Alzheimer’s Research UK response to Health Education England’s draft strategy for research and innovation: Research and Innovation Strategy: delivering a flexible workforce receptive to research and innovation

1. Introduction

1.1. Alzheimer’s Research UK (ARUK) is the UK’s leading dementia research charity. As research experts, we specialise in funding world-class, pioneering projects at leading universities to find preventions, treatments and a cure for dementia. We believe science and innovation hold the key to defeating dementia and invest in the scientists discovering more about the condition and its causes.

1.2. We welcome the opportunity to respond to this important consultation from Health Education England (HEE). Achieving a strong and coordinated approach to research and innovation should be a high priority for the health and social care sector. We see this as the start of an important conversation about how to better engage health and social care staff in research.

1.3. We would like to highlight the short time period for this consultation and would urge HEE to continue working with stakeholders to develop this strategy. As one of the leading medical research charities in the UK, Alzheimer’s Research UK would be happy to follow up on our response with a more detailed discussion about how we might support the development of this strategy.

1.4. As an overall point, we would also like to highlight that at times it can be difficult to understand what the aims and objectives of the strategy mean in practice. When the final strategy is published later this year, it would be helpful to include some practical examples to help illustrate some of the detail.

2. Key points

2.1. We welcome and support the overall aims and direction of this strategy, in particular the focus on engaging all health and social care staff in research and innovation. It is important all NHS staff understand the importance of research, how it benefits those they care for and how they can get involved. For example, one of Alzheimer’s Research UK’s key policy asks is for the NHS to better support participation in clinical trials, with an aim of achieving the Prime Minister’s Challenge of recruiting 10 per cent of people with dementia into some form of research by 2015.

2.2. There needs to be a coordinated and consistent strategy for promoting research and innovation across the health and social care system. There are a number of national and local bodies that have responsibilities in the research agenda and there is potential for confusion if there is not a coordinated approach. For example, it would be good to understand how the activity to support this strategy will be coordinated with NHS England’s research and development strategy.

2.3. We are pleased to see a commitment to developing clinical academic careers and clinical research leadership for the health and social care system. Alzheimer’s Research UK is currently calling for increased capacity in dementia researchers and for the best minds to

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enter dementia research and we would be very happy to discuss how we might support HEE to do this through engaging clinicians in the NHS.

2.4. We would welcome more information on the timescales for achieving the overall aims of the strategy and the dedicated budget that will be available to support it. It would also be helpful to have more detail on the governance arrangements to oversee its implementation, including how stakeholders will be involved and importantly how success against the aims will be measured.

2.5. We would welcome being engaged with the development of the strategy on a more ongoing basis. We have a great deal of research expertise at Alzheimer’s Research UK and can offer advice and support with the implementation of this strategy.

3. **Overall aim of the strategy**

   3.1. We welcome the direction of this strategy and its overall aims. In particular, we support a focus on engaging healthcare staff in research and developing a workforce that is ‘more receptive and responsive to research and innovation’. We are also pleased to see a commitment to developing clinical academic careers and clinical research leadership for the health and social care system (see section 6 for more detail).

   3.2. It is important there is clarity and consistency across the different national bodies that have a duty to promote research and innovation. To achieve this we would recommend that an overall goal for the system is articulated, supported by a coordinated set of strategies and activities to achieve it. For example, it appears that both HEE and NHS England have a role in promoting/achieving a culture that engages people with research. Whilst we absolutely welcome this focus from both organisations, it will be important that the activity to achieve this is done in a coordinated way.

   3.3. There also needs to be clarity across national and local organisations that have a responsibility in relation to research and innovation. HEE, NHS England, Local Education and Training Boards (LETBs), Clinical Commissioning Groups (CCGs) and Academic Health Science Networks (AHSNs) all have a role to play, and clarity about their roles in relation to each other as part of a wider system would be helpful. Their activities should be coordinated and clearly communicated to all stakeholders and health and social care organisations.

   3.4. To improve clarity it would be helpful for HEE to articulate the overall aim of this strategy, there are currently seven aims described. This would help to further define HEE’s focus and remit in relation to other bodies with a responsibility in this agenda.

