

OUR VISION:

Improving The Health Of Our Community With High Quality Research

KINGSTON HOSPITAL NHS FOUNDATION TRUST RESEARCH STRATEGY 2019-2022

OUR MISSION:



To allow all patients and staff to **Be Part of Research**.¹ Embedding a culture of research excellence throughout the whole Trust supported by a highly skilled knowledgeable workforce.



To support, and develop, world class research in collaboration with our partners to improve the current and future health of our population.

Key parts of our strategy

Fully integrate research into all aspects of clinical care. Address the unmet needs of our community by supporting key strategic objectives, including achieving outstanding in the new CQC inspection criteria.



Improve Patient and Public Involvement (PPI) at all levels of the research project, especially encouraging patients and carers to access “Be Part of Research”.



Embed research within every clinical department by including it formally within job planning.



Build a dedicated Clinical Trials Facility.



Work with our academic partners at Kingston University to become Chief Investigators, attract funding and answer research questions, which support local population priorities in healthcare.



Increase overall research activity by 48% to 2,500 annual patient accruals by 2022. Attracting sustainable funding from NIHR, CRN, Grant, Charity and industry and non-industry income.



Executive Summary

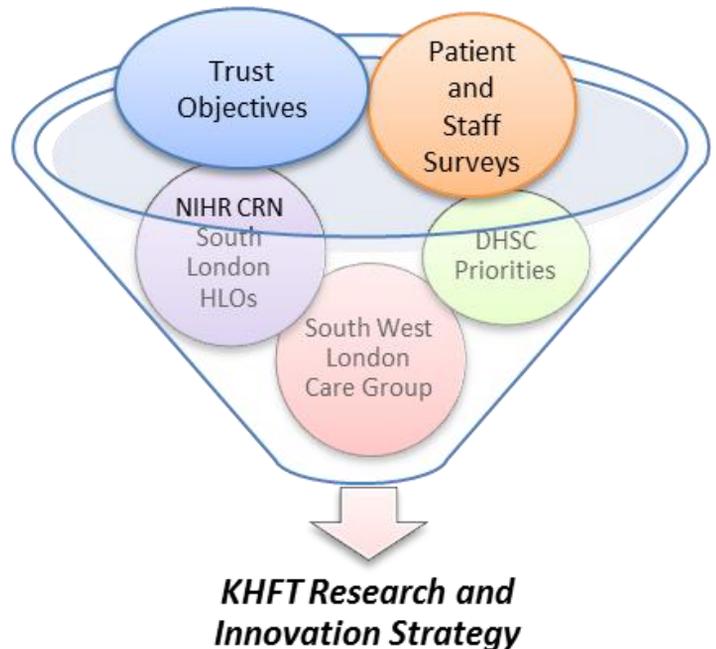
Research is a frontline service. Growing evidence shows that developing a research-active culture can bring benefits for patients, clinical staff and the NHS. Research develops superior and more cost-effective methods of treatment, promotes innovation and allows opportunities for staff development. Research-active Trusts have better performance and outcomes.^{2,3,4}

The NHS Constitution and the Health and Social Care Act (2012) place a statutory duty on the NHS to promote research. In September 2018, the CQC formally recognised clinical research activity in the NHS as a key component of best patient care. This focuses on how well an NHS Trust, as a whole, supports research activity through strategic and divisional leadership, patient opportunity and access to research. This strategy will address how KHFT will meet these components to ensure that the Trust remains outstanding at the next CQC inspection, and integrate research to deliver its local and national objectives in key priority areas of patient care.

National Context

The National Institute for Health Research (NIHR) is the largest national clinical research funder in Europe with a stated aim of improving “the health and wealth of the nation through research”. The NIHR provides a range of research delivery support funding, including 15 regional Clinical Research Networks (CRN), which support clinical research infrastructure throughout England.⁵

The NIHR CRN South London has set a number of Higher Level Objectives (Appendix 2). Funding for CRN regions and individual organisations ultimately reflects performance metrics in these objectives. Layered over this are the DHSC requirements. These include ring fencing 2% of budget to target local health needs and DHSC priority areas such as; Asthma and Chronic Obstructive Airways Disease (COPD), Cancer, Dementia, Diabetes, Mental Health, Heart failure and Stroke. It is clear that these priority areas will match many of the recent South West London Care Group Priorities and those of KHFT, allowing national priorities to be interpreted on a local level.

