

TRUST BOARD PUBLIC – MAY 2015

Agenda Item Number: 95/15  
Enclosure Number: (4)

<p><b>Subject:</b></p>	<p>Board Performance Report, Quarter 4 – 2014/15 Research and Innovation</p>
<p><b>Prepared by:</b> <b>Sponsored by:</b> <b>Presented by:</b></p>	<p>Dr Greta Westwood, Deputy Director of Research &amp; Innovation Ursula Ward, Chief Executive Dr Greta Westwood, Deputy Director of Research &amp; Innovation</p>
<p><b>Purpose of paper</b></p>	<p>Research activity by Clinical Service Centre, income and performance against national benchmarks <b>For Information only</b></p>
<p><b>Key points for Trust Board members</b> <i>Briefly summarise in bullet point format the main points and key issues that the Trust Board members should focus on including conclusions and proposals</i></p>	<ul style="list-style-type: none"> <li>• This is the second research performance report to the Board.</li> <li>• CSCs have now received Quarter 4 report.</li> <li>• CSCs have nominated all CSC Research Leads and first meeting planned in Quarter 1 2015/16.</li> <li>• Research recruitment (updated) at 87% of Q4 goal, 3,200 patients and staff recruited (76% at Q3). 2013/14 recruitment 2,837.</li> <li>• Research income now recorded by income stream. Total income £4,534,555. £2,351,434 recorded in 2013/14. £200,730 innovation income from AHSN recorded.</li> <li>• Recruitment performance against our national peers will be reported in Quarter 4 report. Ambition to be in top 20%. Q4 11<sup>th</sup> (42 large acute NHS organisations) – 26%</li> <li>• PHT accountable for not achieving a 70-day national target (research approval pack received to first patient recruited) in 9% of all clinical trials</li> <li>• 15% of all commercial studies did not achieve the 70-day target</li> <li>• Research approvals now 100% compliant (15 days)</li> <li>• Research &amp; Development now re-branded – Research &amp; Innovation</li> <li>• New website, logo, patient flyer and newsletter</li> <li>• 2015/16 CSC recruitment goals now agreed. Total PHT goal = 3,500.</li> </ul>
<p><b>Options and decisions required</b> <i>Clearly identify options that are to be considered and any decisions required</i></p>	<p>For information</p>
<p><b>Next steps / future actions:</b> <i>Clearly identify what will follow the Trust Board's discussion</i></p>	<ul style="list-style-type: none"> <li>• To begin to report research and innovation activity in Quarter 1 2015/16</li> <li>• Greater scrutiny on 70 day target for commercial studies</li> </ul>

<b>Consideration of legal issues (including Equality Impact Assessment)?</b>	N/A
<b>Consideration of Public and Patient Involvement and Communications Implications?</b>	N/A

<b>Links to Portsmouth Hospitals NHS Trust Board Strategic Aims, Assurance Framework/Corporate Risk Register</b>	
<b>Strategic Aim</b>	<b>Strategic Aim 2: Develop a reputation for excellence in innovation, research and development and education in the top 20% of our peers</b>
<b>BAF/Corporate Risk Register Reference (if applicable)</b>	
<b>Risk Description</b>	
<b>CQC Reference</b>	

<b>Committees/Meetings at which paper has been approved:</b>	<b>Date</b>



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# Research & Innovation Performance Board Report

**Quarter 4 (Updated)**  
**April 2014 - March 2015**  
Data obtained: 4<sup>th</sup> May 2015

Report produced by:  
Graham Halls, Research Facilitator  
[graham.halls@porthosp.nhs.uk](mailto:graham.halls@porthosp.nhs.uk)  
Ania Szefer, Research Administrator  
[anna.szefer@porthosp.nhs.uk](mailto:anna.szefer@porthosp.nhs.uk)

On Behalf of :

**Research & Innovation**

Portsmouth Hospitals NHS Trust  
1st Floor Gloucester House  
Queen Alexandra Hospital  
Southwick Hill Road  
Cosham  
Portsmouth  
Hampshire  
PO6 3LY  
Email:

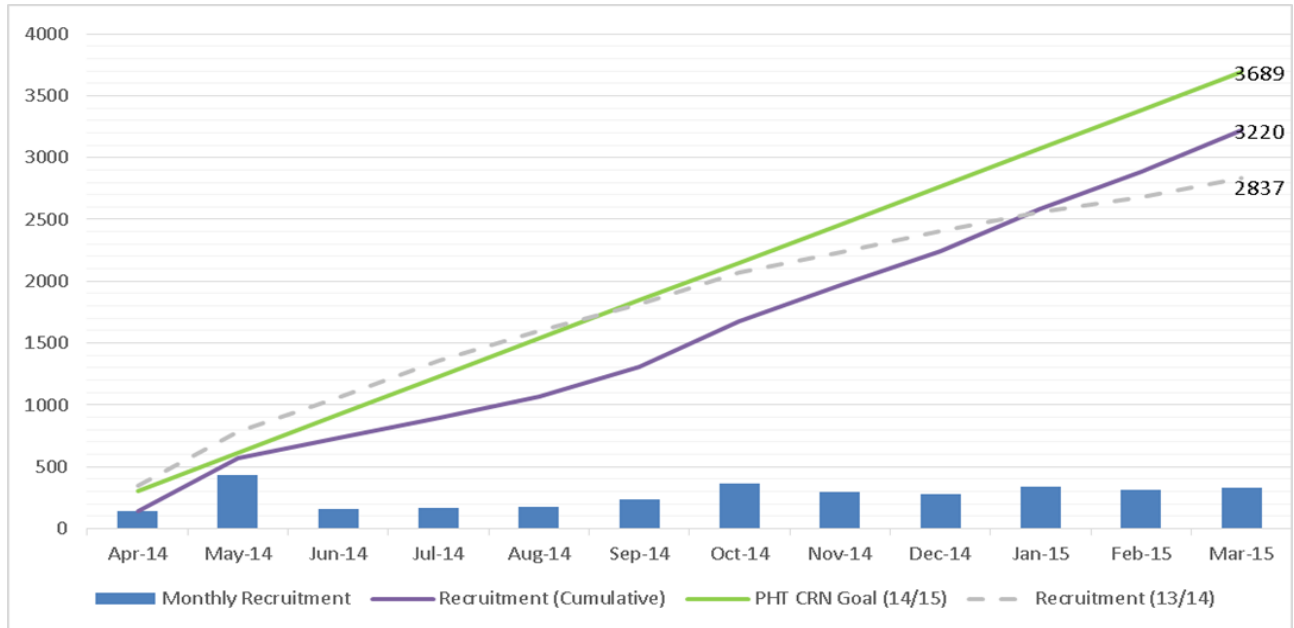
Tel: 023 9228 6236



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**SECTION 1: RESEARCH RECRUITMENT**

