



**KEEP
CALM
AND
CARRY
ON**

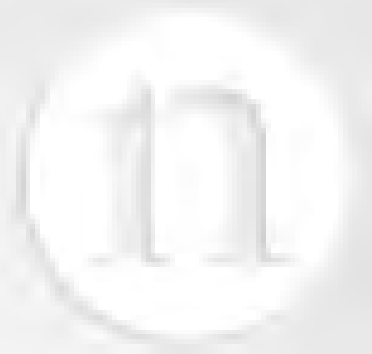
COLLABORATING

Conflicts and conscious bias

- Until 30 September 2019 I worked for the NIHR at the NIHR Evaluations, Trials and Studies Coordinating Centre (NETSCC)
- From 1 October 2019 I became the Director of the Wessex Institute. We are an enterprise unit within the University of Southampton that currently hosts:
 - NETSCC
 - NIHR Dissemination Centre
 - INVOLVE
 - NIHR Centre for Business Intelligence
 - James Lind Alliance
 - Southampton Health Technology Assessment Centre
 - Research funding programmes on behalf of Health and Care Research Wales
- I am a co-founder of the Ensuring Value in Research Funders' Forum
- I am on the REWARD Alliance and Evidence Based Research Network steering groups
- I am on the Health Research Authority's Transparency strategy expert group
- I don't like rugby



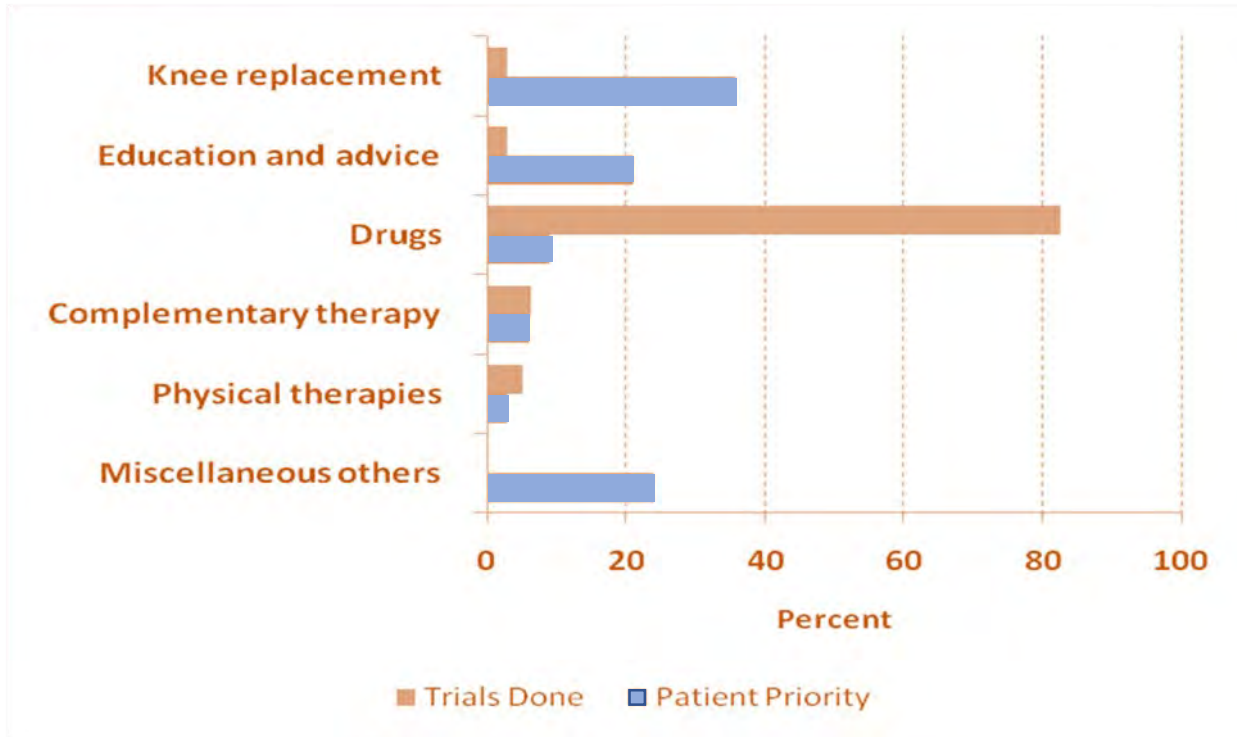
Collaboration



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<https://go.nature.com/2mKVAIW>



