University Hospitals Sussex

Research and Innovation Strategy 2023-2028

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Our vision

University Hospitals Sussex will be a place where all patients and staff have the opportunity to participate in high quality research and innovation which is relevant to them, and where we work with partners across Sussex to ensure equality of access to the benefits of health and care research and innovation for the whole population.

The Trust has made research and innovation one of its six True North goals. This is because we recognise that research and innovation are the most powerful means by which we can improve the care we provide.

Through research and innovation we get better at prevention, diagnosis and treatment of illness and improve the quality and efficiency of our services.



Carl Carter was treated at St. Richard's Hospital for Covid-19, where he was enrolled onto national priority clinical trials.

He said "I was more than happy to take part in the research. I hope it helps improve future treatments and give a better quality of life to those who experience something such as Covid-19."

Foreword

At University Hospitals Sussex we want to ensure that everything we do to make improvements, and deliver care, is based on robust evidence. This strategy sets out our vision for how we will be a place where all the patients we care for can participate in high quality clinical research relevant to them, and where all staff can contribute to research and innovation.

Research and innovation are key to the success of a teaching hospital. Hospitals with a strong culture of research and innovation deliver both a better experience of care for patients and achieve better clinical outcomes. Research and innovation drive continuous quality improvement and help to attract and retain high calibre staff.

Our Research and Innovation Strategy is founded upon our 'True North' approach. This is the term we use to describe our overarching goal of constantly improving standards of patient care, based on our Patient First improvement methodology. To support delivery of this strategy, our Board will provide ongoing oversight of research and innovation across University Hospitals Sussex NHS Foundation Trust (UHSussex). To achieve our strategy, we will embed research in clinical care, across our organisation, throughout our workforce, and in partnership with our NHS and academic partners.

We and the Trust Board at UHSussex are committed to ensuring that clinical research and innovation are placed at the heart of patient care across, making participation as easy as possible and ensuring all health and care staff feel empowered to contribute.



Dr. George Findlay Chief Executive



Professor Katie Urch Chief Medical Officer

Our Trust

University Hospitals Sussex NHS Foundation Trust provides healthcare services to the people of West Sussex, Brighton and Hove and parts of East Sussex. As one of the largest acute trusts in the UK, we handle more than 1.5 million outpatient appointments, A&E visits, and surgery cases every year. With a clear focus on continuous improvement, we always put our 'Patient First'.

Our Trust was formed in April 2021, bringing together Western Sussex Hospitals NHS Foundation Trust and Brighton and Sussex University Hospitals. The Trust operates five acute hospitals: Royal Sussex County Hospital, Princess Royal Hospital, St Richard's Hospital, Worthing Hospital and Southlands Hospital. We also deliver multiple services in other satellite and community settings, employing nearly 20,000 people. We operate within the Sussex Health and Care Partnership Integrated Care System and work closely with partner health and social care organisations across Sussex and in each of the three localities or 'places' which are based on Local Authority boundaries: Brighton and Hove, East Sussex and West Sussex.

The Trust is responsible for all district general acute services for Brighton and Hove, West Sussex and parts of East Sussex. It is also responsible for specialised and tertiary services across Sussex and the South East including neurosciences, arterial vascular surgery, neonatology, paediatrics, cardiac, cancer, renal, infectious diseases and HIV medicine.



Our True North goals

Our Research and Innovation Strategy is firmly embedded in our continuous improvement approach of 'Patient First'. We use the Patient First triangle to explain how our approach works. This starts with the purpose, mission and values of our Trust where our core focus is the patient first and foremost, as well as striving to achieve 'excellent care, every time' and the ideals that guide everything we do.

In 2022, recognising the central importance of research and innovation as a driver of continuous quality improvement, we added Research and Innovation to the True North strategic themes which are integral to everything we do:





Why research and innovation matters

We do research to improve treatments, diagnosis, prevention of disease and to improve delivery of services for the benefit of all patients. The nationwide response to Covid-19 made the link between research and patient outcomes remarkably clear for all to see, and it's this which is driving the ambition to embed research throughout NHS health and social care.

We already know a lot about health, diseases and medicines in the NHS, but there is so much more to find out. Research can answer uncertainties and provide the evidence to deliver better outcomes for our patients.

The benefits of research go far beyond creating new evidence. Patients at research active hospitals experience better quality of care, have greater confidence in care decisions and are more informed about their conditions and medication.

At UHSussex we strive to ensure the care we provide is evidencebased. The Trust's Patient First, continuous quality-improvement methodology provides a framework for us also to identify evidence needs, learn from our practice and generate research evidence and innovations which are shaped by the needs of our patients and services.

Collaboration is fundamental to high-quality research. The creation of Integrated Care Systems in the NHS provides the framework through which our research and innovation can fully capitalise on the opportunities of working with NHS provider, academic and commercial partners in our region. Collaboration with our partners will allow us to address shared priorities, and increase the translation of our research and innovation into practice, driving innovation and the development of new healthcare technologies that will improve health outcomes for today's patients and for future generations of patients within the NHS. Research and innovation provide opportunities for professional growth and skill enhancement allowing staff to expand their knowledge skills and expertise. It also increases collaboration and networking opportunities, fostering multi-disciplinary teamwork, knowledge transfer, career opportunities and a broader professional network. Staff who engage in work they find meaningful are less at risk of emotional burnout and more likely to be engaged in the Trust. By contributing to a happier workforce, research and innovation can supplement traditional recruitment and retention strategies.

Research and Innovation brings economic benefits to the NHS and the wider population, for example by driving down healthcare costs, meaning the NHS can provide more costeffective care and target resources where they are most needed. Evidence-based practice built on research and service improvements delivered by innovation inform national policy decisions that benefit the NHS and patients.

The more people who take part in research, the faster progress we can make to improve health and care. So we must make it as easy as possible for our staff, patients and the public to learn about clinical research and to take part. Diverse forms of research including clinical trials, qualitive studies and implementation research are needed to address the different challenges we face. Empowering patients and the public to shape research and innovation maximises the potential for the work to directly improve the quality of the care our patients receive.

