

Health Research Classification System:
overview of the new website and
guidance

Feb 2018
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v3: Feb18

Structure of the session

- **Background**
 - HRCS overview
 - Old site issues (age, cybersecurity, response mode)
 - Review process (qualitative / quantitative)
- **Introducing the new site**
 - New features and “where did you put that?”
- **Guidance Updates**
 - Updates to HCs
 - Updates to RAs
 - Updates and New Guidance Topics
 - Common mistakes
- **Q&A**

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HRCS
ONLINE

UK
CLINICAL
RESEARCH
COLLABORATION

Health Research Classification System

Background

UKCRC Partners



EPSRC
Engineering and Physical Sciences
Research Council

British Heart
Foundation

BBSRC
bioscience for the future

ARTHRITIS
RESEARCH UK

abhi

abpi

amrc
ASSOCIATION OF MEDICAL RESEARCH CHARITIES

The Academy of
Medical Sciences

ACADEMY OF
MEDICAL ROYAL
COLLEGES

BIA

BIS
Department for Business
Innovation & Skills

CANCER
RESEARCH
UK

E·S·R·C
ECONOMIC
& SOCIAL
RESEARCH
COUNCIL

Department for
Employment
and Learning
www.deln.gov.uk

DH Department
of Health

HIGHER EDUCATION
FUNDING COUNCIL
FOR ENGLAND

hefce

hefcw
Higher Education Funding
Council for Wales

INVOLVE
Promoting public involvement
in NHS, public health and
social care research

MHRA

MRC
Medical
Research
Council

NHS
National Institute for
Clinical Excellence

NHS
National Institute for
Health Research

THE NHS CONFEDERATION

NHS

HSC Public Health
Agency

CHIEF
SCIENTIST
OFFICE

Scottish Funding Council
Promoting better and higher education

Llywodraeth Cymru
Welsh Assembly Government

wellcome trust

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UK Health Research Analyses (2004-2014)

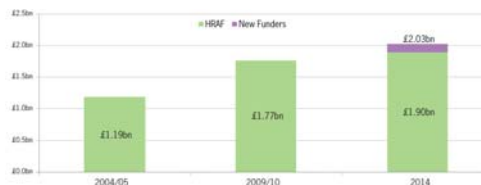
- Aims**

- Assessment of UK funding landscape
- Baselines for strategic decision-making
- Establish unified classification system (HRCS)
- Increasing participation
- Increasing efficiency
 - transition to electronic reporting
 - eventual auto-coding...?



- Last analysis**

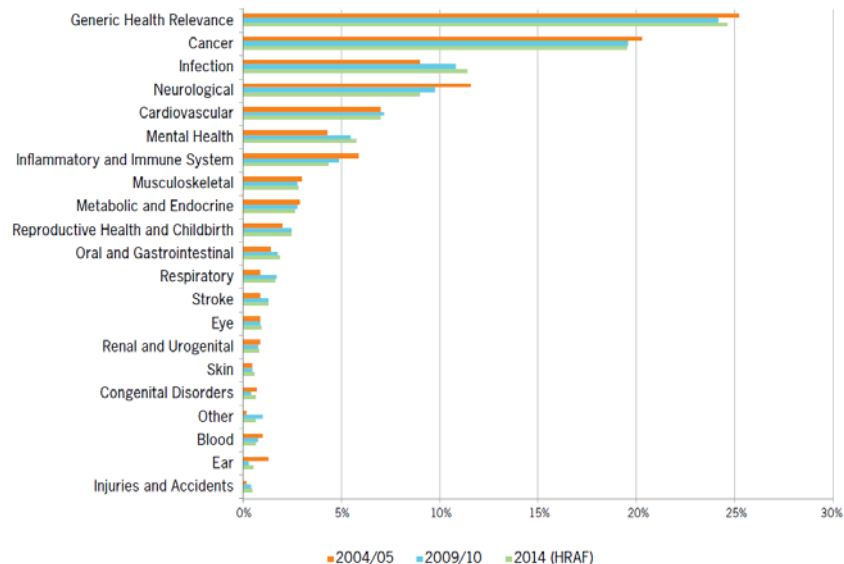
- Growth from 12 to 64 funders
- 17,021 awards
- £3.01bn spend
- Funding growth slowing
 - (CAGR 8.2% 04-09, 1.4% 09-14)



