Public Research, Development & Innovation Sub-Committee

Tue 19 September 2023, 10:00 AM - 12:15 PM

Trust Headquarters, 2 Charnwood Court, Parc Nantgarw, Cardiff. CF15 7QZ

Agenda

10:00 AM - 10:30 AM **1. PRESENTATION**

1.1. Cardiff Cancer Research Hub (CCRH) - ATMP Trials Progress

Led by Claire Lang, CCRH Senior Research Nurse Manager

1.1 Claire Lang Presentation Final.pdf (14 pages)

10:30 AM - 10:40 AM 2. STANDARD BUSINESS

10 min

2.1. Apologies

Led by Professor Andrew Westwell, Chair of the Research, Development & Innovation Sub-Committee

2.2. In Attendance

Led by Professor Andrew Westwell, Chair of the Research, Development & Innovation Sub-Committee

- Claire Lang, CCRH Senior Research Nurse Manager (Item 1.1)
- Christopher Cotterill-Jones, Research Delivery Manager (Items 3.2; 4.1; 5.3.1)
- Kate Cleary, Velindre Futures Cancer R&D Strategy Project Manager (Observer)
- Debbie Harvey, Life Sciences Hub Cardiff (Observer)

2.3. Declarations of Interest

Led by Professor Andrew Westwell, Chair of the Research, Development & Innovation Sub-Committee

2.4. Minutes from the Public Research, Development & Innovation Committee held on the 20th July 2023

Led by Professor Andrew Westwell, Chair of the Research, Development & Innovation Sub-Committee

2.4 Public RDI Minutes 20.07.23 (Draft).pdf (15 pages)

2.5. Action Log

Led by Dr Jacinta Abraham, Executive Medical Director & R&D Lead

2.5 Public RDI Action Log 20.07.23.pdf (1 pages)

2.6. Matters Arising

Led by Professor Andrew Westwell, Chair of the Research, Development & Innovation Sub-Committee

3.1. Executive Medical Director Briefing

Led by Dr Jacinta Abraham, Executive Medical Director & R&D Lead

3.1 Executive Medical Director Briefing.pdf (11 pages)

3.2. TRUST Research, Development & Innovation Sub-Committee Risk Register Extract

Led by Christopher Cotterill-Jones, Research Delivery Manager

There are no open risks on Datix for escalation to the Research Development & Innovation Sub-Committee in line with the Trust Board Risk Appetite

10:55 AM - 11:55 AM 4. STRATEGY, PERFORMANCE AND DELIVERY

60 min

4.1. TRUST Research, Development & Innovation Performance Report

Led by Professor Robert Jones, Associate Medical Director of Research & Development and relevant leads as follows :

- Christopher Cotterill-Jones, Research Delivery Manager
- Libby Batt, Velindre Futures Cancer R&D Strategy Lead
- Jennet Holmes, Head of Innovation
- Dr Edwin Massey, Medical Director / Dr Sian James, R&D Facilitation Lead, Welsh Blood Service

4.1 RDI Performance Report FY2324 Q1 Cover Report.pdf (6 pages)

4.1 RDI Integrated Performance Report_FY2324_Q1.pdf (57 pages)

4.2. Welsh Blood Service Research, Development & Innovation Strategy Project Update

Oral Update by Dr Sian James, R&D Facilitation Lead, Welsh Blood Service

4.3. Velindre Healthcare Cancer Research Fellowship Scheme

Led by Professor Jane Hopkinson, Velindre Professor of Nursing and Interdisciplinary Cancer Care and Trustee Tenovus Cancer Care

4.3 Velindre Healthcare Cancer Research Fellowship Scheme.pdf (8 pages)

11:55 AM - 12:00 PM 5. CONSENT AGENDA

5 min

The consent part of the agenda considers routine Committee business as a single agenda item. Members may ask for items to be moved to the main agenda if a fuller discussion is required.

5.1. Consent - For Approval

There are currently no items for approval.

5.2. Consent - For Endorsement

There are currently no items for endorsement.

5.3. Consent - For Noting

5.3.1. WHC 2023/026 - NHS R&D Framework

Led by Christopher Cotterill-Jones, Research Delivery Manager

5.3.1 NHS Framework for Research and Development.pdf (22 pages)

12:00 PM - 12:05 PM 6. ANY OTHER BUSINESS

Led by Professor Andrew Westwell, Chair of the Research, Development & Innovation Sub-Committee

12:05 PM - 12:10 PM 7. HIGHLIGHT REPORT

5 min

5 min

Members to identify items to include in the Highlight Report:

- For Escalation
- For Assurance
- For Advising
- For Information

12:10 PM - 12:15 PM 8. DATE AND TIME OF THE NEXT MEETING

5 min

The Public Research, Development & Innovation Sub-Committee will next meet on the 7th December 2023 from 10:00-12.00pm at Trust Headquarters, 2 Charnwood Court, Parc Nantgarw, Cardiff.

12:15 PM - 12:15 PM 9. CLOSE

0 min

Led by Professor Andrew Westwell, Chair of the Research, Development & Innovation Sub-Committee

The Research, Development and Innovation Sub-Committee is asked to adopt the following resolution:

That representatives of the press and other members of the public be excluded from the remainder of this meeting having regard to the confidential nature of the business to be transacted, publicity on which would be prejudicial to the public interest in accordance with Section 1(2) Public Bodies (Admission to Meetings) Act 1960 (c.67).



Hwb Ymchwil Canser Caerdydd Cardiff Cancer Research Hub

A partnership between Velindre, Cardiff and Vale UHB and Cardiff University.

Partneriaeth rhwng Felindre, Bwrdd Iechyd Prifysgol Caerdydd a'r Fro a Phrifysgol Caerdydd.

Claire Lang CCRH Senior Research Nurse Manager



Bwrdd Iechyd Prifysgol Cardiff and Vale University Health Board

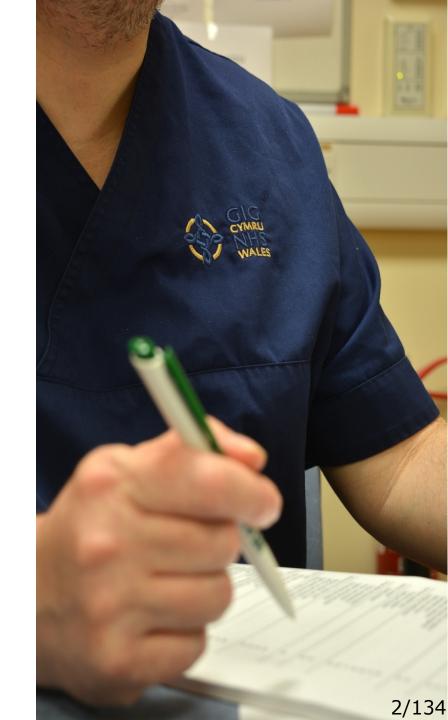






Cardiff Cancer Research Hub What services will we provide?

- A research clinical facility, managing patients receiving complex intermediate and high risk systemic research treatments
- A research service using an integrated model with solid tumour and haemato-oncology
- Cutting edge research opportunities for patients across South Wales
- A portfolio which includes:
- Early Phase Clinical Trials (EPCTs) and Advanced Cellular and non-Cellular Therapies (AT) for solid cancer and haematological malignancies
- Complex late phase research trials which require access to specialist services
- \odot Translational and reverse translational research





Getting Started – Scoping UK Cancer Models

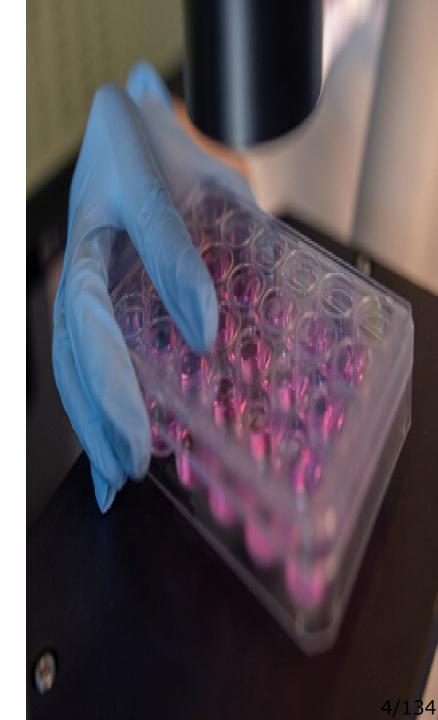
ITPA Translational Knowledge Exchange and Training (TKET) Placement Opportunity Cardiff University



The TKET Award funded a multidisciplinary team (medics, nurses, pharmacists) to undertake cell therapy placements to three cell therapy centres in the UK.

Placements were to help identify the necessary critical mass of multidisciplinary expertise to deliver cell therapies - more simply what should our infrastructure and clinical team look like?

There was a commitment to bring back learning from these visits, sharing across the research teams and supporting departments across Velindre and UHW to further inform delivery of solid tumour ATMP trials within the Cardiff Cancer Research Hub.





Cellular Therapy (ATMP) placements - Scoping visits

Bobby Robson Cancer Centre Newcastle

Guys Hospital London

The centres:

- 1. Newcastle
- 2. The Christie
- 3. Guys

Delegates:

- Senior Nurses from EP Team VCC, Haem at C&V, Haem Trials at C&V, CRF at C&V
- ATMP Nurses from CRF at C&V and Haem Trials at C&V
- Trials Co-ordinator from R&D at VCC
- Lead Pharmacists from VCC and C&V
- Consultant Medical Oncologist, VCC
- Consultant Clinical Oncologist, VCC



Challenge now is to maintain these links!







Research Centres have different ATMP delivery models

Newcastle

Bobby Robson centre for solid tumour Early Phase studies. No ATMPs delivered in this area at present.

CAR-T and TILs, given in BMT unit alongside haematology patients. Capacity 1 TILs trial and 1 CAR-T trial – 2/3 patients per trial. Trials nurses need to be involved in cell delivery, IL-2 delivery (in TILs), currently discussing induction chemotherapy – could this be done as an outpatient using the research hub chairs? **The Christie - Manchester** Bigger ATMP portfolio than Newcastle and high volume patients relative to other centres.

Solid tumour and haematology collocated with joined up working delivery staff.

Haematology staff deliver induction therapy and trial team deliver cell infusion.

Collaboration with BMT Co-ordinator to arrange new solid tumour cellular

therapy patients.

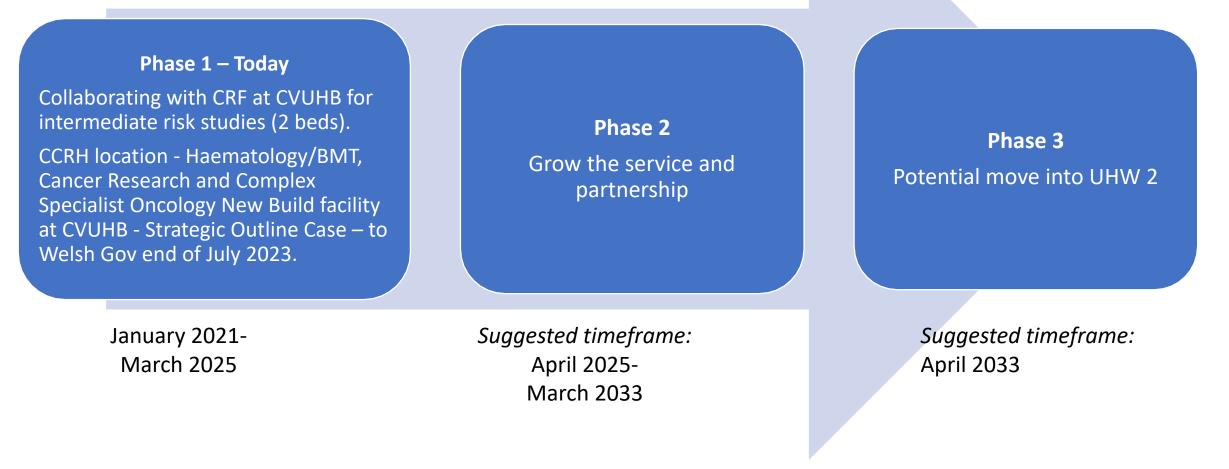
Medical teams cross cover.

Only cell therapy at present TILS, CAR-T, TCR and IECs no gene therapy yet! Hoping to deliver cell therapies at the Clinical Research Facility in the future Guys – London

Referrals from across South England. Separate Haem and Onc teams. Some haem trials at Guys but BMT moved to Kings which restricts certain activities.

All solid tumour at Guys cellular therapies at Guys – not Jacie accredited, in the process of applying for FACT accreditation as Jacie do not currently offer stand alone IEC. EP solid tumour trials delivered in the CRF including cellular therapies. EP team pay CRF for specific service (3 levels of service offered)(rent space and clinical nursing support). CRF nurses deliver chemo and cell infusions and not trials nurses.







Cardiff Cancer Research Hub – trials database

Open to recruitment

A phase I, neoadjuvant study of intravenous dosing of NG-641. Monotherapy or in combination with pembrolizumab in patients with surgically resectable squamous cell carcinoma of the head and neck.

ATMP Gene Therapy

Velindre Cancer Centre study collaborating with C&VUHB Opened December 2022

- New pathways for trial referral and capacity confirmation process to be able to treat patients at the CRF & CVUHB
- Working with the Joint Research Office to set up study
- Working with Genetically Modified Safety Committee at C&V
- Working with Pharmacy at C&V to developed new SOP for the Management, Handling and Disposal of GMO
- Working with Developed Integrated Medicine and PART at CVUHB to agreed the current Patient Emergency Care Pathway
- Working with the Haematology Nurse Education Leads -agreed a collaborative approach to training requirements across the two sites



Cardiff Cancer Research Hub

Open to recruitment

Phase 1/2 Trial, Evaluating the Safety, Tolerability and Efficacy of	FIH	SIV planned for end of February 2023
MORAb-202 a folate receptor alpha (FRα)-targeting antibody-drug		
conjugate (ADC) in Subjects with Selected Tumor Types		Velindre Cancer Centre study collaborating with C&V
		UHB. Treatment delivery at the CRF

- Drug prepared at VCC and transported to CRF Risk assessment completed and new SOP written
- Pulmonologist as CI required following safety data and amendment

Trials in set up

A Cancer Research UK Phase I/IIa Trial Of Chimpanzee Adenovirus Oxford 1 (ChAdOx1) and Modified Vaccinia Ankara Vaccines Against MAGE-A3 And NY-ESO-1 with Standard of Care Treatment	ATMP Gene Therapy O	Velindre Cancer Centre study collaborating with C&V
(Chemotherapy and an Immune Checkpoint Inhibitor) – NCCLFP patients	DUCINO	Treatment delivery at the CRF Early stages of set up GMO EOI to be submitted

A Phase 3 randomised study comparing Talquetamab in combinationHaemwith Pomalidomide, Talquetamab in combination with Teclistamab,Bi-specificand Investigators ChoiceEister and Eister an

Treatment delivery at Haem ward and CRF



Cardiff Cancer Research Hub

Trials in set up

A First-in-Human, Phase 1/2, Dose Escalation Study	Solid Tumour	C&V led in collaboration with	In set up
of BOXR1030 T cells in Subjects With Advanced	ATMP CAR-T	VCC. Treatment delivery at	Planned date to open
GPC3-Positive Solid Tumors	Therapy	BMT/Haem C&V	September 2023

- First cellular therapy to be offered to solid tumour patients in South Wales
- C&V BMT expert in cellular therapies and Clinical Research Group (CRG) taking the lead with collaboration between both partners along the patient treatment pathway. Both Senior Research Nurse Manager CCRH and Senior Nurse from CRG developing the patient pathway and preparing trial worksheets
- Trial update meeting every 2 weeks, attendees from both C&V and VCC
- Training for Oncology staff on CRS and iCANS arranged and being delivered by BMT CAR-T Nurse Specialist
- CCRH Senior Research Nurse attending BMT and shadowing clinical team and following a patient though CAR-T patient pathway
- CCRH Nurse training for the delivery of cell therapies being developed in collaboration with C&V nurse education lead.
- BMT sharing documentation

Cartitude 6	Haematology ATMP CAR-T Therapy	Treatment delivery at BMT/Haem C&V	In set up
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Taster of potential trials

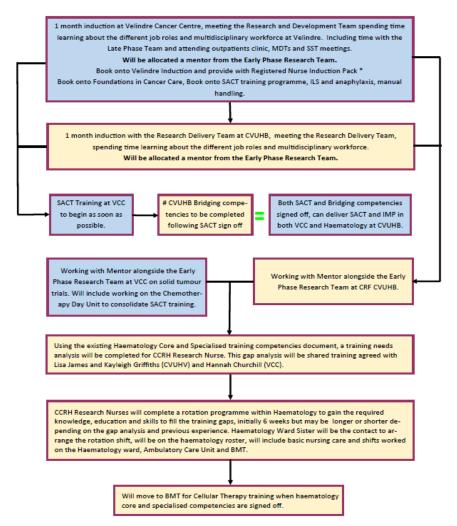
A Phase 3 Study - autologous tumour infiltrating lymphocyte (TIL) cell therapy, in combination with pembrolizumab compared with pembrolzumab alone in patients with untreated unresectable or metastatic melanoma	Solid Tumour ATMP CAR-T Therapy	VCC Lead Site. Treatment delivery at BMT/Haem C&V	Set up over next 18-24 months
A Phase 1/2 FIH Open label dose escalation study of TAK-280 in patients with unresectable locally advanced or metastatic cancer	FIH Dose Escalation	VCC Lead Site. Treatment delivery at CRF C&V	SSV October 2023 Open Q1 2024
A Phase 1-2 Master Protocol to Study ATTR-01 in Participants with Selected Advanced Solid Tumours	FIH ATMP - BSL1 GM adenovirus	VCC Lead Site. Treatment delivery at CRF C&V	Discussions with CRO September 2023
Clinical Trial Evaluating the Safety, Tolerability and Preliminary Efficacy of BNT116 Alone and in Combinations in Patients With Advanced Non-small Cell Lung Cancer (LuCa-MERIT-1)	FIH -ATMP - BNT116 mRNA cancer vaccine	VCC Lead Site. Treatment delivery at CRF C&V	Discussions with CRO September 2023
1/14			11/134



Cardiff Cancer Research Hub – Nurse training programme

Cardiff Cancer Research Hub (CCRH) Nurse Clinical Training Programme

CCRH will be participating in both Solid Tumour and Haematology cancer complex/ATMP clinical trials, the nursing workforce will be required to be skilled and trained to care for both haematology and solid tumour patients, including patients receiving clinical trial cellular therapies.



* Training included in the Registered Nurse Induction Pack includes:
 ⇒ Medicines Management (Oral and IV)
 ⇒ Hospira 360 volumetric infusion pump
 ⇒ Aseptic non-touch technique (ANTT)
 ⇒ Peripheral Venous Cannulation
 ⇒ Peripherally Inserted Central Catheters (PICCs)
 ⇒ Totally Implanted Venous Access Ports (Ports)
 ⇒ Venepuncture

⇒	Pump training at CVUHB
Nurs	es will need to provide:
⇒	Cannulation Certificate
⇒	SACT passport
⇒	Core pump training Certificate
⇒	SACT Reassessment Certificate—annual assessment required at CVUHB.
Nurs	es will need to read the following policies & sign a declaration form:
⇒	Extravasation management policy,
⇒	Spillage (via a video) and policy,
⇒	Administration (via a video)
⇒	Watch a short presentation on closed-systems.
Nurs	es will need to practice under supervision until assessment by an appointed



- Exciting research happening already in Cardiff, the collaborative partnership between Cardiff University, Velindre and Cardiff & Vale means strengthening the translational pipeline, bringing science to the bedside
- Ability to deliver complex EP haem and Onc ATMPs, building on our reputation
- ATMPs are extremely complex and require a multi skilled collaborative approach to plan, set-up and deliver
- Started to develop relationships and are collaborating with other centres in the UK, maintaining the momentum to share, knowledge, experience and learning









Email: Claire.lang@wales.nhs.uk



Bwrdd Iechyd Prifysgol Cardiff and Vale University Health Board





Ymddiriedolaeth Velindre NHS Trust



Minutes of the Velindre University NHS Trust Public Research, Development & Innovation Sub-Committee

Date 20/07/2023

Time 10:00-12:00pm

Location via Microsoft Teams

Chair Professor Andrew Westwell, Independent Member

PRESENT		
Professor Andrew Westwell	Independent Member and Research, Development & Innovation Sub-Committee Chair	AW
Vicky Morris	Independent Member	VM
ATTENDEES		
Dr Jacinta Abraham	Executive Medical Director and RD&I Lead	JA
Libby Batt	Head of Velindre Cancer R&D Strategy	LB
Matthew Bunce	Executive Director of Finance	MB
Jennet Holmes	Head of Innovation	JH
Christopher Cotterill Jones	Research Delivery Manager	CCJ
Sian James	RD&I Facilitation Lead, Welsh Blood Service	SJ
Dr Robert Jones	Associate Medical Director for RD&I	RJ
Dr Edwin Massey	Medical Director, Welsh Blood Service	EM
Alan Prosser	Director, Welsh Blood Service	AP
Peter Richardson	Head of Quality & Assurance & Regulatory Compliance, Welsh Blood Service	PR
Emma Stephens	Head of Corporate Governance	ES
Sarah Townsend	Head of Research & Development	ST
Nicola Williams	Executive Director of Nursing, AHPs and Health Science	NW
SECRETARIAT		
Sandra Cusack	Business Support Officer	SMC

1.0	PRESENTATIONS		
1.1	PROD Study Led by Felicity May, Clinical Scientist, Welsh Blood Service (WBS) Professor Andrew Westwell, Chair of the Research, Development &		
	Innovation Sub-Committee welcomed and introduced Felicity May, Clinical Scientist, Welsh Blood Service. Felicity presented an overview of her doctoral thesis work on "predictive		
	biomarkers response to desensitisation" for which Felicity has been awarded her Doctor of Clinical Science after fulfilling the five-year NHS Higher Specialist Scientist Training programme.		
	 The following key highlights were noted: Felicity's achievement placed her at the forefront of histocompatibility and immunogenetics field. A research study undertaken during the programme, looking at improving desensitisation treatments for renal patients. Sensitisation is a complex clinical problem that greatly effects transplant suitability in some patient groups. The project is a step towards understanding why some transplant patients do not respond to desensitisation treatment. Felicity's research will aid further studies which hope to minimise unnecessary treatment for kidney transplant patients and inform alternative treatments. 		
	The RD&I Sub-Committee congratulated Felicity on her tremendous achievement and on an excellent research presentation, articulating the very complex nature of the study in a very clear presentation.		
1.2	Measuring the Immune Response after Kidney Transplantation Led by Deborah Pritchard, Welsh Transplantation and Immunogenetics Laboratory Manager, Welsh Blood Service		
	Professor Andrew Westwell, Chair of the Research, Development & Innovation Sub-Committee welcomed and introduced Deborah Pritchard, Welsh Transplantation and Immunogenetics Laboratory Manager, Welsh Blood Service. Deborah presented her research project proposal on "Measuring the Immune Response after Kidney Transplantation" as part of her NHS Higher Specialist Scientist Training Programme.		
	Deborah explained that within the Welsh transplant laboratory, they provide testing and clinical advice on compatibility to support kidney transplants. Deborah's project willfocuses on how to potentially measure the immune response in patients after a kidney transplant.		

