

Realizing the research potential of the NHS

The NHS is a unique institution globally, providing a gateway to the largest single pool of patients in the world, and caring for those patients from 'cradle to grave'. The NHS should provide the perfect environment in which to carry out high quality clinical research for the benefit of patients and, while a large amount of good research does take place, conducting clinical research in the UK is much harder than it need be.

Many of the barriers to research were highlighted in key reports from the Academy of Medical Sciences (2003) and from the Bioscience Innovation and Growth Team (BIGT) (Department of Trade and Industry, 2003). These reports brought into focus many of the issues that needed to be tackled to strengthen clinical research in the UK. Equally, the pharmaceutical, health-care and bioscience industries were providing clear signals that the UK was becoming a less attractive place to carry out research because of an increasing number of barriers, including speed and cost.

In his foreword to the BIGT report (Department of Trade and Industry, 2003) the Prime Minister highlighted the importance of the NHS to the future of clinical research: 'The UK, with a reformed National Health Service, has an opportunity to be at the forefront of research and development. Both patients and R&D based companies would benefit, for example, if more clinical trials of new treatments were done in the NHS, but it will not happen unless Government, Industry and the Health Service work together to get the structures right'.

The government recognized the need for further investment in clinical research and the importance of a collaborative approach through the Research for Patient Benefit Working Party (Department of Health, 2004) and the UK Clinical Research Collaboration (UKCRC) was created to drive the changes needed to strengthen the clinical research environment in the UK.

A shared agenda for change

The UKCRC is a partnership of organizations working to re-engineer the research environment and establish the UK as a world leader in clinical research. What makes the UKCRC unique is that it brings together the key organizations that shape the clinical research environment in the UK, including the main funding bodies, academia, the NHS, regulators, industry and patients. The strength of this joint approach means that the UKCRC is fundamentally about new way of working where complex longstanding issues are tackled by key stakeholders working together. This allows each organization to maximize its individual impact for the benefit of patients and the public.

What is also different about the current approach is that the UKCRC can tackle a very broad agenda of issues affecting clinical research, addressing the problems through a number of interconnected areas of activity.

Building up the infrastructure for research in the NHS

A key component of the UKCRC's agenda is to establish a UK Clinical Research Network (UKCRN). The UKCRN's task is to create the UK-wide research infrastructure in the NHS that will support the conduct and delivery of high quality clinical research studies. The focus is on the coordination of research, maintaining and enhancing the quality of studies, widening participation in studies and speeding up access to research results with the ultimate goal of ensuring that patients across the UK are receiving the best treatments available.

The central coordinating centre for the UKCRN has been operational for a little over a year and clinical research networks are already established in cancer and mental health. Four new networks covering medicines for children, diabetes, stroke, and dementias and neurodegenerative diseases are currently being created.

The creation of a clinical research network is an important part of the

Department of Health's new research and development (R&D) strategy *Best Research for Best Health* (Department of Health, 2006) and, working closely with the health departments in Northern Ireland, Scotland and Wales, the aim is to develop a comprehensive research infrastructure across the UK that will eventually address all areas of disease and patient need.

Strengthening the UK capacity for experimental medicine is also a key part of building the research infrastructure and should help to speed the translation of discoveries in basic science into the development of new treatments. The major funding partners within the UKCRC are currently investing over £100 million to build up the UK's capacity for this type of research.

Developing the research workforce

The benefit of this large investment in infrastructure can only be fully realized if there is an expert and motivated workforce to support research in the NHS. Work is ongoing to address issues such as training and career structure for professions that underpin clinical research in the NHS. Initially this has focused on improving career structures for clinical academics – doctors and dentists who combine research and education with their clinical practice. This has been a longstanding issue involving many different stakeholders.

Under the UKCRC umbrella the key players were able to develop, negotiate funding for, and implement a new integrated and flexible training pathway for clinical academics. Numbers of clinical academics had been in decline, but the new career structure aims to reverse this trend, stimulating development of the clinical research leaders of the future. What is notable about this is that it was all accomplished in little over a year, an incredible speed to tackle such a complex issue. This shows that new ways of working are possible. Building on the model established for clinical academic careers,

the UKCRC is now well underway with work to develop clinical research career structures for nursing and midwifery.

A coordinated approach

Developing research infrastructure and building up the research workforce are only part of the broad agenda of work that the UKCRC partners are undertaking. Other key activities include:

- Streamlining the regulatory and governance environment to facilitate high quality clinical research while ensuring that the rights, safety and dignity of patients are protected. The main theme of this work is to ensure consistency of process, interpretation and advice
- Developing both individual and institutional incentives in the NHS to ensure that high quality clinical research

becomes a 'core business' of the NHS and that involvement in research is appropriately rewarded

- Developing a coordinated approach to research funding. The recently published *UK Health Research Analysis* (UK Clinical Research Collaboration, 2006) examined the research portfolios of the 11 largest government and charity funders of health research in the UK and gave a breakdown of spending on all types of health research across all areas of health and disease. The analysis gave, for the first time, an accurate picture of health research funding in the UK which can be used to inform future research planning.

This is just a taste of the work that is currently underway and these initiatives are only the start of an ambitious and long-

term programme of work. What has characterized the first 20 months of the UKCRC is the speed at which action has been taken and the degree to which a very broad range of different organizations have been willing to work together to tackle the structural and cultural changes needed to revitalize clinical research in the UK. Much effort will still be needed to build a sustainable clinical research environment in the UK, but it is potentially an exciting time ahead for all involved in clinical research. Everyone has a role to play in achieving the vision of a world class environment for clinical research. **BJHM**

Liam O'Toole

Chief Executive

*UK Clinical Research Collaboration
London W1B 1AL*

KEY POINTS

- Harnessing the huge research potential of the NHS is key to creating a world class environment for clinical research in the UK.
- The UK Clinical Research Collaboration partnership brings together the key organizations that shape the clinical research environment in the UK and includes research funders, academia, the NHS, regulators, industry and patients.
- What is unique about this current approach is the degree to which a broad range of organizations are working together to tackle complex issues and the speed at which action is being taken.

Academy of Medical Sciences (2003) *Strengthening Clinical Research – report of an Academy working group*. Academy of Medical Sciences, London

Department of Health (2004) *Research for Patient Benefit Working Party – Final Report*. Department of Health, London

Department of Health (2006) *Best Research for Best Health: A new national health research strategy*. Department of Health, London

Department of Trade and Industry (2003) *Bioscience 2015: Improving national health, increasing national wealth*. Department of Trade and Industry, London

UK Clinical Research Collaboration (2006) *UK Health Research Analysis*. UK Clinical Research Collaboration, London (<http://www.ukcrc.org/activities/coordinatingresearchfunding.aspx>)