

Meeting title:	UHL Public Trust Board public paper R				
Date of the meeting:	1 December 2022				
Title:	CRN East Midlands Quarterly Board Report				
Report presented by:	A Furlong, Medical Director, E Moss, Chief Operating Officer, CRN East Midlands and A Farooqi, Clinical Director, CRN East Midlands				
Report written by:	Elizabeth Moss, Chief Operating Officer, CRN East Midlands and Carl Sheppard, Host Project Manager, CRN East Midlands				
Action – this paper is for:	Decision/Approval		Assurance	x	Update x
Where this report has been discussed previously	CRN East Midlands Executive Group on 16 November 2022.				

To your knowledge, does the report provide assurance or mitigate any significant risks? If yes, please detail which
The purpose of the report is to provide assurance against the CRN Host Contract. The report does not relate to any significant risks.

Impact assessment
The current CRN Host Contract is due to expire in March 2024. UHL is submitting an application to host the new East Midlands Regional Research Delivery Network (RRDN) from April 2024, as described in this report.

<p>Acronyms used:</p> <ul style="list-style-type: none"> CRN - Clinical Research Network RDN - Research Delivery Network RRDN - Regional Research Delivery Network HLOs – CRN High Level Objectives EFPB – Executive Finance & Performance Board

Purpose of the Report

University Hospitals of Leicester (UHL) NHS Trust is the Host Organisation for the National Institute for Health and Care Research (NIHR) Clinical Research Network East Midlands (CRN). UHL is contracted by the Department of Health and Social Care to take overall responsibility for the monitoring of governance and performance of the Network. For the information of the Board, we have prepared this update paper on the recent progress and current priorities of CRN East Midlands. Appended to the report is our latest Finance report and Risks & Issues Register.

Recommendation

We would welcome the Trust Board’s input to review our report and provide any comments or feedback you might have.

Summary

This report provides an update on the reconfiguration of the Network (including the application process for the future Host of the East Midlands RRDN), ongoing work to review our regional research delivery performance

and launch of our new Health and Care Research Scholars Programme. The report also includes information pertaining to our current financial position, future budget and the CRN High Level Objectives (HLOs).

There are currently two risks on our risk register, both of which relate to uncertainty due to the expiry of the current Host contract in March 2024. Risk #63 states that within our partner organisations, it could be difficult to re-appoint to research delivery posts on a short-term basis. This risk is currently rated as medium-low. Risk #64 relates to uncertainty for roles within the CRN Core team (management & support staff). This uncertainty could lead to experienced staff leaving their posts and it could be difficult to re-appoint to posts on a short-term basis. This risk is currently rated as medium. These risks are being actively managed, with mitigating actions set out on the risk register.

We have added a new issue to our issues register; this states that CRN EM performance for delivery of NIHR studies has decreased over the last 18 months. This could negatively affect HLOs and have a reputational impact for research in the East Midlands. The severity of the issue is scored as moderate and the priority is scored as high. To manage this issue, we have taken forward several actions which are described in this report and set out on the issues register.

Main report detail

1. Current priorities and progress

i) Reconfiguration of the Network

From April 2024, the NIHR Clinical Research Network will become the NIHR Research Delivery Network (RDN). The 15 current Local Clinical Research Networks (LCRNs) will be realigned to map onto the NHS England regions. Coverage of the whole of England will be delivered through 12 NIHR Regional Research Delivery Networks (RRDNs), the scope of which is similar to the CRN, although with some changes. The Department of Health and Social Care (DHSC) is seeking to appoint organisations to host each RRDN from April 2024.

UHL initially submitted an expression of interest to host the new Network and have since been invited to submit a full application. This is being led by Andrew Furlong. To coordinate the completion of the application, UHL's Head of Strategy and Planning, Simon Pizzey, has convened a small task and finish group. This group includes colleagues from a range of departments to input their knowledge and expertise into the application. The application is currently being worked up and will go to the EFPB meeting on 22nd November in preparation for submission by 6th December 2022. We expect the new Host organisation to be notified in February 2023.

ii) Regional review on research delivery performance

As health and care services in the East Midlands have begun to recover, alongside the research portfolio, it is important to ensure there is sufficient focus now returning to performance and impact measures. Over the last 18 months, understandably, regional performance with respect to the overall number of participants recruited into NIHR research studies has decreased and we have identified this as an area for improvement. Although a measurement of participants recruited into research is no longer a formal High Level Objective, we are keen to explore how we can increase opportunities for people in the East Midlands to participate in research.

