Research Strategic Plan 2018-2021

Foreword

‘Research active organisations are more successful in attracting high quality staff, and through the development of a joint approach between staff and patients, promote a culture of the highest standards of health care delivery. The overall aims of this Research Strategic Plan for 2018-2021 are to increase the profile, quality, quantity and impact of clinical research in this Trust.

Research in health care increases the evidence base for clinical decisions, decreases uncertainty and can lead to improvements in care for service users. Further, involvement in research develops the skills of staff and the best research actively involves patients and carers as participants. Together, through research, we aim to work together in the pursuit of knowledge about care and treatment that may ultimately benefit those who use our services.

I am delighted to support this Research Strategic Plan, commend the work of those who have developed it and look forward to seeing the impact of their work in the coming years.’

Sue Proctor, Chair

‘Research is a collaborative process, without the ‘participation’ of service users and carers there would be no research. I welcome the Trust’s research strategic plan which makes this participation more visible and valued.

I am also delighted to see that the Patient Ambassador Role is supported within the plan along with the Trust’s commitment to increasing service user and carer ‘involvement’, embedding it into the research culture and fostering regional links to strengthen its voice and influence.’

Helen Cooke, Patient Research Ambassador
Introduction and Context

We all know that research matters. Developing a research-active culture can bring a host of benefits for service users, staff and the NHS as a whole and, within LYPFT, we will nurture an environment where research opportunity and innovation are offered to all service users, carers and staff. In doing this we will enhance outcomes and experience for all.

We are working from strong foundations. In 2017-18 LYPFT was the highest recruiting mental health Trust in Yorkshire and the Humber and we were ranked 18th out of 49 Mental Health Trusts recruiting to National Institute for Health Research (NIHR) portfolio studies nationally. We were proud to meet (and typically exceed) the research goals set in our 2014-2017 Research Plan, contributing in 2017-18 to 91 studies, with 1510 service users, carers and staff recruited to a wide range of observational and interventional studies across the breadth of clinical services. We involved Principal Investigators from an increased range of disciplines (including psychiatry, nursing, occupational therapy and psychology) and generated £6.9m for the Trust from NIHR and Medical Research Council studies, with a further £0.5m to be received in 2018/19 from the Yorkshire and Humber Clinical Research Network (CRN) and Research Capability Funding.

We will build on these successes with this Research Strategic Plan for 2018-2021, developing our portfolio of experience while ensuring we are aligned with national, regional and local priorities in mental health, dementia and learning disability research.

i. National priorities for mental health research

The Government’s revised mandate to NHS England for 2017/18 had its 7th objective “to support research, innovation and growth”. It tasks NHS England to “promote and support participation by NHS organisations, patients and carers in research funded by both commercial and non-commercial organisations…to enable cost effective, affordable, transformative new treatments to reach patients and their carers”. We will look to expand the organisations with which we partner to develop and host research, including exploring opportunities to participate in commercially-funded research.

“A Framework for Mental Health Research” (2017) included within its recommendations that a sustained effort be made by NHS Trusts to progressively expand UK mental health research capacity and make this a more diverse and representative workforce, particularly at senior levels.

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2 Department of Health, A Framework for Mental Health Research, December 2017
We will ensure that, while developing our areas of expertise, we also expand opportunities for service users, carers and staff to become involved in research at all levels irrespective of their previous experience.

‘The Future of Health’ (2018) focuses on the priority areas for health research and includes the recognition that ‘mental health is currently underfunded and underrepresented in policy and research debates and … more research into mental ill health [is needed] to develop a better understanding of, as well as treatments for, common mental disorders.’ It describes the ‘particular importance of research support in the area(s) of psychiatry’ and the importance of translating research into practice including ‘a focus on building and presenting evidence in a manner that is accessible to target audiences’ and by ‘greater coproduction among clinicians, patients and academics to reduce the disproportionate investment in research driven by academic interests rather than NHS needs.’

### ii. Regional priorities for mental health research

The Yorkshire and Humber Clinical Research Network (CRN) provides support and funding for research according to key performance indicators set by the National Institute for Health Research (NIHR). These targets include:

- Numbers of people recruited into studies
- Opening studies within the set timeframe
- Recruiting the agreed number of participants by the study end date.

