

<b>Agenda Item</b>	<b>P1-097-18</b>	<b>Date: 25<sup>th</sup> July 2018</b>						
<b>Subject /title</b>	CCC Research Strategy 2018-2021							
<b>Author</b>	Maria Maguire, Research Manager							
<b>Responsible Director</b>	Sheena Khanduri, Medical Director							
<b>Executive summary and key issues for discussion</b>								
<p>This paper describes the research strategy for CCC for 2018-2021 outlining the key objectives to delivering research excellence for patient benefit as core business for the Trust. This will improve access for patients, diversify our portfolio and increase clinical involvement with milestones and outcomes for delivery. It is recognised that this is a working document and will be developed alongside our broader Trust strategy and partners/stakeholders within the region as we develop a longer term strategy that will see CCC as leaders in the cancer research agenda with strong representation at all levels for the benefit of patient care.</p>								
<b>Strategic context and background papers (if relevant)</b>								
<b>Recommended Resolution</b>								
To receive the paper and approve the strategy								
<b>Risk and assurance</b>								
<b>Resource Implications</b>								
N/A								
<b>Key communication points (internal and external)</b>								
<b>Freedom of Information Status</b>								
<p>FOI exemptions must be applied to specific information within documents, rather than documents as a whole. Only if the redaction renders the rest of the document non-sensical should the document itself be redacted.</p> <p><b>Application Exemptions:</b></p> <ul style="list-style-type: none"> <li>• <b>Prejudice to effective conduct of public affairs</b></li> <li>• <b>Personal Information</b></li> <li>• <b>Info provided in confidence</b></li> <li>• <b>Commercial interests</b></li> <li>• <b>Info intended for future publication</b></li> </ul>	<p>Please tick the appropriate box below:</p> <table border="1"> <tr> <td><input checked="checked" type="checkbox"/></td> <td><b>A. This document is for full publication</b></td> </tr> <tr> <td><input type="checkbox"/></td> <td><b>B. This document includes FOI exempt information</b></td> </tr> <tr> <td><input type="checkbox"/></td> <td><b>C. This whole document is exempt under FOI</b></td> </tr> </table> <p><b>IMPORTANT:</b></p> <p>If you have chosen B above, highlight the information that is to be redacted within the document, for subsequent removal.</p> <p>Confirm to the Trust Secretary, which applicable exemption(s) apply to the whole document or highlighted sections.</p>		<input checked="checked" type="checkbox"/>	<b>A. This document is for full publication</b>	<input type="checkbox"/>	<b>B. This document includes FOI exempt information</b>	<input type="checkbox"/>	<b>C. This whole document is exempt under FOI</b>
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<b>Equality &amp; Diversity impact assessment</b>								

Are there concerns that the policy/service could have an adverse impact because of:	Yes	No
Age		<b>x</b>
Disability		<b>x</b>
Gender		<b>x</b>
Ethnicity		<b>x</b>
Sexual Orientation		<b>x</b>
Religion / Belief		<b>x</b>
Pregnancy and maternity		<b>x</b>
Civil Partnership and Marriage		<b>x</b>

If YES to one or more of the above please add further detail and identify if full impact assessment is required.

**Next steps**

None

**Appendices**

Appendix A GMC Handbook for Boards and Governing Bodies

### Strategic Objectives supported by this report

Investment in Liverpool		Maintaining organisational and financial sustainability	
Continuous improvement and innovation in Chemotherapy services		Continuous improvement and innovation in Radiotherapy and Imaging services	
Maintaining the Trust's position as the lead provider of non surgical oncology services for Merseyside and Cheshire	<b>x</b>	Development of Research capacity, capability and performance	<b>x</b>
Improving Quality	<b>x</b>	Enabling strategies	<b>x</b>

### Link to the NHS Constitution

<b>Patients</b>		<b>Staff</b>	
Access to health care	<b>x</b>	<i>Working environment</i> Flexible opportunities, healthy and safe working conditions, staff support	<b>x</b>
Nationally approved treatments, drugs and programmes		Fair pay and contracts, clear roles and responsibilities	
Respect, consent and confidentiality	<b>x</b>	<i>Being heard:</i> Involved and represented	
Informed choice		Able to raise grievances Able to make suggestions	
Involvement in your healthcare and in the NHS		Personal and professional development	<b>x</b>
Complaint and redress		Treated fairly and equally	





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Excellence in care, research and innovation

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# CCC Research Strategy 2018-2021



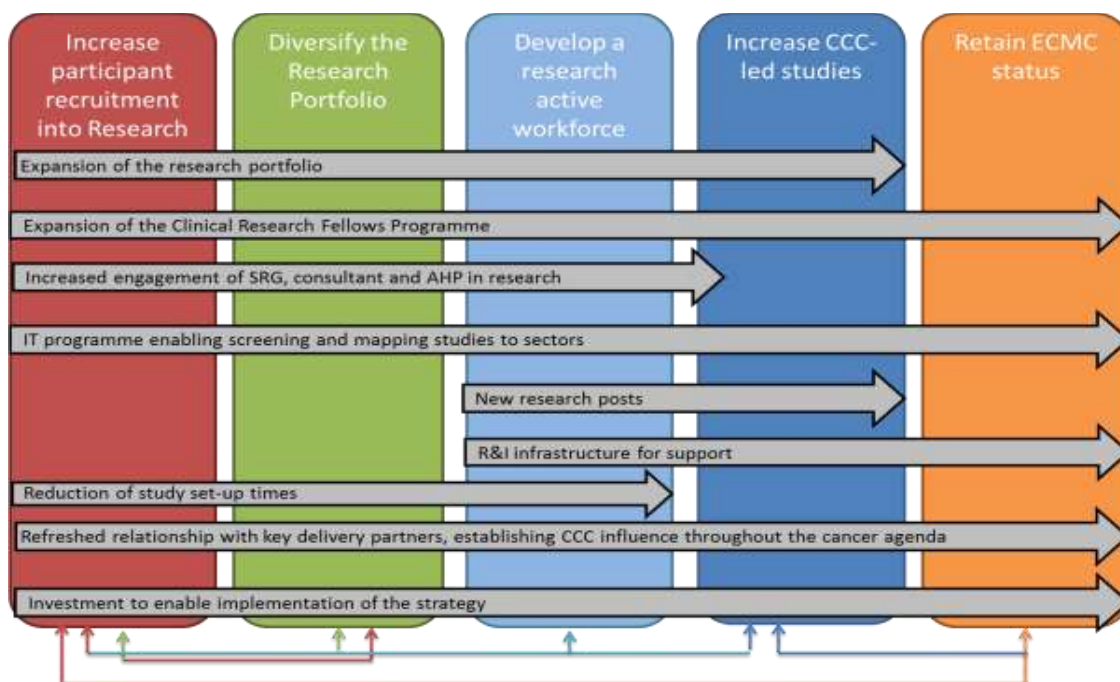
*'My research team are my warriors against this disease'*  
Bernadette, CCC patient and participant in a clinical trial

