

## **Research and Innovation Strategy for the Integrated Care System North East and North Cumbria**

### **Executive Summary**

This first Research and Innovation Strategy for the integrated care system in the North East and North Cumbria is a purposely high-level approach developed through engagement with stakeholders from across the region plus the findings of a research and innovation workshop held in November 2022. This Research and Innovation Strategy is specifically aligned to the region's integrated care strategy 'Better Health and Wellbeing for All'<sup>1</sup> which sets a vision to 2030.

We aspire to be a learning health system, with a shared commitment across all stakeholders of 'being the best at getting better' for the benefit of our population. Research and Innovation can support learning and improvement and should also be informed by the latter – this strategy aims to facilitate this positive feedback loop.

Our strategy sets out seven principles for research and innovation across the North East and North Cumbria which are to: -

- Focus on research co-production and user centred health and care design to ensure we support real people and communities, with no one left behind.
- Drive a strong culture of innovation, where we have 'licence to succeed and permission to fail.' Some projects will fly, and others fail, but all will support learning and improvement.
- Nurture and grow, a confident and highly skilled workforce with the necessary capacity and tools required to deliver evidence-informed, place-based care.
- Support the use of evidence, data, and analytics to understand if we are doing the right things in the right way, drawing on the lived experience of people using our services.
- Collaborate across the regional ecosystem, capitalising on our unique assets, infrastructure, and relationships, to unlock new technologies, accelerate clinical trials and develop new methodologies to meet the health and care needs of our population.
- Attract inward investment and maximise untapped resources by working with industry and Local Authorities to support economic development and job creation and thus the wellbeing of our population.
- Celebrate success at all levels and draw on talent in every sector to ensure we position this region as an internationally visible centre for excellence in research and innovation.

These principles will underpin the way in which we all work across our ecosystem to drive forward research and innovation, and the use of evidence for improvement, thereby supporting the integrated care system to address its greatest challenges. Only by working together, with a shared endeavour and listening to our population will we understand what is important, and ensure research and innovation is designed with people at its heart.

## 1. Introduction

The health and care system is constantly evolving and increased integration presents new challenges and opportunities, where innovative ideas and solutions can play a stronger role in better serving the health and care needs of individuals and communities, as well as improving staff experience. Research underpins our understanding of health and helps to establish what forms of care people need to stay well and enjoy their lives. The Health and Care Act (2022)<sup>2</sup> states that Integrated Care Boards must promote research and innovation, and use evidence obtained from research and evaluation, in order to inform commissioning, ensure services are evidence-informed and providers are research-active.

Health and care systems can be slow to adopt, implement, and benefit from research, despite the potential for life changing impact for our populations. In the North East and North Cumbria region, we have a vibrant research and innovation ecosystem which is committed to working collaboratively to improve population health and drive economic growth. However, whilst each organisation in this ecosystem is delivering impact in its own right, a more coordinated and synergistic approach, focussed upon areas of greatest need, has the potential to increase the impact for population benefit.

## 2. Background and Context

The integrated care system in the North East and North Cumbria covers a large and diverse area, encompassing major urban centres such as Newcastle, Sunderland, and Middlesbrough, as well as more rural and remote areas in Northumberland, County Durham, and Cumbria. The region has approximately 3.1 million residents with significant health and care needs and well documented health inequalities.

The Integrated Care Partnership (ICP) is responsible for setting and developing the integrated care strategy for health and care in the region. It is a partnership between local government, the NHS and voluntary, community and social enterprise sectors, with a key purpose to align the ambition and strategies of partners across four areas, to improve the health and well-being of our communities. The four ICP partnerships are: - North Cumbria (Cumberland, Westmorland and Furness); Central (County Durham, Sunderland and South Tyneside); North (Gateshead, Newcastle, North Tyneside, Northumberland); and Tees Valley (Darlington, Hartlepool, Middlesbrough, Redcar and Cleveland and Stockton-on-Tees), please see Figure 1 for further details.



### Figure 1: The four area ICPs

Our region has an ageing population, higher-than-average rates of chronic disease, and a large proportion of people with multiple long-term conditions including mental ill-health. However, the area also boasts numerous research and innovation assets, from world-class higher education institutions, a thriving life sciences sector, and strong collaborations between healthcare providers, local authorities, and the voluntary and community sector. These strengths provide a source of talent, ambition, and confidence to collectively make a real difference to the lives of those living in the region.

