NHS-HE Forum Manchester 24 November 2010





The Manchester Academic Health Science Centre

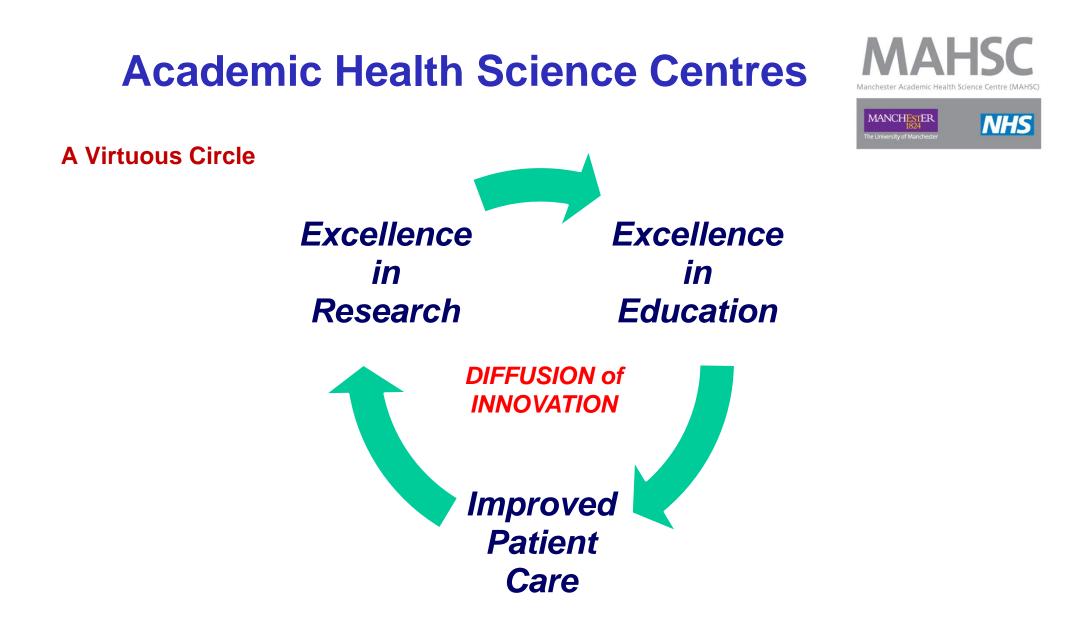
Chris Griffiths

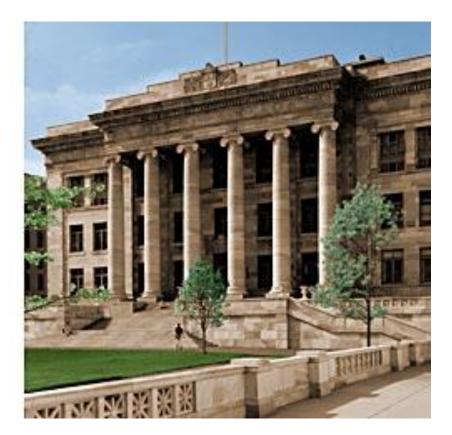
MAHSC is a partnership between The University of Manchester, Central Manchester University Hospitals NHS Foundation Trust, Manchester Mental Health and Social Care Trust, NHS Salford (Salford Primary Care Trust), Salford Royal NHS Foundation Trust, The Christie NHS Foundation Trust, University Hospital of South Manchester NHS Foundation Trust Company Registration Number 7083059





- Academic Health Science Centres
- Why Manchester?
- Vision
- Structure
- Goals
- Achievements













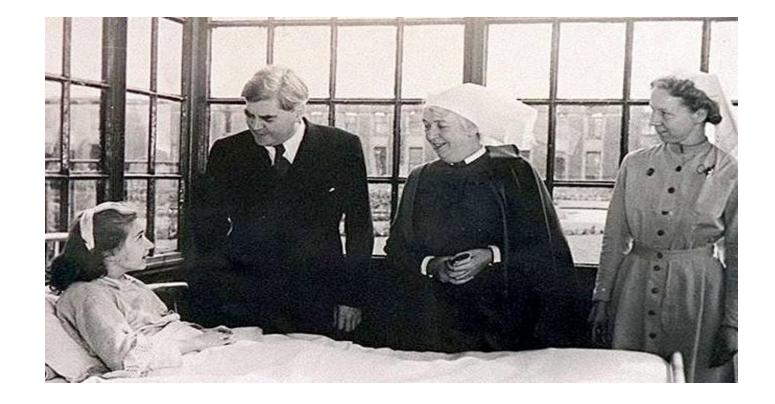
The Birth of the NHS





Aneurin Bevan 5 July 1948

Park Hospital, Trafford, Manchester



Manchester Why Now?



