The National Institute For Social Care and Health Research All-Wales Academic Health Science Collaboration (NISCHR AHSC) Strategy
THE NATIONAL INSTITUTE FOR SOCIAL CARE AND HEALTH RESEARCH
ALL-WALES ACADEMIC HEALTH SCIENCE COLLABORATION
(NISCHR AHSC)

EXECUTIVE SUMMARY

This strategy sets out the goals for research and development in relation to the National Institute for Social Care and Health Research Academic Health Science Collaboration Wales (NISCHR AHSC) and demonstrates Wales' commitment to creating a dynamic research environment that contributes to the health and wealth of Wales. The mission of the NISCHR AHSC is to facilitate the collaboration between Health Boards, Trusts, and Universities in Wales in order to combine clinical research, both basic and translational research, clinical care and education to create world-leading improvements in healthcare.

The overarching aims of NISCHR AHSC are firstly to establish an all-Wales collaboration between the Health Boards, Trusts and Universities that will strengthen clinical research capacity through maximising the use of the NHS R&D budget administered by NISCHR. And secondly to build links with industry and other research funders that will contribute towards the economic development of Wales through the creation of new business and high value jobs in Wales.

NISCHR AHSC will:

- Define the requirements for capacity within the NHS to support high quality R&D, in relation to NHS support departments, protected time for clinically active staff (doctors, dentists, nurses, midwives, allied health professions and healthcare scientists) to become involved in research, as well as other R&D related support
- Co-ordinate and maximise the use of NHS research resources by strengthening the R&D infrastructure in NHS Wales through the strategic realignment of existing NHS R&D funding so that the NHS is better placed to lead and participate in research excellence
- Co-ordinate and maximise collaboration between HEIs, NHS and Industry
- Performance manage the effective use of NHS R&D Funding both within primary and secondary care
- Develop a consistent and standardised streamlined system for researchers in receiving NHS R&D permissions across Wales
- Develop links with the clinical research infrastructure to work towards common aims
- Offer signposting, facilitation, and engagement and communication functions with industry and the wider R&D community
- Develop and/or contribute to a workplan which will address knowledge transfer in the NHS, in collaboration with other relevant agencies
- Implement, as requested by NISCHR Welsh Assembly Government, any further strategies related to the aims of the AHSC

What will the Wales AHSC deliver?

- A more effective coordination of the NHS R&D infrastructure
- Greater efficiencies in the use of R&D resources
- Improved care for patients
- Improved health and wealth of the population of Wales
- Improved external grant income
- Enhancement of a research oriented culture in the NHS
1. BACKGROUND

1.1. The aims of R&D for Health and Social Care in Wales are to:
- ensure that robust and timely evidence is available to underpin policy and practice;
- increase the quality and quantity of research in Wales, in order to improve health and wellbeing, and increase wealth, for the benefit of patients and the public;
- improve the research environment and make Wales a rewarding, exciting and attractive place to work for health and social care professionals, thereby improving recruitment and retention; and
- improve the translation of bench and other findings into ideas and products, that bring both patient, carer and commercial benefits;

through a shared strategic vision taken forward by strong leadership; coordination of strategies and their implementation; and collaboration between disciplines and across the research continuum from basic science to public health.

1.2. The National Institute for Social Care and Health Research (NISCHR), a one Wales commitment, is the Welsh Assembly Government body that develops, in consultation with partners, policy on research and development (R&D) to reflect the health and social care priorities of the Welsh Assembly Government. NISCHR aims to support the creation of high-quality evidence to both inform policy and benefit patients and the public, NISCHR also commissions and directly funds R&D activity, contract manages projects and initiatives to ensure that the highest standards are met.

1.3. Over the past five years considerable progress has been made to meet the above aims. NISCHR has received R&D funding that has been enhanced over the last three years. The total budget in 2010/11 is £43M and this is used to pump prime research across the spectrum of translational, clinical, health services, social care, public health and primary care research. Research is funded only if it has strong policy relevance and priority and meets criteria related to quality and value for money.

1.4. NISCHR delivers its strategy and policies through commissioning services, running research schemes and initiatives, and through strategic investment and partnership working with other funding bodies and industry. The NISCHR Clinical Research Infrastructure has been extended and strengthened during 2010 (See Appendix 1 for the structure of the Welsh R&D infrastructure). A number of structures and processes are now embedded to support a growing research portfolio and increasing
grant capture. Wales’ research facilities and technical capabilities are improving, adding to our strengths to lead world class research. Current components of the R&D infrastructure include:

a) **NISCHR Registered Research Groups** (formerly ‘Thematic Research Networks’ or ‘TRNs’); NISCHR Registered Research Groups (RRGs) generate research proposals in areas of topical significance and opportunity; win grant funding; generate a growing research portfolio of high-quality, ‘people-focused’ research; and engage and collaborate with UK-wide groups (where these exist and where participation is beneficial to Welsh R&D or to patients and service users in Wales).

b) **NISCHR Infrastructure Support Groups (ISGs)** offer specialist support primarily to researchers within Registered Research Groups. This includes engagement at the project conception, project design, and grant winning stages of the research process, and, where appropriate, involvement in the ongoing delivery of projects for which funding has been secured. The ISGs may have other functions related to the development of capacity and capability in their areas of expertise.

c) **NISCHR Trials Units**: These offer advice and methodological support at the early stages of the trial development and grant application process, and further involvement in the development and delivery of funded studies. As with ISGs, NISCHR funding provides some capacity to make early-stage collaboration possible, with ongoing research costs sought through research grants.

d) **NISCHR Clinical Research Centre** (formerly CRC Cymru Coordinating Centre and the Wales Cancer Trials Network): The NISCHR Clinical Research Centre brings together the Wales Cancer Trials Network and some of the functions of the CRC Cymru Co-ordinating Centre. The coordinating function rests within NISCHR Welsh Assembly Government. The functions of the Clinical Research Centre are to maintain a research portfolio consisting of all ‘people focused’ research projects (“trials and other well designed studies”) in Wales that have been submitted for portfolio inclusion and meet clearly stated eligibility requirements. It recruits and deploys a Research Professional Network (RPN) to support projects which have been accepted on to the NISCHR clinical research portfolio; manage the professional training and development needs of staff recruited to the RPN; provide an annual training programme for those involved in the development and delivery of projects on the NISCHR clinical research portfolio; recruit and train a network of patients, carers and service-users, and provide network members with opportunities to participate in research development groups / clinical studies groups (or similar) within Registered Research Groups, and subsequently funded projects.