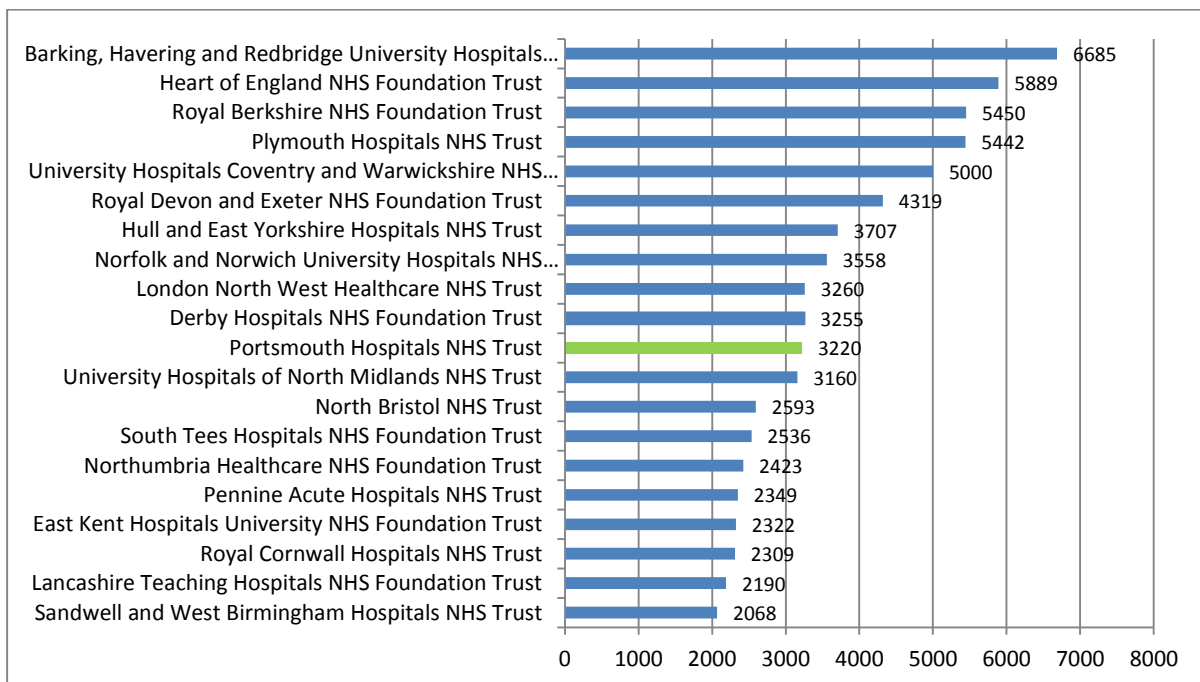
**CHART 1.1: ALL PHT PORTFOLIO (NON-COMMERCIAL/COMMERCIAL) RECRUITMENT AGAINST WESSEX CLINICAL RESEARCH NETWORK (CRN) GOAL**



Source: NIHR Open Data Platform. **Please note:** the recruitment data for the last month is partial data and will increase in the following report

Chart 1.1 shows all PHT portfolio recruitment from April 2014 - March 2015 set against the recruitment goal set by the Clinical Research Network (CRN) Wessex and recruitment in 2013/14. This is updated data to allow for the recruitment upload lag time. Portfolio recruitment includes all patients and staff recruited into high quality research studies as defined by the National Institute of Health Research (NIHR) and adopted onto the NIHR Portfolio. This chart does not include recruitment into other studies i.e. student studies etc (non-portfolio). Chart 1.2 shows the ranking of the first 20 large acute NHS organisations (total n=42). PHT is 11<sup>th</sup> (26%). The aim is to be in the top 20% of our peers.

**CHART 1.2: PHT POSITION IN THE UK BY 2014/2015 RECRUITMENT (LARGE ACUTE TRUSTS ONLY)**



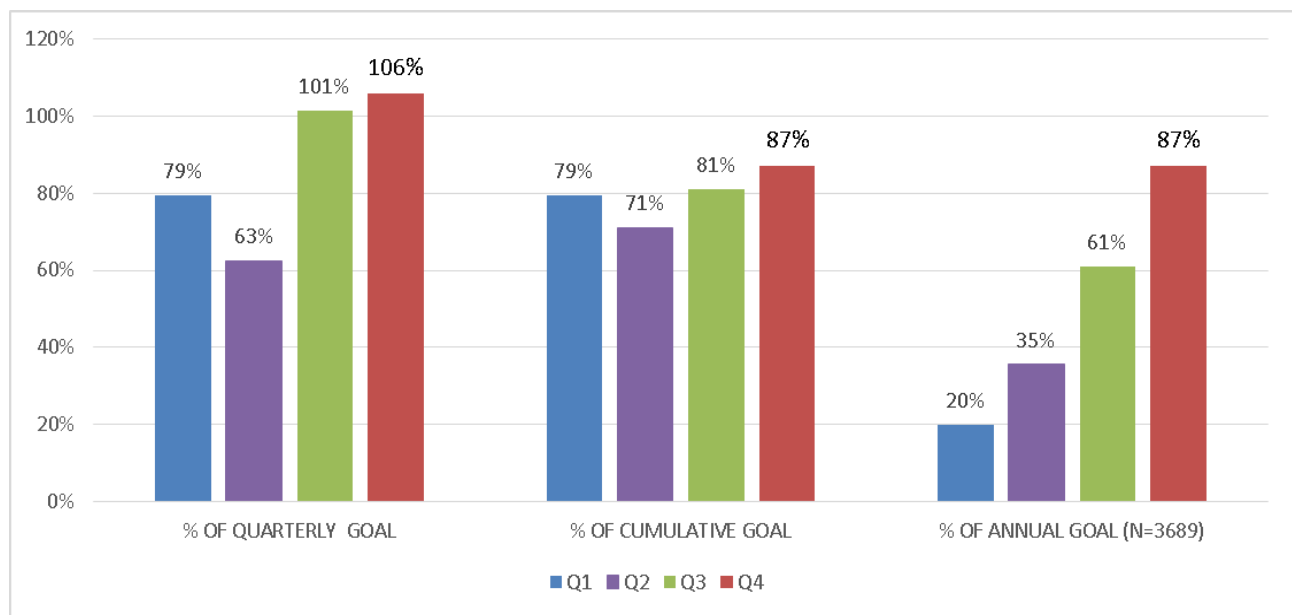
Source: NIHR Open Data Platform

**TABLE 1.1 & CHART 1.3: PHT PORTFOLIO RECRUITMENT AGAINST QUARTERLY AND ANNUAL GOALS**

**TABLE 1.1:**

QUARTER 14/15	RECRUITMENT	CUMULATIVE RECRUITMENT	CUMULATIVE GOAL	% OF QUARTERLY GOAL	% OF CUMULATIVE GOAL	% OF ANNUAL GOAL (N=3689)
Q1	732	732	922	79%	79%	20%
Q2	577	1309	1845	63%	71%	35%
Q3	935	2244	2767	101%	81%	61%
Q4	976	3220	3689	106%	87%	87%