Purpose and scope of strategy

Purpose

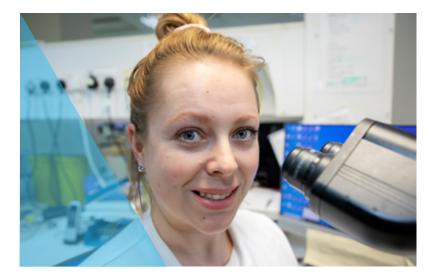
This strategy sets out our vision, aims and objectives for research and innovation over the next five years.

It is built on the Trust's Patient First approach. Patient First is our integrated framework and model for improvement and defines the organisation's vision, strategy, and goals.

The strategy will embed research and innovation throughout UHSussex. It will enable collaboration between our multiprofessional workforce, our patients, the public and our NHS and academic partners. We will use the term 'multi-professional' within the strategy as an inclusive term to refer to all our workforce, and including all professional groups and disciplines. It will empower our staff to build research and innovation into their careers.

The strategy will ensure that everyone, including people with protected characteristics, or those who for other reasons experience inequality of access to health care, can participate in our research and innovation and benefit from our discoveries. It recognises the pivotal role UK Sussex plays regionally in health and care research through which we seek to drive improvements in public health and healthcare for the whole population. It will ensure our research and innovation aligns with priorities of the National Institute for Health and Care Research (NIHR) and the Department of Health and Social Care and the wider NHS.

Our strategy has been written to be accessible to patients, current and future staff, partners and external bodies, to provide assurance of our commitment to delivering and benefitting from increased research and innovation in the Trust. A lay summary of the strategy will be made available.



Scope

Achieving our vision requires us to ensure research and innovation are practically and meaningfully embedded in the care we provide for all of our patients.

This means the scope of our strategy includes research and innovation that is:

- Woven into the daily lives of our multi-professional workforce across the whole of our organisation.
- Built into the missions for each specialty and each professional group in the workforce and across all our sites.
- Relevant to the services we provide inclusive of scheduled and unscheduled care, secondary and tertiary care.
- Either commercial or non-commercial.
- Integrated into pathways of patient care developed and delivered in partnership with our NHS and academic partners.

We are one of the largest acute NHS trusts in the country with a strong track record of success in clinical research. We are the largest contributor of participants to NIHR portfolio research studies in Kent, Surrey and Sussex and have recruited over 5000 participants to trials and observational studies through our Research and Innovation Department in the last twelve months.

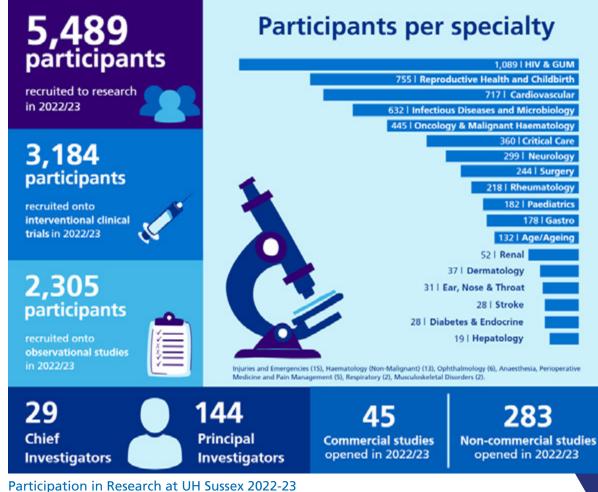
We also lead research which is recognised as nationally and internationally excellent, for example in interventional cardiology, oncology, HIV and other infectious diseases and in paediatric allergy and immunology.

We have excellent patient and public involvement in our research, with a focus on engaging diverse and underserved populations in our work.

Core to our success has been our relationship with the Brighton and Sussex Medical School: five of their impact case studies for the 2021 Research Evaluation Framework were founded in research conducted with us.

Supporting our early career and multi-professional workforce to develop their research has been a strength of our research journey. In 2022 and 2023 we partnered with NHS England to support nine doctors in training from across the Trust – our doctors embarked on research degrees directed at improving the care we provide in areas ranging from pre-operative care to novel cancer diagnostics.

We also offer multi-professional research fellowship opportunities through our Chief Nurse Fellows programme, and multi-professional clinical doctoral fellowships with our university partners.



Research and Innovation Strategy 2023-2028

UHSussex research

Helping eliminate hepatitis C among rough sleepers and people who inject drugs.

Brighton has one of the highest rates of homelessness in the UK. Drug dependence is common among rough sleepers, thus increasing their risk of infectious diseases such as hepatitis C virus (HCV) and HIV.

Over the past decade, Professor Verma and her team have reached out to these hard-to-reach, high-risk populations to provide HCV treatment. They chose to work in the community setting, creating a 'one-stop' care model that included screening of people who use drugs and homeless individuals at the Brighton Pavilion, one of the largest addiction centres. Patients valued the personal, flexible, engaging, and non-judgemental approach. Cure rates have been comparable to hospital-based treatment. Deaths from HCV related liver disease almost halved in Brighton, though other factors also contributed to this. The initiative had a significant positive impact on the individuals' quality of life, understanding of their disease and their ability to access treatment. Many patients found that once their HCV was treated they could address other issues in their lives such as their drug or alcohol use.

This new HCV care has been rolled out in other UK centres, and is helping achieve the national goal of eliminating HCV.



Professor Sumita Verma said "Research is one of the most powerful tools to provide an evidence base to improve patient care." "My research has helped develop new community models of care for people who use drugs and people who are homeless with hepatitis C, which contributed to the national hepatitis C elimination plan."

Our population

UHSussex provides acute services for approximately a million people living within the district and borough areas of Chichester, Mid Sussex, Arun, Adur and Worthing, as well as residents of Brighton and Hove and the Lewes area. We also provide specialised and tertiary services to patients across a larger geographical footprint including Horsham, Crawley and East Sussex.