 2.0 STANDARD BUSINESS 2.1 Apologies Received: Dr Eve Gallop-Evans, Clinical Director, Velindre Cancer Services (VCS) Steve Ham, Chief Executive Professor Donna Mead, Trust Chair Rachel Hennessy, Interim Head of Operation & Service Delivery (VCS) Professor Jane Hopkinson, Velindre Professor of Nursing and Interdisciplinary Cancer Care Paul Wilkins, Interim Director, Velindre Cancer Services (VCS) 2.2 Additional Attendees: Felicity May, Clinical Scientist, WBS (<i>Item 1.1</i>) Deborah Pritchard, Welsh Transplantation and Immunogenetics Lab Manager, WBS (<i>Item 1.2</i>) Christopher Cotterill-Jones, Research Delivery Manager (<i>Item 4.1</i>) Dr James Powell, Consultant Clinical Oncologist (<i>Item 4.2</i>) Libby Crumpton, Advancing Radiotherapy Fund Manager (<i>Item 5.3.2</i>) Kate Cleary, Velindre Futures Cancer R&D Strategy Project Manager (<i>Observer</i>) Elizabeth Eddie, Executive Medical Business Manager (<i>Observer</i>) Debbie Harvey, Life Sciences Hub Cardiff (<i>Observer</i>) 2.3 Declarations of Interest Led by Professor Andrew Westwell, Chair of the Research, Development & Innovation Sub-Committee No declarations of interest were raised.
 2.1 Apologies Received: Dr Eve Gallop-Evans, Clinical Director, Velindre Cancer Services (VCS) Steve Ham, Chief Executive Professor Donna Mead, Trust Chair Rachel Hennessy, Interim Head of Operation & Service Delivery (VCS) Professor Jane Hopkinson, Velindre Professor of Nursing and Interdisciplinary Cancer Care Paul Wilkins, Interim Director, Velindre Cancer Services (VCS) 2.2 Additional Attendees: Felicity May, Clinical Scientist, WBS (<i>Item 1.1</i>) Deborah Pritchard, Welsh Transplantation and Immunogenetics Lab Manager, WBS (<i>Item 1.2</i>) Christopher Cotterill-Jones, Research Delivery Manager (<i>Item 4.1</i>) Dr James Powell, Consultant Clinical Oncologist (<i>Item 4.2</i>) Libby Crumpton, Advancing Radiotherapy Fund Manager (<i>Item 5.3.2</i>) Kate Cleary, Velindre Futures Cancer R&D Strategy Project Manager (<i>Observer</i>) Elizabeth Eddie, Executive Medical Business Manager (<i>Observer</i>) Debbie Harvey, Life Sciences Hub Cardiff (<i>Observer</i>)
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The RD&I Sub-Committee thanked Deborah on an excellent presentation and the research that was presented to the Committee.ACTION: A collaborative meeting to be arranged with relevant staff in the Welsh Blood Service and Velindre Cancer Services to explore cancer research oportunities bringing blood and cancer together. Meeting to include JA/EM/AP/RJ.SMCAW thanked the WBS colleagues for providing the RD&I Sub-Committee with their presentations and advised that they were more than welcome to stay for the remainder of the meeting.STANDARD BUSINESS

	Led by Professor Andrew Westwell, Chair of the Research, Development & Innovation Sub-Committee	
	The Research, Development & Innovation Sub-Committee APPROVED the Minutes of the Public Meeting held on the 28th February 2023 as an accurate reflection of proceedings.	
2.5	Review of Action Log Led by Dr Jacinta Abraham, Executive Medical Director and RD&I Lead	
	The Research, Development & Innovation Sub-Committee reviewed all actions identified as COMPLETE since the previous meeting and APPROVED to CLOSE . The remaining OPEN actions were reviewed and the following was agreed:	
	 1.1 (28.02.2023) Palliative and Supportive Care Research, Building On Success Presentation : Post meeting discussion to be arranged with DM/ AB/Palliative Care Team around the portfolio research methods adopted and how to take forward. Update - Currently liaising with Professor Anthony Byrne to secure meeting date by the next Committee Meeting. 	SMC
	 4.1 (15.11.2022) Activity Data Benchmarking with other UK Cancer Centres : R&D to undertake a more detailed scoping exercise with each organisation to determine resources, staff, equipment and present findings at a future meeting. Update - Benchmarking work has commenced in line with the research ambitions and the Cardiff Cancer Research Hub. This data will be included in an annual presentation and will be received at December 2023 RD&I Sub-Committee. 	ST
	 4.2.1 (15.11.2022) RDI Performance Report - Radiotherapy Research : Work is underway to identify and implement mitigation strategies to improve the Radiotherapy service's capacity in terms of research studies and the wider service, a report to be made available at the next RDI Sub-Committee Meeting. Update - Radiotherapy Trials Research Group has been established to identify issues and implement potential solutions. A Radiotherapy Research Portfolio Group has also been established to oversee the radiotherapy portfolio. Outcomes from the Radiotherapy Trials Research Group will be received at December 2023 RD&I Sub-Committee. 	ST
3.0	MAIN AGENDA	
3.1	Executive Medical Director Briefing Led by Dr Jacinta Abraham, Executive Medical Director and RD&I Lead	
L		

The Executive Medical Director's Summary reported high-level activities relating to Research, Development and Innovation that took place during Quarter 4, Financial Year (FY) 2022/23. Key highlights included :

• WELSH BLOOD SERVICE

Advancing Kidney Transplant Treatments

Felicity May awarded Doctor of Clinical Science, after fulfilling the five-year rigorous demands of NHS's Higher Specialist Scientist Training (HSST) programme.

• RESEARCH & DEVELOPMENT

Joint Executive Team Meeting

The Trust's Joint Executive Team (JET) meeting with Welsh Government was convened on 19 May 2023. Dr Jacinta Abraham presented on the work of the Trust's RD&I Division covering the work of:

- Welsh Blood Service
- Research & Development
- Innovation
- Trust performance against Health & Care Research Wales key indicators for research

The Trust's RD&I activity received positive interest at the JET meeting.

Cardiff Cancer Research Hub

A Translational Knowledge Exchange and Training (TKET) Award supported successful visits to:

- Christie NHS Foundation Trust
- Guy's & St. Thomas' NHS Foundation Trust
- Newcastle Hospitals NHS Foundation Trust

This knowledge sharing/learning has built excellent links with the outputs shaping further Trust developments. At end of March 2023, 1 "Hub" trial was open, with another 4 in set-up.

First in the World and Europe

Velindre was the first worldwide site to randomise a patient into a study investigating a new drug in Patients with Metastatic Non-Small Cell Lung Cancer (NSCLC), Squamous Cell Carcinoma of Head and Neck (SCCHN), or Metastatic Urothelial Bladder Cancer (mUBC), and remains the world's highest recruiter. Velindre was the first site in Europe to randomise a patient into a study in Patients with Stage I-III Triple-negative Breast Cancer and remains top UK recruiter.

OnCovid Publications

The Trust supported the "OnCovid: natural history and outcomes of cancer patients during the COVID19 epidemic" study. The Trust's Research Nurse Team Lead, Amanda Jackson, and Head of Research Development, Sarah Townsend, have been listed as authors in a paper

published in the Lancet Oncology journal. Amanda Jackson has also been listed in author in a paper published in Journal of Clinical Oncology.

Health and Care Research Wales: Research Framework

Health and Care Research Wales (HCRW) facilitated the co-creation of an NHS Research & Development (R&D) framework with key stakeholders through a series of workshops. The draft framework document outlining what 'research excellence looks like' within NHS organisations in Wales was published for consultation in May 2023. The Trust submitted comments in response to the consultation of the draft NHS R&D Framework by the required deadline of 01 June 2023.

BioWales 2023

JA attended the BioWales meeting on the 14th March 2023 in London. This flagship event is for the thriving and dynamic life sciences sector in Wales, providing a platform to discuss clinical innovations, medical technology and diagnostics, the event highlights NHS innovation and research collaboration opportunities. The event included a "Working with the Welsh NHS" session discussing clinical access, adoption and clinical trials.

• INNOVATION

Innovation Lead

The new Head of Innovation, Jennet Holmes, joined the Trust on 30th June 2023, from Welsh Government where she was Head of Innovation and Collaborative Partnerships. Jennet will take the lead on the implementation of the Trust's innovation strategy and ensure alignment with the Wales Innovation Strategy.

Wales Innovation Strategy

Welsh Government launched a new Innovation Strategy "Wales Innovates: Creating a Stronger, Fairer, Greener Wales" in February 2023. The new Innovation Strategy Sets out aspiration for Wales to be a leading, innovation-based nation. The strategy adopts a "mission based" attitude and will work with the government's Health and Wellbeing agenda, collaborating with various stakeholders to deliver greater value and impact for citizens.

RITA – "Talking Heads" Sub-Project

A series of two-minutes "Talking Head" videos introducing Velindre staff and their roles are being produced to giving patients opportunity to view clinical areas and the site before attending any appointments.

The Research, Development & Innovation Sub-Committee **DISCUSSED** and **NOTED** the contents of the Executive Medical Director Briefing.

3.2	Trust Research, Development and Innovation Sub-Committee Risk			
	Register Extract			
	Led by Sarah Townsend, Head of Research & Development			
	ST reported that there were no open risks recorded on Datix for escalation to July's 2023 Research, Development & Innovation Sub-Committee, in line with the Trust Board Risk Appetite.			
	The Committee referenced that it will be important as implementation plans for the Cardiff Cancer Research Hub (CCRH) are developed toidentify potential risk and mitigating strategy. ST confirmed that risks will be identified and mitigated by the CCRH Project Board and noted that items above the Trust risk threshold, will then be escalated through the governance structures of the Trust.			
	The Research, Development & Innovation Sub-Committee NOTED the Risk Register Extract for RD&I.			
	Nicola Williams left the Meeting @11.00am Edwin Massey left the Meeting @ 11.00am and rejoined 11.15am			
4.0	STRATEGY, PERFORMANCE & DELIVERY			
4.1	Trust Research, Development and Innovation Performance Annual Report 2022-23 <i>Led by Sarah Townsend, Head of Research & Development</i> with support from the relevant leads:			
	ST provided an overview on the Trust Research, Development & Innovation Performance Annual Report 2023-23. The report reflects on the four RD&I Strategic Priorities, updated for 2022-23 with key achievements as published in the Trust's IMTP including the Financial Summary and Outputs. The following key highlights were reported by their respective leads:			
	VELINDRE CANCER RESEARCH & DEVELOPMENT (R&D) AMBITIONS Led by Libby Batt, Head of Cancer R&D Strategy, Velindre Futures			
	• Implementing the Velindre Cancer R&D Ambitions – An Integrated Business Case 2023-2026 The team led with the RD&I Senior Management Business Team a successful R&D integrated bid that was approved by Velindre Charitable Funds in January 2023. The bid was ambitious in its scope, embedding different areas of research and generating new and exciting key posts within R&D. Charitable funds commended the fact that the bid brought R&D together in one integrated bid and was supportive of its ambition. There was key advice from the Charitable Funds Committee to ensure non staff costs are also factored in. There			

	is ongoing discussion around non-staff costs and the governance arrangements surrounding the bid. A date has been set to meet with VUNHST's Chair.	
	The Integrated bid includes Late Phase, Early Phase and ATMP clinical trials together with Radiotherapy research. New areas of research include Translational Research, Health Care Research (led by multi-professional groups), and Palliative and Supportive Care research. It also focuses on building capacity and capability across the organisation's workforce, addressing the development of a sustainable and robust workforce that embraces research.	
	Next steps are to appointthese new posts which includes an RD&I Communications and Engagement Officer. This key role will be part of the corporate team with a remit to support and coordinate RD&I related communications with patients, public, staff and other stakeholders , Welsh Blood Service (WBS) and Velindre Cancer Centre (VCC).	
	The Implementation team are also working with each research area to develop Action Plans, integrating the objectives from the R&D strategy with the objectives from the integrated bid, to enable each area to demonstrate measurable progress. All objectives from the bid and the strategy have strong alignment with obvious crossover and will provide a clear roadmap for R&D for the next 10 years.	
•	Radiotherapy Research The Radiotherapy Research Working Group has been set up to bring representatives from the three departments in Radiotherapy together, along with representatives from TCS. This collaborative group will share information with oversight of the Research Bunker in nVCC as well as relevant bids going into Charitable Funds and Advancing Radiotherapy Funds. From this group, a Task and Finish Subgroup has been formed to conduct an options appraisal, identifying the preferred type of machine to go into the research bunker that will facilitate and enhance the status of the nVCC/VCC/Trust as a UK/International research leader. This update was presented by Dr James Powell.	
•	Cardiff Cancer Research Hub (CCRH) A Translational Knowledge Exchange and Training (TKET) Award (funded via Cardiff University) supported successful visits, by multi- disciplinary teams, to benchmark against three UK Cancer Centres of Excellence.	
	The CCRH Senior Research Nurse led the coordination of the visits and will collate the learning from all staff groups to be circulated and presented. These visits have built excellent links and shared learning.	

This is a real success story of a collaborative effort driven by Cardiff Cancer Research Hub.	
 The CCRH has seen real measurable progress over the last 12 months. Highlights include: The draft Heads of Terms setting out the governance principles between the organisations are being finalised. This piece of work has been carried out between the R&D teams in VUNHST and the Joint Research Office CU and CVUHB. Funds have been secured to commission external experts to develop a Strategic Investment Case to holistically address how the Hub will be financially sustainable for the future. Moorhouse Consulting has been commissioned to lead this initiative. It is envisaged that a more detailed Memorandum of Understanding (MOU) which would cover the leadership arrangements and financial model for the Hub, to follow this piece of work. The team are already developing the CCRH trials portfolio. At the end of March 2023, one trial was open, and four trials were in set up. 	
Libby Crumpton joined the meeting @16.40	
 Led by Christopher Cotterrill-Jones, Research Delivery Manager Summary of Performance Indicators Overall, there has been marked improvement in the Trust run number of studies that have been RAG rated "GREEN" for the Health and Care Research Wales (HCRW) key indicators: OPEN studies – Percentage of studies recruiting to time and to target at NHS organisations in Wales with open studies being up 21% for non-commercial studies and up 11% for commercial studies. CLOSED studies – Percentage of studies recruiting to target at NHS 	
NHS organisations in Wales with closed studies being up 37% for non-commercial studies; up 21% for commercial studies since	
 Iast year. Health & Care Research Wales (HCRW) Indicators for Velindre 	

	 The Trust R&D Office, with oversight from the RD&I Operational Management Group (OMG) regularly: Interrogates the Trust's study portfolio to determine the potential barriers to delivers and develop mitigation strategies to overcome these barriers. Reviews all studies to identify underperformance and target these studies for action, developing mitigating strategies in collaboration with the Sponsors. 	
•	Local Performance Measures for Velindre University NHS Trust The tables described the Health and Care Research Wales (HCRW) key indicators and local performance measures used to manage the Trust's research portfolio.	
Le	VELSH BLOOD SERVICE (WBS) UPDATE ed by Edwin Massey, Medical Director and Peter Richardson, Head of uality & Assurance & Regulatory Compliance, Welsh Blood Service.	
•	Advancing Kidney Transplant Treatments Felicity May awarded Doctor of Clinical Science, after fulfilling the five-year rigorous demands of NHS's Higher Specialist Scientist Training (HSST) programme. Felicity undertook an NHS Research study during the programme, looking at improving desensitisation treatments for renal patients.	
	Sensitisation is a complex clinical problem that greater effect transplant suitability in some patient groups. Felicity's project is a step towards understanding why some transplant patients do not respond to desensitisation treatment. Felicity's research will aid further studies which hope to minimise unnecessary treatment for kidney transplant patients and inform alternative treatments.	
	PR highlighted the fact that the HSST programme has been carried out alongside the individual's day job and paid tribute to these individuals in what is/has been a five-year rigorous demand on them. Investing into this programme and our staff, we are now seeing the results of this programme. They are our leaders of the future and we have to continue growing our leaders in and R&D space as well as in a broader healthcare leadership space.	
•	Welsh Blood Service RD&I Dashboard / Open Projects Portfolio 15 open projects are progressing well as described in the dashboard. 30 publications, various types including peer reviewed journals, presentations, thesis over the last 12 months.	
0 SI	he RD&I Sub-Committee acknowledged and congratulated the Team n a tremendous and impressive Annual Report which included a ubstantial publication list e.g 29 pages of publications, in leading nternational journals, including posters and presentations. The Trust	

	library services were commended as the source of the comprehensive list. It was also noted that individuals who have a 'split' affiliation i.e. Cardiff University and VUNHST andit was agreed that these multiple affiliations should be recorded as such.			
	The RD&I Sub-Committee DISCUSSED and NOTED the RD&I Integrated Performance Report – Annual Report 2022-23 (including Quarter 4 update).			
4.2	Option appraisal for the research bunker in nVCC – Update			
	Oral Update by Dr James Powell, Consultant Clinical Oncologist			
	Dr James Powell gave a brief overview of the project to date on behalf of Dr John Staffurth (JS). JS previously presented to the Executive Management Board in April 2023, with the recommendation to present and update at the next RD&I Sub Committee.			
	The aim of this project was to identify the type of machine that would be best placed to go into the research bunker and the new Velindre Cancer Centre (nVCC).			
	 The aims are : The key strategic aim of the research bunker is 'to install a machine that would facilitate and enhance the status of the nVCC/VCC/Trust as a research leader.' A long-term aim is to achieve successful CRUK RadNet Centre Status if this opportunity arises again. At this stage of the process, we are predominantly aiming to identify the type of machine that will best achieve this key strategic aim. We are not aiming to identify the vendor or provider although there may be vendor-specific issues that need to be appraised in the future. We are not making a financial or business assessment at this stage, although the perceived ability to support fund-raising initiatives are considered. Business appraisals will consider both capital and revenue costs, possible manufacturers and practical aspects of installation. Process :			
	 attached to each technology and present a SWOT to the group; and agree which should not be taken forward. Re-format groups to the short-list and present a more comprehensive assessment of their relative merits; score against a pre-defined scoring matrix to create a clinical preference order. Assess the clinical options against non-clinical factors. Feasibility, space, cost, politics, Politics We presented a SWAT appraisal back to the group and then we agreed together as a group, which option should be taken forward. 			

	The Radiotherapy Working Group looked at eight different technologies i.e. proton beam radiotherapy (PBT), FLASH delivery system (a way of delivering very high doses of radiotherapy in single single doses), SRS (stereotactic specialized linear accelerator), Adaptive MRI Linac, Adaptive CT based Linac, Contact Radiotherapy, Heavy ions and Non- ionising ablative options. Of these eight technologies discussed, a short list of four were considered to be best placed to take forward, the PBT, MRI Linac, FLASH Technology and the SRS/SABR technology. The next step was for this work to be signed off at another Group.	
	JA added that the purpose of this presentation was to update the Committee on the current status of the research bunker work. There will be decisions to be made via EMB and the governancestructures of the Trust and the RD&I Sub Committee will be kept informed of progress	
	The RD&I Sub-Committee thanked James for the update and added that this is a hugely exciting process and the Committee would like to be kept up to date on future developments.	
	ACTION: Slide presentation to be circulated to Committee Members.	SMC
	The RD&I Sub-Committee DISCUSSED and NOTED the Update on the Option Appraisal for the research bunker in nVCC.	
4.3	Welsh Blood Service Research, Development & Innovation Strategy Project Update Led by Dr Sian James, R&D Facilitation Lead, Welsh Blood Service	
	SJ provided an update to the RD&I Sub-Committee on the progress of the WBS RD&I Strategy and key highlights following the Stakeholder Event.	
	SJ firstly informed the Committee that today the Component Development and Research Laboratory led by Chloe George has been awarded a HCRW research grant, this project is around getting cold store platelets into emergency care and will be set up alongside Swansea Bay University Health Board and EMT Ambulance Service.	
	 SJ updated on the Stakeholder Event held in April 2023 as follows: Time issues addressed by resource and increasing deadlines Internal Stakeholder engagement ongoing External Stakeholder engagement late summer Stage Two completion expected at end of year 	
	EM explained that as an action from the stakeholder event, SJ is going to engage with the North Wales staff face to face.	

