

# NHS and life sciences industry partnerships

## Collaborating to improve care

### Overview

- There is growing national interest in the potential for wider and deeper partnerships between the NHS and life sciences sector. The UK life sciences industry is a significant asset and there is a sense that more could be done to bring its strengths together with the NHS to improve both the nation's health and economic prosperity.
- This report examines how the NHS can collaborate with industry partners in the life sciences sector by exploring four case studies of collaborative working projects between NHS organisations and pharmaceutical companies (a well-established and codified way for the NHS and industry to work in partnership). Between February and August 2024, we interviewed 18 people involved in these projects and reviewed relevant documents to understand the experience and impact of the partnerships.
- We found that, in the right circumstances, these partnerships can be powerful catalysts for improvement, bringing benefits for patients, staff and services. The involvement of industry can bring much-needed resource to pump-prime change, as well as access to valuable skills and expertise.
- Making a success of these partnerships is not easy: it requires significant time and effort from all partners, as well as a high level of rigour around the design and delivery of projects.
- Our work suggests NHS–industry partnerships could bring benefits if used more widely and on a more strategic basis. This will require NHS and industry bodies to create a supportive context and put in place practical support at local and national levels, addressing key issues around openness and trust, access and experience, and leadership and oversight.

## Why did we do this work?

The UK has a large and thriving life sciences sector, but the full potential of this to improve patient care is not being realised. The new government has set out ambitions for the NHS and life sciences industry to work together more closely to deliver improvements in health, as well as driving economic growth.

We wanted to understand how the NHS can collaborate with industry partners in the life sciences sector, what these partnerships look and feel like in practice, and how to create the conditions for their success.

To shed light on these broad questions, we focused on a specific type of NHS–industry partnership – collaborative working projects between NHS organisations and pharmaceutical companies. These are a well-established way for the NHS and industry to work together, involving pharmaceutical companies and NHS organisations formally pooling skills, expertise and/or resources to deliver a specific project. Collaborative working has been established since 2008 and is supported by extensive guidance and requirements.

## What did we do?

We undertook qualitative research into four case studies of collaborative working projects:

- Improving outcomes for people with diabetes following acute coronary syndrome in Lincolnshire (with Boehringer Ingelheim).
- Eliminating hepatitis C among people in contact with drug and alcohol services across the NHS Addictions Provider Alliance (with Gilead Sciences).
- Improving asthma care in Greater Manchester (with AstraZeneca).
- Improving the front-end skin cancer pathway in Lancashire and South Cumbria (with Sanofi).

For each case study, we reviewed relevant documents and conducted in-depth interviews (18 in total) with key individuals involved in leading and working alongside the projects, including those from the NHS partners and the industry partners, in order to understand what the partnerships involved, their impact, and the factors which helped or hindered effective partnership working.

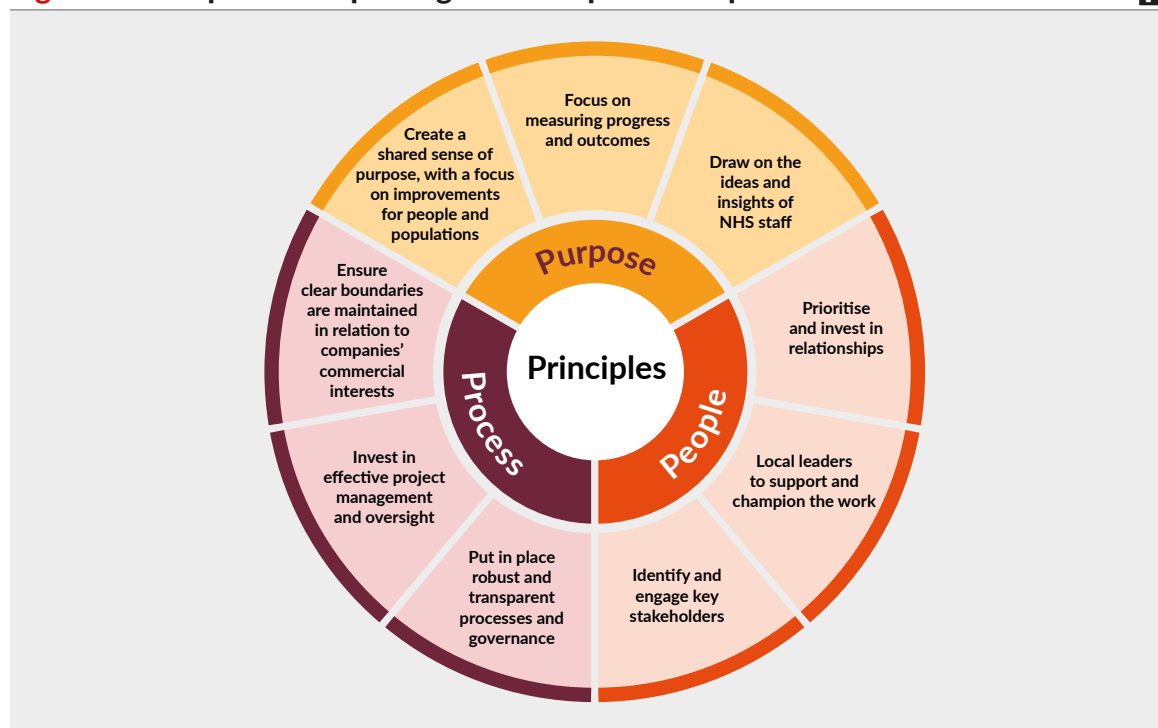
## What did we find?

Across our case studies, there was evidence that collaborative working had delivered a wide range of benefits for patients, staff and services, and for the companies involved. We heard that the involvement of industry had been central to unlocking those benefits, bringing dedicated capacity and resource to drive improvements in care, as well as access to valuable skills and expertise ranging from project management to data analysis and health economics.

While such partnerships are not a panacea, in the context of an NHS desperately in need of transformation but often lacking the resource and headspace to make it, they may offer a valuable addition to the menu of options available to support improvement. This must not be about private sector involvement making up for or masking a shortfall in NHS capacity or resourcing; the type of involvement we describe is focused purely on transformation or improvement initiatives, not the delivery of routine care, with the involvement of industry focused on delivering a specific project within tightly defined objectives and timeframes.

In all four case studies, it was clear that significant time and effort was needed on all sides of the partnerships to make them work well. Through our research, we identified a set of principles underpinning effective NHS–industry partnerships, covering three broad domains of purpose, people and process.

**Figure 1** Principles underpinning effective partnerships



Alongside the usual challenges inherent in cross-organisational collaboration, these partnerships must navigate different organisational cultures and contexts across the public and private sectors. Building relationships and trust between partners is a pre-condition for successful partnerships of all types, but NHS–industry partnerships are often starting from a lower baseline, sometimes contending with deeply held scepticism and mistrust around the role and motivations of pharmaceutical companies. All this must be overcome to achieve meaningful collaboration, alongside rigorous safeguards to mitigate risks and guard against conflicts of interest, with a high level of transparency on all sides. Above all, it is critical that benefits for patients and the public are the driving force for all partnerships. Although we found some positive examples of patient and public involvement in our work, more could be done to ensure that this is at the heart of collaborative working projects and is meaningfully driving the work.

Other industries in the life sciences sector, including the healthtech and biotech industries, do not have such established mechanisms for joint working with the NHS and are regulated differently. Our findings may offer useful learning for other industries in the sector around broad principles for effective NHS–industry partnerships but approaches to developing joint working would need to respond to the distinct characteristics and regulatory underpinnings of each.

### **What next?**

There is potential for partnerships of the type explored in our report to be used more widely and on a more strategic basis. This will require NHS and industry bodies to create a supportive context and put in place practical support at local and national level to enable people to access and deliver successful partnerships. Through our work, we identified actions that could be taken to support this, and invite leaders in national NHS bodies and government, local health and care systems, and industry bodies and companies to consider these in relation to their respective contributions.

Our recommendations focus on addressing three key barriers to partnerships being used more widely and on a more strategic basis (see Figure 2 below).

**Figure 2** Three key barriers to collaborative working



Realising the potential of NHS/industry partnerships will require attention to issues around:

**Openness and trust**

Cultural differences and mistrust of the pharmaceutical industry can stand in the way of partnerships, despite rigorous processes and safeguards around collaborative working.

**Leadership and oversight**

There are well-developed frameworks and guidance, but industry bodies have played a far greater role in these than NHS bodies and more could be done to create a genuine sense of co-ownership, with greater leadership and oversight from the NHS.

**Access and experience**

Routes to partnership can be ad hoc and reliant on existing relationships. There is often limited understanding and experience around relevant processes and guidance.

To realise the potential of these partnerships to improve patient care, we recommend the following.

**Table 1** Recommendations for national and local leaders

Openness and trust	Leadership and oversight	Access and experience
<b>National NHS leaders</b>		
<ul style="list-style-type: none"> <li>Set out clear and consistent statements of intent and support around partnerships with industry</li> <li>Capture, collate and share robust evidence and learning from industry partnerships</li> </ul>	<ul style="list-style-type: none"> <li>Proactively work with industry around how to maximise their contribution to key NHS priorities (for example, those that will be set out in the forthcoming 10-year plan)</li> <li>Work with industry to develop the next iteration of guidance, and take greater ownership and oversight of this, ensuring that it is understood and implemented across NHS systems</li> <li>Seek greater government direction for the NHS around ambitions for working with industry, including to deliver its missions</li> </ul>	<ul style="list-style-type: none"> <li>Support wider access to partnerships so they are less reliant on individual connections and able to operate at scale – for example, by building routes for industry involvement into national programmes where this could help deliver programme priorities</li> <li>Facilitate experience of industry partnerships to be shared – for example, through peer support arrangements to link NHS organisations entering into partnerships with others with first-hand experience</li> </ul>

*continued on next page*

**Table 1 Recommendations for national and local leaders** *continued*

Openness and trust	Leadership and oversight	Access and experience
<b>Local NHS leaders</b>		
<ul style="list-style-type: none"> <li>Actively support and advocate for industry partnerships where these can support the delivery of local priorities</li> <li>Promote awareness of partnerships taking place in a local system to increase transparency and showcase evidence of their benefits and learning generated</li> <li>Ensure that the impacts of collaborative working projects are assessed through robust and independent evaluation</li> </ul>	<ul style="list-style-type: none"> <li>Develop mechanisms to oversee and support local industry partnerships, ensuring that they operate in line with national best practice guidance. This could be through an appointed lead or a group to 'hold the ring' on partnerships, drawing on those in the system with direct knowledge/ experience, whether from the ICB, health innovation network (HIN), or provider organisations</li> </ul>	<ul style="list-style-type: none"> <li>Put in place local processes to make routes to establishing and approving partnerships more straightforward, ensuring that these are in line with national guidance and frameworks</li> <li>Identify where partnerships could help support the delivery of local priorities, and proactively build strategic partnerships with industry at ICS/HIN level to support these</li> </ul>
<b>Industry leaders (companies and industry bodies)</b>		
<ul style="list-style-type: none"> <li>Proactively communicate what companies get out of these partnerships and why they want to work with the NHS in this way to counter scepticism and mistrust</li> <li>Ensure that independent evaluations are undertaken to provide evidence on the impact of collaborative working</li> </ul>	<ul style="list-style-type: none"> <li>Strengthen links with national NHS bodies to build genuine co-ownership of guidance and frameworks</li> </ul>	<ul style="list-style-type: none"> <li>Build strategic partnerships that go beyond individual projects or organisations</li> <li>Actively seek to understand national and local NHS priorities (for example, those that will be set out in the forthcoming 10-year plan) and consider how companies could support their delivery</li> </ul>

## About this work

This work was commissioned by The Association of the British Pharmaceutical Industry (ABPI). The research, analysis and writing have been conducted independently by The King's Fund and we retain full editorial control. The ABPI had no final approval or veto over the contents of this report. The companies involved in the case studies featured in this work did not provide funding or editorial input to the report.

To read the full report *NHS and life sciences industry partnerships: collaborating to improve care*, please visit [www.kingsfund.org.uk/insight-and-analysis/reports/nhs-life-sciences-industry-partnership-collaborating-improve-care](http://www.kingsfund.org.uk/insight-and-analysis/reports/nhs-life-sciences-industry-partnership-collaborating-improve-care)

**The King's Fund** is an independent charity working to improve health and health care in England. We help to shape policy and practice through research and analysis; develop individuals, teams and organisations; promote understanding of the health and social care system; and bring people together to learn, share knowledge and debate. Our vision is that the best possible health and care is available to all.

[www.kingsfund.org.uk](http://www.kingsfund.org.uk)  [@thekingsfund](https://twitter.com/thekingsfund)