

# **OXFORD AHSN**

STAKEHOLDER RESEARCH

**LOCAL FINDINGS 2019** 

### **BACKGROUND**

During summer and autumn 2019, an independent survey was undertaken of England's 15 Academic Health Science Networks (AHSNs). This research was commissioned by NHS England and NHS Improvement, and the Office for Life Sciences (OLS) to explore and evaluate the views of AHSN stakeholders. The research will support commissioners in their reviews of AHSNs, and to provide independent feedback to AHSNs from their stakeholders that include NHS organisations, researchers, private companies, government organisations, patient and public groups and voluntary and community sector (VCS) organisations.

Savanta ComRes, an independent research organisation, undertook the evaluation. With input from AHSNs and commissioners, Savanta ComRes developed and ran a 10-minute online survey and subsequently conducted 30-minute telephone interviews with up to 10 stakeholders for each of the 15 AHSNs and for the National AHSN Network.

A national report collating the feedback and key themes from across all AHSNs, can be viewed on the AHSN Network website: <a href="www.ahsnnetwork.com/ahsn-network-">www.ahsnnetwork.com/ahsn-network-</a> stakeholder-research.

This report summarises stakeholder feedback and themes specifically related to Oxford AHSN.

# KFY TAKFAWAYS

- Stakeholders provide evidence of numerous successful Oxford AHSN programmes which have had a **significant impact and** going on to be **adopted nationally**. They put this down to the **dedicated**, **knowledgeable enthusiastic people** in the senior leadership team at Oxford AHSN.
- 2 Challenges with funding are mentioned and a few stakeholders interviewed stress Oxford AHSN's continued support in identifying alternate funding routes is key, moving forward.
- 3 Stakeholders are keen to see Oxford AHSN continue to work collaboratively across the **region** and with AHSNs **nationally**.

### **OVERVIEW**

Stakeholders have highly favourable impressions of Oxford AHSN. This is primarily due to the contributions of knowledgeable leadership and a variety of successful projects that have come from the region in recent years, with many being adopted nationally. Examples mentioned in interviews include the flu project at Stoke Mandeville hospital as well as programmes on maternity and neonatal safety, on improving sleeping patterns and

cardiovascular health. Areas for consideration are discussed with reference to a few areas stakeholders would like further support with. Potential opportunities for the future are highlighted by stakeholders in relation to how Oxford AHSN can work more collaboratively nationally and across the region.

### WHO WE SPOKE TO

Nine stakeholder groups were identified, and across these, 280 stakeholders identified by Oxford AHSN were invited to take part; 59 completed the online survey from 21st August to 16th September 2019. This represents a response rate of 21% which is in line with the industry average for this type of survey. In addition to the online surveys, Savanta ComRes conducted follow–up interviews with 9 stakeholders between 9th September and 13th November 2019, who put themselves forward to discuss their experiences further. Specific quotas were not set for the stakeholders interviewed as interviewees were self–selecting and interviews were dependent on stakeholders' availability and feasibility of bookings.

Туре	#	%	#
	SURVEYED	SURVEYED	INTERVIEWED
Health or social care provider	23	39%	2
Research body or university	12	20% (+8)	1
NHS Clinical Commissioning Group (CCG)	9	15%	2
Individual patient or member of the public	5	8%	1
Private company or industry body	4	7% (-9)	2
Patients group or public group	3	5%	1
Voluntary and Community Sector (VCS)	2	3%	-
Local government or Local Enterprise Partnership (LEP)	1	2%	-
National government, agency or Arms Length Body (ALB)	0	0% (-7)	-
Total	59	100%	9

Thinking about your role and organisation as it relates to your engagement with AHSNs, which of the following best describes your organisation? *Base: All stakeholders answering on behalf of Oxford AHSN (n=59)* Percentage point difference to the average survey response rate where difference is more than 5 (n=1,155).

# INTERPRETING THE RESULTS

The report includes quantitative findings from the online survey and qualitative findings from interviews with local stakeholders. The number of online survey respondents are too small to draw reliable conclusions from. Additionally, comparisons between local survey data and the average across all AHSNs nationally are not necessarily statistically significant meaning higher or lower assessments of an individual AHSN in comparison to the national response rate may be due to the 'play of chance'. Findings from the online survey at the level of an individual AHSN should therefore be treated as indicative only and used with caution.

