



**PWYLLGOR DIWYLLIANT, POBL A DATBLYGU SEFYDLIADOL  
PEOPLE, ORGANISATIONAL DEVELOPMENT & CULTURE COMMITTEE**

<b>DYDDIAD Y CYFARFOD: DATE OF MEETING:</b>	20 August 2024
<b>TEITL YR ADRODDIAD: TITLE OF REPORT:</b>	Research and Development Framework Annual Update
<b>CYFARWYDDWR ARWEINIOL: LEAD DIRECTOR:</b>	Mark Henwood Interim Medical Director
<b>SWYDDOG ADRODD: REPORTING OFFICER:</b>	Leighton Phillips Director of Research, Innovation and Value Based Healthcare

**Pwrpas yr Adroddiad (dewiswch fel yn addas)**

**Purpose of the Report (select as appropriate)**

Er Sicrwydd/For Assurance

**ADRODDIAD SCAA**

**SBAR REPORT**

Sefyllfa / Situation

This paper is presented to the People Organisational Development and Culture Committee (PODCC) for assurance and provides an update of Hywel Dda University Health Board's (HDdUHB) current position and relevant activities against the ten pillars within the Welsh Government's (WG) NHS Research and Development (R&D) Framework. The original internal self-assessment, undertaken in July 2023, highlighted areas of strength, areas for improvement, and plans to further support implementation. A review of the self-assessment and other relevant performance information was carried out by WG and Health and Care Research Wales on 17 October 2023. This review confirmed both areas of excellence and areas for further improvement.

The activity associated with the implementation of the Framework is led by the Department of Research, Innovation and Value. However, the Framework, and associated assessment findings, have wider ongoing implications for other parts of HDdUHB. The next scheduled Health and Care Research Wales (HCRW) R&D Annual Review is due in Autumn 2024.

Cefndir / Background

HCRW published an R&D Framework (July 2023), in a drive to embed and integrate research into all aspects of health and care services in NHS Wales. The Framework outlines what research excellence should look like within NHS organisations where research is embraced, integrated into services, and is a core part of the organisation's culture.

Within the framework, the features of a research supportive NHS organisation have been organised under ten pillars, which are summarised below in Diagram 1. Supportive NHS organisations will work to embrace every pillar and the features they contain together, as they all play an important part in ensuring that research is integrated into services and is contributing to the whole system, thereby achieving excellence. There are also several cross-cutting themes, which underpin the ten pillars which include the statutory requirements to be addressed and considered when developing policy and implementation plans. These cross-cutting themes are highlighted in Diagram 2 below, where those most relevant to the research

agenda have been identified. The Duty of Quality is a recent addition and reinforces the importance for research supportive organisations to adopt a system-wide way of working to provide safe, effective, person-centred, timely, efficient, and equitable health care in the context of a learning culture.

**Diagram 1:**  
**The ten pillars outlining the features of a research supportive NHS organisation**



**Diagram 2:**  
**Cross-cutting themes which underpin the ten pillars of a research supportive NHS organisation**



Each of the ten pillars is detailed below, along with the features of a research supportive NHS organisation.

Improving health and care services in Wales using evidence-based approaches is fundamental to improving the quality of care and putting the public at the heart of everything. It is widely accepted that research makes a real difference to improving health outcomes and to the lives of patients and people in our communities.

Research provides the opportunity for patients and service users to access new treatments and services that will improve their health and well-being and contribute to reducing health inequalities in the general population.

The R&D Framework remains a key driver to keep research high on the agenda within the NHS and to reinforce the role it plays in day-to-day care. It provides consistent national guidance to NHS organisations, where its key features are expected to form a core part of

organisational culture. Welsh Government also issued the Framework via a Welsh Health Circular to signal its importance.

## Asesiad / Assessment

The face-to-face Annual Review October 2023 identified several areas where HDdUHB was commended and some areas for development (see Appendix 1 for full report from HCRW). The key areas of feedback are highlighted below, together where appropriate with a summary of the action we are taking in response (**in bold**).

