The NHS research environment

Over the last ten years a series of reports re-emphasised the need for the National Health Service to commit a percentage of its funding to research, taking advantage of the UK health service being national and government funded. Historically NHS research funding was embedded within the NHS Trusts but more recently this funding in England has been withdrawn from Trusts and linked directly to research activity through a range of structures which will be explained below. In Scotland, a proportion has been withdrawn to support research and development infrastructure although the majority of the funding is still centrally allocated to Trusts.

The National Institute for Health Research (NIHR)

NIHR was created with the overall objective of making the NHS internationally recognised for its research excellence. It has contributions from the Chief Scientist Office, Scotland (CSO) and Office for Research and Development, Wales (WORD). Researchers from Northern Ireland should contact English NIHR Evaluation, Trials and Studies Co-ordinating Centre to discuss their eligibility to apply. Specifically NIHR aims to:

1. Directly fund research
2. Increase research capacity
3. Improve infrastructure for and management of research
4. Streamline research governance

The NIHR is directed to research that will benefit patients now and improve health services now. It will usually involve patients and clinicians and NHS Trusts. It does not fund basic science and laboratory studies.

1. Directly fund research

Information on how NIHR funds research is available from

http://www.ccf.nihr.ac.uk/Pages/Home.aspx

There are a number of streams which include:

- Research for Patient Benefit
- Policy Research Programme
- Programme Grants for Applied Research
- Invention and Innovation
- Health Technology Assessment
- Public Health Research

These funding streams are awarded through open competition and include both commissioned and proposed research.

A distinction is drawn between the costs of the research itself, the support costs needed to help recruit patients and the actual treatment costs for a trial. This is too much detail for this paper but an interested reader could go to the NHS ARCO document (attributing revenue costs of externally funded non-commercial research in the NHS) available at http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH_4125280

More information on funding opportunities is available in another pdf on our website:

http://www.bacdis.org.uk/research/documents/Howtofundaresearchproject.pdf

2. Increase research capacity

NIHR has invested in institutional capacity by funding Biomedical Research Centres and Centres for Research in Public Health. It has also created research career paths for all health professionals.

Research career paths for medical doctors were recommended by the Walport report for England and Wales. They are largely adhered to but differently interpreted in Scotland. Research opportunities exist at the following points of a **medical career:**

- Academic F1 posts
- Academic clinical fellows
- Academic clinical lecturers
- Academic clinical senior lecturers

More information on these opportunities is available in another pdf on our website:

http://www.bacdis.org.uk/research/documents/Startingoutinpaediatricneurodisabilityresearch.pdf

New research career paths for **Nurses, Midwives and Allied Health Professions** in England and Wales have also been developed:

- NIHR Fellowship programme
- NIHR Healthcare Scientists Research Fellowship
- NIHR Senior Investigators

More information on these pathways is available in another pdf on our website:

http://www.bacdis.org.uk/research/documents/Expandingresearchcapacity.pdf

Similar research career paths for allied health professionals are managed through the Scottish Chief Scientist Office.

3. Improve infrastructure for and management of research

Topic Research Networks

In England and Wales, about seven years ago, six Topic Research Networks were introduced including the Medicines for children network. Each network has a lead region and each covers about three quarters of England. The sites were chosen by separate competitive processes for each network.

The Topic Networks have considerable resources to:

- Manage research in each locality and provide research nurses as required
- Assist the development of research protocols
- Engage the public
- Assess studies submitted by commercial and non-commercial sponsors regarding their suitability to be adopted by the Network

In Scotland, the Network is slightly different and there is an additional topic of research in dementia. It is also helpful to note that the Medicines for Children Network throughout the UK has widened its understanding of 'medicines' to include different therapeutic modalities.

More information on topic research networks is available at:

http://www.crncc.nihr.ac.uk/about_us

Comprehensive Local Research Networks (CLRN)

For the most part Topic Networks proved successful and NIHR then wanted to ensure that all aspects of health could be researched, not just those covered by Topic Networks. It did this by introducing 25 Comprehensive Local Research Networks. These are now part of the research landscape in England and Wales, but not Scotland. The roles of CLRNs are evolving and some are more developed than others. It is very important for NHS clinicians interested in research to understand CLRNs. They have considerable resources available to them, in particular for clinicians working in District General Hospitals; indeed clinician engagement as part of the NIHR portfolio of studies (see below) is central to the concept of the NIHR Research Network. Interested clinicians should contact their paediatric, non-medicines specialty leads (see web site below).

http://www.crncc.nihr.ac.uk/about_us/ccrn/specialty/paed

All NHS Trusts and Universities in the area are in the CLRN and its resources are used to provide support for:

- Portfolio studies (see below), such as research nurses, extra diagnostic facilities
- Sessions for clinicians actively engaged in and promoting NIHR work; it must fit with the clinician's job plan
- Infrastructure to develop and coordinate NIHR work, such as trial co-ordinators, database managers, training. Although CLRNs, as such, have not been introduced into Scotland, there are many developments in the Scottish context for NHS R&D support including the development of facilities such as clinical trials units. Approach your Trust Research & Development department to find out about the structures, resources and support in Scotland and Northern Ireland

More information on comprehensive local research networks is available at:

http://www.crncc.nihr.ac.uk/about_us/ccrn/ccrn_about_us/clrns_list

NIHR Portfolio of research studies **(**not directly applicable in Scotland)

An NIHR Portfolio study is entitled to use the infrastructure and resources of the Topic or Comprehensive Local Research Networks.

Trust R&D Departments receive funds from the CLRN based on a number of criteria; a main one of which is the number of patients recruited to Portfolio studies. There is a weighting for different types of studies.

The criteria for a study to be on the portfolio are:

- Funded by an NIHR funding stream, Research Council or an "approved" national charity such as Wellcome or Arthritis Research Campaign
- The call was an open national call
- The applications were peer reviewed

There are over 8000 studies on the portfolio, though some of these are now completed. More information on the NIHR portfolio is available at:

http://www.crncc.nihr.ac.uk/about_us/processes/portfolio

http://public.ukcrn.org.uk/search/

Clinical Study Groups (CSG)

These operate within the Topic Networks and will hopefully soon operate for all the specialties in the CLRN.

They are national groups of 8-12 expert clinicians in a relatively small field that provide an expert national perspective on proposed portfolio studies, help develop new studies and determine priorities for studies. So for instance the CSGs in the MCRN include renal, neuroscience, allergy and immunology, rheumatology.

The Strategic Research Group of BACD has many of the characteristics of such a group for disability.

Research Design Services

NIHR has established a network of Research Design Services to help researchers develop and design high quality research proposals for submission to national, peer-reviewed funding competitions for applied health or social care research. Their services are free.

There are eight NIHR Research Design Services in the following Strategic Health Authority regions:

- East of England
- London
- North East
- South Central
- South East Coast

- South West
- West Midlands
- Yorkshire and Humberside

Scotland and Northern Ireland have similar arrangements where there is free advice for researchers in the NHS but they are not necessarily designed under this structure

For more information on Research Design Services go to:
http://www.nihr.ac.uk/infrastructure/Pages/infrastructure_research_design_services.aspx

4. Streamline research governance

Coordinated System for gaining NHS Permission (CSP)

This system allows much duplication to be avoided in making an application for Ethics, R&D and other permissions. It

- Provides a single point of entry, via the Integrated Research Application System (IRAS) (see below), for investigators applying for NHS permission for single site and multi-site studies
- Defines and carries out checks that only need to be done once, and those that are required for each NHS location/organisation
- Reduces the time to gain NHS permissions which meet all governance and regulatory requirements
- Ensures clarity regarding the roles and responsibilities of Sponsors, Investigators, Networks and Trusts
- Has time targets built into the process
- Works in parallel to the ethics review and the NIHR CRN Portfolio adoption process

More information is available at: https://www.crncc.nihr.ac.uk/about_us/processes/csp

Integrated research Application Service (IRAS)

This is a web based application for entering information for Ethics review, Trust R&D review, Site specific review and assessment by National Information Governance Board. As much of the information is similar in all these applications, this cuts out duplication. Sometimes the timescale of the IRAS applications mediates against getting permission in time to do a small pilot or feasibility studies. The RCPCH is piloting a 'fast track' specific IRAS application for undergraduates.

For more information on the Integrated Research Application Service go to:
https://www.myresearchproject.org.uk/Signin.aspx

NHS National Research Ethics Service (NRES)

The National Research Ethics Service has the responsibility to protect the rights, safety, dignity and well-being of research participants; and facilitate and promote ethical research that is of potential benefit to participants, science and society. It does this by:

- providing ethical review of research by Research Ethics Committees (RECs)
- providing ethical guidance and management support to RECs
- delivering a training programme
- working to promote transparency in research

For more information on the National Research Ethics Service go to http://www.nres.npsa.nhs.uk/

NHS Research Passport

Applying to the whole of the UK, this is a new system for certification of University employee researchers working on research contracts within the NHS. The NHS Research Passport system establishes a common system of pre-engagement checks, which conform to the standards required of all NHS bodies and are therefore transferable across NHS Trusts. The passport system simplifies and rationalises the checks required for new research contracts after 1 April, 2007.

For more information on the NHS Research Passport go to:
http://www.york.ac.uk/admin/hr/resources/policy/nhs_research_passports.htm