



## Clinical Research Network Eastern

<b>REPORT TO PARTNERSHIP GROUP</b>	
<b>Date</b>	<b>22 March 2018</b>
<b>Title</b>	<b>National Institute of Health Research (NIHR) Clinical Research Network (CRN) Eastern: Annual Plan 2018/19</b>
<b>Author(s)/Exec Lead</b>	<b>Fiona Robertson, Chief Operating Officer/ Erika Denton, Host Executive Accountable Officer, NNUHFT</b>
<b>Purpose</b>	<b>Approval</b>
<p><b>1. <u>Background/Context</u></b></p> <p>Norfolk and Norwich University Hospitals Foundation Trust (NNUH) is the host organisation for the National Institute of Health Research (NIHR) Clinical Research Network Eastern. The Trust and CRN are delighted by the NIHR's endorsement of this network through being granted an extension to the contract for three years. Therefore with one year remaining on the current contract and now with a further three years of funding agreed, the network is well positioned to continue to improve access for patients into clinical research, develop the infrastructure across all providers in the six Counties and deliver research to meet the needs of the local population across the Eastern region.</p> <p>Our plans for 2018/19 build upon, and refine, our strategic initiatives developed over the past four years. Of particular note for 2018/19 is the formation of a new Cluster model to strengthen cross-divisional working and incorporate proven initiatives to maximise outputs and the integration of study support, particularly regarding delivering research studies within the set time and with number of patients required (High Level Objectives 2a and 2b see sections 2.3.5 and 2.8.6). We will also be piloting a range of proactive initiatives to increase the effective delivery of studies, for example, a regional research bank for Mental Health to deliver observational portfolio studies across the wider CRN geography (see 2.8.3). In the longer term, we will begin a scoping exercise with Partner Organisations to review how future funding might best be allocated, maximising Partners' buy in and their ability to develop long-term research plans.</p> <p>We look forward to incorporating these initiatives to ensure CRN Eastern continues to deliver and build upon its reputation for research excellence and maximises the opportunities afforded by its partners and co-location with world-class research institutes.</p> <p><b>2. <u>Key issues, risks and actions</u></b></p> <p>The Department of Health requires each financial year a detailed plan, from the network through the host organisation, to achieve contractual compliance with the Performance and Operating Framework.</p> <p>The plan is split into the following main sections (reference compliance section in plan for all areas) :</p> <ul style="list-style-type: none"> <li>• Governance and Management (including finance)</li> <li>• High Level Objectives (HLOs) – Cross regional and divisional key measurable access targets</li> </ul>	

- Specialty Group Objectives (SGOs) – Across the thirty clinical specialties each discipline is set specific regional targets to improve either research access or quality
- Strategic Work Streams – These include measures relating to Patient and Public Involvement (PPI), Communications, Business Intelligence, Workforce Development and Wellbeing, Industry and Study Support Service

The financial plan for 2018/19 has been agreed with the Partner Organisations and shows that a balanced plan has been constructed, with all Partners facing a reduction of between 3% and 6.5%, using the £19.27M funding envelope.

The NIHR requires for all areas of contractual non-compliance a detailed action plan, these are set out in the “Key Projects” section of the plan.

The key risks against compliance in this financial year are:

**High Level Objective 1** – Number of patients recruited into clinical studies. There is an expectation that more patients will be recruited into clinical studies each year. This year it is predicted that final recruitment into studies will be 42,000 patients from across this region. The collated predicted recruitment from all Partner Organisations for 2018/19 including primary care is 40,000. This is in part due to all organisations planning on receiving reduced funding and changes in regional boundaries (North Essex Mental Health Trust moving to North Thames LCRN).

Plans to mitigate this position include increasing the number of regionally supported studies working with current Chief Investigators (CI) and growing new CIs through mentorship and fellowship schemes, improvement in portfolio harvesting for “out of region” studies and driving a new work stream developing and targeting studies to local population disease prevalence.

**High Level Objective 2A** – Number of patients recruited into commercial studies within the agreed time and target. This has been a challenge for many of the clinical research networks and in particular within Eastern. Historically all Partner Organisations have contracted with the commercial companies without reference to the network often leading to over ambitious target setting. The target is 80% compliance and during 2018/19 the network improved from 52% to 73%. This target remains a key priority for all networks and whilst it is anticipated that the improvement during 2018/19 will continue to reach 80% in year this is unlikely in Q1 and Q2 and therefore the overall year performance is predicted at 75%. The new financial model being developed for 2019/20 will include an incentive scheme for those Partners delivering at 80% or above.

**High Level Objective 4, 5A and B** – Reaching the defined targets for study set up and first patient recruited into an open study has been a challenge for all networks due to a lack of robust data to underpin performance management. The implementation of a regional local data management system procured by the host, and mandated for all Partners, should allow performance improvement plans to be developed and monitored within year.

**Specialty Group Objectives:**

20 Specialty objectives rated green for compliance (already in place or will meet in year); Ageing, Anaesthesia and Pain Management, Critical Care, Dementia and Neurodegenerative Diseases, ENT, Gastroenterology, Health Services Research, Hepatology, Infectious Diseases, Injuries and Emergencies, Metabolic and Endocrine, MSK, Ophthalmology, Oral Health, Primary Care, Public Health, Reproductive Health and Obstetrics, Respiratory, Surgery.

Five Specialty targets rated amber for compliance (work plan shows high confidence will be met in year); Cardiovascular, Paediatrics, Genetics, Non-Malignant Haematology, Neurology.

Five Specialty targets rated red for compliance (work plan shows low confidence can be met in year); Dermatology, Diabetes, Mental Health, Renal and Stroke. See supporting text in plan.

### **3. Recommendation**

That the plan is approved by the Host Trust Management Board for submission to the Host Trust Board on 23<sup>rd</sup> March 2018.

That the Partnership Group approves the annual plan on Thursday 22<sup>nd</sup> March 2018.

The plan will be submitted in draft to the NIHR Co-ordinating Centre on 16<sup>th</sup> March 2018 and will be confirmed once the Host Trust Board has approved.