

Summary

- The Academy of Medical Sciences welcomes the opportunity to contribute to the development of the Care Quality Commission's (CQC) incoming strategy. We believe that research should be included in the CQC's next strategy. Although it is not included in the current strategy, clinical research makes a vital contribution to improving the health and care of the nation – which is central to the 'accelerating improvement' strand of the CQC's strategy.
- Research active healthcare settings deliver better care, as reflected by the higher CQC ratings they receive.¹ Research active hospitals also have better patient outcomes, including lower mortality rates, with the benefits of research extending beyond those directly participating in research.^{2,3,4}
- Almost two thirds (64%) of doctors surveyed by the Royal College of Physicians said they would like to spend more time on research. Four out of five (80%) of those more recently surveyed said that they participate in clinical research because it improves patient care.⁵
- The Academy of Medical Sciences' report 'Transforming health through innovation: integrating the NHS and academia' emphasised the importance of the research performance indicators in the CQC's well-led framework in raising the profile of research in NHS organisations.⁶
- The NHS Constitution includes a "commitment to innovation and to the promotion, conduct and use of research to improve the current and future health and care of the population."⁷ As the overarching body that ensures NHS organisations meet the standards of quality and safety, we encourage the CQC to maintain its existing research performance indicators and engage with stakeholders such as NHS England and NHS Improvement and NIHR to develop a set of research metrics to further raise the profile of research in the NHS and enable the delivery of safe, effective, high quality care.⁸
- The new strategy poses an important opportunity for the CQC to place research at the heart of the delivery of care in the NHS and to better enable the delivery of safe, effective, high quality care.

Introduction

The Academy of Medical Sciences is the independent body in the UK representing the diversity of medical science. Our mission is to promote medical science and its translation into benefits for society. The Academy's elected Fellows are the UK's leading medical scientists from hospitals, academia, industry and the public service. We work with them to promote excellence, influence policy to improve health and wealth, nurture the next generation of medical researchers, link academia, industry and the NHS, seize international opportunities and encourage dialogue about the medical sciences.

We welcome the opportunity to contribute to the development of the Care Quality Commission's (CQC) incoming strategy. The Academy agrees with the CQC's ambition to

improve people's care by looking at the health and care systems' work and how they are acting to reduce inequalities. The Academy strongly believes this ambition would benefit from the insights from clinical research.

In January 2020, the Academy published a report 'Transforming health through innovation: integrating the NHS and academia' outlining the necessary actions to enhance the interface between the NHS and academia to accelerate the translation of research into patient benefit and population health.⁹ The report made a series of recommendations to better harness the research expertise and capability of the NHS to improve the health of the nation. It welcomed the CQC's efforts to raise the profile of research within NHS organisations through the inclusion of research performance indicators as part of the well-led framework. It also recommended that these were built on to co-develop a set of research metrics that would be used for annual publication of NHS Trusts' and Health Boards' research activities and reported to their Boards to inform workforce and job planning (see below).

Research directly benefits care giving

Clinical research is a vital contributor to improved health and care of the public. This has been clearly demonstrated during the COVID-19 pandemic, with clinical trials such as the RECOVERY trial recruiting over 30,000 participants to identify a number of successful treatments, including Dexamethasone and Tocilizumab.¹⁰ Dexamethasone alone has been estimated to have saved the lives of around 12,000 COVID-19 patients in the UK.¹¹

Beyond COVID-19, there is a growing body of evidence outlining the benefits of research to patients. Research active healthcare settings deliver better care, as reflected by the higher CQC ratings they receive.¹² Research active hospitals also have better patient outcomes, including lower mortality rates, with the benefits of research extending beyond those directly participating in research.^{13,14,15} For example, in a study of patients with colorectal cancer, the mortality rate in the first 30 days after major surgery was 5% in hospitals with high research participation, but 6.5% in hospitals that did not achieve high participation, a difference of 30%.¹⁶

Patients also value participating in research. 90% of clinical research participants have a good experience of participating in studies.¹⁷ They report being motivated by altruism, because they believe that participating in research improves care for others in the future, and they often have better understanding and monitoring of their own conditions.