Tallon, D. et al. (2000) 'Relation between agendas of the research community and the research consumer', *The Lancet*, Vol. 355. pp. 2037-40



James Lind Alliance

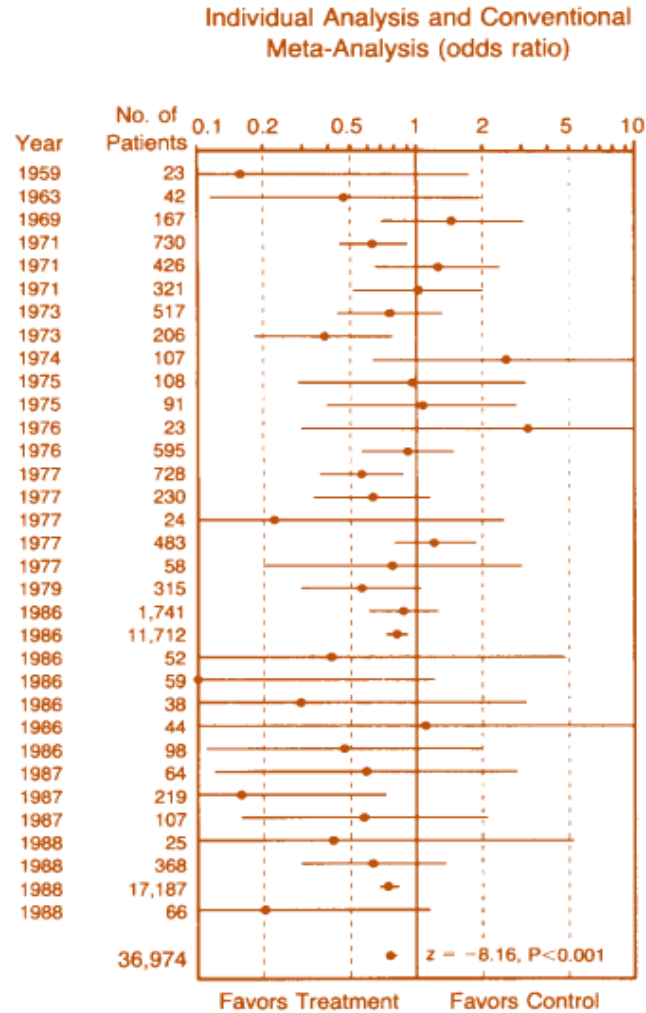
Priority Setting Partnerships



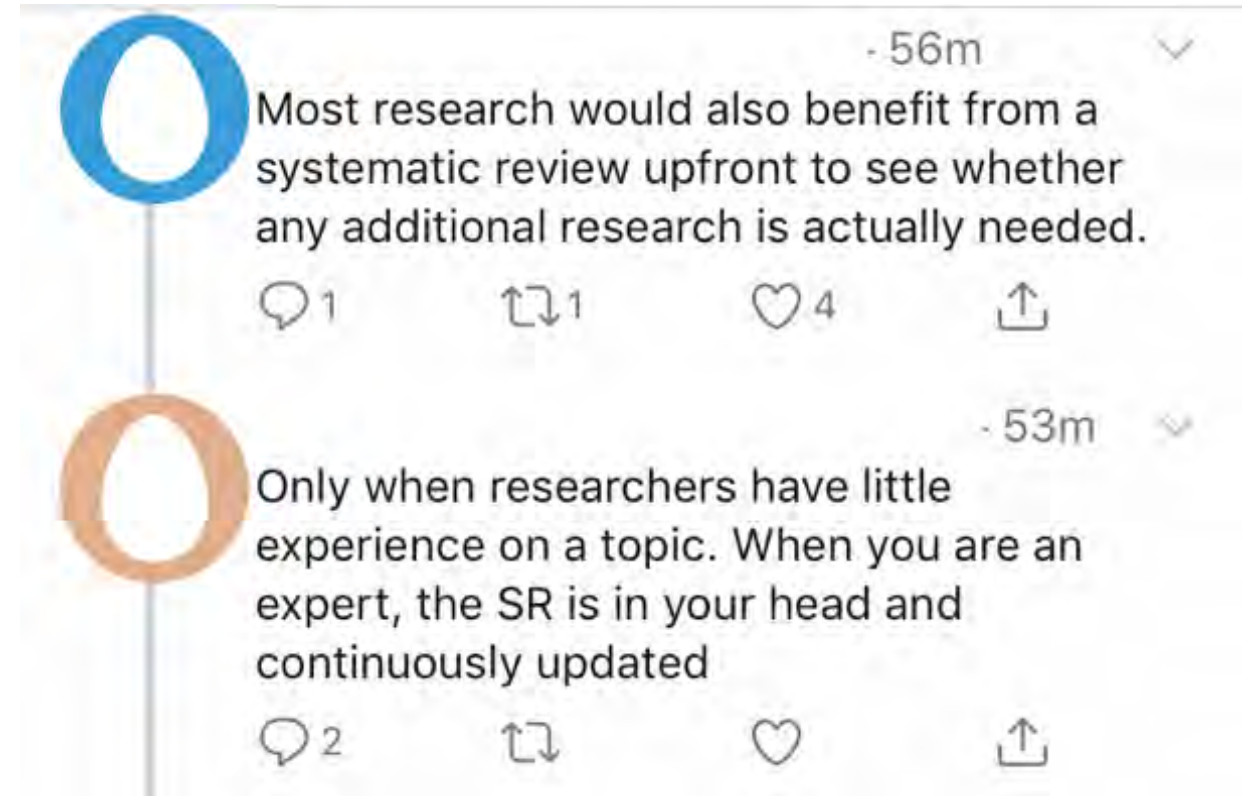
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www.jla.nihr.ac.uk



