

BLUE GROUP : (Other Stakeholders)

IDENTIFIED STAKEHOLDER GROUPS (in addition to those covered in other workgroups)

- Citizens – people/patients
- Third sector organisations
- Think Tanks
- Clinicians
- Other NHS staff (mgmt. etc)
- Commercial sector – consultancies
- Commercial sector – Tech and Pharma
- Researchers
- Research Funders
- Regulators
- Decision Shapers (eg media)
- Advocacy Groups
- Politicians

ISSUES/PROBLEMS

Capacity, capability and understanding: Lack of capacity and capability in the NHS; Lack of understanding of basics amongst health and care decision makers; Lack of understanding of benefits amongst health and care decision makers; Poor appreciation within service of value of OR and A.A. methods; Lack of proper problem structuring

Infrastructural and cultural: Too much short-termism in NHS planning – how to overcome this? ; NHS stressed – focussed on firefighting rather than planning; Contradictory objectives across different levels of the NHS; Lack of patience in allowing solutions to take hold; Lack of a nationally recognised framework for implementation of OR/AA methods (there is no 'NICE' for service re-design)

Communication, Engagement, Co-ordination: Poor communication from OR/AA research community to decision makers and wider community; Poor at getting engagement from NHS; Lack of responsiveness within research community to pressing issues (timely responses); Lack of co-ordination between OR/AA researchers (lack of synergy, sharing, too much re-inventing wheels); Patient views are not often incorporated; Language of discourse is often dysfunctional (needs to be made accessible); Lack of access to OR/AA research (unfamiliar relative to using commercial consultancies)

Data: Data provision – Info. Governance barriers, variable quality, problems with timeliness and relevance