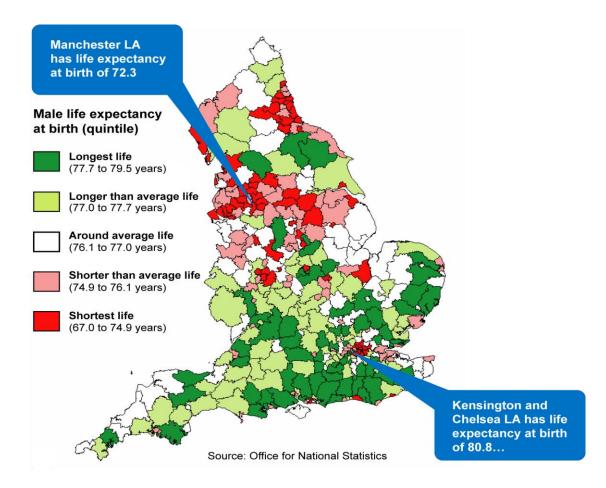


Health inequalities

i							
Adults' health and lifestyle	13 Adults who smoke *	n/a	33.8	24.1	40.9	• •	13.7
	14 Binge drinking adults	n/a	28.4	18.0	28.9	• •	9.7
	15 Healthy eating adults	n/a	21.5	26.3	14.2	• •	45.8
	16 Physically active adults	n/a	10.9	11.6	7.5		17.2
<	17 Obese adults	n/a	25.8	23.6	31.2		11.9
	18 Under-15s 'not in good health'	1153	15.2	11.6	20.8	• •	6.4
6	19 Incapacity benefits for mental illness *	17370	56.2	27.5	68.6		8.4
Disease and poor heal	20 Hospital stays related to alcohol *	2336	576.3	260.3	741.1	• •	87.6
	21 Drug misuse	6236	20.4	9.9	34.9		1.3
	22 People diagnosed with diabetes	18071	4.1	3.7	5.9		2.1
	23 Sexually transmitted infections						
	24 New cases of tuberculosis	154	34.0	15.0	102.0	•	0.0
	25 Hip fracture in over-65s	307	463.6	479.8	699.8	♦ 0	219.0
Life expectancy and causes of death	26 Life expectancy - male *	n/a	73.0	77.3	73.0		83.1
	27 Life expectancy - female *	n/a	78.6	81.6	78.3		87.2
	28 Infant deaths	46	6.7	5.0	10.3	• •	0.0
	29 Deaths from smoking	811	353.8	225.4	355.0	• •	139.4
	30 Early deaths: heart disease & stroke *	492	142.4	84.2	142.4	• •	39.7
	31 Early deaths: cancer *	565	165.8	117.1	167.8		76.7
	32 Road injuries and deaths *	265	59.5	56.3	194.6	C	20.8







Manchester

Examples of our health impact





- Changed NHS practice in suicide prevention
- Changed policy in payment for general medical services
- Demonstrated that dental screening did not improve health
- Changed NHS practice with respect to prevention of falls in the elderly
- Influenced NICE guidelines in management of psychiatric illness, dentistry, stroke, psoriasis and rheumatic disease



Translational Medicine in Manchester – why?



Excellent examples of research publications to 'the world'

UK Leading Clinical Trials capability but how many lead to local change in clinical practice before anyone else?

Excellent examples of patient care & innovation adoption from 'the world'

Clinical need unmet

Clinical need fulfilled

The dichotomy: we have some excellent research and patient care but some of the worst health indicators in England

Translational Medicine in Manchester – why?