The Trust has a contract (to March 2022) with the CRN host, as a member organisation, to support the delivery of NIHR Portfolio research locally and will continue to strive to meet these targets as part of this Research Strategic Plan. In addition we will continue to work with the Yorkshire and Humber Collaboration for Leadership in Applied Health Research and Care, and its successor Applied Research Collaborations, to build research capacity in the system (eg via the non-medical PhD network) and work to ensure evidence is put into practice (eg smoke-free Trust premises).

### iii. Local priorities for mental health research

We will work across boundaries and systems with partners to make sure that we deliver joined up care as part of the wider system. We will continue to work alongside Leeds Teaching Hospitals NHS Trust and share their vision to be leaders in clinical research and innovation which is

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translated into patient benefit at pace and scale. We will continue to actively participate in the Leeds Academic Health Partnership (which encompasses the ten key organisations delivering health research in the city) and support the Leeds Health & Wellbeing Strategy 2016-2021.

We will also make sure that we remain true to the Trust’s strategic objectives and priorities and ensure that we meet the requirements set by the Care Quality Commission’s (CQC) Well-led review.

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<tr>
<th>LYPFT strategic objectives and priorities</th>
<th>Role of Research</th>
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<tr>
<td>We deliver great care that is high quality and improves lives</td>
<td>Participation in research empowers service users and contributes to recovery. Great care is engaging and expert-driven, drawing on evidence and best practice. Trusts who participate in research have improved health outcomes and healthcare processes.</td>
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<td>We provide a rewarding and supportive place to work</td>
<td>Being research-active makes the organisation a more attractive employer and increases its reputation. Staff involvement in research supports personal and professional development and can be an opportunity for a new career pathway. 95% of NHS staff surveyed in a recent study reported that it was important to them that the NHS carries out clinical research.</td>
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<td>We use resources to deliver effective and sustainable services</td>
<td>Research is central to ensuring services are effective and that new treatments and ways of delivering care continue to be identified that enable recovery and prevention, reduce disease burden, improve quality and increase productivity. Research brings in extra income to the organisation which can be used for building research capacity.</td>
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This strategic plan aligns with the Trust’s Quality Strategic Plan which says we will use the evidence to build the conditions for quality care to flourish. It also dovetails with the Workforce Strategic Plan to be an employer of choice, particularly recruiting and retaining an inclusive workforce and developing talent and delivering innovation, learning and change.

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5 NIHR CRN public perception survey, Sep 2014
Research Strategic Objectives

Our Purpose

The principles of the 2018-2021 Research Strategic Plan were generated during a ‘Research stock-take and planning meeting’ held with key internal and external stakeholders in October 2017 (see Appendix 1). The detail of the strategic plan was then developed following further consultation.

The overarching aim of the Plan is to ensure continual improvements in the health and wellbeing of the population we serve by initiating, implementing and supporting health research and evaluation of health programmes in mental health and learning disability settings. It builds on our existing strengths, to continue what we are doing well, but also wishes to be ambitious and innovative in our approach, to proactively seek and encourage new research partnerships and opportunities and to ensure we involve more of our community in good quality research.

Our Priorities

The five key priorities for this research strategic plan are to:

1. Inspire

We remain dedicated to the principle that research should be open to everyone and we will aim to offer research opportunities to all service users and staff independent of previous knowledge and/or experience, at all stages of their career, to build the Trust’s research culture. We will inspire those who are research naïve to gain a positive first experience, improving the co-ordination of existing support and resources, and facilitating the entry of LYPFT staff into research and research career development.

I worked as a Principal Investigator on the Caregiving Hope research within memory services… lots of people were keen to become part of it…once you can pass your enthusiasm on to them then referrals were soon made.

Denise Nunney, Memory Services Nurse

It has been a pleasure working in an environment where research is central to what we do. Over the years we have developed a range of expertise to deliver large trials with various organisations across the country and we would like to continue to grow.

Professor Barry Wright, CAMHS researcher
2. **Embed**

LYPFT will become a truly research-informed organisation which drives forward the provision and use of evidence for decision-making. We will build the capacity of LYPFT service users and staff to lead and partner with the community and other research organisations to be involved in research, embedding research into everything we do.

3. **Excel**

In the next three years we will not only build on our core credibility and support research in relevant mental health and learning disability areas, but we will also increasingly target our attention towards high quality research in the key areas of Child and Adolescent Mental Health Services, Liaison Psychiatry and Dementia, maximising our existing expertise in these areas.