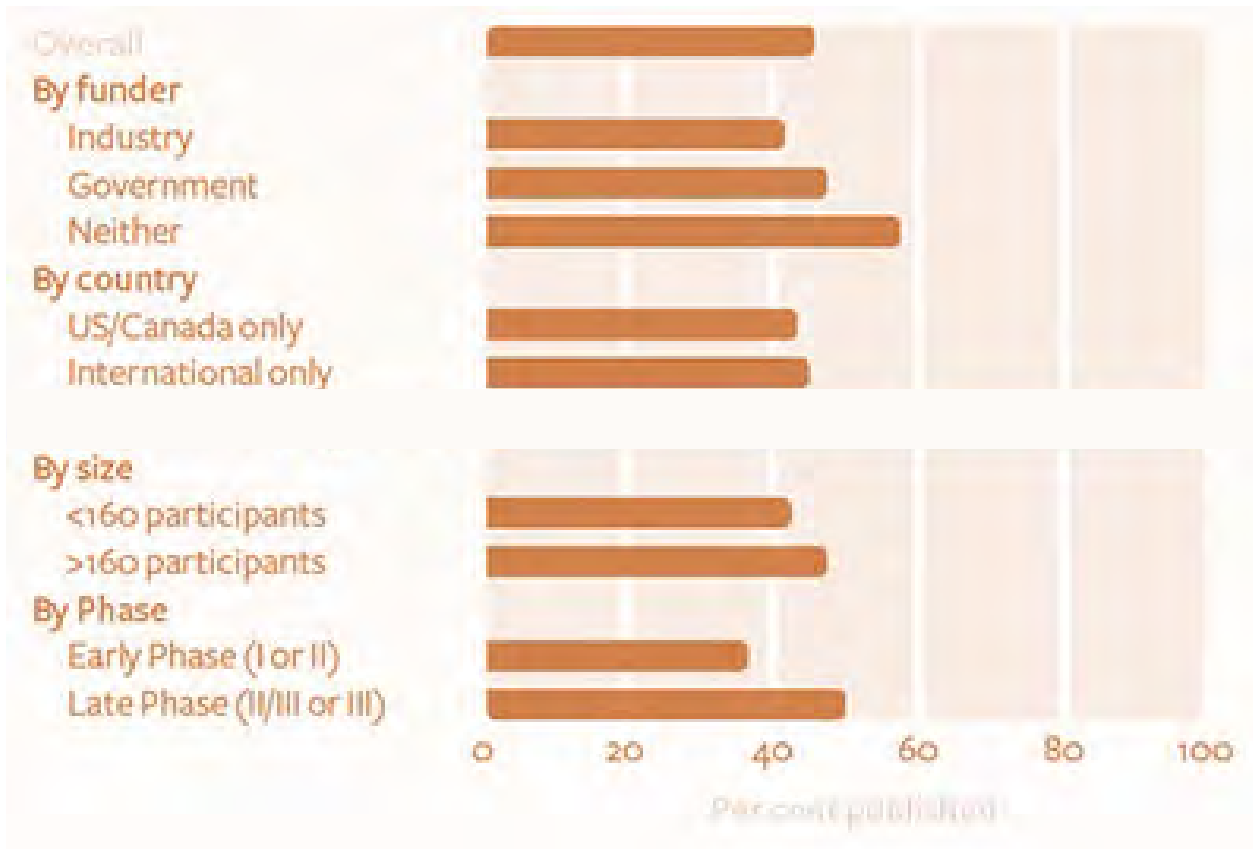
Lau 1992 (i.v. streptokinase)



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www.ebrnetwork.org



NIHR | National Institute for Health Research

Journals Library

The National Institute for Health Research (NIHR) is the world's first health research funder to publish comprehensive accounts of its funded research within its own publicly and permanently available journals. Through the NIHR Journals Library, you can see the projects being funded as well as the final published journal reports.