1.5. In addition to this, project funding for health and social care research has been revitalised and strengthened. Partnership arrangements are now in place with the Medical Research Council (MRC), National Institute of Health Research England (NIHR), and the UK Clinical Research Collaboration (UKCRC) to jointly fund research of importance to the NHS in areas such as service delivery and organisation and health technology.
assessment. Wales now has a policy for clinical academic careers - Welsh Clinical Academic Training (WCAT), with funding in place for the first two years of recruitment. Further work is underway to review and strengthen other career structures. NISCHR has also agreed to work with the Academy of Medical Sciences in the provision of mentoring opportunities to Wales based researchers.

1.6. A key part of NISCHR’s R&D strategy has been to reduce bureaucracy, complexity and delays associated with R&D permissions. A major project to improve research governance in the NHS is underway and has started to yield benefits.

1.7. A strategic approach now underpins all funding decisions with transparent mechanisms and processes in place to aid decision making. NISCHR will further strengthen governance arrangements. Wales’ membership of the Office for Strategic Coordination of Health Research (OSCHR) has enabled NISCHR to play a full strategic part in R&D at the UK level, thereby maximising the opportunities available to the research community. The recently launched Office of Life Science (OLS) workstreams should provide opportunities to build stronger links with industry.

Strengthening R&D in the NHS

1.8. One of the first activities to support the NHS to be better placed to lead and participate in research in collaboration with HEIs and Industry will be to strategically realign NHS R&D funding budget (previously known as the provider support scheme). The uses of this budget will not change and the NHS will continue to hold the budget and account for it. NISCHR monies will be used to strengthen the funding base of the NHS and maintain stability in current activity. The budget will be used to reward excellence and build capacity.

1.9. The NISCHR NHS R&D budget will consist of the following components:

- NHS R&D management funding, including the NHS R&D support centre for Wales
- NHS Investigator time
- NHS Support department costs
- NHS (service) support costs
- NHS focused research grant scheme

1.10. A number of activities have already progressed:

- The new funding arrangements for NHS R&D offices have been included in the 2011/12 contracts and ring fenced by Health Boards.
- Data collection exercises in NHS organisations to inform a strategic review of the NHS R&D infrastructure and an NHS/HEI planning group have formulated a strategy which meets the needs of Health Boards and their partner HEIs, fits with Wales policy priorities and takes an “all Wales approach, where such an approach adds value.

1.11. A number of activities will be progressed within the next two years to facilitate closer industry and HEI collaboration:
• Primary care service support costs, emergency care and public health service support costs will be managed centrally by the NHS R&D support centre for Wales.

• A mechanism for flexibly meeting the research time of clinicians will be introduced. Health Boards will need to ensure that these costs are not duplicated through the core infrastructure costs or through the research costs paid for by UK funding agencies.

• Posts in the remodelled NHS infrastructure will be rebadged existing posts or new posts to fit the strategy of the AHSC. A requirement will be that funding for all posts is ringfenced by Health Boards and proof of research activity provided as part of the monitoring and reporting process.

• An NHS IT strategy will be developed to assist in enhancing the collection of data, including data on recruitment of patients.

1.12. To achieve the successful reconfiguration of the NHS that the Welsh Assembly requires, there needs to be a strong primary care research base and embedded research capacity and culture. Health Boards have responsibility for the management and development of primary care and NISCHR have already strengthened R&D offices in order to meet the additional demands on the management of studies. There is a need to strengthen primary care and greater delivery of services in order to achieve sustainability on health care delivery, for instance the rise in secondary care costs and unscheduled care can only be addressed through better provision of primary care.

1.13. NISCHR expects the strategic realignment activity of NHS R&D funding and the delivery of new initiatives to be complete within three years with all funding agreements based on principles of policy priority, strategic collaboration, excellence and transparency. An AHSC would provide the mechanism to achieve the strategic realignment described above, a strengthened infrastructure and a means of monitoring outputs and impacts.

2. THE ALL WALES ACADEMIC HEALTH SCIENCE HEALTH COLLABORATION (NISCHR AHSC)

2.1. The term Academic Health Sciences Collaboration/Centre (AHSC) describes the merged research, healthcare and education structure adopted by many of the world’s leading centres for academic clinical research which are also noted for their record in clinical excellence. The recognition of the value of the AHSC concept by the government of England, has led to substantial redistribution of NHS R&D funds and the accreditation in March 2009 of five AHSCs in England. A Scottish AHSC (a multicentre collaboration) was established in early summer 2009. In all variations on the AHSC theme the mission remains the same: – to combine basic and translational research, clinical care and education to create world-leading improvements in healthcare.

2.2. The all-Wales NISCHR AHSC will remain true to these principles with a strong focus on supporting research excellence. The translation of research excellence will lead to improved clinical care and research
informed education and training that will improve patient care. The Welsh AHSC will be a collaboration between the Welsh Assembly Government, Health Boards, NHS Trusts, Universities and Industry, building on the links and partnerships which already exist between the individual universities and their linked Health Boards in, Bangor, Cardiff and Swansea.

2.3. The aim would be to establish an all-Wales AHSC which would be recognised internationally for the excellence of its clinical research, and which would promote and support the distinctive research agenda needed to impact on the health of Wales. It would foster innovation in health research and the NHS and create an environment of teaching excellence across all health professions. NISCHR AHSC will be recognised for its international distinction and for the excellence and innovation of its clinical research which will impact on the health and wealth of the people of Wales.

2.4. The Wales AHSC would merge the structures and priorities for clinical research, service development and education of the partner Universities and Health Boards and Trusts in order to create a unique, efficient and research oriented clinical research environment in Wales.

2.5. The AHSC would:
- Implement the strategy, for strengthening the NHS R&D environment, as agreed by the Welsh Assembly Government, HEIs, Health Boards and Trusts
- Maximise collaboration between HEIs, NHS and Industry
- In a cost effective manner support and grow the research infrastructure of the NHS in areas such as informatics, bioinformatics, imaging, biobanking, pathology and radiology
- Coordinate and maximise the use of research resources, on an all-Wales basis e.g. the CRFs, imaging facilities and other equipment
- Work in synergy with the NISCHR Clinical Research Infrastructure
- Ensure knowledge transfer in the NHS in partnership with agencies with a relevant remit
- Ensure the integration of education and training in a coordinated manner
- Dovetail current activity underway through the Welsh Clinical Academic Training (WCAT) scheme by operating a scheme whereby clinicians are funded for research time and mentored in areas of policy priority and excellence in research
- Offer signposting, facilitation, and engagement and communication functions for industry and the wider R&D community, liaising closely with the R&D industry policy leads in NISCHR and other Welsh Assembly Government colleagues
- Monitor and report outputs to the Welsh Assembly Government

2.6. The NISCHR AHSC strategy document is a collaborative document between the clinical research community in Wales, including representatives from the Health Boards, NHS Trusts, Universities and Government, and is informed by NISCHR’s R&D policy and strategy to strengthen research in NHS Wales through the realignment of the NHS Provider Support Budget and the creation of an Academic Health Science
Collaboration. A planning group was convened by the Director of Research and Development at Cardiff and Vale University Health Board and has included all Research and Development Directors in Health Boards and NHS Trusts in Wales, and heads of academic medicine establishments in Wales. A parallel consultation process with key partners across Wales has also been undertaken as part of the strategy formulation process. Appendix 2 outlines the approved process as agreed with the Welsh Assembly Government NISCHR and NISCHR AHSC Planning Group.

