Key themes from the workshops to develop an NHS R&D Framework

Purpose of this document

This paper provides a summary of the key themes from the workshops which were run by Health and Care Research Wales to develop an NHS R&D Framework.

Introduction

In summer/autumn 2022, the project to develop, launch and implement a Framework for NHS R&D in Wales began. The framework outlines what ‘research excellence looks like’ within NHS organisations in Wales where research is embraced, integrated into services, and is a core part of the organisation’s culture.

The framework has now been drafted, accompanies this paper and reflects the key themes which emerged from the consultation workshops. The co-creation process with key stakeholders was facilitated by Health and Care Research Wales through 6 workshops in winter 2022/23, which were run on the following dates:

- 13 December 2022 in Cardiff (36)
- 17 January 2023 in Swansea (32)
- 18 January 2023 in Llandudno (29)
- 19 January 2023 in Llandrindod Wells (6)
- 24 January 2023 online (34)
- 31 January 2023 online - dedicated to patients and the public (approx 30)

Delegates at the workshops were asked about the key features of NHS organisations that embrace research, what more is needed to enable NHS organisations to integrate research into healthcare and the next steps to ensure successful framework development and delivery.

The workshops were well attended by around 167 people from a wide range of stakeholder groups including NHS organisations, higher education institutions, Welsh Government, lay people, Digital Health Care Wales, Higher Education & Improvement Wales, Life Sciences Hub and the Association of British Pharmaceutical Industry.
The feedback from the workshops was consistently very positive with stakeholders really welcoming the opportunity to shape the framework and to be involved in the process.

A public and patient focus group was also held in January and the framework development was also discussed at the Health and Care Research Wales led public involvement forum event on 15 March. As well as this, a dedicated workshop for NHS R&D Directors to discuss the framework was held in March 2023.

A steering group was established to oversee the framework’s development, which included representation from most NHS organisations and across different professions in order to expand the framework’s influence (finance, planning, quality & safety, workforce, patient experience).

The key themes from the workshops relating to the key characteristics of a research active organisation are listed below under ten key pillars. An integrated impact assessment has also been completed.

**Consultation and next steps**

The draft framework is available on the Health and Care Research Wales website during May 2023 for wide consultation during a three-week period.

All stakeholders are invited to send feedback on the framework to: hollie.cuddihy@wales.nhs.uk by 17:00 on 1 June 2023.

If you would like to discuss the key themes from the consultation workshops or the draft framework, please contact helen.grindell@wales.nhs.uk.

Once the feedback has been received and the framework has been finalised, the aim is to publish the framework in June 2023 and to develop implementation plans where needed, with Health and Care Research Wales and NHS organisations working collaboratively to achieve the features of research supportive organisations.

**Key themes from the NHS R&D Framework Workshops**

1. **Strategy and organisational alignment**

   **R&D Strategy**
   1.1. Develop and implement a visible R&D strategy for the organisation, which is patient centred, with a clear vision and associated implementation plan, and with accountability for implementing on a short-, medium- and long-term basis.
1.2. R&D strategy should be accessible and made widely available to all staff, patients and the public, and promoted appropriately.

1.3. R&D strategy should be co-produced and endorsed by the NHS organisation board, with a focus on support for a wide range of research across all sectors and healthcare settings and should take into account research at the intersection between health and social care services.

Organisational Alignment

1.4. Develop plans which align with local (e.g. IMTP), national (e.g. Health and Care Research Wales plan) and UK R&D strategy (e.g. Saving and Improving Lives) and align NHS organisation strategy with Welsh Government policy requirements (including a Healthier Wales and the Life Sciences Vision).

1.5. Research should feature in NHS organisation’s plans and budget setting, ensuring adequate investment in research support and infrastructure, whilst considering research at an early stage in the planning process.

1.6. The NHS organisation should financially investment in research, provide ringfenced funding and continually monitor the return on the investment on a short-, medium- and long-term basis, as well as consider the best use of joint investments from other sources such as commercial income and charitable funds.