There are many reasons for the reduction in recruitment in recent times, which include workforce fatigue & reduced capacity, reduction in the number and availability of high recruiting studies, stretched clinical

services, remaining Covid research activity (e.g. follow-up) and a grants “gap” over the Covid period resulting in fewer new studies entering the CRN portfolio. This has been added as a live issue on our issues register (section 4 of this report).

We have begun a joint piece of work with our partner organisations to address these challenges collaboratively. We initially met with R&D teams in October to set out the context and discuss potential ideas to increase research activity. We have since undertaken an exercise to understand the current strengths & weaknesses of the regional research portfolio as well as opportunities for improvements. We are seeking to identify 3-4 workstreams and are establishing task-and-finish groups to focus on improving specific areas of performance.

iii) **Launch of new Health and Care Research Scholars Programme**

CRN East Midlands has recently launched a new Health and Care Research Scholars Programme which aims to increase Chief Investigator capacity across the region. The new programme - which is taking place as an initial pilot - will see the Network support two groups of scholars at a level of up to one day a week for a 12 month period. The programme is open to applicants from all registered professions including research active individuals in Public Health and Social Care. Research Scholars applicants will be research active individuals who wish to become Chief Investigators. Advanced Research Scholars will include those already established as senior researchers and provide protected time to develop new grant applications.

2. **Financial Position**

Our latest Host finance report is attached at Appendix 1. This report provides an update on our year to date financial performance and current forecast. We have recently received confirmation that we are likely to receive a flat roll-over budget for 2023/24, although further treasury announcements may alter this.

The Network plans for the allocation of funding in 2023/24 were discussed at the Partnership Group on 8th November. For the purpose of maintaining stability and resilience across the partners, it was agreed that for 2023/24 the CRN would fund all partner NHS organisations at 100% of 2022/23 infrastructure payments, with the exception of strategic or additional in-year funding. The CRN will also retain funding to continue the Scholars program (as above), potentially some investments across ICSs (TBC) and a strategic fund for under-served research work, some of which are ongoing commitments from 2022/23.

3. **Performance**

Within the Performance and Operating Framework for the CRN, there are a range of performance expectations across all areas of work, including the High Level Objectives (HLOs). The HLOs are nationally set objectives for the Clinical Research Network relating to research delivery. The HLOs for 2022/23 are set out in the table below. With the exception of the PRES local ambition, all HLOs are measured at CRN-wide (national) level, however, the Network is keen to show our regional contribution to these national metrics. The below table details current progress in relation to these metrics.

Following discussion at the DHSC CRN Contract Management Board on 5th October 2022, two new measures of the Efficient Study Delivery Objective have also been added to reflect additional measures for efficiency in terms of study delivery (with a focus on commercial studies). We are awaiting further guidance from the CRN Coordinating Centre to understand exactly how these new measures will be reported and the expectations as to how we can support this.

Objective		Measure	National ambition	East Midlands data (as of 1/11/22)
Efficient Study Delivery (ESD)	Deliver NIHR CRN Portfolio studies to recruitment target	Percentage of <u>closed</u> to recruitment commercial contract studies which have achieved their recruitment target	80%	75%
		Percentage of <u>closed</u> to recruitment non-commercial studies which have achieved their recruitment target	80%	81%
		(NEW) Percentage of <u>open</u> to recruitment commercial contract studies which are predicted to achieve their recruitment target	60%	NEW - TBC
		(NEW) Percentage of <u>open</u> to recruitment non-commercial studies which are predicted to achieve their recruitment target	60%	NEW - TBC
Provider Participation (PP)	Widen participation in research by enabling the involvement of a range of health and social care providers	Percentage of General Medical Practices with recruitment in NIHR CRN Portfolio studies	45%	32%
		Percentage of NHS Acute trusts with recruitment in NIHR CRN Portfolio studies every quarter	99%	100%
		Percentage of NHS Acute trusts with recruitment in commercial contract NIHR CRN Portfolio studies every quarter	70%	75%
		Percentage of NHS Ambulance, Care and Mental Health trusts with recruitment in NIHR CRN Portfolio studies every quarter	95%	100%
Participant Experience (PE)	Demonstrate to participants in NIHR CRN supported research that their contribution is valued through collecting their feedback and using this to inform improvement in research delivery	Number of NIHR CRN Portfolio study participants responding to the Participant Research Experience Survey (PRES)	1,344 (local) 14,000 (national)	804 (local)