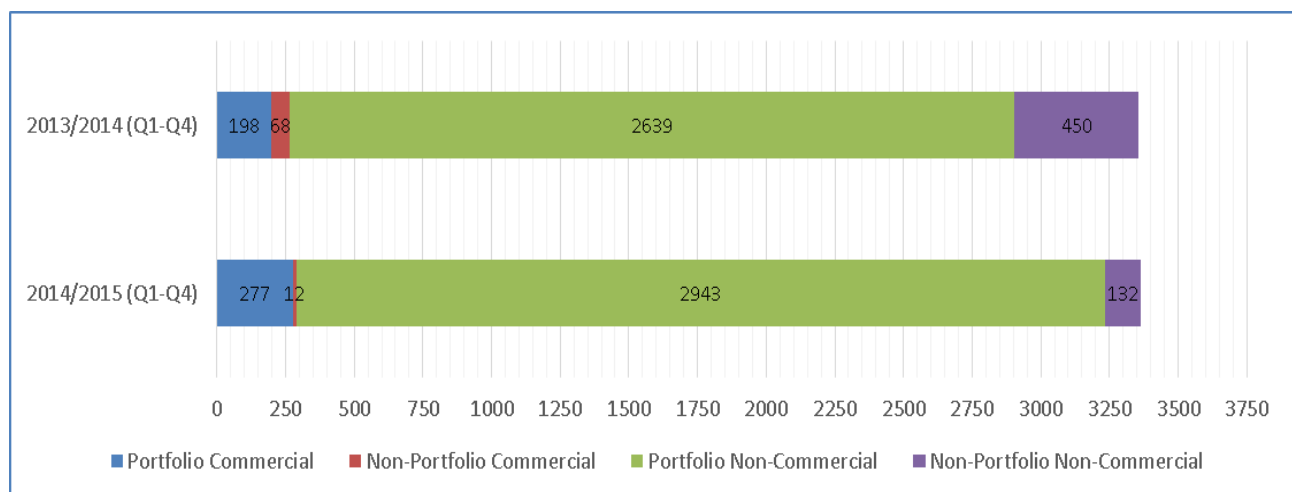
**CHART 1.3**



Source: NIHR Open Data Platform

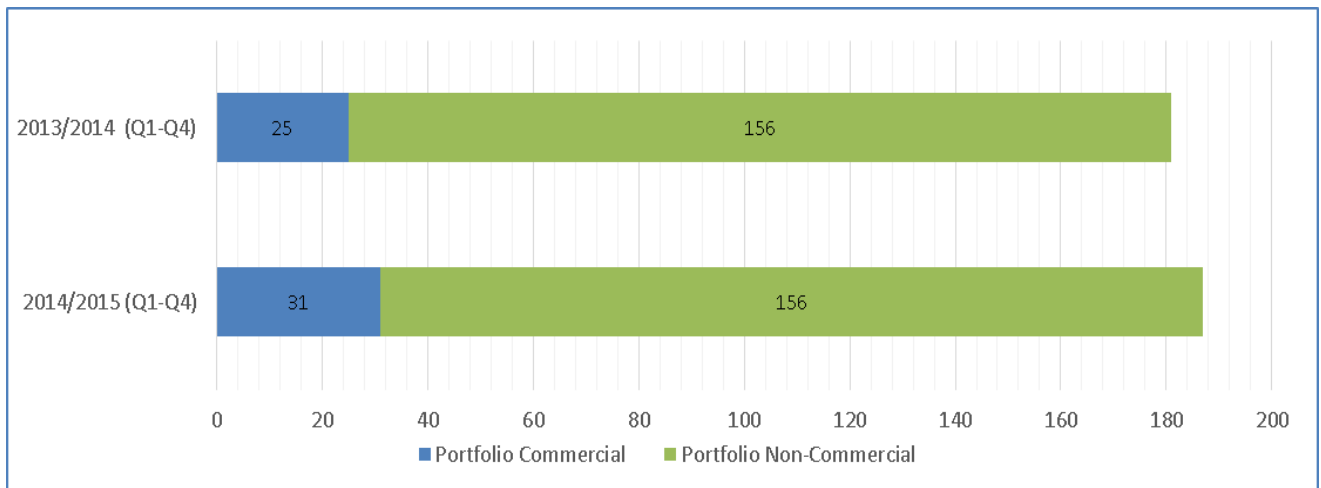
All research recruitment (portfolio and non-portfolio) by commercial/non-commercial research in Q4 2014/15 and in the same period in 2013/14 is shown in Chart 1.4. The numbers of portfolio studies by funding type (commercial/non-commercial) are shown in Chart 1.5.

**CHART 1.4: ALL COMMERCIAL AND NON-COMMERCIAL RECRUITMENT (PORTFOLIO AND NON-PORTFOLIO)**



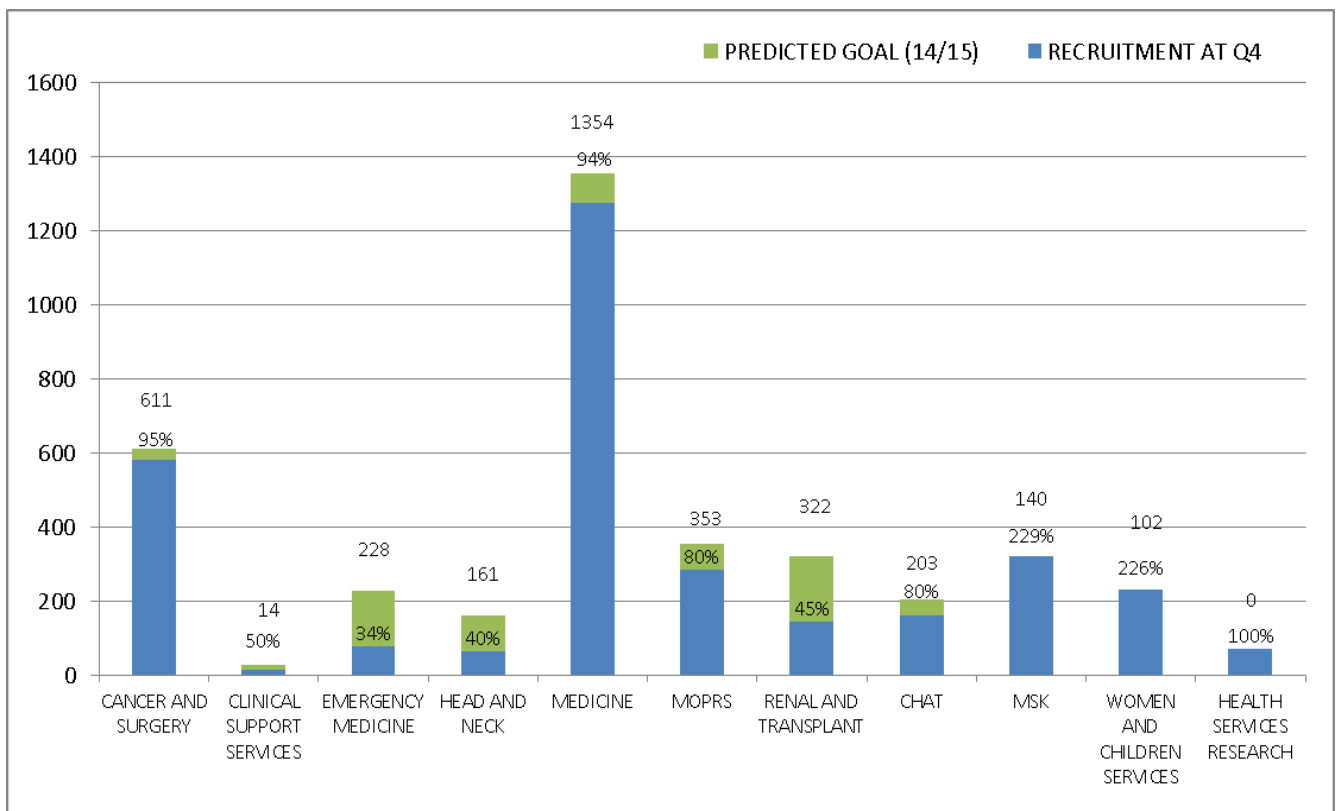
Source: NIHR Open Data Platform (Portfolio data), Edge™ Research Management System (Non-Portfolio data)

**CHART 1.5: THE NUMBER OF STUDIES BY FUNDING TYPE**



Source: NIHR Open Data Platform (Portfolio data). Please note: Studies with zero recruitment are not included as this is not available in ODP