2. Leadership and management

Leadership

2.1. Appoint visible R&D leaders, including R&D Directors, within NHS organisations and share information about who they are and what they are responsible for.

2.2. The NHS organisation should have a clear commitment to research from the board, developing a ‘charter’ to visibly demonstrate this.

2.3. Ensure that research is consistently on the NHS board agenda, tabled with regular R&D reports (using a national template) and that the directorate level and executives are research aware.

2.4. Appoint an independent board member/ champion for research with clear roles and responsibilities to act as ambassadors and to champion R&D, ensuring that all staff know the role and remit.

2.5. Ensure positive leadership from the top down, with NHS organisation leaders being positive about research, identifying how research can provide solutions, leading by example and promoting R&D.

2.6. Adopt a distributed leadership model for R&D across the NHS organisation with leaders, deputies, senior and middle managers promoting and championing research at all levels.
**Management**

2.7. Ensure that NHS middle managers in all departments are research aware and are supportive of developing and delivery research.

2.8. Ensure that research is embedded into all strategic discussions and meetings in all departments/directorates to drive services and improvement for example on the agenda for senior management meetings, relevant committees, MDT meetings and all other relevant meetings/fora across the NHS organisation. From Board to ward, research should be a standard part of team structures.

**3. Culture**

3.1. Research should feature as a golden thread across the NHS organisation’s activities, should feature in all the healthcare services provided at all levels.

3.2. Research should be embedded in the NHS organisation, integrated into healthcare services delivery and care pathway.

3.3. Research should be considered as a core activity, part of business as usual and should be everybody’s business.

3.4. The NHS organisation should encourage research to be more associated with the NHS: shift the perception of research being solely associated with universities to being seen as an integral part of the NHS.

3.5. The NHS organisation should have a genuinely positive research culture where research is considered as a priority and is evident in all of the NHS organisation’s business through strategy and behaviour (more than words).

3.6. Develop a culture of continuous improvement where curiosity and challenge is encouraged, as well as an exploratory culture where research ideas are discussed and developed at all levels.

3.7. A culture of openness should be developed where staff feel empowered to question and challenge and there is a psychologically safe space to share and discuss ideas, where measured risks can be taken and there is freedom to fail.

3.8. Ensure that research supported in the NHS organisation is driven by the intent of service and quality improvement & quality.

3.9. The NHS organisation should learn from research outcomes, both positive and negative and research findings should be embedded into practice or provide leverage for improvement.

3.10. Research should feed into better evaluation of services, with a focus on how to improve services and the lives of people who access the services- need to use research to design services with the people in mind.

3.11. Research should inform new models of service delivery, supplemented by patient feedback, and should be used to design future care creating NHS transformation.

**4. Infrastructure and Operations**
4.1. Have a dedicated, sustainable and well-resourced R&D department (with a physical office space in a prominent location) with clear roles and responsibilities to support and co-ordinate research across the NHS organisation which is well promoted.

4.2. Have an NHS organisational structure which supports research, including a central dedicated R&D office and distributed structures within each directorate.

4.3. Ensure that senior executives across finance, W&OD, facilities & estates and IM&IG are research aware and understand their role in facilitating research.

4.4. Be proactive about attracting research to the organisation, map the NHS organisation’s research capacity and capability and ensure awareness of this in the context of supporting research.

4.5. Have well equipped, fit for purpose, library services where staff can access information about research, can undertake literature searches and promote and encourage the use of libraries.

**Finance**

4.6. Comply with the Health and Care Research Wales Finance Policy


4.8. Ensure sufficient capacity in finance teams to support research and effective systems and processes for example rapid invoicing to commercial companies.

4.9. Ensure that senior finance executives are research aware and familiar with the Finance Policy.

4.10. In line with NHS organisations’ SFIs and the NHS R&D finance policy, enable financial mechanisms for spending/ saving research income over financial years.

4.11. Enable capacity building and research income to be effectively reinvested into research, including research posts.

4.12. Link R&D finance with key healthcare initiatives in finance including Value based healthcare, ensuring value for money on investment.

