

TRUST BOARD

Date of Meeting	22 April 2013		
Title of Report:	Research & Development Directorate Report		
Author	Dr J Cotton, Research & Development Director		
Summary:	This report aims to update the Trust Board on the current status of Research and Development across the Trust and the opportunities currently in progress.		
Action Required by the receiving committee:	<table border="0" style="width: 100%;"> <tr> <td style="vertical-align: top;"> <input type="checkbox"/> Decision <input type="checkbox"/> Approval <input type="checkbox"/> Receive for Information <input checked="" type="checkbox"/> Receive for Assurance </td> <td style="border-left: 1px solid black; vertical-align: top; padding-left: 10px;"> Decision of Committee (to be entered after the meeting) </td> </tr> </table>	<input type="checkbox"/> Decision <input type="checkbox"/> Approval <input type="checkbox"/> Receive for Information <input checked="" type="checkbox"/> Receive for Assurance	Decision of Committee (to be entered after the meeting)
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Implications

Clinical

Without R&D patient choice will be directly affected, clinicians will be less engaged in modernisation agenda and unable to influence through evidenced based methodologies advancements in their specialist field.

Patients, carers or the public

Patients and Carers opt to participate in research to help them and to help others. Gaining access to new uses of drugs, pre licenced drugs and products gives them the opportunity of choice when standard treatment is no longer an option.

Resources

Finance, workforce, time, facilities

References

Health and Social Care bill, NIHR

Assurances linked to report subject

System Plan, Patient Safety, CQC Registration, NHSLA, Information Governance, Health & Safety, MHRA, NIHR.

Assurance framework number

(if on the Board Assurance Framework)

Risks Identified:

If support is not maintained for R&D the Trust will be restricted to offering limited opportunities for 'giving patients choice in accessing innovative care'

Include Risk Grade (categorisation matrix/Datix number/Risk Register Number)

HIGH AMBER – C4

BACKGROUND DETAILS

1. Research and Development

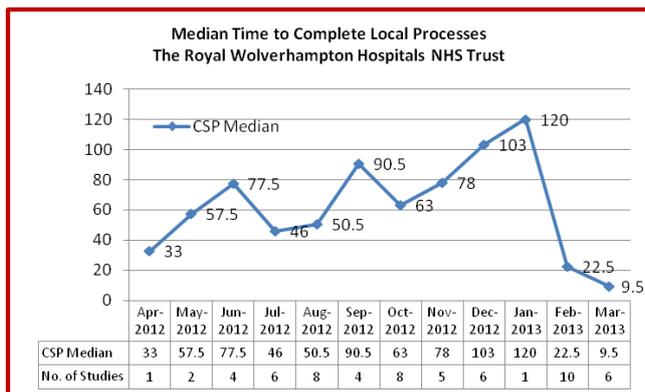
Overall 12/13 has been the best year yet for providing patients access to research across the Trust.

- Recruitment is up on any previous year since the R&D Directorate was launched
- Commercial income has recovered in the last quarter and enabled the R&D Directorate to meet its CIP target
- Systems and Processes were reviewed and updated last Autumn, allowing the Directorate to approve all new trials in under 30 days.
- RWT continues to retain its 'Partner status' with Quintiles UK (the largest Global Contract research Organisation)
- Increased RWT NIHR Portfolio status for 'home grown' studies.
- Increase in speciality leads status for Medical Physicians in year with Dr Singh being appointed a joint Speciality lead for Diabetes
- Trust Management engagement in research has continued to increase.
- Financial income to Departments supporting research has increased with capacity.
- Support Services work collaboratively with R&D to adhere to and maintain quality standards.
- Number of projects across the Trust has increased substantially.
- Specialist Research Staff employed to support the increase in trials has also increased in year.
- Sharing of 'best practice' is now commonplace for R&D and support services, to support neighbouring Trusts and Trusts outside of the Region.

