

REVIEW OF UK HEALTH RESEARCH

Response of the Health Strategy Group, bringing together the Chartered Institute of Library and Information Professionals (CILIP)¹ and Society of College, National and University Libraries (SCONUL)²

Q1 What are the strengths and weaknesses of the MRC and NHS R&D programmes at present? How do each of these support the research and training needs of the NHS, social care, industry and academia? Does more need to be done?

There is a need for a co-ordinated national information infrastructure to support the UK health research process and this requires effective coordination across all the major players including government, higher education, the NHS and a number of research and health orientated voluntary organisations and professional societies.

At Government level, this co-ordination needs to embrace what are currently the three key policy players, viz. (in England)

- the Department for Education, for HE;
- the Department of Trade & Industry, through the Office of Science & Innovation, for the MRC and the other research councils (including the BBSRC and ESRC, both of which have an interest in health-related research); and
- the Department of Health, for the NHS.

Different government arrangements apply elsewhere in the UK, but similar divisions of responsibility exist.

The research charities are another key component within a national information infrastructure for health research in the UK. The Wellcome Trust in particular is a major UK player both in terms of general funding of

¹ CILIP (Chartered Institute for Library and Information Professionals) is the leading UK professional body for librarians, information specialists and knowledge managers, with up to 23,000 members working in all sectors, including the health service, business and industry, further and higher education, schools, central government, the voluntary sector, national and public libraries. – <http://www.cilip.org.uk/default.cilip>

² SCONUL (the Society of College, National and University Libraries) represents the directors of the library and information services in all the universities of the United Kingdom and Ireland, and in most other institutions of higher education in the UK. SCONUL also represents the directors of the national libraries of the UK and Ireland. – see <http://www.sconul.ac.uk/>

biomedical research (£450 million p.a.) and in its support for the dissemination of health research information.

On a separate point it is unclear whether social care will come within the remit of the new UK Research Fund – it is scarcely mentioned in the documentation. We note that it is included in “Best Research for Best Health, a New National Health Research Strategy”, although again receiving only limited mention. At the organisational and practitioner level health and social care form a closely linked set of services and it is important that this linkage receives explicit articulation in the coverage of the new UK Health Research body

Q2 What do you believe are the key scientific and organisational challenges facing health research, and underpinning training, in the UK over the next decade? How might the UK Government best help address those challenges? What do you believe should be the Government’s objectives for health research, and why?

We identify three key challenges that must be addressed in setting up the new research fund:

Bridging the HE/NHS divide – The goal must be to provide a library & information service that supports health research and caters fully for needs of all stakeholders across institutional boundaries as usage of such resources by researchers and practitioners rarely reflects institutional entities. In order to do this the key issues of licensing, copyright and funding streams need to be sorted out – and issues such as the lack of connectivity between the Janet (HE) and Connecting for Health (NHS) ICT programmes, the separate purchasing of content by HE and the NHS at increased cost to the public purse and the lack of mechanisms for joined-up discussion and consultation, need to be addressed. At present, it often happens that someone holding joint appointments in higher education and in the NHS will find that they can consult certain electronic materials (e-journals for example) in their university, but not in the hospital where they also work, or only in the hospital and not in the university. Legal and technical reasons give rise to such situations, but they are wasteful and frustrating, and the proposed combination of MRC and NHS resources offers an opportunity for high-level strategy to eliminate such inefficiencies.

Such a strategy will also be important in helping to combat the negative connotations of the perceived divide between HE and primary research, and the NHS and applied research. The opportunity to provide a seamless information service providing the information required to identify new research areas, undertake research, and disseminate research outcomes effectively at a place and time convenient for the individual user must be seized. Although the HE/NHS axis will underpin health research the information resources of voluntary sector health organisations and professional societies need to be incorporated into the whole and their researchers and staff given access to the HE/NHS information networks.