Expanding our work with the life sciences industry to improve health and economic prosperity (ELS)	Sustain or grow commercial contract research	Number of new commercial contract studies entering the NIHR CRN Portfolio as a percentage of the total MHRA CT approvals for PHASE II-IV studies	75%	Not locally applicable
--	--	--	-----	------------------------

Reflecting on the above data, we are pleased to report an improvement in the East Midlands position for the Efficient Study Delivery (ESD) measures, since our last report and moving in line with national expectations. This is partly due to work done (above) with partners, and partly due to progress of the DHSC Reset Programme to recover the UK research portfolio, along with a national approach to data cleansing.

For the percentage of General Medical Practices with recruitment in NIHR CRN portfolio studies, the ambition of 45% relates to the year-end position, therefore, our current East Midlands figure of 32% represents we are on track at this stage of the year. Similarly, for the number of NIHR CRN Portfolio study participants responding to the Participant Research Experience Survey (PRES), our contribution of 804 responses at this point in the year is in line with our annual target of 1,344.

4. Risks & Issues

Risks and issues are formally reviewed through the CRN Executive Group chaired by Andrew Furlong. A risks & issues register (Appendix 2) is maintained with risks discussed and mitigating actions agreed; this is shared periodically with the NIHR CRN Coordinating Centre (CRN CC). Risks and issues are recorded on the register as follows:

- Risk #063 - The CRN Host contract is due to expire in March 2024, which introduces some uncertainty for partner organisations; this could make it difficult to re-appoint to vacant posts on a short-term basis. We are continuing to update our Partner organisations regularly on the future changes to the Network and provide opportunities to raise any concerns. Once the new RRDN Host has been confirmed (expected in February 2023), we will begin a dialogue to provide assurances to Partners with respect to the future arrangements. Some partner organisations have different approaches to risk, which makes this risk difficult to accurately assess. However, through taking the actions detailed, it is likely the probability score has reduced and the impact score is moderate. The overall risk rating is currently relatively low, and we will continue to reassess.
- Risk #064 (New) - The CRN Host contract is due to expire in March 2024, which introduces some uncertainty for roles within the CRN Core team (management & support staff). This risk is added as it is recognised the uncertainty around the future Network contract for the CRN core/management team is different from that of the wider CRN workforce. We are keeping staff updated in relation to the future Hosting arrangements and currently published information regarding the RRDN. The risk probability is scored as possible and the impact score is moderate, giving an overall medium risk rating.
- Issue #07 (New) - CRN EM performance for delivery of NIHR studies has decreased over the last 18 months. This could negatively affect HLOs and have a reputational impact which could lead to reduced opportunities for people to participate in research in the East Midlands. The severity of the issue is scored as moderate and the priority is scored as high. To manage this issue, we have taken forward a number of actions, as described in the sections above and set out on the issues register.

If you have any questions about this report or require any further information, please contact:

- Elizabeth Moss, Chief Operating Officer, elizabeth.moss@nhr.ac.uk or
- Professor Azhar Farooqi OBE, Clinical Director, azhar.farooqi@nhs.net or
- Professor David Rowbotham, Deputy Clinical Director, david.rowbotham@nhr.ac.uk or
- Carl Sheppard, Host Project Manager, carl.sheppard@nhr.ac.uk

Supporting documentation

- Appendix 1 – Finance Report
- Appendix 2 – Risks & Issues Register

UNIVERSITY HOSPITALS OF LEICESTER NHS TRUST

REPORT TO: CRN EM EXECUTIVE GROUP

DATE: 14th NOVEMBER 2022

REPORT FROM: PARITA YADAV – SENIOR FINANCE BUSINESS PARTNER, EDITED BY ELIZABETH MOSS, CRN CHIEF OPERATING OFFICER

SUBJECT: CRN EM FINANCE UPDATE

1. Purpose

This report provides an update on the following issues:

- 22/23 year to date position and forecast out turn

2 22/23 Year to Date and Forecast

The table below summarises the current year to date and forecast out turn.