**CHART 1.6: Q4 (UPDATED) RESEARCH RECRUITMENT BY ALL CLINICAL SERVICE CENTRES AGAINST RECRUITMENT GOALS**

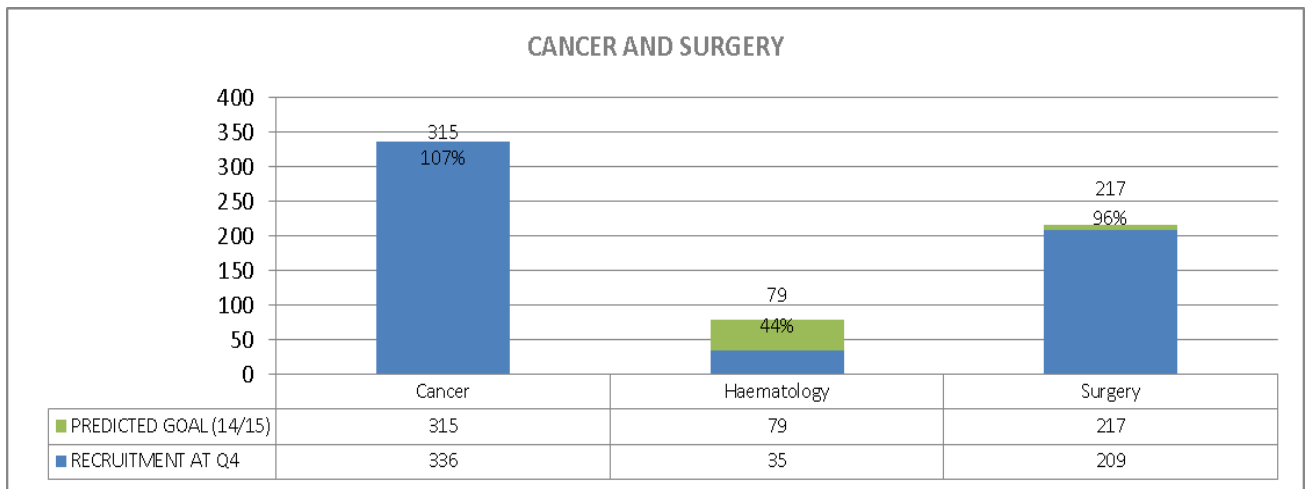


Source: NIHR Open Data Platform.

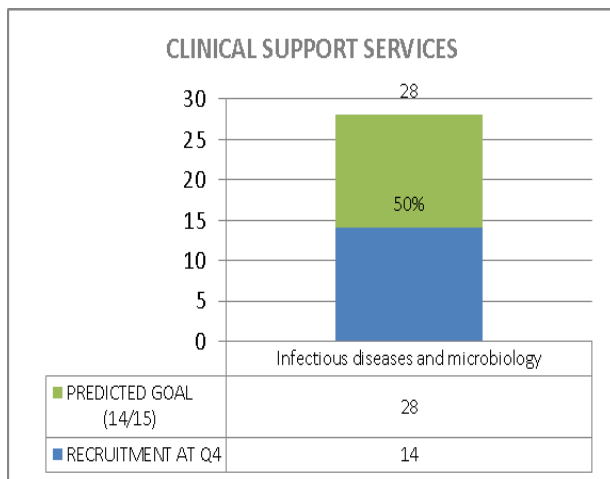
# CHART 1.7-1.16: Q4 RESEARCH RECRUITMENT (UPDATED) BY SPECIALITIES WITHIN CSCS AGAINST RECRUITMENT GOALS