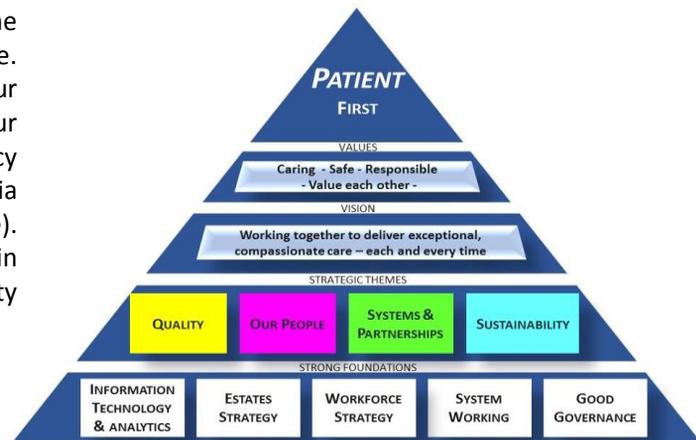


Local Context

In 2014/2015, KHFT was the lowest ranked organisation in CRN South London (incorporating primary care, acute and mental health Trusts) for research activity. In the last 4.5 years, KHFT has transformed from a research inactive organisation to one highly capable of delivery of high quality nationally important research, meeting criteria for research capability funding for the NIHR. In the last 2 consecutive years (2016/17 and 2017/18) Kingston was placed top of the National NIHR leader board for increase in research activity for acute trusts.

These results show how KHFT has huge potential in delivering research. Our excellent performance nationally since our first strategy in 2015 shows how well we have used and grown our limited resources to develop a **bespoke** KHFT model of research. In order to develop a sustainable model of research delivery building on this success, we need to focus on some key opportunities and recognise some important areas for development.

We are a medium sized secondary care facility with some areas of significant strategic and clinical importance. Including our outstanding maternity unit, our eye unit, our cancer care (as a partner with Royal Marsden Trust), our high dementia prevalence and our busy emergency department. We are close to local stakeholders in academia and education (Kingston University and Kingston College). We need to provide research in the context of, and in collaboration with, our local health care and community care providers.



“Research enables me to be a sharer of knowledge and feel like I am being listened to and adding value to our healthcare” – Patient A



The KHFT Research Department must be an integral part of the mission to put the “Patient First” . We must improve the quality of patient care, developing a substantive and committed workforce, ensure our patient care is connected. By acting as a hub of learning and support for our local partners in community, primary and secondary health care, social care, academia and industry, we can meet the needs and priorities of our local population.

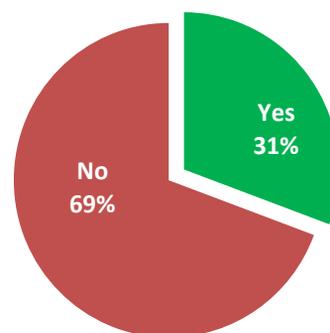
“Collaborating with patients like this is yet another positive example of how staff at Kingston Hospital care, and want patients’ involvement. Together we can improve new treatments and get the best medication for sick patients.” – Patient B

This strategy has been developed following an extensive consultation process including; patient surveys, staff surveys and a core research group brainstorming workshop as set out in our SWOT analysis (Appendix 1).

AIM 1: Empower Patients As Partner in High Quality Research

BACKGROUND: *In our most recent survey in 2019, 69% of patients were unaware that KHFT was involved in research. However a huge 89% of patients and carers (n=129) thought research was important or highly important. Much of our success has been driven by our innovative approach to patient engagement – we were one of the first Trusts in South London to appoint a Patient Research Ambassador and had highly positive feedback from our first ever International Clinical Trials Seminar (2018) which was open to staff, patients and members of the public.*

Percentage of Patients Aware KHFT is Research Active⁷



Objective 1.1 Enable More People To Engage In Patient and Public Involvement (PPI) Activities

- We will maximize opportunities for PPI in research, by raising awareness of our ‘Be Part of Research’ campaign, the new NIHR campaign launched on 20 May 2019¹.
- We will initiate Quality Improvement Projects to review current barriers to PPI and facilitate new strategies to ensure that there is equality in access.
- We will initiate Quality Improvement Projects to improve the use of volunteers to enhance the service we provide to our patient partners.
- We will engage with Patient Research Ambassadors to provide them with specialist advice, training and access to meetings, research portfolio and involve them in all aspects of research design, delivery and the portfolio.