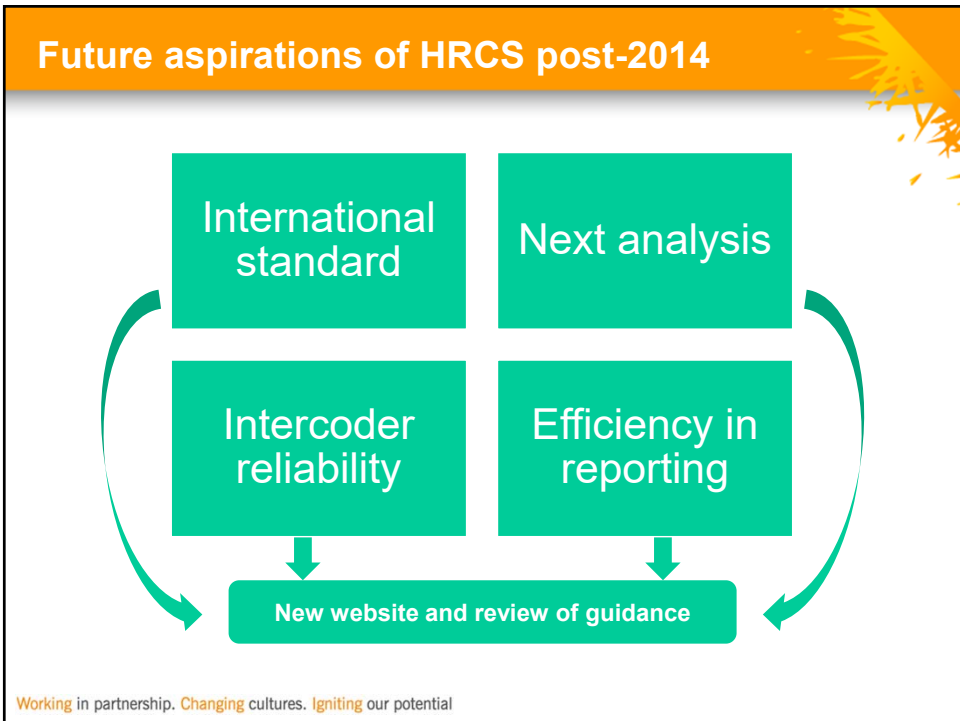
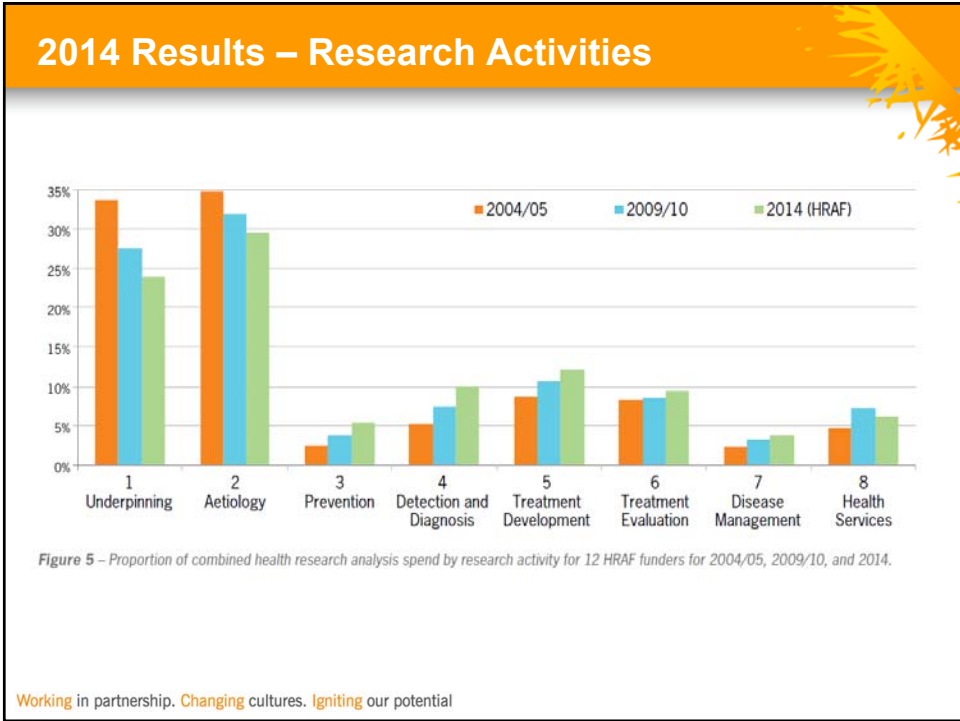
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Figure 1 – Direct spend totals for health research analyses in 2004/05, 2009/10 and 2014. HRAF data (12 funders) and New Funder data (52 funders) are shown together.