Research has a pivotal role to play in providing the evidence we need to prevent illness and improve health, ensure quality and safety in care provision, and reduce unfair differences in health outcomes. In addition, innovation in the health and care system is purposeful and addresses real-world challenges and priorities facing our population today. By focussing upon these two areas, we can make the greatest impact to people. However, to fully capitalise on research and innovation, we need a system that is committed to learning and improvement via the use of evidence and adoption of positive innovations to drive change and efficiency in how we deliver care.

There are a plethora of policy drivers<sup>3</sup> to enhance and support research development and delivery, as well as evidence mobilisation and the use of research to identify unmet needs for example, initiatives such as Our Future Health<sup>4</sup>. In recent times, national policy has evolved the research agenda from being solely focussed upon medical treatment to now encompassing a wider health and care system including primary care, social care, public health and the voluntary, community and social enterprise (VCSE) sector, as well as widening practitioners' access and roles as researchers.

In addition, commitments to "levelling up"<sup>5</sup> require focus on areas with underserved populations and unmet needs which is pertinent to the region's population and the integrated care objective on tackling inequality.

Using these national policy drivers and our existing regional strengths, this Research and Innovation Strategy sets out an ambitious, yet achievable plan, for the North East and North Cumbria to become a recognised powerhouse for research, innovation, learning and improvement which will positively contribute to population health, support the reduction of health inequalities, and drive economic growth.

### 3. Strategic Goals

The integrated care strategy 'Better Health and Wellbeing for All,' published in December 2022 is predicated on an inclusive vision to improve the health and broader wellbeing for everyone across the North East and North Cumbria. There is a commitment to four overarching goals that are supported by measurable improvements and cross-cutting themes, aiming to: -

1. **Reduce the gap** between the region and the England average in life expectancy and healthy life expectancy at birth by at least 10% by 2030. This goal aims to reverse the current trajectory and set a long-term transformation in health outcomes.
2. **Reduce inequality** in life expectancy and healthy life expectancy at birth between people living in the most deprived 20% of neighbourhoods and the least deprived 20% by at least 10% by 2030. This goal focuses on reducing health inequalities and improving health outcomes for everyone.

3. **Increase the percentage of children with good school readiness at reception**, particularly for children from disadvantaged groups. This goal aims to provide the best possible start in life for children and young people, which will have lasting positive effects on the physical and mental health outcomes and fairer outcomes.
4. **Improve health and care services in the region**. This may involve new, more efficient and effect ways of working and results in a better experience for patients, their families, and staff. Ensure that the Integrated Care System is rated as good or outstanding by the Care Quality Commission (CQC).

In addition to the above overarching goals, a number of supporting actions have been defined and these include: -

- reducing smoking prevalence;
- decreasing alcohol related hospital admissions;
- halving the difference in suicide rate;
- lowering drug related deaths;
- increasing the percentage of early-stage cancer diagnosis;
- increasing the number of people within the population at a healthy weight;
- reducing social isolation;
- increasing health life expectancy.

We will focus research, innovation, and improvement work upon the existing priorities of the Better Health and Wellbeing for All Strategy and be vigilant for, and responsive to, new and emerging needs, as was required in recent COVID-19 pandemic.

#### **4. Enhancing health and well-being through research**

The benefits of health and care system involvement in research are well established and lead to better processes and outcome of care for service users. Research has been shown to improve survival rates for patients and the care they receive, along with having a positive impact on the NHS and its staff<sup>6</sup>. This finding is demonstrated across both primary and secondary care.<sup>7,8</sup> Research participation improves job satisfaction for clinicians, helping them build new transferable skills, preventing burnout and supports staff retention thereby fostering a thriving environment within organisations while growing capability and resource. This drives better care for patients and improved Care Quality Commission (CQC) ratings<sup>9</sup>. For patients and the public, greater participation in research studies offers access to new experimental treatment options, improved care, and reduced mortality rates.

Under this Research and Innovation Strategy and the Digital and Data Strategy, the integrated care system is adopting an analytics-driven approach employing population health data to identify health needs and support earlier intervention. Use of data to inform decision-making, resource allocation, and targeting preventive interventions can be efficient and impactful. However, we are mindful of the risks of digital exclusion and digital poverty. Thus we are committed to working closely with service users and members of the public to ensure they have confidence in the purposeful use of their data.

