## **OHE charity launch - Director of Research speech**

Thank you for joining us here tonight to celebrate OHE's establishment as a charity. This represents a significant milestone for us.

The thing that defines any organisation is its people - and it is the calibre of the OHE team, our shared intellectual ambitions, and lots of incredibly hard work that has made it possible for us to have achieved this important step in OHE's evolution as an organisation. I am hugely proud of our OHE team, the work we are doing, and the dedication, values and ideals of the people I work with - and I would like to thank them all for their role in making this possible.

Tonight we are giving ourselves a well-deserved opportunity to celebrate this accomplishment. But the establishment of OHE as a charity of course offers new directions and new opportunities. So what can you expect from OHE in the future?

We will continue to build OHE's research programme along our three principal themes: Economics of HTA, Economics of Industry, and Economics of health care systems. Our aim will be to continue to undertake **applied work of direct relevance to health policy** - but also to be undertaking **innovative methodological and theoretical work**. And we will continue to capitalise on our unique combination of health economics and industrial economics.

## We will further consolidate and focus our research efforts on six key programmes of work:

1. **Cost effectiveness thresholds:** We have just started a new project to examine the variation in expenditure and

outcomes between different clinical ('programme budget') areas. We are also planning work, with Martin Buxton, to develop a new conceptual and empirical approach to understanding the relationship between resource allocation and the cost effectiveness threshold to use in judging value for money of new health care technologies.

- 2. MCDA in health care decision making: we are currently working on a substantial proposal as part of our ongoing efforts to explore and evaluate the use of structured decision making approaches; building on work we have done around use of MCDA in orphan medicines, and our involvement in ISPOR work on best practise in MCDA and on US value frameworks.
- 3. Incentives, reimbursement, behaviours and performance: work underway this year includes a study with Hugh Gravelle on the relationship between QOF and outcomes in primary care; and we are continuing a collaboration with Carol Propper and Anita Charlesworth to explore whether there is a 'spillover effect' between private and public hospital providers in England as the result of introducing incentives which aim to improve quality of care.
- 4. Drug development and accelerated access: With grant support from the Oxford Martin School, we are exploring models of open innovation and open science, in collaboration with the prestigious Oxford Structural Genomics Consortium. We are also just about to publish work modelling the impact of different forms of adaptive pathways on patient health, company revenues, payer efficiency and budgets.

- 5. Stratified Medicine: We are working on an MRC funded project, in collaboration with the Science Policy Research Unit (SPRU) at the University of Sussex, around the appropriate use of diagnostics to tackle antimicrobial resistance. This will involve an international multi-stakeholder DCE.
- 6. Health Outcomes measurement, valuation and use: we have a substantial research programme on patient reported outcomes, including the value sets for the EQ-5D-5L which are about to be published; a project developing methods for valuing the children's version of the EQ-5D (the EQ-5D-Y) that will be used around the world to generate value sets. And, just about to start, in collaboration with Sheffield University, and funded by the MRC, an important new project developing methods for "going beyond the QALY".

Our new charity status brings **new funding opportunities** – for example, with UK research councils.

We will continue to develop an **increasingly global focus**, capitalising on our UK expertise in HTA and the economics of the life sciences industry

And OHE will be further developing its public 'voice' by offering economics commentary on health care issues in mainstream and social media.

Of course, as in any worthwhile and ambitious endeavour, there will also be challenges. OHE does not have the luxury of a university base or a bequest fund, relying largely on 'soft funding'. The task of bringing in research and consulting funds is quite a formidable challenge each year. The ongoing success of the consulting programme is especially important to our sustainability – so please do keep bringing us your work!

There has been a lot of talk about 'special relationships' recently - and of course OHE has its own 'special relationship' with ABPI. We bring value to ABPI, and our other consulting clients, as their advisors by not only being insightful but also scrupulously blunt and not simply telling clients what they want to hear. Indeed our research occasionally leads to conclusions which present uncomfortable truths. But what ABPI can count on is that OHE is not inherently anti-industry. Protecting OHE's reputation is particularly important as OHE moves forward, and the independence of our work from stakeholders' interests is something we will continue rigorously to guard. Our Advisory **Committees** play an important role in this respect and we are grateful to their members and, in particular, to Mike Drummond who chairs these committees, for their ongoing support and guidance.

The establishment of OHE as a charity marks an achievement but also, more importantly, a beginning. We are excited about the opportunities and welcome the challenges ahead!

Professor Nancy J. Devlin 1/2/17