		April to October 2022		
	Annual Plan	YTD Actual	Forecast Expenditure	Variance
	£'000	£'000		£'000
Income				
NIHR Allocation	23,273	13,654	23,709	435
Expenditure				
Network Wider Team	600	322	588	-13
Host Services	367	214	369	2
Management Team	975	564	955	-21
Study Support Service (SSS) Team	508	285	510	2
DDT Central Team	483	237	429	-54
CLINICAL & SG LEADS	188	94	180	-8
NON PAY NON STAFF	229	128	271	42
PRIMARY CARE SSC	75	52	90	15
DDT TRANSFORMATION	477	220	496	19
TRANSFORMATION NON DDT	279	79	271	-8
PUBLIC HEALTH	77	39	77	0
ADDITIONAL FUNDING	693	332	628	-65
UNDERSERVED COMMUNITIES	462	17	442	-20
Partner Organisation Infrastructure	16,978	9,791	17,367	390
Research Site Initiative	882	491	898	16
ETC	0	49	49	49
To be allocated	0	739	89	89
Total	23,273	13,653	23,709	0

In relation to the above table, the main points to note are:

Overall

At this mid-point in the year, the plan is still on track to be delivered, with some relatively minor variances in the forecast compared with the original plan. Variances of over £50,000 are detailed below:

Income

The £435k favourable variance to plan primarily relates to recently notified additional income for AfC pay uplift, which was not anticipated at the start of the year. The process for allocating this to partner organisations is currently underway; income is anticipated in December 2022, and to flow out to partners by the end of the financial year. Additionally, there has been a small amount of income (£5,657) for a new national costing process for commercial studies and as previously reported, c.£48k related to Excess Treatment income which will be passed on to Partner Organisations.

Direct Delivery team (DDT Central Team)

Favourable pay variance is £53,094. The DDT team is undergoing a planned period of expansion, to meet increasing delivery of studies both within and outside of the NHS environment. There have been several challenges in managing and recruiting to the DDT Team - difficulties in recruiting to new posts, variation in WTE, slippage due to leavers and new starters. There is a good level of confidence in relation to this variance, with a number of posts soon to be commencing.

Additional Funding

Variance of just over £65,000 in this cost centre related to some delays and slippage in appointments relating to the awarding of funding through under-served bids, due to delays in starting the projects, HR or the changes in nature of the bids. As a result our intention is to continue to review and commit funding, such that any further variance due to slippage can be offset.

Partner Organisation Infrastructure

The variance here relates, as above, primarily to additional income due to AfC pay uplift, notified on 26 October 2022. As outlined, this will be paid to partners in the coming months.

3. Other issues

Agreement of balances issue

The 2021/22 Q4 submission did not reconcile back to the LCRN's Host ledger due to the discrepancy with the agreement of balances equating to £1,772.96. In the Q1 submission to the NIHR CRN Coordinating Centre we reported this as an underspend; now at Q2 we can confirm this has been resolved, and written off through the host, with 2022/23 income and expenditure now in balance.

Vacant posts and turnover

The current level of vacant posts is 5.43% £1,264,667; this represents a reduction from Q1, which reported 8.9% (£2,070,804) as vacant posts. This figure is still reflective of the impact of an overstretched research and wider NHS workforce. Over half of vacancies arise within partner delivery budgets, which is a mix of ongoing turnover in delivery roles (mostly research nurses), along with some new roles due to investment through strategic funding. Many of the posts are going through the appointments process.

Host Finance Lead

Martin Maynes has now retired from UHL, with Mahendra Wadhvana due to commence in post as Host Finance Lead in late November.

4. Recommendations

The CRN Executive Committee is asked to:

- Note the 22/23 year to date and forecast out turn

University Hospitals of Leicester NHS Trust
Owner of Risk Register: Executive Group

