious diseases, cardiovascular)• Establishment of a Clinical Research Facility (CRF)• Motivation and interest of clinical staff• Clinical excellence provides potential research areas for expansion (eg Trauma centre, integrated services)• First JREO in UK	Weaknesses <ul style="list-style-type: none">• Systems and processes: governance, data and finance• Poor track record in winning competitive grants (SGHT)• Barriers: time, support, lack of 'knowledge' of process• Perceived low recognition and reputation of research within the Trust
Opportunities <ul style="list-style-type: none">• National policy drive• NIHR competitive grants: senior investigators, BRU• Commercial: proactive approach• SGUL and other collaborations eg KHP AHSC	Threats <ul style="list-style-type: none">• CLRN: single pot of money for South London with many research active centres• Highly competitive environment• Currently not part of AHSC• Restructuring of the CLRN networks may result in a further loss of income

Where we want research to be

◆ The overall vision

This is a critical time for St George's, Trust and University, with respect to defining the shape of the organisations for the future. Both organisations have great strengths, existing and potential. To prosper, the Trust must aspire to be a world class University Hospital, with developed specialty services, excellence in training and integrated, embedded research activity. The University must capitalise on the breadth and depth of clinical activity, on the intrinsic enthusiasm of high quality NHS staff to inform research questions, collaborate and deliver high quality research. Research and teaching bind the two organisations and are critical to securing the future of both.

More specifically in relation to research, the Trust wants to reach a position where:

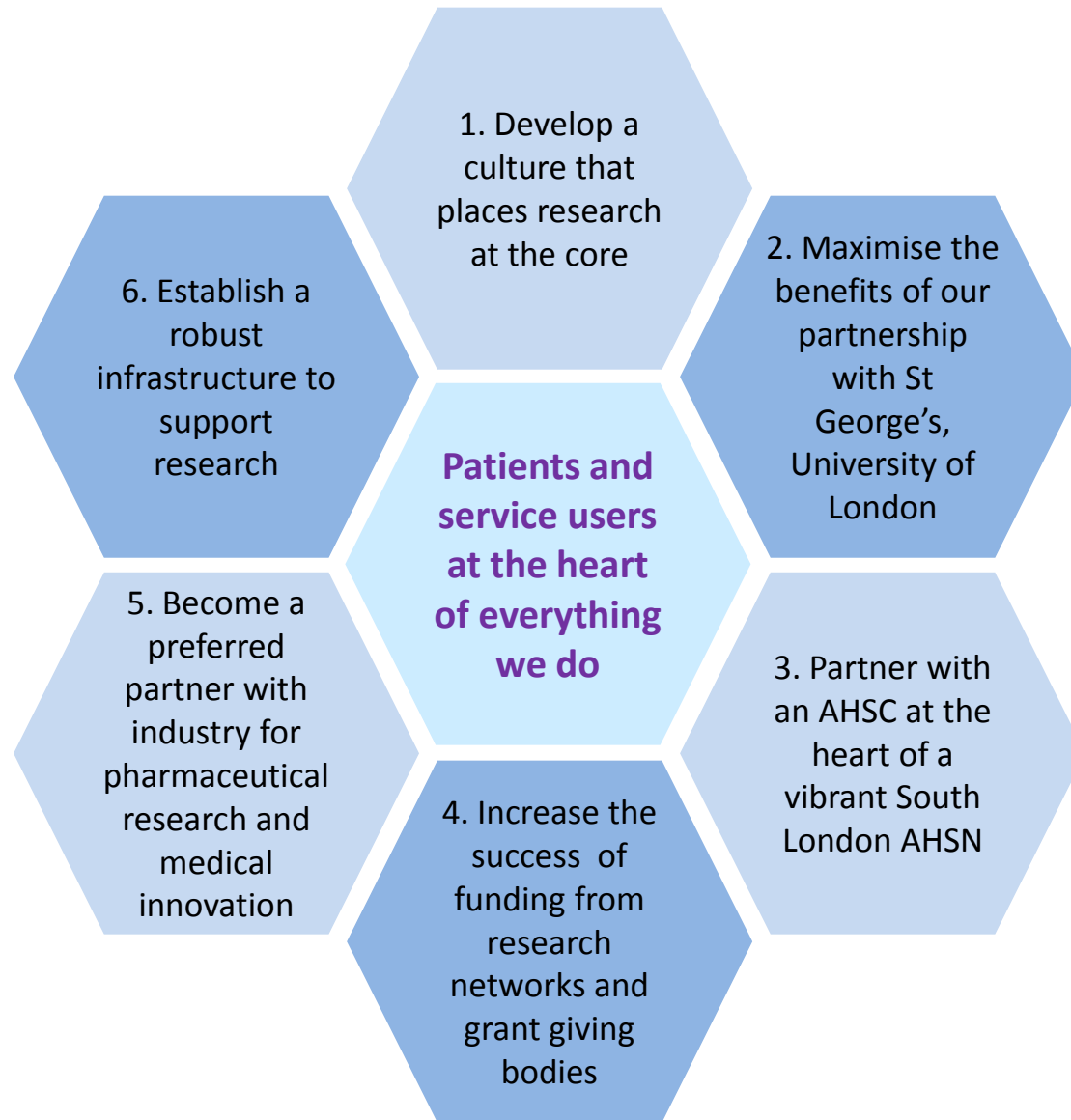
- ◆ Clinical research is embedded in NHS 'core business'
- ◆ Research drives innovation and improved patient outcomes
- ◆ There is a high profile and reputation of research both within the organisation and externally facing
- ◆ There is collaboration with academic partners
- ◆ There are robust and timely governance and financial processes
- ◆ There are high levels of patient recruitment
- ◆ St George's is successful in winning competitive grants from the NIHR and other bodies, with a view to establishing a NIHR Biomedical Research Unit (BRU)
- ◆ In relation to commercial research, there are strong proactive relationships and increased income.