4. **Objective one** – ‘Establish a system wide coherence to education and training which will facilitate and sustain the organisational and cultural changes required to embed research and innovation’

   4.1. We support a system-wide approach to education and training and welcome a strategy that focuses on the current healthcare workforce as well as the workforce of the future. We also support HEE’s aim to ensure that the NHS workforce has ‘sufficient understanding of research and innovation’. In the Association of Medical Research Charities’ (AMRC) vision
for research for the NHS\textsuperscript{2}, they called for research knowledge and the use of evidence to be included in basic training for all NHS staff. We support this assertion and would also urge that NHS staff are supported to engage with research throughout their careers, with awareness of the research infrastructure for the NHS.

4.2. It would be helpful for HEE to provide some context for how well research is already being embedded in the system and therefore the scale of the challenge. Achieving cultural change can be a long process and it would be useful to understand HEE’s ambition in more detail, including the timescale for achieving the aims of this strategy.

5. **Objective two** – ‘Ensure that the evidence on best practice for training in research and innovation informs and influences the delivery of effective education and training within the healthcare system’

5.1. We wholeheartedly support the notion that research is everybody’s business and therefore welcome HEE’s commitment to embed research and innovation into career information for all healthcare groups and promote clinical academic careers.

5.2. We also welcome HEE’s goal to support staff to be more receptive and responsive to research and innovation, and develop capacity in the workforce to do this. It would be useful to understand how HEE will increase capacity to do this in the context of a large number of competing priorities, and also what action will be needed to make this happen.

5.3. We support LETBs working with the CLAHRCs and AHSNs to ‘identify and commission the education and training required to train the current local workforce in the principles of research and innovation’, it is important there is cross system focus and support to achieve this. However, it is also important that there is clarity in the system around how the different responsibilities of these organisations work coherently together, including who is ultimately responsible for coordinating and sharing best practice across the system. It would also be helpful to understand how this strategy will be coordinated with the work of the Royal Colleges.

5.4. We support the introduction of metrics to measure how well research is being delivered. We would urge that these metrics measure the volume and quality of research, as well as the speed of adoption. It is also important that these metrics are developed in consultation with stakeholders, including the medical research charities.

6. **Objective three** – ‘Undertake the development of a transparent and integrated multi-professional clinical academic career framework for patient benefit’

6.1. We support this objective and what it is trying to achieve. Increasing clinical academic training pathways for all healthcare staff, at every stage of their career pathway, should be a key focus for this strategy – as well as educating future research leaders as emphasised. AMRC’s vision for research in the NHS highlights the importance of research experience being a ‘desired skill for NHS jobs’\textsuperscript{3}, and achieving this will be an important part of achieving this objective. As part of this we would also like to see more detail on HEE’s

\textsuperscript{2} Association of Medical Research Charities, *Our vision for research in the NHS*, May 2013

\textsuperscript{3} ibid
leadership role in relation to Continuous Professional Development (CPD), including how opportunities to participate in research will be promoted as part of this.

6.2. To achieve this it is important to put in place the right set of incentives across the system to encourage clinicians to enter research. Equally, it is also important to ensure that there is nothing in the system that is actively dis-incentivising them, for example a lack of capacity and time to undertake research. If we are going to defeat dementia we need more research capacity to do this and that means making sure more of the best minds enter a career in dementia research. A key focus for Alzheimer’s Research UK is trying to increase capacity in dementia research and we would be very happy to discuss how we might work with HEE to achieve this through engaging clinicians, including exploring any opportunities to support research through NHS contracts.

6.3. We would also like to emphasise that whilst it is important academic career pathways are well-defined, there should also be a degree of flexibility within them as well to ensure they are relevant to all professionals. This would help ensure that it was accessible to as many individuals as possible at different stages of their careers. We would also highlight the importance of HEE building on programmes that already exist and are shown to be working well.

6.4. We welcome HEE’s commitment to consult on the academic career pathway separately and we will contribute in more detail when this is available.

7. **Objective four** – ‘Establish a HEE Research Evidence Hub which will undertake an intelligence gathering, horizon scanning and evaluation function to ensure investment in future education and training is evidence informed’

7.1. We support this objective and are pleased to see its forward focus on ensuring that future education and training is informed and can respond to developments in research and innovation, increasing the capability to be proactive rather than reactive. We would be interested to see more detail on this as it develops.

If you have any questions about this response or would like to discuss it in more detail, please contact Clare van Lynden, Policy and Public Affairs Advisor: c.vanlynden@alzheimersresearchuk.org, 01223 824580.