2014 Results – Health Categories



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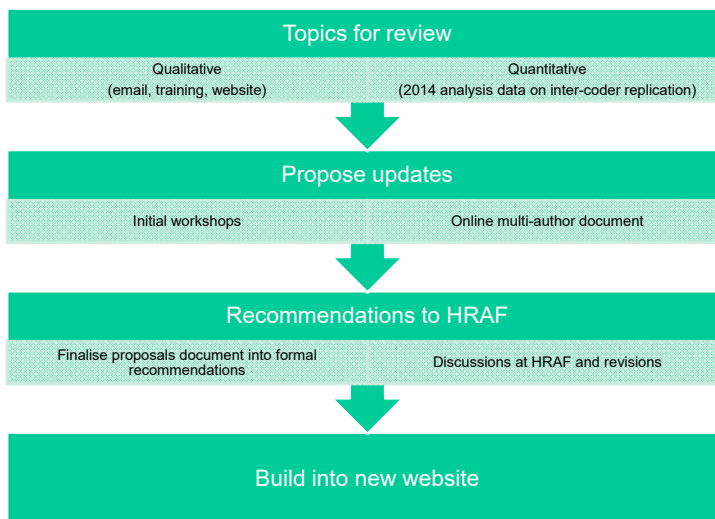
The need for new website

- Out of support
- Poor functionality
- User un-friendly
- Difficult to update



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Guidance - review and development



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**HRCS
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Health Research Classification System

Introducing the new site

Aims for the new site

- **Responsive**
 - works effectively across all devices (including mobile)
- **Modern**
 - improved look and allow more functionality
 - (e.g. data visualisation, video)
- **Unique IDs**
 - add formalized name and UID for each code
 - (HCs, RA Group, RAs, & GTs)
- **User friendly**
 - quicker access to most used pages, easier to search
- **Novice friendly**
 - make purpose and appropriate pages more clear for new users
 - “where do I go if I’m interested in... ?”

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Homepage

HRCS ONLINE
UKCRC Health Research Classification System

Home | Getting started | Health categories | Research activities | Guidance | Reports

Search

About HRCS

This website is an information resource for those who want to learn how to use the Health Research Classification System (HRCS) and a reference source and manual for those already using the system. It provides online access to all the codes and categories of the HRCS.

- You can get a copy of the HRCS manual in PDF format for review or printing.
- You can read our reports, showing how the HRCS has been used to strategically assess health research funding in the UK
- You can download the data from these reports to conduct your own meta-analyses

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Callouts:

- Revised banner gives quicker access to most used sections (primarily those for coders)
- Improved search function allows you to search the whole site and filter by section
- 'Back to Top' button allows you to easily return to main menus for longer pages (good for mobile devices)

Getting Started

HRCS ONLINE
UKCRC Health Research Classification System

Home | **Getting started** | Health categories | Research activities | Guidance | Reports

Search

Home > Getting started

Getting started

- Purpose of the HRCS
- General approach to coding
- Training

Getting started

The Health Research Classification System (HRCS) website is designed to incorporate all aspects of the use of HRCS; from the principles for coders to access to our reports to replicating the system in your own organisation. Below are some likely scenarios for users of this system who can always contact us if you have any specific questions.