## Executive Summary

CCC has a once in a generation opportunity to transform how cancer care is delivered across Merseyside and Cheshire. Research is a key driver for the expansion into Liverpool and research excellence for patient benefit is core business for the Trust. There have been notable achievements through the last research strategy, the implementation of robust governance underpinning research, the development and upskilling of staff to support complex commercial and early phase trials, the joining of haemato-oncology and gaining ECMC status for Liverpool. However, participant recruitment into research studies has remained essentially static. This provides us with significant opportunity to not only retain strength in depth in the interventional study portfolio but also to analyse and diversify our research portfolio in order to increase patient access to research. This strategy covering the next critical three years reflects the Trust investment into research and articulates a refreshed focus.

The new strategy puts patient experience at the heart of our plans where we can learn from each patient contact and flex to increase our qualitative research agenda to mirror our strengths in compassionate care. We have ambitious, deliverable aims in increasing participant recruitment significantly within the next two years through a diversified portfolio and intelligent study participation using strengths in translational, biobanking and observational research. In becoming a true research hospital we will develop a research active workforce through investment and engagement, underpinned by smart working and IT systems to facilitate patient screening for research studies. We will increase the number of clinician led studies for which CCC act as Sponsor to gain national recognition as opinion leaders and we will assure that we are best placed to retain ECMC status. There will be a full re-engagement with our research partners and a move to put CCC as leaders in the cancer agenda with strong representation at all levels.

Through Trust investment, critical enablers and infrastructure as shown in our plan, we will deliver a revitalised strategy for research excellence for our patient benefit and move CCC's reputation for research forward.



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## **Introduction:**

CCC is committed to providing the best cancer care to our patients that we serve. A strong research portfolio is essential to deliver this aim. Research studies offer patients a treatment choice, an opportunity to gain access to novel agents and elevate staff delivery and abilities. The Research Strategy provides the direction of travel and is underpinned by robust governance arrangements. The Research and Innovation Department at CCC, is made up of the Research Governance and Management Team, Delivery Team and the Clinical Academic Unit (appendix 1). The Governance and Delivery Teams provide support to the Clinical Academic Unit and research active NHS Consultants.

## **Achievements over the lifecycle of the previous strategy**

The last research strategy had four key themes:

1. Continue to support the development of academic oncology
2. Increase clinical trial participation
3. Continue to develop robust research governance arrangements
4. Build research capability and capacity that enables a seamless transition to a relocated site

The R&I Directorate supported the CCC gain of CRUK Experimental Cancer Medicine Centre (ECMC) status in partnership with the University of Liverpool as part of the academic oncology strand. There has been an increase in the number of studies for which CCC act as Sponsor with grant funding secured over the last 5 years of *circa* £7.5 million in studies for patients with unmet needs in difficult disease areas. The CCC Biobank has grown the targeted sample collections and is releasing quality samples to support bench to bedside research.

The research governance arrangements have been developed and enhanced with quality systems in place as evidenced by two successful MHRA inspections (as Sponsor and research site) and two licensing inspections by the HTA for the biobank. There has been significant development of the CCC Edge platform. CCC is one of the first Trusts to use this system for reporting on trial recruitment. The system has been further developed within R&I to be used as the main research governance platform with bespoke reporting on all aspects of study management enabling streamlining of processes and CCC is aligned with the creators of the Edge platform as an exemplar Trust. The Health Research Authority in an invited meeting reviewed the systems and found them in line with processes and vision.

We have increased commercially funded studies year on year (from 15% of our portfolio in 2010-11 to 65% to date) through close working and quality delivery. We have also increased expertise and capability in early phase trial delivery which accounts for over 40% of our trials portfolio to date (from 6% in 2010-11). The R&I Team have been at the forefront of supporting key strategic studies, upskilling staff to undertake First in Human, Phase I, Immunotherapy and First in Class Drug studies.

However, the level participation into clinical trials has remained essentially static and therefore there is a significant opportunity and responsibility for CCC to increase patient awareness and access to research at CCC.

## **Refreshed research focus**

We recognise that we have achieved success in supporting academic research, building infrastructure and expertise; however, our next focus will be on 'making every patient's experience



count.’ We aim to build an inclusive and dynamic research portfolio focused on patient benefit and excellence, by reviewing the trial portfolio, capitalising on research strengths and expanding the research agenda to serve and address areas of need. This will be a living document to be reviewed at regular intervals enabling oversight and alignment with the research landscape and versatility in delivery. This strategy focuses on the next three years and will augment with the academic vision.

## Drivers for the new research strategy

The next three to five years present a unique and exciting opportunity for CCC to provide clear leadership, refresh the direction of travel for research and set an agenda that serves patient need across Merseyside and Cheshire whilst building on the key USPs and strength in depth at CCC. The expansion into Liverpool, a key driver of which is research, will enable closer working relationships with key partners; University of Liverpool, Liverpool John Moores University, Liverpool Health Partners, Liverpool Cancer Trials Unit and partner Trusts. There is a critical need to raise the profile of CCC research nationally and fulfil the requirements of a true research hospital. Therefore an ambitious plan for CCC research will be described; the following initiatives form the basis of the clinical strategy for research:

1. Increase patient access to research.
2. Develop a diverse portfolio of research studies based on patient need, strength in depth and opportunity.
3. Develop CCC-led studies and the academic portfolio.
4. Retain ECMC status; this will be the first time Liverpool has ever retained an external grant status.

We have carefully crafted a series of goals and milestones where we can enable the delivery of this strategy as shown in figure 1.

