The Centre for Trials Research at Cardiff University is a UK Clinical Research Collaboration (UKCRC) registered clinical trials unit.

Our mission is to improve the health and wellbeing of society through recognised excellence in clinical trials and other well-designed studies.
Contents

Foreword 2

Executive summary 5

Work package 1: Managing our work 7

Work package 2: Working with other groups 9

Work package 3: Developing new studies 11

Work package 4: Overseeing funded studies 15

Work package 5: Ensuring methodological and professional development 19

Work package 6: Supporting innovation from NHS and social care practice 22

Conclusions and looking forward 24

Images on front cover (from top left to right):
1. Dr Sue Channon, Director of the Research Design and Conduct Service (RDCS) South East Wales, at the Annual Health and Care Research Wales Conference 2017, explaining how the RDCS supports research in the NHS and social care.
2. Researchers for a major UK cancer study (ABACus) enlisting members of the public to the study.
3. Child participating in our Seal or Varnish study, which determined the benefits of competing dental treatments for kids.
4. Engaging with the public using novel games and activities.
5. Professor Kerry Hood receiving her outstanding contribution to leadership award.
6. Claire Nollet, one of our RDCS consultants, providing support to develop research capacity in Wales.
Foreword

Mission and strategic aims
The Centre for Trials Research, Cardiff University is a UK Clinical Research Collaboration registered clinical trials unit that is dedicated to tackling the big diseases and health concerns of our time. We work with investigators to produce research evidence for policy leaders, service commissioners and practitioners about treatments and services that may improve the health and well-being of the public.

Key programme partners and beneficiaries
The Centre receives infrastructure funding from Health and Care Research Wales and Cancer Research UK. This funding allows us to invest in core activities that are inherent requirements for the design and oversight of high quality studies and to win external funding to allow their conduct, analyses and publication. Most of our work involves external investigators undertaking primary research in health or social care.

The potential beneficiaries are broad, reflecting the range of studies and investigators we work in partnership with. These include: patients; members of the public; health and social care service providers; health and social care policy makers. They are based in Wales, the rest of the UK and internationally.

Who’s who and divisions
The Centre for Trials Research Director (and Director of Infections, Inflammation and Immunity Division) is Professor Kerry Hood. She is supported by a senior leadership team including Professor Michael Robling (Population Health Division), Professor Monica Busse (Mind, Brain, Neuroscience Division), Professor Richard Adams (Cancer Division) and Dr Sue Channon (Research Design and Conduct Service South East Wales).

How we work
Our 139 researchers and professional staff work across our four divisions and within cross-cutting teams (information services, information technology, quality assurance and regulatory affairs and professional services). Our current research portfolio includes evaluations of drugs and complex healthcare interventions, studies of mechanisms of disease and treatments, cohort studies and trials informing health and social care policy and practice.

Health and Care Research Wales provides specific funding support for three of our divisions: Population Health; Mind, Brain and Neuroscience; and Infections, Inflammation and Immunity, as well as for the Research Design and Conduct Service South East Wales.
Head of Divisions and Research Design and Conduct Service

Professor Kerry Hood, Director
Centre for Trials Research and
Infections, Inflammation and
Immunity Division

Dr Sue Channon, Director
Research Design and Conduct
Service (RDCS) SE Wales

Professor Mike Robling,
Director Population
Health Division

Professor Monica Busse,
Director Mind, Brain and
Neuroscience Division

Professor Richard Adams,
Director Cancer Division

Centre for Trials Research Divisions

Infections, inflammation and immunity

Mind, brain and neuroscience

Cancer

Population health
Work packages
Within the Health and Care Research Wales Divisions, we organise our work across six work packages (WP) in the following way. Throughout this report, these graphics identify and introduce you to each section:

**WP1:**
Managing our work

**WP2:**
Working with other groups

**WP3:**
Developing new studies

**WP4:**
Overseeing funded studies

**WP5:**
Ensuring methodological and professional development

**WP6:**
Supporting innovation from NHS and social care practice

Cross-cutting themes
At the end of each work package throughout the report, you will see the six cross-cutting icons below. This is to identify the ways in which our work has wider impact across the NHS, industry, social care, within Welsh Government and for the public. We hope you will find this a simple and easy way to navigate this report.