With a combined population of 1.7 million people, our population spans both urban and rural communities and is highly diverse in terms of age, ethnicity, religion, deprivation and health.

Sussex has an older than average population with 22% of its population aged over 65 years old (compared to the England average of 18%) and an expected growth of at least 32% in the number of people aged over 85 by 2030.

In contrast, the population of Brighton and Hove has a younger age structure and presents key health challenges around mental health, alcohol and drug misuse and sexually transmitted infections.

Sussex also has some of the most deprived, and some of the least deprived, communities in the country with the result that there is a 14 year difference in life expectancy depending on where and how people live in Sussex.

Our Research and Innovation Strategy addresses the distinctive demographics and diverse needs of our local population including the inequalities in health outcomes they experience. It will ensure that we are best placed to meet the changing needs of the population we serve into the future.



UHSussex research

Spotlight on GBS 3 trial - looking at whether testing pregnant women for Group B Streptococcus reduces the risk of infection in newborn babies compared to the current strategy in place in the UK.

Group B Streptococcus (GBS) is a common bacteria carried in the vagina and rectum of 20-40% of women and usually does no harm. If it is present at the time of a delivery, it can be passed to the baby leading to sepsis, pneumonia or meningitis.

Currently the UK screening team does not recommend universal screening as the majority of women who have GBS carriage give birth safely with no infection to their baby. Swabbing all women cannot predict which babies will develop GBS infection.

Giving antibiotics to all women who carry GBS would mean a large number of women would receive treatment that they did not need.

The GBS 3 trial is looking at whether routine testing of women using a point of care (PoC) test in late pregnancy or during labour can reduce the risk of neonatal GBS compared to standard care.

Clinical Research Midwives



Viv Cannons

Nikky Passmore Emma Meadows

Offering patients access to clinical trials

Worthing and St Richard's maternity services have been allocated to perform PoC testing on all women who present in labour > 37 weeks gestation and offering antibiotics if their swab is positive.

The teams are consistently swabbing 80% of our eligible women, in line with our vision for everybody to have the opportunity to participate in research.

Read more about the GBS 3 trial here: https://www.gbs3trial.ac.uk/home.aspx

UHSussex research

Combating Covid-19 and developing new vaccines

We have been at the forefront of Covid-19 research in the NHS. Along with most acute hospitals, we participated in the national platform trials which enabled the rapid testing of a range of medicines to assess benefits to patients in addition to the usual care.

The Royal Sussex County Hospital was also selected to run some of the more specialist trials -It was one of only four sites in the UK to recruit to the trial that led to regular use of the medicine remdesivir as a treatment for patients hospitalised with Covid-19. The Royal Sussex County Hospital was also the lead site, with Professor Martin Llewelyn as the Chief Investigator, for the UK's first study whose primary objective was the prevention of Covid-19. We have been the lead trust in the regional delivery of Covid-19 vaccine trials: coordinating and supporting sites across Kent, Surrey and Sussex to deliver the licencing trials which led to the UK roll out of Covid-19 vaccines and boosters. In total we recruited more than 6000 patients, members of the public and staff to Covid-19 research studies.

The regional model developed for the evaluation of Covid-19 vaccines has led to the UK government signing a 10-year strategic partnership with Moderna, likely to be the first of many, to support delivery of agile, national large-scale evaluations of vaccines and other therapeutic interventions.

UHSussex workforce development

The Chief Nurse Fellows (CNF) Programme was developed to provide participants with a unique opportunity to enhance their research, leadership and education experience whilst also undertaking a practice based quality improvement project alongside their everyday clinical roles. The Chief Nurse Fellows are funded for one day per week for 12 months and participate in a range of activities to help them utilise the best research evidence to transform care and answer key questions from their own clinical practice.

The programme is available all health care professionals in Sussex (except doctors and dentists) and so far, a diverse range of professionals are taking part including nurses, midwives, physiotherapists, speech and language therapists, orthoptists, biomedical scientists and pharmacists and we look forward to welcoming many more onto this hugely popular Programme at UHSussex.

Anna Pascual, Intensive Care Nurse

"So far I have been enjoying my CNF, especially now that I am on the data collection phase of my QI project and enjoying getting to meet the patients outside the ITU and see how well they are recovering. I am interested in cognitive impairment following a period of intensive care, and so far, i have talked to 25 patients with interesting feedback matching what I found on the previous phase of literature review. So, all in all, very exciting and I am already thinking how far this project could go in the future, even a PhD could come out of it!

I'm really falling in love with the topic and trying to find support for these patients outside of intensive care and I'm hoping to make some valuable suggestions to improve care by the end of it, but for sure, I'll be highlighting an issue that is not getting much attention.



I am looking forward to sharing my results!"

Bryony Broster, Clinical Research Nurse:

"Taking part in the Chief Nurse Fellowship has given me the opportunity to produce a piece of work based on an audit looking into possible cases of treatment resistant scabies. I was then able to submit this as an abstract to the British Association for Sexual Health and HIV (BASHH). I was hoping to get the opportunity to have a poster at the



conference - but was asked to present it as an oral presentation.

I had not really presented before, but I received lots of support from my Chief Nurse Fellow Supervisor who helped me prepare the presentation, plan what I was going to say and gave me some tips and tricks for presenting.

I attended the conference in Llandudno, Wales in June 2023 and the presentation went well! I have since been approached by the BASHH Genital Dermatology special interest group to present at one of their national meetings in October 2023 and be part of a panel discussion.

I am also planning to write the piece of work up for publication.