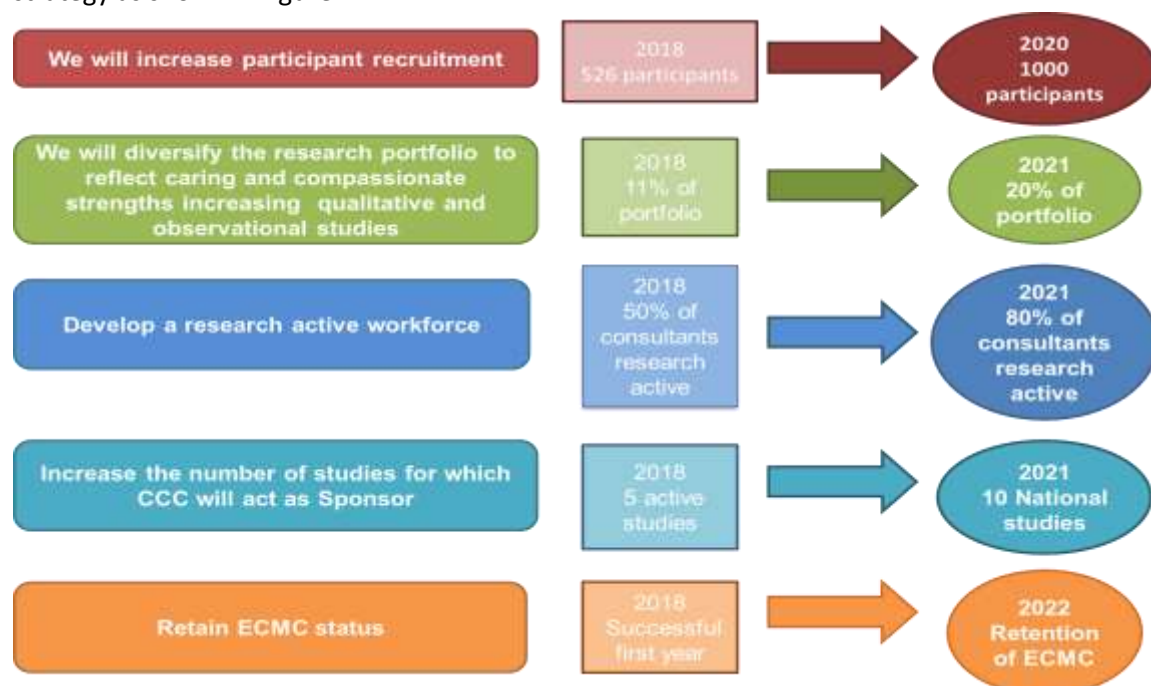


Figure 1: Outcomes and milestones for the research strategy



**Rhona clinical trials participant: *'I am part of research to save or extend my life and to help other people in the future'.***

**1. We will increase participant recruitment from 526 to 1000 participants by 2020**

This is an ambitious target to set in doubling recruitment within two years; however we feel that by smarter working, critical selection of studies and promoting our CCC research biobank this is achievable. By selecting 1000 participants as an initial target, we can use this as both a driver to go further and build on achievement and also to demonstrate the art of the possible when engaging the wider CCC workforce.

The implementation of the previous strategy with the need to focus on the development of the academic unit, early phase study capability and a changing landscape has resulted in an essentially static recruitment profile with the emphasis heavily on to interventional studies until 2017/18. Figure 2 shows this recruitment attributable to CCC. Following an interim report on the portfolio, there was an emphasis toward the end of 2017-18 for a focus on recruitment to observational studies which could fit with our portfolio and an enhanced recruitment to CCC biobanking. Therefore through targeted study identification a clear recruitment spike was achieved resulting in the highest recruitment attributable to CCC, shown in figure 3. We have projected recruitment over



Figure 2. Recruitment figures attributable to CCC 2013/14-2017/18

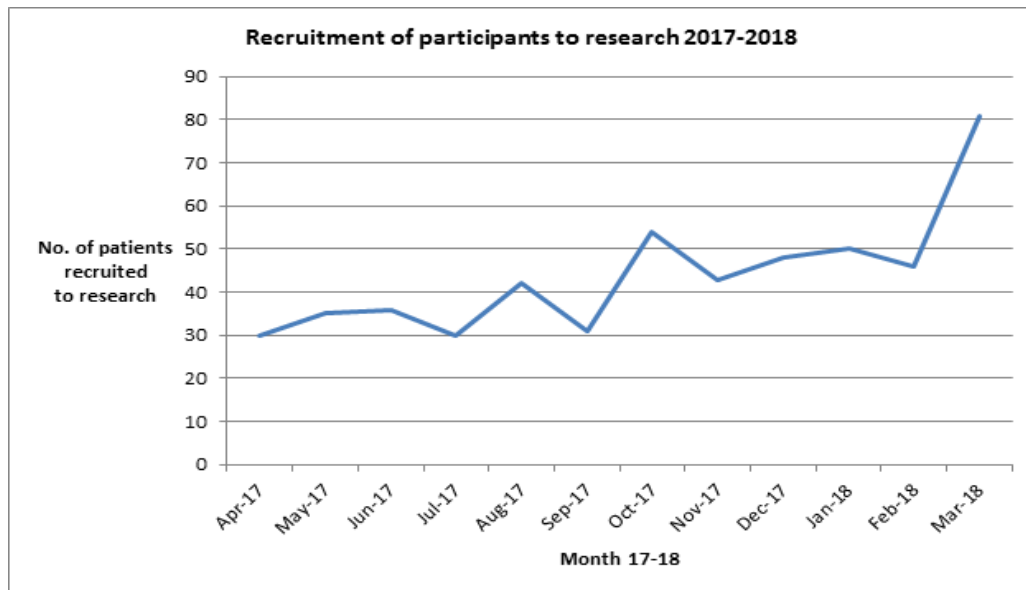


Figure 3. Recruitment spike 2017-18 following targeted observational and biobanking studies

the next two years to show the recruitment trajectory. Figure 4 shows the potential mix of recruitment between interventional and observational studies (for the purpose of this graphic, observational includes translational/ biobanking studies and interventional is defined as clinical trials).