- Public involvement and engagement
- Social care
- NHS engagement and collaboration
- Commercial/industry engagement and collaboration
- Engagement with Welsh Government funded research infrastructure
- Communications, publicity and knowledge transfer
We have exceeded our targets for external grant awards in health and social care with 23 new grant awards from a range of funders such as NHS and Research Councils, European and charity funders to the value of over £13.2M. We have published 80 peer-reviewed papers over this period. Importantly, over the last year we have developed new studies with more first-time chief investigators, seen an increase in our numbers of doctoral research student awards and completions and have also had success in supporting post-doctoral fellowship applications to a variety of funders. We have continued with our extensive programme of engagement with other groups across infrastructure, NHS, industry and the third sector.

We are highly committed to ensuring that Public and Patient Involvement in research is fully embedded in our strategic approach to study development, execution and dissemination. This commitment is evidenced through some of the 54 public involvement activities we have rolled out across our portfolio of 77 studies in the last year and in this, our first public facing annual report co-produced with lay representatives.

Our excellent and impactful work is showcased through our leading role in 14 engagement and dissemination activities reaching approximately 1,379 members of the population in Wales and further afield. This means that our work can impact on the health and wellbeing of the population of Wales and beyond.

We would like to acknowledge our funders, research partners, staff and, above all, the participants in our research studies without whom none of this work would be possible. Thank you for taking the time to read about our work.

This report highlights our key achievements for the year 2017/18.

Our work can impact on the health and wellbeing of the population of Wales and beyond.

Professor Monica Busse
Director, Mind, Brain and Neuroscience Division

Professor Mike Robling
Director, Population Health Division

Professor Kerry Hood
Director, Infections, Inflammation and Immunity Division

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Centre for Trials Research
April 2017 to March 2018

We are a registered clinical trials unit and the largest group of academic clinical trials staff in Wales.

Increasing research capacity in Wales

The Centre for Trials Research is publicly-funded by Welsh Government through Health and Care Research Wales and Cancer Research UK to enable applied research that informs policy in health and social care, and is currently running studies across Wales, the UK and internationally.

Over the past year, we have continued to support and grow research capacity, particularly in Wales.

Here we highlight some of our achievements and impact during the past 12 months.

Lay summary: our year in numbers

139
Centre for Trials Research staff

80
papers published

1379
attendees

23
new grant awards

54
public involvement opportunities

14
engagement and dissemination activities

>£13.2M
Total funding awarded
Open door policy

Delivery of high quality research in line with our strategic planning is a core feature of our work practice. Across our divisions, we maintain a thematic research focus matched with our expertise in Behaviour Change, Children and Young People, Devices and the Older Person. This reflects the trajectory and expertise of the methodologists in our Centre and where we have achieved either international or national recognition respectively. However, we retain an open door policy for approaches and our portfolio management process encourages all good ideas to be considered.

We manage our work via dedicated management groups that report to the Centre for Trials Research Executive. The Executive has representation from all the divisional directors as well as the leads for each of our cross cutting teams.

Quality management

Quality management of research is a critical aspect of a registered clinical trials unit. Within our online quality management system, we have now developed:

- 13 policies
- 66 Standard Operating Procedures
- 180 associated templates and forms
- 294 additional trial-specific documents

All together these help us to ensure that our research meets and can evidence the required standards of Good Clinical Practice.
Learning and development
An important focus has been on our Learning and Development Policies and Procedures. We have a well-established policy to support learning and development with regular training opportunities cascaded across the Centre for Trials Research. We appointed a senior data manager who leads a development programme for data managers. Our operations team have developed a series of training activities for staff with a view to efficiency in grant and project management. All research staff present regularly at Centre for Trials Research wide bi-monthly staff meetings on their research at any stage of the study lifecycle. Some of our teams operate dedicated open academic programmes of meetings for example for qualitative methods and for routine data. We have provided academic and work placement opportunities for external individuals and members of our staff have delivered lectures and short courses for students, researchers and clinicians across Wales.