	JA congratulated WBS on a well-constructed event and how they are approaching this initiative. JA enquired whether an internal event held at the Velindre Cancer Centre would be of interest, to updating staff about the approach but also what is happening in the Welsh Blood Service to bring research communities together. ACTION: Explore integration and new opportunities within WBS / VCC / CU / CCRH with Haematology colleagues as part of the strategy work. Conversations outside of the meeting to perhaps establish a working group to include EM/RJ/JA. The RD&I Sub-Committee thanked Sian and the Team for the recent Stakeholder Event. The RD&I Sub-Committee DISCUSSED and NOTED the WBS RD&I Strategy Project Update.	EM/RJ/JA	
5.0	CONSENT AGENDA The consent part of the agenda considers routine Committee business as a single agenda item. Members may ask for items to be moved to the main agenda if a fuller discussion is required.		
5.1	CONSENT - FOR APPROVAL		
	No Items for Approval.		
5.2	CONSENT - FOR ENDORSEMENT		
	No Items for Endorsement.		
5.3	CONSENT - FOR NOTING		
5.3.1	 Draft Summary of the Minutes from the Private Research, Development & Innovation Committee held on the 28th February 2023 Led by Professor Andrew Westwell, Chair of the Research, Development & Innovation Sub-Committee The Research, Development & Innovation Sub-Committee NOTED the Summary Minutes of the Private Meeting held on the 28th February 2023. 		
5.3.2	 Advancing Radiotherapy Fund (ARF) Highlight Report Led by Libby Crumpton, Advancing Radiotherapy Fund Manager LC gave an additional update following the Advancing Radiotherapy Fund Meeting held on the 19th July 2023 as follows: PEARL Study A request to repurpose monies that has already been awarded to the Study to support CTR staff costs was made. The request is to 		

6.0	 ensure efficient completion of the trial and only to support staff costs, Tom Rackely, study lead was asked to address some queries/concerns to the Board. Pathos Study A new 2yr Clinical Fellow appointment to this trial. The RD&I Sub-Committee DISCUSSED and NOTED the Highlight Report from the Advancing Radiotherapy Fund Meeting held on the 26th April 2023 and the additional update. HIGHLIGHT REPORT TO THE TRUST QUALITY SAFETY & PERFORMANCE COMMITTEE Members to identify items to include in the Highlight Report to the Trust Board: 	
	 Board: For Escalation For Advising For Assurance For Information It was agreed by the RD&I Sub-Committee that a Highlight Report to the Quality, Safety & Performance Committee would be prepared in readiness for its September 2023 Meeting. 	
	ACTION: ST to support the development of a draft Highlight Report for approval by the Research, Development & Innovation Sub-Committee Chair.	ST
7.0	ANY OTHER BUSINESS	
	 National Institute for Health and Care Research AW briefed the RD&I Sub-Committee of the significant expansion of NIHR research funding. The announcement expands the list of NIHR research programmes that are available to researchers in Scotland, Wales and Northern Ireland. The move will boost cross-UK research and help increase access to research for people in the three devolved administrations. From autumn 2023, health and social care researchers and in some cases SMEs in the devolved administrations (DAs) will have increased access to health and social care research funding via the National Institute for Health and Care Research. The move has been agreed following consultation with the Scottish Government's Chief Scientist 	
	Office, Health and Care Research Wales and Health and Social Care Research & Development in Northern Ireland. The NIHR, through DHSC, has had an arrangement with the DAs since 2008 based on investments from each nation that has allowed research	

	 hosts (including universities and research active NHS organisations) in the three nations to apply for NIHR funding from four research programmes (Health Technology Assessment (HTA), Health and Social Care Delivery Research (HSDR), Public Health Research (PHR), and Efficacy and Mechanism Evaluation (EME)) that would otherwise only be open to English research hosts. Further information can be found on the following Hyperlink: <u>https://www.nihr.ac.uk/news/researchers-in-scotland-wales-and- northern-ireland-to-access-further-nihr-research-funding/33914</u> 	
8.0	DATE AND TIME OF THE NEXT MEETING:	
	The next meeting of the Research, Development and Innovation Sub- Committee will be held in person on the 19th September 2023 at 10.00am at Trust Headquarters, Nantgarw.	
9.0	CLOSE	

	PUBLIC RESEARCH, DEVELOPMENT & INNOVATION SUB-COMMITTEE ACTION LOG				
Minute Number	Action		Progress to Date	Target Date	Status (Open/Closed)
		Actions agreed at th	e Committee on the 20th July 2023		
1.1	WBS Presentations : A collaborative meeting to be arranged around activities through the Welsh Blood Service and Velindre Cancer Services, exploring cancer research oportunities, bringing blood and cancer together. Meeting to include JA/EM/AP/RJ	JA / EM / AP / RJ	UPDATE 19/09/2023 Currently liaising with relevant leads to secure meeting date.	20/09/2023	OPEN
4.2	Circulate the Option Appraisal for the research bunker presentation to Committee Members.	SMC	Circulated to the RDI Committee.	20/09/2023	CLOSED
4.3	WBS RD&I Strategy - Explore integration and new opportunities within WBS / VCC / CU / CCRH with Haematology colleagues as part of the strategy work. Conversations outside of the meeting to perhaps establish a working group to include EM/RJ/JA.	JA / EM / RJ	UPDATE 19/09/2023 Currently liaising with relevant leads to secure meeting date.	20/09/2023	OPEN
7.0	Support the development of a draft RDI Highlight Report to the next meeting of the Strategic Development Committee, for approval by the Committee Chair.	ST	This has been drafted and submitted to the September 2023 Meeting of the Quality, Safety & Performance Committee and Strategic Development Committee.	20/09/2023	CLOSED
		Actions agreed at the C	Committee on the 28th February 2023		
1.1	Palliative Care Presentation : Post meeting discussion to be arranged with DM/ AB/Palliative Care Team on actuallly how could we exploit the portfolio of palliative care research and some of the methods adopted and how to take forward.	AB / SMC	UPDATE 19/09/2023 Meeting arranged for the 02/10/2023 with the Trust Chair, Professor Anthony Byrne and the Marie Curie Research Team to discuss some of the projects that they are working on of relevance to Velindre and with a particular emphasis on patient decision making/health literacy (and realist methodological approaches), patient reported outcomes and brain tumour research.	04/07/2023	CLOSED
		Actions agreed at the Co	ommittee on the 15th November 2022		
4.1	Activity Data Benchmarking with other UK Cancer Centres : R&D to undertake a more detailed scoping exercise with each organisation to determine resources, staff, equipment and present findings at a future meeting.	ST	UPDATE 04/07/2023 Benchmarking work has commenced in line with the research ambitions and the Cardiff Cancer Research Hub. This data will be included in the annual presentation and be received at December's RD&I Sub-Committee.	07/12/2023	OPEN
4.2.1	RDI Performance Report - Radiotherapy Research : Work is underway to identify and implement mitigation strategies to improve the Radiotherapy service's capacity in terms of research studies and the wider service, a report to be made available at the next RDI Sub-Committee Meeting.	ST	UPDATE 04/07/2023 Radiotherapy Trials Research Group has been established to identify issues and implement potential solutions. A Radiotherapy Research Portfolio Group has also been established to oversee the radiotherapy portfolio. Outcomes from the Radiotherapy Trials Research Group will be presented and be received at December's RD&I Sub-Committee.	07/12/2023	OPEN



Ymddiriedolaeth GIG Prifysgol Felindre Velindre University NHS Trust

RESEARCH, DEVELOPMENT & INNOVATION SUB COMMITTEE

Executive Briefing to RD&I Sub-Committee

DATE OF MEETING	19 September 2023	
PUBLIC OR PRIVATE REPORT	Public	
IF PRIVATE PLEASE INDICATE REASON	NOT APPLICABLE - PUBLIC REPORT	
REPORT PURPOSE	DISCUSSION	
IS THIS REPORT GOING TO THE MEETING BY EXCEPTION?	NO	

PREPARED BY	Sarah Townsend, Head of R&D Christopher Cotterill-Jones, Research Delivery Manager	
PRESENTED BY	Jacinta Abraham, Executive Medical Director	
APPROVED BY	Jacinta Abraham, Executive Medical Director	

EXECUTIVE SUMMARY	 This is the Executive Medical Director's briefing to the RD&I Sub-Committee. This briefing provides a summary and high-level update on the Research, Development, & Innovation activities taking place in Quarter 1 of Financial Year 2023/24, along with noteworthy items from the RD&I environment since the last meeting of the Sub-Committee. This briefing includes summarised updates on the following items: National Cancer Research Institute.
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	 Welsh Government / Health and Care Research Wales – NHS Research Framework. NHS Research Delivery in Wales. Health and Care Research Wales Finance Policy. RD&I Integrated Business Case 2023/26. Research Fellowships. Welsh Blood Service – COVID19 Sero-Surveillance. Welsh Blood Service partnering with Ministry of Defence.
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RECOMMENDATION / ACTIONS	The RD&I Sub-Committee are requested to note for DISCUSSION this Executive Medical Director's briefing summarising Research, Development & Innovation activity of Q1, FY2023/24 and noteworthy items occurring since the
	Sub-Committee's last meeting.

Date		
Bullo		
SUMMARY AND OUTCOME OF PREVIOUS GOVERNANCE DISCUSSIONS		
NOT APPLICABLE – This is the Executive Medical Director's briefing to the RD&I		
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7 LEVELS OF ASSURANCE

NOT APPLICABLE – This is the Executive Medical Director's briefing to the RD&I Sub-Committee.

ASSURANCE RATING ASSESSED BY BOARD DIRECTOR/SPONSOR	Select Current Level of Assurance
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APPENDICES	
None	

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1. SITUATION

This is the Executive Medical Director's briefing to the RD&I Sub-Committee. This briefing provides a summary and high-level update on the Research, Development, & Innovation activities taking place in Quarter 1 of Financial Year 2023/24.

Additionally, this briefing includes any important or noteworthy information from the Research, Development, and Innovation environment since the previous RD&I Sub-Committee.

2. BACKGROUND

2.1 National Cancer Research Institute

The National Cancer Research Institute (NCRI) has announced that they will be winding down.

NCRI was established to formalise connections between organisations funding research into cancer, to identify where cancer research was most needed. However, the cancer research landscape has since matured with the original NCRI purposes achieved or becoming business as usual by Partners.

NCRI consulted widely with stakeholders last year to produce a strategy fit for the future. This identified a compelling set of priorities yet raised significant questions around the sustainability of NCRI's operating and funding model. The NCRI have not been able to resolve these in such a way that would deliver long-term viability for the NCRI. Therefore, the Board reluctantly decided that the risk of operational failure was too great for the NCRI to continue.

The Board is now working on the required steps to wind down the charity, identifying and securing our assets; financial, data, and intellectual property. As part of this exercise the NCRI will be consulting with Partners and other stakeholders, as to who might take forward some of NCRI's activities.

2.2 Welsh Government / Health and Care Research Wales - NHS Research Framework

In July 2023, Welsh Government issued Welsh Health Circular WHC/2023/026 titled "NHS Framework for Research and Development – Research matters – What excellence looks like in NHS Wales".

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Health and Care Research Wales published a new Research and Development (R&D) Framework, in a drive to embed and integrate research into all aspects of health and care services in NHS Wales.

Trust representatives attended HCRW facilitated workshops with stakeholders on the co-creation of this framework. Additionally, the Trust commented on the framework document during the consultation period.

The framework document has been published as consistent national guidance to NHS organisations and where its key features are expected to form a core part of organisational culture. It is relevant to all those involved in the design, management, and delivery of healthcare in the Welsh NHS including the NHS boards and all executives, those with a responsibility for strategy development, clinical leads, professional leads, heads of service, operational managers as well as dedicated research staff such as R&D Directors and leads, research managers and the research workforce.

2.3 NHS Research Delivery in Wales

At a Health and Care Research Wales Board meeting convened in May 2023, a paper presented an account of the history and context of the NHS Research Delivery landscape in Wales, an analysis of the performance and state of play. This included an update on a range of UK-wide initiatives and sets out how Health and Care Research Wales and NHS organisations intend to move forward to drive improvements in NHS research delivery.

The data presented at this meeting showed that the Trust has a greater cost per patient recruited when compared to other Wales NHS organisations, based on Health and Care Research Wales's financial formula applied to all NHS organisations.

However, this data does not compare like for like with the Trust's research activity being primarily cancer specialty and other Welsh NHS organisations having a wide spectrum of disease specialties. Additionally, this data does not take into account that cancer research is often complex, recruiting smaller specific and targeted populations, and are delivered over long study durations.

Therefore, this does not necessarily reflect the Trust conduct of high-quality and high-impact research providing opportunities to patient, donors, and service users, they perhaps would not be able to access elsewhere.



As a result of discussion with Health and Care Research Wales, our excellent work has been recognised and the Trust has been invited to be members of a Task and Finish group to ensure that data presented better represents the first-rate research of the Trust.

2.4 Health and Care Research Wales Finance Policy

In July 2023, the Trust along with all other Welsh NHS organisations managing Research and Development (R&D) income and expenditure were asked to comment on the Health and Care Research Wales's revisions to the "All-Wales NHS R&D Finance Policy" template.

The main changes made to the revised version included updating terminology and references, amendments to the deferred income rules, and amendments to NHS Support Costs funding to reflect the needs-based funding model.

Health and Care Research Wales will consider received comments and publish a revised template to be implemented from 01 April 2024. The Trust will be required to update its NHS R&D Finance Policy in line with the revised Health and Care Research Wales, once published.

2.5 Research Fellowships

2.5.1 RCBC First into Research Fellowships

Fran Lewis, Radiotherapy Planning Radiographer, is the first therapeutic radiographer from the Trust to have been awarded a highly competitive Research Capacity Building Collaboration Wales (RCBC Wales) First into Research fellowship.

Fran's fellowship project would determine if the Trust could take the Toyota working culture and implement it into Velindre Cancer Centre's (VCC) Radiotherapy department, The aim is to examine what the two organisations may have in common and what the differences are; to determine if the Kaizen way of working could benefit the department. The project work will involve discussions with staff from both the Trust and Toyota, including a joint focus group with people from all levels of Toyota and VCC's Radiotherapy Department.

RCBC Wales is funded by the Welsh Government through Health and Care Research Wales with the purpose to increase research capacity to nurses, midwives, pharmacists, allied health professionals and healthcare scientists across Wales.



This is achieved through a number of schemes that include First into Research (FiR), PhDs and Post-Doctoral fellowships. The FiR fellowship is targeted at newcomers to research or those wishing to develop confidence in research, to work on projects seeking answers to questions relevant to their professional field.

2.5.2 Velindre Healthcare Cancer Research Fellowships

Ceri Stubbs, Clinical Project Lead for Clinical Oncology, was awarded a Velindre Healthcare Cancer Research Fellowship in the first ever Velindre Healthcare Research Fellowship Scheme call for applications. Ceri was awarded a fellowship for her project "Exploring the help seeking behaviours of Cancer patients who become unwell whilst undergoing Systemic Anti-Cancer Treatment (SACT) and require admission to a regional cancer centre."

Applications received were considered by the award panel, chaired by Nicola Williams – Executive Director of Nursing, Allied Health Professionals & Health Science, in July 2023.

The awarded fellowship will support Ceri in preparing a PhD application to the School of Healthcare Sciences, Cardiff University and refining the proposal.

The Velindre Healthcare Cancer Research Fellowship is an investment by the Velindre Charity to enable Velindre Cancer Service to strengthen leadership in quality cancer care. The fellowships will be awarded to nurses and therapists (i.e., cancer allied health professionals, pharmacists and radiographers), staff groups historically underserved by education and opportunity to drive evidence-based service improvement and innovation.

A second call for applications to the Velindre Healthcare Research Fellowship Scheme is due to close in September 2023.

2.6 Welsh Blood Service – COVID19 Sero-Surveillance

Wales's blood donor sero-surveillance for COVID19 came to an end, with 85,167 samples from 51,159 individuals being made available for testing, along with anonymised demographic information from the donors supplied by Welsh Blood Service (WBS) and Public Health Wales. The hard-working teams responsible for delivering this work included, WBS's Automated Testing, Business Intelligence, Transport, and Research Facilitation along with colleagues from Public Health Wales.

Welsh Government used this information to plan for prevention and control COVID19 in Wales. The collaborative project is an excellent example of the strength and diversity of



skills within the healthcare scientist sector of NHS Wales, combining expertise of many disciplines including epidemiology, biochemistry, virology, serology, and blood transfusion sciences.

The project was an NHS Awards finalist in 2022, recognising the different skill sets and facilities, working together to add value to Wales's COVID19 response. The project also achieved publication in a high impact journal, Eurosurveillance (https://www.eurosurveillance.org/content/10.2807/1560-7917.ES.2023.28.19.2200473).

2.7 Welsh Blood Service partnering with Ministry of Defence

The Welsh Blood Service's Component Development and Research Laboratory is partnering with the Ministry of Defence to investigate a cutting-edge new development in blood components for military use.

The Defence Medicine Department is focused on improving the shelf life and functionality of blood so it can be provided to patients closer to the casualty during battle.

Platelets are a blood component that control clotting and help prevent bleeding, gathering at the site of the injury to create a plug that seals damaged blood vessels. Platelets help to prevent blood loss and are often needed during emergencies, particularly in major trauma patients. The UK's current guidelines for storing platelets are at room temperature under continuous agitation. This method only allows for a relatively short shelf life of seven days, with the equipment needed difficult to access in pre-hospital settings, such as field hospitals.

An alternative method to platelet storage is in cold temperatures. Dr Tom Scorer, a Consultant Haematologist at Derriford Hospital in Plymouth and a Royal Navy Haematologist, has partnered with the Component Development & Research Laboratory to investigate cold-stored platelets.

Storing platelets in cold temperatures would provide many benefits, including a longer shelf life, no need for continuous agitation, and reduced infection risk for patients receiving a platelet transfusion. Cold stored platelets also have the potential to improve effectiveness at stopping bleeding. This ongoing research is a promising step towards a more efficient supply chain, particularly for the military. Storing platelets in cold temperatures would allow them to be easily transported to field hospitals without the need for large equipment to agitate them.



The Component Development & Research Laboratory have ambitions to conduct a future clinical trial in this area of research. This exciting development could significantly improve the functionality, shelf life and accessibility of platelets in an emergency setting.

3. ASSESSMENT

This briefing to the RD&I Sub-Committee summarises and provides an update of the activities of the Trust's Research, Development and Innovation service for Quarter (Q) 1 of the Financial Year (FY) 2023/24 and other noteworthy items that the Executive Medical Director wishes to highlight to the RD&I Sub-Committee.

4. SUMMARY OF MATTERS FOR CONSIDERATION

The RD&I Sub-Committee is asked to note for **DISCUSSION** the summarised information of the Research, Development, and Innovation service's activity and other noteworthy items reported in this Executive Medical Director's briefing to the RD&I Sub-Committee.

5. IMPACT ASSESSMENT

TRUST STRATEGIC GOAL(S)		
Please indicate whether any of the matters outlined in this report impact the Trust's strategic goals:		
YES - Select Relevant G		
If yes - please select all relevant goals	S:	
 Outstanding for quality, safety, ar 	nd experience	
 An internationally renowned provider of exceptional clinical services that always meet, and routinely exceed expectations 		
 A beacon for research, development, and innovation in our stated areas of priority 		
 An established 'University' Trust which provides highly valued knowledge for learning for all. 		
 A sustainable organisation that plays its part in creating a better future for people across the globe 		
RELATED STRATEGIC RISK - 10 - Governance TRUST ASSURANCE FRAMEWORK (TAF) For more information: STRATEGIC RISK DESCRIPTIONS		
QUALITY AND SAFETY	Select all relevant domains below	



IMPLICATIONS / IMPACT	Safe 🛛
	Timely 🗆
	Effective 🖂
	Equitable 🛛
	Efficient 🖂
	Patient Centred 🛛
	 a) The Executive Medical Director's briefing summarises key Research, Development, and Innovation activities and other noteworthy research related items, demonstrating the Trust being a research supportive organisation. b) The Executive Medical Director's briefing demonstrates the Trust's commitment to undertaking research that is evidence based and appropriate, offering equal opportunities to all patients that is respectful and responsive to their treatment needs. c) The briefing also displays the Trust's dedication to conducting research in a safe and effective manner, making the best use skills and resources available.
SOCIO ECONOMIC DUTY ASSESSMENT COMPLETED:	Not required
For more information: https://www.gov.wales/socio-economic-duty- overview	NOT APPLICABLE – This is the Executive Medical Director's briefing to the RD&I Sub-Committee.



TRUST WELL-BEING GOAL IMPLICATIONS / IMPACT	A Healthier Wales - Physical and mental well- being are maximised and in which choices and behaviours that benefit future health If more than one Well-being Goal applies, please list below: If more than one wellbeing goal applies, please list below: Click or tap here to enter text
FINANCIAL IMPLICATIONS / IMPACT	Yes - please Include further detail below, including funding stream
	There is a potential financial impact in not demonstrating the Trust's commitment to the strategic goal "A beacon for research, development, and innovation in our stated areas of priority" as it could jeopardise the funding received from Health and Care Research Wales along with other non-commercial/commercial sources. No direct financial implications from this paper.
EQUALITY IMPACT ASSESSMENT For more information: https://nhswales365.sharepoint.com/sites/VEL_1	Yes - please outline what, if any, actions were taken as a result
<u>ntranet/SitePages/E.aspx</u>	Click or tap here to enter text. The Equality Impact of Trust RD&I Integrated Performance Report for FY2023/24 Quarter 1 has been considered and there are no matters of concern to raise.
ADDITIONAL LEGAL IMPLICATIONS / IMPACT	There are no specific legal implications related to the activity outlined in this report.
	Click or tap here to enter text



Velindre University NHS Trust

6. RISKS

ARE THERE RELATED RISK(S) FOR THIS MATTER	No
WHAT IS THE RISK?	
WHAT IS THE CURRENT RISK SCORE	
HOW DO THE RECOMMENDED ACTIONS IN THIS PAPER IMPACT THIS RISK?	
BY WHEN IS IT EXPECTED THE TARGET RISK LEVEL WILL BE REACHED?	
ARE THERE ANY BARRIERS TO IMPLEMENTATION?	
All risks must be evidenced and co	nsistent with those recorded in Datix
All risks must be evidenced and consistent with those recorded in Datix.	