◆ The components of the research strategy

In order to achieve this vision for research, there are a number of components to the research strategy and these are set out in the diagram on the opposite page.

There are six key components and each one of these is discussed in turn on the pages that follow.

Components of the Research Strategy



1. Develop a culture that places research at the core of St George's work

Development of a strong research ethos throughout the organisation in all clinical and managerial areas will stimulate innovation and support the delivery of high quality clinical services. This will require a shift from the current position where known research activity is concentrated in a relatively small number of individuals or departments whilst other unrecognised activity occurs in an ad hoc fashion. Research needs to be viewed as core business, embedded in the clinical services. Non-research active clinicians can assist researchers by recognising the value of research to the Trust and facilitating active researchers in many ways.

Objectives	Outcome measures
1.1 Provide strong leadership for research in the Trust through: <ul style="list-style-type: none"> • Appointing a clinical lead for all research in the Trust and divisional clinical research leads • Organising research activity at a divisional level and setting divisional research objectives as part of the annual business planning cycle and monitoring performance against them • Ensuring all staff understand the role that they can play in developing the research agenda 	<ul style="list-style-type: none"> • Senior leadership engaged and driving forward the research agenda • Strong Divisional ownership of the research agenda with clear deliverables (e.g. accruals per care group to NIHR/commercial studies) • Wide ownership of the importance of the research agenda across the Trust
1.2 Actively recruit, develop and retain the highest quality research active staff through: <ul style="list-style-type: none"> • Identifying, developing and maintaining a cohort of NHS and academic Trust staff who achieve excellence in research • Providing training in basic and clinical research for new and developing investigators • Establishing performance indicators for NHS staff as well as academic staff and monitor their achievement • Rewarding /recognising success in research through academic promotion, access to personal research income and Trust wide communication 	<ul style="list-style-type: none"> • A well regarded, research active workforce as measured through: <ul style="list-style-type: none"> • Academic outputs (peer reviewed publications, prestigious talks) • Number of University and Trust Consultants acting as Principal or Chief Investigators in clinical trials • Number of University and Trust Consultants activity as supervisors of PhD/MD(Res) students
1.3 Improve dissemination of research findings and translation into clinical practice through: <ul style="list-style-type: none"> • Raising the profile of research across the four divisions of the Trust • Providing regular R&D communications with staff, patients and wider community to demonstrate the value, benefit and need for clinical research • Annual publication of the Trust's research portfolio and outputs 	<ul style="list-style-type: none"> • Greater transparency in the research we do • Faster translation of research into clinical practice, thereby benefitting patients

2. Maximise the benefits of our partnership with St George's, University of London (SGUL)

The Trust is uniquely co-located with SGUL, and needs to enable staff across both organisations who collectively have a wide range of expertise, coupled with access to a broad population base, to maximise research opportunities to benefit patient care. Close collaboration and productive working relationships are essential to encourage more high quality applications to competitive funding bodies, in particular to the NIHR. Further development of joint governance and management structures will contribute to achieving coherence of strategic clinical research objectives.