2.7. Internationally recognised research and development is crucial if NHS Wales is to provide high quality, state of the art services and if those services are to attract key staff. The pool of resources in Wales is relatively small and there is a need to ensure that R&D is focussed and co-ordinated, providing a sound evidence base for practice and a clear direction for the future. The collaboration between academic and service research, development and teaching need to be recognised and strengthened in a way that provides opportunities to all professions, as a means of transferring R&D outputs into service delivery. NISCHR AHSC will be a strong collaboration between the NHS and academia, building on the links and partnerships that exist between the individual universities and their linked Health Boards/NHS Trusts.

2.8. NISCHR AHSC will form a key part of NISCHR’s clinical research infrastructure, and will operate in synergy with the rest of the infrastructure. NISCHR AHSC will be operationally run through Powys Teaching Health Board through the establishment of the NHS R&D Support Centre for Wales. The centre will comprise the already established NHS Permission Unit which is the operational arm for streamlining NHS R&D permissions working in close collaboration with all Health Boards and Trusts, and a team to operationally manage the new AHSC activities and improve the efficiency and accountability of the NHS R&D budget.

2.9. Under the policy direction of NISCHR within the Welsh Assembly Government, NISCHR CRC and NISCHR AHSC will work in collaboration to provide the best possible support for clinicians and researchers to support research of international distinction in Wales. This research will target the translational gaps including the far end of translation which is the essential final step if innovation is to be integrated into healthcare practice.

2.10. NISCHR AHSC has been developed to support the Welsh Assembly Government document the Science Policy for Wales which identifies areas of research excellence in health and biomedical research in Wales. NISCHR AHSC will play a key role in the overall coordinated NISCHR strategy for NHS Research and Development (R&D) in Wales. NISCHR AHSC strategy focuses on the development, planning and monitoring of NHS research infrastructure within the Health Boards and Trusts, and increased capacity to support research excellence in priority areas. It will be funded and monitored by NISCHR within the Welsh Assembly Government.
2.11. NISCHR AHSC will also contribute to the ‘Economic Renewal: A New Direction’ policy direction set out by the Welsh Assembly Government. NISCHR AHSC is firmly located in one of the key sectors identified (life sciences) and will bridge academia, NHS and industry to ensure there are opportunities for commercialisation and contribution to the economic development and prosperity of Wales.

2.12 NISCHR AHSC will work with partners to develop a detailed knowledge of the characteristics and strengths of the Welsh life science sector. Opportunities are likely to include the development of medical technologies and diagnostic products and often involve work conducted by small or medium sized companies. Such companies may require expert guidance in order to work with the NHS. NISCHR AHSC is ideally placed to provide this support. This work will also provide opportunities for collaborative product development and the commercialisation of NHS derived research and Intellectual property.

2.13. The AHSC will support NISCHR strategy to attract more companies to come to the NHS and HEIs in Wales to run clinical trials and research studies. This will bring more income into Wales, ensure Wales is included in future global drug discovery programmes and provide further opportunities to patients to enter research trials which will ensure greater access to new therapies. The AHSC will highlight the importance of building a commercial and cultural environment where strong and sustained collaboration between Industry, academia and the NHS is the norm. The AHSC will provide capacity to take on more industry studies which will increase the amount and diversity of research in Wales, ensuring that new therapies with new benefits are made available to the people of Wales.

3. **NISCHR AHSC MISSION**

3.1. The mission of NISCHR AHSC is to facilitate the collaboration between Health Boards, Trusts, Universities and Industry in Wales in order to combine clinical research, both basic and translational research, clinical care and education to create world-leading improvements in healthcare.

4. **AIMS OF THE STRATEGY**

4.1. The overarching aims of NISCHR AHSC are firstly to establish an all-Wales collaboration between the Health Boards, Trusts and Universities that will strengthen clinical research capacity through maximising the use of the NHS R&D budget administered by NISCHR. And secondly to build links with industry and other research funders that will contribute towards the economic development of Wales through the creation of new businesses and high value jobs in Wales.

4.2. In order to achieve the aims and objectives set out within this strategy, it will be imperative that a strong collaborative approach is adopted ensuring that the interface between the Health Boards, Trusts and Universities is effective and aligned towards the aims of this strategy. This will be the bedrock on which the synergies and added value will be generated for NISCHR AHSC.
4.3. The aims of NISCHR AHSC can be grouped into the following four categories which are described in more detail below:

1) **Supporting research excellence**
   - Co-ordinating the rapid translation of world-leading clinical and basic science into improved patient care
   - Attracting the best researchers and clinicians to Wales and retaining them
   - Leveraging additional clinical research support from industry, research councils and charities
   - Contributing to internationally recognised education and training, which is evidence-led, for all healthcare professions
   - Building stronger links with International Institutions and seeking European funding

2) **Strengthening NHS capacity to support high quality research**
   - Supporting and growing NHS research capacity that is essential for cutting edge clinical research
   - Providing a more effective coordination of capacity within the NHS and maximising the use of the NHS funding budget to support research excellence, NISCHR priorities including NISCHR portfolio studies

3) **Fostering a strong culture of research in the NHS**
   - Informing policy developments and delivery of health care services
   - Working with Welsh Assembly Government policy colleagues, and NHS and academic partners to secure improved clinical outcomes

4) **Promoting the NISCHR brand for clinical research in Wales to facilitate high quality research through effective collaboration**
   - Creating a signposting service for industry and other potential partners to undertake clinical research across the collaboration
   - Bringing together research management and governance (RM&G) and the management of NHS R&D funding to increase the speed and simplicity of processes of undertaking clinical research including NHS permissions.

4.4. In partnership, the Health Boards, Trusts and Universities will translate basic and clinical research and rapid technological advances into interventions, policies, planning, and ultimately the delivery of high quality and cost effective treatments for the people of Wales.