RESEARCH, DEVELOPMENT & INNOVATION SUB COMMITTEE

Research, Development, and Innovation Integrated Performance Report for Financial Year 2023/24, Quarter 1

DATE OF MEETING	19 September 2023	
PUBLIC OR PRIVATE REPORT	Public	
IF PRIVATE PLEASE INDICATE REASON	NOT APPLICABLE - PUBLIC REPORT	
REPORT PURPOSE	DISCUSSION	
IS THIS REPORT GOING TO THE MEETING BY EXCEPTION?	NO	

PREPARED BY	Sarah Townsend, Head of Research & Development Christopher Cotterill-Jones, Research Delivery Manager
PRESENTED BY	Jacinta Abraham, Executive Medical Director
APPROVED BY	Jacinta Abraham, Executive Medical Director

	Trust Research, Development, & Innovation (RD&I) prepare an integrated performance report at the end of each financial year's quarter.
EXECUTIVE SUMMARY	This report summarises and provides an update of the activities of the Trust's Research, Development, and Innovation service during the financial year.



	RD&I Sub-Committee are requested to note for
RECOMMENDATION / ACTIONS	DISCUSSION the RD&I Integrated Performance
	Report for Financial Year 2023/24, Quarter 1.

GOVERNANCE ROUTE	
List the Name(s) of Committee / Group who have previously	Date
received and considered this report:	
RD&I Operational Management Group	25 Jul 2023
Executive Management Board	31 Aug 2023

SUMMARY AND OUTCOME OF PREVIOUS GOVERNANCE DISCUSSIONS

The RD&I Integrated Performance Report for Financial Year 2023/23 Quarter 1 was discussed at the RD&I Operational Management Group's meeting convened on 25 July 2023, with some corrections identified. The requested corrections were made prior to onward submission through the RD&I governance arrangements.

The report was received by the Executive Management Board at the meeting convened on 31 Augusts 2023. The Trust's Chief Executive acknowledged the important work being undertaken by the RD&I Service. The report was noted for discussion prior to onwards submission to the RD&I Sub-Committee.

7 LEVELS OF ASSURANCE	
NOT APPLICABLE	
ASSURANCE RATING ASSESSED BY BOARD DIRECTOR/SPONSOR	Select Current Level of Assurance

APPENDICES	
1	Research, Development, and Innovation (RD&I): Integrated Performance Report



1. SITUATION

At the meeting convened on 20 July 2023, the RD&I Sub-Committee received the RD&I Integrated Performance Report – Annual Report (including Q4 update) for FY2022/23.

The RD&I Sub-Committee receives the Trust's RD&I Integrated Performance Report quarterly throughout the financial year.

2. BACKGROUND

The governance arrangements are that the Trust RD&I Integrated Performance Report is received or considered at the following groups and committees:

- Research, Development, and Innovation Operational Management Group.
- Executive Management Board.
- Research, Development, and Innovation Sub-Committee.

3. ASSESSMENT

The Trust RD&I Integrated Performance Report summarises and provides an update of the activities of the Trust's Research, Development, and Innovation service for Quarter (Q) 1 of the Financial Year (FY) 2023/24.

The report provides an update of activities against the Trust's Research, Development, and Innovation service's strategic priorities:

- Strategic Priority 1: The Trust will drive forward the implementation of its Cancer Research & Development ambitions.
- Strategic Priority 2: The Trust will maximise the Research & Development ambitions of the Welsh Blood Service.
- Strategic Priority 3: The Trust will implement the Velindre Innovation Plan.
- Strategic Priority 4: The Trust will maximise collaborative opportunities locally, nationally & internationally.

Additionally, the activity of cross-cutting themes and corporate work areas supporting Research, Development and Innovation are reported.

4. SUMMARY OF MATTERS FOR CONSIDERATION

The RD&I Sub-Committee are requested to note for **DISCUSSION** the Trust's RD&I Integrated Performance Report for Financial Year 2023/24, Quarter 1.

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5. IMPACT ASSESSMENT

TRUST STRATEGIC GOAL(S)	
Please indicate whether any of the matters outlined in this report impact the Trust's	
strategic goals: YES - Select Relevant 0	Scale below
If yes - please select all relevant goals	
 Outstanding for quality, safety, and experience 	
 An internationally renowned provider of exceptional clinical services 	
that always meet, and routinely exceed expectations	
•	ment, and innovation in our stated $igtarrow$
areas of priority	
	st which provides highly valued □
 knowledge for learning for all. A sustainable organisation that place 	ays its part in creating a better future \Box
for people across the globe	Δy is part in ordating a better future \Box
···· [···[····························	
RELATED STRATEGIC RISK -	10 - Governance
TRUST ASSURANCE	
FRAMEWORK (TAF) For more information: <u>STRATEGIC RISK</u>	
DESCRIPTIONS	
QUALITY AND SAFETY	Yes -select the relevant domain/domains from
IMPLICATIONS / IMPACT	the list below. Please select all that apply Safe ⊠
	Safe ⊠ Timely □
	Effective 🖂
	Equitable
	Efficient 🖂
	Patient Centred
	a) The Integrated Performance Report
	describes the Research, Development, and
	Innovation activities demonstrating the Trust
	being a research supportive organisation. b) The Integrated Performance Report
	demonstrates the Trust's commitment to
	undertaking research that is evidence based
	and appropriate, offering equal opportunities
	to all patients that is respectful and
	responsive to their treatment needs.
	 c) The report also displays the Trust's dedication to conducting research in a safe



	and effective manner, making the best use skills and resources available.
SOCIO ECONOMIC DUTY ASSESSMENT COMPLETED:	Not required
For more information: https://www.gov.wales/socio-economic-duty- overview	
TRUST WELL-BEING GOAL IMPLICATIONS / IMPACT	A Healthier Wales - Physical and mental well- being are maximised and in which choices and behaviours that benefit future health
	If more than one Well-being Goal applies, please list below:
	If more than one wellbeing goal applies, please list below:
FINANCIAL IMPLICATIONS / IMPACT	Yes - please Include further detail below, including funding stream
	There is a potential financial impact in not demonstrating the Trust's commitment to the strategic goal "A beacon for research, development, and innovation in our stated areas of priority" as it could jeopardise the funding received from Health and Care Research Wales along with other non-commercial/commercial sources.
	No direct financial implications from this paper.
EQUALITY IMPACT ASSESSMENT For more information: https://nhswales365.sharepoint.com/sites/VEL_I	Yes - please outline what, if any, actions were taken as a result
ntranet/SitePages/E.aspx	The Equality Impact of Trust RD&I Integrated Performance Report for FY2023/24 Quarter 1 has been considered and there are no matters of concern to raise.
ADDITIONAL LEGAL IMPLICATIONS / IMPACT	There are no specific legal implications related to the activity outlined in this report.



Ymddiriedolaeth GIG Prifysgol Felindre Velindre University NHS Trust

Click or tap here to enter text

6. RISKS

ARE THERE RELATED RISK(S) FOR THIS MATTER	No
WHAT IS THE RISK?	NOT APPLICABLE
WHAT IS THE CURRENT RISK SCORE	
HOW DO THE RECOMMENDED ACTIONS IN THIS PAPER IMPACT THIS RISK?	
BY WHEN IS IT EXPECTED THE TARGET RISK LEVEL WILL BE REACHED?	
ARE THERE ANY BARRIERS TO IMPLEMENTATION?	
All risks must be evidenced and co	nsistent with those recorded in Datix.

APPENDIX 1.

Trust Research, Development, & Innovation (RD&I) Integrated Performance Report for FY2023/24, Quarter 1



Ymddiriedolaeth GIG Prifysgol Felindre Velindre University NHS Trust

Welsh Blood Service Gwasanaeth Gwaed Cymru



Velindre University NHS Trust Research & Development Department Velindre Cancer Centre Velindre Road, Whitchurch Cardiff, CF14 2TL

1/57

E-bost/Email: Velindre.R&DOffice@wales.nhs.uk Ffôn/Tel: 029 2061 5888 Research, Development & Innovation

Integrated Performance Report

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ABBREVIATIONS

A&E AABB ACTAH AML BEST-C BMT BVLS BYS CCRH CSO CU		Accident and Emergency Association for the Advancement of Blood and Biotherapies Acute Cancer Treatment At Home Acute Myeloid Leukaemia Biomedical Excellence for Safer Transfusion Collaborative Blood and Marrow Transplant Beyond Visual Line of Sight ByYourSide Cardiff Cancer Research Hub Complex Specialist Oncology
CVUHE	2	Cardiff University Cardiff and Vale University Health Board
Dato-D		Datopotamab Deruxtecan
DGH	//u	District General Hospital
DNA		Deoxyribonucleic acid
DPIA		Data Protection Impact Assessment
EMB		Executive Management Board
EMRTS	6	Emergency Medical Retrieval and Transfer Service
FY		Financial Year
gBRCA	۱.	germline Breast Cancer
HCRW		Health and Care Research Wales
HER		Human Epidermal growth factor Receptor
HR		Hormone Receptor
IG		Information Governance
IMTP		Integrated Medium-Term Plan
ISBT		International Society of Blood Transfusion
KPI		Key Performance Indicator
LIP		Local Information Pack
LPMS		Local Portfolio Management System
NHS		National Health Service
NIHR		National Institute for Health and Care Research
ODP		Open Data Platform
PCIP PET		Planned Care Innovation Programme
PET		Positron Emission Tomography Doctor of Philosophy
PI		Principal Investigator
Q		Quarter
QL		Quality of Life
R&D		Research and Development
RAG		Red, Amber, Green
RD&I		Research, Development, and Innovation
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Date Page		ember 2023

RMGRadiotherapy Management GroupRT-TPGRadiotherapy Trial Portfolio GroupRT-TPGRadiotherapySACSnowdonia AerospaceSCCStudent Selected ComponentsSOCStrategic Outline CaseTCSTransforming Cancer ServicesTLWCThis is Living With CancerTNBCTriple-Negative Breast CancerUKUnited KingdomVCCVelindre Cancer CentreVUNHSTVelindre University NHS TrustWASTWelsh Ambulance ServiceWBSWelsh Blood Service	RICH RIIC	Regional Innovation Coordination Hub Research, Innovation, Improvement Coordinating
RT-TPGRadiotherapySACSnowdonia AerospaceSCCStudent Selected ComponentsSOCStrategic Outline CaseTCSTransforming Cancer ServicesTLWCThis is Living With CancerTNBCTriple-Negative Breast CancerUKUnited KingdomVCCVelindre Cancer CentreVUNHSTVelindre University NHS TrustWASTWelsh Ambulance Service NHS TrustWBSWelsh Blood Service	_	
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SCCStudent Selected ComponentsSOCStrategic Outline CaseTCSTransforming Cancer ServicesTLWCThis is Living With CancerTNBCTriple-Negative Breast CancerUKUnited KingdomVCCVelindre Cancer CentreVUNHSTVelindre University NHS TrustWASTWelsh Ambulance Service NHS TrustWBSWelsh Blood Service	RT-TPG	Radiotherapy
SOCStrategic Outline CaseTCSTransforming Cancer ServicesTLWCThis is Living With CancerTNBCTriple-Negative Breast CancerUKUnited KingdomVCCVelindre Cancer CentreVUNHSTVelindre University NHS TrustWASTWelsh Ambulance Service NHS TrustWBSWelsh Blood Service	SAC	Snowdonia Aerospace
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TLWCThis is Living With CancerTNBCTriple-Negative Breast CancerUKUnited KingdomVCCVelindre Cancer CentreVUNHSTVelindre University NHS TrustWASTWelsh Ambulance Service NHS TrustWBSWelsh Blood Service	SOC	Strategic Outline Case
TNBCTriple-Negative Breast CancerUKUnited KingdomVCCVelindre Cancer CentreVUNHSTVelindre University NHS TrustWASTWelsh Ambulance Service NHS TrustWBSWelsh Blood Service	TCS	Transforming Cancer Services
UKUnited KingdomVCCVelindre Cancer CentreVUNHSTVelindre University NHS TrustWASTWelsh Ambulance Service NHS TrustWBSWelsh Blood Service	TLWC	This is Living With Cancer
VCCVelindre Cancer CentreVUNHSTVelindre University NHS TrustWASTWelsh Ambulance Service NHS TrustWBSWelsh Blood Service	TNBC	Triple-Negative Breast Cancer
VUNHSTVelindre University NHS TrustWASTWelsh Ambulance Service NHS TrustWBSWelsh Blood Service	UK	United Kingdom
WASTWelsh Ambulance Service NHS TrustWBSWelsh Blood Service	VCC	Velindre Cancer Centre
WBS Welsh Blood Service	VUNHST	Velindre University NHS Trust
	WAST	Welsh Ambulance Service NHS Trust
	WBS	Welsh Blood Service
WTE Whole time Equivalent	WTE	Whole time Equivalent

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INTRODUCTION

The Research, Development & Innovation (RD&I) Integrated Performance Report format has been amended. The report now reflects the RD&I strategic priorities published in the Velindre University NHS Trust's Integrated Medium-Term Plan (IMTP) that has been updated for 2022 to 2025.

These priorities that support the Trust's strategic goal to be "A beacon for research, development and innovation" are as follows:

STRATEGIC PR	RIORITIES
Priority 1	The Trust will drive forward the implementation of its Cancer Research and Development Ambitions 2021-2031.
Priority 2	The Trust will maximise the Research and Development ambitions of the Welsh Blood Service.
Priority 3	The Trust will implement the Velindre Innovation Plan.
Priority 4	The Trust will maximise collaboratively opportunities locally, nationally, and internationally.

The report includes the progress of work and key achievements for Q1 of FY2023/24 demonstrating activity against these strategic priority areas, the cross-cutting themes that support these areas and Trust RD&I corporate work, for example Finance.

STRATEGIC PRIORITY 1: The Trust will drive forward the implementation of its Cancer Research & Development Ambitions

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1 Velindre Cancer R&D Ambitions

1.1 Implementing Cancer R&D Ambitions – An Integrated Business Case 2023/26

Since the successful bid to Velindre Charitable Funds in January 2023, which brought in 49.9WTE new posts (this includes co-funded posts) over three years, the team have been working with research leaders and managers to bring in the new members of staff into RD&I. Some of the new posts include key roles within the Cardiff Cancer Research Hub, a new RD&I Communications and Engagement Officer and Clinical Research Fellows. Work is also underway on developing leadership sessions within R&D, new posts in Palliative and Supportive Care research and Health Care Research (led by multi-professional groups).

As the different posts are filled and research work commences, the team will continue to engage with colleagues to feedback on progress of the objectives set out in the bid. This will form the basis of regular reports to Charitable Funds, along with the associated financial spend including the identification and mitigation of any risks. Highlight reports will continue to be provided to the RD&I Sub Committee.

The RD&I Senior Core Team have especially been convened and will have oversight and management of the Integrated Bid. The main principle is to achieve the objectives described in the Integrated Bid in the most efficient and advantageous way, remaining mindful that charitable funding is a scarce and precious resource for which accountability must be maintained. The team will also aim to demonstrate that we are delivering on our objectives over the next 3 years via regular reporting, to secure confidence with Velindre Charitable Funds for subsequent bids.

2 Cardiff Cancer Research Hub (CCRH)

2.1 Strategic Investment Case

Following securing funding from Velindre Charitable Funds, Moorhouse, an external management consultancy firm, were appointed to develop a Strategic Investment Case for the Hub. Since their appointment at the end of April, they have actively engaged with colleagues throughout Velindre University NHS Trust (VUNHST), Cardiff & Vale University Health Board (CVUHB), and Cardiff University to inform this key piece of work. As well as setting up one-to-one meetings with a wide variety of clinical and academic colleagues, they have also facilitated face-to-face workshops (one in May 2023, one in June 2023 and one in July 2023) where there has been great engagement and real enthusiasm shown for this key project.

The Strategic Investment Case will define a partnership as well as an investment model which will map out a clear programme plan, including milestones, dependencies, and joint areas of responsibility. Moorhouse are socialising this in

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2.2 Cardiff & Vale Strategic Outline Case

The team have been working closely with Cardiff & Vale UHB colleagues on the Strategic Outline Case (SOC) which identifies the required infrastructure for the Hub.

Plans are to co-locate the Hub with essential specialised cancer services: the Blood and Marrow Transplantation Services (BMT) and the Complex Specialist Oncology Services (CSO). CVUHB are leading the SOC and the team in Velindre have been working collaboratively with colleagues in CVUHB and Haematology to state the vital role that the Hub plays in delivering cutting-edge treatment to patients in Wales. Once the SOC has gone through the internal governance processes in CVUHB, it will then be submitted to Welsh Government in late July 2023.

2.3 Cell Therapy Site Visits

As reported previously, a cohort of nurses and pharmacists from VCC and CVUHB visited UK Cell Therapy centres earlier this year. As well as developing excellent links with these UK Centres, the knowledge gained from these visits has been used to inform the proposed integrated operational workforce model of the Hub. A further outcome of these visits has been that the information gathered (patient management pathways, trial activity and workforce model) has been vital in shaping the Strategic Investment Case as well as the Strategic Outline Case to provide a strong evidence base to the forecast planning. Next steps will be to implement a plan of disseminating the knowledge learnt from these visits and to continue to nurture the networks with the centres.

Further development on the Cardiff Cancer Research Hub in this period includes:

- A small team with representatives from across the three organisations met with the design agency to shape the concept of the Hub's branding and sought consultation from the 3 respective partner organisations.
- Continuation with the approval process of Heads of Terms and submission to relevant Trust /Health Boards of each of the tripartite partners.
- The CCRH trial portfolio has two trials open to recruitment and another four trials in set up.
- A training matrix is being developed which includes Translational research training.

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3 Nursing & Interdisciplinary Research3.1 Velindre Healthcare Cancer Research

Theme - Velindre Healthcare Cancer Research

HIGHLIGHTS:

Velindre University NHS Trust Nursing Strategy focuses on three priorities, which include,

Priority 3: Nurses will maximise research, innovation and continual improvement opportunities.

Velindre Healthcare Cancer Research Fellowship Scheme is in setup. Comms out, application deadline 3 $^{\rm rd}$ July 2023 for an Autumn launch of Velindre Introduction to Research Awards and Velindre PhD Studentship.

CHALLENGE:

Pressures on clinical services across healthcare disciplines within the Velindre Cancer Centre

NEXT STEPS:

To establish a **Velindre Healthcare Cancer Research Fellowship Funding Panel** with representation across Velindre Cancer Centre Departments. The Panel will be progressed to a Board that will have terms of reference to include the management and monitoring of the Velindre Healthcare Cancer Research Fellowship Scheme.

CROSS CUTTING RESEARCH OPPORTUNITIES:

Velindre Cancer Centre nurses and therapies staff seek a **forum for cross** - **department sharing** of research ideas and collaboration on research projects.



3.2 Velindre Healthcare Cancer Research Fellowship

Velindre University NHS Trust's Cancer Research and Innovation Strategic Leadership Group launched the first ever Velindre Healthcare Cancer Research Fellowships Scheme. This is an investment by the Velindre Charity to enable Velindre Cancer Centre to strengthen leadership in quality cancer care.

The fellowships were open to cancer allied health professionals, nurses, pharmacists and radiographers, staff groups historically underserved by education and opportunity to drive evidence-based service improvement and innovation.

Applicants could apply for entry at one of three levels with the deadline for submission being 03 July 2023.

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4 Velindre Healthcare Cancer Research Q1 Performance Report - July 2023

	КРІ	Q1	Q2	Q3	Q4	TOTAL 2023/24
Research leadership						
	Velindre led Healthcare Cancer Research Projects (in progress / completed)	6 in progress 2 completed				
	Velindre collaboration on externally led Healthcare Cancer Research (in progress / completed)	3 in progress 2 completed				
	Nurse, allied health professional, pharmacist, radiographer Chief Investigators	3				
	Trials nurse Principal Investigators	0				
	Other healthcare cancer research Principal Investigators	1				
Study recruitment at Velindre Cancer Centre						
	Patient recruitment	0				
	Family carer recruitment	0				
	Velindre staff recruitment	10				
Funding						
	Applications for external grant funding	0				

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	KPI	Q1	Q2	Q3	Q4	TOTAL 2023/24
	Applications for internal research project funding	1				
Capacity building						
	Education event/workshop	5				
	Small grant projects in progress	3				
	Velindre Introduction to Research awards	In set up				
	Velindre Healthcare PhD Studentship awards	In set up				
	Velindre Healthcare Post doc awards	In set up				
	Velindre healthcare research maturity score	Tool in development				
Research		•				
dissemination						
	Publications	4				
	Presentations	7				

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5 Performance Indicators

5.1 Summary of performance indicators

During financial year (FY) 2022/23 the was marked improvement in the Trust hosted number of studies that had been RAG rated "Green" for the Health and Care Research Wales (HCRW) key indicators. However, during quarter 1 of FY2023/24 those figures for Velindre University NHS Trust have changed as follows:

- OPEN studies Percentage of studies recruiting to time and to target Velindre University NHS Trust for open studies being down 2% for non-commercial studies and down 10% for commercial studies.
- CLOSED studies Percentage of studies recruiting to target at Velindre University NHS Trust for closed studies being up 40% for non-commercial studies; down 38% for commercial studies.

The HCRW key indicators for Velindre University NHS Trust are shown in the tables that follow, where:

- R = Red, Recruitment less than 70% of expected (based on site target and time elapsed).
- A = Amber, Recruitment between 70% and 100%.
- G = Green, Recruitment greater than 100% of expected.
- W = White, Non-recruiting studies i.e., those active studies that do not intend recruit participants. Non-recruiting studies are identified as:
 - The 'Site Recruitment Target' is set as zero.
 - The site is a non-recruiting site (i.e., the 'Location Type' is set as 'Unknown' or 'Shared-care site').
 - The Site Status is set as 'Open No Recruitment Activity'.
 - The 'Recruitment Activity Upload Method' is set as 'N/A', meaning that the way participants join the study does not meet the definition of recruitment (i.e., participant provides informed consent and is counted towards the sample size of the study).

The following tables describe:

- The external Health and Care Research Wales (HCRW) key indicators that are seen by other NHS organisations in Wales.
- The local performance measures adopted by the Trust and used to manage the Trust research portfolio:

Health and Care Research Wales key indicators that are seen by other NHS organisations in Wales:

• HCRW key indicator: Percentage of Health and Care Research Wales Portfolio studies recruiting to time and to target at NHS organisations in Wales for open studies.