Objective 1.2 Provide more research opportunities for our patients and the wider community

- We will further develop our portfolio of NIHR studies ranging from important observational to complex interventional research to provide the broadest range of research opportunities to the broadest number of patients who wish to participate (60% of our patients would like to be contacted about research if it becomes available in the future).
- We will work with our local academic partners at Kingston University to build an academic healthcare partnership for our local community with high quality funding applications for projects that reflect questions important to our population.
- We will collaborate with local trusts and partners to increase grant applications for innovative care pathways in line with the South West London’s objectives to improve care across the 6 themes.
- We wish to answer questions outside the boundaries of one organisation. Growth of cross-organisational regional opportunities with our community partners is vital to enable equity of access to research and we will continue to look for new projects to build on this partnership.

Objective 1.3 Improve Patient Safety And Care By Demonstrating And Implementing Impact

- We will work with our PPI partners to disseminate research findings in an accessible and innovative ways that will maximize engagement from patients groups and provide awareness to the general public

AIM 2: Support and nurture a sustainable workforce with the skills to deliver world class research

BACKGROUND: *Research active organisations have higher levels of staff recruitment and retention⁸. With a small research delivery staff from the outset, KHFT research team has had to be very lean and flexible to deliver cross-specialty research support which is rare within the research community. We also believe that Research is Everybody's business⁹. We have challenged the traditional model of only developing Consultant Investigators by successfully promoting non-consultant investigators in a midwifery, dermatology¹⁰ and resuscitation.*

“Without research we cannot move forward. It is vital. It is important to connect research nationally and internationally; to give more credit to the research conducted.” – Patient B

Objective 2.1: Develop our Successful Model of a Bespoke Workforce

- We will provide a flexible research workforce that can deliver all aspects of our research portfolio with staff empowered to expertly support the delivery of a study.
- We will grow our research nurse secondment and bank posts and offer a opportunities to internal applicants with an interest in research to develop their professional and research delivery knowledge and skills.
- We shall introduce an electronic rota system across our research workforce, to improve efficiency, oversight, productivity and contribute to staff well-being.

Objective 2.2: Develop early career pathways for research staff

- We will meet the new key HLO for NIHR and provide opportunities to new early years researchers. By 2022, we will have supported 15 new researchers in gaining access to NIHR Greenhoots funding streams.
- We will provide applicants with research career progression opportunities by ensuring that there are a number of skilled roles across bandings, and that staff are supported and encouraged to develop skills and seniority to allow them to access these.
- We aim to establish a regular apprenticeship model within the research department building links with local education partners.

Objective 2.3: Building upon the skills of our workforce and volunteers

- We will provide training programs to equip all staff and volunteers to contribute to the achievement of our strategic goals and their agreed personal development.
- We will continue to be influencers within the workforce steering committee for the South London CRN to provide equal opportunities to education and training for clinical and non-clinical research staff
- We will provide PI training, Pharmacy fundamentals training and GCP training in-house.
- We aim to be a staff resource by identifying and accessing the most appropriate funding, academic mentorship and training opportunities.
- We will establish a formal induction for new research staff and staff new to Management & Leadership roles. Access to apprenticeship leadership training when appropriate will be supported.

Objective 2.4: Develop the future workforce

- We will work with Clinical Leadership throughout the Trust to establish a means tested approach to reflect the important research activity of clinical staff who are in Principle Investigator roles. To embed research into clinical care, a suggested model of 0.25 PA awarded per PI with a cap at 0.5 PA. This will cost an estimated £78,000 and will be absorbed into individual service lines.
- We will identify and support emerging talent and provide academic mentorship and training, using the trust talent pool and work with the education team to provide trainees with opportunities to gain experience as investigators on NIHR trials during their time at KHFT.
- We will ensure established succession plans in place for key research posts and that those identified individuals have the necessary support.