4. **Influence**

We will further engage with and influence NHS research agenda by using our integration skills to work across boundaries and systems with partners to ensure we deliver joined-up high quality care as part of a local, regional and national system.

5. **Share**

It is important that research findings are communicated widely and openly to support the improvement of services provided to patients, carers and staff, and that we build awareness in the community of the benefit of improving the health and wellbeing of these populations. We will use and develop innovative ways to share our findings and organise, participate in and contribute to discussions with partners to do this.
Implementation and Monitoring

The Research Strategic Plan is a living document which will be advised by and supported in its implementation by the Trust’s Research Committee. The Committee will be responsible for ensuring the Plan and its objectives are consistent with those of the Trust and that it is responsive to changing circumstances both internal and external to the Trust. It will meet quarterly and will report to Trustwide Clinical Governance.

The implementation of the Research Strategic Plan will be led by the Deputy Medical Director, with Executive Lead support from the Medical Director and in partnership with the Head of R&D. Delivery against the Plan will be formally monitored through the Quality Committee with annual updates.

The NIHR will continue to monitor the Trust’s success in delivering research via national benchmarks and local CRN performance indicators, for which data will be submitted on a monthly and quarterly basis. The CRN will also monitor progress through mid-year review meetings with the Trust. It is the responsibility of all members of staff at LYPFT to deliver against this organisation-wide strategic plan. The R&D Department will have ownership of the strategic plan and monitor Trust progress on its delivery.

We will use the following indicators as our markers of success and commitment:

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<tr>
<th>Objective</th>
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<tr>
<td>1. Inspire</td>
<td>i. Development and delivery of a structured research portfolio for medical undergraduates</td>
<td>Increased take up of mental health-related research projects by undergraduate medical students</td>
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<td></td>
<td>ii. Establishment of Research Fellow role to support staff to undertake high quality research (including systematic reviews)</td>
<td>Development of Research Fellow role Appointment of a Research Fellow Specific projects undertaken</td>
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‘Research within our trust helps us to provide better care for not just our patients, but the wider community. As a consultant who is active in research in the trust I aim to design, and conduct projects that inspire and encourage staff, while providing tangible, demonstrable benefits for our patients.’

Dr George Crowther, consultant psychiatrist

Nurses are in the position to influence patients and service outcomes significantly. The clinical nurse plays a central role in nursing research, audit and evaluation by identifying the constraints contributing to the research-practice gap, and identifying strategies to ensure evidence-based nursing care.

Saeideh Saeidi, senior research nurse
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<tr>
<td>iii. Establishment of Academic Clinical Fellowship (ACF) posts in psychiatry in collaboration with local university /ies</td>
<td>Development of ACF role Appointment of at least one ACF in psychiatry</td>
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<td>iv. Increase engagement in research from all professional groups</td>
<td>Evaluation of the impact of biennial ‘Dragons’ Den’ event and the impact of the support provided to staff whose projects are sponsored. Continue to provide clinically relevant research and service evaluation project ideas for completion by University of Leeds students (Doctorate in Clinical Psychology)</td>
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2. **Embed**

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<tr>
<td>i. Increase Patient and Public Involvement in the development and delivery of research projects</td>
<td>Support the implementation of our Patient Research Ambassador’s plans to involve service users and carers in research</td>
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<td>ii. Increase staff, service user and carer involvement in research as participants</td>
<td>Increase numbers of staff, service users and carers who are research participants by 5% compared with 2017 data</td>
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<td>iii. Increase staff involvement in research as Principal Investigators (PIs)</td>
<td>Increase number of PIs by 20% and maintain current professional diversity</td>
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<td>iv. Embed research-funded staff in clinical teams</td>
<td>Develop joint clinical and research posts within the Care groups. Appoint to joint clinical and research posts within the Care groups. Development of R&amp;D sessions for inclusion in</td>
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<td>v.</td>
<td>Raise awareness of research-related issues for all staff</td>
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<td>vi.</td>
<td>Ensure LYPFT meets standards set by CQC for R&amp;D</td>
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<td>3. Excel</td>
<td>i.</td>
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<td>Further development of research areas of excellence in  - Child and Adolescent Mental Health Services  - Liaison Psychiatry and  - Dementia</td>
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<td>ii.</td>
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<td>Development of (medical and non-medical) PhDs in conjunction with the Universities of Leeds and York</td>
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<td>4. Influence</td>
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<td>Engage with and influence the citywide research agenda</td>
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<td>ii.</td>
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<td>Engage with and influence the regional research agenda</td>
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<td>iii.</td>
<td>Collaborate with West Yorkshire Mental Health trusts to deliver meaningful patient and public involvement in research</td>
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<td>5. <strong>Share</strong></td>
<td>iv. Improve internal dissemination of research findings</td>
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<td>v. Improve external dissemination of research findings</td>
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"X lost confidence upon receiving a diagnosis, however her confidence has improved due to participating in the RADAR trial… My mother feels like she is doing something to help others… She felt proud to be involved in the trial when she saw an article about the trial published in the Yorkshire Evening Post.