50%

of clinical trials publish a full report

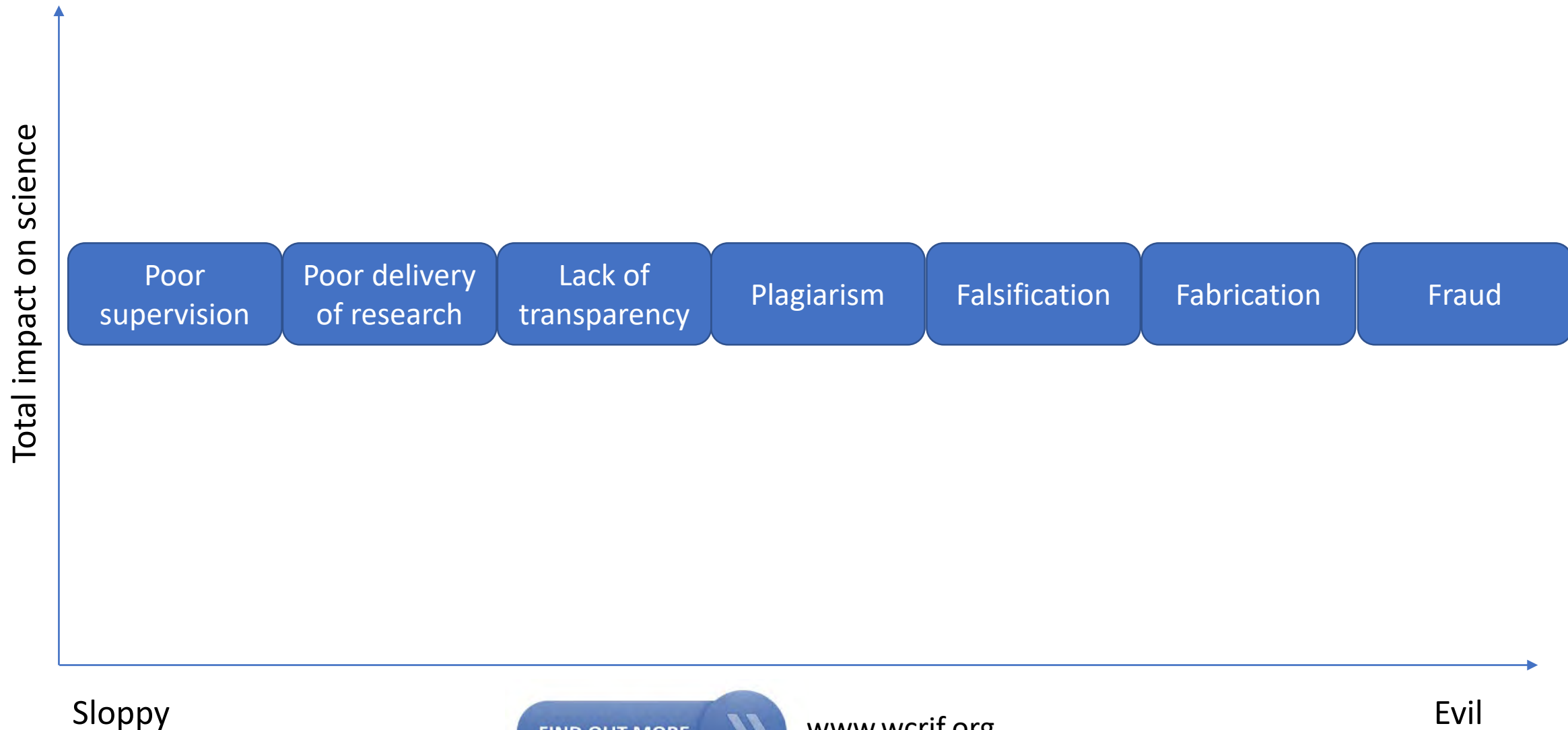
98%

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www.alltrials.net

www.journalslibrary.nihr.ac.uk



Sloppy

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www.wcrif.org

Evil



Prof Sally Davies ✓
@CMO_England

I have written to [@Jacob_Rees_Mogg](#) to express my sincere disappointment and show my support for doctors across the country, particularly [@djnicholl](#).

Doctors are amongst the most trusted people in our country; it is worth listening to what they have to say with respect.



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Don't – give yourself a break from Brexit



The logo for NIHR (National Institute for Health Research) is displayed in a large, bold, dark blue sans-serif font. The letters are slightly shadowed, giving them a three-dimensional appearance as if they are floating above the background.