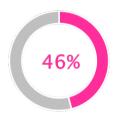
Insights are based on an aggregated analysis of interviews with participating Oxford AHSN stakeholders. Therefore, themes described may not necessarily reflect the views of those

answering and are not generalisable to all stakeholder types. For instance, interviews were not conducted with VCS, local government or LEP, national government, agency or ALB stakeholders. It should also be noted that no national government, agency or ALB stakeholders took part in the online survey.

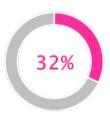
Each local AHSN report has been reviewed by a representative at the AHSN to verify the accuracy of insights and interpretations presented in each report. Savanta ComRes held **30-minute calls** with the representative to collect and incorporate such feedback. AHSNs only saw the findings in the report and not raw data collected in fieldwork.

#### Awareness (NET: Extremely or very aware) Figure 1

Your personal awareness of its work (52% average)



Awareness of its work within your sector (42% average)



### Knowledge and Visibility Figure 2



Length of time working with Oxford AHSN (more than a year) (77% average)





Visibility of Oxford AHSN (NET: Extremely or very visible) (40% average)





Understanding of the role of Oxford AHSN (NET: Good or fair understanding) (87% average)



#### KEY

'% average' indicates the average score across all AHSNs



Oxford AHSN's most impactful projects † Figure 5



1.Patient safety collaborative/programme

(5% average)

10%



2.Health programmes/ initiatives/ health innovation programme/ NHS

(9% average)

10%



3. Innovation programmes

(6% average)

8%

<sup>†</sup> Open text box question

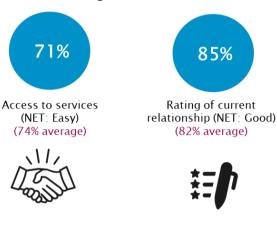
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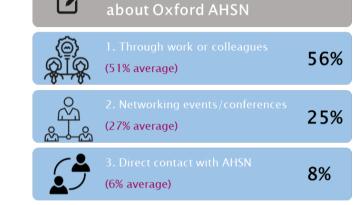
Figure 1- Q. Overall, thinking about Oxford AHSN's work, how would you describe...? Base: Oxford AHSN stakeholders (n=59)

Figure 2 – Q. And approximately how long have you worked with Oxford AHSN? Q. Thinking about its overall visibility and any engagement you may have had, how would you rate the visibility of Oxford AHSN in its local area? Q. How would you rate your understanding of the role of Oxford AHSN? Base: Oxford AHSN stakeholders (n=59)

Figure 5 – Q. Which Oxford AHSN initiative, programme or support service would you say has had the greatest impact on your organisation's ability to meet its objectives or your ability to meet your own objectives? Base: Oxford AHSN stakeholders (n=59)

#### Working with Oxford AHSN Figure 3







#### MOST NOTABLE FACTOR DRIVING POSITIVE EVALUATION OF OXFORD AHSN †

Figure 6
Helpful staff/management/
supportive and collaborative
team/ accessible/ more involved
to support
(26% average)

#### Communication with Oxford AHSN Figure 4



Effectiveness of communications (NET: Extremely or very effective) (53% average)



Working relationship over time (NET: Better) (54% average)



Top 3 ways Oxford AHSN currently communicates with stakeholders



Direct individual / group emails (64% average)



2. Face-to-face workshops, consultations or events

59%



3. Email newsletters (57% average)

(61% average)

54%

<sup>†</sup> Open text box question

# 12%

# TOP RECOMMENDATION FOR OXFORD AHSN †

Figure 7
Coordinated/ collaborative approach towards learning, sharing, evaluation and roll-out of products/ services
(13% average)







Figure 3 – Q. Overall, how easy did you find it to access Oxford AHSN services? Q. Overall, how would you rate your working relationship with Oxford AHSN? How did you first find out about Oxford AHSN? Base: Oxford AHSN stakeholders (n=59)

Figure 4 – Q. Thinking back over the period of time you have been working with Oxford AHSN, would you say your working relationship has gotten better, worse, or is about the same? Q. Which, if any, of the following ways does Oxford AHSN currently communicate with you? Q. How would you rate the effectiveness of Oxford AHSN's communications? Base: Oxford AHSN stakeholders (n=59)