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- HCRW key indicator: Percentage of Commercially sponsored studies recruiting to time and to target at NHS organisations in Wales for open studies.
- HCRW key indicator: Percentage of Health and Care Research Wales Portfolio studies recruiting to time and to target at NHS organisations in Wales for open studies for closed studies.
- HCRW key indicator: Percentage of Commercially sponsored studies recruiting to time and to target at NHS organisations in Wales for open studies for closed studies.

Local performance measures adopted by the Trust and used to manage the Trust's research portfolio:

- Local performance measure: Number of studies opened (Velindre University NHS Trust)
- Local performance measure: Number of participants recruited into studies (Velindre University NHS Trust)
- Local performance measure: Time taken from receipt of Local Information Pack (LIP) to recruitment of first participant into Health and Care Research Wales non-commercial Portfolio Studies.
- Local performance measure: Percentage of non-recruiting Health and Care Research Wales non-commercial Portfolio studies within NHS organisations (Velindre University NHS Trust)
- Local performance measure: Percentage of non-recruiting Health and Care Research Wales Portfolio commercially sponsored studies within NHS organisations (Velindre University NHS Trust)

Health and Care Research Wales have recently invited NHS organisations to contribute to a Task & Finish Group, of limited members, to review their Performance Dashboard considering items such as:

- What pages NHS organisations find helpful and those that are not helpful.
- What would NHS organisations might like to have added and removed.
- What NHS organisations need clarifying or further defining to ensure that data is contextualised.

Velindre University NHS Trust's Research Delivery Manager has been invited to join the Task & Finish Group.

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5.2 Health & Care Research Wales indicators for Velindre University NHS Trust

The following Trust data is taken from the Health and Care Research Wales 2023/24 Performance Dashboard.

5.2.1 C3 OPEN: Percentage of Health and Care Research Wales non-commercial Portfolio studies recruiting to target (VUNHST)

Metric: C3 OPEN: Percentage of Health and Care Research Wales Portfolio studies recruiting to time and to target at NHS organisations in Wales.			Target/Measure: 100%			Indicator:		YES		
How is metri	c measured:	measure Open stur • 1 • 2 • 0 Calculation RAG ratio	against this key indic dies are measured u RED: % recruitment AMBER: % recruitme GREEN: % recruitme	cator. sing a RAG ratir is 30% behind th ent is up to and in ent is equal to or – % time elapsed	g system e % time o ncluding 3 is greater	as follows: elapsed (e.g., RA 0% behind % tim than % time elap	agement System (LPMS) a AG Rating = -30% or less) e elapsed (e.g., RAG Ratin psed (e.g., RAG Rating = ≥ sed = $\text{Number of days open (at or Number of days planned)$	ng = < -1% ≥ -299 0%) rganisation <u>)</u>		(ODP) to
	Overall		Quarte		r 1 Quarter 2		2 Quarte	r 3	Quarter 4	
	Red	34%		Red	37%	Red	Red	Red		
Previous	Amber	8%	Current	Amber	5%	Amber	Amber	Amb		
Financial	Green	44%	Financial	Green	42%	Green	Green	Gree	-	
Year	Black	-	Year	Black	-	Black	Black	Blac		ļ
	Silver	-		Silver	-	Silver	Silver	Silve		
	Purple	-		Purple	-	Purple	Purple	Purp		
	White	14%		White	16%	White	White	Whit	te	
	Previou	sly Identifie	d Issues			Previous Act	tion Plan(s) to Improve	Tar	get Date	Status
			ruly reflect the Trust IST does not fit the F		Group to represer to ensure	o review HCRW F ntation is to be inc	of establishing a Task & F Performance Dashboard. V Cluded on the Task & Finis and proposed changes co	UNHST FY20 h Group	023/24	
	Diec	ussion of Is	sues			Action Plan(s)	to Improve Performance		Target I	Date
	DISC								3	

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	Trust R&D service, with oversight from the Operational
The data shows that there has been a:	Management Group, regularly:
 3% increase in the studies rated RED, 	 Interrogates the Trust's study portfolio to determine
 3% reduction in the studies rated AMBER 	the potential barriers to delivery and remaining on
 2% reduction in the studies rated GREEN 	target.
 2% increase in the studies rated WHITE, where these studies are classed as non-recruiting studies. 	 Reviews all studies to identify underperformance and target them for action, developing mitigating strategies in collaboration with the Sponsors.
As previously discussed, given that the Trust's study portfolio includes studies with small recruitment targets over long study durations, it is possible for the Trust's studies to be RAG rated red for many years or fluctuate in its RAG rating.	

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5.2.2 C4 OPEN: Percentage of Health and Care Research Wales Portfolio commercially sponsored studies recruiting to target (VUNHST)

Metric:			Commercially spons rget at NHS organis		Targ	et/Measure:	100%		Performance dicator:	YES
How is metric	: measured:	measure a Open stud F A Calculation RAG ratin	against this key indic lies are measured u RED: % recruitment i MBER: % recruitme GREEN: % recruitme	eator. sing a RAG ratir is 30% behind th ent is up to and i ent is equal to or – % time elapsed	ng system ne % time ncluding 3 is greater I	as follows: elapsed (e.g., RA 0% behind % tim than % time elap	agement System (LPMS) a AG Rating = -30% or less) be elapsed (e.g., RAG Rationsed (e.g., RAG Rating = $\frac{1}{10000000000000000000000000000000000$	ing = < -1% ≥ 0%)		(ODP) to
	Overa	all		Quarte	r 1	Quarter	2 Quarte	er 3	Quarte	er 4
	Red	47%		Red	47%	Red	Red		Red	
Previous	Amber	8%	Current	Amber	13%	Amber	Amber		Amber	
Financial	Green	32%	Financial	Green	22%	Green	Green		Green	
Year	Black	-	Year	Black	-	Black	Black		Black	
	Sliver	-		Sliver	-	Sliver	Sliver		Sliver	
	Purple	-		Purple		Purple	Purple		Purple	
	White	13%		White	19%	White	White		White	
	Previous	sly Identifie	d Issues			Previous Ac	tion Plan(s) to Improve		Target Date	Status
			uly reflect the Trust' ST does not fit the H		Group to represer to ensur	o review HCRW F	s of establishing a Task & Performance Dashboard. \ cluded on the Task & Finis and proposed changes ca	/UNHST sh Group	Q2 FY2023/24	
	Discu	ussion of Is	sues			Action Plan(s)	to Improve Performanc	е	Target I	Date
6 = 7 studies; W =	24 data set includ = 6 studies.		es, (R = 15 studies; A s the same, and ther		Group to Trust R8	o review the HCR	ion on the HCRW Task & W Performance Dashboa oversight from the Operati	rd, the		

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 5% increase in the studies rated AMBER 10% decrease in the studies rated GREEN 6% increase in the studies rated WHITE, where these studies are classed as non-recruiting studies. As previously discussed, given that the Trust's study portfolio includes studies with small recruitment targets over long study durations, it is possible for the Trust's studies to be RAG rated red for many years or fluctuate in its RAG rating.	 Interrogates the Trust's study portfolio to determine the potential barriers to delivery and remaining on target. Reviews all studies to identify underperformance and target them for action, developing mitigating strategies in collaboration with the Sponsors.
--	--

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5.2.3 C3 CLOSED: Percentage of Health and Care Research Wales non-commercial Portfolio studies recruiting to target (VUNHST)

	,,,											
Metric:		o studies ree	of Health and Care cruiting to target at l		Targ	et/Measure:		100%	Performance dicator:	YES		
How is metric	measured:	measure a Closed stu F Calculatio RAG ratin	$\mathbf{g} = \%$ recruitment	cator. using a RAG rat is < 100%			gement S	ystem (LPMS) aı	nd the Ope	n Data Platform	(ODP) to	
	Overa	ll	0	Quarte	r 1	Quarter	r 3	Quarter 4				
Previous	Red	40%	Current	Red	0%	Red		Red		Red		
Financial Year	Green	60%	Financial Year	Green	100%	Green		Green		Green		
Teal	White	-	i eai	White	-	White		White		White		
		ly Identifie				Previous Ac	Target Date	Status				
			uly reflect the Trust ST does not fit the H		Group to represer to ensure	re in the process review HCRW F station is to be ind that the review t's requirements.	Performant	ce Dashboard. V the Task & Finisl	UNHST n Group	Q2 FY2023/24		
	Discu	ission of Is	sues			Action Plan(s)	Target	Date				
W = 0 studies. The data there has • 40% decr		es rated RE		= 4 studies;	studies. the Oper	7, no action is red However, the Tru rational Managen Interrogates the the potential bar target. Reviews all stud	ust R&D se nent Group Trust's stu riers to de	ervice, with overs o, regularly: udy portfolio to do livery and remain	ight from etermine ning on			
There has been no classed as non-rec		udies rated	WHITE, where thes	se studies are		and target them strategies in coll	for action,	developing mitig	gating			

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5.2.4 C4 CLOSED: Percentage of Health and Care Research Wales Portfolio commercially sponsored studies recruiting to target (VUNHST)

Metric:	C3 CLOSED F recruiting to ta	rget at NHS	f Commercially spo organisations in Wa	ales.		et/Measure:		100%	In	Performance dicator:	YES	
How is metric	: measured:	measure a Closed stu • R • G Calculatior RAG ratin	$\mathbf{g} = \%$ recruitment	ator. using a RAG rati is < 100%			gement S	ystem (LPMS) ai	nd the Ope	n Data Platform	ODP to	
Previous	Overa		Current	Quarter		Quarter 2	2	Quarter 3		Quarte	er 4	
Financial	Red	50%	Financial	Red	100%	Red		Red		Red		
Year	Green White	38%	Year	Green White	0%	Green White		Green White		Green White		
				winte	-		ion Plan(s) to Improve			Target Date	Status	
	Previously Identified Issues The HCRW performance dashboard does not truly reflect the Trust's portfolio given that several the studies opened at VUNHST does not fit the HCRW criteria for reporting					HCRW are in the process of establishing a Task & FinishQ2Group to review HCRW Performance Dashboard. VUNHSTFY2023/24representation is to be included on the Task & Finish GroupFY2023/24to ensure that the review and proposed changes considersthe Trust's requirements.						
	Discu	ussion of Iss	sues			Action Plan(s) t	1	Target I	Date			
W = 0 studies. The data there has 50% incr 38% deci 13% deci classed a	s been a ease in the studie rease in the studie rease in the studie is non-recruiting s a 1 study rated RE	es rated RED es rated GRE es rated WHI studies		udies are								

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5.3 Local Performance Measures for Velindre University NHS Trust

5.3.1 Number of studies opened (VUNHST)

Metric:	Number of studies	tudies opened in Velindre U				dies opened in Velindre University NHS Trust Target/Measure:						Not Applicable	HCRW Perfor Indicato		NO
How is metric												nt System (LPMS) to versity NHS Trust.	measure against thi	s indicator.	This
Previous Fina			Cı	Irrent F		ial	Q	uarter	1	Qua	arter 2	Quarter 3	Quarter 4	Year t	o date
Year	35			Ye Graph	ar			7					Discussion		
	Number of studies Commercial], 50 40		d at V	UNHS					and			Velindre Universi cumulative total) The data shows: - Total nu - Non-cor - Comme	the number of studie ty NHS Trust quarter for financial years 20 mber of studies (blue nmercial studies (ora rcial studies (grey ba hat for Q1 of FY2023	by quarter 22/23 and bars) nge bars) rs)	(and 2023/24
Number of studies	30 20											an overall increas (up 2 studies), co This increase car	se in the total number mpared to Q1 of FY2 be seen in both the studies (up 1 study) a	of studies 022/23. number of	openeo
	10 0	22/23 Q1	23/24 Q1	22/23 Q2	23/24 Q2	22/23 Q3	23/24 Q3	22/23 Q4	23/24 Q4	22/23 Total	23/24 Total	studies (up 1 stud			
■ Total numbe VUNHST	r of studies opened at	5	7	9		6		15		35	7				
Number of H portfolio stud	ICRW non-commercial lies opened	2	3	6		3		8		19	3				
Number of constudies open	ommercially sponsored led	3	4	3		3		7		16	4				

Metric:	Number of participa University NHS Tru	st								Measur		Not Applicable	HCRW Perform Indicator		NC
How is metric												nt System (LPMS) to m es int Velindre Universit			
Previous Finan	cial Total		Cur	rent Fi		al	Qı	larter 1		Qua	arter 2	Quarter 3	Quarter 4	Year t	o date
Year	220			Yea	r			77							
			G	raph									Discussion		
Nu	mber of participants Commercial], (ial and	k		I he graph shows the into studies in Velin quarter (and cumula and 2023/24. The d	ative total) for financ	Trust qua	arter b
ω	500 400											bars) - Non-comm bars)	per of participants re nercial participants re al participants recrui	ecruited (orang
Number of participants	300 200									1		The data shows that an overall increase recruited into studie Q1 of FY2022/23.		of particip	ants
	100 0	22/23 Q1	23/24 Q1	22/23 Q2	23/24 Q2	22/23 Q3	23/24 Q3	22/23 Q4	23/24 Q4	22/23 Total	23/24 Total	recruited to non-cor There is, however,	e seen in the numbe nmercial studies (up a decrease in the nu d to commercial stu	o 13 partio Imber of	cipant
Total number into studies at	of participants recruited	65	77	46		61		48		220	77				
	rticipants recruited into ommercial portfolio	51	64	36		51		38		176	64				
	rticipants recruited into sponsored studies	14	13	10		10		10		44	13				

5.3.2 Number of participants recruited into studies (VUNHST)

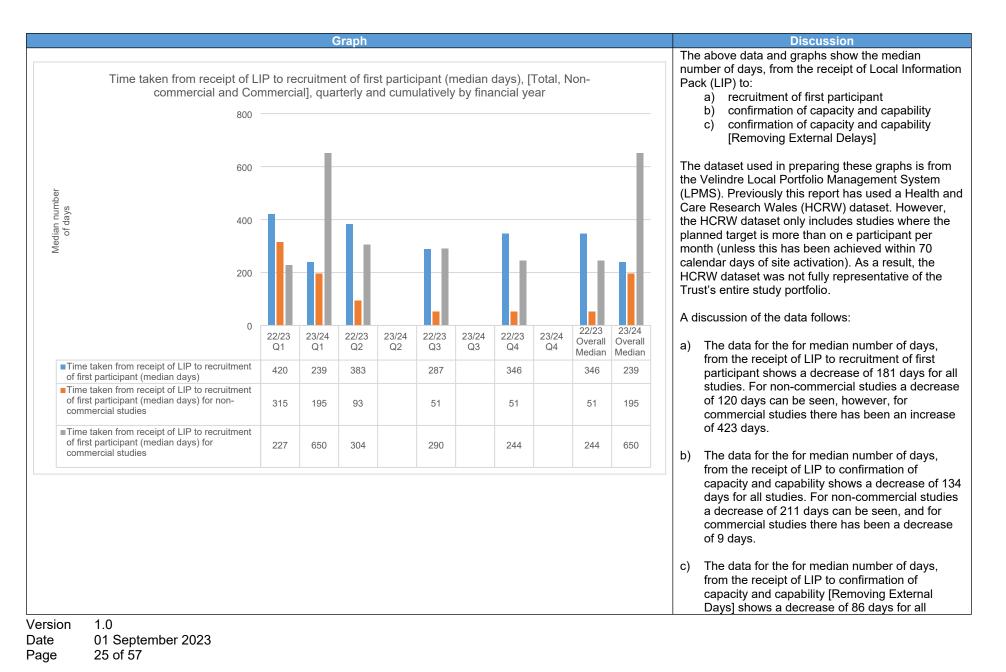
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5.3.3 Time taken from receipt of Local Information Pack (LIP) to recruitment of first participant into Trust studies (median days)

Metric:		rom receipt of of first participa	ant into Trust s	tudies	、 ,		arget/Me				of days	Inc	Performance dicator:	NO
How is metric	c measured:	date of this this measu	niversity NHS measure is th re is the date lays have bee	ne date tl the first p	he Local Ir participant	nformatio was recr	n Pack (L uited to t	IP) is sha he study	ared with at the NH	the NHS S organi	organisatio sation.	asure agair n by the Sp	nst this indicate onsor. The en	or. The sta d date for
Previous	Ove		Current		Qua			Quar			Quarter	3	Quar	ter 4
Financial Year	Median days	346	Financia Year		/ledian lays	23	9 Me day	dian /s		Me day	dian ⁄s		Median days	
	, ,				, .	Data		-						
inancial year an	d quarter		22/23 Q1	23/24 Q1	22/23 Q2	23/24 Q2	22/23 Q3	23/24 Q3	22/23 Q4	23/24 Q4	22/23 Overall Median	23/24 Overall Median	22/23 Range	23/24 Range
ime taken from re articipant (mediar	eceipt of LIP to rec n days)		420	239	383		287		346		346	239	61 - 894	167 - 1196
articipant (mediar	eceipt of LIP to rec n days) for non-cor	nmercial studies	315	195	93		51		51		51	195	0 - 327	195 - 284
	eceipt of LIP to rec n days) for comme		227	650	304		290		244		244	650	43 - 933	167 - 1196
ime taken from re nd capability (me	eceipt of LIP to con dian days)	firmation of cap	acity 243	109	158		123		87		87	109	0 - 707	36 - 276
nd capability (me	eceipt of LIP to con dian days) for non-	-commercial stu	dies 315	104	93		51		51		51	104	0 - 327	36 - 114
	eceipt of LIP to con dian days) for com		acity 190	181	183		176		151		151	181	18 - 707	91 - 276
nd capability (me ELAYS]	eceipt of LIP to con dian days) [REMO	VING EXTERN	AL 176	90	139		92		86		86	90	0 - 295	36 - 144
nd capability (me REMOVING EXT	eceipt of LIP to con dian days) for non- ERNAL DELAYS]	-commercial stu	dies 237	80	89		48		48		48	80	0 - 295	36 - 114
nd capability (me	ceipt of LIP to con dian days) for com ERNAL DELAYS]			101	142		140		122		122	101	18 - 179	91 - 110

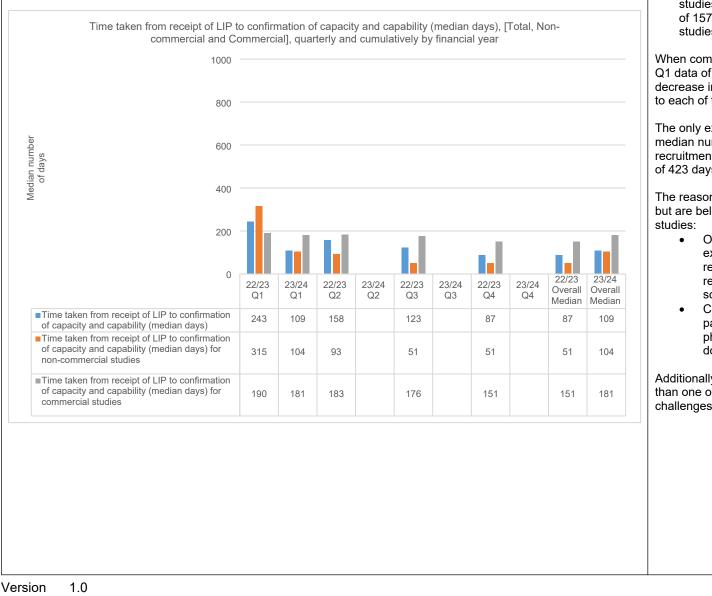
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RD&I - Integrated Performance Report



studies. For non-commercial studies a decrease of 157 days can be seen, and for commercial studies there has been a decrease of 46 days.

When comparing the Q1 data of FY2023/24 with the Q1 data of FY2022/23 there has a been a general decrease in the median number of days from the LIP to each of the measured end points.

The only exception to this is the increase in the median number of days from receipt of LIP to recruitment of first participant for commercial studies of 423 days.

The reasons for this are currently being investigated but are believed to be multi-factorial with commercial studies:

- Often have more stringent inclusion and exclusion criteria for patient recruitment, resulting in a narrower population for recruitment and a greater number of screening failures.
- Can have longer screening periods, prior to patient recruitment into the study treatment phase to ensure that the identified patients do meet entry criteria.

Additionally, studies that are delivered across more than one organisation can create logistical challenges that affect the time to recruit participants.

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RD&I - Integrated Performance Report

Time taken from receipt of LI EXTERNAL DELAYS] [Total, N		ercial and													
80	0														
L 60	0														
Median number of days	0														
20	0								u.						
	0 22/23 Q1	23/24 Q1	22/23 Q2	23/24 Q2	22/23 Q3	23/24 Q3	22/23 Q4	23/24 Q4	22/23 Overall Median	23/24 Overall Median					
Time taken from receipt of LIP to confirmatic of capacity and capability (median days) [REMOVING EXTERNAL DELAYS]	n 176	90	139		92		86		86	90					
Time taken from receipt of LIP to confirmatic of capacity and capability (median days) for non-commercial studies [REMOVING EXTERNAL DELAYS]	n 237	80	89		48		48		48	80					
Time taken from receipt of LIP to confirmatic of capacity and capability (median days) for commercial studies [REMOVING EXTERNA DELAYS]		101	142		140		122		122	101					
Previously Id			·			·						s) to Improve		Target Date	State
HCRW performance dashboard doe en that several the studies opened at reporting						a G re	roup to presen	review	HCRW to be i	Perform	anc on tl	shing a Task & ce Dashboard. the Task & Fir sed changes (VUNHST iish Group	Q2 FY2023/24	

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5.3.4 C5: Percentage of non-recruiting Health and Care Research Wales non-commercial Portfolio studies within NHS organisations

The following Trust data is taken from the Health and Care Research Wales 2023/24 Performance Dashboard.