Without taking part in the CNF course I would not be able to have the time or the help to achieve this"



Usman Raza, Radiographer

"The Chief Nurse Fellowship is a unique programme which is providing an opportunity for me to work on my clinical improvement project. I have a one day in a week to work on it and have a supervision from an experienced Clinical Academic. In addition to supervision, I have action

learning sets, yellow belt course, leadership learning sessions which are enhancing my problem solving and research skills. We are currently using an increased number of portable chest X-ray's and my project looks at the justification of portable chest X-ray's for inpatients to avoid unnecessary radiation exposure to other patients and staff as well. My findings will ultimately improve patient-centered care and improve safety"

System working

Healthcare services in the NHS are now delivered through Integrated Care Systems (ICS) – these are partnerships of organisations that come together to plan and deliver joined up health and care services, and to improve the lives of people who live and work in their area. In order to deliver improvements in our health and care services, research and innovation must also be integrated system-wide.

Making our research and innovation patient-centred means embedding patients and service-users in design and delivery both at the strategic level and the level of individual programmes of work and studies. System working with our Sussex Health and Care, NHS Sussex and NHS provider partners will allow us to bring impactful patient and public involvement to our research and innovation.

Ensuring our research and innovation has a positive impact for our patients and the wider population means working with our ICS partners and with partners at the Applied Research Collaboration and Academic Health Science Network / Health Innovation Network who have the tools and expertise to translate our findings into practice.

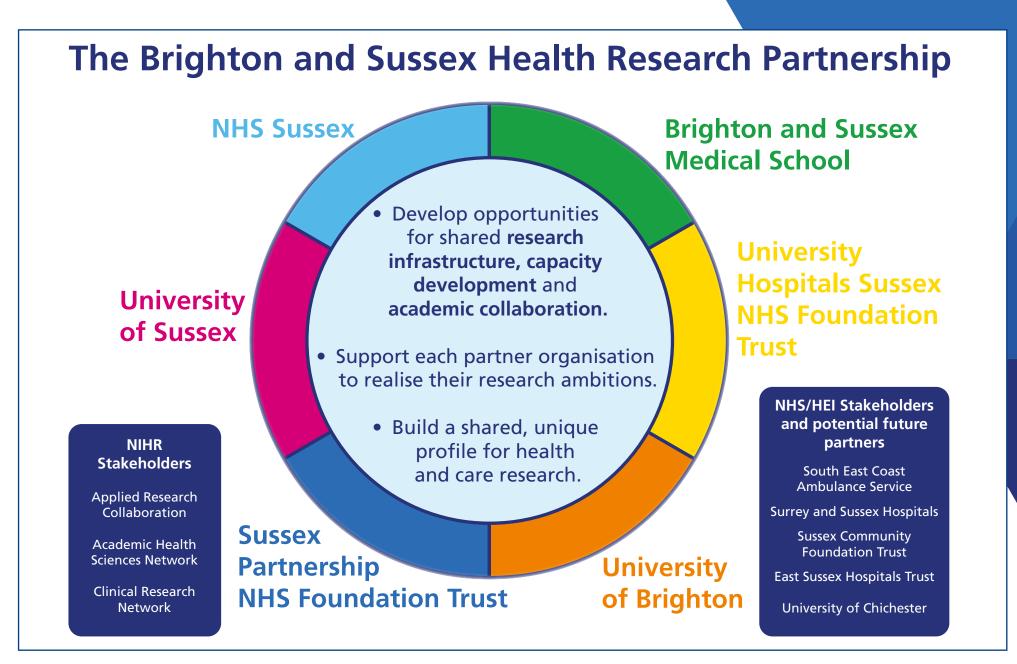
We will grow the excellence of our research through building on the academic strengths of our partners at the Brighton and Sussex Medical School, the University of Brighton, University of Sussex and University of Chichester.

To develop multi-professional research and innovation careers in our workforce we will build on our strong links with NHS England and with training provider partners across the region.



Central to this system working will be our driving role in the new Brighton and Sussex Health Research Partnership. The HRP brings together NHS commissioning and provider organisations with academic partners to grow infrastructure and capacity for health and care research across Sussex and to develop shared research themes addressing the needs of the local population and the services we provide health and care research across Sussex.

System working



The next chapter

The context in which we deliver research and innovation has changed radically. The Covid-19 pandemic clearly demonstrated the vital contribution healthcare research can make to society; the experience has transformed how the NIHR envisages the research it seeks to fund and deliver in the future. The NIHR has put research and innovation at the heart of how the Department of Health and Social Care (DHSC) seeks to achieve the aims set out in the NHS Long Term Plan. The plan itself commits the NHS to playing a full part in delivery of research and innovation activities which are vital to advances in healthcare, and bringing these benefits to both patients and the economy.

Integrated Care Systems (ICS), established in July 2022, are responsible for the regional planning and delivery of joined up health and care services. Each ICS has developed its strategic response to the NHS Long Term Plan. ICS boards have a statutory responsibility to facilitate partners in the health and care system to work together, combining expertise and resources to foster and deploy research and innovation.

In 2023 the DHSC set out its priorities for areas of research where there is a need to align evidence with policy development and decision making.

Recent independent reports for the government have identified multiprofessional clinical academic careers and the development of commercial research as underpinning priorities for future success in clinical research.

Our strategy is aligned to these national and regional drivers to capitalise on the opportunities they offer for the development of our own research and innovation, and to ensure our research and innovation are relevant to our local population and the wider NHS.

We have used these national, regional and local priorities to shape the principles on which we developed our Research and Innovation Strategy.

UHSussex innovation

Reducing our carbon footprint through the implementation of a digital surgical pathway

The Trust has a strong commitment to be more 'green' and we're doing our bit to support the NHS to become the world's first net zero health service. A group of our orthopaedic staff



realised there were gains to be made by creating a 'digital' pathway for assessments and communication prior to elective surgery for lower limb surgery in total hip and knee replacement patients. They set out to digitise the entire patient pathway from first referral to discharge, thereby creating a 'Green Patient' pathway allowing for carbon reduction at each patient touchpoint.

Our team established a robust digital surgical pathway to replace in-person visits, with a predicted reduction of 4.7 to 8.4 metric tonnes of CO^2 (depending on vehicle type) for travel, equating to 222 – 403 trees; and a saving of 63,427 pieces of paper or 63kg of CO^2 , equating to 3 trees.