4.5. The achievement of these aims will lead to the development of an innovative and dynamic research environment that attracts and retains excellent clinicians and researchers, increases research income, and delivers research informed education and training in Wales that will ultimately result in improved patient care.

4.6. The specific objectives derived from the aims are:

   1. To define the requirements for capacity within the NHS to support high quality R&D, in relation to NHS support departments, protected time for clinically active staff (doctors, dentists, nurses, midwives,
Allied health professions and healthcare scientists) to become involved in research, as well as other R&D related support.

2. To co-ordinate and maximise the use of NHS research resources by strengthening the R&D infrastructure in NHS Wales though the strategic realignment of existing NHS R&D funding so that the NHS is better placed to lead and participate in research excellence.

3. To performance manage the effective use of NHS R&D Funding both within primary and secondary care.

4. To develop a consistent and standardised streamlined system for researchers in receiving NHS R&D permissions across Wales.

5. To develop links with the clinical research infrastructure to work towards common aims.

6. To create signposting, facilitation, and engagement and communication functions with industry and the wider R&D community.

7. To develop and/or contribute to a workplan which will address knowledge transfer in the NHS, in collaboration with other relevant agencies.

8. To implement, as requested by NISCHR Welsh Assembly Government, any further strategies related to the aims of the AHSC.

5. **AIM 1 - SUPPORTING RESEARCH EXCELLENCE**

5.1. There is a significant amount of research being undertaken within the Health Boards, Trusts and Universities in Wales. The Research Assessment Exercise 2008 recognised that world-leading research is being undertaken in health related disciplines in Wales.

5.2. In particular, Wales is recognised as a centre of excellence for neurosciences, mental health and psychology and has recently been awarded its first MRC Centre. Wales is also home to a UKCRC Public Health Research Centre of Excellence. Both are part-funded by NISCHR and are the benchmarks of research excellence that we aspire towards in all areas of research strengths in Wales.

5.3. Additional areas of particular strength identified in the most recent Research Assessment Exercise were, amongst others, cancer, genetics, primary care, infection and immunology, musculoskeletal and exercise rehabilitation. Additional pockets of world-leading research can be found across the whole spectrum of health related research in Wales and these strengths cross discipline boundaries. This breadth and depth of health related research provides a sound foundation on which we can build on.

5.4. We already have a strong tradition of interdisciplinary working between the NHS, Universities and Industry in Wales, for instance the Institute of Life Sciences in Swansea University and the Wound Healing Research Unit at Cardiff University. The NHS has particular strengths in providing the capacity required to support clinical research excellence, bringing clinical expertise to translational work, undertaking clinical trials and implementing service improvements alongside its role in delivering direct patient care.

5.5. There is an increasing level of technical capability supported by NHS resources in Wales to advance the research agenda. An example of this is biomedical imaging with the NHS and Universities continuing to invest in...
the latest biomedical imaging techniques including fMRI scanners, MEG scanner and Positron Emission Tomography (PET).

5.6 Further strengths can be seen in biobanking with Wales hosting its own NISCHR funded Cancer bank and Biobank Cymru, and in genetics with the creation of the Wales Gene Park in 2002. The Wales Cancer Bank holds samples from over 3,000 patients which all researchers are able to access for approved research - a useful resource that could lead to the identification of new treatments.

5.7. The NISCHR funded Health Information Research Unit (HIRU) based at Swansea University has developed a unique all Wales population dataset through anonymised data linkage. Over 1.4 billion health events concerning over three million individuals, each with a coded identifier, have been recorded to date. The primary and secondary healthcare data are complemented by information from social services, housing, transport and education. The HIRU dataset provides unique opportunities to study the population of Wales.

5.8. Wales has substantial expertise in genetics and genomics. This expertise provides the basis for translational medicine and the development of new medical innovations for the diagnosis and treatment of human diseases. The research expertise covers a spectrum of disciplines and has resulted in internationally recognised major advances in this field.

5.9. Wales has significant strengths in primary care research, and NISCHR has funded the Wales School of Primary Care Research, a collaboration between four Universities in Wales, which brings together a multi-disciplinary team covering the disciplines of allied health professions, dentistry, general practice, nursing, optometry and pharmacology.

5.10. Wales is home to one of five UKCRC Public Health Research Centres of Excellence (which receives funding from both NISCHR and Welsh Assembly government), that brings together leading experts from a range of disciplines to tackle public health issues such as diet and nutrition, physical activity, tobacco and drugs, with a particular focus on developing and evaluating multi-level interventions that will have an impact on the health and well-being of children and young people. The Centre engages strongly with policy, practice and public user communities to translate research results into practical outcomes and aims to address the impact of the socio-economic deprivation in some parts of Wales on the long term well-being of current and future generations in Wales.

5.11. The Cancer Research UK Centre in Cardiff is one of only nine in the United Kingdom. It supports an interdisciplinary team of researchers and clinicians to improve the care of cancer patients. The Cancer Research UK Centre along with significant investment from Cardiff University in the Cancer Stem Cell Research Institute aims to develop new cancer therapies which will make a real difference to the lives of patients.

5.12. Wales-based research groups in infection, inflammation and immunity have made world-leading contributions to knowledge which are now
being translated into clinical care. Developing strength in cardiology, respiratory and diabetes research across Wales makes this an important emerging area.

5.13. The areas of research excellence identified in Wales through the Science Policy for Wales (2006) and the Research Assessment Exercise (2008) can be summarised as follows:

- Cancer
- Cardiorespiratory / diabetes
- Genetics / genomics
- Infection, inflammation and immunity
- Neuroscience/mental health
- Primary care
- Public health

These areas of excellence will provide a focus for resource allocation by NISCHR AHSC. It should also be recognised that effective partnership working with Universities in areas of recognised research excellence can lever additional resources and expertise to contribute towards the wider health research mission of NHS Wales. Examples of this include the ability to draw in on expertise from other disciplines to support the health research agenda (Economics, Education, Health Informatics, Psychology, Sociology, Mathematics, Chemistry etc.) nationally and internationally.

5.14. Interdisciplinary research teams, units and centres across these areas have developed strong international partnerships with other researchers of international distinction and this is to be valued and celebrated. International collaboration is seen as a key component in driving forward the research excellence agenda in Wales.

5.15. The AHSC will support the identified areas of research excellence by running and funding a clinical research competition that will enable clinicians in the NHS to apply for protected time to undertake research.

5.16. NISCHR will further support the research excellence agenda through establishing a Biomedical Research Centre or centres, and Biomedical Units across Wales. The creation of Biomedical Research Centre(s) and units will reward existing research excellence and further support its development. Strong links will need to be made between the BRC and AHSC to ensure the use of resources is enhanced, they are effectively utilised and the AHSC plays a key role in the R&D translation agenda.