Metric:		o studies w	cruiting Health and Ca ithin NHS organisation	ns in Wales		et/Measure:		0%	In	Performance dicator:	NO
Health and Care Research Wales use data measure against this key indicator. How is metric measured: This key indicator measures all Health and but have closed to recruitment during the recruitment period. Previous Overall Current Quality					re Resear	ch Wales non-co	mmercial l	Portfolio studies	that have b	peen open to recr	uitment
Previous	Overa	rall Current Quarter 1 Quarter 2 Quarter 3					r 3	Quarte	er 4		
Financial Year	%	10%	Einancial Einancial							%	
						Previous Act	tion Plan(s) to Improve		Target Date	Status
Previously Identified Issues The HCRW performance dashboard does not truly reflect the Trust's portfolio given that several the studies opened at VUNHST does not fit the HCRW criteria for reporting				Group to represer to ensur	are in the process o review HCRW F ntation is to be ind e that the review t's requirements.	Performant	ce Dashboard. V the Task & Finisl	UNHST n Group	Q2 FY2023/24		
	Discussion of Issues					Action Plan(s)	to Improv	ve Performance		Target I	Date
There are currently being non-recruiting	here are currently no studies reported on the HCRW performance dashboard as eing non-recruiting.										

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5.3.5 C6: Percentage of non-recruiting Health and Care Research Wales Portfolio commercially sponsored studies within NHS organisations

The following Trust data is taken from the Health and Care Research Wales 2023/24 Performance Dashboard.

Metric:		, NHS organ	cruiting Commercially isations in Wales	•		et/Measure:		n № of days	In	HCRW Performance Indicator:			
Health and Care Research Wales use data measure against this key indicator. This key indicator measures all Commercia the reporting period and have not recruited					sponsored	d studies that hav	e been op	en to recruitmen	t but have	closed to recruitm			
Previous						Quarter	2	Quarte	• 3	Quarte	r 4		
Financial Year	ial % 43% Financial % 0% %							%		%			
	Previous	sly Identifie	d Issues			Previous Act	tion Plan(s) to Improve		Target Date	Status		
Previously Identified Issues The HCRW performance dashboard does not truly reflect the Trust's portfolio given that several the studies opened at VUNHST does not fit the HCRW criteria for reporting				Group to represer to ensur	are in the process o review HCRW P ntation is to be inc e that the review t's requirements.	erformand	ce Dashboard. V the Task & Finisl	UNHST n Group	Q2 FY2023/24				
	Discussion of Issues					Action Plan(s)		Target D	Date				
There are currently being non-recruiting	here are currently no studies reported on the HCRW performance dashboard as eing non-recruiting.												

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6 Velindre Cancer Centre hosted research – key achievements

6.1 STAMPEDE

Study Title: Systemic Therapy in Advancing or Metastatic Prostate Cancer: Evaluation of Drug Efficacy.

STAMPEDE (<u>Systemic Therapy in Advancing or Metastatic Prostrate Cancer:</u> <u>Evaluation of Drug Efficacy</u>) is a large clinical trial that aimed to assess new treatment approaches for people affected by high-risk prostrate cancer.

Since 2005 the trial has tested many different ways of treating prostate cancer and some results are now already known. Each new or alternative treatment has been compared with the current standard approach, referred to as a "comparison". Almost 12,000 participants joined the trial, with answers becoming available throughout the trial as information on life expectancy and disease control rates were gathered and compared.

All trial participants have been asked whether they would like to join some of the sub-studies being run alongside the trial. These aim to address several additional research questions such as what effect each treatment has on quality-of-life (QL), and which provides the greater value for money for the health service. Some sub-studies are focused on improving our understanding of the biology of prostate cancer.

The STAMPEDE trial has now completed recruitment, the final day of patient randomisation being completed on 31st March 2023. Follow-up for the final patients will continue for a couple of years from this point. The trial will continue to assess the effects of adding different agents, both as single agents and in combinations, to the standard-of-care or substituting standard of care.

Velindre University NHS Trust recruited 452 participants to the trial.

The results of the Abiraterone acetate plus prednisolone with or without enzalutamide for patients with metastatic prostate cancer starting androgen deprivation therapy have been published in the Lancet.

The Lancet publication is available here: https://www.sciencedirect.com/science/article/pii/S1470204523001481

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6.2 **TROPION 02**

Study Title: A Phase 3, Open-label, Randomised Study of Datopotamab Deruxtecan (Dato-DXd) Versus Investigator's Choice of Chemotherapy in Patients who are not Candidates for PD-1/PD-L1 Inhibitor Therapy in First-line Locally Recurrent Inoperable or Metastatic Triple-negative Breast Cancer.

The study will evaluate the safety and efficacy of datopotamab deruxtecan (also known as Dato-DXd), when compared with Investigator's choice of standard of care single-agent chemotherapy (from a choice of paclitaxel, nab-paclitaxel, capecitabine, carboplatin, or eribulin) in participants with inoperable or metastatic HR-positive, HER2- negative breast cancer who have been treated with one or two prior lines of systemic chemotherapy.

Velindre University NHS Trust is one of twelve sites open across the UK and continues to be second-best recruiting site in the UK.

6.3 Study performance rankings

The following table shows the research studies where Velindre University NHS Trust are in the top five recruiting sites:

Ranking	Study Title	Summary
Top European	OPTIMA	Optimal Personalised Treatment of early breast
Recruiter		cancer using Multi-parameter Analysis
Top UK	CONCORDE	A platform study of DNA damage response inhibitors
Recruiter		in combination with conventional radiotherapy in non- small cell lung cancer
Top UK	RAPPER	Radiogenomics: Assessment of Polymorphisms for
Recruiter		Predicting the effects of Radiotherapy
Top UK	CA209-76K	A Phase 3, Randomized, Double-Blind Study of
Recruiter		Adjuvant Immunotherapy with Nivolumab
		versus Placebo after Complete Resection of Stage
		IIB/C Melanoma
2 nd Highest UK	PARTNER	Randomised, phase II/III, 3 stage trial to evaluate the
Recruiter		safety and efficacy of the addition of olaparib to
		platinum-based neoadjuvant chemotherapy in breast cancer patients with TNBC and/or gBRCA.
2 nd Highest UK	SCOPE 2	A randomised Phase II/III trial to study radiotherapy
Recruiter		dose escalation in patients with oesophageal cancer
		treated with definitive chemo-radiation with an
		embedded Phase II trial for patients with a poor early
		response using positron emission tomography (PET)
Joint 2 nd	SCANCELL	A Phase 2, Multicenter, Open-Label Study of SCIB1
Highest UK		in Patients with Advanced Unresectable Melanoma
Recruiter		Receiving Pembrolizumab

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Ranking	Study Title	Summary
3 rd Highest UK Recruiter	TRITON 3	A Multicenter, Randomized, Open-label Phase 3 Study of Rucaparib versus Physician's Choice of Therapy for Patients with Metastatic Castration- resistant Prostate Cancer Associated with Homologous Recombination Deficiency
3 rd Highest UK Recruiter	Cardiac Care	A multicentre prospective randomised open-label blinded end-point controlled trial of high-sensitivity cardiac troponin I-guided combination angiotensin receptor blockade and beta blocker therapy to prevent cardiac toxicity in breast cancer patients receiving anthracycline adjuvant therapy.
Joint 4 th Highest UK Recruiter	NET-02	A non-interventional, multicenter, multiple cohort study investigating the outcomes and safety of atezolizumab under real-world conditions in patients treated in routine clinical practice

7 Velindre Cancer Centre hosted research – Action Plan(s)

7.1 Radiotherapy Research

7.1.1 Radiotherapy Trials Research Solutions

Delivery of the Radiotherapy and combination Drug/Radiotherapy research portfolio has been and continues to be a challenging resulting from the capacity limitations across the Radiotherapy service.

Having established a Radiotherapy Trials Research Solutions group, work is now being undertaken to review the situation, identify, and implement mitigation strategies to improve the Radiotherapy service's capacity in terms of research studies and the wider service.

The group seeks to outline solutions to short, medium, and long-term issues collectively over the forthcoming months.

7.1.2 Radiotherapy Trial Portfolio Group (RT-TPG)

The Radiotherapy Trial Portfolio Group (RT-TPG) has been re-established to monitor the portfolio and Radiotherapy service position by bringing together required parties.

 Communication – the group continues to build communication and interaction between VCC research teams to improve the provision and delivery of both Radiotherapy and combination Drug/Radiotherapy clinical trial research.

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- **Reporting** Governance processes are being developed to improve accurate and timely reporting of operational and strategic issues to the Trust's R&D service and tri-partied Radiotherapy Management Group (RMG).
- **Radiotherapy Clinical Trial Risks** The process for documenting Radiotherapy clinical trial risks and subsequent mitigating strategies is under review.
- Assessment Tool The development of an assessment tool to aid evaluation of clinical trial requirements alongside the service position is in operation. Whilst this is multifaceted and complex, the purpose is to acknowledge the likelihood of successful study set-up prior to undertaking the feasibility process, helping to mitigate against increasing study timelines.

7.1.3 Radiotherapy Research Working Group

The Radiotherapy Research Working Group continues to bring together the three disciplines in Radiotherapy along with representatives from the Transforming Cancer Services (TCS) to formulate a research action plan with key objectives and deliverables for the Integrated Radiotherapy Solution.

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STRATEGIC PRIORITY 2: The Trust will maximise the Research & Development ambitions of the Welsh Blood Service

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8 Celebrating our efforts in COVID-19 Sero-Surveillance

Wales's blood donor sero-surveillance for COVID-19 has come to an end. This project guided Wales's response to the pandemic by measuring the population's immunity levels and providing real-time evidence to Wales's Chief Medical Officer.



Since June 2020, 85,167 samples from 51,159 individuals have been made available for testing, along with some anonymised demographic information from the donors. The teams working hard on the project included Automated Testing, Business Intelligence, Transport and Research Facilitation. Each day, an average of 100 samples from WBS donors were sent for testing, selected by Automated Testing, and expertly looked after by the Drivers in the WBS Transport department.

Anonymous demographic donor information was also supplied to Public Health Wales for epidemiological analysis, prepared by the Business Intelligence analyst. Samples were then tested to measure the natural and vaccine-mediated COVID-19 antibody levels. A report showing a month-on-month picture of COVID-19 immunity levels in the Welsh population resulted in the breakdown of immunity levels in different age groups and regions within Wales.

The Welsh Government used this information to plan for prevention and control COVID-19 in Wales. The collaborative project is an excellent example of the strength and diversity of skills within the healthcare scientist sector of NHS Wales. It used a combination of

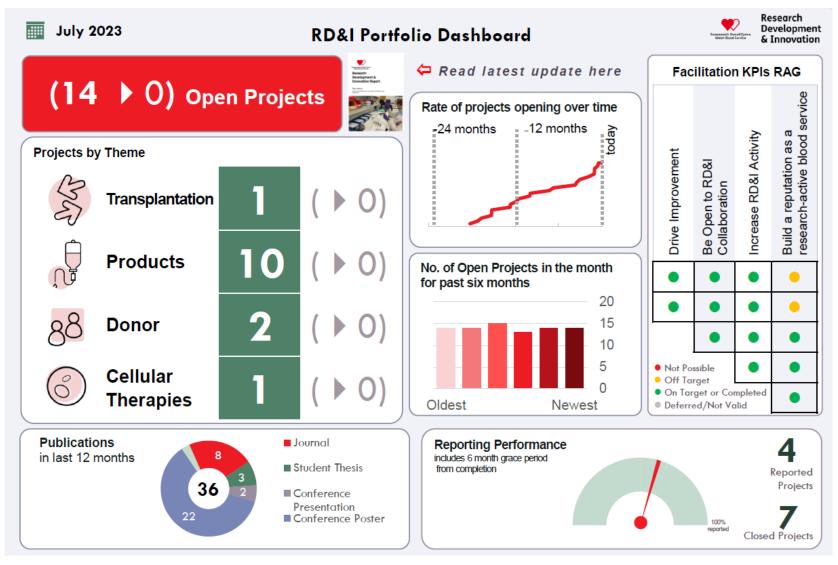
Version 1.0 Date 01 September 2023 Page 35 of 57 specialist and scientific expertise from many disciplines including epidemiology, biochemistry, virology, serology, and blood transfusion sciences. The project was also an NHS Awards finalist in 2022, recognising the different skill sets and facilities working together to add value to Wales's COVID-19 response.

The project completed its final tests when the World Health Organisation declared that COVID-19 was no longer a public health emergency, ending in May 2023. Below are photographs of the final samples leaving the Automated Testing laboratory (left), and a special celebration lunch to thank all individuals involved. The project was also successfully published.



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9 Welsh Blood Service RD&I Dashboard



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10 Open Projects Portfolio

The Welsh Blood Services RD&I Portfolio of open project as of 10 Jul 2023.

Project Name	WBS Project ID	WBS Research Theme	WBS Staff Lead	Involvement
Investigating the role of the bone marrow microenvironment in the pathogenesis of Acute Myeloid Leukaemia (AML)	96	Cellular Therapies	Emma Cook	NHS Research
What donor contact method gives us the best return?	160	Donor	Kate Satherley	WBS led RD&I
Bioenergetic Profiles of Platelets in Storage as an Indicator of Platelet Viability & Function	162	Products	Chloe George	WBS led RD&I
The use of legislation and regulation as a means of improving quality in public healthcare services	164	Donor	Peter Richardson	WBS led RD&I
Use of Global Haemostasis Assays for the Evaluation of Thawed Plasma for Clinical Use	166	Products	Michael Cahillane	WBS led RD&I
Use of Haemostasis Assays for the Evaluation of Five-Day Thawed Plasma for Clinical Use	167	Products	Elisabeth Davies	WBS led RD&I
Improving Platelet Storage (PhD Cardiff Metropolitan University)	168	Products	Christine Saunders	WBS led RD&I
Cold Stored Platelets for Pre- Hospital Emergency Resuscitation (CoPPER): Laboratory Testing	170	Products	Jamie Nash	WBS led RD&I
Service Support of the Role of donor derived cell free DNA (DD cfDNA), islet derived exosomes and proinsulin in diagnosing pancreas graft acute rejection (EMPAR) study	171	Transplantation	Emma Burrows	WBS support of others RD&I
Effect of mixing on the quality of red cells at time expiry	172	Products	Nicola Pearce	WBS led RD&I
Enzymatic Removal of A and B Antigens from Red Cells to Create Group O Red Cells – a Collaborative Study	174	Products	Chloe George	WBS support of others RD&
Understanding and Investigating White Particulate Matter (WPM)	175	Products	Michael Cahillane	WBS led RD&I

Project Name	WBS Project ID	WBS Research Theme	WBS Staff Lead	Involvement
Evaluation of High Titre buffy coat status on the High Titre Haemolysis Status of Platelet Pools in Platelet Additive Solution	176	Products	Laura Paletto	WBS led RD&I

10.1 The support of the Biomedical Excellence for Safer Transfusion (BEST) Collaborative

The Welsh Blood Services BEST-C as of 10 Jul 2023.

Project Name	WBS Project ID	WBS Research Theme	WBS Staff Lead
BEST-C 142 Project: A comparison of anti-D titres using gel and tube technologies	157	Products	Chloe George

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11 Key Performance Indicators of the Welsh Blood Service RD&I Strategy

Objective	ojective Activity Indicators or KPI				th by I	/lonth	status								
Drive Improvement	rive Improvement					J	J	Α	S	0	N	D	J	F	М
Ensure our research efforts are of the highest quality	Any WBS PI applications for NHS Research approval will adhere to NHS Permissions Performance metrics	Velindre NHS Trust to national KPI for NHS Permissions	100% Compliance	~	~	•									
Obtaining sustainability for RD&I activities	Complete utilisation of the WBS RD&I funding	WBS RD&I spend per fiscal year	100% Spend of £30,000	~	~	~									
Be Open to RD&I Col	laboration														
Embed a positive culture around RD&I activity / Actively seek collaborative partners to develop appropriate RD&I projects	Maintain an active media presence for RD&I to highlight our achievements	Deliverables described in WBS RD&I Communication Plan 2023-24	100% delivery	~	⚠	~									
Actively seek collaborative partners to develop appropriate RD&I projects	Participation in all applicable BEST-Collaborative projects, as invited	Project invitations as received by our BEST-C members and actioned appropriately	100% participation in all eligible projects that WBS have the capability of participating in between Mar 2023-24	~	~	~									

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Actively seek collaborative partners to develop appropriate RD&I projects	An inviting RD&I presence on WBS Internet Webpage	All website content must be bilingual. Minimally the RD&I Strategy, contact details will be added to the webpage.	Refreshed annually or as needed by other considerations regarding the internet presence	~	~	~								
Increase RD&I Activit	ty			A	М	J	J	A S	0	N	D	J	F	М
Ensure our research efforts are of the highest quality / Embed an RD&I positive culture in WBS	Provision of the Learning Zone, ensuring that it is in line with the RD&I strategy and current and future needs of the Service.	A service provision for users of the Learning Zone, adapting and meeting needs.		~	~	~								
Organise and co- ordinate our research activity / Obtaining sustainability for RD&I activities	A pipeline of planned RD&I activity across the organisation.	A planned, continuous programme of RD&I projects in each of the four RD&I themes.	Achieved in this document	~	~	~								
Developing our workforce capability/ Embed an RD&I positive culture in WBS	Maintain and promote membership of ISBT, AABB and the BEST- Collaborative	Ongoing membership; Signposting to membership resources, funding opportunities, and learning events.	At least five suitable training, education or event offerings are available to staff annually from AABB and ISBT. (BEST- Collaborative membership further addressed elsewhere) - First event planned "how to publish 28 Jun	~	•	~								

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Organise and co- ordinate our research activity	Adequate planning and resourcing of RD&I Projects before commencement and correct modification to resourcing of RD&I projects.	Projects reporting as Project status = Green / Ongoing as planned) and a Time index of a project (Time elapsed/Projected time).	Green status for 70% of projects and 70% of the project with a Time Index of 1	~	~	~									
Build a reputation as	Build a reputation as a research-active blood service									о	N	D	J	F	м
Build a reputation as a research-active blood service	Our RD&I findings will be disseminated to the healthcare field through publication and publicity.	The PI must describe a suitable* dissemination / knowledge transfer activity (e.g., conference proceedings/publication, speaking in a meeting, SI activity etc) for every completed WBS–led RD&I project. PI have a six-month grace period after the project ends to perform this. (*" suitable" as deemed by RD&I Lead).	100% of WBS-led projects must demonstrate how they achieved some type of dissemination activity. (If this was done by a non-tangible activity (such as speaking in an internal meeting) then the PI's narrative email will be considered as completed.)												
Measuring and defining Progress and Success	WBS's publication output needs to be of high scholarly level as a marker of the work's high quality. When appropriate, the PI of the RD&I project will be asked to seek a peer-reviewed publication to disseminate its findings	# of peer-reviewed publication outputs. PI have a six-month grace period after the project ends to perform this	When deemed appropriate by WBS RD&I Group, 80% of completed RD&I projects achieve a peer- reviewed publication - On 70% on 1 June	~	\triangle	⚠									
Build a reputation as a research-active blood service	An RD&I Event with WBS showcasing our work.	Half-day or evening event, possible co- produced with another organisation. Showcasing RD&I	Event - WBS Group want a universal event to take place after strategy launch.	⚠	•	~									

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RD&I - Integrated Performance Report

Measuring and defining Progress and Success	We will disseminate our RD&I findings to others.	Overall Number of scholarly publications* by the WBS (scholarly is a peer-reviewed publication and is to include the publication of conference proceedings)	Maintain 2022-23 output of 26 scholarly publications between FY 2023- 24	~	~	~				
Measuring and defining Progress and Success	A quarterly report is produced and published to promote the achievement of the previous three months and present the current status of the WBS RD&I portfolio	A report delivered to WBS RD&I Group and elsewhere	Every four months	~	~	~				

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STRATEGIC PRIORITY 3: The Trust will implement the Velindre Innovation Plan

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12 RITA – a ChatBot powered by Artificial Intelligence

RITA has now been deployed successfully on the Trust website since February 2023, both on the Velindre Cancer Centre main page and the dedicated RITA Project page.

Performance measures and usage data are continuing to be collected to measure the number of users compared to the soft launch figures and calculate the average number of users per month (currently at 35). Analytics show the current most popular areas of questioning relate to support, facilities, department locations and definitions of medical terminology. The RITA project team meets weekly to review performance, make amendments to any questions not answered and update content as needed.

The "Plus" package provided by IBM was due for renewal in June 2023 and the Innovation Project Manager has been in discussion with the IBM renewals team to negotiate a reduction in credits by 40% to align with actual usage by patients and their families. This new quote has been provided at a cost of £9,359.46, down from £18,000 in 2022 - with the firm order letter signed, a PO number is expected within the next few days to complete the transaction.

12.1 RITA – 'Talking Heads' sub-project

'Talking Heads' is an exciting new project within RITA Chatbot to produce a series of twominute 'Talking Head' videos that will introduce individual Clinical & Healthcare staff and their roles. These videos will then be available as embedded media within the virtual assistant when a patient asks a question relating to that clinical area. Velindre will also be integrating the videos onto the Trust website.

These clips will allow patients, family, and carers to understand the role of their key workers and clinicians and help ease the anxiety of attending Velindre. Initial filming took place in October 2022 having filmed 38 clinicians. There is a further one and half day's filming left to cover all internal footage of VCC departments and external drone footage of the site.

We have now received all the clips from the production company and will be integrating them into RITA over the coming weeks, while also being utilised as separate media on the Trust website and the BYS Localisation project, giving patients the opportunity to view clinical areas and the site before attending. The clips have now been uploaded to the Velindre Innovation YouTube channel in preparation for embedment within RITA's dialogue responses.

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13 ByYourSide – Localising Pfizer's Global Patient Cancer App

The Patient Solutions Team at Pfizer were looking to improve their cancer 'By Your Side' website and mobile app. This is a digital solution that supports patients with cancer in managing their health, wellness, and everyday life. 'This is Living With Cancer (TLWC)' known as By Your Side (BYS) in the UK is an existing application available for all cancer patients to help their general well-being and daily tasks. TLWC/BYS aims to be a one-stop repository of support for cancer patients, but to be more effective, it could better tailor its content to patient need. The challenge is to localise web and app content to be most useful for each patient using the app. The longer-term aim could be to offer a simple and personalized connector solution to empower cancer patients to live the best lives they can.

