



Cancer and Nutrition NIHR infrastructure collaboration

Strategic Direction (3-5 years)

The Cancer and Nutrition NIHR infrastructure collaboration (the 'Collaboration') shares the overall vision and mission of the wider NIHR*:

NIHR vision

To improve the health and wealth of the nation through research.

NIHR mission

To provide a health research system in which the NHS supports outstanding individuals working in world-class facilities, conducting leading-edge research focused on the needs of patients and the public.

Background

In early 2014 the need to bring coherence to existing activities and provide a coordinated framework for future research in the areas of cancer and nutrition was identified. In discussion with the NIHR Office for Clinical Research Infrastructure (NOCRI), it was agreed that Professor Jackson, with the team at the Southampton Biomedical Research Centre (BRC) would lead this initiative with support from the World Cancer Research Fund and CRUK.

The Collaboration embraces many different stakeholders (including patients, clinicians, researchers, charities, funders, NIHR infrastructure including NOCRI, professional bodies, and the commercial sector) who each have a role to play in designing and delivering research in the fields of cancer and nutrition. Patients sit at the heart of the Collaboration, driving its strategic direction and ensuring all identified aims, objectives and key outputs reflect the priorities identified by them. **(Figure 1)**

Collaboration Vision

Our vision is to deliver benefits to people and patients through improved translational research in cancer and nutrition where every person and health professional knows and understands how best they can contribute.

Collaboration Mission

The mission of the Cancer and Nutrition NIHR infrastructure collaboration is to establish a coherent and effective infrastructure to enable the best quality translational research agenda that will bring nutritional considerations, which includes physical activity, into all aspects of cancer prevention and care.

Definitions

The Collaboration uses the following definitions of nutrition and cancer:

Nutrition is the set of integrated processes by which cells, tissues, organs and the whole

* <http://www.nihr.ac.uk/about-us/our-purpose/vision-mission-and-aims/>

body acquire the energy and nutrients for normal structure and function, which is achieved at body level through dietary supply, and the capacity of the body to transform the substrates and cofactors necessary for metabolism. All of these domains (diet, metabolic capacity, body composition and level of demand for energy and nutrients) are influenced by levels of physical activity and can vary according to different physiological and pathological disease states.

Cancer includes all types, stages, and sites. Stages include prevention, diagnosis, treatment, survivorship, palliative and end of life care

Strategic Aims

1. To identify knowledge gaps in nutrition at all stages of life in relation to cancer.
2. To raise awareness of opportunities for improved research to benefit patients and the public at all stages of the cancer process.
3. To enable translational research that will address identified knowledge gaps in nutrition at all stages of life in relation to cancer
4. To foster a community of clinicians, patients, the public, and researchers to share knowledge, understanding and best practice to jointly deliver the highest quality research.
5. Build capacity and capability in the health workforce among all disciplines and at all levels; developing the next generation of researchers and clinicians.

Year 1 Objectives (April 2017-March 2018)

- Secure funding for patient and public involvement in all aspects of Collaboration activities.
- Secure future funding for the Collaboration (including core and non-core costs) from relevant stakeholders including the NIHR infrastructure, the commercial sector and charities.
- Continue to build strong networks of internal stakeholders by maintaining work stream activities according to agreed action plans
- Develop and implement a clear communications strategy including quarterly newsletters and regular website updates
- Establish further engagement with specific NCRI CSGs in order to embed nutrition in their research agendas
- Develop the body of authoritative guidance into a fit-for-purpose and quality-assured resource for patients and clinicians
- Work with interested charities and patient groups to identify and develop research opportunities that will benefit patients and the public
- Develop and submit collaborative grant applications for research projects in cancer and nutrition as identified by the research sub-groups
- Develop and deliver a standardised, quality-assured toolkit (and audit tool) for nutritional screening of cancer patients
- Identify those within NIHR infrastructure with the expertise and capabilities to deliver cancer and nutrition research
- Agree an appropriate mechanism to facilitate collaborative working with commercial partners

Long term objectives:

Research objectives:

- Secure training posts within BRCs for researchers focusing on cancer and nutrition
- Create systems whereby the research agenda is developed with patients at its heart

Capacity-building objectives:

- A clinical workforce that is trained and competent in the nutritional care of cancer patients at all stages of the cancer pathway, including assessment of nutritional status and delivery of appropriate care and advice
- A self-sustaining community of patients, researchers and clinicians working together to improve the evidence base, share information and improve the nutritional care of cancer patients at all stages from prevention through to end of life care

