Upcoming changes to NIHR Performance Measurements

January 2016 - A joint communication from the NIHR Central Commissioning Facility (CCF), NIHR Clinical Research Network (CRN) and Health Research Authority (HRA).

Overview

Over the last few years, the NIHR has introduced a number of performance measurements to focus the priorities of organisations delivering research in NHS. In 2010, the CRN 'High Level Objectives' were introduced and have since generated a robust source of study level information, providing a national view of research delivery and a unique resource for encouraging new research. In 2011, the Government's Plan for Growth announced the transformation of incentives at local level for efficiency in initiation and delivery of research with the introduction of the Performance in Initiating and Delivering Clinical Research (PID) exercise. The Performance in Initiating (70 day benchmark) and the Performance in Delivering (recruiting commercial trials to time and target) exercises were introduced from 2012 in a number of providers of NHS services with NIHR contracts, and expanded to the majority of providers of NHS services through the Local CRN contracts in 2014. This measurement provided a comprehensive understanding of set-up times at a site level, both for portfolio and non-portfolio studies.

Demonstrating delivery

The results show that the measurements have reinforced NHS organisations' commitment to delivering research. The latest CRN Performance Report 14/15 shows a continued increase in the numbers of studies and participants to clinical research on the NIHR CRN portfolio. The most recent PID data from the CCF shows a continued trend in reducing the time taken to recruit the first patient in a site (http://www.nihr.ac.uk/policy-and-standards/performance-ininitiating-and-delivering-clinical-research---trend-analysis.htm). The data provides a compelling case for the NHS in attracting new studies from around the world.

Maintaining focus

While the trend demonstrates a positive trajectory, NHS organisations and independent provider research sites, such as General Practices, care homes and community pharmacies, are encouraged to maintain efforts on the key elements of timely study set-up and predictable delivery. This continued focus will strengthen the position of the NHS in the global clinical trials marketplace and improve the production of research evidence for the NHS.

Process refinement

The implementation of HRA Approval further supports these key elements. In doing so, a number of data points within the study and site start-up and recruitment measurements are changing with the introduction of the combined IRAS form and the alignment of local activities to the HRA Approval process. This provides an opportunity to review and refine the start-up activities to better support consistent and efficient study delivery. A collaborative project involving CCF, CRN and HRA has developed a single 'minimum data set' that reflects the new HRA Approval processes and will simplify the reporting system. The revised data set proposed will provide greater flexibility for understanding performance at all points across the study lifecycle at both a site and study level, without competing or duplicating metrics.

Further information

Details regarding the revised data points, definitions and collection processes will be shared through the CCF, CRN and HRA communication channels in due course. In the meantime, NHS organisations are advised to contact their Local CRN representatives to keep up to date with the latest information.