Developing new costing models
Importantly for efficient and transparent study design and running our research groups have been developing new costing models. These can be used in discussion with investigators when determining appropriate levels of resource to be costed into new study applications, for example for quality assurance (QA) time or for a trial or data manager. We have initiated projects looking at how we can be more efficient at each stage of the study lifecycle and especially at the crucial period of study setup. We expect to see the benefit of that work in the coming year. Our core funding supports the work of our highly experienced teams in aiming for studies that are more efficient, provided at lower cost, at highest quality and increasingly greener.
Collaboration

Working with other research and clinical groups is critical if we are to deliver research which is cutting edge, high quality and of importance to the people of Wales. We continue to play a role in the Directors group of the UK Clinical Research Collaboration (UKCRC) and to be a part of the operational sub-groups, including the trial manager, statistician and information services sub groups. We liaise with the Clinical Trials Units in the other regions of Wales to facilitate a joined up approach to engaging with the Health and Care Research Wales funded Centres and Units.

Routine data

Across the UK, we work with major data centres (e.g. Department of Health, Department for Education, NHS Digital) to develop and optimise ways to appropriately access and manage routine data to link to our trial data sets. ‘Routine data’ refers to information that is collected continuously as part of usual practice at various time periods (daily, patient by patient, monthly, ahead of operations, other scheduled visits) across different locations such as GP surgeries and hospitals, by GPs, nurses, consultants and other medical professionals. By pooling together and anonymising pre-existing available information (without all the extensive costs of having to gather that independently), there are valuable opportunities for researchers to notice patterns of outcomes, query data and reach conclusions about a wide range of health options.
Health and Care Research Wales funded infrastructure

We have strong links and clear working practices with Health and Care Research Wales funded infrastructure including PRIME, the National Centre for Population Health and Wellbeing Research (NCPHWR) and BRAIN. We have hosted activities at the annual Involving People workshop and worked closely with the Health Wise Wales, for example, in developing their involving people policy and their primary information system.

We have further strengthened our collaborations with social care to support applications for funding and oversight of supported studies, both through links with the Health and Care Research Wales funded School for Social Care Research and with Cardiff University’s Children’s Social Care and Research Development Centre (CASCADE).

In partnership with BRAIN, we have developed a new functional assessment for neurodegenerative disease that is now being tested in two clinical trials. Licensing agreements have been put in place to allow researchers in the US and Belgium to undertake validation work in a range of neurological conditions. The Clinch Token Transfer Test (C3T) is a novel multi-task functional assessment that has great potential as a sensitive end point for use in clinical trials in neurodegeneration and neurodysfunction.

Chief Investigator:
Professor Monica Busse
WP3:
Developing new studies

Designing new studies and winning the funding to make them happen.

In the last year, we have had funding success with 23 new awards to a value of £13.2 million. We highlight a few of them here.

POOL
Chief Investigator: Professor Julia Sanders

The POOL study is evaluating the safety of water births. It is estimated that up to 60,000 (9 in every 100) babies are born into water annually in the UK. The study will collect data on the births of all women in around 30 maternity units during 2015-2020. It will determine how many women are using birth pools, how many women give birth in water and whether mothers or their babies come to any extra harm because of water birth.

To do this without disturbing women in labour or just after birth, the study will use information collected as part of each woman’s and linked baby maternity record stored at hospitals in computerised systems. This involves collaboration with a software company Euroking who currently supply maternity systems to study sites.