PRE-RESPONSE (INHERENT)										POST-RESPONSE (RESIDUAL)							
Risk ID	Primary category	Date raised	Risk owner	Risk Description (event)	Risk Cause and Effect	Probability	Impact	Value (Pxl)	Proximity	Response Actions	Action owner(s)	Action status	Probability	Impact	Value (Pxl)	Risk status (open or closed date)	Trend (since last reviewed)
R063	Performance	July-22	COO	The CRN Host contract is due to expire in March 2024, which introduces some uncertainty for partner organisations; this could make it difficult to re-appoint to vacant posts on a short-term basis.	Cause: Host contract expires on 31 March 2024, some organisations may have different approaches to risk, impacting re-appointment of research delivery posts; thus vacancies in the region could increase. Effect: Reduced workforce capacity could impact on ability to deliver all elements of POF and Partner Contracts, this could impact research delivery differently across the region.	3	3	9	April 2023	Communicate future state wrt Research Delivery Network with all partner organisation, HR and R&D teams, to instill confidence for research delivery posts to continue plans	COO and STLs	5	2	3	6	Open	Decreased
										Ensure posts are advertised as promptly as possible	Senior team / line managers	4					
										Any concerns from partners to be escalated to leadership team, and discussed directly with PO	STL/ Leadership team	1					
										Advice to be sought from NIHR CRN CC as required	COO/CD	1					
										Consider appointing joint posts with CRN West Midlands	COO	4					
										Once RRDN Host has been confirmed (Feb 23), begin dialogue as to providing appropriate assurances to Partners	COO	1					
R064	Performance	Nov-22	COO	The CRN Host contract is due to expire in March 2024, which introduces some uncertainty for roles within the CRN Core team (management & support staff)	Cause: Host contract expires on 31 March 2024, which could cause uncertainty around future roles due to a perceived lack of job security. Effect: Experienced staff could leave their posts; there could be difficulties in re-appointing to vacant posts on a short-term basis. This may impact on ability to deliver all elements of POF and Host Contract.	3	3	9	April 2023	Communicate regular updates to staff in relation to future Hosting arrangements and RRDN	COO	4	3	3	9	Open	New
										Any concerns from staff to be escalated to leadership team, and discussed directly with staff	Leadership team	4					
										Advice to be sought from NIHR CRN CC as required	COO/CD	1					
										Once RRDN Host has been confirmed (Feb 23), begin dialogue as to providing appropriate assurances to LCRN Core team staff	COO	1					

SCORING:

PROBABILITY	IMPACT				
	Insignificant (1)	Minor (2)	Moderate (3)	Major (4)	Catastrophic (5)
Highly Likely (5)	5	10	15	20	25
Likely (4)	4	8	12	16	20
Possible (3)	3	6	9	12	15
Unlikely (2)	2	4	6	8	10
Highly Unlikely (1)	1	2	3	4	5

1-5 GREEN = LOW*
6-11 YELLOW = MEDIUM
12-19 AMBER = HIGH
20-25 RED = EXTREME

*Only risks with an Inherent Risk of 6 or above are recorded on this Risk Register
* Risks with a scoring of 12 and above should be monitored and escalated

Action RAG Status Key:

Complete	5
On Track	4
Some Delay – expected to be completed as planned	3
Significant Delay – unlikely to be completed as planned	2
Not yet commenced	1

CRN East Midlands Issues Register

Date last reviewed: 11.11.2022

Issue ID	Issue Type	Date Raised	Owner	Description	Severity	Priority	Actions	Action Owners	Action status	Issue status
I07	Performance	Oct-22	COO	<p>CRN EM performance for delivery of NIHR studies has decreased over the last 18 months. This could negatively affect HLOs and have a reputational impact which could lead to reduced opportunities for people to participate in research in the East Midlands.</p> <p>Cause: Workforce fatigue & capacity, reduction in high recruiting studies, service pressures, remaining Covid research activity (e.g. follow up), grants “gap” resulting in fewer new studies entering the Portfolio.</p> <p>Effect: Reduction in overall volume of participants recruited into NIHR studies, not meeting expected contribution to 'Effective Study Delivery' HLO and negative reputational impact. Potential impact on future research activity in the region."</p>	Moderate	High	Meet with Partner R&D teams to review performance	COO/IOM/STLs	5	Open (NEW)
							Undertake SWOT analysis to understand strengths & weaknesses of regional research portfolio and opportunities for improvements	IOM/RDMs/ROMs	5	
							Identify 3-4 workstreams with T&F groups to address specific performance areas	COO	3	
							Share lists of existing studies which are performing better in other regions, but are open in our region at present	IOM	5	

Key

Severity	Priority
Minor	Low
Moderate	Medium
Major	High
Catastrophic	Critical

Action RAG Status Key:

Complete	5
On Track	4
Some Delay – expected to be completed as planned	3
Significant Delay – unlikely to be completed as planned	2
Not yet commenced	1