NIHR



Ymchwil lechyd
a Gofal **Cymru**
Health and Care
Research **Wales**

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Talk to Michael



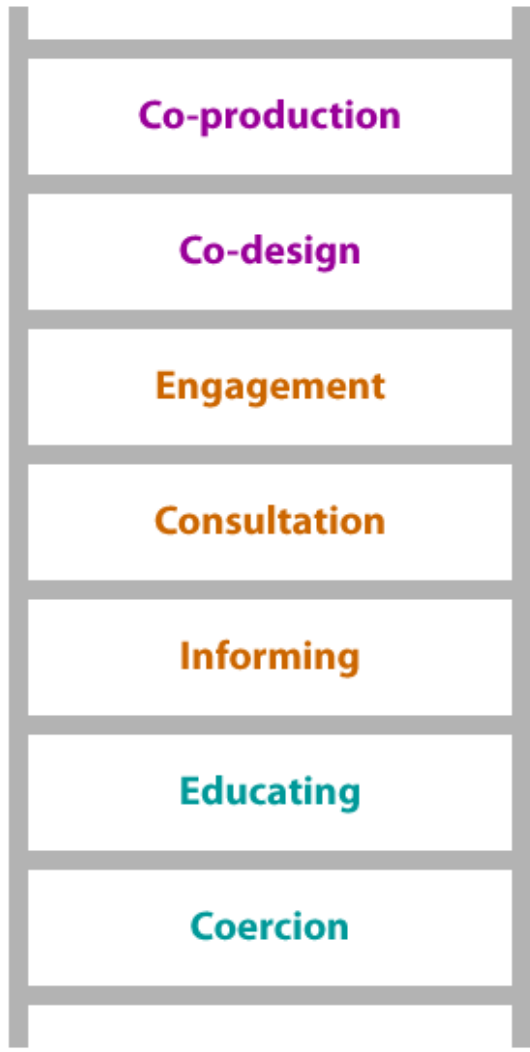
ENSURING VALUE IN RESEARCH

To raise the probability of benefits to society from health-related research by advancing the practices of research and research funding.

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www.EnsuringValueInResearch.org



Co-production

Co-design

Engagement

Consultation

Informing

Educating

Coercion



Doing with
in an
research partnership

Citizen power



Doing for
engaging
involve people

Tokenism



Doing to
trying to
who
we
of service

Non-participation



bit.ly/INVOLVEcopro

Patients are doing it for themselves

Diolch



**GAN
BWYLL
A
DALIWCH