Key stakeholders we will work with to deliver the stated aims and objectives

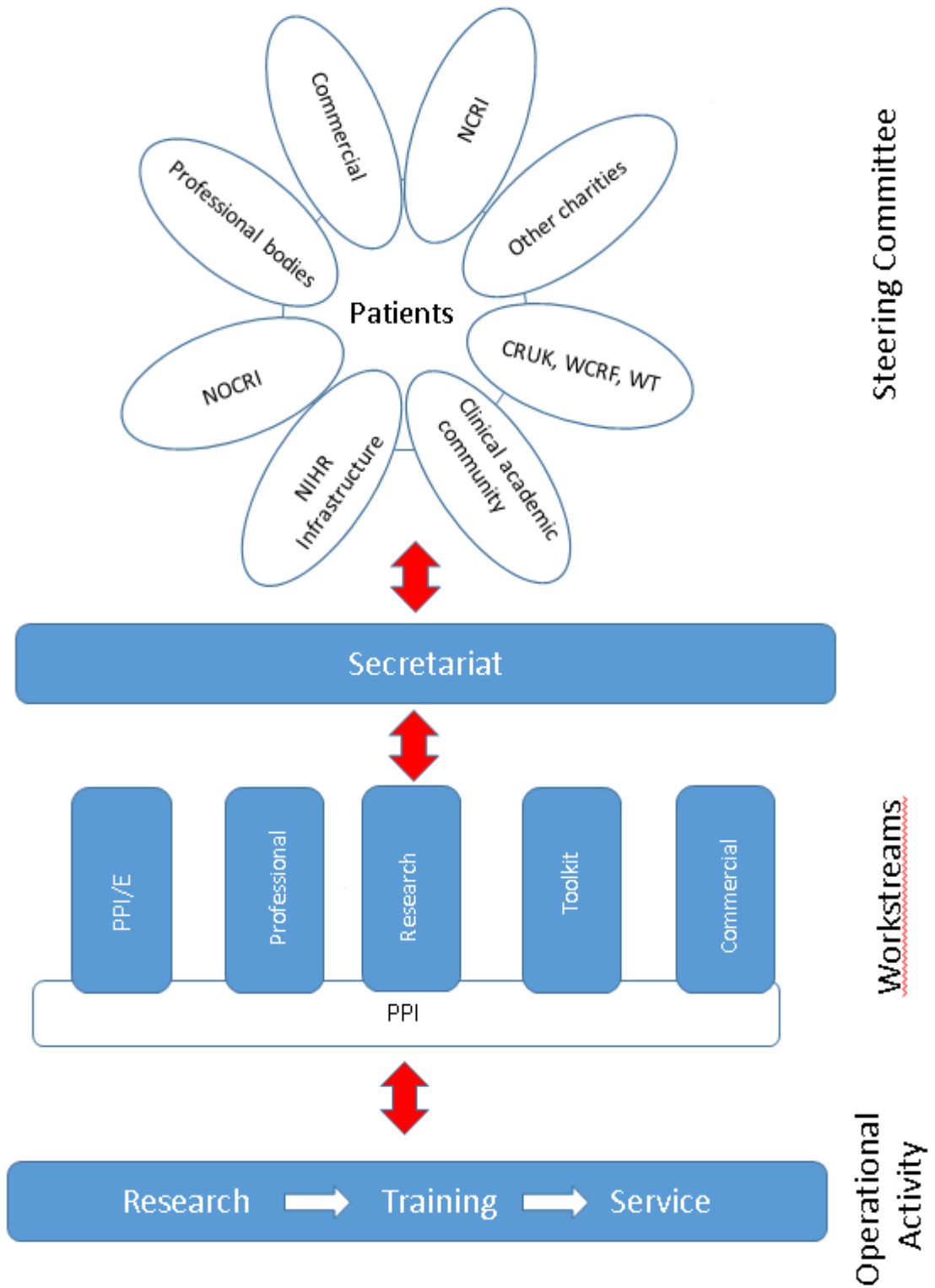
1. Patients and the public
2. Professional bodies and associations including BDA, NS, AfN, medical colleges
3. NIHR infrastructure, including BRCs, CLAHRCs, CRFs and others (via NOCRI)
4. The National Cancer Research Institute (NCRI) and its Clinical Study Groups (CSGs)
5. Large funders including CRUK, Wellcome Trust, Macmillan and others
6. World Cancer Research Fund UK
7. Individual cancer charities including site specific and non-site specific
8. Clinical academic community in i) cancer and ii) nutrition
9. The commercial sector including the wide range of different players this involves (e.g. food and food products, medical devices for assessing nutritional status, foods for specific medical purposes, functional foods, dietary supplements, technology companies, health insurance etc)

Sustainability statement

Over the next 3-5 years the Collaboration must build robust mechanisms for networking and the sharing of knowledge, expertise and experience between the cancer and nutrition research communities as well as clinical communities. The intention is that the work streams, which have been enabled to establish the Collaboration, become self-sustaining communities of practice, continuing to deliver improved research and clinical care to cancer patients.

Overview of operational model

The Collaboration will operate using the structure outlined in Figure 1.



Overview of governance structure

Strategic oversight of the Collaboration will be provided through the Steering Committee and DH-NOCRI oversight meetings as outlined in Figure 2.

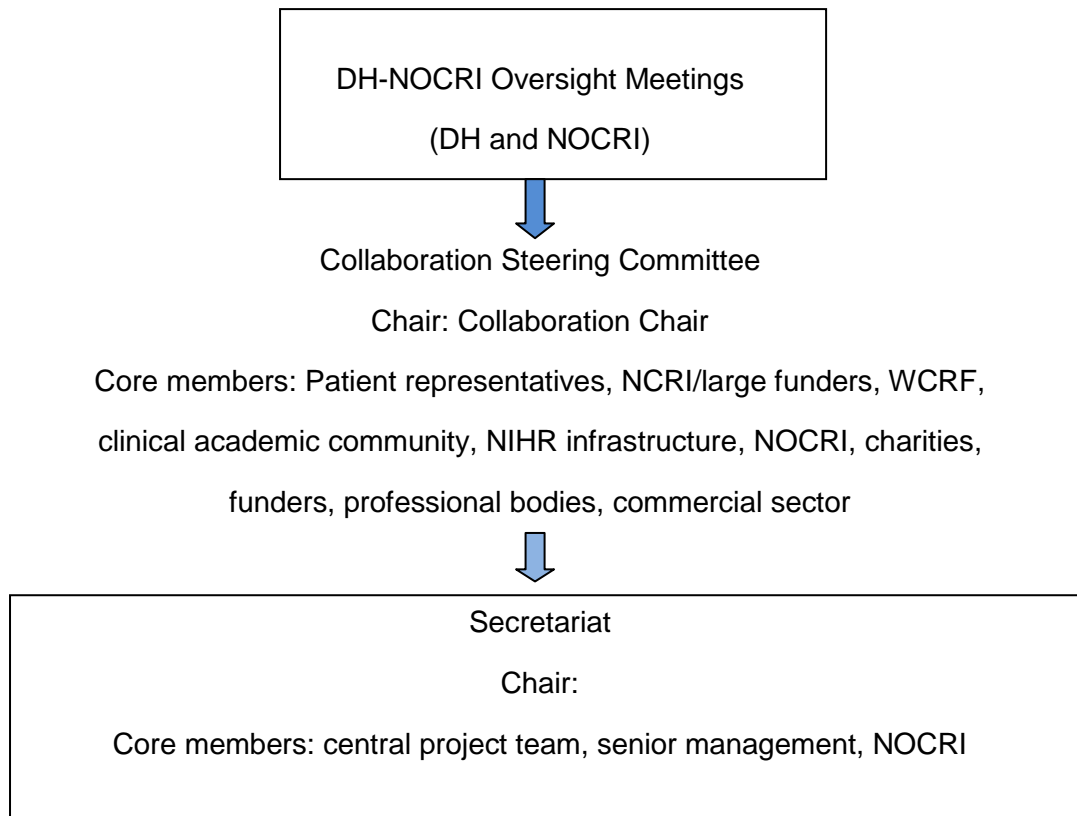


Figure 2. Overview of governance structure

DH-NOCRI oversight meeting

The NOCRI DH Oversight Group meets quarterly and is attended by senior representatives from the Department of Health and NOCRI's Collaboration Development and Delivery team. Their role is to monitor performance and delivery of NIHR infrastructure collaborations and to ensure that collaborations make appropriate use of NIHR infrastructure. They may also be used as a route for escalation of risks and issues.

Steering committee

The steering committee, together with the Collaboration chair, will provide support, guidance and oversight of development and delivery of the Collaboration's defined aims and objectives.