6. AIM 2 - STRENGTHENING NHS RESEARCH CAPACITY TO SUPPORT HIGH QUALITY RESEARCH

6.1. It must be recognised that the baseline infrastructure support for research in many Health Boards and Trusts is low and varies significantly across Wales. NISCHR AHSC will aim to bring research capacity within the NHS up to a minimum standard in areas that support the research excellence agenda outlined in Aim 1. Actions are already being taken by NISCHR to address this and further action will be
undertaken by NISCHR AHSC to complement the activities of the NISCHR CRC.

6.2. Significant investments by NISCHR are already being made in research infrastructure in Wales through the CRC. The CRC enables the implementation of high quality research projects through its research professional network and its training programme. NISCHR also supports seventeen Registered Research Groups which cover a wide range of discipline areas from cancer to primary care to patient safety and healthcare quality. It will be important that the AHSC activity to realign NHS R&D funding can meet the costs of NHS support costs for the CRC maintained portfolio studies.

6.3. In addition to the CRC and the Registered Research Groups there are also a number of other significant research infrastructure facilities available in Wales, including biobanking, genetics, imaging, health economics, informatics and clinical trials units.

6.4. Wales is home to two Clinical Research Facilities – both in South Wales. NISCHR AHSC will aim to strengthen the existing facilities by working in collaboration with the host Health Boards and Universities. The AHSC will also work in collaboration with Betsi Cadwaladr University Health Board, Bangor University, and other partners to explore options to establish a Clinical Research Facility in North Wales in order to strengthen the clinical research infrastructure. The creation of a Clinical Research Facility in North Wales would provide an equality of opportunity to all clinicians and clinical academic staff interested in undertaking research wherever they are located in Wales.

6.5. Each Health Board and Trust in Wales has a R&D Director supported by an R&D Office. In 2010/11 NISCHR provided additional ring-fenced research management funding to ensure that the R&D Offices are adequately resourced through the NHS R&D funding and are fit for purpose to meet the reconfigured NHS where primary and secondary care is now integrated.

6.6. NISCHR AHSC will strengthen NHS capacity as a priority by ensuring that the core/enabling infrastructure available at each Health Board and Trust in support of research is of an appropriate standard. This will focus on issues such as informatics, radiology, pathology, pharmacy, health economics and support for clinical trials.

6.7. The existing research capacity in key enabling areas within the NHS needs to be reinforced and aligned to the areas of research excellence identified, with clinical researchers being afforded equal opportunities to access such support services. NISCHR AHSC will therefore work in collaboration with NISCHR CRC to map out the current supporting research infrastructure in Wales to ensure that all clinicians and clinical academic staff interested in undertaking research know what support is available to them and how to access it.

6.8. Consideration needs to be given to the best approach to take to support primary care research through the development of the AHSC. The
engagement of GPs plays an important role in recruitment and clinical access to clinical trials for patients, but they may not have the background to develop as Principal Investigators and have capacity and capability to deliver research in a fixed time period. Building capacity in primary care within the work programme will require a different approach.

7. AIM 3 - FOSTERING A STRONG CULTURE OF RESEARCH IN NHS WALES

7.1. NHS Wales is committed to developing Research and Development. The NHS Wales Annual Operating Framework 2010/2011 recognises a “need to drive culture change to make research and development (R&D) a core activity in the NHS”. Innovation is seen as a key component in improving the quality of care in the NHS, and the NHS must play its full part in supporting health research in Wales as part of this agenda. NHS Wales aims to double the number of patients taking part in clinical trials and other well designed studies within five years.

7.2. NHS Wales, in its new five year strategic framework, has identified the need for the NHS to be “much more active in searching out and applying evidence and in generating and promoting research where it is lacking”. This is a clear commitment from the Health Minister and the Chief Executive for NHS Wales that research and development should be valued and is central to the future development of the NHS in Wales. This is further reinforced by the strengthening of the NISCHR team with additional support posts in the Welsh Assembly Government to lead on the policy development of R&D in Wales, and by the testimony that all Chief Executives of Health Boards and Trusts now have a responsibility for Research and Development built into their performance plans.
7.3. There are a number of foundation posts for medical trainees which integrate academic rotation with clinical rotation. These are academic posts that are recognised as providing academic and clinical competencies for aspiring clinical academics of the future. The Welsh Clinical Academic Training (WCAT) is a similar scheme that provides a balanced approach to specialist clinical training whilst integrating higher academic training and development. WCAT is seen as a key contributor in fostering strength in clinical research and a strong research culture in NHS Wales. The success of the WCAT scheme is seen as integral for the long term success of NISCHR AHSC by contributing to increasing capacity and developing long term succession planning for the future of clinical research in Wales. NISCHR AHSC will work closely with the Wales Deanery and the Welsh Assembly Government to ensure the long term sustainability of the programme.

7.4. Similar schemes are being supported in nursing, midwifery and allied health professions where clinical practice and training is undertaken concurrently with higher degrees. This facilitates a strong clinical and research environment within the NHS that is critical to the embedding of a strong research culture in the Health Boards and NHS Trusts in Wales. Developing strong links between programmes relating to Clinical Academic Careers for Nurses, Midwives and Allied Health Professionals, for instance the jointly HEFCW and NISCHR funded Research Capacity Building Collaboration Wales (RCBC) hosted by the University of Glamorgan and AHSC will be important.

7.5. “Modernising Scientific Careers: The UK Way Forward” is a UK wide document which sets the strategy for the development of the healthcare science workforce and their education and training. Implementation arrangements are at a planning stage in Wales to take forward proposals on career pathways, regulation and standards of education and training, education and training programmes and on supporting delivery. Any actions will be undertaken in close liaison with AHSC.

7.6. NISCHR AHSC will encourage Health Boards and Trusts to build on existing practices to extend academic training schemes where possible with a hope that they proceed to higher degrees as they achieve specialist training posts.

7.7. The development of a skilled workforce able to deliver high quality R&D is a key underlining principle of NISCHR AHSC. NISCHR AHSC will promote a strong relationship between R&D and workforce development strategies, particularly as R&D activity serves as a critical training tool as well as being a major factor in the effective recruitment and retention of highly skilled staff. NISCHR AHSC should work collaboratively with undergraduate and postgraduate education and training providers to deliver a strong culture of R&D in NHS Wales that will ultimately lead to improved patient care and permeate practice at ward/team level.
8. AIM 4 – PROMOTING A SINGLE BRAND FOR CLINICAL RESEARCH IN WALES WHICH FACILITATES HIGH QUALITY RESEARCH THROUGH EFFECTIVE COLLABORATION

8.1. NISCHR is the key brand for R&D in Wales and NHS Wales needs a single voice for engagement and communication with research partners. NISCHR AHSC will create signposting, facilitation, engagement and communication functions with industry and the wider R&D community. The development of an access point will become the public face of NISCHR AHSC. It will play a key role in business development and will be responsible for fostering and maintaining collaborations between NISCHR AHSC partner organisations and external partners in industry and elsewhere within Wales and internationally.