**W&OD**

4.13. In line with W&OD policies, adopt flexible approaches to providing opportunities for staff and colleagues to gain experience of research development and delivery in the NHS across Wales, UK and internationally, with a view to making the best use of local, national and international talent pools e.g. short term research nurse placements.

4.14. Facilitate greater flexibility in staff contracts to enable creativity in joint working across higher education institutions and the NHS in Wales.

4.15. Promote unique selling points when recruiting and retaining research staff in Wales based on the makeup of the Welsh population, the Welsh geography (e.g. rural health) and the research strengths in Wales.

4.16. Facilitate the appointment of ‘pump priming’ posts to enable fixed term posts, secondments, placements and extensions to temporary posts.
4.17. Provide opportunities to enable agile regional and national mobilisation of workforce - so staff can work on studies across multiple sites and international collaboration.

Facilities & Estates
4.18. When planning estates and infrastructure, factor in capacity for research space to embed into service.
4.19. Ensure designated space dedicated to research within the NHS organisation.
4.20. Enable investment in the appropriate equipment and facilities to support research.

Data, IM&IG
4.21. Ensure that IM&IT and IG teams see research as a ‘normal’ part of the service provision and respond as enablers and facilitators of research.
4.22. Ensure that R&D features in the organisations’ digital strategy, ensuring good data collection and reporting and enabling access and making use of existing data sets for research e.g. through SAIL
4.23. Facilitate and be part of a national approach to the provision of IT services and software access to enable collaboration of teams across Wales.
4.24. Integrated IM&IT infrastructure so that research and care systems ‘talk’ to each other across health and social care.
4.25. Enable IM&IG support and access for efficient research dedicated systems such as Redcap.
4.26. Include research in patient’s electronic records and enable appropriate access to digital healthcare records for research staff with appropriate levels of consent, in order to support research.
4.27. Provide data analysis support and training and ensure that data is used to inform effective decision making.
4.28. The NHS organisation should enable better collaboration between digital teams and researchers.

5. Workforce Capacity and Capability

Workforce Planning
5.1. Research forms a key part of workforce planning.
5.2. Ensure succession planning for research staff within the NHS organisation on an ongoing basis.
5.3. Encourage multi-disciplinary working across the organisation facilitating cross working across specialties and disciplines in the development and delivery of research.
Support for Workforce Skills, Knowledge, and Personal Development

5.4. Support the workforce to develop their research knowledge and skills and ensure that the skills are maintained on an ongoing basis to facilitate sustainability and succession planning, linking in with HEIW and research training providers.

5.5. Build capacity among the workforce to develop and deliver research through ongoing training and mentoring (e.g. aligning junior training staff with experienced research active clinicians).

5.6. Enable access to support for staff who wish to undertake research through a user-friendly local advice service, advising on how to navigate the R&D environment, provide information on funding streams, advice on protocol development, advice on writing funding bids and support/ time to do this, statistical support, research design and methods. This should be available for new and experienced researchers and individuals working towards becoming Principal and Chief Investigators.

5.7. Empower staff to think of themselves as researchers.

Research Awareness Among the Workforce

5.8. Ensure that awareness of the importance of research, knowledge and skills are considered a core part of professional development across all NHS staff and is incorporated as part of ongoing PADRs and professional re-validation exercises.

5.9. Include research awareness information and training as part of the organisation’s induction for new staff and as part of mandatory training to ensure that all staff are research ready e.g. all staff to be GCP trained.

5.10. Run research awareness raising sessions for the workforce for example workshops from academic colleagues on how to design and deliver studies.

Protected Time for Research

5.11. Mandate protected time for research as part of day-to-day roles (to conduct research and develop research skills) among all staff in the workforce (across all levels and specialties) and maintain the protected research time for staff even when in clinical crises such as winter pressures.

5.12. Ensure that research is part of the role by including research in job descriptions, job plans and ensure that this is maintained on an ongoing basis.