Source for Charts 1.7-1.16: NIHR Open Data Platform

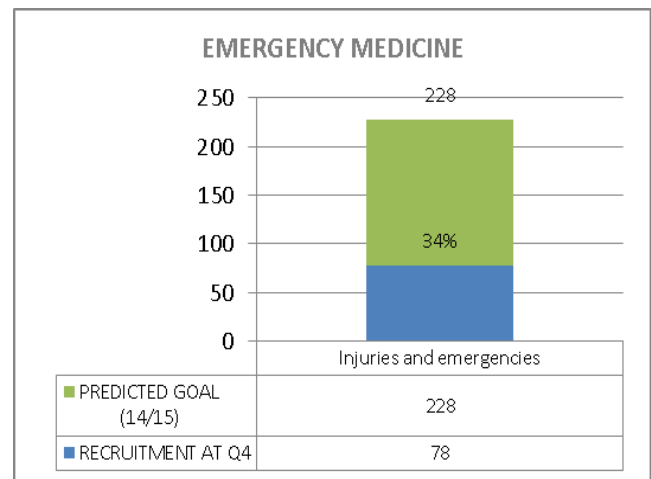
**CHART 1.7:**



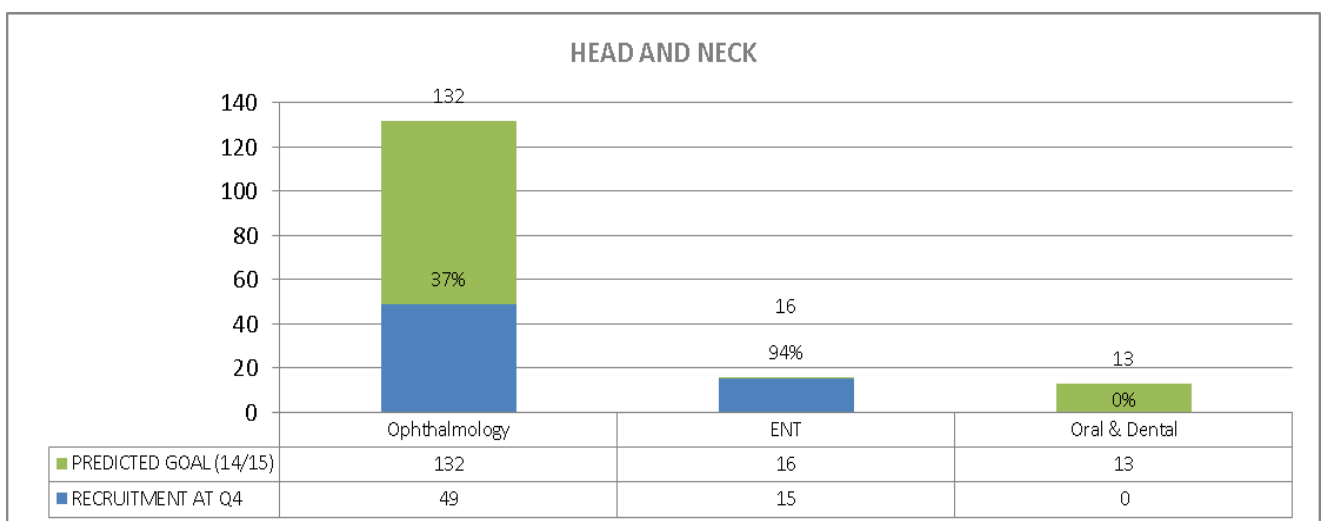
**CHART 1.8:**



**CHART 1.9:**

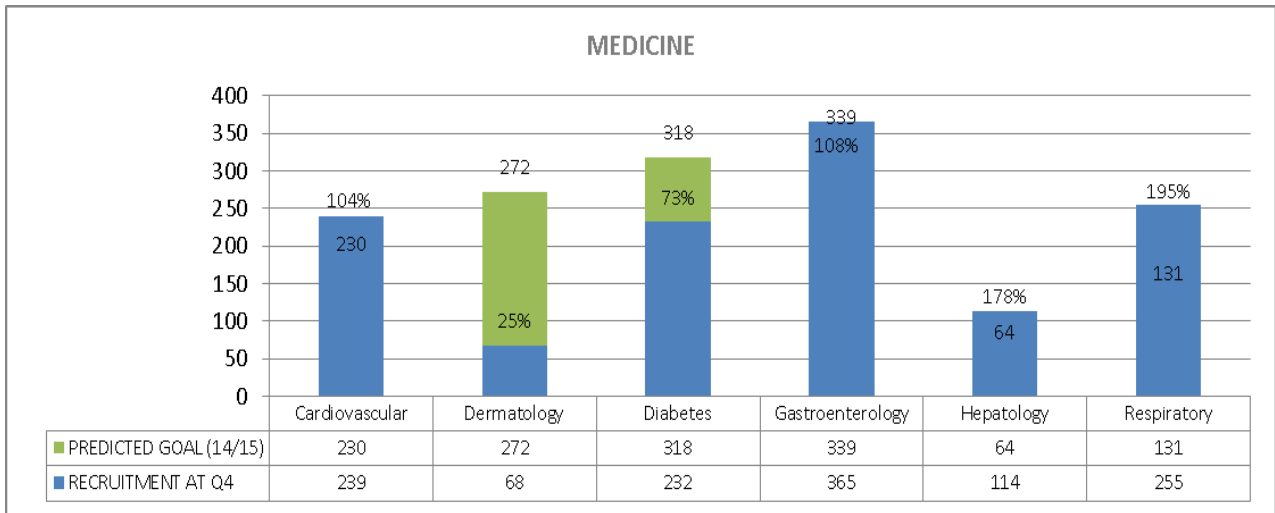


**CHART 1.10:**

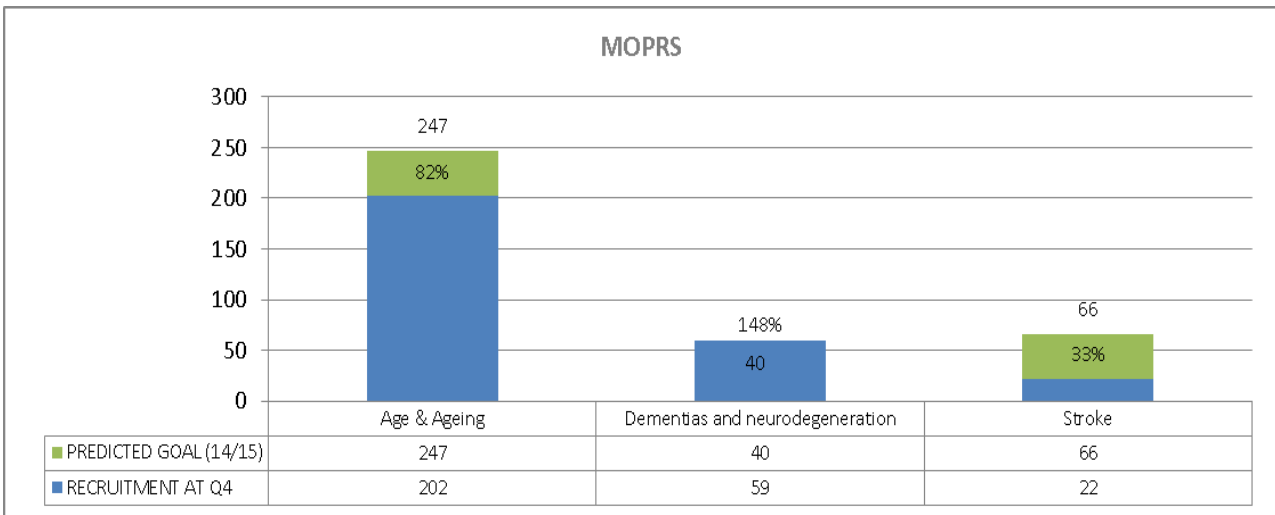




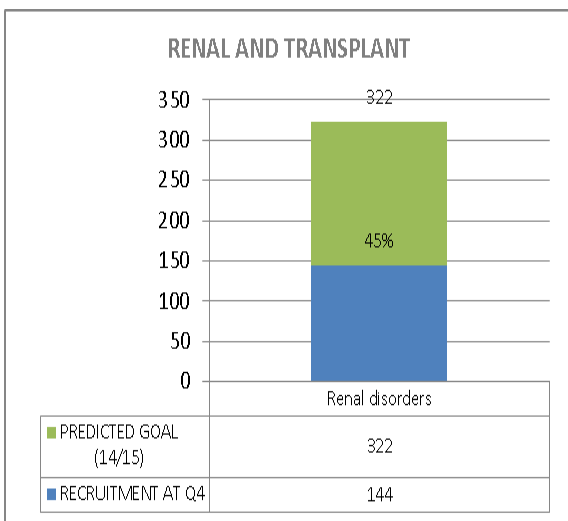
**CHART 1.11:**



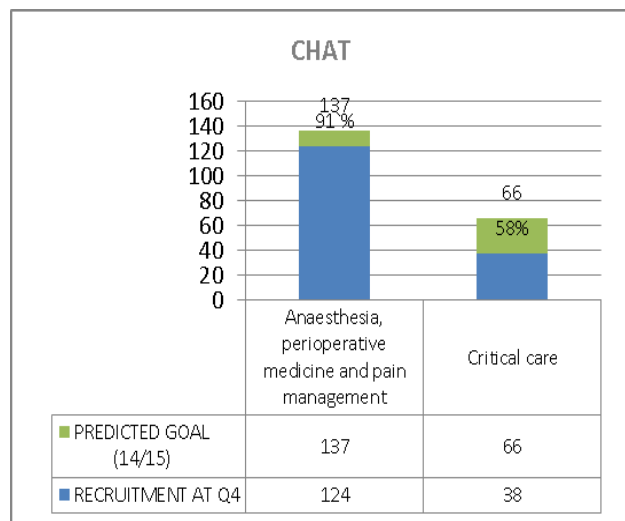
**CHART 1.12:**



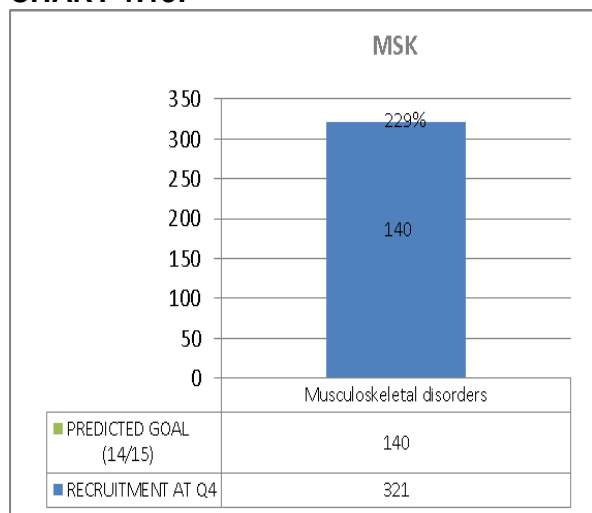
**CHART 1.13:**



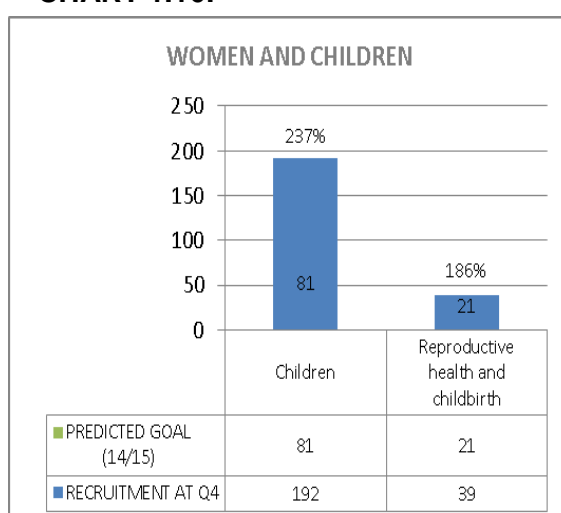
**CHART 1.14:**



**CHART 1.15:**



**CHART 1.16:**



**TABLE 1.2: RESEARCH RECRUITMENT BY SPECIALITIES WITHIN CSCS AND VARIANCE AGAINST Q4 GOAL**

CSC AND SPECIALITY	RECRUITMENT AT Q4	PREDICTED GOAL (14/15)	PREDICTED GOAL (Q1 - Q4)	VARIANCE AT Q4
<b>CANCER AND SURGERY</b>	<b>580</b>	<b>611</b>	<b>611</b>	<b>-31</b>
Cancer	336	315	315	21
Haematology	35	79	79	-44
Surgery	209	217	217	-8
<b>CLINICAL SUPPORT SERVICES</b>	<b>14</b>	<b>28</b>	<b>28</b>	<b>-14</b>
Infectious diseases and microbiology	14	28	28	-14
<b>EMERGENCY MEDICINE</b>	<b>78</b>	<b>228</b>	<b>228</b>	<b>-150</b>
Injuries and emergencies	78	228	228	-150
<b>HEAD AND NECK</b>	<b>64</b>	<b>161</b>	<b>161</b>	<b>-97</b>
Ophthalmology	49	132	132	-83
ENT	15	16	16	-1
Oral & Dental	0	13	13	-13
<b>MEDICINE</b>	<b>1273</b>	<b>1354</b>	<b>1354</b>	<b>-81</b>
Cardiovascular	239	230	230	9
Dermatology	68	272	272	-204
Diabetes	232	318	318	-86
Gastroenterology	365	339	339	26
Hepatology	114	64	64	50
Respiratory	255	131	131	124
<b>MOPRS</b>	<b>283</b>	<b>353</b>	<b>353</b>	<b>-70</b>
Age & Ageing	202	247	247	-45
Dementias and neurodegenerative disorders	59	40	40	19
Stroke	22	66	66	-44
<b>RENAL AND TRANSPLANT</b>	<b>144</b>	<b>322</b>	<b>322</b>	<b>-178</b>
Renal disorders	144	322	322	-178
