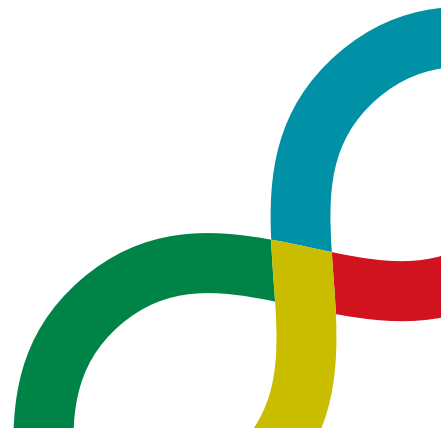
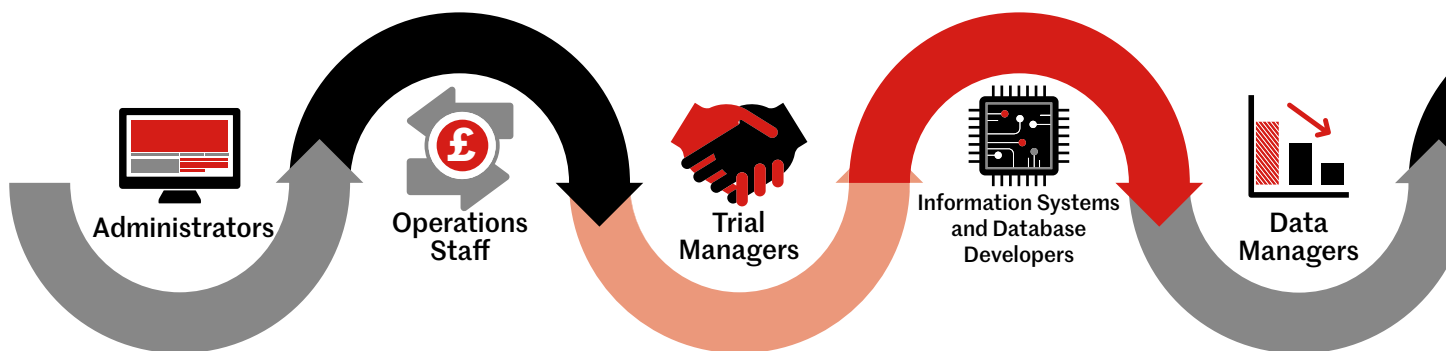




# End of Award Report 2020/25



**Our mission  
is to improve the  
health and wellbeing  
of Wales and the world  
through recognised  
excellence in trials  
and other well-  
designed research.**



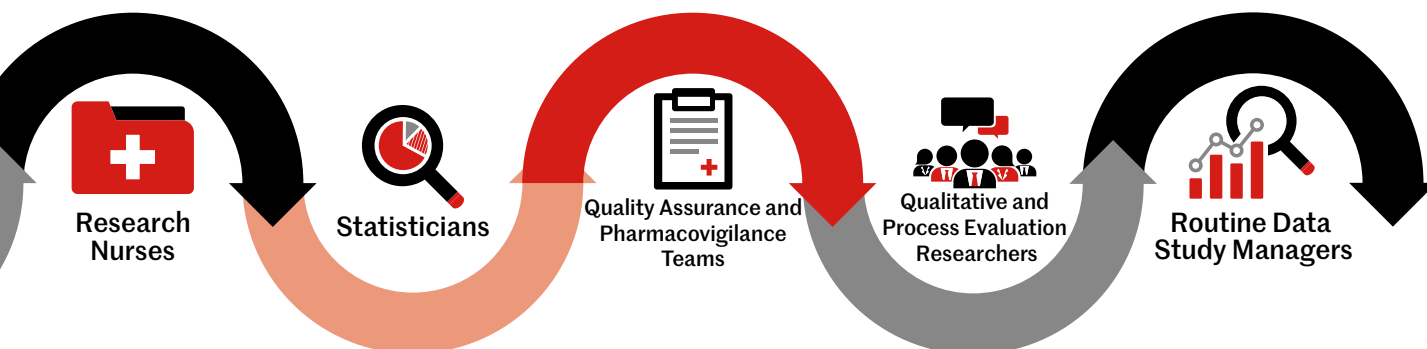
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## Glossary

AML	Acute Myeloid Leukaemia	NIHR	National Institute for Health and Care Research
CI	Chief Investigator	PPI	Patient and Public Involvement
CU	Cardiff University	RCT	Randomised Controlled Trial
CTR	Centre for Trials Research	SOP	Standard Operating Procedure
CTU	Clinical Trials Unit	TMG	Trial Management Group
EME	Efficacy and Mechanism Evaluation	TSC	Trial Steering Committee
FDA	Food and Drug Administration	UKCRC	United Kingdom Clinical Research Collaboration
HTA	Health Technology Assessment	WP	Work Package
NHS	National Health Service		

This document contains hyperlinks for electronic version, and therefore not available for paper version.





