

The Government must show a clear and sustained commitment to cancer research by continuing to directly fund research as well as maintaining support for charity funded research

The Government must be ambitious in its plan to drive improvements in cancer services and patient experience to make the UK's cancer outcomes and care equal to the best in Europe in the next decade.

To this end the Cancer Campaigning Group (CCG) is calling for change in six priority areas. This briefing sets out the CCG vision for cancer research.

Improving outcomes for people with cancer in the long term is dependent not only on high quality services and support but also sustained and committed investment in research. The links between investment in research and improved health outcomes should therefore be continually reinforced.

The Government itself is already a key funder and supporter of cancer research, including through the National Institute for Health Research (NIHR) and the National Cancer Research Network (NCRN), the National Cancer Intelligence Network (NCIN) and the Medical Research Council (MRC). The CCG welcomes the Government's recognition in *Improving outcomes: A strategy for cancer* that a wide range of research will be "critical to reducing the burden of cancer and to improving cancer outcomes." We welcome the commitment to five year funding by the Department of Health's Policy Research Programme for a policy research

unit on cancer awareness, screening and early diagnosis. Alongside the Government directly funding research itself, the CCG also believes it is essential that the Government ensures that there is an environment within the UK that is supportive of charity funded medical research.

Cancer research in universities: charity funded medical research is vital to the health of cancer patients and the prosperity of the UK.^{i,ii} A key mechanism by which the Government supports charity funded medical research is the Charity Research Support Fund (CRSF). This fund, which is distributed via the Higher Education Funding Council for England (HEFCE), helps to meet the indirect costs of research (for example, laboratory heating and lighting costs, access to library services, university HR services) while charities meet the direct costs of research.

The CRSF provides a vital link between charities and the Government, leveraging significant additional investment in research and for universities. Without it, there would be serious repercussions on the ability of charities to fund medical research. The CCG therefore welcomes

the commitment by the Government to the fund in their annual grant letter to HEFCE in December 2010 and the subsequent announcement by HEFCE that funding in the 2011/2012 allocation would be maintained at £197 million. The CCG also welcomes the Government's recent clarification that funding for the CRSF will now be maintained throughout the Spending Review Period until 2014/15, which has the benefit of helping to reassure universities that this is a sustainable source of funding. We now call on HEFCE to ensure that their annual decision on the amount of funding they will allocate to the CRSF reflects the level of investment in research provided by charities.

Cancer research in the NHS: Clinical research studies in the NHS are vital to cancer research. In the UK one in every six cancer patients is involved in research, representing 42,000 cancer patients, the highest level in the world.ⁱⁱⁱ The patients involved in these studies gain early access to innovative medicines, devices, procedures or diagnostic techniques.



The UK is well placed to be a world leader in clinical research to understand and treat disease. We have a strong scientific research base with our scientific publications producing over 12% of the world's citations, and we have created nearly a quarter of the world's top 100 medicines.^{iv} In addition we have the NHS which treats the largest group of people within a single healthcare system in the world.

The CCG was therefore delighted that, following the Future Forum Report, the Government committed to: create a new duty on the Secretary of State to promote research; create a new duty for clinical commissioning groups (CCGs) to promote research and innovation and the use of research evidence, in line with the current duty on the NHS Commissioning Board (NCB); ensure that a culture of research and innovation is embedded in the arrangements for both the NCB and Public Health England; and make sure that CCGs and the NCB ensure that treatment costs for patients who are taking part in research funded by Government and research charity partner organisations are funded through normal arrangements for commissioning patient care, as set out in existing guidance. Sufficient measures need to be put in place to enable CCGs and the NCB to uphold their duty to promote research. These measures should include guidance on how treatment costs of patients taking part in research will be met within the system, together with clear and measurable targets to monitor the conduct of research in the NHS.

The CCG also welcomes the announcement by Government that measures within its Plan for Growth will take forward many of the recommendations contained within the recent Academy of Medical Sciences review into regulation and governance of health research.^v The key recommendation that they will be taking forward is the creation, this year, of a new health research regulatory agency to rationalise regulation and governance and develop an integrated approvals system for the UK. This is vital, as the current complex regulatory and governance framework for clinical research in the UK means that the process for getting clinical cancer studies up and running is unacceptably slow and cancer patients are missing out on taking part in clinical studies as a result. The CCG would welcome further detail on how local bureaucracy and duplication will be removed or reduced, so that as many patients as possible can benefit from research.

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- i Department of Health (2011), *Improving Outcomes: A Strategy for Cancer*, London: Department of Health
- ii Academy of Medical Sciences (2010), *Reaping the Rewards: a vision for UK medical science*, London: Academy of Medical Sciences
- iii *Four-fold increase in recruitment of cancer patients to NCRN portfolio studies between 2001 and 2010: a tale of investment bringing returns*, presentation by D. Cameron on behalf of the National Institute for Health Research's National Cancer Research Network at their conference 2010
- iv Academy of Medical Sciences (2010), *Reaping the Rewards: a vision for UK medical science*, London: Academy of Medical Sciences
- v Academy of Medical Sciences (2010), *A new pathway for the regulation and governance of health research*, London: Academy of Medical Sciences