Objectives	Outcome measures
2.1 Increase collaboration between the Trust and St George's University of London to build upon the research strengths of both organisations, identify synergies and new opportunities for innovative research	<ul style="list-style-type: none"> • Increased number of joint applications to competitive funding bodies, in particular to the NIHR • Effective operation of a performance management framework for joint posts that ensures appropriate research outputs
2.2 Develop a joint staff recruitment programme to strengthen the Trust and SGUL's research	<ul style="list-style-type: none"> • Strategic development of the workforce to support research
2.3 Develop a joint infrastructure to support research across both organisations	<ul style="list-style-type: none"> • Highly functioning Joint Research and Enterprise Office – see section 6, page 17 for further details

3. Partner with an Academic Health Science Centre at the heart of a vibrant South London Academic Health Science Network

The Trust will lead developments in medical research and innovation in south London, nationally and internationally by initiating research in areas of expertise and collaborating with others. The Trust will use its Strategic Alliance with King's Health Partners Academic Health Sciences Centre (AHSC), and play a leadership role in the development of the South London AHSN, to maximise the benefits through collaborative working.

In addition, the Trust will foster strong productive academic partnerships with other institutions to improve the quality and quantity of research output. The recent integration of Community Services Wandsworth with the Trust has increased partnerships with primary care in south-west London.

Objectives	Outcome measures
3.1 To explore areas of potential with King's Health Partners AHSC that will enable us to strengthen our research base, and in the first instance to focus on the development of joint bid to the NIHR for a Collaboration for Leadership in Applied Health Research and Care (CLAHRC)	<ul style="list-style-type: none"> • Clearly defined work programme with KHP • Successful bid for the NIHR for a South London CLAHRC, delivering against its agreed objectives
3.2 To play an active role in the development of the South London AHSN	<ul style="list-style-type: none"> • Staff appropriately driving the work of the AHSN and supporting spread and adoption
3.3 To further develop partnerships with primary care to develop research opportunities	<ul style="list-style-type: none"> • Research opportunities across the pathway are maximised • Primary care used to assist with recruitment numbers to trials
3.4 To participate in pan London research networks, topic specific networks and the South London CLRN	<ul style="list-style-type: none"> • Effective engagement with CLRN/NIHR activities to maximise opportunities for the development of research

4. Increase the success of research funding from research networks and grant giving bodies

Through a systematic consultation process at Care Group level, the Trust will identify those clinical services where research could be strengthened and/or developed as a priority and ensure the Research Strategy is aligned to this portfolio.

Historically, St Georges Healthcare NHS Trust has performed well on accruals to NIHR portfolio studies, particularly in observational studies. However, the majority of these trials are funded by grants, which are held elsewhere. We intend to increase the number of chief investigators, running trials which are coordinated from St George’s.

An area in which the Trust has performed less well is winning competitive research grants and support from the NIHR and other bodies. In particular, St George’s does not have a NIHR Biomedical Research Unit (BRU), but through strengthening research we hope to work towards establishing one.

Objectives	Outcome measures
4.1 Build on existing research strengths to take account of national health priorities and clinical expertise at St Georges	Success will be measured by tracking progress against a basket of indicators including: <ul style="list-style-type: none">• Number of research sabbaticals awarded to existing NHS staff to fund development and writing of grant applications• Number of staff recruited to specifically do research as part of their NHS job plans• Number of submitted grant applications• Number of successful grant applications
4.2 Increase successful grant applications through the provision of research sabbaticals to existing NHS staff and new NHS staff	
4.3 Work strategically with SGUL to increase grant income from the NIHR	

5. Become a preferred partner with industry for pharmaceutical research and medical innovation

We have been successful in partnering with industry to run clinical trials. We should build on this success and the reputation of key opinion leaders in the organisation to increase commercial research to provide early access to new therapies to our patients and increase commercial income.

St George's will advertise its clinical excellence, unique breadth of clinical service and appropriately streamlined R&D processes to the pharmaceutical industry. The Trust will aim to establish a mutually beneficial relationship with industry and a reputation of excellence to make St George's a preferred partner for commercial research and innovation.

Objectives	Outcome measures
5.1 Increase income from commercial clinical trials through proactive work with the pharmaceutical industry to advertise excellence, build links and be responsive to industry needs.	<p>Success will be tracked by using indicators such as the following:</p> <ul style="list-style-type: none"> • Achieve an increase in the number of commercially sponsored studies • Increased levels of recruitment to commercial trials • Achieve an increase in income associated with commercial research • Increased number of departments undertaking commercial research

6. Establish a robust infrastructure to support research

The NIHR and commercial bodies are setting increasingly challenging timelines and quality standards for research. In order to meet these standards the Trust will require efficient and transparent governance and financial systems for R&D. This will provide the basis for business planning, performance management and incentivisation.