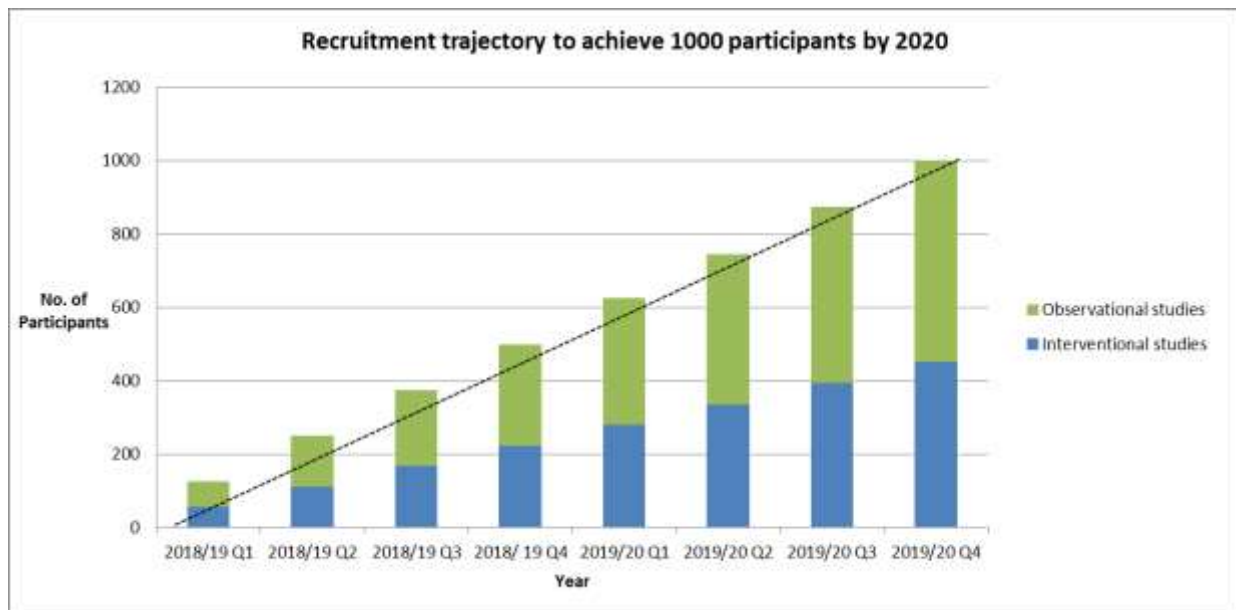


Figure 4. Projected recruitment trajectory to achieve 1000 participants into CCC research studies

As a tertiary cancer centre, CCC has a strong obligation through research to offer patients access to novel therapies and agents, this core strength in the delivery of such complex interventions, particularly in immunotherapies and in agents in early phase trials to support the ECMC will remain critical to the new strategy. However, though this recruitment has essentially been consistent in previous years; there will be some increase, as we invest in this delivery and through the joining of Haemato-oncology. Increased recruitment will come additively through biobanking and

observational and translational studies. CCC has long been a key 'goto' site for Pharma including BMS, AZ, Roche and Novartis, the successful delivery of novel immunotherapy studies pre-NICE approval for drugs such as Nivolumab has enabled CCC to take part in the next generation 'Real World' studies which are observational following up patients from trials. The establishment and embedding of the CCC Biobank gives both our patients and their families' opportunities to take part in research. Further collaboration with the University of Liverpool brings translational studies which provide clear opportunities to increase research participation. A refreshed programme of horizon scanning by the R&I Teams also enables such studies to be accessed. Therefore by a change in strategic thinking and flexibility in identifying and targeting such meaningful studies real gains may be made to provide a virtuous platform for increased recruitment to act as an engagement enabler for our other strategic outcomes.

## **2. We will diversify the research portfolio so that by 2021, 20% of research studies will be observational or qualitative to reflect and enhance our strength in holistic and compassionate care**

The current portfolio will be critically appraised to determine areas of strength, horizon scan for areas of growth and flex strength in biobanking and translational studies. The portfolio also needs to be responsive to our patient need and cancer incidence in the region to assure that research is effective in supporting our population. CCC has USPs through the joining of the Haemato-oncology service, Upper GI and HPB specialties which are lead themes for the ECMC and in Head and Neck and Lung serving a large patient need. The delivery of immunotherapy is core strength with expertise not only in research but also in standard clinical care which will be expanded, fostered and developed. Thus by building on this a diverse and dynamic portfolio will be created that supports academic research, delivers the studies and research that forms the ECMC and expands to include observational studies and the qualitative agenda. The portfolio will be mapped to the sectors and sector hubs to enable patient access to research no matter their location.

### **We will learn from every patient's experience**

We will integrate our existing strengths with an expanded research presence in qualitative research, which is entirely complimentary to our existing research intent, ethos, and workforce model.

Themes could include:

- Long-term treatment observational studies.
- Non-medical led practice studies, including nursing and AHP.
- Screening and prevention studies.
- Patient research for patients using an Experience Based Co-Design (EBCD) method.

This strand will include integrating a research conversation in to every holistic needs assessment at CCC as part of the R&I delivery of the Future Clinical Model.

This will be supplemented by a Patient Panel for Research, including trained lay advocacy for the design and delivery of trials and Biobank. We believe that by taking these novel steps we will be able to truly diversify the portfolio, build on our existing strengths and put our patients at the heart of our research focus.

### **3. We will develop a research active workforce; by 2021 we will have 80% of our consultants enabling recruitment into research**

In order to achieve this aim we have three key objectives for delivery:

- ***Embedding of research through CCC as core business***

This is key to the delivery of the milestones; research facing staff in service departments must be empowered to prioritise their research activity for delivery, thus enabling the reduction of study set-up times. There will be a concerted programme of engagement with clinicians and health professionals throughout the Trust. A roadmap for re-engagement of the SRGs (figure 5) with a full focus on research enablement is in place and will be implemented through the next year and through the cycle of the strategy. Currently thirty three out of sixty five consultants are research active and recruit to studies attributable to CCC. The new engagement strategy in tandem with better IT support and workforce development and investment as described below will enable and empower research focus and recruitment. The staff may be research active in signposting to studies, referrals, recruitment, acting as Co-Investigators, Principal and Chief Investigators, therefore central to this aim is active engagement.

The website is under re-design to enable both patient and consultant access to the most up to date information. There will be a new programme of engagement and education across the Trust for staff; work will be undertaken to enable healthcare professionals across the Trust take part or lead in research studies according to role and research needs.

***CCC Research Partnerships Manager: ‘We are all part of the UK patient population, and it is good to know that Research is providing everyone with answers to important questions, that will provide us all with better treatments, more informed clinical decisions, and better patient pathways today and in the future’.***

- ***Workforce development and investment***

There is a serious commitment to investment in this research strategy current plans are shown in appendix 2.

- Two new posts within R&I have been created to underpin the diversification of the portfolio, assist in enablement of more efficient patient screening *to identify potential participants across the Trust as the patient makes contact* and to support the observational/ qualitative agenda.
- The Clinical Fellows Programme is a key strategic enabler where the next generation of researchers will be home-grown within CCC. This will secure a commitment to the future research at CCC, give a development programme and support not only the ECMC agenda but also lead to an increase in CCC-led studies.