Raising the level of information literacy across all health audiences. We define information literacy as “knowing when and why you need information, where to find it, and how to evaluate, use and communicate it in an ethical manner”. This skill is required at all stages of the research process and includes the needs of those using research outcomes in their professional practice – they need to know how to search the health evidence base effectively. The 500 libraries in NHS (England) and similar libraries in the NHS services of the other Home Nations, HE libraries supporting health and social care studies and research, and library and information services in voluntary sector health and social care organisations and professional societies, all have an important role in teaching information literacy to health and social care staff at all levels. In the case of more complex enquiries, particularly those generated within a research context, expert information staff can mediate the required search.

Open Access – The Health Strategy Group supports the proposition that the results of publicly funded research, and other information generated during the research process, should be freely accessible. We are pleased to note the MRC Guidance on Open and Unrestricted Access to Published Research, and its related Statement on Data Sharing and Preservation as being a model of best practice. In this it has followed the precedent set by the Wellcome Trust. We would warmly commend a similar approach to any successor body.

Q6 How might better links be forged between ‘basic’, translational and applied researchers, working across the whole field of health research, from the laboratory bench to the front line of the NHS? How might better links be forged across disciplines, e.g. with engineers, physicists, and social scientists?

At heart this is a knowledge management issue and about putting in place the mechanisms that can facilitate and encourage engagement amongst these discrete research practitioner communities. At a local level it is about the librarian or knowledge manager making the connections between different segments of their user community. At a more global level it is about establishing resources such as a research in progress database or encouraging the setting up of communities of practice. The network of libraries across all the constituent parts of the health and social care sector can (and to some extent do) play an important role in providing a coherent framework in which to encourage such developments with JANET and the National Library of Health providing a powerful virtual networking infrastructure linking all parts of the health and social care sector (and beyond).

One important network within the information field should be acknowledged. The Research Information Network (www.rin.ac.uk/) has a UK-wide remit "to give the strategic leadership required to establish a national framework for research information provision, and to generate effective and sustainable arrangements for meeting the information needs of the professional research community". Its stakeholders include HE and the research councils (but so far not the DoH) and it has begun to develop links with a wide range of other

library and information bodies. Two of its consultative groups are of particular relevance: Life Sciences, Biology, & Medicine, which includes both medical researchers and a medical librarian (Pat Spoor) among its members; and Librarianship & Information Science. The Research Information Network would be in a good position to explore the cross-sectoral research information issues raised in the context of Q.6 & Q.8

Q7 How can the Government encourage translation, entrepreneurship and innovation in health research to improve public services in the UK?

As for Q6 but also bringing the practitioner and patient into the loop.

Q8 How can UK health research funding be most effectively used to provide the appropriate infrastructure for basic, translational and applied research, whether funded by the UK public sector or other sectors? How can UK health research funding be most effectively used to support the work of NICE, facilitate innovation and collaboration with industry, and address market failures in the application of healthcare?

It is our belief that information is an essential part of the support infrastructure for all research. It is important at every stage of the research process from identifying the research idea, undertaking the research itself and ensuring that the research outcomes are accessible to health practitioners, patients, carers, and entrepreneurs as well as the research community itself. It therefore is vital that the necessary library and information services to underpin the research activity are appropriately funded and costed into research programmes. The emergence of a new UK Health Research Fund provides an important opportunity to review the library and information resources required to optimise research outcomes and to address some of the barriers to effective funding and usage we identified in answering Question 2. Although there are a number of content rich library services of national and international importance to health and social care researchers, it must be emphasized that evidence-based healthcare is dependent for success on a research culture existing throughout the sector and that students and many practitioners will be engaged in more modest research activities and need to develop critical research appraisal skills within their work context. Therefore all NHS libraries as well as HE libraries need to support research, researchers and research consumers and in so doing will act as gateways to electronic information services and provide support in information literacy.

The National library for Health (provided within the overall Connecting for Health programme) stands at the front of the NHS library network in England providing a framework of standards and content and access to the National Electronic Library for Health that underpins evidence-based practice. This provision, and similar in the other Home Nations, needs sustained investment in order to support the effective creation and use of research within the NHS.

If you wish to follow up any of these points then please contact:

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