5.13. Fund research specific dedicated roles within the workforce across all specialties and disciplines, who are clearly identifiable, with aligned national job descriptions and permanent contracts to ensure stability, across all disciplines, levels and sectors.

Research Careers

5.14. Invest in joint clinical academic roles across all specialties and disciplines who are qualified healthcare professionals who also work in academia, typically in research, teaching, or both- with clear pathways for support.
5.15. Value and promote awareness of careers in research across the whole spectrum to attract more people into research careers; from careers in research delivery (e.g. research nurses) and development (e.g. healthcare researchers).

5.16. Value and invest in NHS research careers and develop structured pathways for research career pathways for staff who wish to continue working in the NHS.

5.17. Incentivise staff to become research active through more diverse job roles and joint roles, promoting the individual benefits of being involved in research from a personal development perspective.

6. Research support, development, and delivery

Research Support
6.1. Ensure strategic management of NHS organisation’s portfolio, with a strong sense of direction and purpose, and consideration of how the research studies impact on wider portfolio and services.

6.2. Lead and participate in a wide range of research across all specialty and disease areas, across primary, secondary and community care, with an expectation from patients that research opportunities should be available at the point of care.

6.3. Ensure that research across all sectors is equally supported and valued, including research in primary care, community care and public health research, as well as equity of access to support and resources including having dedicated research staff to build capacity in these areas and efficient and consistent systems and processes to support.

6.4. Ensure support for research on population health, focusing on keeping people well in communities through prevention and early intervention, as well as supporting research to reduce health inequalities.

6.5. Support the development and delivery of research which has high policy relevance for example people and planetary health (climate change, environmental sustainability, impact on public/ patients and healthcare services).

6.6. Support the development and delivery of research which aligns with the population needs and directly meets healthcare priorities at a local, regional and national level, as well as research which assesses healthcare economics.

6.7. Ensure that equal value is placed on the development of new research and leading, participating in the delivery of research.

6.8. Map research activity across the NHS organisation on an ongoing basis and ensure that this information is shared with all staff and patients.

6.9. Ensure that research is well supported in the NHS organisation with an R&D team and support structure with clear roles and responsibilities.

Research Delivery
6.10. Provide adequate support and resources for the effective research delivery of studies, including investment in core funding for dedicated delivery staff to be appointed on a permanent basis.
6.11. Enable investment and buy in from NHS support services for research such as radiology, pathology, pharmacy.

6.12. Implement the national research delivery support programmes to enable streamlining, reduce duplication and consistency across Wales, including the Once for Wales model of research delivery.

6.13. Implement streamlined and harmonised systems and processes to support research and reduce burden for staff and patients.

6.14. Take a proportionate approach to research approvals and management of study activity based on study risk levels following a risk adapted approach.

6.15. Enable efficient study set-up and mitigate delays in opening studies within the NHS organisation by ensuring sufficient staffing and proportionate efficient approaches.

6.16. Ensure good project planning for individual studies- to ensure that studies are well delivered to time and target.

7. Governance and Accountability

7.1. Embed R&D into the NHS organisation’s KPIs to give leaders the remit to set directives and targets for departments and staff members/ managers.

7.2. Develop achievable, realistic performance metrics and targets for research at a departmental, NHS organisation and national level to measure research performance.

7.3. Develop consistent mechanisms for measuring the economic and social added value of research and its impact, including identifying cost savings.

7.4. Ensure that the NHS organisation has access to an efficient system to track all research and development and that performance data is accurately recorded and shared internally and externally with colleagues.

7.5. Ensure good governance and the right support structure for research.

7.6. Build research into the core governance of the organisation so that it’s integral to the organisation’s role.

7.7. Enable clear mechanisms for escalating blockers to studies- all the way up to CEO/ Board if necessary.

8. Public Involvement

Access to research

8.1. All NHS patients should have the opportunity to be part of research, all staff should encourage patient participation and the NHS organisation should be able to meet those expectations with equity of access for all.