The combined Velindre and Pfizer team had a sprint project that they delivered in three months. The project aimed to have piloted a new localisation concept for BYS and evaluate it for consideration of larger programme scaling to geographical areas with other partners. Pfizer's objective with the new concept is to offer a simple personal experience to patients looking for day-to-day support utilising a digital platform for their health management and ability to connect easily to local specialised support when expert follow-up is needed.

Velindre was the first project in the UK selected by Pfizer and the project was delivered to budget and time.

13.1 Phase 2 proposal

Following the success of this project, Pfizer has approached Velindre to conduct a Phase 2 of BYS localization, with a view to implement the suggestions and feedback given by Velindre Cancer Centre patients during the initial workshops and make the app available to all our service users.

Successful implementation of this Phase will provide Velindre with a ready-made patient app that has centralised, and localised information pulled directly from the Trust website, available to our users within its own 'My Centre' section. Velindre will be the first Trust in the UK to have this feature available to our patients.

The Innovation Project Manager presented this proposal to the EMB on 20 February 2023 and received a positive outcome to pursue contracting for the next phase. A working project team is currently being formed to evaluate content options, while a DPIA is in the process of being completed to ensure the correct governance procedures are followed prior to launch. Pfizer's project deadline for deployment was originally due in July 2023, however, due to concerns raised by the Head of Information Governance, this is likely to be missed. A meeting is due to take place between IG and Pfizer to gather more

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14 All Wales, Rapid Access Palliative Radiotherapy Project

With the current difficulties in delivering radiotherapy for advance cancer and with increasing demand coupled with a worsening workforce crisis in clinical oncology, Consultant Oncologist Mick Button and Radiotherapy Planning Radiographer, Steven Hill are undertaking a Bevan Commission project through the Planned Care Innovation Programme (PCIP) to improve the Palliative Radiotherapy pathway.

The vision is to deliver a high-quality, sustainable, efficient service for patients needing radiotherapy for cancer symptom control – wherever in Wales they live.

This has 3 components:

- High-quality clinical care
- High-quality communication and decision making
- High-quality training

Across Wales, roughly 150 patients a month have radiotherapy with the aim of urgently minimising their cancer symptoms and improving their quality of life. This is over a quarter of all radiotherapy courses delivered.

Currently, patients needing such radiotherapy can only be seen and assessed by senior clinical oncologists, who also are required to plan and prescribe the treatments. It requires multiple pre-arranged hospital visits (clinical assessment, CT planning and then treatment) – but is usually a very effective, well-tolerated and cost-effective way of improving patients' quality of life and reducing symptoms due to advanced cancer.

The project is drawing to a close and a hybrid showcase event was held at the National Imaging Academy Wales on 03 May 2023, with representatives from across all 3 cancer centres presenting their work along with contributions from Canada and the Clatterbridge. This event saw 50 in-person and 15 online attendees, with the roundtable discussion resulting in an agreement to develop more detail about the way forward, working with attendees at a future date to produce a national proposal with locally developed detail prior to September 2023.

15 ACTAH Project

Due to an approach by a CVUHB emergency medicines consultant, Velindre has initiated the ACTAH project with the goal of developing a new service that utilises home visits to manage acute oncology patients experiencing an acute episode in collaboration with

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Objectives:

- 1. Reduce admissions to VCC and A&E & DGH
- 2. Treating oncology patients at home if it is safe to do so
- 3. Subsequent continued care of the patient at home if safe
- 4. For patients that will require admission, stabilise at home and arrange the most appropriate admission pathway
- 5. 4 Create better experiences and outcomes for patients with acute episodes

We are in the very early stages of this project, with a preliminary meeting taking place to discuss clinical leads for the project and identify pathways. A subsequent meeting is due to be held at the Life Sciences Hub in the coming weeks.

16 Velindre Cancer Centre Mental Health ChatBot / SCC Project in Collaboration with Cardiff University

The Innovation Project Manager has been working with a Cardiff University Medical student on their SCC project to produce a mental health virtual assistant that can link patients and their families to the relevant support services based on how they are feeling.

The project report was submitted on 03 July 2023, with the intention of expanding upon this work in collaboration with the Clinical Psychology team to deploy the service on the VCC webpages.

17 Radiotherapy Pelvis preparation App

The innovation team has been approached by Radiographer Daniel Burr to develop an application that would assist pelvic RT patients with the timing of water intake and enemas by inputting their appointment time into the app and subsequently being alerted by a push notification. This project is in the very early stages of discussion, the innovation team is seeking an appropriate route for developing the app with serval options identified; including VCC in-house app development, external development through industry and utilising SCC student projects through the computer-science cohort.

18 Welsh Blood Service (WBS) Drone Project

The purpose of this foundation study is to:

• establish the potential for drone-based delivery services to support the Welsh NHS, including specific use cases for the Welsh Blood Service.

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- test the basic premise with the Civil Aviation Authority
- identify the roadmap and critical tasks that will allow us to realise the longer-term vision.

The organisations involved in this partnership are the Welsh Ambulance Service NHS Trust (WAST), The Welsh Blood Service (WBS), Snowdonia Aerospace (SAC) SLINKTECH Ltd. (SLINK), The Welsh Air Ambulance and the Welsh Emergency Medical Retrieval and Transfer service (EMRTS), collectively referred to as the Welsh Health Drone Innovation Partnership.

Following completion of a requirements gathering exercise and an initial assessment of the clinical, technical, and regulatory feasibility, a report is available, and will be shared with a wider group of senior stakeholders with a view to arranging a launch event in the Spring of 2023.

In the meantime, given the success of the foundation study a further application for funding support to explore a proof of concept of Beyond Visual Line of Sight (BVLS) drone flights is being prepared for the Welsh Government Innovation team to consider by the above partnership.

19 Regional Innovation Coordination Hubs (RICH)

The Velindre Research, Innovation, Improvement Coordinating (RIIC) Hub has helped to raise the profile and the importance of RD&I within and without the Trust and has had a significant impact on the development of innovation infrastructure. This is reflected in the Velindre University NHS Trust's new ten-year Strategy that fully aligns with the principles set out in 'A Healthier Wales' (AHW). Importantly the Trust's strategic goal 3 is to be "a beacon for research, development and innovation in our stated areas of priority."

Through partnership working, the Trust is committed to building its national and international reputation through the successful development and delivery of a high impact RD&I activity that:

- Delivers the best possible interventions that improve survival and enhance the lives of patients who will remain, "at the centre of all that we do."
- Attracts and retains the best staff and make RD&I a core part of their roles.

The Trust's new Strategic Goal 4 also supports the previous RIIC ambitions to be an established 'University' Trust which provides highly valued knowledge and learning for all.

The work of the RIIC hub is facilitated in Velindre by the organisational structure aligning research, development, and innovation into one division, led by the Executive Medical Director. During year 3 of the RIIC Hub, an integrated quarterly report has been

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The significant achievements of the hub include:

- Developing a strong collaborative network with the other Trusts through fortnightly meetings. Developing key themes to launch collaborative projects.
- Contributing to the All-Wales RIIC Network
- Supporting developments across RD&I, including the:
 - Cardiff Cancer Research Hub and programme
 - New Cancer Hospital including the combined learning and Innovation centre

 supporting the ambition to develop the smartest and greenest hospital in
 the country. This is part of an ambitious Regional Cancer Transformation
 Programme
 - New component lab in WBS
 - Healthcare Professionals R&I portfolio
 - New innovation infrastructure and plan

Jennet Holmes and Ross McLeish met with the Innovation Programme Delivery Manager for RICH to discuss year 4 activity plans and future funding / project opportunities on 13 July 2023.

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STRATEGIC PRIORITY 4:

The Trust will maximise collaborative opportunities locally, nationally & internationally

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20 Trust Sponsored Research

Sponsored research is the research where the Velindre University NHS Trust takes the legal responsibility for the design, management and conduct of the research. Sponsored research may be hosted by the Trust and/or hosted by other healthcare organisations and research institutions across the UK, Europe and World-wide. The number of Trust sponsored studies may be relatively small, but the Research & Development team commit a significant amount of resource to ensure that the Trust's sponsor responsibilities are met.

The Trust may delegate some sponsor responsibilities to a clinical trials unit to manage larger research studies hosted by other healthcare organisations and research institutions.

Up to the end of Financial Year 2022/23, the Trust sponsored research portfolio is as follows:

Metric Description	Year to date
Number of new sponsored research studies (Total)	0
 Number of sponsored research studies that are Trust-wide 	N/A
 Number of sponsored research studies that are UK-wide 	N/A
Number of sponsored research studies that are Europe-wide	N/A
Number of sponsored research studies that are World-wide	N/A
Number of research sites opened for sponsored research studies	1

Metric Description	Year to date
Number of publications from sponsored research studies	4
Journal article	1
Abstracts	3
Number of participants recruited to sponsored research studies	51

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CROSS CUTTING THEMES: across Strategic Priorities 1 to 4

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21 Cross-cutting themes: progress

Cross-cutting themes across Strategic Priorities 1 to 4.

	FY2023/24 FY2024/25									05/06	、		
										FY20			
Key Deliverables / Objectives The implementation of programmes, complementing existing training opportunities that enable and support Trust staff to develop, deliver and manage research portfolios	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Progress / Comments
 Continue the work to develop and implement a R&D/Trials training programme draws upon: Trust developed internal training Training developed by other research partners and organisations such as Health and Care Research Wales Training from specialist non-commercial and commercial training providers to support Trust staff to develop, set-up and deliver, and manage portfolios of clinical trials/research studies. 	Х	Х	X	X									 Training Programme & Opportunities This work is an ongoing improvement of the RD&I Division's service. Work continues to develop and implement a R&D/Trials training programme draws upon: Trust developed internal training Training developed by other research partners and organisations such as Health and Care Research Wales Training from specialist non-commercial and commercial training providers to support Trust staff to develop, set-up and deliver, and manage portfolios of clinical trials/research studies.
Further investment in the research delivery and governance teams to make sure that studies are optimised to facilitate effective and timely recruitment and delivery													
• Continue the development and implementation of staffing plans for the research delivery and governance teams (previously identified) to facilitate timely recruitment.	Х												Reorganisation of Trust Research Delivery team This work is an ongoing improvement of the RD&I Division's service.
• Complete the appointment of senior staff in the research delivery team and to support the delivery of the Cardiff Cancer Research Hub and other research priority areas for the Trust.		Х											Taking into account the "Implementing the Cancer R&D Ambitions – an Integrated Business Case 2023-2026" work continues to keep under review and consolidate proposals and implementation of changes to the structure of the research set-up and delivery team
• Keep under review and consolidate proposals and implementation of changes to the structure				Х									structure.

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RD&I - Integrated Performance Report

Cross-cutting themes across Strategic Pri	oriti	es 1	to 4.										
		FY20	23/24	23/24		FY2024/25				FY2025/26			
Key Deliverables / Objectives Q		Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Progress / Comments
of the research set-up and delivery team structure.													
The development and implementation of clinical information systems to identify donors/patients eligible to take part in research studies													
• Having contributed to the Trust's implementation of the Digital Health & Care Record programme, continue to keep under review the input of, and use of information, making recommendations for improvement as appropriate.	Х	Х	Х	Х									The Trust Research Service staff, continue to keep under review the input of, and use of information, making recommendations for improvement as appropriate.
 Contribute to the Welsh Government / Health & Care Research Wales "Digital agenda for research in Wales" including the work on: The contribution and use of anonymised / pseudo-anonymised data research The programme that seeks develop abilities to "find, recruit and follow-up" participants for research. 	х	X	X	X									The Trust RD&I service continue to contribute to the Welsh Government/Health and Care Research Wales on the "Digital agenda for research in Wales" programme of work, as and when invited to provide input or provide.

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CORPORATE

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22 RD&I Finances

Due to a change in the financial infrastructure and staffing supporting the Research, Development & Innovation it is not possible to report the status of RD&I Finances for Quarter 1 of the Financial Year 2023/24.

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Ymddiriedolaeth GIG Prifysgol Felindre Velindre University NHS Trust

Velindre Cancer Centre

HEALTHCARE CANCER RESEARCH

1/8

105/134



What do we want?

- To build healthcare research capacity
- Programme of externally funded work
- Welsh hub recognized nationally and internationally for research and innovation in nursing and interdisciplinary cancer care



Calling all nurses, pharmacists, radiographers and allied health professionals – get into research!

Project Month	7	10	13	16	19	22	25	28	31	34		
Calendar Month	0c‡23	Jan-24	Арт-24	Jul 24	0ct-24	Jan-25	Apr-25	Jul-25	0ct-25	Jan-26		
MILESTONE 1: Velindre Healthcare First into Research Award												
Year 1 (three@ 0.2wte)	х											
Year 2 (three@ 0.2wte)					Х							
Year 3 (three@0.2wte)									Х			
MILESTONE 2: Velindre Healthcare PhD Studentship Award												
Year 1 (one@0.4wte for 5 years)	х			•		•						÷
Year 2 (one@0.4wte for 5 years)					х							÷
Year 3 (one@0.4wte for 5 years)									Х			→
MILESTONE 3: Velindre Healthcare Post Doctoral Award (n=1 in 2023/ 1 in 2024)												
Year 1 (one@0.4wte for 2 years)	x											
Year 2 (one@0.4wte for 2 years)					х							
Methods, methodology and project management consultancy (Velindre Prof)												
											-	









Ariennir gan Lywodraeth Cymru Funded by Welsh Government

Research matters What excellence looks like in NHS Wales

Background

Improving health and care services in Wales using evidence-based approaches is fundamental to improving the quality of care and putting the public at the heart of everything. It is widely known that research makes a real difference to improving

Why should research matter to the Welsh population and to the NHS?

Research provides the opportunity for patients and service users to access hew treatments and services, that will improve their health and well-being and contribute to reducing health inequalities in the general population.

NHS organisations that are actively involved in research see improved health outcomes and lower mortality rates, not just for those patients participating in research, but for everyone.

Research creates evidence-based services, provides evidence for NHS standards and helps organisations to find new and better ways of delivering health and social care, including better health economic outcomes.

Research provides opportunities for staff development and enhanced job roles which helps with recruitment and retention, as well as developing leaders and critical thinkers.

Research leads to economic benefits by attracting non-commercial funding and commercial income that can build the research capacity of frontline and other support services, as well as providing access to novel treatments and technologies received for free.

Research is an essential pillar of securing and maintaining University (Health Board) status and a key enabler or NHS Wales to deliver 'A Healthier Wales.'



A^ℕ Immersive Reader

🖻 Share 🗸 🖉

The future of cancer care depends on the research we do today

Find out more about the fellowships from Nicola Williams, Executive Director of Nursing, Allied Health Professionals & Health Science and Jane Hopkinson, Velindre Professor of Nursing and Interdisciplinary Cancer Care



How do I apply?

Read the <u>guidance for applicants</u> to make sure your project meets the award criteria.

Then simply fill out a <u>short application form</u> setting out your project idea and how it fits with your career aspirations.

Thank you

Jane Hopkinson

Velindre Professor of Nursing & Interdisciplinary Cancer Care

HopkinsonJB@cardiff.ac.uk





RESEARCH, DEVELOPMENT & INNOVATION SUB COMMITTEE

NHS Framework for Research and Development Research matters: What excellence looks like in NHS Wales

DATE OF MEETING	19 September 2023
PUBLIC OR PRIVATE REPORT	Public
IF PRIVATE PLEASE INDICATE REASON	NOT APPLICABLE - PUBLIC REPORT
REPORT PURPOSE	INFORMATION / NOTING
IS THIS REPORT GOING TO THE MEETING BY EXCEPTION?	NO

PREPARED BY	Sarah Townsend, Head of Research & Development Christopher Cotterill-Jones, Research Delivery Manager
PRESENTED BY	Jacinta Abraham, Executive Medical Director
APPROVED BY	Jacinta Abraham, Executive Medical Director

EXECUTIVE SUMMARY	On 28 July 2023, Welsh Government issues Welsh Health Circular WHC/2023/026 titled "NHS Framework for Research and Development – Research matters – What excellence looks like in NHS Wales".
	Health and Care Research Wales has published a new Research and Development (R&D) Framework, in a drive to embed and integrate research into all aspects of health and care



services in NHS Wales. It has been published as consistent national guidance to NHS organisations and where its key features are expected to form a core part of organisational culture.
The framework document is relevant to all those involved in the design, management, and delivery of healthcare in the Welsh NHS including the NHS boards and all executives, those with a responsibility for strategy development, clinical leads, professional leads, heads of service, operational managers as well as dedicated research staff such as R&D Directors and leads, research managers and the research workforce.

RECOMMENDATION / ACTIONS	RD&I Sub-Committee are requested to NOTE the Welsh Health Circular Welsh Health Circular WHC/2023/026 and "NHS Framework for Research and Development – Research matters –
	What excellence looks like in NHS Wales".

GOVERNANCE ROUTE	
List the Name(s) of Committee / Group who have previously received and considered this report:	Date
Executive Management Board	14 Aug 2023

SUMMARY AND OUTCOME OF PREVIOUS GOVERNANCE DISCUSSIONS

The Executive Management Board – Shape meeting convened on 14 August 2023, was the first committee/group meeting in the RD&I governance route since the Welsh Health Circular was issued and the "NHS Framework for Research and Development – Research matters – What excellence looks like in NHS Wales" was published.

The Executive Management Board received this paper for information/noting.



7 LEVELS OF ASSURANCE	
NOT APPLICABLE	
ASSURANCE RATING ASSESSED BY BOARD DIRECTOR/SPONSOR	Select Current Level of Assurance

APPENDICES	
1	Welsh Health Circular WHC/2023/026
2	NHS Framework for Research and Development – Research matters: What excellence looks like in NHS Wales



1. SITUATION

This paper is to provide the RD&I Sub-Committee with a high-level summary of the Welsh Health Circular WHC/2023/026 and "NHS Framework for Research and Development – Research matters – What excellence looks like in NHS Wales".

2. BACKGROUND

It is widely known that research makes a real difference to improving health outcomes and to the lives of patients and people in our communities. Research and innovation are critical to the delivery and development of the NHS and NHS organisations in Wales, who have a critical role to play to support research.

Research in the NHS is funded through a variety of sources. A key funder is Health and Care Research Wales [HCRW] – through funding from Welsh Government [WG]. HCRW includes both policy (Research & Development Division [RDD], Welsh Government) and various parts of the HCRW infrastructure that includes research centres and units, faculty, Wales evidence centre, the Support & Delivery centre, and NHS R&D.

The NHS also attracts research funding from a wide variety of sources, both non-commercial and commercial funding. These various funding streams work together to strengthen the NHS' capacity and capability. Additionally, NHS organisations support research in providing accommodation and facilities, alongside NHS staff who support day-to-day research activities.

The NHS Framework for R&D document outlines what 'research excellence looks like' for NHS organisations in Wales with research embraced, integrated into services, and is a core part of the organisation's culture. It is intended to be used to

- Form the basis of NHS Organisations' RD&I strategies along with self-assessment of an organisation, implementation, and delivery plans.
- Ensure alignment across internal and external R&D infrastructure within Wales.
- Provide a basis for work programmes that support the achievement of the ambitions within the document.
- Support broader strategic discussions between the NHS organisation, RDD, and WG at organisational performance meetings.

This framework outlines the characteristics of research supportive NHS organisations organised under ten pillars describing features, and cross-cutting themes, to be integrated into services.



3. ASSESSMENT

Trust representatives attended HCRW facilitated workshops with stakeholders on the co-creation of this framework. Additionally, the Trust commented on the framework document during the consultation period.

The expectation is that a strong partnership approach is taken by the Trust and HCRW to achieve the features of the ten pillars described in the framework.

As with previously issued RD&I related policy issued by HCRW and WG, the Executive Medical Director/Board Lead for RD&I with the Trust RD&I Service shall lead the implementation of this NHS Framework for R&D. The Trust RD&I Service shall involve service representatives across both VCC and WBS as required in the implementation of the document.

The Trust will be required to provide an assessment of its position against each of the NHS Framework for R&D's ten pillars in a forthcoming annual performance review meeting convened for 05 December 2023 between Health and Care Research Wales, Welsh Government, and Velindre University NHS Trust. This year's performance review meeting will be the first year the Trust is assessed in this new format. The outcomes of this meeting will be reported through the RD&I Governance Framework.

4. SUMMARY OF MATTERS FOR CONSIDERATION

The RD&I Sub-Committee is asked to **NOTE** for information the Welsh Health Circular WHC/2023/026 and "NHS Framework for Research and Development – Research matters – What excellence looks like in NHS Wales" and the RD&I Service's intent for implementation.

5. IMPACT ASSESSMENT

TRUST STRATEGIC GOAL(S)

Please indicate whether any of the matters outlined in this report impact	t the Trust's
strategic goals:	
YES - Select Relevant Goals below	
If yes - please select all relevant goals:	
 Outstanding for quality, safety and experience 	
• An internationally renowned provider of exceptional clinical services that always meet, and routinely exceed expectations	
• A beacon for research, development and innovation in our stated areas of priority	\boxtimes
• An established 'University' Trust which provides highly valued knowledge for learning for all.	

