

NIHR IS Programme

IS Programme Mandate

This mandate sets the objectives and scope of the National Institute for Health Research (NIHR) Information Systems (IS) Programme¹.

1 Programme Definition

1.1 Programme Objectives

The main objective of the IS Programme is to ensure that integrated information systems support the goals set out in the government health research strategy Best Research for Best Health:

- Establish the NHS as an internationally recognised centre of research excellence;
- Attract, develop and retain the best research professionals to conduct people-based research;
- Commission research focused on improving health and care;
- Strengthen and streamline management systems for research management and governance;
- Act as sound custodians of public money for public good.

Consequently, the focus of the IS Programme is to integrate, streamline and strengthen those information systems that have the greatest impact on improving the quality, efficiency and capacity of health research undertaken in England. This will result in less time and effort involved in dealing with “management information”, reduce delay, duplication and confusion and improve access to resources that help to make England a more dynamic, coordinated and attractive place to do research. The information systems should support the whole of the research project lifecycle – from conception to completion – and underpin the relationships between the National Institute for Health Research and its partners. This will benefit funders, researchers and the public.

The programme therefore aims to ensure that researchers, research managers and others involved in the lifecycle of research studies can access and use integrated information systems that will:

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- ¹ There are two meanings of the word ‘system’ within this programme. The first usually called ‘information system’ refers to the computer hardware and application software required to process and store data. The wider definition usually called ‘management system’ refers to the business processes, participants and information systems that combine to produce a business outcome.

- Unify and simplify the administrative procedures associated with regulation, governance, reporting and management;
- Minimise the input of data by creating longitudinal records, that avoid duplication of effort, covering the whole life of a project which can be accessed in accordance with agreed regulations by appropriate bodies;
- Implement a web portal that will be a single source of information and guidance for researchers, people involved in research management and the public and which will be a dynamic on-line environment to support collaboration, networking and patient recruitment.

1.2 Programme Products

The main products that the IS Programme is to produce are:

1. Implement and enhance the NIHR Portal.
2. Implement information systems to support the central sign-off (CSP) process.
3. Develop integrated information systems architecture² to support the whole of the research study lifecycle including funding, approvals, management and publication/outcomes.
4. Develop and maintain a directory of NIHR Faculty Members.
5. Address the information and management needs of the research networks by developing and supporting research infrastructure management systems.
6. Identify and pursue opportunities for improved systems to streamline, unify and strengthen research and research management.

To support the making of the above products, the IS Programme will produce 'management products' that are required as part of managing the project (e.g. Reports, Issues and risk logs, plans, etc.) and as part of establishing and maintaining quality. The main management products that the IS Programme is to produce include business³ justification(s) for programme expenditure including option analysis, procurement strategy and benefits appraisal.

The IS Programme is to ensure that information systems are based upon and compatible with national and international standards⁴ and, where appropriate, support working across national boundaries.

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- ² Within the programme, the term 'information systems architecture' includes communications equipment, data repositories, data and interface standards, reporting systems and operational processes to support the connection of NIHR information systems.
 - ³ Within the IS Programme the term business refers to the activities conducted by the health and social care R&D community.
 - ⁴ These standards will also recognise requirements in other countries and will be based on open and accepted standards as much as possible.

The IS Programme will be conscious of its carbon footprint (as a programme) and the carbon footprint of the NIHR. It will seek to set examples in the responsible use of management systems to minimise travel and meetings and maximise effectiveness, building on good practice in the NHS and higher education.

The objectives of each constituent part of the Programme will be set out in the Programme Brief and the implementation plan. The success criteria of the constituent projects will be expanded in the individual project briefs that will be developed as part of the initialisation of the IS Programme.

1.3 Programme Scope

The NIHR IS Programme has been established to oversee and ensure the delivery of information systems to support the objectives of the strategy Best Research for Best Health. The scope of the programme includes:

- The activities defined in Department of Health Implementation Plan 4.2 'Bureaucracy Busting: Research Information Systems'.
- Essential information systems developments for UKCRN and other parts of the NIHR to support the delivery of the strategy.

The Programme Board will consider how far the scope of the IS Programme can accommodate IS implications arising from other DH/NIHR implementation streams, subject to appropriate resources being identified.

Unless included above, the IS Programme's scope does not include the information systems required to support the internal operations of external or partner organisations e.g. agencies involved in commissioning or National Research Ethics Service (NRES).

IS requirements and information systems that are developed by the Programme will be based on the need to support research administration and related processes that will be defined by the appropriate bodies. The Programme will be proactive with those bodies to ensure that opportunities to implement innovative IS solutions are identified and addressed. By bringing process and management systems thinking to this environment, the IS Programme may identify areas in which fundamental rethinking of key processes may be required. However, any such rethinking is expected to be outside the scope of the IS Programme.

The IS Programme will define transition and implementation processes for organisations to employ when adopting the new and changing information systems.

2 Programme Control

The Programme Board reports to the DH Director-General of Research and Development via its Chair.

The Programme Board has the roles and members detailed in the Programme Board Terms of Reference. Additional representatives may join the Board during the life of the Programme.

2.1 Benefits

The Programme Board will review a statement of benefits which will be the basis of a high level business case. It will use these to confirm the initial scope of the IS Programme and to provide a mandate for a small number of Benefits Forums.

The IS Programme is one work stream within 18 for the NIHR. The Programme is responsible for enabling, supporting and monitoring the transformation to new ways of working enabled by the system reforms announced in Best Research for Best Health, including the information systems.