8.2. Patients are proactive in seeking research opportunities and expect to be asked to participate in research so NHS organisations should consistently offer opportunities to their patients to get involved in research, so that it is part of the patient’s care experience.
8.3. Advise patients of research opportunities during treatment to raise awareness of patient and public involvement and provides opportunities for them to become involved.

8.4. Provide information about ongoing research to patients and the potential benefits for their treatment, letting the public know what research is taking place, thereby increasing transparency.

8.5. Ensure that the research being supported by the NHS organisation is visible and promote research opportunities to patients and the public for example through patient research newsletters, using the Communications and Engagement teams to promote research and increase participation.

8.6. Ensure that when discussing research, the language is understandable to facilitate accessibility, always avoiding jargon.

Public involvement

8.7. The NHS organisation should have a commitment to involve patients and the public in all research, developing meaningful relationships with patients and the public and taking a co-production approach wherever possible.

8.8. Involve patients and the public in driving the research agenda, in the strategic and operational decision making and in supporting changes to care design/implementation because of research through various mechanisms for example through regular focus groups.

8.9. Ensure that all research supported by the NHS organisation is patient centred, with patients involved in the development and delivery of studies, using patient feedback to inform on an ongoing basis.

8.10. Build trust with patients and the public on research related strategy and implementation.

8.11. The NHS organisation values and promotes public involvement and when the NHS organisation is involving patients and the public in research, appropriate and fair compensation is provided for their time and out of pocket expenses.

Support for Public Involvement

8.12. The NHS organisation should comply with the UK Standards for Public Involvement.

8.13. Provide support and training to the workforce and researchers to raise awareness, promote the importance of public involvement and provide information on how to involve patients and the public in a research context, involving members of the public in the training.

8.14. The NHS organisation will link research patient and public involvement into organisational approaches and NHS Wales initiatives for example the Community Health Councils, patient forums, the patient liaison advice service and the expert patient programme.

8.15. The NHS organisation is represented at the Health and Care Research Wales Public Involvement Alliance.
8.16. Establish a Public and Patient Involvement (PPI) group for research to further encourage and support public involvement.
8.17. Build confidence in the public through effective and well-planned PPI initiatives.
8.18. Develop mechanisms to build relationships and trust between frontline practitioners and patients.

**Equality, Diversity, and Inclusion**
8.19. Ensure that the patients and the public involved in research represent the makeup of the population (for example engaging people from urban and rural settings, from a wide range of socio-economic status and including people with protected characteristics) with equality, diversity and inclusion being key drivers to guide the involvement, whilst ensuring that underrepresented groups are engaged.

**9. Communications and Engagement**

**Communications**
9.1. Research has high visibility in the NHS organisation, features in communications plans and there is clear and consistent messaging in relation to research.
9.2. The value and importance of research is clearly demonstrated through the NHS organisation’s communications. There is wider education and awareness raising amongst all staff and patients about the added value of research in NHS Wales and its impact.
9.3. NHS organisations communications teams should raise the profile of research using a variety of methods such as promotional videos, campaigning, signposting, as well as innovative approaches such as communities of practice. They should focus on highlighting successes and promoting research opportunities but with a strong link to the national research picture to ensure consistency of messaging.
9.4. Use storytelling and case studies to demonstrate the impact of research on patients, the public and healthcare services- patient experience is key!
9.5. Ensure that research opportunities, outcomes and successes are well communicated to staff, patients and the public through a variety of tailored mechanisms including on social media, websites, posters (with QR codes), radio, newsletters, infographics, events and campaigns in order to suit different audiences.
9.6. Effective communication is key to engaging patients and the public with research and specific communications should be tailored to a patient and public audience, considering the specific needs and preferences of different communities to help increase engagement.
9.7. Use simple language in all communications about research, using basic language and avoiding technical jargon to ensure that the information is accessible to a wide audience.
9.8. Ensure that NHS staff are research aware and fully understand the impact on NHS healthcare services.