BATCH
Chief Investigator: Professor Enitan Carrol

The ‘Biomarker-guided duration of Antibiotic Treatment in Children Hospitalised with confirmed or suspected bacterial infection’ (BATCH) trial is a national research trial to tackle antibiotic overuse in hospitalised children and reduce the spread of antimicrobial resistance. It is coordinated by the Centre for Trials Research and led by the University of Liverpool and Alder Hey Children’s NHS Foundation Trust.
An exciting development in 2017 for Cardiff was the inception of a research partnership in the area of Children’s Social Care. Cardiff University has been chosen as the research partner in a £4.85m initiative to help improve the lives of children who are at risk of abuse or neglect. The Department for Education has named the University’s Children’s Social Care Research Development Centre (CASCADE) - based in the School of Social Sciences - as its research partner for the What Works Centre for Children’s Social Care.

The new Centre will develop a strong evidence base around effective interventions and practice systems in children’s social care, examining support for children from the point of referral through to adoption, care-leaver support and targeted early help, among other areas. It brings together leading experts from the University’s Centre for Developing and Evaluating Complex Interventions for Public Health Improvement (DECIPHer), the Centre for Trials Research, the Systematic Use of Research Evidence Unit and the School of Medicine. Expertise in economic evaluation will be provided from Warwick University.

Currently in its early stages, the centre aims to become a fully independent organisation by summer 2020. The University will work with Nesta, which was awarded the contract to deliver a What Works Centre.

“The What Works Centre aims to provide useful evidence of the highest standard for workers and leaders across Children’s Social Care, and we look forward to delivering an ambitious programme of work aimed at making a tangible difference to services for children and their families”

Professor Donald Forrester, Director of CASCADE
Astrid Burrell: A Personal Journey

Astrid Burrell has been involved as a lay representative on several key studies; most recently, TRIDENT. Bringing years of personal experience of Huntington’s Disease, Astrid, along with members of the public on our studies, helps shape, guide and inform our research. TRIDENT (TRial designs for DElivery of Novel Therapies for neurodegeneration) is a trial of cell replacement therapy in people with Huntington’s Disease. It is funded by Research for Public and Patient Benefit (RfPPB) and run out of the Cardiff Huntington’s Disease Centre. It is anticipated that TRIDENT will give us information needed to design studies that test how cells, medicines or other therapies can be delivered directly into the brain in patients with neurodegenerative disease. Astrid shares her personal story below:

My husband suffered from Huntington’s Disease (HD) for over 30 years and it is in his memory that I am passionate about playing my small part in research to try to improve the lives of HD patients and their families.

In 2011, a chance invitation from a new Huntington’s Disease Association (HDA) Care Adviser brought me to a meeting for HD families in Cardiff. Families who all understood and shared the problems of HD had the chance to meet professionals working in the field of HD research and we were given the opportunity to collaborate in the design and conduct of research to ensure that it is relevant to patients’ needs.

In October 2016, Professor Anne Rosser invited me to attend a 2-day international conference in London for Repair HD, regarding ethics of stem cell transplantation, followed in 2017 by a request to be a co-applicant on the TRIDENT trial funding application, which I am thrilled was successful. I became a member of the Trial Management Group (TMG).

I attend monthly meetings with the team in Cardiff and gained an enormous amount of understanding of working with the trials unit over the past year as the protocol has been developed. We now have final ethics approval, and I was very proud to have attended the Ethics Committee meeting with the team, so that I had the opportunity to tell them how welcoming this remarkable team had been to Public and Patient Involvement (PPI) and how they included me every step of the way.

The TRIDENT team welcome my opinions, comments and suggestions, allowing a PPI member to influence various aspects of the trial. I see how thoroughly they approach every single aspect, seeking consensus, safety always paramount. Numerous areas of expertise are needed to prepare and run a trial. I know the general public will always wish things will happen more quickly, but having now been “on the inside” I can see why, for safety purposes, everything takes a significant amount of time (in some cases years) to develop properly.