- Brand new to the HRCS?
- Interested in coding?
- Are you an experienced coder?
- Looking to replicate the HRCS analysis?
- Want to learn more about how the HRCS is used?

Brand new to HRCS?

If you have never heard of the HRCS before and want to learn more, we suggest starting with the Purpose of the HRCS. This will give you some of the background to the 'why' and the 'how' of the HRCS. You may also want to

Callouts:

- Sub-menus allow easier navigation within sections, but retain access to main menu above
- Contents lists on long pages should help users quickly find the appropriate section
- Contact us form replaces info@hrsconline.net (can email me directly!)

Contact us | Sitemap | Terms and conditions | Data protection | Accessibility | Privacy policy

Guidance Topics

HRCS ONLINE
UKCRC Health Research Classification System

Home Getting started Health categories Research activities **Guidance** Reports

Home > Guidance

Guidance

The HRCS Guidance Topics contain advice about concepts which can be encountered when coding using the HRCS. They describe how codes are applied in practise under a variety of different circumstances. They are also intended to answer frequently asked questions about the system and indicate how the different parts of the HRCS relate to each other.

The guidance topics are listed in alphabetical order. We also recommend using the search function for additional terms. Remember that HRCS is not a keyword system, so consider including alternative acronyms and synonyms as part of your searches if you don't find what you need first time.

As with Health Categories and Research Activities, each HRCS Guidance Topics have official Full name, short name and unique identifier. A list of these are available [here](#).

A B C D E F G H I J K L M N O P Q R S T U V W X Y Z

A

Animal welfare and replacing animals in research

Advice on health categories

In general studies of animal welfare should be assigned the Disputed Aetiology and Other category. This applies to studies with direct focus on laboratory animals and the use of animals in human health research. The wider field of veterinary research is outside the scope of HRCS.

However, if developing models or new techniques with the aim of replacing or reducing animals in research, the Health Category should reflect the subject area of the research.

Guidance topics always accessible on main menu

New look single page and A-to-Z quick-link bar

Top Tips:

- Use A-to-Z + 'Top' button
- Single page great for Ctrl+F
- or use new site search

Note:
Currently, any updates to website guidance are highlighted in green

HRCS ONLINE

Health Research Classification System

New guidance – Health categories and research activities

What is the HRCS?

Definition

“A system for classifying and analysing health and biomedical research funding”

Purpose

- To cover the full spectrum of all types of research across all areas of health and disease
- To provide a single stable common system to give a “broad brush” overview of funding patterns

Uses

- Gives meaningful comparisons across time, between different portfolios, **and** different organisations
- Allows us to answer strategic questions about investment

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Structure of the HRCS

- Two dimensional system
 - Health Categories
 - Research Activity Codes
- Health Categories
 - All areas of health or disease
 - 21 individual categories
 - Based on **WHO International Classification of Diseases**
- Research Activity Codes
 - All types of research activity from basic to applied
 - 8 groups with 48 codes in X.X format
 - Based on cancer **Common Scientific Outline**




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Always remember...