8.2. NISCHR AHSC will contribute to the promotion of research excellence (clinical and basic science and its translation from ‘bench to bedside’) in Wales and, in partnership with the research community in Wales and other departments of the Welsh Assembly Government, will market and communicate the research capabilities of the NHS and partner HEIs proactively to research sponsors from industry and elsewhere.

8.3. A work stream will be established to consider the requirements of a single centre and access point for engagement with external partners in more detail.

8.4. A complementary workstream will also be undertaken to address knowledge transfer in the NHS, which will involve other relevant agencies within, and outwith, the Welsh Assembly Government. Included within this work stream will be the management of Intellectual Property including its identification, protection and appropriate exploitation.

8.5. NISCHR AHSC will take a lead role in operationalising NHS research governance policy, in particular, implementing the streamlining NHS R&D permissions across NHS Wales and will therefore play a key role in improving research management and governance across Wales. In particular, NISCHR AHSC will incorporate the NHS R&D permissions and ethics team which will develop and implement a streamlined, co-ordinated and consistent review process for NHS R&D permissions for primary and secondary care research in Wales. Through the NHS R&D permissions and ethics team, NISCHR AHSC will also provide specialist advice and support to R&D departments in NHS Wales. These initiatives will simplify and speed up the process of permissions to make Wales a more attractive environment for industry to work with the Health Boards, Trusts and Universities.

9. AHSC MANAGEMENT AND GOVERNANCE ARRANGEMENTS

9.1. NISCHR AHSC will be responsible, under the policy guidance of NISCHR, for ensuring appropriate governance on the expenditure of NHS R&D funding. This will be achieved by developing more robust reporting measures on financial spends and outputs. The newly created NHS R&D Support Centre for Wales will be based at Powys Teaching
Health Board where the Permissions Unit is already established and will provide the infrastructure and support for the AHSC – leading on enhancing data capture/IT infrastructure, and co-ordinating and simplifying systems for contracting and costing of research across the NHS in Wales.

9.2. Leadership for NISCHR AHSC will be provided by a Clinical Director, recruited through open competition. This individual will be accountable to the Head of NISCHR through contract management of the NHS R&D Support Centre for Wales. The post holder will be supported by the NHS R&D Support Centre for Wales which will be the operational office for the AHSC. In addition there will be a small team with strong financial management competencies to support the work of the initial work streams identified. The proposed operational structure of NISCHR AHSC can be found in Appendix 5.

9.3. NISCHR AHSC Clinical Director will be expected to develop further governance structures involving representatives from the NHS and HEI R&D community. In particular, NISCHR AHSC will work closely with R&D Directors in Health Boards, Trusts and Universities. NISCHR AHSC will also encourage collaboration and joint working between the stakeholders in Wales and internationally.

9.4. NISCHR AHSC will also be responsible for ensuring that strong strategic and operational links are developed and nurtured between NISCHR funded units and centres e.g. Registered Research Groups, CRC, Trials Units.

9.5. NISCHR AHSC will involve patients, carers and service users in its governance and steering processes. These people will be recruited and trained through the involving People activity of the NISCHR CRC.

10. STRATEGIC PRIORITIES AND FUNDING IMPLICATIONS

10.1. This strategy will inform the planning of the establishment of NISCHR AHSC. The current financial climate is one of increasing pressure on the public purse and there is a need for prioritising the actions and initiatives that will deliver against the stated aims and objectives.

10.2. Subject to funding constraints, NISCHR AHSC funding will initially be set at £1.5million for year 1 (2010/11) and, subject to funding constraints, should grow substantially to over £11.5million per annum by the end of year three (2013/14). This will be a mixture of NISCHR funding (circa. £2.5 million), and the full realignment of NHS R&D funding in Wales (circa. £9million).

10.3. In addition, in 2010/11 a further £2.9million has been ring fenced for R&D office management support in Health Boards and Trusts. The R&D offices at Health Boards and Trusts have been required to strengthen financial skill base in order to meet the demands of the new reporting structures. NISCHR AHSC will collect routine R&D management data as part of its monitoring remit from 2011/12. All Health Boards and Trusts will be expected to ensure that their NHS R&D funding is used to support...
the delivery of NISCHR AHSC by the end of the three year transition period.

10.4. All R&D Directors and R&D Offices in Health Boards and Trusts will be aligned to NISCHR AHSC. R&D Offices will need to develop a close working relationship with the NHS R&D Support Centre for Wales in the transitional period to ensure up to date information on current activity and posts funded by NHS R&D funding are captured.

10.5. The initiatives that will be funded in year one (summarised in 10.6 and 7) will be focused on strengthening capacity in the NHS to support high quality research, whilst ensuring that these are aligned to the areas of research excellence identified. A communication strategy will be developed to ensure these initiatives are brought to the attention of the R&D community (including professional groups) in Wales.

10.6. A clinical research time competition will be launched that will enable clinicians in the NHS to apply for protected time (up to forty percent of their time) to undertake research. The funding will be for up to a three year period, subject to annual review, with the assessment of the applications based on four main criteria: the individual; alignment to research excellence and NISCHR priorities; research environment and mentorship arrangements; and the commitment of the Health Board/Trust. Further arrangements will be considered for primary care.

10.7. NISCHR NHS R&D funding will also be directed to provide additional support for radiology, pathology and pharmacy support services within Health Boards and Trusts. This support will be based on each Health Board’s/Trust’s needs and will provide a strong and sustainable basis to support the research excellence agenda. Health Boards and Trusts will be expected to ensure alignment of their NHS R&D funding to deliver the infrastructure needs at a local level that supports research of the highest possible quality. NISCHR AHSC funded posts will be linked to Universities in Wales to ensure that the individuals receive appropriate mentorship and that the research they support/undertake is aligned to the research excellence agenda. Linking to the national board which represents a range of support department disciplines will be an important reference group in capacity planning in the AHSC programme. It will be critical that the Health Boards/Trusts and the Universities provide strong leadership in these areas to ensure that the R&D funding does not get diverted to service delivery.

10.8. The costs of setting up the NHS R&D Support Centre for Wales - the operational office for the AHSC, will include staffing costs and a non-staff budget to cover travel and subsistence, office expenditure and a dedicated budget for marketing and promotion of NISCHR AHSC.