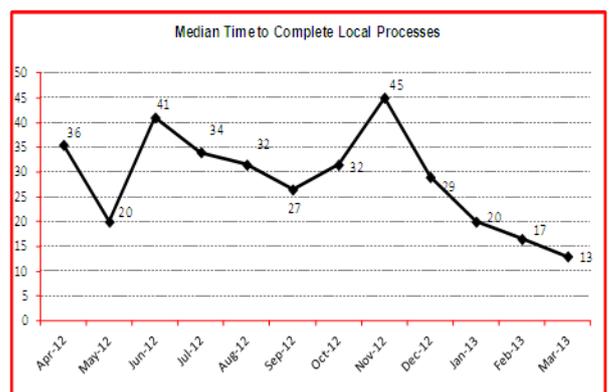
This report provides a summary of operational activity up to the end of March 2013, the formal reports from our WMCLRN will not be completed and up to date until 24th April 2013.

Performance against National Targets – Trust Approval

1. Median Number of Days to complete local processes



2. Median Number of Days to complete local processes – All Trusts



Higher Level Objective 3.	Measure	Assessment Criteria	Trust Current Status
To ensure efficient and effective systems and research delivery models are in place to facilitate the speedy set-up and start of NIHR CRN Portfolio studies	1b) Median time in calendar days for local checks to be completed and NHS permission issued	≤30 days  31 – 36 days  >36 days 	

The R&D Management team have continued to approve trials within the 30 day target and RAG rating remains green.

The Royal Wolverhampton NHS Trust Annual Recruitment – WMNCLRN reported (March 2013)

Number of Participants Recruited 08-09	Number of Participants Recruited 09-10	Number of Participants Recruited 10-11	Number of Participants Recruited 11-12	Number of Participants Recruited 2012-13	Target 2012-13
2711	2629	1856	1887	2877	3000

The recruitment of patients into portfolio trials by the end of March 2013 increased to 2877. This performance equates to 95.9% of the overall target agreed. The RAG rating should change to Amber. Due to the restrictions of the UKCHIC trial sponsor in uploading 299 additional patients recruited in year against this study, the actual total recruitment into portfolio studies should have been 3176 (105.8%). This issue has been outside of the Trusts control but we have agreement that the patient recruitment will be carried forward into the next financial year.

This is the best performing year to date since NIHR portfolio was established in 2008/9, but we could do better.

Overall Recruitment by Category

Research Categories	Total
Portfolio Non commercial	1097
Portfolio Commercial	193
Own account portfolio	1587
Own account	30
Non Commercial - other	32
Direct Commercial	84
TOTAL	3023

(Additional trial portfolio recruitment in year and NOT included in above table as sponsor will only account for performance in 13/14 equates to 299 additional patients included in trial activity.)

2. Performance Target 13/14

The 13/14 patient recruitment target for the Trust has been confirmed as 3,777. This target will be achieved and superseded based upon the current portfolio of portfolio of trials registered and approved by the R&D Directorate.

- A new diabetes study designed by Dr Singh and Dr Gillani has just been accepted on to the NIHR portfolio, recruit target is 16,000 participants for period June 13 - March 2014.
- Outstanding recruitment for the free light chain study equates to 1455
- UKCHIC study recruitment to be uploaded by sponsor equates to 299

Based upon this data it is feasible that the Trust could recruit in excess of 18,000 patients into clinical trials 13/14 across the whole portfolio. This will raise significantly the reputation of the Trust with the NIHR and Industry.

3. NIHR Update

The Trust will apply to host the West Midlands Local Research Network which will consolidate and all West Midlands Research Networks into one 'super host'. The first stage of the application process will be completed and submitted before the 24th April 2013. Monthly updates will be made to the committee. The Research budget for the LRN is anticipated to be worth £30m.

4. Events

The R&D Directorate Manager will address the Senior Managers meeting April 12th to raise the profile and importance of R&D.

A number of NHS Trusts R&D Managers will be visiting the Trust over the next few weeks to review R&D management systems.

Basingstoke NHS Trust– have visited and are now moving towards adoption of Finance system.

NHS Trusts from Epsom and Great Yarmouth are booked for April 2013.