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Clinical need unmet

Clinical need fulfilled

The dichotomy: we have some excellent research and patient care but some of the worst health indicators in England Not enough translation of Manchester research findings to improve Manchester/NW health and healthcare

The Major Challenges



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Avoiding duplication of effort and parochial decision-making

Making research infrastructure world-class and pan-Manchester

Reducing delay in the delivery of innovation

Bringing quality patient experience and outcome to the fore





Why Now?

- 2001: Wellcome Trust Clinical Research Facility
- 2004: Greater Manchester Research Alliance
- 2005: Manchester Cancer Research Centre
- 2006: NHS partners External Review of Research Strengths
- 2007: Greater Manchester Health Research project began
- 2008: MAHSC created; Company Limited by Guarantee

Darzi July 2008

NHS

East of England East Midlands London North East North West South East Coast South Central South West West Midlands Yorkshire and the Humber

High Quality Care For All

NHS Next Stage Review Final Report







Academic Health Science Centres M

Governance arrangements vary in U.S.

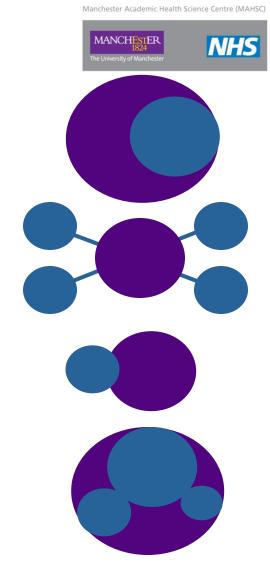
• Fully integrated; e.g. Johns Hopkins, Duke

Cluster models; e.g. Stanford, Harvard

• Looser alliances; e.g. Yale

Elsewhere

• Full integration is more usual; Singapore



5 Designated AHSCs March 2009

Cambridge University Health Partners University of Cambridge Cambridge University Hospitals NHS FT Cambridgeshire and Peterborough NHS FT Papworth Hospital NHS FT

Imperial College Academic Health Sciences Centre Imperial College London Imperial College Healthcare NHS Trust

UCL Partners University College London University College London Hospital NHS FT Great Ormond Street Hospital for Children NHS Trust Moorfields Eye Hospital NHS FT Royal Free Hampstead NHS Trust King's Health Partners King's College London Guy's and Thomas's FT King's College Hospital FT Maudsley FT

MAHSC





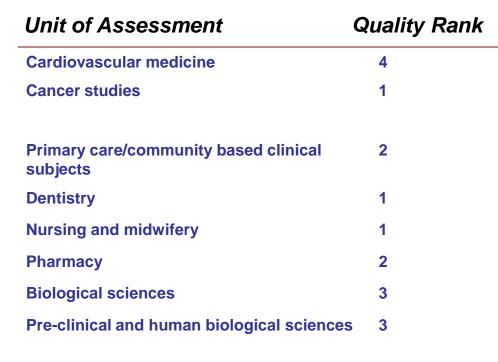
Manchester Academic Health Science Centre 7 Equal Partners

Diverse



- University of Manchester
- The Christie NHS FT
- Central Manchester University Hospitals NHS FT
- Mental Health & Social Care Trust
- Salford Royal NHS FT
- Salford Primary Care Trust
- University Hospital of South Manchester NHS FT
- £2.3 billion annual spend
- 35,000 people employed

The University RAE 2008, Strengths in Health-related Subjects





hester Academic Health Science

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The Trusts

Manchester Academic Health Science Centre (MAHSC)



Central: Biomedical Research Centre largest pregnancy research group in Europe National Technology Adoption Centre cardiovascular medicine





Christie: largest phase I/II cancer clinical trials unit; co-located PET, MR imaging; biomarkers; close industry partners

Mental Health: leads multi-site cohort studies in early adult psychosis; six NIHR programme grants; National Drug Evidence Centre; first memory clinic

The Trusts

Manchester Academic Health Science Centre (MA



Salford PCT: award-winning research active Primary Care Trust; lead for ten other Manchester PCTs; emphasis on implementation into clinical practice





Salford: expertise in linking electronic records to health outcomes; quality assessment; hub for stroke network; shares R&D division with PCT

South: Translational Research Facility in respiratory medicine; heart/lung transplantation; hosts CLRN; national aspergillosis centre

Our Partners





Strategic Health Authority

NICE

Industry •U K Trade and Investment •Astrazeneca •GlaxoSmithKline •ICON

AHSCs
•University of Pittsburgh Medical Centre
•Nijmegen Medical centre







The Critical Path of Research



Figure 1: The critical path of research from basic science to healthcare delivery identifying the important gaps in translation. From *A Review of UK Health Research Funding*, *Sir David Cooksey*, *December 2006*.