“It is no exaggeration to say that this work has literally transformed my life and made it seem worthwhile again and I feel really valued. I have loved every moment of the past 6 and a half years that I have been involved with trials in Cardiff, particularly ensuring that patients and their families thoroughly understand what participation entails and that nothing can possibly be misunderstood.”

Astrid Burrell,
Public representative on TRIDENT
Study portfolio

Our mission is to deliver sometimes challenging studies to a high quality and to develop best practice and publications in relation to the conduct of this type of research. Across our portfolio of 77 studies, we continue to identify critical paths and key study milestones at an earlier stage to ensure streamlined study set-up processes. Amongst the studies we opened this year are PLACEMENT, SenITA and ABACus.

PLACEMENT

Chief Investigators:
Dave Bosanquet and Chris Twine

The Perineural Local Anaesthetic Catheter after major lower limb amputation trial (PLACEMENT) is a phase II randomised controlled feasibility study looking at a new way of managing pain following amputation. This new method involves placing a perineural catheter (a tiny tube placed next to the main nerve cut during a leg amputation), through which local anaesthetic is infused after surgery. We want to compare this method with usual care.

SenITA

Chief Investigators:
Sue Delport and Dr Rachel McNamara

SenITA is a pragmatic randomised controlled trial of sensory integration therapy (SIT) versus usual care for sensory processing difficulties in autism spectrum disorder in children, and its impact on behavioural difficulties, adaptive skills and socialisation. We are currently recruiting 216 children and assessing behaviour, daily functioning, socialisation, and parent/carer stress at six and 12 months. Participants are allocated at random to either receive SIT or usual care. Discussion groups for therapists and carers have been organised before approaching people to take part for ‘usual care’ to be mapped out. Carers are using diaries to record their contact with NHS and other services such as social care.

This research will assess the feasibility of studying the effects of a perineural catheter on postoperative pain and other outcomes.
ABACus (Awareness and beliefs about cancer) is a randomised controlled trial of a health check intervention to improve cancer symptom awareness and help-seeking among people living in socioeconomically deprived communities. ABACus is funded by Yorkshire Cancer Research and is testing an interactive online health check developed in Wales by Tenovus Cancer Care. The study will be running in both Wales and Yorkshire and follows on from a feasibility study that was also run in conjunction with the Centre for Trials Research. The project could lead to improvements in cancer awareness in deprived communities, which contribute significantly to the poor outcomes found in both locations.
Publications

In the last year, we have published 80 peer reviewed papers in high quality journals. Notable publications have come from the CREAM study, ENGAGE-HD and a natural experiment of the Communities First Scheme in Wales.

CREAM was a double blind, randomised controlled trial to assess whether children with eczema benefitted from antibiotic treatment and was based in general practices and dermatology clinics in Wales, Scotland, and the West of England.

ENGAGE-HD was funded from a Health and Care Research Wales and National Institute for Health Research (NIHR) post-doctoral fellowship awarded in 2012 and completed in 2017. In ENGAGE-HD, we worked in partnership with people with Huntington’s Disease to develop and evaluate the feasibility of comparing a physical activity coaching intervention with social contact.

We also developed a novel approach for remote data entry for the purposes of this trial and implemented initial health economic process evaluations for costing intervention development and delivery. Over the duration of the award, there have been five associated publications, with the final results paper published in 2017. The findings have been presented at public events in Europe and USA. License agreements are now in place for the materials to be made available to the public via Huntington’s Disease Charities and academic and clinical partners globally, including being translated into Chinese. More than £500,000 of additional funding has been secured to continue with this programme of work.