# Foreword

**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.**

We receive infrastructure funding from Welsh Government via Health and Care Research Wales, from Cardiff University and formerly Cancer Research UK. This allows us to invest in core activities and people to support the design and oversight of high-quality studies and to win the funding to allow their conduct, analyses and publication.

Shaping our approach are the values we adopted at the inception of the Centre in 2015 and an underpinning stance that everyone, regardless of who they are, where they live, or what they do deserves the best health and care. Our role is to provide the evidence to make that happen.

We take a team science approach with diverse academic and professional services expertise in the Centre supporting a substantial portfolio of research spanning four divisional themes. As one of the larger fully registered clinical trials units in the UK, we have the breadth and depth to lead and deliver cutting edge trials and other high-quality studies at scale and with excellence.

Our Centre connects to Research Development Infrastructure Centres funded by Health and Care Research Wales in three ways. First, embedded connectors where posts are shared and partnerships are formalised. Second, project-based connectors where substantial work programmes are shared with other Centres. Third, emergent connectors where we have ad hoc and evolving collaborations. We have long-standing connections with many Centres funded sustainably by Health and Care Research Wales. We have new connections with five of the recently funded catalytic Centres in Wales.

Our door is open to all good new ideas. We aim to support Wales based investigators, and those from further afield and so build research capacity for the future. We work with the public as this creates better research and better outcomes for patients and service users.

Our report can only show a portion of what we have achieved in the last five years. Studies included provide a snapshot of what we do, how we do it and with what result. We hope that it will leave you curious to know more, as well as feeling informed about the Centre. We encourage you to ask us questions and talk to us - whether you are a member of the public, a professional considering a journey into research or well-established in your own area of study.

# Who's Who at The Centre

## **Professor Mike Robling is Director of the Centre for Trials Research, with Dr David Gillespie as Deputy Director.**

The Centre's Executive leadership team comprises Professor Mike Robling (Director), Dr David Gillespie (Deputy Director), Professor Richard Adams (Clinical Director), Damian McAuliffe (Centre Manager), Dr Rachel McNamara (Director, Mind, Brain and Neuroscience Trials), Professor Jamie White (Director, Population Health and Social Care Trials), Dr Emma Thomas-Jones (Director, Infection, Inflammation and Immunity Trials), Angela Casbard (Director, Cancer Trials),

Dr Rebecca Playle (Statistics and Methodology), Dr Fiona Lugg-Widger (Director for Data), and Dr Jeremy Segrott (Learning and Development and Deputy Director, Population Health and Social Care Trials).

Operational leadership is contributed by Dr Cheney Drew (Deputy Director, Mind, Brain and Neuroscience Trials), Dr Lisette Nixon (Deputy Director, Cancer Trials), Dr Philip Pallmann (Deputy Director, Infection, Inflammation and Immunity Trials), Dr Lucy Brookes-Howell (Qualitative Research Group), Dr Rachel Lowe (Trial Management), Nigel Kirby (Data and Technology), and Kelly Gee (Quality Assurance and Regulatory Affairs).

## **Centre for Trials Research Values**

### **Making a difference**

Improving health, wellbeing and sustainability of society

### **Innovating and researching**

Empowered to be creative and questioning in everything we do

### **Building trust and confidence**

Growing together as partners

### **Leading and collaborating**

Developing true partnerships (nobody wins unless everybody wins)

### **Aspiring and inspiring**

Helping everyone to be their best and to do their best

### **Protecting integrity and quality**

Designing, delivering and publishing high impact research through academic and professional excellence