AIM 3: Research Will Be Visible In All Aspects Of Day To Day Business Of Trust

BACKGROUND: *Although there has been huge increase in research awareness, together with patient and staff access to research; visibility of research across the trust remains restricted. As the workforce, workload and volume of activity increases, research must be promoted as a core part of every clinical department.*

“It can make a negative experience such as an illness into a positive experience for both patients and clinician.” – Staff A

Objective 3.1: Increase Staff Awareness Of Research

- We will actively increase Staff awareness of research, both external and internal, through engaging with our regional research community
- All clinical areas will be research active by 2022 with weekly drop in research sessions to provide support and guidance to both community and secondary care sectors.
- We will actively engage with clinical leadership across the Trust to embed research into patient care pathways so that every care group has a nominated research lead to expand awareness.
- Research staff will be visible in Research uniform throughout the clinical areas.

Objective 3.2: Demonstrate Research Impact

- We will collect and publicise research impact and outcome data through digital and traditional media both locally, regionally and nationally.
- We will highlight to staff the links between research evidence and practice.
- We will provide evidence and share results with Divisional teams to raise awareness of the value and contribution research makes to practice, thanks to our staff's involvement.

Objective 3.3: Build A Clinical Trials Facility

- We will work with the space and workforce plans to ensure that the CTF is purpose built to accommodate and facilitate a patients research journey. Efficient, high performing, embedded research will attract further industry partners and income.
- We will invest in innovative approaches to work space to accommodate the growing research department.
- Satellite research facilities and teams will be embedded in clinical departments as appropriate.
- We will have aseptic pharmacy facility to improve access to clinical trials for all of our patients

Objective 3.4: Deliver research that improves our services

- We will link closely with the Trust Quality Improvement program, the South West London Care Group, CRN South London and the DHSC priorities and align research activity with these.
- We will provide a interactive platform for staff to submit research ideas, questions and initiatives and explore links with academic partners, to enable these ideas to be investigated in the most appropriate way with expert sponsorship.
- We will support staff to challenge conventional practice, and facilitate research that identifies best practice and delivers a step-change in clinical performance at KHFT.
- Acknowledging the importance of sustainability and the current funding incentivisation, we will increase research income through focusing our research on areas which are of strategic importance and likely to have most impact on our services and the wider NHS.

MONITORING AND REPORTING

The Research and Innovation Board will provide oversight of the implementation of this strategy via quarterly meetings and the Trust's Board will review progress on a yearly basis. HLOs will be reported against and detailed business plans will be produced that identify yearly objectives, goals and describe how the implementation of the strategy will be measured, monitored and managed.

AIM 4: Work with our regional partners to grow research for all of our community

BACKGROUND: KHFT is in a prime geographical position to grow its activity through closer working relationships with our local stakeholders in healthcare, community, education, and academia. This is key in order to focus research projects and trials on the needs of our local community.

Objective 4.1: Focus on and foster our priority areas of research where we are, or have the potential to be, leaders in research excellence.

- We will put patients first and ensure that our research is of high impact and has a clear focus on improving patient outcomes, experience and care as measured by published papers in peer reviewed journals, changes in local, national or international practice or other important markers.
- We will ring-fence some local funding available to all research active staff, for small grants and dedicated research time in order to deliver research activity, or generate the evidence for new research proposals and external funding by 2022.
- We will work with our partners to increase successful grant writing skills and have at least 2 successful peer review grants by 2022.

Objective 4.2: Increase partnership working to maximise our research potential

- We will increase partnership working with local partners and the community to increase our research potential including; sharing good practice, processes and learning resources where appropriate.
- We will work with the Kingston Hospital Charity to raise funds for local projects.
- We will work towards a memorandum of understanding with our local academic partners, Kingston University, to support them in designing and delivering their translational research at KHFT.
- We will establish agreements with our regional partners to ensure efficient and seamless working, maximising research productivity and income, and removing bottlenecks and delays at project start-up.

Objective 4.3: Become The Central Community Hub For Research Governance And Delivery

- We will become a resource of advice, guidance and policies for public and community use for all our partners.
- We will participate in national work streams placing KHFT at the forefront of developments and then providing access to this to our local providers.

AIM 5: Increase research activity

BACKGROUND: Kingston Hospital has had an exponential growth in research over the last 4.5 years. In order to provide equity of access to all our patients, clinicians and departments, we need to continue to expand, and maintain our reputation for high quality, efficient research delivery. The success of the aims 1-4 will drive the success of aim 5.