- Coding is based on the main research objective over the lifetime of the award
 - Not an automatic keyword system
 - Does not capture all potential downstream outcomes
- Analysis of coding is linked directly to associated funding
 - Main analyses evenly distributes commitment over the lifetime of the award, based on HRCS coding
 - *Annualised Spend = (Commitment/Duration) * time active in analysis year*
 - Exact percentages with every code – equal spend weighting
 - Research management tool **not** a financial audit tool
- System designed to provide broad overview of research
 - Focus on aggregated data and even distribution of codes and funding keeps HRCS fit for purpose as overview tool

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HRCS

ONLINE

[Home](#)
[Getting started](#)
[Health categories](#)
[Research activities](#)
[Guidance](#)
[Reports](#)

<ul style="list-style-type: none"> ● Blood ● Cancer ● Cardiovascular ● Congenital Disorders ● Ear ● Eye ● Infection ● Inflammatory and Immune System ● Injuries and Accidents ● Mental Health ● Metabolic and Endocrine 	<ul style="list-style-type: none"> ● Musculoskeletal ● Neurological ● Oral and Gastrointestinal ● Renal and Urogenital ● Reproductive Health and Childbirth ● Respiratory ● Skin ● Stroke ● Generic Health Relevance ● Other
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13 changes made:

8 relatively minor
(small edits to text)

5 more substantive
(larger additions or edits to improve clarity)

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Updates – HCs - minor changes (1)

- **Blood – [link](#)**
 - Adds existing guidance on *Stroke* and thromboses
- **Cancer and neoplasms – [link](#)**
 - Name and description updated to better reflect inclusion of neoplasms, benign and non-malignant growths
- **Infection – [link](#)**
 - Adds existing guidance topics e.g. infectious diseases
- **Inflammatory and immune system – [link](#)**
 - Clarifies existing guidance on acute infection and asthma

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Updates – HCs - minor changes (2)

- **Musculoskeletal – [link](#)**
 - Adds existing guidance on pain
- **Neurological – [link](#)**
 - Provides examples to 'often but not always' and adds updated guidance on stroke
- **Reproductive health and childbirth – [link](#)**
 - Minor wording clarifications to *in utero* and sexual health
- **Respiratory – [link](#)**
 - Clarification to delineate with *Oral and Gastrointestinal*

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Updates – HCs - major changes (1)


- **Metabolic and endocrine – [link](#)**
 - Revisions to ordering of guidance
 - specific references to glands and non-metabolic products (e.g. pancreatic juices = Oral)
 - Adds guidance on sex hormones
- **Skin – [link](#)**
 - Brand new guidance (previously none)
 - Adds previous guidance on allergenic conditions and ulcers
- **Stroke – [link](#)**
 - Expanded guidance (previously very little)
 - Examples of haemorrhagic and ischaemic stroke research
 - Adds previous guidance on thromboses

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Updates – HCs - major changes (2)

- **Generic health relevance – [link](#)**
 - Better emphasises four main uses for *Generic*
 - Clarifications to 'Generic as additional code'
 - (from existing guidance on cancer, pollution, case studies)
- **Disputed Aetiology and Other – [link](#)**
 - Renamed to better emphasise main usage / avoid confusion of 'Other' being 'dustbin'
 - Restructuring of previous guidance to delineate the three suggested circumstances
 - More detail added to specific examples used

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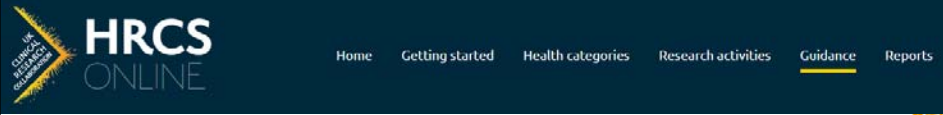
 Home Getting started Health categories Research activities Guidance Reports 	
1 Underpinning (none)	2 Aetiology (none)
3 Prevention 3.3 Nutrition - link	4 Detection and Diagnosis 4.1 Marker discovery - link 4.2 Marker evaluation - link
5 Treatment Development 5.1 Pharmaceutical - link 5.2 Cell/Gene therapy - link 5.6 Psychological - link	6 Treatment Evaluation 6.1 Pharmaceutical - link 6.2 Cell/Gene therapy - link 6.6 Psychological - link
7 Disease Management (none)	8 Health Services (none)

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Updates – Research activities