<b>CHAT</b>	<b>162</b>	<b>203</b>	<b>203</b>	<b>-41</b>
Anaesthesia, perioperative medicine and pain management	124	137	137	-13
Critical care	38	66	66	-28
<b>MSK</b>	<b>321</b>	<b>140</b>	<b>140</b>	<b>181</b>
Musculoskeletal disorders	321	140	140	181

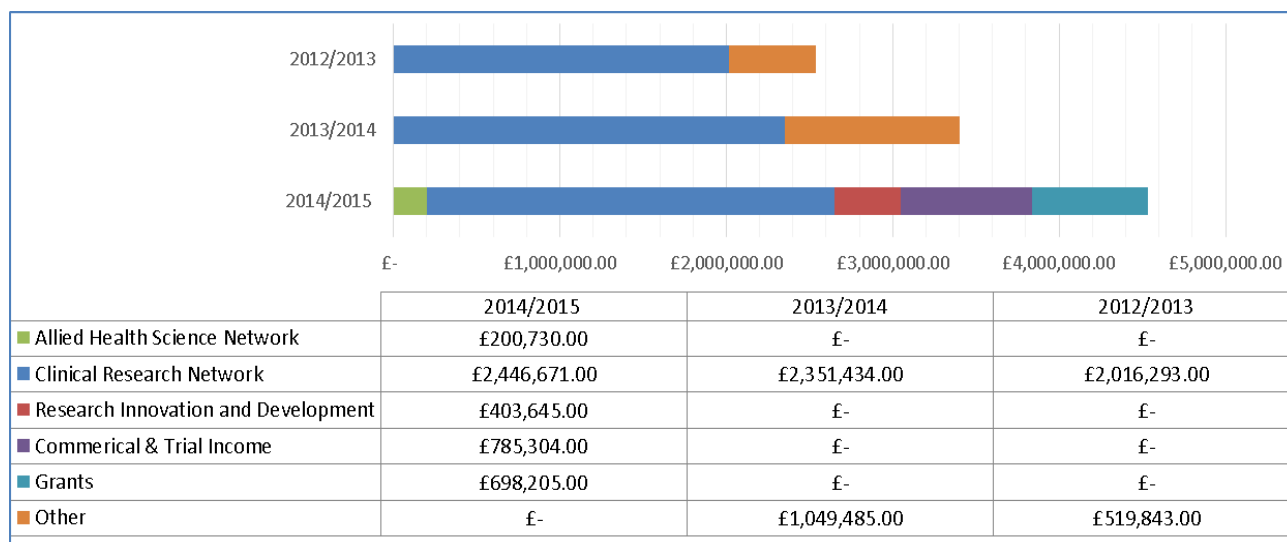
CSC AND SPECIALITY			RECRUITMENT AT Q4	PREDICTED GOAL (14/15)	PREDICTED GOAL (Q1 - Q4)	VARIANCE AT Q4
<b>WOMEN AND CHILDREN SERVICES</b>			<b>231</b>	<b>102</b>	<b>102</b>	<b>129</b>
Children			192	81	81	111
Reproductive health and childbirth			39	21	21	18
<b>HEALTH SERVICES RESEARCH</b>			<b>70</b>	<b>-</b>	<b>-</b>	<b>70</b>
Health services and delivery research			70	0	0	70
<b>ADDITIONAL EXPECTED RECRUITMENT (UNASSIGNED)</b>			<b>-</b>	<b>187</b>	<b>187</b>	<b>-</b>
<b>TOTAL</b>			<b>3220</b>	<b>3689</b>	<b>3689</b>	<b>-469</b>

Source: NIHR Open Data Platform. **Please note:** recruitment is assigned as per the speciality given on ODP

## SECTION 2: FINANCE

The majority of PHT Research and Innovation (R&I) income is from the CRN Wessex and is shown in Chart 2.1. This is the first time we have been able to report income streams by Academic Health Science Network, CRN, commercial, trial, innovation and research grants. It is assumed the 'other' category in 203/14 and 2012/13 was commercial and trial income.

**Chart 2.1: RESEARCH AND INNOVATION INCOME (2012/13 to Q4 2014/15)**

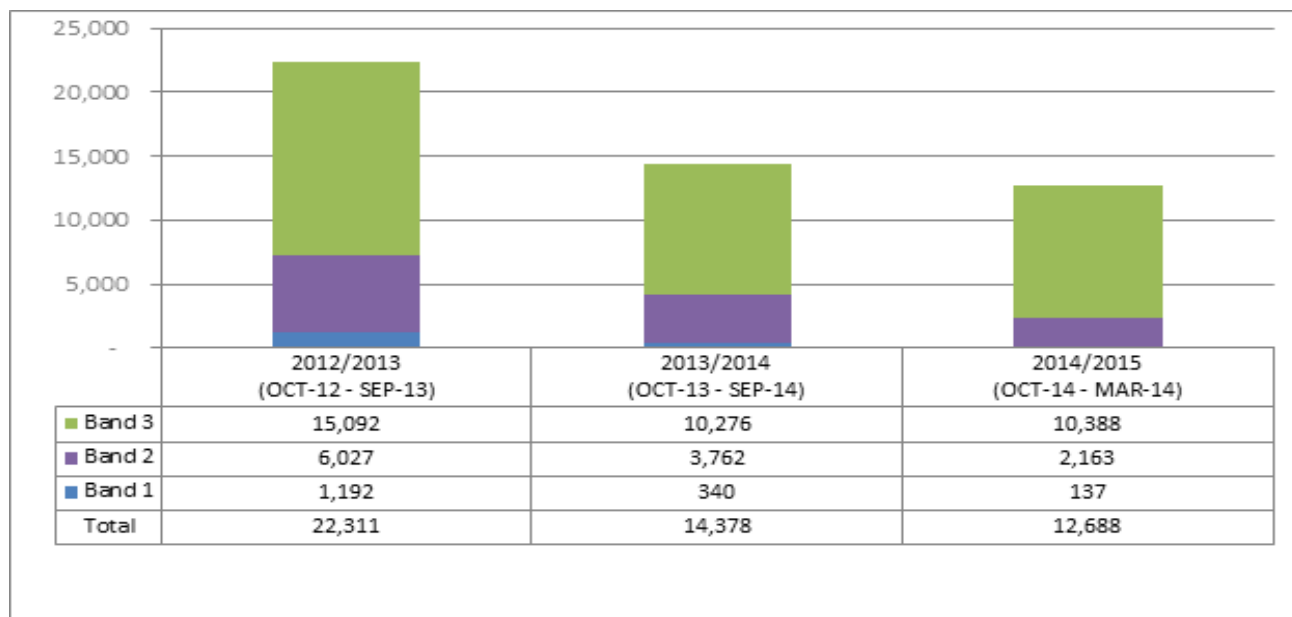


NIHR Clinical Research Network (CRN) funding is activity based and all recruitment between October and September each year contributes to the funding allocation at the start of the following financial year. Recruitment is weighted depending upon the complexity of the study and banded 1-3 accordingly (shown in Chart 2.2 for PHT and 2.3 by CSC).

