

**MEMORANDUM OF UNDERSTANDING FOR THE ESTABLISHMENT OF AN  
ACADEMIC HEALTH SCIENCE SYSTEM IN MANCHESTER**

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**'HEALTH INNOVATION MANCHESTER'**

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**13<sup>th</sup> JULY 2015**

## **Background - Greater Manchester Health and Social Care Devolution**

Signed in November 2014 the Greater Manchester Devolution Agreement represents a major transfer of powers and responsibilities from central Government to Greater Manchester. Health and social care is a key component of the Agreement and Greater Manchester is committed to developing a business plan for the integration of health and social care services.

As a consequence a Health and Social Care Memorandum of Understanding was signed by NHS England and Greater Manchester Combined Authority in February 2015. The underpinning principle of this is that 'all decisions about Greater Manchester are taken in Greater Manchester'.

Key objectives of the Agreement include:

- improving the health and wellbeing of all of the residents of Greater Manchester
- closing the health inequalities gap
- delivering effective integrated health and social care
- moving care closer to home where possible
- strengthening the focus on wellbeing, including greater focus on prevention and public health
- contributing to growth and to connect people to growth, and
- forging a partnership between the NHS, social care, Universities and science and knowledge industries for the benefit of the population

Since February, a considerable amount of work has been undertaken to create the financial sustainability plan for Greater Manchester and identify the early implementation priorities.

Nonetheless serious challenges lie ahead for Greater Manchester to ensure it delivers on the promise of Devolution including:

- poor health outcomes and health inequality, in particular cardiovascular cancer, diabetes, drug and alcohol misuse and high prevalence of obesity amongst both adults and children
- rising demand for services across both health and social care
- high levels of socio-economic deprivation
- a significant financial challenge amounting to a £1.2bn gap to close by 2020

Research and Innovation has a vital role to play in meeting these challenges and Greater Manchester already benefits from a strong history of research and innovation in health. This is reflected by having an accredited Academic Health Science Centre – the only one outside the South East – and a significant number of Biomedical Research Units and Clinical Research Facilities that are world class. Alongside discovery science we have a track record of developing new treatments and therapies through our industry base. Greater Manchester along with Cheshire East is an important life sciences cluster and an eco-system with significant growth potential. It is recognised as being in the top 3 UK clusters with almost 11,500 people working in pharmaceutical, biotechnology and med tech businesses and more in the wider eco system. Between 2010 and 2014 the number of life science businesses grew at almost twice the rate as in the UK as a whole. Independent research shows that specific aspects of the ecosystem give it a comparative advantage over competitor areas across Europe. Key attributes include a large and

diverse population, a critical mass of life science firms and skilled workers, six large teaching hospitals, a strong research-led university base, a rich history of innovation and a breadth of offer than spans R&D through to manufacturing.

Our capabilities across the development – manufacture – commercialisation pathway are a key strength and are supported by a good platform of enabling infrastructure such as that needed for clinical trials and health informatics, and the eco-system is ripe for further growth.

### **The Challenge**

Despite this significant scientific and research capability, and those of the UK as a whole, there remains a substantial delay in translating discovery into health and economic gain. In the UK, it takes 15-20 years for a new innovation to reach routine clinical practice. The NIHR and Research Councils alone spend around £1.7Bn per annum on biomedicine and health research, yet the successes of this research are often not directly linked to clinical delivery and procurement.

This problem reflects fragmentation along the horizontal discovery science-patient care pathway, and lack of vertical integration for service delivery and patient management through social care and public health into primary, secondary and tertiary care. Organisational barriers include differing funding/reimbursement mechanisms, differing regulatory issues and business models, and differing incentives, such that innovations are not taken up efficiently.

### **The Solution**

An Academic Health Science System tackles this problem by creating a 'Discovery-Care Continuum' in a health economy, to provide a smooth and integrated pathway from discovery science and innovation, through experimental medicine and clinical research, to reliable and consistent adoption and diffusion. A 'feedback loop' will

create a virtuous cycle so that the learning from each point on the pathway inform further refinement in research, innovation, and implementation. Success will drive both health and economic benefits across the region and beyond.

The system allows us to focus the collective expertise of all partners - our Universities, hospitals, CCGs, primary health care providers, industry, Public Health England and NHS England - on developing the best approaches to addressing the health needs of our Greater Manchester population.

The system will also transform how we work with industry. Applied to our existing and developing strengths we will make rapid progress. We have first class enabling infrastructure, and strength in these platforms is already attracting major industry interest. By building on our strengths and adopting a collaborative approach, we will send clear signals to industry, and build powerful partnerships with both major companies and SMEs.

To do this we will:

- a) bring together in a more seamless way the assets we already have
- b) identify where we need to do more to ensure the pathway is smooth and complete
- c) put in place plans to meet our priorities
- d) 'power-up' our capabilities to ensure reliable implementation
- e) Adopt methods which allow rapid identification of interventions with the greatest power to improve patient health, and the greatest ease of rapid and effective implementation across Greater Manchester

We recognise the scale of the challenge and of our ambition. We will learn from streamlined approaches elsewhere, but our opportunity is unique in three respects: it

is owned by all key players on the discovery-care continuum; the single shared focus of the partners will be the health of the GM population; and by partnering with industry we will drive economic growth as well as health improvement.

