

## Can specialised commissioning reforms strengthen research and innovation? *Webinar summary*

### Introduction

On 1 June 2023, the Federation of Specialist Hospitals and the Shelford Group hosted a webinar for patient organisations, system leaders and providers to explore how they can work together to deliver excellence in research and innovation, within the context of specialised commissioning reforms. This webinar was the final in a series on specialised commissioning, organised in collaboration with The Shelford Group, NHS Providers, The Federation of Specialist Hospitals, NHS Confederation and the Specialised Healthcare Alliance.

Chaired by Lawrence Tallon (Deputy Chief Executive, Guy's and St Thomas' NHS Foundation Trust), the expert panel consisted of:

- Professor Dame Pamela Shaw, Professor of Neurology, University of Sheffield, Director of the Sheffield Institute for Translational Neuroscience (SITRaN)
- Dr Richard Grocott-Mason, Chief Executive of the Heart, Lung and Critical Care Clinical Group at Guy's and St Thomas' NHS Foundation Trust
- Jennifer Harris PhD, Director of Research Policy, Association of the British Pharmaceutical Industry (ABPI)
- Harper Brown, Director of Integrated Specialist Care, Hertfordshire and West Essex Integrated Care Board

The discussion, alongside questions from the audience, considered the role that specialised services play in driving research and innovation and the challenges and opportunities that specialised commissioning reform bring to that important objective. The webinar covered the following topics:

- The role that specialist providers play in driving forward research and innovation
- How best to drive research and innovation throughout the system
- Challenges and risks for research and innovation, linked to specialised commissioning reforms
- Opportunities and solutions to strengthen research and innovation

A more detailed thematic summary of each topic is provided below.

### Key topics of discussion

#### **The role of specialised service providers in driving forward research and innovation**

- Providers who deliver a significant number of specialised services play a fundamental role in driving research and innovation.
- Clinical focus and deep understanding of all aspects of a condition and an established clinical trials infrastructure, support the delivery of clinical trials at scale and pace and have led to significant developments, including world-leading clinical trials, groundbreaking research, developments of new treatments and specialist surgery.

- The set-up and focus of specialist providers, for example delivering clinical practice in an environment which is supportive of translation and implementation, is attractive for commercial organisations, which in turn helps to drive partnership in research and innovation and is an essential component of a globally competitive research and innovation industry.

*Key takeaway: Speakers recognised the particular role that providers of specialised services play in driving forward research and innovation, and how that strength needs to be built upon, not diluted, as a result of specialised commissioning reform.*

### **How best to drive research and innovation throughout the system**

- Whilst recognising the critical role that specialist providers play in research and innovation, there was agreement that this needs to be better harnessed and cascaded through the system.
- Notwithstanding the pressures currently faced across the NHS, it would be desirable for specialist centres to support district general hospitals (DGHs) to deliver and support trials and the delivery of innovation where appropriate and feasible, developing training programmes to get local centres up to speed to engage in trials and to administer or support the monitoring of innovative therapies. Where possible, developing satellite models of care where specialists can travel and provide innovative, specialist care locally to where patients live, would be positive.
- However, it was also recognised that providers delivering specialised services required scale and expertise to ensure good patient outcomes and value for money for the NHS. Better integrated models of specialist care and an enhanced DGH offer would require specialist support, advice and guidance and close collaboration with specialist centres.
- Speakers and participants discussed the relationship between innovating per se and disseminating innovative and effective practices throughout the system for patient benefit. An example raised was the development of an AI tool by the Children's Hospital Alliance, deployed at scale across ten Trusts, but which now risks stalling through a lack of central innovation funding, and challenges in negotiating for individual ICBs to fund individually or collectively.

*Key takeaway: The ability to drive research and innovation can come from all parts of the system. However, in order for initiatives to have impact on the ground and for these to deliver real patient benefit, research and innovation initiatives will continue to require focus, funding, scale and coordination.*

### **Challenges and risks for research and innovation, linked to specialised commissioning reform**

- Participants noted the rationale for the specialised commissioning reforms, including improving patient outcomes and integrating patient pathways. However, participants also noted that the impact of the reforms on research and innovation had not been a key driver of the changes to specialised commissioning.
- A lack of strategic focus on research and innovation when thinking through the impact of specialised commissioning reform therefore presents substantive risks, and current strengths could be diminished, to the detriment of both national policy goals and patient benefit.

- There is a lack of clarity over how research and innovation will be funded within the new regime, and how funding decisions will be coordinated, and funding distributed.
- More broadly, greater thought needs to be given to how current structures in the innovation ecosystem, such as Academic Health Science Networks (AHSNs), need to be evolved to support the changes across a wider healthcare system landscape.
- There is a well-evidenced weakness in the current UK system relating to the volume and quality of clinical trials, and tangible progress needs to be made to overcome the current status quo.
- It would be important to ensure that changes in specialised services did not lead to a deterioration in the standard of care. If the UK fails to keep pace with global practice, it will become increasingly challenging to attract clinical trials in the future as trials would need the right comparator arm to be in place.

*Key takeaway: The impact on research and innovation from specialised commissioning reform needs greater focus in order to mitigate risks to current strengths, particularly in light of wider ongoing issues relating to system funding, clinical trial performance and workforce challenges.*

### **Opportunities and solutions to strengthen research and innovation**

- The recent review on clinical research by Lord O’Shaughnessy is welcome, and the pace at which recommendations have been developed shows an encouraging focus from policy makers on how to tackle challenges and build tangible progress.
- System reform can pave the way for move innovative ideas, including the opportunity to develop R&D at the local level. For example ICBs being motivated to position themselves as a go-to place for the implementation of trials, either on an individual or collective basis, and the development of a shared care record to become the systematic backbone for dedicated research.
- It will be important to ensure that ICBs harness the value of research and innovation in their local systems to UK plc. ICBs should consider how best to embed research and innovation in their strategies and operational plans and ensure executive sponsorship. This could strengthen visibility and prioritisation of research and innovation at a local and national level.
- Where national oversight and planning makes sense, for example in scaling up research and innovation solutions that are more appropriate across a national footprint, this must be retained and there needs to be greater clarity regarding what is possible nationally compared to locally.
- System change could also allow for the initiation of a lot more bottom-up, frontline practice led innovation that could be models for wider rollout across the country.

*Key takeaway: System change does provide new opportunities for research and innovation, and change should bring necessary and welcome policy focus. However, a focus on research and innovation should be maintained through the reforms to specialised commissioning to ensure risks are mitigated and opportunities realised.*

### **Next steps**

The webinar write-up will be shared with NHSE and we will continue to engage with them during the transition year, alongside our partners.