Communities First

“Our study shows that targeted regeneration, directed by the residents of deprived urban communities, can help to improve the mental health of residents”

Dr James White,
Senior Lecturer in Public Health

Communities First was an area wide socioeconomic regeneration programme introduced into deprived neighbourhoods in Wales. Using a natural experiment study design the research team led by Dr James White from the Centre for Trials Research tested whether the scheme would be associated with a reduction in mental health inequalities. Involving 35 intervention sites and 75 control areas and using linked data from nearly 11,000 individuals the study found that targeted regeneration of deprived neighbourhoods can improve mental health.

Presenting research

We presented our research at 14 public events as well as key scientific meetings. Two examples are that of Professor Michael Robling and his programme of work evaluating specialist home-visiting. Professor Robling presented at a public lecture on the ten years of research that included the Building Blocks trial, a current follow-on study called Building Blocks: 2-6 and the BABBLE study which examines language development in young children. Members of the same research teams also took their work to The World Association for Infant Mental Health meeting in Rome in 2018 and which also included a symposium on early interventions run jointly with colleagues from Spain, Italy and Switzerland.
WP5: Ensuring methodological and professional development

Developing new ways to answer important clinical questions and sustaining a dynamic and professional workforce.

Supporting PhD students

We currently have 10 registered PhD students, and supported 3 students to successfully complete and graduate in the last year.
A key methodological publication from our team in the last year is the paper describing the development of a framework for the co-production and prototyping of public health interventions. Existing guidance for public health researchers on how to collaborate with intervention providers when developing new interventions was limited. This work sought to develop a framework that could be used to adapt and develop intervention content and delivery methods working in collaboration with key stakeholders. The three-stage framework that was developed (shown here) involving evidence review and stakeholder consultation, co-production and finally, prototyping.

The step-by-step guide can now be applied to other public health interventions prior to formal feasibility studies. High quality co-production increases the likelihood of the intervention being acceptable, feasible and of higher quality while also creating a greater sense of ownership for those delivering it in practice.

Fellowships

We have had important success with staff applying for and being awarded fellowships. Dr Aimee Grant was successfully awarded a Wellcome Fellowship for 18 months to study barriers to breastfeeding babies and infants outside of the home. Although breastfeeding is the optimal nutrition for babies in the first six months of life, some mothers may feel uncomfortable feeding away from their home and some may encounter negative reactions when they do so. The fellowship will explore some of the barriers that may currently exist for mothers using observational approaches and in-depth participatory approaches. It is planned that the work will lead to the development and testing of new interventions to support mothers. A short video (still frame pictured above) to portray issues highlighted by Dr Grant was well received.
Outstanding contribution to leadership award

A major highlight for the Centre was its Director, Professor Kerry Hood, being awarded Cardiff University's outstanding contribution to leadership award in 2017 (pictured above). This is awarded to individuals who by their energy, enthusiasm and motivation inspires and empowers others to achieve their goals and fulfil their potential. The award reflected Kerry’s long-term work developing the original South East Wales Trials Unit in 2006 to the subsequent formation of the Centre for Trials Research in 2015. In that time Kerry has maintained her own research profile being applicant on over £34M of research funding and with over 200 publications. Her principled and passionate leadership for research inclusion has established Cardiff’s position as a leading centre for research with people with learning disabilities. Her research leadership has shone a spotlight on the ‘inverse research law’ whereby some of those people with the greatest health and care needs are systematically under-researched leading to less evidence about what may work in addressing their needs.

Routine data

We have recently established our work on routine data as a theme within our Centre Methods strategy. This recognises how this field has developed in the last few years, and in particular in areas that we lead. We have several studies that are largely or solely using data that have been captured as part of routine delivery or public services, such as health or social care.

These include the Building Blocks: 2-6 study which is using data drawn from secondary healthcare, from local authority social care and education and from the Department of Health. These data are brought together and linked to existing trial data held in a data safe haven in Swansea ready for analysis. Related work using data sets held by and made available by the Scottish Government is being used to evaluate a home-visiting scheme in Scotland using a natural experiment design.