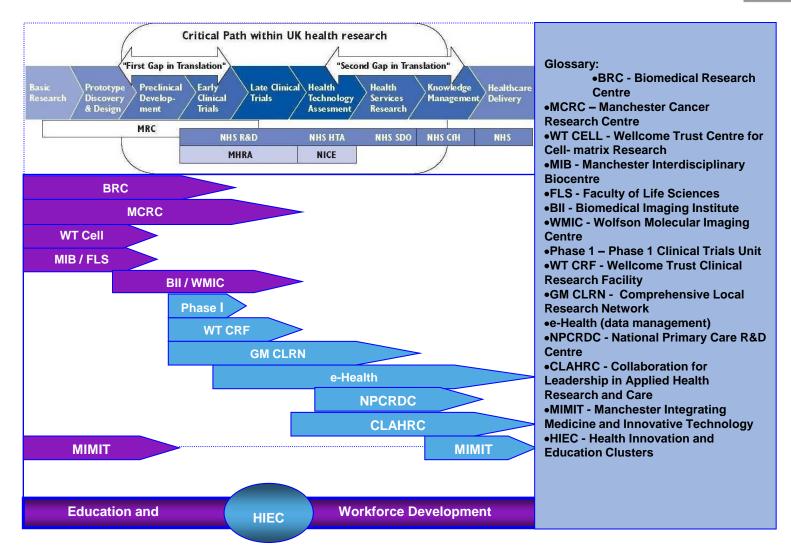


- Biomedical Research Centre
- Manchester Cancer Research Centre
- Wellcome Trust Clinical Research Facility
- Biomedical Imaging Institute
- Phase I Trials Facilities
- NW E-Health
- GM Comprehensive Local Research Network
- Manchester Integrating Medicine with Innovative Technology
- Collaboration for Leadership in Applied Health Research and Care

The Critical Path of Research







Goals



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- 2. **Disseminate** innovation in technology and care nationally and internationally.
- 3. Educate effectively in all aspects of healthcare, healthcare management, and biomedicine in support of workforce development.
- 4. Lead on quality of care and public engagement.
- 5. Partner more widely and more beneficially with the commercial sector.

6. **Contribute** significantly to innovation, enterprise and economic development in the city region and the North West of England.