Figure 6 – Q. You indicated that you have a good working relationship with Oxford AHSN and/or your working relationship has gotten better over the period of time you have been working with them. Why do you say this? Base: Oxford AHSN stakeholders who say this (n=50)

Figure 7 – Q. If you could make one recommendation for improvement for the local AHSN or the National AHSN Network to focus on in the next three years, what would this be? For example, is there a service you think should be expanded, or a new offering that should be explored or delivered? Base: Oxford AHSN stakeholders (n=59)

# AREAS OF STRENGTH AND GOOD PRACTICE

#### **IMPACT ACROSS A VARIETY OF PROJECTS**

Many of the stakeholders interviewed provide positive evaluations of Oxford AHSN, evidenced through the impact seen through a variety of projects. This includes the flu project at Stoke Mandeville hospital identified by a stakeholder below.

"They are achieving many things. I was part of the flu project at Stoke Mandeville hospital. A company sold us the product, and we carried out a trial on the patients. We collected data and gave it to the AHSN and they did a health economics and found that it is financially viable. So now the point of care test is being carried out at Stoke Mandeville hospital, instead of sending the sample to the lab, you get the results now. It's time saving."

#### Health or social care provider

In addition to this, Oxford AHSN is considered to have positively contributed to programmes on maternity and neonatal safety, anticoagulation, on improving sleeping patterns and cardiovascular health. As well as leading to improvements in the local area, some of these projects have gone on to have a national influence, according to stakeholders interviewed.

"We have been very grateful for the way the Oxford [AHSN] has worked. It certainly has influenced the NHS nationally [and] internationally. A lot of good things that we've discovered in the Oxford NHS have gone into a national, higher programme and they have been copied in other countries."

#### Research body or university

"They've done work with our medical teams to improve the uptake of anticoagulation drugs to improve heart health across the UK with different areas, which has been very helpful. That became a national programme that was taken up by a number of AHSNs."

#### Private company or industry

Evidence of Oxford AHSN's impact via numerous projects is also demonstrated in the online survey. When asked to spontaneously name Oxford AHSN's most impactful initiative, programme or support service, stakeholders were generally more likely than the national average to name specific programmes such as the patient safety collaborative (10% vs. 5% nationally), PINCER implementation (7% vs, 1% nationally) and sepsis support (7% vs. 1% nationally).

Savanta: ComRes

#### THE LEADERSHIP

Stakeholders in interviews praised the "very high work rate" and "effective management" of the "dedicated, committed, enthusiastic" people involved in the Oxford AHSN. The clinical experience of the leadership team is mentioned a few times as a factor in the AHSN's understanding of what is needed to drive improvement in the NHS.

"It amazes me, how good they are at working out what needs to be done within a clinical setting, but then I think that would be partly to do with the makeup of the people who are sitting on the board."

Private company or industry

Positive evaluations of Oxford AHSN staff are also evident in the online survey findings. Those that have a good relationship with Oxford AHSN most often say it is because of their helpful and supportive staff and management (32%); a proportion that is also higher than the national average (26%).

# POINTS FOR OXFORD AHSN TO CONSIDER

#### ADDRESSING ISSUES RELATING TO FUNDING

A few stakeholders note in interviews that helping partners to secure funding is, and may continue to be, a challenge for Oxford AHSN in upscaling innovation. Across interviews, it is apparent that Oxford AHSN is highly effective in supporting innovation spread, as evidenced by the examples provided of projects that have gone on to have a national influence. It is in this context that some stakeholders suggest that Oxford AHSN could benefit from exploring more routes to funding, including international and industry investment, to further support their initiatives.

"There's always a challenge of securing funding to support [Oxford AHSN] projects [and] I think that continues to be a challenge."

CCG

"To get some funding for [a new app], we've had to do some pretty complex boxing and coxing between different organisations [and Oxford AHSN] certainly supported that, but we've also had to go to the CLAHRC 1 and other organisations to pull it all together."

Research body or university

# ENSURING STAKEHOLDERS ARE INFORMED OF OXFORD AHSN'S STRATEGY FOR THE LOCAL AREA

<sup>&</sup>lt;sup>1</sup> Collaborations for Leadership in Applied Health Research and Care (CLAHRC) which has now evolved into an 'ARC' (Applied Research Collaboration)

Many of the stakeholders interviewed express willingness to receive communication from Oxford AHSN analysing past work and setting out future plans to help them stay informed and focus their own priorities. A few suggest they can sometimes feel unclear on how local priorities fit into the national agenda for health and social care. It should be noted that this reflects a sentiment held by other AHSNs' stakeholders across the country and is not isolated to Oxford AHSN.