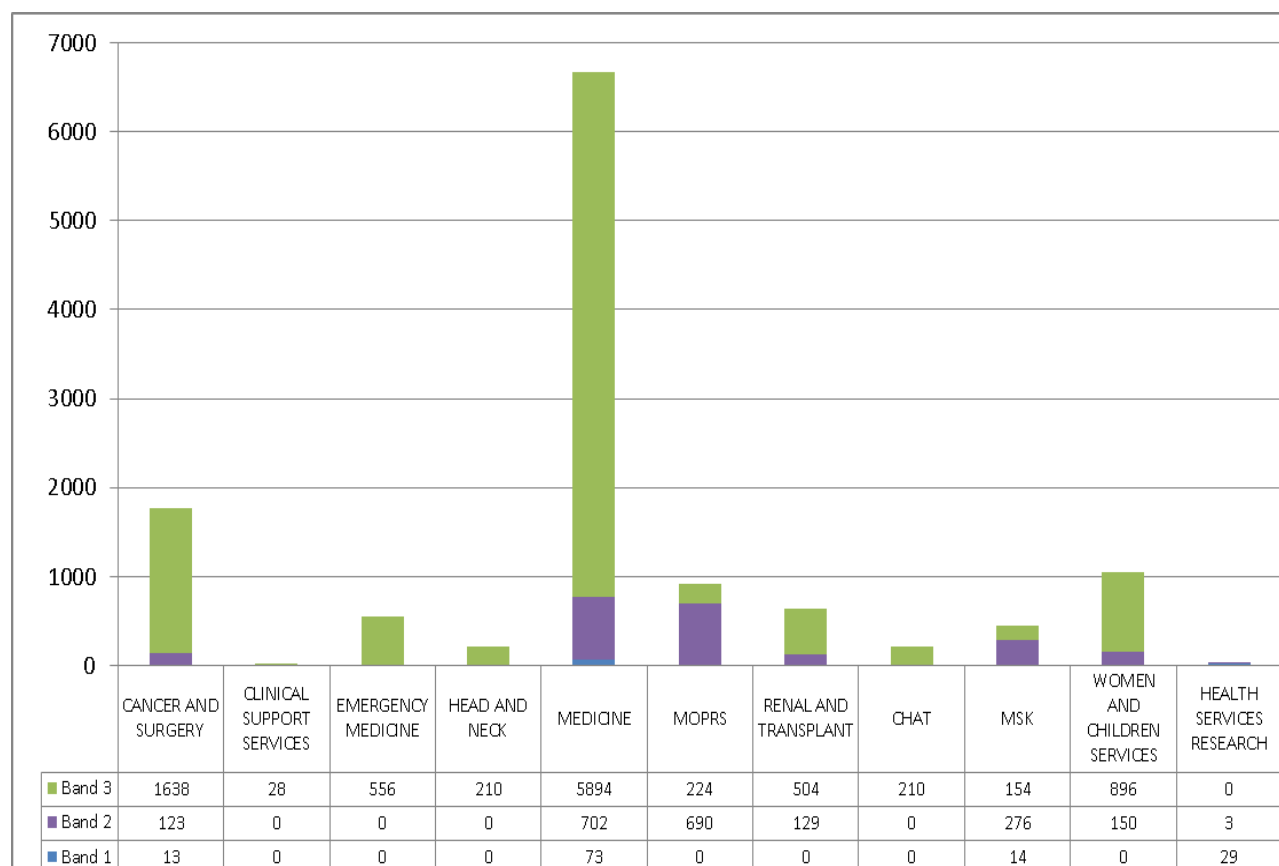
- Band 1 are observational studies recruiting >10,000 participants
- Band 2 are other observational studies
- Band 3 studies are interventional studies

Chart 2.2 shows the 6-month period October 2014- March 2015 – 88% of the total 203/14 weighted recruitment.

**CHART 2.2: PHT WEIGHTED RECRUITMENT BY (ABF) PERIOD: OCT – SEPT (2014/15 6 MONTHS ONLY)**



**CHART 2.3: WEIGHTED RECRUITMENT BY CSC IN ACTIVITY BASED FUNDING (ABF) PERIOD: OCT 2014 – SEP 2015**



Source: NIHR Open Data Platform.

### SECTION 3: RESEARCH TRAINED MEDICAL CONSULTANT STAFF BY CSC

All staff must be GCP (Good Clinical Practice) trained as a minimum to recruit patients to research studies. Table 3.1 shows the percentage of medical consultant staff who are GCP trained by CSC and those whose training is out of date. In total only 35% (31% in Quarter 3) of this staff group are GCP trained and therefore “research ready”. The aim is to increase this in 2015/16, our goal 75%.

**TABLE 3.1: RESEARCH TRAINED MEDICAL CONSULTANT STAFF BY CSC**

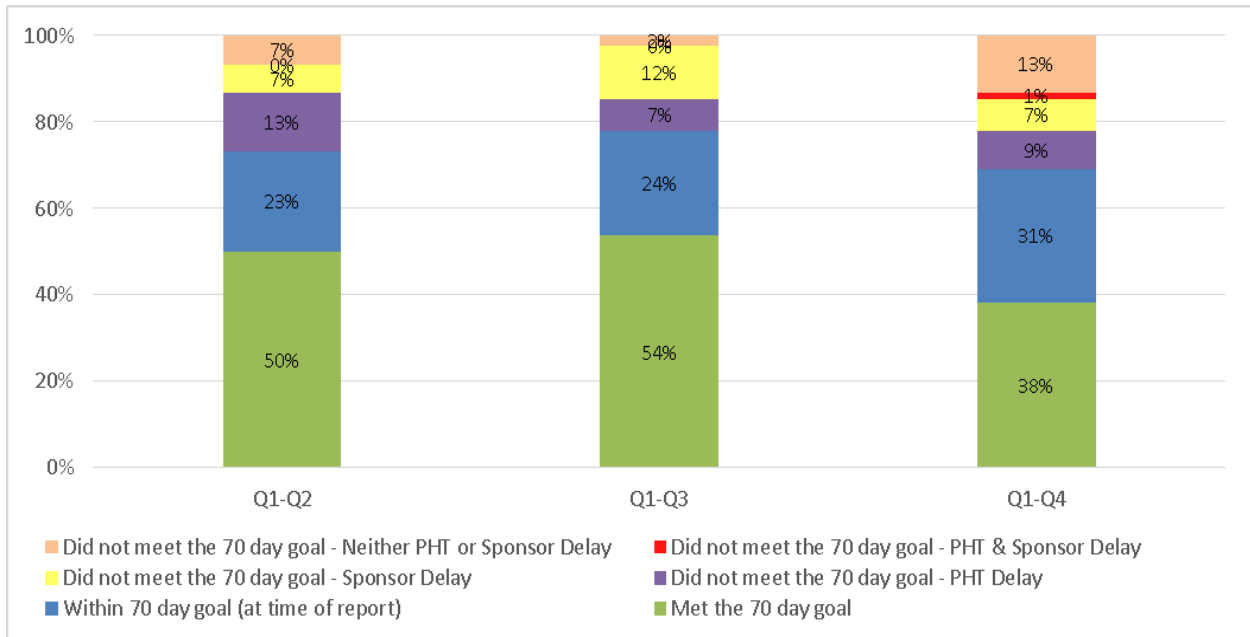
<b>CHAT CSC</b>	
Out of date	5%
Yes	17%
<b>Clinical Support CSC</b>	
Out of date	2%
Yes	27%
<b>Emergency Care CSC</b>	
Yes	20%
<b>Head and Neck CSC</b>	
Out of date	9%
Yes	24%
<b>Medicine CSC</b>	
Out of date	17%
Yes	43%
<b>MOPRS CSC</b>	
Out of date	9%
Yes	30%
<b>Muscular Skeletal CSC</b>	
Yes	31%
<b>Renal CSC</b>	
Out of date	12%
Yes	76%
<b>Surgery and Cancer CSC</b>	
Out of date	10%
Yes	54%
<b>Women's and Children's CSC</b>	
Out of date	11%
Yes	43%