By embedding research, NHS Trusts can make even more progress in improving patient care and outcomes by implementing interventions that have shown to be effective, decommissioning those that have proven to be ineffective, and better tailoring services to meet the needs of patients.

Aspiring to the highest standards of excellence and professionalism is a key principle of the NHS Constitution, which includes "its commitment to innovation and to the promotion, conduct and use of research to improve the current and future health and care of the population."¹⁸ As the overarching body that ensures NHS organisations meet the standards of quality and safety, the CQC should maintain its established research performance indicators. The CQC should also engage with the National Institute for

Health Research (NIHR), NHS England and NHS Improvement, and other relevant stakeholders to develop a set of research metrics as set out in our report (see above). The Academy would be pleased to support the development of robust, pragmatic and easily applied research metrics, for example by convening the relevant stakeholders from across the health and medical research landscape.

With research playing such a vital role in the improvement of the delivery of care, we encourage the CQC to maintain the existing research performance indicators and engage with stakeholders such as NHS England and NHS Improvement and NIHR to develop a set of research metrics to further raise the profile of research in the NHS and enable the delivery of safe, effective, high quality care.¹⁹

Research benefits the health and care workforce

A thriving and resilient workforce is key to the provision of good healthcare. Evidence suggests that engaging in research may improve clinicians' job satisfaction, can boost morale and can reduce burnout.^{20,21,22,23,24} Almost two thirds (64%) of doctors surveyed by the Royal College of Physicians (RCP) said they would like to spend more time on research. When asked to rank potential measures to improve job satisfaction, consultants valued support to spend their time on: leadership, education, training and research.²⁵ Four out of five (80%) of those more recently surveyed said that they participate in clinical research because it improves patient care.²⁶

The UKCRC Sub-Committee for Nurses in Clinical Research noted that research active nurses have more opportunities to shape the evidence base that informs their clinical practice; influence the broader agenda of health research so that it contributes to high quality health services and patient care; and make a critical contribution to nurse education.²⁷

There is also evidence indicating that adding a research component to clinicians' job plans could help with the recruitment and retention of high-quality staff.²⁸ Research-focused roles are likely to lead to more applications, with over two thirds (67%) of respondents to an RCP survey stating that having dedicated time for research would make them more likely to apply for a role.

Including academic content in medical posts has also been shown to enhance recruitment and retention, with some doctors using research as a mechanism to avoid burnout.^{29,30,31} Given current staff shortages and workload pressures, incorporating time for research in job descriptions could be an effective way of attracting staff and increasing job satisfaction, while contributing to the overall improvement in patient outcomes and healthcare delivery. This could be particularly valuable in hard-to-recruit locations and specialties. Offering research opportunities could therefore help to relieve pressures of high staff turnover, reliance on locums, and identifying cost effective innovations to improve care.³²

The Academy's economic assessment of the benefits of time spent on research also identified evidence that dedicated research time is associated with successful research programmes, improved job satisfaction and the potential for better employee retention.³³ There is also evidence that publicly funded research programmes provide economic

benefits in the form of improved patient outcomes and wider societal benefits, and by attracting research funding, including from life sciences companies.

Engaging in research could facilitate the promotion of evidence-based practice, by enhancing the workforce's ability to understand, interpret and implement the findings of research to improve patient care and outcomes. It could also provide the workforce with professional skills such as team-working, mentoring and communication.

As research can play an important role in the recruitment and retention of NHS staff, the CQC's strategy should enable the best delivery of care for patients by strongly promoting a culture of research across the NHS.

This response was prepared by Angel Yiangou, Policy Manager, and informed by our previous policy work in this area. For further information, please contact: Angel Yiangou, Policy Manager (angel.yiangou@acmedsci.ac.uk; +44(0)20 3141 3224).

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