The new pathway began in March 2023 and includes digital preoperative assessments, health self-assessment questionnaires and patient education material in a user-friendly patient app. More than 700 patients have participated and benefited in this pathway so far and reports to date show that 75% of patients, across a broad range of age groups, are satisfied with their experience of the new system. If the current trial continues to work well then there is potential to scale up the initiative to other surgical pathways across the Trust. The cumulative annual potential carbon dioxide reduction from implementing a digital surgical pathway for orthopaedic patients is substantial, affording a major impact on healthcare sustainability.

Principles for the development of our research and innovation

The following set of principles, framed within our six True North themes, have been developed with partners and patients to underpin our strategy and guide its delivery.

True North	Principle
Patient	Inclusive: meaningful, impactful and measurable for all our patients, taking the diverse needs of our population into account. Patient-centred: ensuring our research and innovation improves the quality of care and services for our patients and the wider population addressing inequalities of access to our services and to the benefits of our research and innovation.
Quality	Aligned: focusing on improving the quality of patient care, supporting the Trust's strategic priorities, wider continuous improvement methodology and the clinical services we deliver. Patient-centred: addressing the needs of all our services, including emergency, elective and specialised tertiary services.
Our people	 Embedded: research and innovation being part of 'business as usual' for the Trust, embedded at the point of patient care. Multi-professional: realising the potential of our multi-professional workforce to develop and deliver research. Inclusive: ensuring all staff have the opportunity to contribute to research and innovation.
Sustainablity	Resourced: ensuring development of the physical and human infrastructure that underpins what we do. Streamlined: harnessing the growing digital maturity of the Trust to ensure our research is efficient and empowered by data and digital tools.
Systems and partnerships	Integrated: ensuring we play our part in health and care research across Sussex, collaborating to address shared population health priorities and benefiting from the synergies that arise from coordinating research and innovation across regional NHS and academic partners.
Research and Innovation	Distinctive excellence: establish and communicate the impact of the health and care research we do to build our national and international reputation for research and innovation.

The strategy will also drive our wider Trust values of compassion and communication, inclusion and respect, teamwork and professionalism.

Developing the strategy

Our Research and Innovation Strategic Steering Group (RISSG) has led the development of this strategy taking into account the contextual factors described above, building in consultation with staff, patients and public stakeholders. Input has also been sought from our NHS and academic partners working primarily through the Brighton and Sussex Health Research Partnership and also with Sussex Health and Care.

Patients, public and staff insights

In developing our strategy we have drawn on what our patients, the public and staff have told us about our existing research and innovation provision and what is important to them in our new strategy. Specifically we have engaged through:

- A survey of active investigators across UHSussex.
- Discussion at staff forums such as those developing specialty mission statements as part of the wider Clinical Strategy development.
- New Trust strategies nursing and midwifery, cancer and digital.
- Ongoing engagement with specialties who have been identified as having significant opportunities to contribute to high quality research and innovation.
- Innovator scoping and early career research trainee feedback.

- Targeted engagement to test and refine the strategy's vision, aims and objectives through:
 - consultation with Healthwatch.
 - consultation with our network of Research Champions.
 - consultation with the Trust charity 'My University Hospitals Sussex' and the Trust's Goveronors.

- insights from the Patient Research Experience Survey. We have engaged with Trust leadership groups.

In our discussions with our patients, public and staff, the following insights were highlighted:



Our Research and Innovation Aims, how we will achieve them and how we will measure

our success

Patient Experience



Overarching aim

Our aim is for all our patients to have equal, easy access to participation in high-quality research and innovation which is relevant to them, enhancing their health, wellbeing and the care they receive.

By 2028 we will ensure that:

- 1. Our patients are aware of the importance of clinical research and the potential benefits to patients.
- 2. We have substantially grown the number and range of studies we offer across our clinical services to ensure patients are routinely invited to participate in high quality research which is relevant to them.

- **3.** Information about research studies is easily and routinely available to our patients in an appropriate and accessible manner.
- 4. Patient and public engagement runs throughout our research and innovation development and delivery.
- 5. We will design our research to maximise the impact for our patients and local population.

How we will achieve this

- 1. Our divisions and specialties will have research and innovation built into their mission statements: business plans for research growth will embed research in clinical services across the Trust.
- 2. Our communication plan will maximise awareness of research and innovation among our patients and the public, and will facilitate their involvement in shaping our research.
- **3.** We will ensure information about research and innovation is routinely made available to patients, in an appropriate and accessible manner.
- 4. We will work with out partners to establish diverse, inclusive and supported opportunities for public and patient involvement.
- 5. We will ensure our research and innovation activity supports the charitable objectives of our Trust's charity 'My University Hospitals Sussex'.
- 6. We will offer the NIHR Patient Research Experience Survey to all research participants and ensure we regularly respond to patient feedback.

Patient Experience

The changes we will see and how we will demonstrate success

Increasing the number of high impact studies and the number and diversity of participants recruited to those studies across all clinical areas.

Measured through:

 the delivery and participation in NIHR portfolio research by division, specialty and clinical service and among people with protected characteristics.

Growth in contribution of our patients and public to our research programmes.

Measured through:

 The number of locally-led research studies including Patient and Public Involvement in their development; the number of locally-led research grant or training bid applications including Patient and Public Involvement in their development.

Increasing patient awareness of research and innovation, and increasing positive patient <u>experience of participation in</u> research.

Measured through:

 Patient survey and feedback data. Patient awareness snap-shot surveys, Patient Research Experience Survey, Cancer Patient Research Experience Survey.



Quality



Overarching aim

Our research and innovation will drive up the quality of care we provide and address the wider health needs of our local population, particularly addressing health inequalities and underserved populations. We will work to drive the best outcomes for patients.