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 A sustainable organisation that plays its part in creating a better future for people across the globe 				
RELATED STRATEGIC RISK - TRUST ASSURANCE FRAMEWORK (TAF) For more information: STRATEGIC RISK DESCRIPTIONS	04 - Organisational Culture			
QUALITY AND SAFETY IMPLICATIONS / IMPACT	 Yes -select the relevant domain/domains from the list below. Please select all that apply Safe ⊠ Timely □ Effective ⊠ Equitable ⊠ Efficient ⊠ Patient Centred ⊠ a) The NHS Framework for R&D includes ten pillars that outline the features of a research supportive organisation. b) Meeting these features enables the Trust to continue to demonstrate its commitment to undertaking research that is evidence based and appropriate, offering equal opportunities to all patients that is respectful and responsive to their treatment needs. c) It will also display that the Trust's dedication to conducting research in a safe and effective manner, making the best use skills and resources available. 			
SOCIO ECONOMIC DUTY ASSESSMENT COMPLETED: For more information: https://www.gov.wales/socio-economic-duty- overview	Not required			



Ymddiriedolaeth Prifysgol Felindre	GIG
Velindre Universit NHS Trust	У

TRUST WELL-BEING GOAL IMPLICATIONS / IMPACT	A Healthier Wales - Physical and mental well- being are maximised and in which choices and behaviours that benefit future health If more than one Well-being Goal applies please list below:
	If more than one wellbeing goal applies please list below:
FINANCIAL IMPLICATIONS / IMPACT	Yes - please Include further detail below, including funding stream
	There is a potential financial impact in not implementing the NHS Framework for R&D as it could jeopardise the funding received from Health and Care Research Wales.
	No direct financial implications from this paper.
EQUALITY IMPACT ASSESSMENT For more information: https://nhswales365.sharepoint.com/sites/VEL_I	Yes - please outline what, if any, actions were taken as a result
<u>ntranet/SitePages/E.aspx</u>	The Equality Impact of implementing this Welsh Health Circular and NHS Framework for R&D has been considered and there are no matters of concern to raise.
ADDITIONAL LEGAL IMPLICATIONS / IMPACT	There are no specific legal implications related to the activity outlined in this report.
	Click or tap here to enter text

6. RISKS

ARE THERE RELATED RISK(S) FOR THIS MATTER	No
WHAT IS THE RISK?	NOT APPLICABLE
WHAT IS THE CURRENT RISK SCORE	



HOW DO THE RECOMMENDED ACTIONS IN THIS PAPER IMPACT THIS RISK?	
BY WHEN IS IT EXPECTED THE	
TARGET RISK LEVEL WILL BE	
REACHED?	
ARE THERE ANY BARRIERS TO	
IMPLEMENTATION?	
All risks must be evidenced and consistent with those recorded in Datix	



APPENDIX 1. Welsh Health Circular WHC/2023/026

WHC/2023/026

WELSH HEALTH CIRCULAR



Issue Date: 28 July 2023

Llywodraeth Cymru Welsh Government

STATUS: COMPLIANCE / ACTION / INFORMATION

CATEGORY: POLICY

TITLE: NHS FRAMEWORK FOR RESEARCH AND DEVELOPMENT – Research Matters – What excellence looks like in NHS Wales

Date of Expiry / Review: Under constant review

For Action by:

Action required by: Immediate

Chief Executives, Health Boards/Trusts Medical Directors, Health Boards/Trusts Research and Development Directors & Leads, Health Boards/Trusts Nurse Executive Directors, Health Boards/Trusts Directors of Therapies and Health Sciences, Health Boards/Trusts Directors of Finance, Health Boards/Trusts Directors of Planning, Health Boards/Trusts Directors of Primary Care, Health Boards/Trust Directors of Public Health, Health Boards/Trusts Directors of Workforce and Organisational Development, Health Boards/Trusts Directors of Patient and Carer Experience, Health Boards /Trusts Directors of Quality and Safety, Health Boards/Trusts Independent Board Champions for Research and Development, Health Boards/Trusts Chief Pharmacists, Health Boards/Trusts Health Education and Improvement Wales Digital Health and Care Wales Social Care Wales General practitioners General Practitioners Council Wales

Sender:

HSSG Welsh Government contact(s):



Carys Thomas, Head of Policy, Research and Development Division Violina Sarma, Head of NHS and Social Care Research Environment E-mail - <u>hssrd@gov.wales</u>

Enclosures: Annex 1. A copy of the NHS Framework for Research and Development can be found on the Health and Care Research Wales website –

Research matters - What excellence looks like in NHS Wales (healthandcareresearchwales.org)

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Dear colleagues

Improving health and care services in Wales using evidence-based approaches is fundamental to improving the quality of care and putting the public at the heart of everything. It is widely known that research makes a real difference to improving health outcomes and to the lives of patients and people in our communities.

Health and Care Research Wales has published a new Research and Development (R&D) Framework, in a drive to embed and integrate research into all aspects of health and care services in NHS Wales. It is being published as consistent national guidance to NHS organisations and where its key features are expected to form a core part of organisational culture.

Research is a fundamental component of everyday health and care and is critical to the development of all aspects of NHS Wales. This document is therefore relevant to all those involved in the design, management, and delivery of healthcare in the Welsh NHS including the NHS boards and all executives, those with responsibility for strategy development, clinical leads, professional leads, heads of services, operational managers as well as dedicated research staff such as R&D Directors and leads, research managers and the research workforce.

To order to drive excellence, I expect NHS organisations to have a positive culture of continuous improvement through research and this aligns with the Duty of Quality which came into force in April 2023 as part of the Health and Social Care Act 2020.

I expect NHS organisations to use the framework to develop robust plans for the future, working collaboratively with a range of partners, for instance, Health and Care Research Wales, higher education providers, research agencies and funders, third sector organisations, life science companies and the public.

I would like to take this opportunity to thank everyone who has been involved in developing this comprehensive framework. Together, we have the opportunity to raise our game by striving forward to ensure research is embedded into core healthcare services, and to make the NHS in Wales a place where research matters.

I am grateful to you for the part you will play in that.

Yours sincerely

Judith Paget

Judith Paget Director General Health & Social Services Group / NHS Wales Chief Executive



APPENDIX 2. NHS Framework for Research and Development – Research matters: What excellence looks like in NHS Wales





Research matters What excellence looks like in NHS Wales

Background

Improving health and care services in Wales using evidence-based approaches is fundamental to improving the quality of care and putting the public at the heart of everything. It is widely known that research makes a real difference to improving health outcomes and to the lives of patients and people in our communities. Health and care research and innovation are critical to the delivery and development of the NHS and NHS organisations in Wales, who have a critical role to play to support research.

Research in the NHS is funded through a variety of sources. A key funder is Health and Care Research Wales – which is funded by Welsh Government (WG) to coordinate and facilitate health and social care research across Wales and provide resources to stimulate and support research. Health and Care Research Wales includes both policy (Research & Development Division, Welsh Government) and the various parts of the Health and Care Research Wales funded infrastructure which include research centres and units, faculty, Wales evidence centre, the support and delivery centre and NHS R&D.

The NHS also attracts research funding from a wide variety of sources including noncommercial funders through research grant income from government departments, research councils and charities, as well as commercial income for research from industry partners. These various funding streams work together to strengthen the NHS' capacity and capability. In addition, the NHS supports research through the provision of resources such as accommodation and facilities, as well as providing support for the day-to-day activities of NHS staff who support the research specialists on the ground.

This document has been developed through a co-creation process with key stakeholders facilitated by Health and Care Research Wales. It outlines what 'research excellence looks like' within NHS organisations in Wales where research is embraced, integrated into services, and is a core part of the organisation's culture.

To drive excellence, NHS organisations should have a positive culture of continuous improvement through research. This aligns with the *Duty of Quality* which came into force in April 2023 as part of the Health and Social Care Act 2020.



Research capacity and capability will differ between organisations and this document has been created to be relevant to all NHS organisations in Wales. There are seven local health boards and three NHS trusts which make up the NHS in Wales, as well as two special health authorities and a shared services partnership; and all these organisations support research.

As the NHS is part of a wider ecosystem, it is vital that Health and Care Research Wales and NHS organisations build on existing activities and work together across the features outlined in this document to support the NHS to strengthen its research and development (R&D) function. This is particularly important now to ensure that research plays its crucial role in supporting the NHS to evolve and adapt to future demands.

Why should research matter to the Welsh population and to the NHS?

Research provides the opportunity for patients and service users to access new treatments and services, that will improve their health and well-being and contribute to reducing health inequalities in the general population. NHS organisations that are actively involved in research see improved health outcomes and lower mortality rates, not just for those patients participating in research, but for everyone. Research creates evidence-based services, provides evidence for NHS standards and helps organisations to find new and better ways of delivering health and social care, including better health economic outcomes. Research provides opportunities for staff development and enhanced job roles which helps with recruitment and retention, as well as developing leaders and critical thinkers Research leads to economic benefits by attracting non-commercial funding and commercial income that can build the research capacity of frontline and other support services, as well as providing access to novel treatments and technologies received for free. Research is an essential pillar of securing and maintaining University (Health Board) status and a key enabler for NHS Wales to deliver 'A Healthier Wales.

Who is this document for?

Research is a fundamental component of everyday health and care and is critical to the development of all aspects of NHS Wales. This document is therefore relevant to all those involved in the design, management, and delivery of healthcare in the Welsh NHS including the NHS boards and all executives, those with responsibility for strategy development, clinical leads, professional leads, heads of services, operational managers as well as dedicated research staff such as R&D Directors and leads, research managers and the research workforce.

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This framework is also relevant to the public as recipients of health and care services from NHS Wales.

It is also relevant for key stakeholders working in partnership with NHS Wales who have aligned vision for research and joint R&D strategies as part of the whole ecosystem which enables health and care research through collaborative effort. This includes but is not limited to government departments, higher education providers, research agencies and funders, third sector organisations, public sector organisations, life science companies and their representative bodies.

What research does it cover?

This document covers health research across all specialties and sectors which is within the responsibility of NHS Wales as part of the whole ecosystem, including but not limited to:

- primary care, secondary care, public health, community services, health research in social care settings and integrated care;
- commercial and non-commercial research, including clinical trials, observational studies, discovery science and experimental medicine, public health, translational and applied research; and
- research to support policy making, academic research in clinical areas and research into NHS services and care pathways.

How should this document be used?

- To provide guidelines on the core content of NHS R&D and/or R&D and innovation strategies and implementation plans.
- To provide a framework for organisational self-assessment and peer review to
 establish the maturity of an organisation in respect of its arrangements and
 approach to supporting high quality and impactful research.
- To support better alignment between the national and local infrastructure for R&D, including identifying 'once for Wales' opportunities in the context of the national strategy, and/or sharing local good practice.
- To support broader strategic discussions between the Research and Development Division (RDD), Welsh Government (WG) and NHS organisations at performance meetings.
- To provide one document that can be used consistently across a range of national guidance and activities to simplify reporting processes for example the NHS planning framework (and associated workplans such as Integrated Medium-Term Plan- IMTPs), Welsh Health Circulars publication, and the NHS Executive.

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 To provide the basis for a work programme to achieve the ambitions within this document, taking a partnership approach with Health and Care Research Wales and NHS organisations working collaboratively.

Features of a research supportive NHS organisation

The features of a research supportive NHS organisation have been organised under ten pillars, which are summarised in Diagram 1. Supportive NHS organisations will work to embrace every pillar and the features they contain together, as they all play an important part in ensuring that research is integrated into services and is contributing to the whole system, thereby achieving excellence.

Diagram 1:

The ten pillars outlining the features of a research supportive NHS organisation



There are also several cross-cutting themes which underpin the ten pillars which include the statutory requirements to be addressed and considered when developing policy and implementation plans. These cross-cutting themes are highlighted in diagram 2 where those most relevant to the research agenda have been identified.

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The Duty of Quality is a recent addition and reinforces the importance for research supportive organisations to adopt a system-wide way of working to provide safe, effective, person-centred, timely, efficient, and equitable health care in the context of a learning culture.

Diagram 2:

Cross-cutting themes which underpin the ten pillars of a research supportive NHS organisation



Each of the ten pillars is detailed below, along with the features of a research supportive NHS organisation.

1. Strategy:

Supportive organisations:

- 1.1. Have clear vision for research and ambitious R&D strategies, with aligned implementation plans and continuous progress monitoring. Strategies will:
 - be coproduced with the public and key stakeholders to ensure they are patient/ public centred;
 - outline a clear vision;
 - demonstrate a clear connection to wider organisational strategies and service plans;
 - demonstrate alignment with the opportunities presented by national and UK wide R&D strategies;
 - be signed off by the Board, alongside a time bound implementation plan;
 - · be widely promoted to staff and the public.
- Demonstrate a clear connection between their strategy and implementation plans and key local and national indicators for research performance.
- Ensure R&D has full representation and visibility within the NHS organisations Integrated Medium-Term Plan (IMTP).

2. Governance and Leadership

Supportive organisations:

 Demonstrate clear board commitment to research, with evidence of members contributing to agenda setting, assessing performance, and impact.

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- 2.2. Appoint an independent board member/ champion for research, to act as an ambassador and to champion R&D at the board and across the organisation.
- 2.3. Support research at all levels by raising awareness among NHS directors, executives, deputies, senior and operational managers to secure commitment and by promoting research through existing committee structures.
- 2.4. Have a dedicated Executive Lead for research and a dedicated R&D Director, who have dedicated time to oversee the R&D strategy and provide strategic leadership.
- 2.5. Have a dedicated committee wired into the NHS organisation's governance where research is frequently discussed, with representatives from across the organisation and public members, to plan, oversee and report on research.
- 2.6. Annually report on progress against the organisation's R&D strategy, including reporting progress for a public facing audience for example, through a public facing annual report outlining R&D activities and income.

3. Partnership and Collaboration

Supportive organisations:

- 3.1. Establish strong interdisciplinary working within the organisation between departments and specialisms; across primary, secondary and community care; and evidenced connections across research, training and education, service improvement and innovation.
- 3.2. Establish cross-sector partnerships across Wales, the UK and internationally to increase the reach, level and impact of research. Specifically, there will be evidence of alignment of vision, joint R&D strategies, memorandums of understanding, deliverable plans and regular progress reviews with:
 - Higher education providers, collaborating to maintain integrated partnership working between the NHS and academia including, where relevant, as part of the research and development pillar for University Health Board status
 - Research agencies and funders (including research councils and third sector organisations)
 - Public sector organisations, by working across organisational boundaries and adopting flexible approaches to enable easier movement of staff. This may include working with other NHS organisations, Digital Health and Care Wales, Health Education and Improvement Wales, and the Regional Innovation and Improvement Coordination Hubs.

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- Life science companies and representative bodies as part of Wales and UK wide industry collaboration plans, whilst developing efficient systems to support commercial research.
- 3.3. Establish partnerships with external expert advisory boards and key international opinion leaders to bring fresh insight and perspective; act as critical friends and collaborative partners; and help NHS researchers to benchmark against internationally leading research within their fields.

4. Research Support

Supportive organisations have:

- 4.1. R&D offices and/or departments to support researcher development, research governance and the set-up, delivery, and quality assurance associated with studies.
- 4.2. Support for research within departments and directorates including support for staff time and NHS support services for research such as radiology, pathology, pharmacy, finance, and workforce and organisational development (W&OD).
- 4.3. The ability to assess organisational capacity and capability to undertake research so that studies can be hosted or sponsored.
- 4.4. Access to well-equipped physical and digital library services, where staff can access information on research outcomes to inform best practice.
- 4.5. Access to suitable space, facilities, and equipment for the conduct of research, with ongoing development enabled through the organisation's facilities and estates strategy.
- 4.6. An effective and efficient Information Management & Information Technology (IM&IT) infrastructure and systems to support research, with evidenced alignment to organisational digital strategies and national strategies, including those produced by Health and Care Research Wales for example supporting data and software that adheres to the FAIR (Findable, Accessible, Interoperable, and Reusable) principles to allow full repeatability, reproducibility, and reuse.
- 4.7. Processes in place to contribute to the availability of health data for research purposes, increasing data resources for secure access data via trusted research environments and supporting more diverse research enabled by data driven services.
- 4.8. A commitment to embracing emerging technologies and to research enabled by data and digital tools, leveraging the strength of NHS Wales and UK health data assets to allow for more high-quality research to be developed and delivered, whilst adhering to data protection obligations in relation to conducting research.

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5. Research delivery

Supportive organisations:

- 5.1. Implement UK and Wales wide research delivery support programmes in partnership with the Health and Care Research Wales.
- 5.2. Adopt One Wales approaches (where Welsh organisations operate as a national collective) to research delivery to enable streamlining, reduce duplication and consistency across Wales including national approaches for research approvals, rapid study setup and delivery.
- 5.3. Strategically manage the NHS organisation's research portfolio, to lead and participate in a wide range of research, capitalising on local strengths and research groups, organisational priorities and research capacity and capability.
- 5.4. Support research with high policy relevance which aligns with priorities at a national and regional level, and the NHS organisation's local population health needs.
- 5.5. Set realistic study delivery targets, ensure research delivery to time and target as agreed with sponsors and monitor the performance of individual studies, ensuring study management data is accurately recorded and monitored frequently.
- 5.6. Regularly review the organisation's track record in research delivery across the portfolio, understanding the context with local intelligence and benchmarking with UK peers.

6. Finance

Supportive organisations:

- 6.1. Secure adequate funding from Health and Care Research Wales to establish a sustainable R&D function covering research development and delivery and manage the funding transparently, in line with the Health and Care Research Wales R&D Finance Policy.
- 6.2. Include R&D within the organisation's financial strategies and plans.
- 6.3. Have financial plans for R&D with good forecasting, timely invoicing, and proportionate risk management.
- 6.4. Have a commitment to generate research income for non-commercial studies (i.e. from research funders, research councils and third sector organisations) and commercial studies (i.e. from industry partners) to facilitate capacity building.
- 6.5. Help existing and prospective researchers secure grants from a wide range of funding sources to advance their studies leading to high quality and impactful outcomes and peer-reviewed international journal publications.

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6.6. Ensure financial support is provided to advise on and monitor all costs relating to commercial and non-commercial research.

7. NHS Workforce Capacity and Capability

Supportive organisations:

- 7.1. Promote R&D in the organisation's W&OD strategy to facilitate research and recognise the benefits of being a research supportive NHS organisation in attracting talented staff.
- 7.2. Deliver NHS workforce plans where research is a key component which will include plans to:
 - raise awareness of research and research careers through a variety of mechanisms to attract more people into research careers, whilst providing role variety, job enhancement and facilitating staff retention (e.g. through staff induction and mandatory training).
 - build research capacity and capability for all staff by supporting the professional development of research knowledge and skills (e.g. through PADRs, mentoring, and signposting to national training opportunities provided through Health and Care Research Wales and other training providers across Wales and the UK).
 - ensure that all NHS staff have the opportunity to support research by including research in all NHS job descriptions and have protected time for research for NHS staff through job planning and PADRs.
 - maintain support for research in the NHS workforce during times of clinical crises such as urgent public health emergencies and winter pressures, where research activity should be focussed toward the clinical needs.
 - enhance research delivery capacity amongst the workforce, including the capability to support clinical trials, ensuring good clinical governance and best practice.
 - adopt national polices enabling agile regional and national mobilisation of the R&D workforce across NHS organisation boundaries and adopt flexible approaches to staff contracts with partner organisations to promote cross-organisational working.
 - facilitate access to support for staff at all levels who wish to undertake research, advising on how to navigate the R&D environment and signposting to internal and external sources of information (e.g. on funding streams, protocol development, writing funding applications, statistical support, research design and methods).
 - explore opportunities for investment in joint clinical academic roles in specialties and disciplines aligned to local and national plans, in partnership with universities.

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8. Public Involvement and Participation

Supportive organisations:

- 8.1. Have an evidenced commitment to proactive public involvement and participation in the development and delivery of research studies where the public's experience is valued and where they can play a variety of roles adding significant value to research e.g. strategy development, setting research priorities, study steering group member, as a research participant and in shaping plans to share the findings of research.
- 8.2. Allocate sufficient budget to public involvement, ensuring that public contributors are acknowledged and recognised for their time, lived experience and contribution, in the form of monetary payment or other methods of reward and recognition in line with best practice guidelines.
- 8.3. Ensure that all research supported by the NHS organisation is people centred, supporting research to make it easier for patients, service users and members of the public to access research of relevance to them and be involved in its design, learning directly from public experience.
- 8.4. Adopt the national approach to promote research opportunities to staff and the public, including working in partnership with key stakeholders such as third sector organisations to promote research opportunities to communities of people with lived experiences; and signpost access to the organisation's and NHS Wales' research portfolio to enhance participation.
- 8.5. Ensure that the public involved in the NHS organisation's research represents the population it serves with equality, diversity and inclusion being key drivers, and develop flexible approaches to involvement to enable inclusive representation e.g. addressing barriers to involvement and participation through language barriers and literacy levels etc.
- Adopt the UK Standards for Public Involvement, enabling good practice in public involvement.
- 8.7. Facilitate access to national training on public involvement for research active staff, to raise awareness on how to effectively involve the public in research.
- 8.8. Have active representation on the Health and Care Research Wales Public Involvement Alliance.

9. Communications and Engagement

Supportive organisations:

- 9.1. Include research in the NHS organisation's communications and engagement plans to demonstrate the value and importance of research, celebrating successes and raising the profile amongst staff and the public.
- 9.2. Adopt the national approach to communications and engagement for research in Wales to ensure there is clear and consistent messaging.

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- Ymddiriedolaeth GIG Prifysgol Felindre Velindre University NHS Trust
- 9.3. Have active representation at the Health and Care Research Wales Communications Alliance.
- 9.4. Develop plans to raise awareness of the importance of research among local diverse communities, collaborating with researchers and ensuring proactive engagement with underrepresented groups, including working in partnership with third sector organisations and their local communities.
- 9.5. Include research in the NHS organisation's equality, diversity and inclusion plans with a strong commitment to active engagement with specific groups to address health inequalities through research.
- 9.6. Adopt national research campaigns and link local research with national Health and Care Research Wales research to maximise impact.

10. Research Impact

Supportive organisations:

- 10.1. Have a commitment to open access publishing for research findings, including a commitment to ensure that researchers follow the open access policies of those funding their work, to ensure that research outcomes are freely available and encourage the use of research findings.
- 10.2. Have systems in place to enable research from Wales, the UK and beyond to influence practice and service delivery on an ongoing basis to improve and enhance the quality of services.
- 10.3. Develop plans to ensure research is supported during service redesign and informs the design of new models of service delivery based on outcomes from national, UK wide and international research.
- 10.4. Work with Health and Care Research Wales to develop mechanisms for measuring the economic and societal value associated with research and its impact.

Implementation of this document

This document will be used for the purposes described in the introduction.

A strong partnership approach will be taken with Health and Care Research Wales and NHS organisations working collaboratively to achieve the features of research supportive organisations.

Programmes to support implementation and monitor progress will provide the basis for a work programme to achieve the key features set out across the ten pillars.

July 2023

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