ATI
CYDWEITHREDU**

@matt_westmore

Research misbehaviour

- | Rank | Product of frequency and impact on TRUTH |
|------|-----------------------------------------------------------------------|
| 1 | Insufficiently supervise or mentor junior coworkers |
| 2 | Insufficiently report study flaws and limitations |
| 3 | Keep inadequate notes of the research process |
| 4 | Turn a blind eye to putative breaches of research integrity by others |
| 5 | Ignore basic principles of quality assurance |

Bouter et al, Research Integrity and Peer Review 2016:17

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www.wcrif.org

I don't like rugby

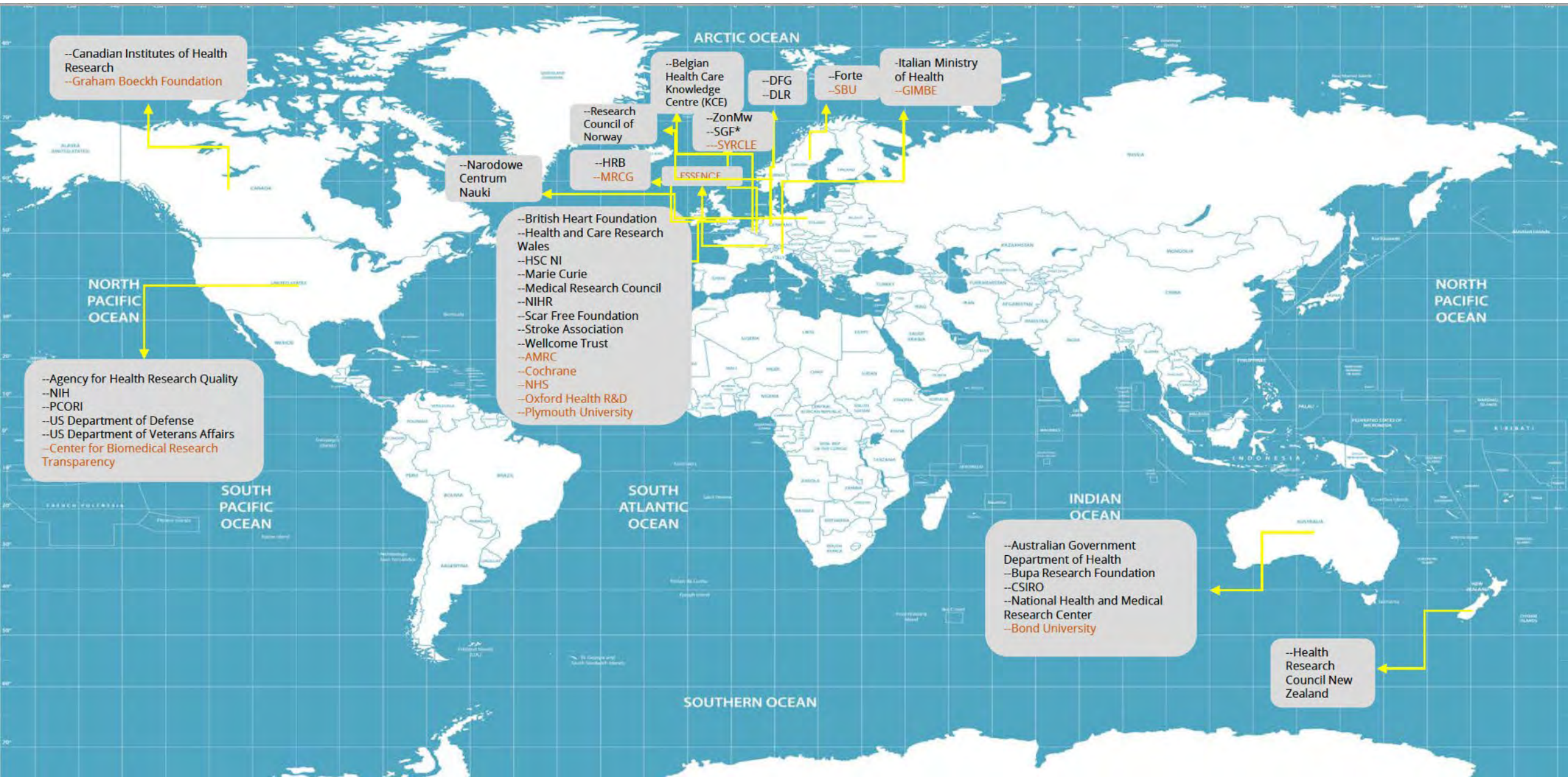
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"How to win friends and influence people"