By 2028 we will ensure that:

- 1. We have maximised the benefit to our patients of being treated by a research active NHS organisation.
- 2. Our research and innovation is clearly linked to the Trust's quality improvement programme ensuring it drives up quality of care that we provide.
- 3. Our patients have greater access to cutting edge treatment options available within clinical trials.
- 4. We have substantially increased the proportion of the research we do which is locally led, building on the priorities of our patients, staff and services.

How we will achieve this

- 1. We will ensure all our divisions and specialties have research and innovation built into their mission statements: business plans for research growth will embed research in clinical services across UHSussex.
- 2. We will ensure we make efficient use of research and innovation income to support clinical divisional research growth.
- **3.** We will increase high-quality locally-led research developed in collaboration with our academic partners.
- **4.** We will implement a Research Impact Toolkit in our research training activities to ensure we maximise the impact our research and innovation.
- 5. We will prioritise research and innovation activity which has the greatest impact on patient treatment and quality of care for our population, also targeting health inequalities and underserved populations.
- 6. We will work with partners, including our Academic Health Science Network / Health Innovation Network and NIHR Applied Research Collaboration, to optimise translation of our research into practice.

Quality

The changes we will see and how we will demonstrate success

Growth in our research output

Measured through:

• The number and quality of peer-review research publications by Trust staff.

Growth in the impact of our research and innovation output on patient care

Measured through:

- The number and quality of impact case studies built on our clinical research which have been developed with academic partners for the Research Excellence Framework.
- Evidence of the impact of our research and innovation on care, services and patient outcomes in the NHS and internationally.
- The number of Trusts adopting innovations either created or supported by UHSussex.



Our People



Overarching aim

All staff have the opportunity and equality of access to contribute to high-quality research and innovation which is relevant to them and enhances the health, wellbeing and care they provide. We will contribute to making UHSussex a great place to work.

By 2028 we will ensure that:

- 1. Our staff understand the importance and far-reaching benefits of research.
- 2. Our staff feel confident to discuss and support patients to participate in research.
- 3. Our organisational leaders have facilitated a research-positive culture empowering colleagues to lead, support or become involved in research.

- 4. Research and innovation roles are incorporated into job plans across our multi-professional workforce.
- 5. There is inclusive access to research career development opportunities.
- 6. Embedding research and innovation in roles is helping us to attract and retain our workforce.

How we will achieve this

- 1. Our communication plan will ensure visibility of research and innovation across the organisation, celebrate success and promote diversity and inclusivity across the whole workforce.
- 2. We will provide a broad programme of opportunities for multi-professional research career development including:
 - Early career research 'step-on' programmes.
 - Pre-doctoral and Doctoral fellowships.
 - Post doctoral clinical academic posts.
 - Research and innovation leadership roles across the multi-professional workforce workforce.
- 3. With our partners, we will establish a joint Clinical Academic Training Office (CATO) to provide high quality support for early career clinical academic trainees, and to support external funding applications.
- 4. Research and innovation will be included in all staff induction programmes.
- 5. We will provide inclusive open-access training and resources to support staff to contribute to research and innovation and develop their skills.

Research and Innovation Strategy 2023-2028

Our People

The changes we will see and how we will demonstrate success

Increasing the number of staff who are research active.

Measured through:

- The number of local Principal Investigators by specialty; number of GCP trained staff; number of staff with research time in their job plan, by specialty and professional group.
- Using the NHS staff survey to measure research awareness and engagement.

Increasing the amount of the research we do which is led by UHSussex.

Measured through:

• The proportion of the NIHR portfolio research we deliver for which UHSussex is the sponsor or the Chief Investigator is a member of UHSussex staff.

Seeing our staff benefit from our research training and clinical academic career support

Measured through:

- Staff access rates to the career development opportunities we offer, gathering their feedback, and measuring career progression towards leadership roles.
- The value of external funding supporting clinical academic training fellowships across all professional staff groups.



Sustainability



Overarching aim

We will grow our capacity for research and innovation making its delivery more streamlined, agile, environmentally sustainable and efficient. We will also grow our commercial research portfolio to ensure that patients have the opportunity to benefit from cutting-edge treatments. We will make the most of our resources.

By 2028 we will ensure that:

- 1. Study set-up and delivery processes have been streamlined to meet / exceed national benchmarks and ensure front-line staff are fully supported to deliver research embedded in care.
- 2. We have grown our commercial and early phase clinical trial portfolio significantly increasing income.
- **3.** Processes for support and governance of innovation at the Trust are developed ensuring we both increase our innovation work and the commercial value of the intellectual property we create.
- **4.** We will use research and innovation to support the Trust's vision for environmental sustainability.
- 5. We have developed our Clinical Research Facilities.

How we will achieve this

- 1. Our study set up and delivery processes will be enabled by digital solutions and greater integration of data along patient pathways.
- 2. We will develop of our Clinical Research Facilities to grow commercial and non-commercial funding for early-phase research.
- **3.** We will establish systems for innovation support, governance and benefits realisation through the Joint Clinical Research Office.
- **4.** We will build an agile commercial research delivery team to create a streamlined commercial research environment.
- 5. We will develop our innovation pathway, building strong relationships with University Innovation and Business partners, Brighton & Sussex Health Research Partnership commercial and charitable partners.

Sustainability

The changes we will see and how we will demonstrate success

Setting up and delivering our research studies efficiently to time and target

Measured through:

• Achievement of timelines and recruitment targets agreed with research funders and sponsors.

Growth in our commercial and early-phase research activity

Measured through:

• Number and proportion of commercial and early phase clinical studies we deliver across the Trust by division, specialty and clinical service.

Increasing the number of innovation studies we deliver and the income generated

Measured through:

• Number of innovation studies delivered across the Trust by division, specialty and clinical service.

Growth in our research income

Measured through:

• Income generated through our commercial and non-commercial research.

Development of fit-for-the future Clinical Research Facilities

Measured through:

• Development of our central Clinical Research Facility delivering early phase and commercial research portfolio and embedding clinical research across the Trust.



