

Transforming health through innovation: Integrating the NHS and academia

The UK is a world leader in biomedical and health research.

Such research has contributed to major advances in patient care, while at the same time increasing the wealth of the nation. Research activity in healthcare settings has also been linked to better patient outcomes and care. However, there is a decline in the capacity of NHS staff to engage with research and a decline in the number of clinical academics – research leads operating at the interface between academia and the NHS. There is also a widening gap between the NHS and academia that is preventing the research expertise and capability within the NHS from reaching its full potential. These issues must be addressed to accelerate the translation of research into patient benefit and better population health, and increase the appeal of the UK as a global hub for life sciences.

To address this imminent threat, the Academy of Medical Sciences calls for the support of leaders across the biomedical research landscape – both in academia, the NHS and beyond – to achieve six key outcomes that will be essential to enhance the interface between the NHS and the UK’s academic biomedical and health research sector:

1. **Creating a healthcare system that truly values research.**
2. **Fully integrating research teams across academia and the NHS.**
3. **Providing dedicated research time for research-active NHS staff.**
4. **Ensuring undergraduate curricula equip healthcare staff with the skills to engage with research.**
5. **Incorporating flexibility into postgraduate training pathways.**
6. **Streamlining research through joint research and development (R&D) offices.**

The benefits of implementing our vision could be transformational. In healthcare settings, it could lead to improved patient outcomes, job satisfaction and employee retention. Wider economic benefits could be achieved by reducing the reliance on locums and attracting research funding, including from life sciences companies. In academia, effective integration of NHS-employed active researchers could enhance the quality of research and its recognition in the Research Excellence Framework by ensuring that the research agenda is informed by, and responds to, the evidence needs of the health and care sector, as well as by expanding the institution’s knowledge and skills base.

Turn over for a summary of key actions needed by stakeholders to make this happen. You can read the full report and recommendations on our website at www.acmedsci.ac.uk/nhs-academia-interface.

The full report has been approved by the Academy of Medical Sciences’ Council and was developed by the following Steering Group members, in consultation with stakeholders across the sector:

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What is needed to make this happen?

<p>NHS executives</p> 	<ol style="list-style-type: none"> 1. At Board level, value and promote research across NHS Trusts and Health Boards, and annually publish research activities. 2. Use research metrics to inform workforce and job planning, as well as the annual publication of NHS Trusts' and Health Boards' research activities. 3. Encourage more healthcare professionals who contribute significantly to research to take up honorary academic appointments and integrate academic research teams. 4. Pilot contracts for consultants that include a percentage of time that is protected for research (formal pilot to be run in selected hospitals). Establish similar pilots in time across other healthcare professions. 5. Ring-fence and reinvest funding income from research into research endeavours, including backfilling time dedicated to research in NHS and public health organisations. 6. Establish an integrated R&D office function with affiliated higher education institution, in view of providing a single function.
<p>University Vice-Chancellors</p> 	<ol style="list-style-type: none"> 1. Offer honorary academic appointments to healthcare professionals that contribute significantly to research to enable them to better integrate academic research teams. 2. Provide such research-active honorary clinical academics access to the grant-making machinery and journal subscriptions, career development and promotion opportunities, and student supervision. 3. Invest in and support clinical academics by increasing the number of clinical academic posts, particularly at reader and senior lecturer level. 4. Ensure all healthcare undergraduate degrees offer a research component, and opportunities for students to learn about and participate in research. 5. Work with professional bodies to provide postgraduate healthcare trainees with a sustainable infrastructure for research and clear, flexible clinical academic career pathways. 6. Establish an integrated R&D office function with affiliated NHS Trust or Health Board, in view of providing a single function.
<p>Research funders</p> 	<ol style="list-style-type: none"> 1. Develop funding schemes that encourage greater mobility across sectors. 2. Explore how to support undergraduates to learn about and participate in research. 3. Work with professional bodies to support academic career pathways across all healthcare professions and build capacity in clinical research leadership. 4. Review existing funding streams and work together to ensure that research opportunities are available across all healthcare and public health professions. 5. Support a pilot for dedicated consultant time for research, as appropriate.
<p>Public and professional bodies*</p> 	<ol style="list-style-type: none"> 1. Work with stakeholders across the UK to co-develop a set of research metrics to evaluate the level of research activity and encourage further research across healthcare settings, including in primary and secondary care, and in public health. 2. Undertake a pilot for dedicated consultant time for research and consider its expansion to other healthcare professions following an evaluation of its impact on research activity, patient outcomes, and staff recruitment and retention. 3. Ensure each undergraduate curriculum for healthcare students offers a research component. 4. Incorporate flexibility in academic career pathways for all healthcare professionals and build capacity in clinical research leadership. 5. Develop a framework of agreed essential research competencies to inform curricula across healthcare professions.

*Public and professional bodies include (see full recommendations for further details): NHS England and NHS Improvement, NHS Wales, NHS Scotland, Health and Social Care Northern Ireland, Public Health England, NHS Health Scotland, Health Protection Scotland, Public Health Wales, Public Health Agency in Northern Ireland, local authorities, the British Medical Association, Medical Royal Colleges, Medical Schools Council, Conference Of Postgraduate Medical Deans, Health Education England, General Medical Council, Nursing and Midwifery Council, Health and Care Professions Council and General Pharmaceutical Council.