We will ensure there is wide public involvement and community engagement, as well as co-production, shaping research priorities, research delivery and implementation to support health and care service improvement. Such an approach will ensure we meet local needs and empower communities to improve their own health whilst also fostering equality, diversity, and inclusivity.

## **5. Innovation as a catalyst for addressing health and economic inequalities**

There is strong correlation between health inequalities and economic inequalities. Although health and care services may not be able to fully address the wider social and economic factors causing poor health outcomes and inequity, they can act as 'Anchor Institutions' being major employers in the region and supporting wider business and services. To address the social and economic determinants of health in the region, there is a commitment to harnessing the collective strengths of Anchor Institutions, leveraging their resources, influence, community relationships and innovative capabilities to foster a healthier, more equitable, and economically vibrant community. Together, they can also develop and implement joint initiatives, research programmes, and support the implementation and adoption of new innovations that address the most effective and efficient ways of delivering care and achieving the best outcomes for patients. We will engage with Anchor Institutions from across health and social care and academia, to deliver our strategic goals, and drive economic growth.

## **6. The regional research and innovation landscape**

Our six regional universities include a large cadre of highly skilful researchers and many externally funded research infrastructures supporting work across the spectrum from discovery, diagnostics and new therapies to policy-focused and applied work supporting implementation and system change. We also house numerous companies spanning health, life sciences and digital technologies, with significant and unique innovation infrastructure. The latter supporting intellectual property, market research, evaluation, and regulatory approval, enabling adoption. This provides us with an incredibly strong platform to utilise public sector investment in research and innovation ensuring a visible and meaningful impact in addressing the health and care needs of our population, see Figure 2.