Daughter of research participant
Research Governance

All research involving the NHS in England must have Health Research Authority (HRA) approval as it may involve greater risk, burden or intrusion for participants than standard clinical practice.

A new UK Policy Framework for Health and Social Care was published in 2017. This replaces the Research Governance Framework. This framework sets out principles of good practice in the management and conduct of health and social care research in the UK. These principles protect and promote the interests of patients, service users and the public in health and social care research, by describing ethical conduct and proportionate, assurance-based management of health and social care research, so as to support and facilitate high-quality research in the UK that has the confidence of patients, service users and the public. In the framework research is defined as the attempt to derive generalisable or transferable new knowledge to answer or refine relevant questions with scientifically sound methods. This excludes audits of practice and service evaluations, although it should be noted that the LYPFT R&D department does register and record service evaluations in partnership with the Audit, Clinical Effectiveness and Service Improvement department.

The current members of the LYPFT Research and Development team and their roles and responsibilities are described below.

Alison Thompson is the Head of R&D. Her role is strategic lead for research in the Trust, expanding and improving the breadth and quality of research conducted and implemented in the Trust, in partnership with organisations regionally, across the UK and internationally.

Dr Wendy Neil is the Deputy Medical Director with particular responsibility for R&D. Her role is to work in partnership with the Head of R&D to lead and direct the R&D strategy and operations within the Trust and to liaise with Directors and senior managers to ensure that R&D is well managed and governed throughout the Trust.

The Research Managers are responsible for managing the governance and delivery team and ensuring research is managed, delivered and governed according to national NHS research policy and procedures.

The Clinical Studies Officers and Research Assistants are responsible for delivering NIHR funded research.

The Patient Research Ambassador works with the R&D team, patients and the public and clinical staff to promote research and involve our service users and carers in research.

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Research and Development team organogram

Wendy Neil
Deputy Medical Director

George Crowther
Consultant Psychiatrist

Prof. Else Guthrie
Consultant Psychiatrist

Alison Thompson
Head of R&D 0.8

Sinead Audsley
Research Manager FT

Zara Brining
R&D Administrator - FT

Satti Saggu
Research Programme Manager FT

Alicia Rodgers
CSO FT

Lisa Hackney
CSO 0.68

Alix Smith
CSO 0.8#

Danielle Varley
Research Programme Manager FT

Sharon Bird
Academic Secretary 0.6

TBC
# TC 0.5*
I-Socialise

Helen Phillips
TC 0.8*
DIADS

Lucy Tindall
0.5*

Catarina Teige
TC 0.5*
Aspect

Satti Saggu
Research Programme Manager FT

Emma Sellers
RA FT

Crystal Romain-Hooper
RA FT

TBC
RA FT*

TBC
RA 0.5*

Ellen Kingsley
RA FT*

Jennifer Sweetman
RA 0.2*

Natalie Day
RA 0.8*

Megan Garside
RA FT

Emily Hayward
RA FT*

Rachel Hodkinson
RA FT

* Grant funded
# RCF funded
LCRN funded
FT full-time
RA Research Assistant
TC Trial Co-ordinator
CSO Clinical Studies Officer

integrity | simplicity | caring
Appendix 1

We are most grateful to the following groups and organisations who participated in our consultation on this Research Strategic Plan. Their responses were all very valuable and we undertook a careful analysis of their comments. The final Plan is much improved as a result:

University of Leeds
Leeds Beckett University
Leeds Trinity University
University of York
Leeds Academic Health Partnership
Patient Research Ambassador
LYPFT’s Research Committee
LYPFT’s Research and Development Department