10.9. NISCHR AHSC funding initiatives identified will be open to all Health Boards and Trusts in Wales. In recognition of the low levels of R&D funding in a number of Health Boards and Trusts, NHS R&D funding will be prioritised in the first year to boost capacity in Health Boards and Trusts - with the exception of Cardiff and Vale University Health Board. Due to the significant proportion of the NHS R&D funding held by this
organisation, a separate local exercise needs to be undertaken to ensure strategic realignment can be achieved in three years.

11. IMPLEMENTATION OF THE STRATEGY

11.1. The AHSC Clinical Director, with support from the NHS R&D Support Centre and AHSC operational groups, will be responsible for overseeing the implementation of this strategy under the overall direction of NISCHR and will be accountable to the head of NISCHR. Close working with other NISCHR funded initiatives, the Welsh Assembly Government and the partners within the collaboration to ensure its successful delivery. The full cooperation of the research community in Wales will be essential to the successful implementation of the strategy.

11.2. During year one, NISCHR AHSC will prepare a detailed workplan to be agreed with NISCHR Welsh Assembly Government under each of the aims and objectives. This will inform the ongoing strengthening of NHS research capacity and support of research excellence required for NISCHR AHSC to achieve its goals.

11.3. The following table sets out high level targets/objectives to be met over the next three years.

<table>
<thead>
<tr>
<th>Objectives</th>
<th>2010/11</th>
<th>2011/12</th>
<th>2012/13</th>
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</thead>
<tbody>
<tr>
<td>Establish the NHS R&amp;D Support Centre for Wales and make appointments</td>
<td>X</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>Appoint NISCHR AHSC Clinical Research Fellows as part of the Clinical Research Time Competition</td>
<td>X</td>
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<tr>
<td>Define the requirements for capacity within the NHS to support high quality R&amp;D in relation to NHS support departments, protected time for clinicians to become involved in research, as well as other R&amp;D related support</td>
<td>X</td>
<td></td>
<td></td>
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<tr>
<td>Appoint additional staff to strengthen research capacity in the NHS to radiology, pathology and pharmacy services in Wales</td>
<td>X</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Re-align NHS R&amp;D Funding to support the NHS capacity requirements</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>Performance manage the effective use of NHS R&amp;D Funding both within primary and secondary care, by developing robust accountability systems and procedures for monitoring the expenditure and outcomes of NISCHR AHSC funding</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>Develop a consistent and standardised streamlined system for all NHS R&amp;D permission across Wales</td>
<td>X</td>
<td></td>
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<tr>
<td>Develop and nurture strong strategic and operational relationships between the NISCHR delivery structures (AHSC and CRC)</td>
<td>X</td>
<td>X</td>
<td></td>
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<tr>
<td>Develop and/or contribute to a workplan which will address knowledge transfer in the NHS, in</td>
<td>X</td>
<td>X</td>
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<tr>
<td>collaboration with other relevant agencies</td>
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<tr>
<td>Prepare workplans (including the work streams on development of a single centre and access point for NHS research in Wales.)</td>
<td>X</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Implement detailed workplans</td>
<td>X</td>
<td>X</td>
<td></td>
</tr>
</tbody>
</table>
APPENDICES

The appendices are the recommendations of NISCHR AHSC Executive on how to put into implementation the initial aspects of the strategy. These are operationally focussed.

Appendix 1 - A diagram of the NISCHR R&D infrastructure
Appendix 2 - Outline of the process for the development of NISCHR AHSC Strategy by the NISCHR planning group
Appendix 3 - NISCHR AHSC clinical research time competition
Appendix 4 - NISCHR AHSC posts supporting NHS research capacity
Appendix 5 - NISCHR AHSC Structure
Appendix 1- National Institute for Social Care and Health Research (NISCHR) structure

NISCHR Advisory Board
(Governance)

NISCHR Welsh Assembly Government
(Strategy, policy, commissioning, funding, monitoring)

NISCHR Operational Steering Group
(Operational management and delivery)

NISCHR Clinical Research Centre
- Supports RRGs & Trials Units
- Manages the Research Professional Network
- Training
- Portfolio management, PPI, diversity & welsh language support

NISCHR Registered Research groups (RRGs)
- Networks of researchers
- Generate proposals
- Win grants
- Deliver and disseminates

NISCHR Trials Units and Infrastructure Support Groups (ISGs)
- Support RRGs
- Generate proposals
- Win grants
- Deliver and disseminates

NISCHR Academic Health Science Collaboration
- NHS R&D funding
- Co-ordination of HEI, industry and NHS activity
- Clinical research time competition
- NHS Support call
- Streamlining NHS permissions

NISCHR Biomedical Sciences Centre of Excellence
- Supports and delivers high quality research and research excellence
- Translational research

NISCHR Social Services Centre for Research Excellence
- Supports and delivers high quality research and research excellence

NISCHR Faculty
(Community of NISCHR funded researchers)

- Coordination of HEI, LA activities
- Capacity building
Appendix 2- Outline of the process for the development of NISCHR AHSC Strategy

(This paper was considered and endorsed by the AHSC Planning Group at its second meeting on 26th April 2010)

1. Planning Process

1.1 The National Institute for Social Care and Health Research (NISCHR), Welsh Assembly Government appointed Professor Jonathan Bisson, Director of Research and Development, Cardiff and Vale University Health Board to lead the development of a strategy for an all-Wales Academic Health Science Collaboration (AHSC).

1.2 In order to set out the context for this strategy, Dr Sue Denman, Acting Head of NISCHR, outlined the key principles for this strategy in a paper, ‘Strengthening Research in NHS Wales’. This was considered and approved at the inaugural meeting of the Planning Group on 1st March 2010. The Planning Group will oversee the development of the strategy.

1.3 The Planning Group consists of all of the R&D Directors in Local Health Boards, University Health Boards in Wales and NHS Trusts in Wales, and the three Heads of Medical Schools in Wales.

1.4 The Planning Group will be supported by an Executive Group in writing the strategy. The Executive Group will be lead by Professor Jonathan Bisson and involve Professor Steve Bain, R&D Director, Abertawe and Bro Morganwg University Local Health Board, and Dr David Parker, R&D Director, Betsi Cadwalader University Local Health Board.

1.5 The Planning and Executive groups will be supported by Mr Rhys Thomas, Associate Director of Planning, Cardiff University.

1.6 The Executive Group will, in consultation with the Planning Group and other key stakeholders in Wales, undertake a mapping exercise and develop papers for consideration by the Planning Group. This will inform the development of the AHSC Strategy.