- 1. Governance.** The Welsh Government noted the strong governance and monitoring processes in place via PODCC and the Research and Innovation Sub Committee (R&ISC); and commended the Committees' engagement in the research agenda and their regular meetings. **Over the past year we have continued to strengthen our reports into these arrangements.**
- 2. Executive and Board Profile.** In discussing the profile of R&D at Executive Board, WG noted the Board R&D development sessions and the strong relationships with Value Based Healthcare teams to integrate research into a broader agenda. WG also noted the use of the Board's Datix management system to report risks and support resolution of issues, such as the lack of research facilities and lack of protected time for staff. This has proved an effective mechanism to raise the profile and impact of research. WG noted the Health Board's intention to develop a new Research and Innovation (R&I) strategy, as the existing one, which spans three years from 2021, is nearing its end. This presents an opportunity to evaluate past achievements, identify successful strategies, and ensure the forthcoming version aligns well with the NHS R&D Framework, particularly in areas that currently lack robust strategies. **Substantial engagement around the new Strategy has commenced and are on target to conclude drafting by December 2024, for consideration by the Executive Team and the Board.**
- 3. Engagement of Clinical Teams.** WG questioned the R&D Department's engagement across the clinical directorates and noted that there was not a formal mechanism, and that engagement could be variable across the district general hospitals (DGHS). WG asked us to consider whether we have the right strategy in place to ensure research has visibility across the organisation. **Several engagement events have been conducted this year, with face-to-face presentations at local and national events, as well as virtual attendance at Grand Rounds and directorate level meetings. Research will feature on the Clinical Forum agenda, and the Executive Directors for Medicine, Nursing and Therapies are planning interdisciplinary events to boost the profile of research across professions.**
- 4. Academic Partnerships.** WG noted the working relationships and engagement with academia, and that previous University Partnership Board have been replaced by bilateral meetings between the Health Board and each of the Universities (Swansea, Aberystwyth, and University of Wales Trinity St David's), which have proved beneficial and resulted in wider conversations in non-medical areas and joint appointments, including via the TriTech initiative. WG encouraged wider thinking regarding strategic alignment of priorities facilitating further joint appointments; and further development in rural health research, linking to universities, which is a pertinent due to the geography of the Health Board. **All University partners have been engaged as part of ongoing university meetings and strategic objectives for 2024/2025. All partners have also been engaged in developing the new R&D strategy.**

- 5. Time for Research.** The Welsh Government was pleased to hear that there is commitment from the Health Board to continue funding for those who have successfully been awarded a HCRW Research Time Award beyond the grant and that the Health Board is also focusing on staff from non-medical backgrounds but acknowledged the further work necessary in this area. The Welsh Government encourage the health board to evolve its research workforce strategy and increase engagement with the HCRW Faculty, including holding a regional workshop to motivate those with an interest in research to apply for a variety of grant schemes. **As an initial step, a HCRW Faculty webinar via Teams was delivered across the Health Board, which was well attended by research interested staff and leaders. Discussions are planned with the Executive Directors of Medicine, Nursing and Therapies to consider, alongside Directorates, how more time can be made available for research.**
- 6. Portfolio and Research Activity.** The work undertaken by the Health Board to facilitate access to studies for HDdUHB patients and the development of smooth patient pathways was recognised by WG, with established sites for recruitment in three of the Health Board's four hospitals. The challenges of Health Board patients accessing oncology studies led in Swansea Bay UHB was discussed, being contrary to the existing regionalised service model for Oncology. WG advised that inequitable clinical trial activity is not sustainable or fair and has expressed approval that addressing this issue is a priority for HDdUHB. HCRW agreed (via the Director of Support and Delivery) to facilitate and support discussions between Hywel Dda and Swansea Bay University Health Boards. **Work on this priority is ongoing. An analysis of the issues has been undertaken and a meeting is scheduled in August with the Medical Directors of both organisations to discuss and agree a way forward.**
- 7. Commercial Research.** WG noted the low level of commercial research activity at HDdUHB and discussed the possible reasons for this. WG noted the capacity and capability issues within the organisation, and the geographical operational challenges of having cross cover across the sites can also be an issue for commercial studies. Work has commenced on a range of measures to overcome the barriers to increasing commercial trials activity. One of the most substantial opportunities is linked to the research investment that the pharmaceutical industry will be making across Wales resulting from the new Voluntary Pricing and Growth agreement for branded medications. **HDdUHB is applying for capital and revenue funding to enhance its capacity and capability to undertake commercial research in key specialisms, namely Oncology, Ophthalmology, Metabolic and Respiratory Medicine.**
- 8. Public and Patient Involvement.** WG noted the need for a continued focus on meaningful engagement with patients and the public in the overall direction of research activities of the Department. WG welcomed the positive research news stories and the ambassadors for research in HDdUHB and requested details so that they could highlight more widely. WG encouraged the use of creative internal communications to raise awareness of research with all staff and to ensure that research is highlighted at Board. WG, through Health and Care Research Wales, offered their support with Patient and Public Involvement (PPI) and strategic communications. **This work is ongoing and will be a key feature of the development and publication of the new research strategy.**