Objective 5.1 Develop New Strategic Areas Of Research Activity

- We will increase research activity in key areas of the trust including (but not limited to) Diabetes, Emergency Care, Cardiology, Mental Health and Ageing care.
- We will consider more complex and interventional trials as our experience grows.
- We will recruit over 2500 patients to research studies across the hospital by 2022. A 48% increase.
- We will identify relevant funding streams to support growth in inactive research areas, or to support staff who want to increase research activity within their area.

Objective 5.2 Become a Preferred Industry Partner

- We will increase industry activity in care areas that already have commercial experience and open commercial trials in another two areas by 2022.

Objective 5.3 Meet Regional and National CRN HLOs

- We will aim to have over 80% of studies open within 40 days of the site being selected.
- We will aim for patients to be recruited within 30 days of the study opening, when these studies include high patient populations within KHFT.

Objective 5.4 Grow our Research Core Staff Appendix 3

- The core research infrastructure will increase to ensure we deliver the above aims and objectives with the following additional posts being created; FT B6 Midwife, FT B7 Delivery Manager, B7 Governance Manager, 2 B5 Research Delivery Secondment posts, B3 Administrator, Administrator Apprenticeships and Volunteer Researchers. **(Appendix 3)**

Appendix 1: SWOT Analysis

Strength

- Local R&I infrastructure which has organically grown to meet the needs of our Trust including Head of Research and Innovation and a local Research Facilitator providing expert, locally appropriate advice, governance and facilitation on all research activities.
- Centrally managed Research delivery staff to support activity across a wide and varied research portfolio and clinical departments.
- Lean research team, who are flexible, agile and adaptive in the range of research activity support they provide. Increasing recruitment potential with limited resources.
- Administrative and data entry support.
- Strong performance for recruitment to time to target for NIHR portfolio studies, with the majority of research studies closing green.
- Successful with Greenshoots funding applications, growing the funding and opportunities for Consultants and Senior Nurse to be PIs within their area.
- Engaged and informed patients and public population who are keen to participate in research.

Weakness

- Clinical research is still not considered 'core' business. The majority of areas do not fully integrate research with standard of care, research is sometimes seen as 'someone else's job'.
- A number of clinical areas are still not research active or have a very limited portfolio reducing vital opportunities for large patients populations.
- Research portfolio is matched to clinician interest – not always aligned with clinical priorities or disease incidence.
- Priorities – conflicting stakeholder priorities, funding opportunities and too great a focus on metrics
- Cancer research is limited by lack of access to Aseptic Pharmacy facilities and all delivery staff are funded and managed by Royal Marsden Hospital
- Funding streams are largely relied on from the CRN, thus stability of workforce is often threatened.

Opportunities

- Growing Collaboration with Kingston University to grow home-grown portfolio and initiating translational research opportunities to become a preferred healthcare partner.
- Investors in people. Secondment research nurse opportunities to provide Band 5 Staff with research experience, training and development .
- Growing collaborations with local Trusts including but not limited to, SGUH, EStH and Croydon. Working together to increase opportunities for the wider community.
- Great relationships and collaboration with the South London CRN – increased opportunity to be kept informed of the national and international research objectives and opportunities including commercial and industry projects.
- Streamlined and collaborative working with Trust improvement and audit teams and programs.
- Charity funded projects, equipment and staffing.
- Growing Industry and commercial portfolio.

Threats

- Huge pressure on clinical teams and financial position of KHFT. Limits ability to maintain and expand research, risk of decreased activity and income. Risk of not meeting national research priorities and performance metrics.
- Attitude that research is not core business – limits ability to expand and increase research, limits patients ability to be involved and access innovative treatment options, potential for conflict over resources, risk of not meeting national research priorities and performance metrics.
- Core clinical staffing, facilities and resource pressure – essential for research delivery, investment and engagement are required for maintain research activity and income.
- Funding for PI time is restricted to annual income. Once funds for PA time has finished at the end of the funding, commitment and recognition for activity is diminished and threatens the continuation of performance.
- Funding provided to deliver research is not adequate to support clinical activity – research seen as unfunded and is not prioritised.
- CRN Funding unlikely to subsequently increase at current rate. Thus financial stability of a growing department is under threat.