Source: PHT Human Resources data (09/02/15)

### SECTION 4: PERFORMANCE IN INITIATING & DELIVERING (PID) CLINICAL RESEARCH

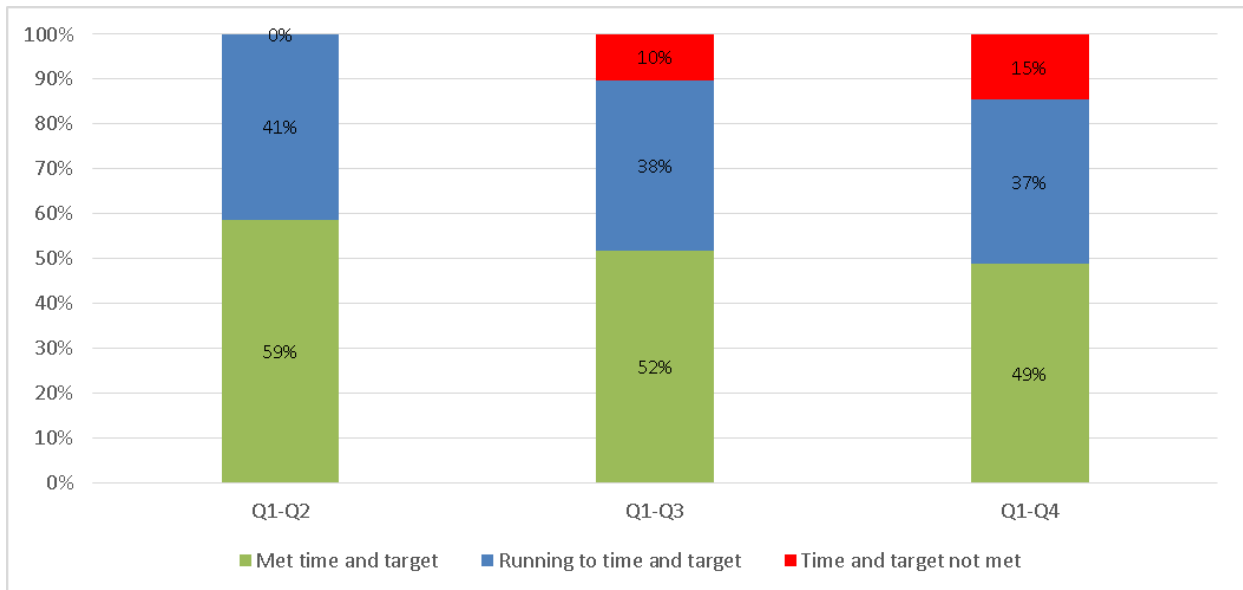
The Department of Health, via the National Institute for Health Research (NIHR) contracts, requires the quarterly publication of the 70-day benchmark for clinical trial initiation (Chart 4.1) and the recruitment to time and target for commercial contract clinical trials\*(Chart 4.2). These reports must be published on the public NHS organisation website. The 70-day performance measures the date the NHS organisation receives a valid research application to the time the first patient is recruited into that study. If a benchmark has not been achieved the reason for not doing so must be published. Research funding will be conditional on meeting the national benchmarks and performance will now affect funding (TBC).

### CHART 4.1: PERFORMANCE IN INITIATING CLINICAL RESEARCH



Source: Original Source: PHT Performance in Initiating and Delivery Report, May 2015 (Original Source: Edge Research Management System). Clinical trial is defined as a: Clinical trial of an investigational medicinal product, Clinical investigation or other study of a medical device, Combined trial of an investigational medicinal product and an investigational medical device, Other clinical trial to study a novel intervention or randomised clinical trial to compare interventions in clinical practice.

### CHART 4.2: PERFORMANCE IN DELIVERING CLINICAL RESEARCH



Source: PHT Performance in Initiating and Delivery Report, May 2015 (Original Source: Edge Research Management System). Commercial is defined as a study both sponsored and funded by a commercial funder.

Table 4.1 shows the percentage (n) of studies approved in 15 days. PHT is now approving 100% of studies within this goal.

**TABLE 4.1: R&D APPROVAL TIMES FOR PORTFOLIO STUDIES**

	DCHFT	DHUFT	HHFT	IC	IOW	PHFT	PHT	RBCH	SCAS	SFT	SHFT	Solent	UHS
April	50% [4]		0% [1]	100% [4]	40% [5]	86% [7]	88% [8]	33% [6]		75% [4]	50% [2]	100% [2]	73% [18]
May	100% [1]		50% [4]	86% [14]	0% [2]	78% [9]	57% [7]	38% [8]		100% [4]	50% [2]	100% [3]	58% [12]
June	67% [6]		100% [6]	94% [17]	100% [1]	75% [4]	57% [7]	0% [2]		67% [3]	33% [3]	100% [2]	68% [19]
July	100% [3]		88% [8]	100% [5]	0% [2]	0% [2]	50% [4]	14% [7]		100% [2]	100% [1]	100% [1]	69% [16]
August	100% [1]		100% [6]	100% [6]	0% [1]	67% [3]	50% [8]	50% [6]				100% [1]	67% [6]
September	0% [1]		100% [3]	100% [3]	0% [1]	100% [4]	70% [10]	0% [1]			33% [3]	100% [1]	79% [14]
October	100% [3]	0% [1]	86% [7]	100% [2]		100% [8]	90% [10]	60% [5]		60% [5]	100% [3]	80% [5]	75% [24]
November	100% [1]	100% [2]	60% [5]	100% [2]	33% [3]	100% [1]	100% [3]	100% [3]		80% [5]		100% [2]	94% [16]
December	100% [2]		100% [4]	100% [7]		80% [5]	100% [4]	100% [3]		100% [2]	0% [1]	83% [6]	83% [6]
January	67% [3]		100% [5]	33% [3]		100% [3]	100% [6]	85% [13]	100% [1]	100% [3]	0% [4]	75% [4]	80% [10]
February	100% [1]	100% [1]	100% [1]	100% [4]	75% [4]	100% [2]	100% [5]	86% [7]		100% [3]	100% [1]		94% [17]
March	100% [4]	100% [2]	100% [5]	100% [9]	50% [2]	100% [1]	80% [5]	100% [4]		100% [4]		100% [1]	100% [22]

> 80% of study reviews in 15 days or less
60 < x < 80% of study reviews in 15 days or less
< 60% of study reviews in 15 days or less

Source: Wessex CRN Performance Report, 6<sup>th</sup> of April 2015 (Original Source: NIHR Open Data Platform).