- The R&I delivery teams will be flexed to assure that the Research Practitioner Teams map to the research needs across the sectors.
- There will be review of Consultant job-plans and an investment in Consultant PA time expansion for research for NHS consultants the contribution and potential for research advancement and support is well recognised.
- CCC to continue to take part in the NIHR Research Scholars programme, where we already have one consultant participant (Dr Ayman Madi) and year on year further applications will be made. This programme is not limited to clinicians and we will be encouraging other health professionals to apply to assure research is embedded across the hospital and recognition of all talents to lead research studies.
- CCC to invest in partnership with the University of Liverpool in a Chair to enhance research leadership.
- CCC has developed Consultant Team Working and Research focused clinics to be expanded and to support the clinical Team delivery.
- Such clinics and team working enhance the development of expertise, upskilling of staff and access to enhanced learning both of novel therapies and development of holistic skills.

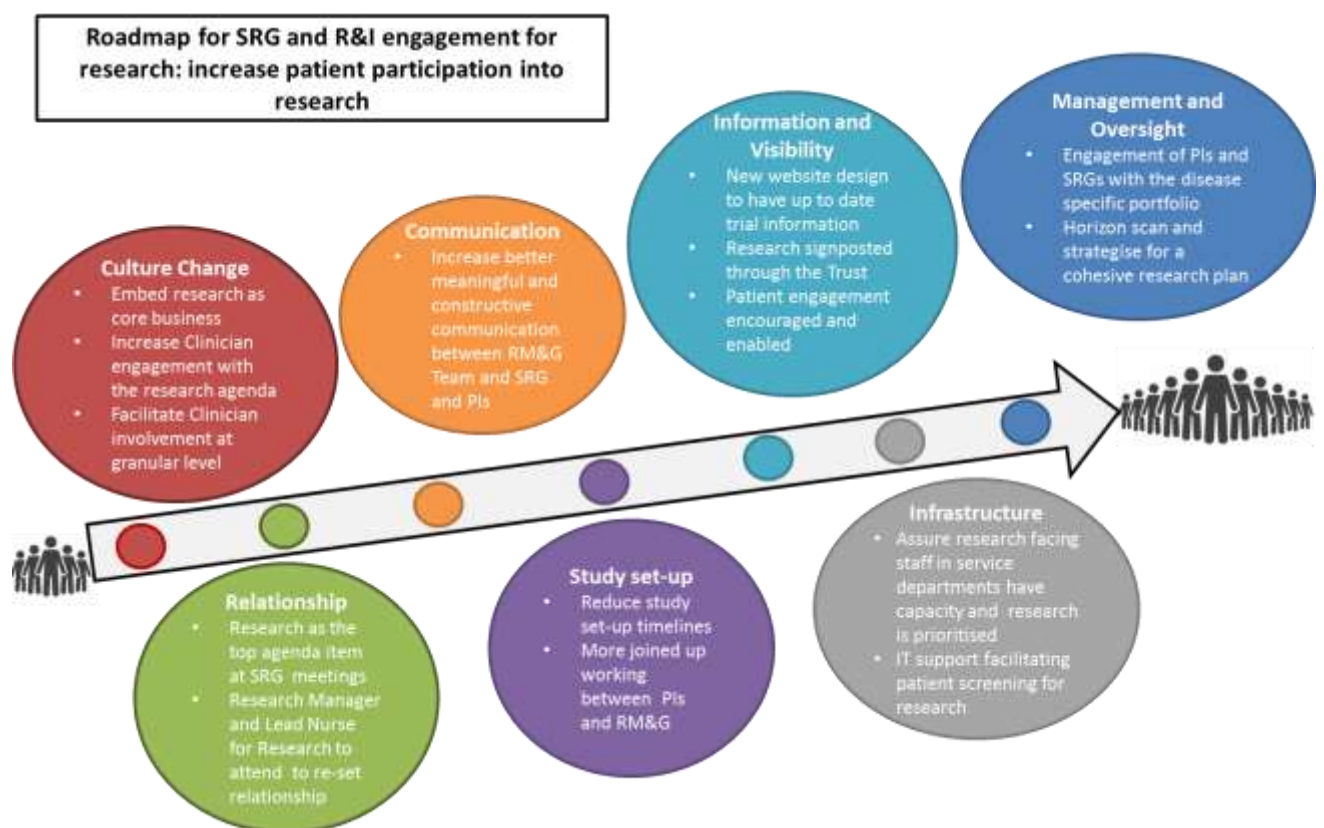


Figure 5: Roadmap for engagement with the SRGs and wider teams for research delivery

- **IT and infrastructure**

The aims of the strategy need to be underpinned with investment in infrastructure to provide a foundation. IT systems will be developed for ease of patient screening to assess a patient's eligibility

to take part in research with the new ethos that *'all patients are potential participants'*. Smart and paper-free projects will feed into the development of the IT systems; this is essential for cross-sector working and referrals for patient intelligence and access. The CCC Edge system for governance is under constant review and expansion and facilitates robust governance for research. The Research Management and Governance Team within R&I has been expanded to support the Quality and Governance agenda providing expertise in order for CCC to act as Sponsor for research and to support the ECMC vision and deliverables. The close strategic relationships with Pharma will be nurtured and expanded, enabling access to novel agents, funding for investigator-led studies and in commercially funded studies for which CCC is a participating site generating investment income.

#### **4. We will increase the number of studies for which CCC acts as Sponsor**

CCC has invested heavily in the development of academic oncology and in the ambition for a USP to be recognised as a 'research hospital'. This means the enablement and encouragement of our CCC-led research studies for patient benefit. The R&I department has developed strong governance (evidenced by two successful MHRA inspections as site and Sponsor) to support this ambition and has expanded and invested in a workforce line to support not only governance but the Chief Investigators in the study development, navigation through ethics and competent authority approvals, study inception, management and oversight. We recognise and foster the strong partnership with the University of Liverpool Cancer Trials Unit as our preferred provider of study management and links with developing and supporting our clinician led research. The support of CCC-led studies brings benefit:

- Raises the profile of CCC as a national opinion leader through Clinicians acting as Chief Investigator for novel, impactful research studies.
- Provides a clear research development pathway for our 'home-grown' clinicians and research and clinical fellows.
- Makes CCC an exciting and attractive Trust to bring in talented research focused clinicians.
- Brings forward academic partnerships (with the University of Liverpool and beyond) and collaborations for a total bench to bedside approach for research benefit.
- Feeds into the ambition and aims of the ECMC and NIHR High Level Objectives.