#### Argymhelliad / Recommendation

The Committee is requested to:

- **TAKE ASSURANCE** regarding the work being undertaken and current position relating to the ten pillars within the NHS Research and Development (R&D) Framework.

<b>Amcanion: (rhaid cwblhau)</b> <b>Objectives: (must be completed)</b>	
Committee ToR Reference: Cyfeirnod Cylch Gorchwyl y Pwyllgor:	2.5 To provide assurance that the organisation is discharging its functions and meeting its responsibilities with regard to the research and innovation activity carried out within the Health Board.
Cyfeirnod Cofrestr Risg Datix a Sgôr Cyfredol: Datix Risk Register Reference and Score:	Not applicable
Parthau Ansawdd: Domains of Quality <a href="#">Quality and Engagement Act (sharepoint.com)</a>	3. Effective
Galluogwyr Ansawdd: Enablers of Quality: <a href="#">Quality and Engagement Act (sharepoint.com)</a>	4. Learning, improvement and research
Amcanion Strategol y BIP: UHB Strategic Objectives:	3. Striving to deliver and develop excellent services
Amcanion Cynllunio Planning Objectives	1 Workforce Stabilisation
Amcanion Llesiant BIP: UHB Well-being Objectives: <a href="#">Hyperlink to HDdUHB Well-being Objectives Annual Report 2021-2022</a>	2. Develop a skilled and flexible workforce to meet the changing needs of the modern NHS

<b>Gwybodaeth Ychwanegol:</b> <b>Further Information:</b>	
Ar sail tystiolaeth: Evidence Base:	Not applicable
Rhestr Termiau: Glossary of Terms:	Not applicable
Partion / Pwyllgorau â ymgynhorwyd ymlaen llaw y Pwyllgor Diwylliant, Pobl a Datblygu Sefydliadol: Parties / Committees consulted prior to People, Organisational Development & Culture Committee:	Not applicable

<b>Effaith: (rhaid cwblhau)</b> <b>Impact: (must be completed)</b>	
<b>Ariannol / Gwerth am Arian:</b> <b>Financial / Service:</b>	Not applicable
<b>Ansawdd / Gofal Claf:</b> <b>Quality / Patient Care:</b>	Not applicable
<b>Gweithlu:</b> <b>Workforce:</b>	Not applicable
<b>Risg:</b> <b>Risk:</b>	Not applicable
<b>Cyfreithiol:</b> <b>Legal:</b>	Not applicable
<b>Enw Da:</b> <b>Reputational:</b>	Not applicable
<b>Gyfrinachedd:</b> <b>Privacy:</b>	Not applicable
<b>Cydraddoldeb:</b> <b>Equality:</b>	Not applicable