However, the Programme cannot be responsible for ensuring that all of these wider system reforms realise the intended benefits. The responsibility for realising those wider benefits lies with the NIHR research community including the NIHR delivery mechanisms, universities, NHS Trusts, primary care organisations, the pharmaceutical, biotechnology and devices companies, the approving and regulatory bodies, and individual researchers. Each NIHR work stream has been charged with leading on various initiatives to realise the changes in working practice resulting from the introduction of the NIHR. These work streams are responsible for the identification of benefits, and the NIHR is responsible for coordinated communication. Most of the IS applications, capability and infrastructure to be produced by the IS Programme will be delivered on behalf of the other NIHR workstreams. In other words, the IS Programme often will be one or two steps removed those who have to ensure the realisation of benefits.

Therefore, it is important to plan for appropriate engagement between the stakeholders and the various NIHR work streams about information requirements, and between the work streams and the IS programme about meeting them.

2.2 Benefits Forum

In addition to using existing stakeholder bodies, e.g. the clinical research networks, the Industry Roadmap Group, etc., a Benefits Forum will be used to

support the IS Programme. This will comprise (self-selecting and invited) stakeholders who share a common interest in what the IS Programme will deliver. It is a mechanism for engaging these stakeholders in defining requirements and influencing the transition to new ways of working and particularly for ensuring that the Programme is focussed on the delivery of real benefits for users.

The themes for the Benefit Forum will be agreed by the Programme Board and may be subject to change over the life of the Programme.

3 Risks

High-level Risk	Impact	Risk minimisation actions	Risk response actions
Failure of other NIHR workstreams to: a) identify and realise benefits enabled by Information systems, and b) adequately manage their interdependencies with the IS Programme.	Opportunities for IS-enabled benefits not identified. IS requirements not complete. Stakeholders not adequately prepared. IS not adequately commissioned. Benefits not realised.	DH to actively manage interdependencies between NIHR workstreams. NIHR reporting dashboard to monitor interdependencies. Other NIHR workstreams to adopt a benefits driven, programme management-based approach.	Programme Board to escalate to Sponsoring Director.
Failure to engage Stakeholders effectively and efficiently.	Excessive focus on effort to stop Networks and stakeholders taking tactical actions rather than helping to do strategic implementation.	Establish clear Communications and stakeholder engagement strategy leading to early formation of a Benefits Forum.	Programme Board to ensure appropriate Benefits representation at Programme level; provide proactive support of Benefits Forum formation and focus on delivering Programme objectives.
Programme communication not synchronised with communication arising from other NIHR workstreams.	IS Programme and NIHR discredited in the eyes of the research community. Stakeholders fail to actively support implementation of NIHR.	IS programme to contribute to a combined NIHR communication strategy covering all NIHR work streams.	Programme Board to escalate to Sponsoring Director.
Programme bogged down in solving short-term issue management and delivering tactical requirements.	Funding and energy diverted to solve short-term issues and long term solutions never put in place.	Programme formed quickly. Target architecture and programme road-map designed, documented and agreed.	Programme Board to ensure focus is on strategic rather than tactical issues.

Failure to set up and populate Programme Board in a timely manner.	Major decisions are not made, are not competent or are delayed.	Early establishment of Programme Board ensuring proactive engagement from Board members.	Programme Board to ensure that outstanding key decisions are addressed swiftly and that a sufficient priority is placed on Programme.
Project structures, controls and culture not generated quickly enough. Programme and project level resources not appointed quickly enough.	Existing management structures and culture inhibit progress and encourage procrastination and lack of focus on delivery. Loss of momentum.	Programme Board makes key appointments quickly and suspends functional line management for the scope & duration of the Programme.	Programme Board to ensure that outstanding key decisions are addressed swiftly and that a sufficient priority is placed on Programme.
R&D hosting organisations are destabilised or excessively distracted from the day-to-day 'business as usual' by the activities of the IS Programme.	Dis-benefits are generated or achieving benefits is delayed.	The Benefits Forum will be actively involved in transition planning to ensure effective change management and seamless integration of the new IS capabilities delivered by the Programme.	Consult with the Benefits Forum and other stakeholder bodies to agree re-planning the transition to new ways of working.

The risks will be defined more fully in a risk log that will form part of the Programme management activities.

4 Resource Requirements

The IS Programme is adopting a strategic approach to the development of IS to support the NHS research and development. The Programme Board will keep under review the business case for the benefits identified within the initial scope of the Programme.

Subject to resources and regular review of priorities, the Programme will respond to new requirements as they emerge, as NIHR develops, and as analysis within and outside the IS Programme is completed. Consequently, the funding requirement for the IS Programme cannot be fully determined at this stage.

Indicative funding has been identified for the baseline NIHR IS programme by DH for the period to 31 March 2010; this funding is managed via UKCRN. In addition, the UKCRN CC has allocations for the provision of its own core information systems and services. The baseline NIHR IS funding that has been identified so far is based on early Department of Health estimates and not on informed 'bottom-up' estimates based on programme and project plans. The programme director is currently engaged in a detailed resource requirements analysis for the combined UKCRN/NIHR IS Programme. This will be completed in June 2007 and will cover the period to 31 March 2010 with clear identification of expected on-going costs associated with the support and maintenance of the information systems that will be delivered. This review may result in a need to revise currently allocated funding.

Furthermore, defining the IS requirements for some elements to support the aims of Best Research for Best Health and the NIHR have yet to be completed. Therefore, the Programme Board will make recommendations on how to resource any initiative that lies outside of the currently identified scope.

The current DH funding for the IS Programme is £4.2m to the 31st March 2010. UKCRN IS funding is in addition to this.

5 October 2007