The signatories to this Memorandum of Understanding have come together to address the above challenges and along with other partners who have confirmed their support (see Appendix A) – wish to develop and implement this radical and transformational approach. Each party brings a distinct set of capabilities to the challenges described above. Together, the signatories and organisations in Appendix A are regarded as Partners in the AHSS.

Together, the Partners have agreed the vision, purpose and principles that will underpin the AHSS.

**The Vision**

*To transform the health of our population by driving research and innovation into daily practice*

**The Purpose (What we intend to do)**

*Driven by the health needs of our population and working in partnership we will mobilise a system wide approach to the discovery, development and delivery of innovation across Greater Manchester for the benefit of all*

### Principles & Values

- We are **audacious** in our thinking, **courageous** in our decision-making
- We **work collaboratively** and **act collectively** even when it is difficult
- When the research evidence is strong we **drive the reliable implementation** of innovation into practice and standardise implementation and adoption across Greater Manchester to improve the health of many rather than the few
- Working in partnership, across institutional boundaries as well as sectors, we discover, develop and deliver innovation that improves the **effectiveness** and **efficiency** of health and social care as well as ensuring it is **sustainable** in the long term
- We are **open-minded** about the solutions required and where they are sourced from
- We require **collaboration and partnerships** that draw in expertise from diverse sources – academia, industry, NHS within and outside Greater Manchester - and will pro-actively create, develop and support these
- We **actively seek new solutions** and look for novel ways to **accelerate their development** where possible
- We are **tenacious**; driving the **reliable implementation** of innovation into practice, despite the challenges
- We **champion and celebrate** research and innovation and the positive impact it has on health as well as promoting the opportunities it provides to those working within health and social care

## **Early Priorities**

Through a process of stakeholder engagement and design the Partners have identified a number of immediate priorities that will take the enabling infrastructure to the next level. These are:

- a) To establish key enabling platforms for Innovation:
  - a. To integrate and scale-up our health informatics infrastructure to cover the entire population of GM
  - b. To further enhance our personalised / stratified medicine capabilities to enable improved targeting of interventions to improve patient health
  - c. To develop our clinical trials capacity, capability and effectiveness to strengthen the links between innovation and routine clinical practice, and to provide a rapid way of moving innovations into delivering health improvement.
- b) To establish systems and approaches to identify and drive the reliable and systematic implementation of transformative innovation into routine clinical practice. This will involve collaboration across both commissioners and providers.
- c) To develop a collective partnership approach to maximise the value of industry engagement and inward investment.

Detailed planning for delivery of each of the above priorities will be completed and presented for governance approval before the end of 2015, and implementation will commence immediately thereafter.

By putting in place these core enabling platforms we will have laid robust foundations which can be applied over the short and longer term to our evolving priorities for improvement. We will also focus on continuing to strengthen our research capabilities, with the ambition to become a beacon for biomedical research and the effective



implementation of that research across our health and care system, with the driving purpose being to deliver tangible and substantial improvements to the lives of people in Greater Manchester.

## **Governance**

The parties have acknowledged that to achieve The Vision described above a proportionate level of governance will need to be put in place. This will include the establishment of:

- An Interim Steering Group which will be co-chaired by the Chair of BioNow and the co-Chair of the Greater Manchester Devolution Programme Board and comprising of senior leadership representation from key organisations including:
  - Manchester Academic Health Science Centre
  - Greater Manchester Academic Health Science Network
  - The University of Manchester
  - Greater Manchester Clinical Research Network
  - BioNoW, the NW regional industry association.
- An Executive Project Team, focussed on the execution and delivery of the early priorities (as described above) and longer term planning. The Partners will commit appropriate staff time and resources to deliver The Vision working with the full range of stakeholders and interests.

By 2Q 2016, the Executive Project Team and Interim Steering Group will:

- Develop the future governance arrangements for the AHSS
- Define, with wider stakeholders the processes through which they can contribute to the AHSS
- Oversee the delivery of the early priorities and a longer term programme

- Ensure alignment with the wider Devolution Governance programme

Equally important will be the engagement the AHSS has with current organisations in the system, indeed for the AHSS to be successful it will need to harness and coordinate a range of existing assets to better effect.

This work will be developed under the banner of 'Health Innovation Manchester'.

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**Signatories**

**Note:** This Memorandum of Understanding is not legally binding and does not create any formal partnership or agreement.



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Sir Howard Bernstein

Date 05/08/15

On behalf of Manchester Academic Health Science Centre

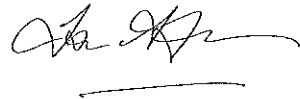


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Johnny Lundgren

Date 21/07/15

On behalf of the Greater Manchester Academic Health Science Network



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Professor Ian Greer

Date 21/07/15



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Mike Burrows

Date 21/07/15

*Mike Deegan*

*Roger Spencer*

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Sir Michael Deegan

Roger Spencer

Date 17/07/15

Date 20/07/15

On behalf of Greater Manchester Clinical Research Networks

*Richard Leese*

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Sir Richard Leese

Date 16/07/15

On behalf of Manchester Growth Company

*Rowena Burns*

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Rowena Burns

Date 23/07/15

On behalf of Manchester Science Partnerships

## **Appendix A: Letters of Support**