Appendix 2: NIHR CRN HLOs

HLO	Objective	Measure	National Target	LCRN Target
1	Deliver significant levels or participation to NIHR portfolio Studies	A No. of participants recruited to NIHR CRN portfolio studies	TBC	56,382
		B No. of participants recruited to commercially contract NIHR Portfolio Studies	TBC	1,723
2	Deliver NIHR CRN Portfolio studies to recruitment target within the planned recruitment period	A Proportion of commercial contract studies meeting or surpassing their recruitment target during their planned recruitment period	80%	
		B Proportion of non-commercial studies meeting or surpassing their recruitment target during their recruitment planned recruitment period	80%	
3	Increase the number of studies from the commercial sector with support from the CRN	A Number of new commercial contract studies entering the NIHR CRN portfolio		
		B Number of new commercial contract studies entering the NIHR CRN Portfolio as a percentage of the total commercial MHRA CTA approvals for Phase II-IV studies	75%	
4	Widen participation in research by enabling the involvement of a range of health and social care providers	A Proportion of NHS trusts recruiting into NIHR CRN portfolio Studies	99%	
		B Proportion of NHS Trusts recruiting into NIHR Portfolio Commercial Contract Studies	70%	
		C Proportion of General Medical Practices recruiting into NIHR CRN Portfolio Studies	45%	
		D Number of non-NHS Sites recruiting into NIHR CRN Portfolio Studies	TBC	
5	Deliver significant levels of participation in NIHR CRN portfolio DeNDRoN studies	Number of Participants recruited into Dementias and Neurodegeneration (DeNDRON) Studies on the NIHR CRN Portfolio each year	25,000	1,251
6	Demonstrate to people taking part in health and social care research studies that their contribution is valued	Number of NIHR CRN Portfolio study participants responding to Patient Research Experience Survey, each year.	10,000	
7	Reduce study site set-up time for NIHR CRN Portfolio studies by 5%	A Average study site setup time for commercial contract studies, at confirmed Network sites (days)	TBC	
		B Average study site set-up time for non commercial studies (days)	TBC	

Glossary

NHIR	National Institute for Health Research. Government funded body to improve the health and wealth of the nation through research.
CRN	Clinical Research Network – There are 15 clinical research networks. Kingston Hospital sits in the South London Clinical Research Network.
KU	Kingston University. One of Kingston Hospital’s local academic partners.
DHSC	Department of Health and Social Care.
PPI	Patient and Public Involvement.
HLO	Higher Level Objectives – These are driven down from the National Institute of Health Research to the local Clinical Research Networks.
CTF	Clinical Trials Facility – A bespoke to enable staff and patients engages all aspects for the study are funded
Industry	Commercial Sponsors. This can range from pharma, medical technology companies and Clinical Research Organisations (but not limited to these). A commercial sponsor provides additional funds and ensures all aspects for the study are funded.
SGUH	St Georges University Hospital
ESTH	Epsom and St Hellier Hospital

References

1. **Be Part of Research** <https://bepartofresearch.nihr.ac.uk/>
2. Baris A. Ozdemir et al., **Research Activity and the Association with Mortality**. PLOS ONE 2015 10(2): <https://doi.org/10.1371/journal.pone.0118253>
3. Downing A, et al., **High hospital research participation and improved colorectal cancer survival outcomes: a population-based study** Gut 2017;66:89–96. <http://dx.doi.org/10.1136/gutjnl-2015-311308>
4. Jonker, L & Fisher S.J. **The correlation between National Health Service trusts' clinical trial activity and both mortality rates and care quality commission ratings: a retrospective cross-sectional study**. Public Health, 2018 1Volume 157, Pages 1-6
5. **National Institute Health Research** <https://www.nihr.ac.uk/>
6. Crooks, J. et al **Kingston Hospital: Most Improved Acute Trust for Research 2 Years in a Row**. R&D Forum 2019. Poster Abstract.
7. McKenley, I et al. **Patient and Public Survey Conduction in KHFT**. May 2019.
8. **Organisahtion benefits for a strong research culture in a health service: a systematic review**. Katherrine Harding A B D, Lurne Lynch A, Judi Porter A C and Nichohlas, F. Taylor A Australian Hleahrt Review 41(1) 2016
9. **The Patient Research Exchange** <https://www.patientresearchexchange.org/>
10. Barea, A., Reeken, S. **An autonomous nurse-led psoriasis clinic to deliver patient-centred and research focused Care** . Dermatological Nursing, 2018, Vol 17, No 4

Appendix 3:

