

BNSSG ICB Board Meeting

Date: Thursday 3rd July 2025

Time: 12:45 – 15:45

Location: Virtual, via Microsoft Teams

Agenda Number:	6.3	
Title:	Research and the Deep End	
Confidential Papers	Commercially Sensitive	No
	Legally Sensitive	No
	Contains Patient Identifiable data	No
	Financially Sensitive	No
	Time Sensitive – not for public release at this time	No
	Other (Please state)	No
Purpose: For Information		
Key Points for Discussion:		
<p>BNSSG ICB is the leading NHS organisation in research, with the largest portfolio of NIHR funded research of any NHS organisation. The aim of the ICB's research strategy is "<i>health and care research that makes a difference to those who need it most</i>".</p> <p>An essential element of achieving this is ensuring that research activity happens regularly and sustainably in the areas of greatest need, and is delivered using trauma-informed, inclusive methods.</p> <p>The GPs at the Deep End scheme is one of the ways the ICB delivers to this aim. Using research as a means of improving quality of care and the experience for staff employed within the practices serving the most disadvantaged people in BNSSG.</p> <p>The Deep End scheme is a great example of how the ICB is:</p> <ul style="list-style-type: none"> • aligning research questions to real-world challenges, • ensuring representation of under-served groups in research participation, • making sure research evidence is shared with those who can use it, and • providing resource to embed evidence into routine practice. 		

Recommendations:	To note Continue support for the Deep End through research Consider ways the Deep End can be enhanced to benefit the patients with the greatest needs and the staff serving them.
Previously Considered By and feedback:	BNSSG ICB Research and Knowledge Mobilisation Advisory Group. Chair commended the work of the GPs at the Deep End and invited to Board.
Management of Declared Interest:	Conflicts have been considered. None applicable.
Risk and Assurance:	The main risk to the GPs at the Deep End is through insecure funding. Research funding covers some of the activities but not all. The scheme has also received funding from the ICB's Health Inequalities budget and a major part of the success has been due to the support and funding of the BNSSG Training Hub. All funding has been short-term in duration, and all precarious.
Patient and Public Involvement:	PPI is an essential element of all ICB research activities, and the Deep End scheme has high levels of PPI embedded, as well as working with VCSE representatives of under-served communities. Every research project being developed has its own additional PPIE group. The co-lead for the GP Deep End is leading inclusive research practice at national and international forums.
Financial / Resource Implications:	No financial/resource requests as part of this paper/presentation.
Legal, Procurement, Policy and Regulatory Requirements:	This paper/presentation is for information. No legal, procurement, policy or regulatory requirements are relevant.
How does this impact on health inequalities, equality and diversity and population health?	The GPs at the Deep End scheme is supporting the staff delivering care in the areas of greatest need. It increases staff satisfaction, delivers education and is enabling innovation and quality improvement through collaboration with academics and research funding sources. The
ICS Green Plan and the Carbon Net Zero target?	A network member used their Deep End support to develop and lead a UK-wide sustainable network for primary care: Greener Practice
Communications and Engagement:	ICB Research Team and University of Bristol communications
Author(s):	Paul Roy, Associate Director for Research
Sponsoring Director:	Jo Medhurst, CMO

Research that makes a difference to those who need it most

Board presentation by:

Paul Roy, Associate Director for Research BNSSG ICB

Dr Beth Winn, Salaried GP at Charlotte Keel Medical Practice and Co-Lead of the GPs at the Deep End Bristol

Dr Shoba Dawson, Senior Research Fellow at University of Sheffield and Co-Lead of the GPs at the Deep End Bristol

ICB Research Strategy

In April 2025 the ICB launched a Research Strategy that builds on existing partnerships with our local Universities, community health and care organisations, and our strong infrastructure supporting high quality Patient and Public Involvement (PPI) within all ICB related research activities.

<https://bnssg.icb.nhs.uk/research-and-evidence/icb-research-strategy/>

The Aim of the ICB Research Strategy is:

Health and care research that makes a difference to those who need it most.

To achieve this aim, the strategy identifies 4 inter-related challenges that need to be addressed:

- Low inclusion of minoritised groups in research.
- Research not directly aligned to the challenges of the Integrated Care System (ICS)
- Under-representation of ICS workforce in research.
- Scarcity of resources for health and care research and innovation in community settings.

The ICB Research Strategy sets out 5 strategic pillars that will work together to increase the quantity, quality and usefulness of research within our ICS.

The 5 strategic pillars are:

1. Targeting the greatest needs.
2. Radically diversifying research.
3. Creating academic partnerships at every layer of the ICS.
4. Accelerating evidence into practice.
5. Generating resources for the ICS.



Image: The ICB Research Strategy on a page

Progress against the strategy

In June 2025 the national rankings for NHS research activity was published, with BNSSG ICB ranked 1st amongst all NHS Organisations in England:

<https://www.nihr.ac.uk/research-capability-funding-allocations-2025-26>

This is fantastic news, testament to the successful partnership working our new Research Strategy builds upon, and shows that our approach to research is working well in regards increasing the quantity of research activity and in securing external funding for our ICS.

But quantity is only part of the strategy. The quality and impact of the research is essential to achieving the aim of research that **makes a difference to those who need it most**.

There are multiple projects and schemes that contribute to each of the 5 strategic pillars. This Board presentation focuses on one of the projects that supports our first strategic pillar, *Targeting the greatest needs*.

GPs at the Deep End

The GPs at the Deep End Network is led by a partnership of GPs, researchers at the [Centre for Academic Primary Care](#) at the [University of Bristol](#) and an academic now based at the University of Sheffield with expertise in inclusive research practice <https://deependgps.bristol.ac.uk/>.

GPs at the Deep End is an initiative that aims to reduce health inequalities through providing peer support, advocacy, training and research opportunities to primary care clinicians working in disadvantaged areas.

Over 15% of Bristol residents live in the most deprived areas in England and, within BNSSG, considerable health inequalities exist, with life expectancy reduced by nine years for those living in the most deprived areas compared to the most affluent areas.

Burn-out and clinician retention in these challenging but incredibly rewarding areas are important issues. Research is a known mechanism for increasing staff satisfaction and increasing quality of outcomes and can therefore be part of the solution, whilst increasing the quality and usefulness of the evidence produced from research.

The Deep End has supported 17 practices in BNSSG with Continuing Professional Development, Health Inequality Fellowships, Quality Improvement Projects as well as self-initiated research development projects.