#### **5. We will retain ECMC status in 2022 (application bid 2021)**



**CCC Biobank Administrator: *'Research to me is an ongoing path of progress without knowing what you will discover, and then suddenly boom!!! – Something clicks and you along with team develop a new idea. Research is to do a job that you feel so passionate about, that you would even do it for free. To me it is a job where I wake up every morning and feel like the luckiest person in the world' !!!***



The Experimental Cancer Medicine Centre (ECMC) Network is a collaboration of world-leading scientists and clinicians who bring together expertise and techniques to drive the discovery, development and testing of new anti-cancer treatments and biomarkers in early phase studies and trials. The ECMC Network is funded by Cancer Research UK and the health departments of England, Wales, Scotland and Northern Ireland with the overall aim to deliver real benefits for patients. CCC is the NHS Trust delivering this for Merseyside and Cheshire, ECMC status brings not only national recognition for strength in our two major themes of HPB (Pancreatic Cancer) and Haemato-oncology research but the opportunity to access novel therapies, drug development calls, trials and partnerships otherwise unavailable to us and our research leads and clinicians.

It is critical that we retain ECMC status through the renewal call as this:

- Embeds CCC as a national player in the early phase research landscape.
- Enhances CCC's reputation to lead and grow novel laboratory studies in collaboration with academic institutions (bench) to translate into research studies for patient benefit (bedside).
- Transition of new drugs/combinations from early to late phase clinical trials with integrated biomarker development, Stratified approaches to clinical trial access and design, effective use of existing drugs.
- Research infrastructure and support in biobanking and translational modelling.
- Opportunity for the development of research and clinical fellows in the delivery of ECMC studies through research clinics and to grow research and grant application skills. This cross-cuts our themes to grow in house leadership of studies and development of an invigorated research workforce.
- ECMC studies enable upskilling of staff in the delivery of complex studies and the opportunity to learn and understand the action of novel agents becoming the treatments of tomorrow.
- Assures CCC strength in:
  - Haemato-oncology and Hepatobiliary cancer is supported and enhanced
  - Biobanking and translational research
  - Novel immunotherapies
  - Links with Pharma for trial and grant support in Investigator led studies
- The ECMC has published a consultation documents on patient and public engagement. This will enable CCC to use this as a roadmap for further enablement of our patient access to research and to encourage further involvement in the CCC research agenda as described in the workstream to diversify the portfolio. There is a rich research seam to mine in determining holistic care needs for our patients and their experience in the intensity of early phase trials to assure that full, mindful care is given.



**Richard CCC patient and participant in a clinical trial:**  
***'Research is important to me because I have an extremely rare cancer for which there is no cure. Without research I would have no treatment options'.***



## Partnerships

The refreshed strategy for CCC will not take place in isolation, although CCC is master of its destiny; it is recognised that to deliver true patient benefit, CCC will as the Networked Cancer Centre work with key partners as shown in figure 6. CCC staff are involved in fostering relationships across all partner organisations with a map shown in appendix 3. This strategy itself has undergone an engagement with CCC staff as shown in appendix 4 as we fully recognise the importance of partnership at all levels.

- **LHP**

CCC will take an active role in the refreshment of the Liverpool Health Partners influencing the cancer agenda. There has already been substantial re-engagement at all levels from CCC with the LHP as we have confirmed our commitment to this partnership. Increased involvement has been at a granular level where we have supported through sharing of our expertise in the Edge system, a key enabler for partnership, delivery. The CCC Research Manager has taken a lead in the re-engagement, providing review and input into the terms of reference to the partnership review for the Joint Research Service (JRS), in the implementation of the JRS across the partners which is a critical outcome measure for the LHP and in developing the Edge platform for the LHP. This service will enhance CCC as part of the LHP as an attractive centre for research for big Pharma. CCC will assure that the implementation of the joint service adds value to CCC research with particular focus on systems leadership. Additionally we have played a full role in the LHP CEO selection fora assuring CCC has an input into the leadership and shape of the new LHP.

- **Universities and the cancer trials unit**

The University of Liverpool is currently undergoing a substantial academic review which in turn will inform on the Academic Unit within CCC; the Director of Academic Research is dialed into this enabling CCC to adjust this strand of the research strategy in alignment with the University. CCC will assure that academic rigour is maintained and that CCC is a leader in setting the cancer agenda and in fostering collaborations for critical translational research and ECMC delivery. We also value the renowned strength of Liverpool John Moores University (LJMU) in health innovation and sensor technologies and qualitative research. We will work to foster new research relationships with LJMU. CCC by working with both local universities has an opportunity to flex its strength across the different academic institutions, fostering new research grant applications and novel research for patient benefit.

As CCC will develop CCC Clinician-led studies and support the ECMC agenda, we recognise the contribution of the Liverpool Cancer Trials Unit as our preferred provider of trial management. We will continue this partnership and develop this further to enhance our research ambitions and delivery. We will carefully monitor the merge of this unit with the other clinical trials unit within the University of Liverpool; CCC will maintain relationships and work to assure that the merger enhances delivery for CCC.

- **NWC CRN**

The North West Coast Clinical Research Network (NWC CRN) also has reviewed its cancer strategy to increase performance, although investment from the NWC CRN has been reduced year on year, CCC recognises the need to support the strategic aims and delivery of

the NIHR portfolio and will therefore increase participant recruitment into studies as in aim 1.

- Cancer Alliance and Health Sciences Networks**

As CCC looks wider, we have roles to play in the Cancer Alliance strategies and the Allied Health Sciences Network which has the objective of have an agenda to drive adoption and spread of innovation across all areas of healthcare provision and population health, each AHSN also has the remit to bring together the resources and assets in their geography to create a synergy between researchers in universities, industry and entrepreneurs. CCC has the opportunity through a diverse research portfolio and focus on innovation to re-engage this relationship. We will also refresh our relationship with the Collaboration for Leadership and Applied Health Research and Care (CLHARC) as it moves to the end of its lifecycle and CCC will look to work within the new ARC as the bid develops. In the past we have supported posts and collaborations; this provides a clear opportunity for novel qualitative research and addressing of health inequalities across the North West Footprint.

- Pharma**

We will continue to grow our status as 'goto' site for Pharma increasing our commercially funded trials portfolio not only to gain access to novel agents and studies but also as a core funding stream for investment. We will also flex this relationship to support our clinician-led study grants. Figure 6 brings together our lead themes and the cross-cutting enablers that link our strategic plan. We are confident by refreshing and expanding our relationships with key partners, this will enable CCC to move into wider influence and recognition across the region and nationally for patient benefit.