- **3.3 Nutrition**
 - Adds existing guidance on nutritional supplements
 - Inclusion of probiotics, exclusion of microbiota transplantation
- **4.1/4.2 Markers**
 - Clarifies 'discovery' in diagnostic context
 - Revision to reflect pre-clinical / clinical delineation
- **5.1/6.1 Pharmaceuticals**
 - Adds existing guidance on nutritional supplements
- **5.2/6.2 Cell / Gene therapy**
 - Adds existing guidance on stem cells and surgery
- **5.6/6.6 Psychological**
 - Provides new guidance (previously none) to help differentiate between treatment development and evaluation


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• Addition of 8 new guidance topics

- For otherwise under-represented areas of research:
 - [Cachexia & Co-morbidities](#) – follows Sequelae
 - [Liver](#) – clarifies primarily Oral, but links to Alcohol
 - [Sleep](#) – previously only briefly referenced in Neurological
 - [Substance misuse](#) – aligns with misuse guidance
- New areas of research established since last update (2009):
 - [Informatics](#) – usually RA1/2, future applications & infrastructure
 - [Stratified medicine](#) – advice to differentiate between RA4, 5 and 6
 - [Systematic reviews](#) – treatment comparison = RA6, broader services = RA8

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Updates – Guidance Topics (minor)

- **Minor revisions to seven existing guidance topics**
 - Includes renaming if ‘*Studies of...*’ and addition of UIDs
 - [Animal welfare](#) – clarifies veterinary research out of scope
 - [Cholesterol](#) – specifies HDL, LDL and triglycerides, context with diet
 - [Sequelae](#) – directly links to case studies and co-morbidities guidance
 - [Smoking](#) – advice on research activity (RA3 vs RA5/6)
 - [Sepsis](#) – all forms of sepsis, avoid other codes
 - [Stem cells](#) – removes ‘research’ from title, add reference to Regen Med
 - [Thromboses & embolisms](#) – aligns with advice for *Blood* and *Stroke*

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Updates – Guidance Topics (major)

- **Alcohol consumption (L) & Diet, obesity and nutrition (L)**
 - Reiterates addiction is *Mental Health*
 - Further highlights that standardised breakdown is **only** used where there is no other indication of disease area*
 - New advice on research activities to distinguish 3 *Prevention* (pre-disease) and 5/6 *Treatment* (treating alcohol-related disease)*
- **Biomarkers and screening - [link](#)**
 - Fully revised with examples to clarify when 2 *Aetiology*, 4 *Detection* and/or 5 *Treatment Development* most appropriate
- **Case studies and tracer examples - [link](#)**
 - Revisions to existing guidance to align decision making process with approach used for *Sequelae*

* Similar revisions made to *Smoking and tobacco*, and new *Substance misuse and addiction*

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Updates – Common mistakes

- **Common mistakes – [link](#)**
- **Original nine:**
 1. Code limits and %
 2. 'Sales pitch' confusion
 3. HCs for all symptoms / pathology
 4. HCs ≠ location of disease
 5. *Other* as 'dustbin'
 6. Congenital ≠ all hereditary disease
 7. Not using RA1 for normal functions (e.g. pain, pregnancy, ageing)
 8. RA3 ≠ re-occurrence (1° vs 2°)
 9. All trials ≠ RA6
- **Expanded to 12:**
 - **10. Use of 1.1 vs 2.1**
 - Remember RA1 vs RA2 context
 - Consider usual exceptions (Cancer/Infection, CM#7)
 - Not all studies using 'normal' comparator automatically 1.1
 - **11. Using RA5/6 for preventative interventions**
 - Risk factors for disease vs. established disease
 - Primary vs. secondary prevention
 - **12. Use of 4.1 vs 4.2**
 - 4.1 = pre-clinical, 4.2 = clinical
 - RA2 vs 4 aligned with revised Biomarker guidance

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Q&A

Any questions?

NEW WEBSITE

<http://www.hrcsonline.net/>

OR TRY NEW 'CONTACT US' OPTION

<http://www.hrcsonline.net/contact-us/>

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