LUCI is also a follow-on study and aims to determine the short, medium and longer-term outcomes of urine infections (UTI) in childhood. Funded by Health and Care Research Wales it will determine whether there is a difference between UTI that is identified through routine practice and UTI identified through systematic urine sampling (where all ill children have their urine sampled).

Finally, a new major study using routine NHS data commenced in 2018 is the POOL study. The study team are working in collaboration with industry partner, Euroking who currently supply the information systems being used in all the maternity sites taking part on the study. This provides the opportunity to enhance the current system to ensure important clinical information about the health of mother and baby can inform the study analysis.
In April 2017, we said goodbye to Mark Kelson who moved to Exeter University and Sue Channon took on the Director role from Kerry Hood. By October 2017 we had our new team formed, all working part time in the RDCS: Philip Pallmann (Deputy Director and Consultant), Kim Smallman, Claire Nollett (Consultants), Mark Odgers (administration) and Richard Haggerty (Communications Officer).

We delivered three events for health and social care practitioners: In May 2018, we ran the “Early Ideas” event to introduce some of the basic aspects of developing a research question from an idea to a proposal. The September event focused on different aspects of making a research funding application. In November 2017, we ran a three-day writing retreat, attended by 16 delegates from 5 NHS-led teams.

Throughout the year, we have attended a range of events to raise awareness of the consulting service available, meet delegates and answer questions: The Health Board R&D conferences (Cardiff and Vale UHB & Aneurin Bevan UHB in June, Cwm Taf UHB in November) the Health and Care Research Wales Annual Event, Cardiff and Vale Nursing and Midwifery conference, the opening of the Paediatric Clinical Research Facility in September and the Wales School for Social Care Conference in February. We have worked with different specialties, responding to their requests for information and support to enable research capacity building e.g. we presented our service at the Cardiff and Vale Orthopaedic Directorate meeting and provided a group research consultation session to the Welsh Blood Service.

We received a total of 103 requests for support from individual practitioners in Health and Social Care of which 91 were employees of the six Health Boards for which we provide the RDCS lead. From those requests for support, 22 individuals have gone on to submit a research funding application. We are waiting to hear about seven applications that have made it to the final stage of the Health and Care Research Wales Research for Patient and Public Benefit and Social Care Grant schemes. In the year from April 2017 to March 2018 we heard about six applications that were successful totalling £1,493,090. These ranged from applications for relatively small pots of funding e.g. from the Intensive Care Foundation to substantial funding from the NIHR Health Technology Assessment funding stream.

Supporting staff in the NHS and social care in Wales to develop their own research to address the important questions in the care of patients and the public.

WP6: Supporting innovation from NHS and social care practice

Supporting staff in the NHS and social care in Wales to develop their own research to address the important questions in the care of patients and the public.
The Research Design and Conduct Service (RDCS) South East Wales supports staff working within the National Health Service and social care to develop high quality research funding proposals.

Service provided by RDCS consultants from the Centre for Trials Research, the largest group of academic clinical trials staff in Wales.

- **103** requests for RDCS consultant support
- **22** individuals submit research funding applications
- **£1,493,090** successful funding applications total
- **6** successful applications

Clients from **7** Health Boards in Wales

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<th>Engagement</th>
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<tr>
<td>Health Board Research and Development Conferences</td>
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<td>Health and Care Research Wales Annual Event</td>
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<tr>
<td>Cardiff and Vale Nursing and Midwifery Conference</td>
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<td>Opening of the Paediatric Clinical Research Facility</td>
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<td>Wales School for Social Care Conference</td>
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**Supporting Research Capacity Building**

- Provided group research consultation session to Welsh Blood Service
- Presented at Cardiff and Vale Orthopaedic Directorate Meeting
People are the core of the Centre’s work. Our work is driven to provide benefit for the people of Wales, and the Centre provides the focus for attracting, training and retaining the high-quality staff who make that possible.
Conclusions and looking forward

Conclusions

This last year has seen the quality of the Centre’s staff recognised through its full registration as a trials unit with the United Kingdom Clinical Research Collaboration. With few if any comparable examples of clinical trials units fully combining, it is a testament to all Centre staff that this has been so successfully achieved. We are similarly delighted that the confidence from our funders in Health and Care Research Wales and Cancer Research UK has resulted in extended and renewed core funding respectively.