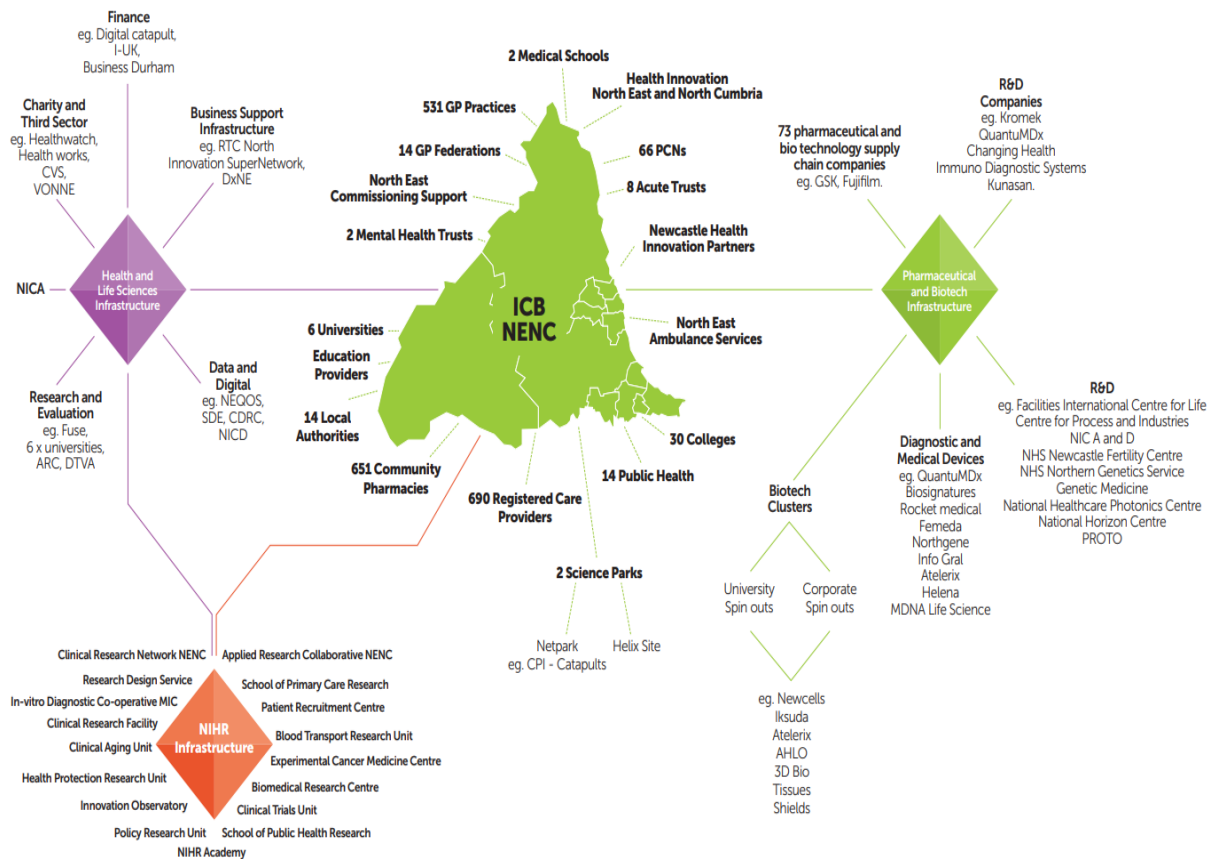


Figure 2: The Research and Innovation Ecosystem comprising the North East and North Cumbria region

## 7. Strategic objectives for research and innovation

The objectives listed below are high level as each organisation in the regional ecosystem will have its own strategies and processes to support research and innovation. However, the actions below reflect the important convening role ICB plays in ensuring a holistic regional approach to research and innovation for population health improvement and accelerated economic growth.

1. Support organisations across the regional ecosystem to successfully deliver the goals defined within its Better Health and Wellbeing for All Strategy
2. Disseminate and mobilise the outputs of health and care research and innovation, from the region and from other sources, to drive health improvement and economic equity
3. Improve access to, and the adoption of, research evidence and knowledge of innovative practices for decision makers and practitioners across the system
4. Support horizon scanning for new ideas and align research and innovation to address existing unmet needs whilst also supporting work to identify and tackle new and emerging needs
5. Stimulate a culture of collaboration across the research, innovation, and improvement components of the ecosystem, as well as supporting the cross fertilisation from other sectors
6. Facilitate public involvement and community engagement in research and innovation and improvement, and increase equity of participation for all communities, ensuring parity for all

7. Support and develop the health and care workforce with respect to research and innovation and improvement methodologies help deliver better health and wellbeing for all
8. Influence national policy drivers of research and innovation to meet the current and future needs of the North East and North Cumbria population

## **8. Recommendations – Next Steps**

The following recommendations are suggested for implementation within the next three months.

1. Stakeholder engagement with all partner organisations on this Strategy to gather critical feedback and insight in terms of the creation of a jointly owned operational plan
2. Ensure public members and community organisations are also included in the consultation and involved in the 'next steps' work
3. Create an operational plan, with defined roles and responsibilities, as well as budget information and key priorities in terms of addressing unmet needs
4. Address the governance and oversight of this Strategy and its associated activities through the creation of a regional Research and Innovation Partnership Forum
5. Gather case studies of research and innovation excellence from across the region to showcase our cross-sector collaborative work and inform external communications
6. Collate specific research and innovation commitments from partner organisations over the short (1-2 years) and longer term (3-5 years) – to come from engagement with stakeholders

## **9. References**

1. Better Health and Wellbeing for All - <https://northeastnorthcumbria.nhs.uk/media/ilibfbxf/final-icp-integrated-care-strategy-7-december-2022.pdf>
2. Health and Social Care Act 2022 - <https://www.legislation.gov.uk/ukpga/2022/31/part/1/crossheading/integrated-care-boards-functions/enacted>
3. Best research for best health: the next chapter June 2021 <https://www.nihr.ac.uk/documents/about-us/best-research-for-best-health-the-next-chapter.pdf>
4. Our Future Health – the UK's largest health research programme <https://study.ourfuturehealth.org.uk/welcome?r=community>
5. <https://www.gov.uk/government/publications/levelling-up-the-united-kingdom> February 2022
6. Boaz A, Hanney S, Jones T, Soper B. Does the engagement of clinicians and organisations in research improve health care performance: a three-stage review. *BMJ Open* 2015;5: e009415. doi:10.1136/bmjopen-2015-009415
7. Jonker and Fisher 2018. Effects mainly due to interventional research. Positive effects of research participation are not confined to large regional tertiary centres
8. Jonker L, Fisher S. The correlation between National Health Service trusts' clinical trial activity and both mortality rates and care quality commission ratings: a retrospective cross-sectional study. *publichealth* 157(2018)1e6 <https://doi.org/10.1016/j.puhe.2017.12.022>
9. <https://www.gov.uk/government/publications/commercial-clinical-trials-in-the-uk-the-lord-oshaughnessy-review>