Systems and Partnerships



Overarching aim

We will work with NHS and academic partners across Sussex to build shared research and innovation infrastructure and capacity and collaborate to address shared strategic research and innovation priorities.

By 2028 we will ensure that:

- **1.** We are a committed partner shaping the development and success of the Brighton and Sussex Health Research Partnership.
- 2. We are the acute NHS trust of choice in Sussex for collaborative clinical research.

- **3.** We make highly valued and prominent contributions to national and international collaborations.
- 4. We have established strong links with commercial, charitable and academic partners to help our patients access the most promising new treatments and technologies.
- 5. We are capitalising on the opportunities of partnership working to build efficiency and capacity for research and innovation.
- 6. We are working strategically with the Integrated Care System and partners to address shared system-wide health and care research priorities.

How we will achieve this

- 1. We will be an energetic contributor to the Health Research Partnership facilitating a connected, system-wide approach to addressing the health and care needs of the population.
- 2. We will work with partners to grow the capacity and scope of work undertaken by the Joint Clinical Research Office (JCRO) to:
 - a. Support the Trust's innovators.
 - **b.** Facilitate access of our staff to university systems to support the development of research and innovation.
- **3.** We will work with partners to grow the capacity of the Brighton and Sussex Clinical Trials Unit to:
 - a. Co-ordinate clinical trial support across NHS and academic partners.
 - b. Provide greater research development support for our researchers.
 - c. Expand our portfolio of commercial and non-commercial research.

Systems and Partnerships

The changes we will see and how we will demonstrate success

Contributing to system-wide research addressing population health priorities in Sussex

Measured through:

• Number of collaborations, research outputs and impact addressing local population needs.

Increasing the support our researchers receive through the Joint Clinical Research Office

Measured through:

- Number of grants submitted for external funding through JCRO by staff group and specialty, funding bid success rates and total value of awards.
- Number and size of clinical trials we deliver through the Brighton and Sussex Clinical Trials Unit.

Growth in the NIHR Research Capacity Funding we receive

Measured through:

Value of NIHR Research Capacity Funding.

Increasing our collaborative research with other NHS and academic partners

Measured through:

 Number of collaborative funding bids and success rates by staff group and specialty including career development awards.

Growth in matched funding for shared research infrastructure across our partners

Measured through:

• Value of matched funding across the Health Research Partnership for shared research infrastructure.



Research and Innovation



Overarching aim

University Hospitals Sussex will be a place where research and innovation is part of the organisational culture, recognised externally for its distinct and excellent contribution. We will drive evidence-based improvement.

By 2028 we will ensure that:

- 1. We have established an organisational culture in which research and innovation are seen as 'how we do things at UHSussex'.
- 2. We have grown a distinctive national and international profile for research and innovation excellence led by our investigators in areas where we have established research excellence, e.g. in cardiology, oncology, infection and paediatrics.
- 3. We have established new distinctive research and innovation excellence led by our investigators that builds on the needs of our patients and local population. We will ensure we align our work with the priorities and strengths of our NHS provider and university partners and address the challenges of the NHS long-term plan.

How we will achieve this

- 1. We will increase the volume, breadth and quality of our research and innovation outputs and impacts.
- 2. We will increase the use of evidence-based practice across the organisation.
- **3.** We will establish clear delivery plans and a performance dashboard to ensure the robust delivery of our Research and Innovation Strategy.
- **4.** Our Research and Innovation Strategy will support the development of our organisational research culture.
- 5. Our communication plan will present a strong external profile of our research and innovation activity to funders, industry and the academic community.
- **6.** We will capture the impact of our research through a dedicated research repository.

Research and Innovation

Embedding an organisational culture of research and innovation at the Trust

Measured through:

• Staff and patient feedback on our culture through the NHS staff survey, workforce surveys, Patient Research Experience Survey, multi-professional trainee feedback.



Improving the use of evidence-based practice Measured through:

• Evidence use metrics from Knowledge, Libraries and Learning Technology.

Demonstrating excellence in our research and innovation processes

Measured through:

• Balanced scorecard of research and innovation performance measures, by specialty.

Building evidence of the impact and recognition of our research and innovation nationally and internationally.

Measured through:

• Contribution of our researchers and their research to national and international leadership and shaping of e.g. policies and guidelines in the NHS and internationally by our research and innovation.

Summary of deliverables

	Patient	Quality	People	Sustainability	Systems & Partnerships	Research & innovation
Implement a comprehensive patient and public engagement and communication plan Patient and public involvement in research development and delivery, awareness, facilitating involvement, patient communication about research, feedback and research experience survey approaches.	•				•	•
Implement a comprehensive staff engagement and communication plan Visibility, celebration, promotion of diversity and inclusivity.			•		•	•
Embed research and innovation into clinical operating model and grow research Divisional research leadership, incorporation of research roles into clinical job plans, building research into mission statements and business plans for research growth, increase patients' opportunity to participate in research across clinical specialties.	•	•	•			
Alignment of research finances with division financial planning Research and innovation income supporting clinical divisional research growth		•	•	•		
Grow diverse staff research and innovation career development opportunities Multi-professional research training and academic career development opportunities, Clinical Academic Training Office.		•	•	•	•	
Grow our shared research and innovation infrastructure and governance Match funding for infrastructure development of the Joint Clinical Research Office, Clinical Trials Unit, Clinical Academic Training office, research methodology support. Agile research delivery team supported by digital solutions and data.		•	•	•	•	
Develop our Clinical Research Facilities, grow our commercial research portfolio, and develop our innovation pathway Fit for purpose physical facilities, co-located with clinical services, increase in commercial research and early phase clinical trials, strong relationships with University Innovation and Business partners, Brighton & Sussex Health Research Partnership commercial and charitable partners.		•	•	•	•	•
Grow locally led research with impact Increase grant applications, inclusive patient and public involvement in research development, alignment with 'My University Hospitals Sussex', collaboration with NHS and academic partners to address shared local health and care priorities, addressing health inequalites and underserved communities impact toolkit and training for researchers, use impact to prioritise research support, work with NIHR partners, to optimise translation of UHSussex research and innovation into practice and promote our excellence.	•	•	•		•	
Implement strategy-wide research and innovation performance measures Balanced score card to measure research and innovation growth.		•		•	•	•

Anticipated impact

Our research and innovation strategy is highly ambitious. It will benefit UHSussex patients, staff and services beyond growth of excellent research and innovation.