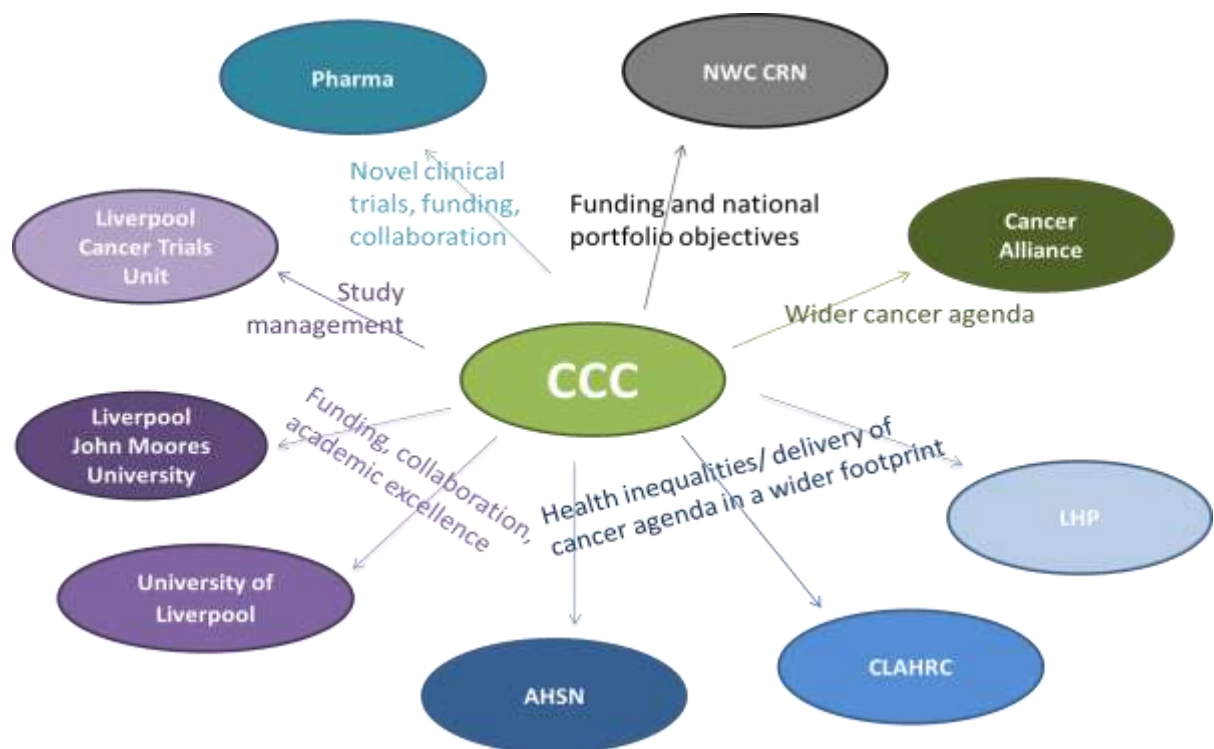


Figure 6: Key CCC strategic partnerships

## Summary

The refreshed strategy aims to build on our areas of strength whilst exploiting opportunity for development of new avenues of research. The academic strengths and the success in the delivery of interventional studies will continue to be strongly supported; the retention of the ECMC is a crucial outcome for CCC and Liverpool. We will diversify the portfolio to provide access for our patients to a spectrum of studies which flexes our reputation for compassionate care into research in tandem with well-structured observational studies as an added developing strength. There will be an investment into workforce with engagement, structure and time for consultants to rejuvenate in taking part in research. As we move to 'one Trust four sectors' we will invest in IT and personnel to underpin this ambition to develop smarter ways of screening patients as potential participants and enabling our consultants and allied health professionals to deliver the research agenda. There will be a full re-engagement with our research partners and a move to put CCC as leaders in the cancer agenda with strong representation at all levels. Therefore by implementing the investment, enablers and infrastructure as shown in figure 7, we will deliver a revitalised research strategy for our patient benefit and move CCC's reputation for research forward.