"[There is] some ambiguity about what the role of [Oxford] AHSN is at different times [...] I think it has come from the local interpretation of the national direction."

Research body or university

#### **EXPANDING OXFORD AHSN'S LOCAL AND NATIONAL PRESENCE**

A few stakeholders note that there is an opportunity for Oxford AHSN to further utilise its strong reputation to be even more visible to stakeholders locally and continue to have a national impact. There is a sense among the few health or social care providers interviewed that Oxford AHSN is not particularly well known among clinical workforces. Oxford AHSN may therefore wish to consider the extent to which this is an issue while setting out its ongoing engagement strategy.

"I think it's very successful. It wins a lot of prizes and has a very high profile."

CCG

"I think there's a huge opportunity, it's a massive global brand."

Private company or industry body

"[Oxford AHSN] is making a difference. Whether the clinicians are aware of it [...] I'm not sure. It is only because I am involved that I know about the AHSN."

Health or social care provider

The online survey found that 29% of Oxford AHSN's stakeholders say the organisation is extremely or very visible. This is slightly less than the national average across all AHSNs (40%). Although these figures are indicative only due to low base sizes, feedback from interviews suggests a national presence is encouraged by stakeholders. This therefore could provide Oxford AHSN with a mandate to continue to utilise its high profile, relationships and successes to ensure a national impact.

# CHALLENGES AND OPPORTUNITIES AHEAD

A range of areas to focus on in the future were cited by Oxford AHSN stakeholders, which tend to mirror national challenges for the AHSN such as navigating the complex health and care system and ensuring sufficient resources are in place. In addition to this, region-specific focal areas cited by stakeholders also include:

# COMMUNICATING EXAMPLES OF GOOD COORDINATION ACROSS THE GEOGRAPHICAL FOOTPRINT

A few stakeholders interviewed noted an opportunity for Oxford AHSN to support its region to work more collaboratively in the future.

"Given we are going to be an area of significant population growth, [I wonder] whether there's an opportunity for slightly more high-level coordination in terms of the attraction of the broader area [Oxford, Buckinghamshire, Berkshire] and in terms of generating industry and innovation in key areas. I think they do very well, I just think there might be an opportunity for something bigger."

CCG

"If you look at the way that the great city regions around the UK work in a collaborative manner, they act in a more coordinated manner. The broader health and academic system in Oxford and some of the outliers like Harwell need to find a way of coming together that I'm not seeing right now. So, one of the biggest challenges going forward to be successful is the ability of the greater Oxford region to act as one and to have a common agenda."

#### Private company or industry

This was also evidenced in the survey, with stakeholders most likely to say their one recommendation for Oxford AHSN over the next three years would be to focus on having a coordinated/collaborative approach towards learning, sharing, evaluation and roll-out of products/services (12%).

#### ALIGNING THEIR PRIORITIES TO THE NATIONAL AGENDA

As discussed in the national report a few stakeholders interviewed also discuss the challenge for Oxford AHSN of meeting local needs whilst balancing the priorities with the national agenda.

"I think there's tension between what they need to do locally within the region, for regional benefits, and what they need to do nationally, which they're being encouraged to do. It is a pendulum, and if it swings too far towards a national focus, then they will end up losing local relevance."

#### Private company or industry body

"One of the things the AHSN, apart from looking at local priorities, will need to think about, is how they align their work with some of the national priorities."

CCG

# SUMMARY OF POINTS FOR OXFORD AHSN TO CONSIDER

Across interviews conducted, the following points emerged for Oxford AHSN to consider:

- ✓ Continue to **utilise the prominence and expertise of Oxford AHSN staff** who are successfully helping stakeholders with various projects.
- ✓ Continue to **share best practice with other AHSNs** to increase national connectivity and consolidate learnings from similar workstreams.
- ✓ Utilise Oxford AHSN's **strong reputation**, as noted by stakeholders, to further expand its presence at a local and national level.
- ✓ Consider how to effectively communicate Oxford AHSN's strategy to its stakeholders, as well as updates on other successful and impactful programmes of work.