7. Attract the best national and international health researchers and healthcare workers.

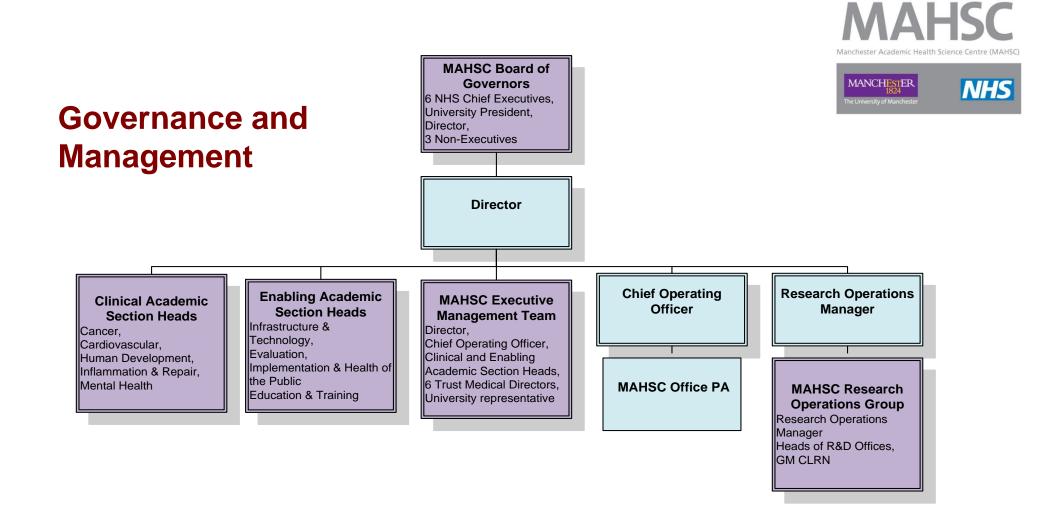
Building Blocks



Governance, Organisation and Management: a federated approach with harmonisation of processes based on best practice

Clinical Themes: leading capabilities combined with strong communication and cross working across the translational medicine spectrum

Enabling Infrastructure: pan-MAHSC resource and alignment with national programmes supported by fully trained staff



Blue represents staff part or whole funded by MAHSC Company Limited by Guarantee

Structured for Delivery



		Infrastructure and technology	Evaluation	Implementation and Health of the Public	Education and training	
Clinical Academic Sections	Cancer Cardiovascular Human Development Inflammation and Repair Mental Health	DNA banks Tissue banks -omics Imaging e-Health	CLRN interface Biostatistics Bio-health informatics and epidemiology	Health economics Health services Primary care Quality assessment Health inequalities	Postgraduate Integrated academic training programme	

Enabling Academic Sections



NEED FULFILLED

Strategic plan: from our five year vision MAHSC

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E-health

 e-Lab infrastructure gives access to anonymised linked records from all aspects of NHS care for a population of 2.5 m

Clinical trials

• An integrated facility across the partners accessible via single portal enabling studies from biomarker and first-in-man to population level interventions

Implementation

 Implementation embedded in the organisation through knowledge transfer agents

e-Enablement Assets



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 Current assets include : Salford and Wirral e-Lab Pilot Studies: e-care records linked across primary and secondary care in Salford (220K) and Wirral (330K)

Obesity Epidemiology and Public Health Informatics/Obesity e-Lab: focus on research & new insights into obesity epidemic and public health measures to tackle it

An MRC-funded project (IMPACT) fusing informatics, epidemiology and economics - scenario planning for health policy, initially cardiovascular

e-Health+: research cluster/network to enable a more citizen-led approach to improving health



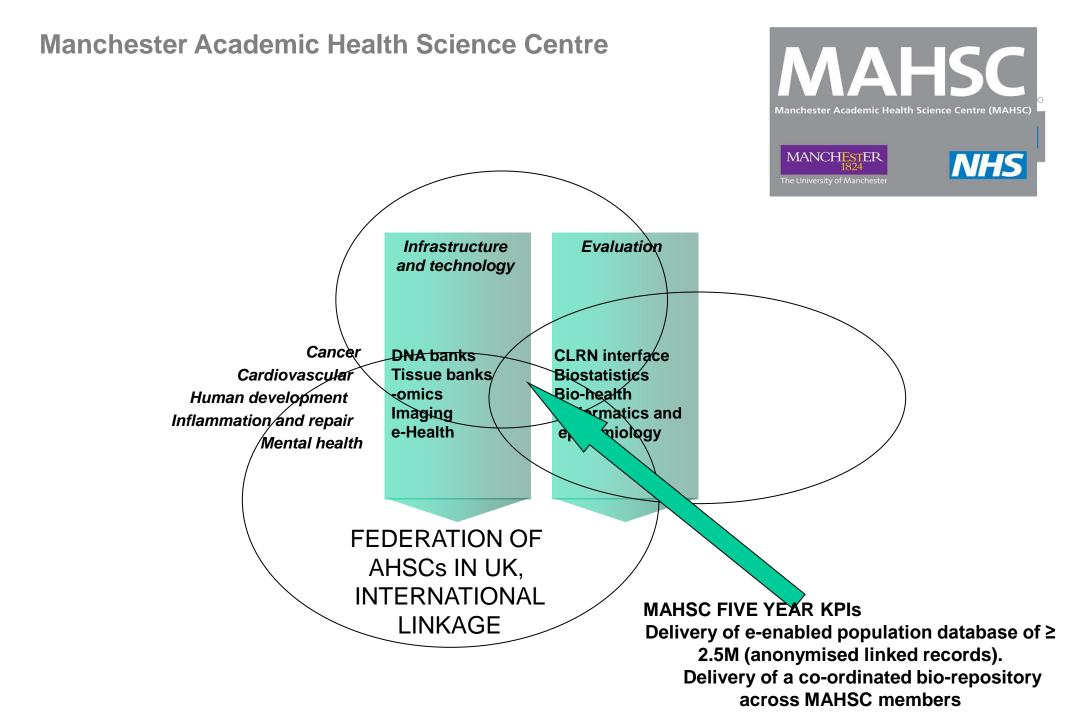
Cancer Cardiovascular Human development Inflammation and repair Mental health Infrastructure and technology