Successful delivery of our strategy will help ensure that by 2028

- UHSussex patients will report enhanced experience of care as a result of the research and innovation culture embedded at the Trust.
- The quality of our services will be demonstrably improved by our research and innovation work.
- Engagement in research and innovation across our workforce will be improving recruitment, retention and staff satisfaction.
- We will have enabled more efficient and sustainable clinical and research services across the Trust.
- Sussex will be recognised for its its system-wide, distinctive excellence in health and care research.
- Our research and innovation will be nationally and internationally recognised for the contributions it makes to clinical science.



Governance of research and innovation

Overarching aim

The implementation of our strategy will be underpinned with robust governance arrangements already in place, supported by and strengthened through the joint governance within our system partners.

How to achieve this

We will achieve this by ensuring that:

- The Research and Innovation Strategic Steering Group (RISSG) will be responsible for the delivery of this strategy and will maintain an oversight of all matters related to the quality and safety of research and innovation within our Trust.
- The delivery plan for the Research and Innovation Strategy includes workstreams reporting up to RISSG with clear work programmes and risk registers.
- Research and innovation will be embedded into clinical operating model with divisional leadership and oversight. Divisions will have research and innovation growth plans and will report into the Divisional Strategy Deployment Review (SDR).
- Governance is strengthened with RISSG chaired by the Chief Medical Officer working to an agreed Terms of Reference.
- The research and innovation strategy is aligned to the Health Research Partnership (HRP) ambition and shared research progress will also be reported to the HRP Board.

Next steps

In order to ensure robust implementation of the strategy, detailed workstream plans will be developed that set out the actions required for each area of delivery, with clear priorities and key performance indicators.

The implementation will be monitored by RISSG, with oversight from the Research and Innovation Committee.

Glossary

Academic Health Science Networks (AHSNs) / Health Innovation Networks (HINs)

Set up in 2013 by NHS England to support the generation and spread of innovation across the NHS. From 1st October 2023 AHSNs will become HINs.

Chief Investigator

This is the overall lead researcher responsible for the conduct of a research study (which may operate over multiple research sites).

Commercial study

A research study funded and managed by a pharmaceutical or other private company.

Department of Health and Social Care (DHSC)

The Government's ministerial department with responsibility for overall strategy, funds and oversight of the health and social care system in England.

Good Clinical Practice (GCP) training

GCP is the agreed international standard to which all clinical research is conducted. We require our researchers to undertake GCP training every two years.

Health Research Partnership (HRP)

An Sussex based initiative bringing together regional academic and NHS partners to develop opportunities for shared research infrastructure, capacity building and collaboration.

Integrated Care System (ICS)

Partnerships of organisations that come together to plan and deliver joined up health and care services, and to improve the lives of people who live and work in their area. 42 ICSs were established across England in 2022. For further information visit www.england.nhs.uk/integratedcare/what-is-integrated-care.

Locally-led research

We refer to locally-led research as that which is being led by a member of staff from University Hospitals Sussex.

Multi-professional

We will use the term 'multi-professional' within the strategy as an inclusive term to refer to all our workforce, and including all professional groups and disciplines.

National Institute for Health and Care Research (NIHR)

Established in 2006 under the Government's 'Best Research for Best Health' strategy to fund, enable and deliver world-leading health and care research that improves health and wellbeing. For further information visit www.nihr.ac.uk.

NIHR Applied Research Collaborations (ARCs)

Regional organisations, which are part of the NIHR, to support applied and health care research that responds to, and meets the needs of local populations and local health and care systems.

NIHR portfolio study

Any study adopted to the NIHR Clinical Research Network (NIHR CRN) Portfolio of clinical research studies. These studies are eligible to receive support from the NIHR CRN.

Glossary

NIHR Research Capability Funding

NIHR funding allocated to research-active NHS organisations to enable them to act flexibly and strategically to maintain research capacity and capability.

NHS Sussex

Holds the commissioning functions for health and care services across Brighton and Hove, East Sussex and West Sussex.

Principal Investigator

The person responsible for the conduct of a research study at an individual research site.

Research Excellence Framework (REF)

The system for assessing the quality of research in UK Higher Education Institutions. For further information visit www.ref.ac.uk

Research impact

A term introduced by the NIHR: "research impact is about making a meaningful difference to people's lives through the research we fund and support". For further information visit www.nihr.ac.uk/ about-us/our-impact/our-impact-vision.htm

Research repository

A central hub in which research data is stored by an organisation.

'Step-on' programmes

Multi-professional research training opportunities for staff who have had limited previous research training and experience: e.g. Chief Nurse Fellows Programme, evidence based practice module and critical appraisal training.

Partner organisations

Brighton and Sussex Clinical Trials Unit

www.bsms.ac.uk/research/clinical-and-experimental-medicine/ brighton-and-sussex-ctu/index.aspx

Brighton and Sussex Health Research Partnership

www.bsms.ac.uk/research/support-and-governance/health-research-partnership.aspx

Brighton and Sussex Medical School

www.bsms.ac.uk

Kent Surrey Sussex Academic Health Science Network (AHSN) / Health Innovation Network (HIN)

(N.B. From 1st October 2023 AHSNs will become HINs) www.kssahsn.net

NHS Sussex ics nhs.uk/nhs-sussex

NIHR Applied Research Collaboration Kent, Surrey and Sussex www.arc-kss.nihr.ac.uk

Sussex Health and Care ICS www.sussex.ics.nhs.uk

University of Brighton www.brighton.ac.uk

University of Chichester www.chi.ac.uk

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