Trust wide IT services will be developed / adapted to allow the construction and population of research patient databases that conform to all governance requirements.

Objectives	Outcome measures
6.1 Ensure compliance with the research governance framework and take account of external drivers of research	<ul style="list-style-type: none"> • Systems and processes are compliant • Performance is in line with the NIHR contract benchmarks: <ul style="list-style-type: none"> • 70 day target to recruit first patients to clinical trials, for all types of trials • Recruitment time to target for all commercial contract trials
6.2 Provide effective and timely support for all aspects of grant applications and administration through the Joint Research and Enterprise Office, to include development of facilitator roles to assist researchers navigate through ethical, regulatory and financial processes and to proactively identify funding opportunities. We will appoint a Research Performance Manager to reach out from the Joint Research and Enterprise Office to work with and in the Divisions	<ul style="list-style-type: none"> • JREO effectively supports staff undertaking research • Research Performance Manager recruited to support Divisions to develop research performance metrics, actively survey the NIHR/commercial portfolios and funding streams to identify opportunities
6.3 Develop an efficient and transparent financial system for research and development that allows research groups to access income to further develop research	<ul style="list-style-type: none"> • Research income and expenditure can be effectively tracked across the Trust
6.4 Implement a management and information system to record Trust research activity and outputs	<ul style="list-style-type: none"> • Information system can be used to develop KPI framework and track progress
6.5 Trust wide IT services will be developed/adapted to allow the construction and population of research patient databases that conform to all governance requirements	<ul style="list-style-type: none"> • Effective IT system in place
6.6 Develop both internal and external websites for research. An internal research website would allow access to R&D protocols, processes and staff to make the initiation of research easier. An external website would facilitate the recruitment of patients to clinical trials.	<ul style="list-style-type: none"> • Well used, informative websites for staff and patients

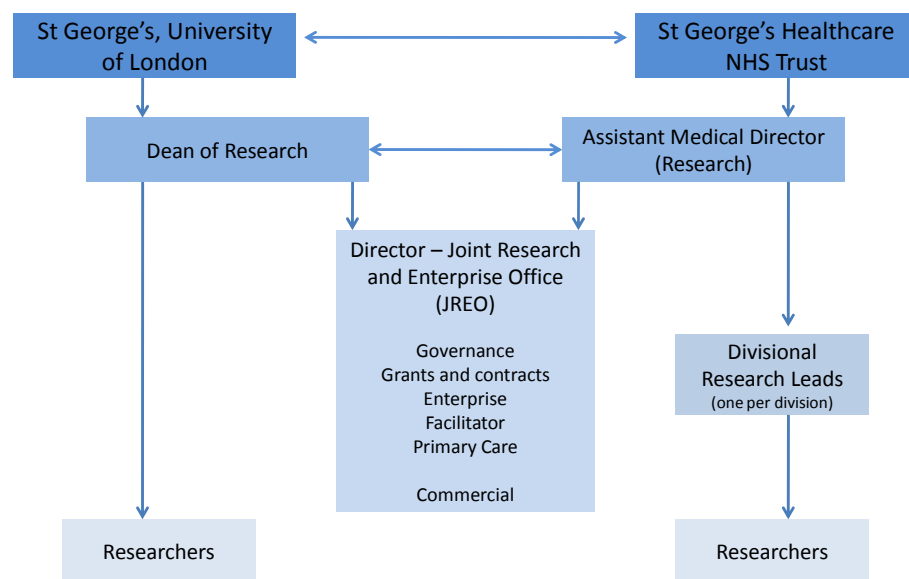
Implementation

There are a number of strands that together will facilitate the successful implementation of the aspirations set out in this Research Strategy. These are discussed below.

● Research management structure

St George's Healthcare NHS Trust and St George's University of London have recently reviewed the research management structure and made a number of changes to strengthen the structure. The new management structure is illustrated in Figure 2.

Figure 2: The joint management research infrastructure across St George's Healthcare NHS Trust and St George's, University of London



● Infrastructure support

St George's Healthcare NHS Trust will support the delivery of this Research Strategy through developing a robust organisational infrastructure, monitoring of performance and collaboration with academic partners. A detailed implementation plan will be produced to outline the milestones.

● Tracking performance

Annual metrics to evaluate the successful implementation of this research strategy will be developed and reviewed. This will include a set of metrics tailored to each of the Divisions and a set of high level objectives that will be monitored by the Trust Board.

● Review

This strategy will be reviewed periodically to ensure that it is still up to date and is delivering the intended outcomes.