Sunflowers co-operate to share fertile patches of soil, research suggests



FALSE HOPES —

Crowdfunding raises millions for quack cancer remedies, like coffee enemas

In the UK, \$10M went to unproven, potentially harmful treatments for desperate patients.

BETH MOLE - 9/20/2018, 1:15 PM



Is cancer fundraising fuelling quackery?, Newman, 2018, BMJ



**KEEP
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COLLABORATING**

Health and care related research changes lives, saves lives, delivers social justice and contributes to our collective prosperity. It is impressive, precious, and something we should be proud of.

It is also fragile and threatened, some even argue it is fundamentally broken.

There are global debates, specifically focusing on the purpose, accountability, and quality of research. These include issues raised about research integrity; the so-called reproducibility crisis; avoidable waste across the research enterprise; the impact, openness and transparency of specific health-related research activities; and the rise (and threat) of populism vis-a-vis science. Mostly these are well meaning attempts to improve science; in some cases they are biased attempts to undermine public confidence.

But I am staying calm.

At its heart research is a collective endeavor by people committed to making a difference. The people who work in health and care related research, what they do and how they do it, are impressive; they change lives, they save lives, they deliver social justice and they contribute to our prosperity.

By partnering across our sector and across sectors with the public, patients, health and non-health practitioners, policy makers, researchers, funders, industry, charities, regulators, and publishers, we will not only address the challenges put to us, but we will improve because of them.

By collaborating with others around the world we will learn from each other, be stronger together and achieve more collectively than we could alone.

Collaboration enables us to cross bridges together to provide a unified approach to how we tackle and resolve these complex challenges for improving health and social care related research.

Of particular importance is moving forward with co-production and meaningful public involvement. By building trust through honesty and authenticity it can be as an effective way to counter any attempt to undermine public confidence in research.

In this talk I will explore these issues, give current examples of partnering and collaboration, talk about future models and above all, encourage you to

KEEP CALM AND CARRY ON COLLABORATING.



“The idea of bringing together clinicians, patients and carers to discuss research priorities seems obvious – why shouldn’t all those affected have a chance to jointly discuss frustrations about the things we don’t know, and aspirations for the future?”

- *Irenie Ekkeshis, patient involved in the Sight Loss and Vision James Lind Alliance priority setting partnership*