1.7 The Executive Group will also consult widely with other stakeholders in Wales not represented on the Planning Group in the process of formulating the strategy.

1.8 The Planning Group will meet on a regular basis to drive forward the development of the strategy.

1.9 In order to develop an informed AHSC strategy for Wales, the following data/information sources will be considered:
   - Information held centrally by WORD including:
     - the Research and Development Support Funding Annual Reports (2008-09);
     - The review of provider support funding system report (December 2008);
   - The key strategic priorities of WAG as outlined in their key strategy and policy documents;
   - Intelligence and fact gathering visit to the Scottish AHSC;
o Mapping Questionnaire used to interview key stakeholders including amongst others all LHB/UHB R&D Directors and Heads of Medical Schools;
o Key Funders of UK Health related research strategic priorities (2010 onwards);
and
o Research Assessment Exercise 2008 outcomes.

1.10 The travel and subsistence costs of the executive group in undertaking their duties will be met by WORD. The time commitment of Mr Thomas will also be met by WORD.

1.11 The Planning Group at its first meeting in Llandrindod Wells (1 March 2010) agreed to the concept and process for the development of the AHSC strategy as outlined in 1.1 to 1.9 above.

2. Actions and timescales (next six months)

2.1 The following actions and key milestones are proposed for 2010/11:
o Identify work streams to further develop strands of the strategy - April/May 2010
o Work with NISCHR Clinical Research Centre to ensure alignment and synergies of NISCHR clinical research infrastructure in Wales (including the AHSC) - May/June 2010
o Planning Group to consider and endorse the AHSC strategy - June 2010
o Launch the all-Wales AHSC - September 2010
o Release new AHSC monies to support the strengthening of clinical research infrastructure in Wales - September 2010
o Create AHSC Office - Autumn 2010
o Realignment of existing NHS R&D funding to the AHSC strategy - ongoing process
Appendix 3 - NISCHR AHSC clinical research time competition

Aim:
The aim of NISCHR AHSC Clinical Research Time Competition is to enable any clinician or healthcare scientist in the NHS to apply for protected time to undertake research. This will lead to strengthening the research culture in the NHS and to increasing capacity in areas that are aligned to the research excellence agenda identified in NISCHR AHSC Strategy.

Overview of the Scheme:
The scheme will enable all clinically active staff (doctors, dentists, nurses, midwives, allied health professions and healthcare scientists) in the NHS to have protected time to undertake research. The protected time will be a maximum of forty percent of their time per week and will replace existing clinical commitments within the individual's work plan. The award will be for a period of up to three years, subject to annual review, for high quality individuals who are aligned to high quality research programmes in one of the key areas of excellence outlined above. The funding available will be to cover direct staff time only. The successful candidates will receive the title of NISCHR AHSC Clinical Research Fellow.

Process of Assessment:
The assessment of the bids will be based on the following criteria:
1. The quality of the individual and of the proposed research (it is envisaged that many individuals will be working to support existing high quality research programmes rather than starting new small projects)
2. Alignment of the research proposal to areas of existing research excellence and national priorities
3. The research environment and mentorship arrangements with academic staff from HEIs
4. Commitment of the Health Boards / Trusts towards the project

A panel of assessors will be established to judge the applications and make the awards. The panel chaired by NISCHR Welsh Assembly Government will include representatives from NISCHR AHSC, four academic representatives from Wales, and two members from the academic research community outside Wales.

Monitoring:
NISCHR AHSC Clinical Research Fellows will undergo annual performance review against set targets. If the targets are not met, NISCHR AHSC will agree an action plan to remediate the situation or apply its discretion to revoke the award.

* During 2010/11 clinical staff from Cardiff and Vale University Health Board will be able to apply for this competition, and if there are successful applications these will need to be funded from its existing NHS R&D funding - there will be no new funding available for Cardiff and Vale University Health Board as part of this competition in 2010/11.
Appendix 4 - NISCHR AHSC posts supporting NHS research capacity

Aim:
The aim is to increase NHS research capacity in Health Boards and Trusts that supports research activity. Three key areas of radiology, pathology and pharmacy have been identified where the baseline is particularly low, however applications from specialisms will be considered.

Overview of the Activity:
The scheme will enable Health Boards and Trusts to build upon existing support already in place for radiology, pathology and pharmacy - the funding will not be allowed to be used to displace existing support for Research and Development. NISCHR AHSC funded posts will be linked back into Universities in Wales to ensure that leadership is provided on research capacity requirements in each of these disciplines. This will allow the supporting infrastructure to be fully aligned to the research excellence agenda.

Allocation of Funding:
Information gathered by NISCHR and data collection activity by the NHS R&D support centre for Wales will be used to allocate the funding.

Process of Assessment:
NISCHR AHSC Clinical Director will convene a panel which will make decisions based on the following criteria:
1. Adequacy of existing support
2. Support and mentorship arrangements for the new posts
3. Anticipated demand for the new posts
4. Alignment to NISCHR strategy
5. Commitment of the Health Boards / Trusts towards developing R&D infrastructure

Monitoring:
Annual monitoring of activity and outputs.
Appendix 5 - NISCHR AHSC Structure

Structure of NISCHR AHSC:

Staffing Structure:

NISCHR AHSC

Led by Clinical Director
(0.2FTE)
Managed by a Senior Manager*
(1.0FTE - Band 8c)

NISCHR AHSC Unit

Administrator
(1.0FTE - Band 4)

NISCHR AHSC finance officer
(1.0FTE - Band 6)

NISCHR Permissions Coordinating Unit

NISCHR AHSC Unit

Manager
(1.0FTE - Band 8a)
Key responsibilities of the staff:

**NISCHR AHSC Clinical Director**
- Provide leadership to NISCHR AHSC
- Represent NISCHR AHSC nationally and internationally

**Senior Manager**
- Manage the running of NISCHR AHSC and monitoring of the NISCHR NHS R&D funding and AHSC Budget
- Lead and programme manage NISCHR AHSC initiatives

*Note: A similar post already exists as the NISCHR Permissions Unit Lead. By making this a joint appointment (since the NHS R&D Support Unit will now be part of the AHSC) will enable greater use of resources and deliver synergies and efficiencies in support of NHS R&D in Wales.*

**Manager**
- Support NISCHR AHSC Clinical Director in leading NISCHR AHSC in Wales
- Act as the first and main contact for NISCHR AHSC
- Monitor outputs
- Promote and market NISCHR AHSC

**NISCHR AHSC finance Officer**
- Support the financial reporting and monitoring activity
- Support the development of the detailed strategy document and workstream activities
- Develop a web presence

**Administrator**
- Provide general administrative support to NISCHR AHSC staff