How do we make a difference to the people of Wales? The Centre provides essential research capacity and a focal point for Wales-based investigators. Our work through the Research Design and Conduct Service has supported NHS and social care professionals to develop their own research ideas, often inspired by the clinical opportunities they encounter daily. Our researchers provide the wide range of expertise to support new funding applications and the 23 newly awarded studies in the last year. We have cemented our contribution to social care research, for example, through our partnership with the new What Works research partnership for children’s social care. We have continued the pathway to improving lives through dissemination of our work in 80 papers and an increasing number of engagement events. As a regulated business, we do this while ensuring demonstrable quality standards even during periods of organizational change. Like everyone else we have also managed this while responding to General Data Protection Regulation (GDPR)!

In looking forward, it is easy to forget the Centre’s core business in bringing teams together to bid for new funding, starting and completing studies and creating impact through dissemination and engagement. For us that activity will be stimulated by Wales-specific calls such as the Research for Patient and Public Benefit scheme which traditionally we have heavily supported. In the next year, we will see each constituent Division of the Centre further develop and embed their own research programme within the overarching strategic plan for the Centre. This will be guided by the policy framework within Wales, the University’s overarching Way Forward plan and by Centre and collaborating investigators. This year we will revise our policy for public involvement to embrace the new standards and showcase the range of opportunities that are available in the Centre. Overall this makes our work responsive and sensitive to the interests of the range of stakeholders who support high quality Wales-based clinical research.

To ensure our research remains cutting edge we will support new development opportunities for existing staff, for example in complex intervention development and through newly won PhD studentships and post-doctoral fellowships. This will include the further delivery and development of training provided by Centre staff in particular areas of methodological expertise such as working with adults who lack capacity to make decisions by themselves. We will see a number of major studies getting fully off the ground in the next 12 months such as POOL and FRANK Friends and, we hope, additional studies from amongst the many currently under review for funding.

Following a review of our communication with study participants, we will see a greater emphasis on quality reporting of results to those who contributed to our studies. In delivering this competitive programme of work it is important that our Centre has been established upon an overt base of guiding principles and values. With this in mind, we are grateful for the efforts of those such as our own Learning and Development and our Equality and Diversity groups who provide an invaluable steer to our work.
Thank you

The Centre for Trials Research wishes to thank all the members of the public and study participants who give their time to take part in our studies, freely and with great generosity to help improve health outcomes for future generations. It is our vision to produce a more evidence-based culture, so we know what works and what does not. This is impossible without your contribution and support.

Thank you to all our “lay reps” who give time to take part in study management groups and steering committees and in a myriad of other ways. You ensure that our materials are helpful for the public, that our Participant Information Sheets can be easily understood – and ultimately help all our studies to progress. We acknowledge a huge debt of gratitude.

In preparing this report we thank Bethan Phillips for her comments and feedback, and support producing the lay video for Health and Care Research Wales Involving People Annual Conference 2018.

We also owe special thanks to Astrid Burrell for co-producing the report, and providing her personal account in the section “Developing new studies: A personal journey” (page 13).

You’ll notice we look a bit different to our previous publications. We’ve started work to update the look and feel of the Centre for Trials Research annual report. By doing this we’re aiming to connect better with the people we support and to reach new audiences. Keep a look out for more to come!

Contact us

The Centre for Trials Research is willing to consider any well-designed study or trial idea, even those outside its current areas of research. For more information about collaborating with our research team or to keep up to date with news and events:

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