DNA banks Tissue banks -omics Imaging e-Health CLRN interface Biostatistics Bio-health informatics and

epidemiology

Evaluation

FEDERATION OF AHSCs IN UK, INTERNATIONAL LINKAGE



Clinical Trials Approach





Project	Current Status	Required	MAHSC KPIS
Clinical Trials Coordination Unit (CTCU)	Proposal to the Board 22 July	Funding for enhancing resource to support an NIHR registered Christie CTCU to deliver Manchester wide service	28, 2, 3
Joint Research Office	Review for the Board 22 July	Process harmonisation, SOPs (ongoing), Co-location of University/NHS staff. A dedicated Clinical Trials Office working loosely with GMCLRN with the Research Office. Development of Detailed plan to be worked up by MAHSC R&D Directors Group.	25, 26, 15,16
Coordinated Clinical Trials Research Facilities	Working Group structure identified	Working Group initiation awaits outcome of strategic review on Wellcome Trust Clinical Research Facility by Steering Committee under new Chair, Dr John Stageman.	2.3, 15, 16
E-enabled trials feasibility and recruitment systems	GMCLRN working on FARSITE programme with NWeH	Pilot development utilising 5 GP practices in Salford underway. Approval for whole of Salford in place (~60 practices). Stage 2 will recruit further 29 Greater Manchester practices already aligned with GMCLRN [by end of stage 2 this will encompass total population of ~500 000]	3, 29



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Research and Innovation Culture

- 1% clinicians leading research
- 10% clinicians engaged in research
- 100% clinicians supporting research



- More than 10 demonstrable health benefits
- More than 100 new senior national/international health researchers
- More than 1,000 research-enabled healthcare workers trained
- Trebled commercial partnerships in drugs and devices
- Health-conscious population of "citizen scientists" created

What have we done so far?





Pilot Projects

Citizen Scientists

Encourage, inspire and support the public, especially the local community, to engage in research activity in order to improve recruitment to trials in the first instance.

Development a cadre of citizen scientists who support the needs of clinical research.

MIMIT Industrial Liaison Programme (SMEs)

Access to industry partners to deliver developed technology in response to unmet need (highlighted by MIMIT partnered clinicians) Source of potential partners for collaborative funding bids Development of marketable technologies that deliver patient benefit

Co-Morbidity Biobanking

Work on data links, public engagement and access will address central aims of MAHSC communications and harmonisation.

Building of a regional hub and spoke structure to develop resource to test hypotheses in comorbidity eg diabetes and cardiovascular disease Demonstrator for European project

What have we done so far ?





Harmonisation

Research costing

Will enable accurate, consistent and transparent costing and inclusion of all party costs

Contracts

Will eliminate time wasted through negotiation of non-standard contracts

Reporting and Management Information

Will enable identification of cross-institutional projects and provide data against research KPIs.

Establishing R&D Office Key Performance Indicators (KPIs) To ensure all R&D teams work to same standard and timescales

MAHSC Research Office Approval for virtual co-located R&D Office





Successes

- MRC Clinical Research Training Fellowship Programme in Clinical Pharmacology (with Liverpool)
- OLS Clusters: Inflammatory Respiratory Disease & Joint and Related Inflammation
- Proton Beam Therapy Centre with UCL Partners and Birmingham
- Modernising Scientific Careers Early Adopter site







Equity and excellence:

Liberating the NHS