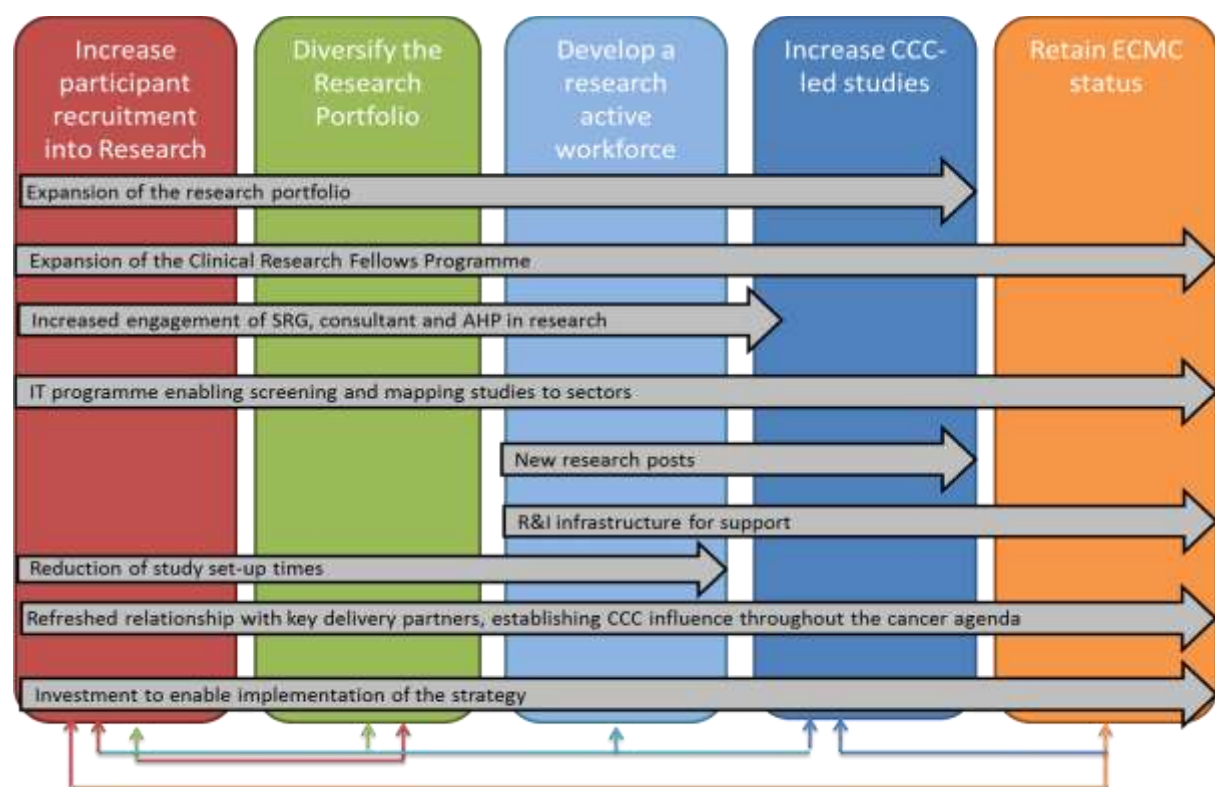


Figure 7: Aims and enablers for the research strategy

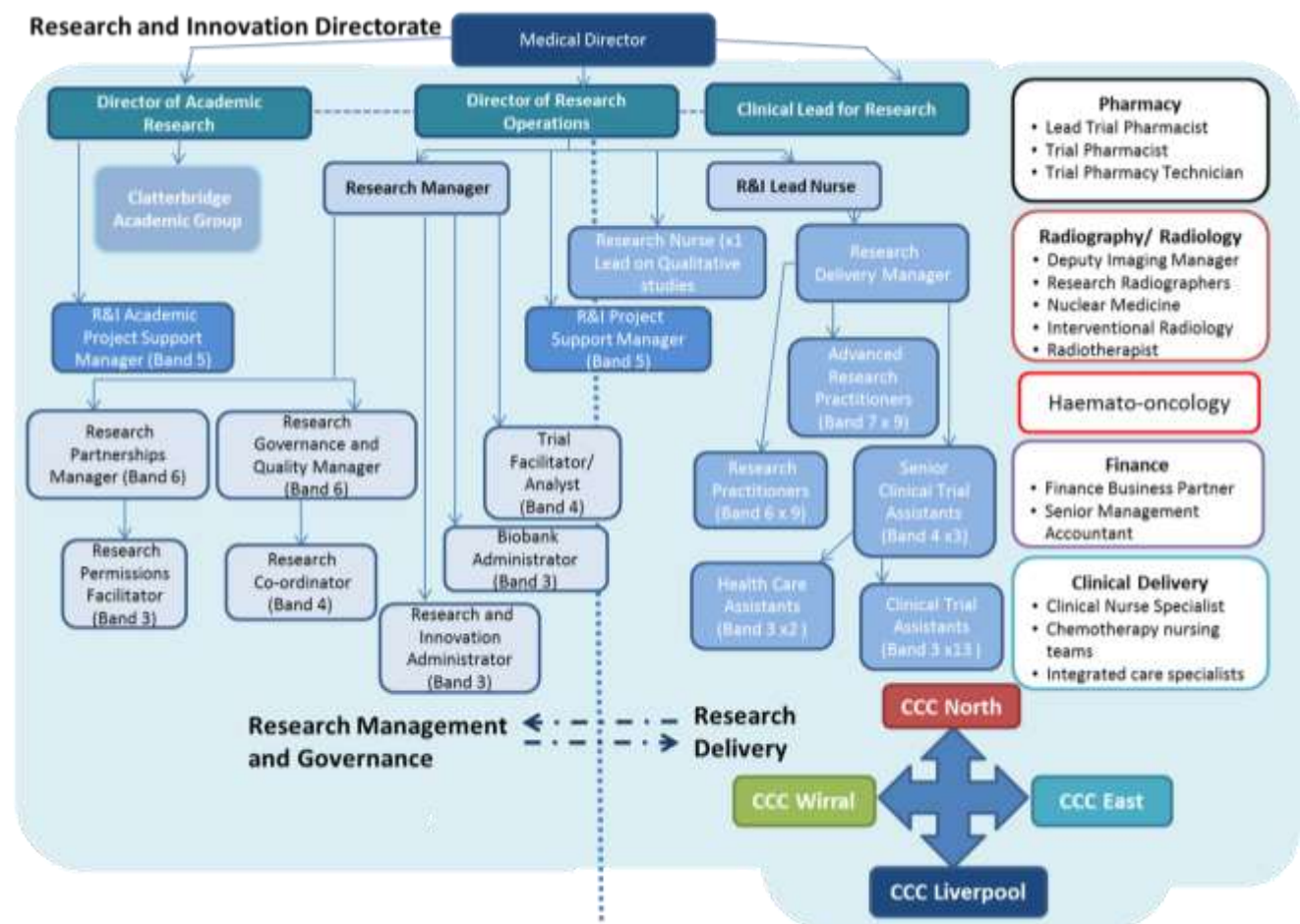
## Vision and Impact

In delivering this strategy, we will be established as a research active hospital with opinion leaders in areas of research strength. Our patients will have access to the most novel agents, technologies and interventions, empowered to take part in a broad portfolio of research studies. We will have an engaged compassionate, forward focused staff cultivating and maintaining a reputation for whole person care in a Centre of research excellence. CCC will be identified nationally as a transformative, research focused Trust.

**Tony CCC patient and participant in a clinical trial:**  
*'I am living proof that research is saving my life. I was given 6 months to 2 years to live. I am now 3 years and 8 months later, still going strong'.*



## Appendix 1: R&I Organogram and research focused staff



The research staff will be flexed to cover CCC research across the one Trust, four sector model. The agreement of the clinical model enables final planning to support all research from early phase trials to the qualitative agenda, assuring patient access to research wherever they are.

## Appendix 2: Outlined investment plans

Area	Initial Investment Type	18/19 £'000	19/20 £'000	20/21 £'000
Clinical Fellows	3 years - Non Recurring	75	142	211
Chair Proposal	5 years - Non Recurring	15	72	74
2x Band 4 posts	3 years - Non Recurring	41	58	61
Other Support Departments to include Pharmacy, Finance and Radiation services through increased activity and mitigation of NWC CRN funding	Recurring		100	100
Additional PAs - 2 per Directorate	Recurring		80	80
IT - System Project	Non Recurrent	150	100	
	<b>Total Investment</b>	<b>281</b>	<b>552</b>	<b>526</b>
	<b>Slippage</b>	<b>319</b>	<b>48</b>	<b>74</b>



### Appendix 3: CCC Research Team Partnership Leads





#### **Appendix 4: Key stakeholder involvement**

There has been reference and key stakeholder engagement in the creation of the strategy as we fully recognise that delivery requires commitment and support across CCC and the skills of the Teams. The following is a list of the stakeholders for the strategy:

- University of Liverpool
- North West Cancer Research
- SRGs
- Clinical Academic Group
- MAC
- Clinician's views of research at CCC
- Patient survey of research