9.9. Create an accessible view of the NHS organisation’s research portfolio for patients, public and staff and continuously promote and review in line the NHS organisation’s research strategy.

9.10. Improve communication within and across the NHS organisation to promote research and individual studies- e.g. monthly/ quarterly research newsletters/ bulletins that go to all staff with information on opportunities and results synopsis in digestible/ accessible format.

9.11. Ensure dissemination/ feedback from research study outcomes across the organisation to staff and patients in a clear, accessible way through a research dissemination plan, to enable improved knowledge mobilisation. A variety of methods should be used to disseminate the results of research in order to reach different audiences effectively.

9.12. Celebrate and promote research success across NHS Wales and clearly demonstrate the impact of research both internally (e.g. on the intranet) and externally (e.g. on the internet) to share best practice and inspire people to get involved.

9.13. The NHS organisation is represented at the Health and Care Research Wales Communications Alliance.

Engagement

9.14. Develop approaches to engagement with the NHS organisation’s population on research e.g. through outreach events, workshops, education and awareness campaigns.

9.15. Raise awareness of research among local communities and use media outlets in community-based areas (for example in libraries and local hospitals) to improve understanding of research to help build trust and enhance engagement with research.

9.16. Engage with and build connections with community groups from underrepresented populations engaging them in research, facilitating empowerment and confidence to participate in studies and to shape the research agenda based on their needs.

9.17. Enhance collaboration between researchers and the communities they serve through a variety of mechanisms such as hosting local events, participating in community-led initiatives, and building stronger relationships with community organizations.

9.18. Link research to NHS Wales campaigns and strategic approaches which impact on health and wellbeing including initiatives such as ‘Making Every Contact Count’

9.19. Ensure that patients and public are research aware and are fully informed about research, its purpose and ongoing research opportunities.
**Networking**

9.20. Facilitate peer support networks, social and special interest networks with population groups with healthcare staff and patients, recognising that people are partners in the development and delivery of health care research.

9.21. Appoint and fund research champions within every department (e.g. at Executive Level) and for all specialties to promote research and raise awareness, promote projects, lead conversations around research and practice and signpost to support for research.

9.22. Appoint research link staff in each specialty and across disciplines (e.g. at an operations level) to work with the champions and cascade information to all healthcare staff, particularly on research opportunities which are available to patients.

9.23. Have a dedicated point of contact for disease/ specialty areas in the NHS organisation for improved communication between NHS/ higher education institutions, the third sector and industry to discuss the development and delivery of research in that area.

9.24. Connect researchers and members of the public to facilitate conversations and discussions about research.

**10. Partnerships and Collaboration**

10.1. Develop meaningful joint working between NHS organisations and higher education institutions through joint R&D strategies, alignment of vision, aims and objectives and a shared agreement on the impact measures for health and social care research, with annual reviews of progress of working together.

10.2. Collaborate with industry partners and develop efficient systems and processes to support commercial research and meet their needs and expectations.

10.3. Collaboration within a wide range of stakeholders from other organisations is strongly encouraged and facilitated across the organisation.

10.4. Engagement and networking with other NHS organisations across Wales is strongly encouraged, as well as collaboration on individual research studies, including collaboration with DHCW, HEIW and Data Cymru etc.

10.5. Joint working is encouraged across health and social care between NHS organisations, local authorities and with third sector care providers.

10.6. Develop strong links with third sector organisations in relation to research as they often have strong connections with local communities and can help promote research to a wider audience, increasing involvement and engagement.

10.7. Collaboration is encouraged at a local, national and UK, international level, whilst learning from others and mechanisms are established to enable this such as international buddy systems and global research networks.

10.8. Joint working is encouraged within the organisation at an interdisciplinary level and between associated departments and specialisms particularly training & education, improvement, innovation and research.
10.9. Create organisational links between research, service improvement, training &
education and innovation teams and develop aligned systems and processes to
ensure the links are meaningful.

10.10. Best practice is consistently shared and mechanisms are in place to spread and
adopt new ways of working.