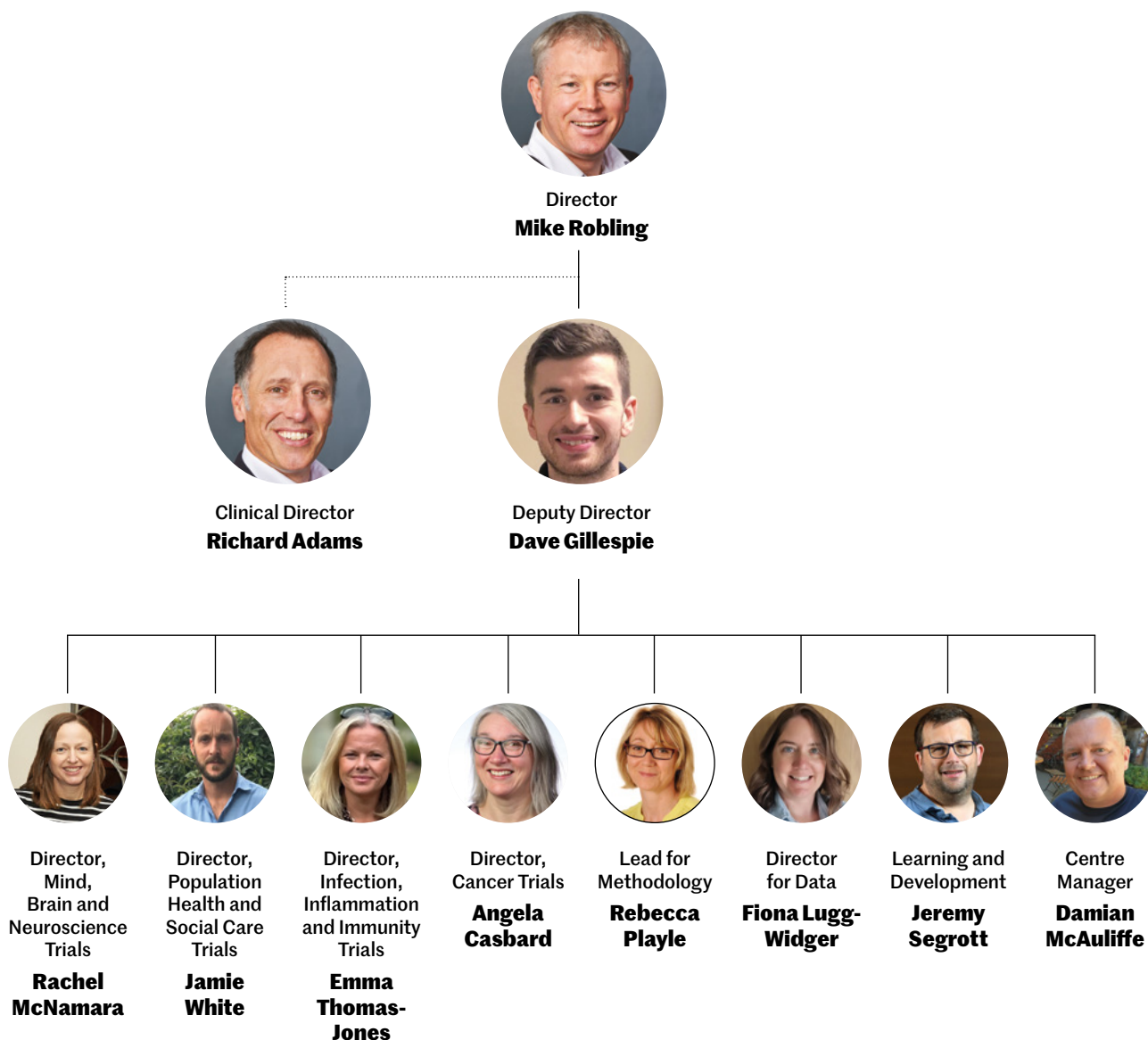
### **Respecting individuality**

Recognising different needs and aspirations of every individual in society

### **Recognising**

Celebrating success, openness and transparency

## Centre for Trials Research Executive Leadership Team



## Centre for Trials Research Divisions



**Brain Health and Mental Wellbeing**



**Infection, Inflammation and Immunity**



**Cancer**



**Population Health and Social Care**

## We present our report using the structure of our six work packages supported by funding from Health and Care Research Wales.

**Work Package 1:**  
Managing our work

**Work Package 2:**  
Working with other groups

**Work Package 3:**  
Developing new studies

**Work Package 4:**  
Overseeing funded studies

**Work Package 5:**  
Ensuring methodological and professional development

**Work Package 6:**  
Development of All Wales approach

## Throughout our report, we use these graphics to identify and introduce you to each section:

### Cross-cutting themes

At the start of each work package throughout the report, you will see icons that represent our six cross-cutting themes 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

# Core Metrics

Reporting period: 2020/2025

**Health and Care  
Research Wales  
Infrastructure  
award to  
the group**

Direct funding  
awarded

**£4,367,459**



Jobs created  
through direct  
funding



## Grants won during reporting period

Grants won	Led by group	Group collaborating
Number	<b>68</b>	<b>102</b>
Value	<b>£53,378,749</b>	<b>£65,854,031</b>
Funding to Wales	<b>£35,165,753</b>	<b>£18,663,355</b>
Funding to group	<b>£32,283,166</b>	<b>£16,618,080</b>
Additional jobs created for Wales	<b>409.92</b>	<b>198.65</b>
Additional jobs created for group	<b>384.68</b>	<b>193.22</b>



Number of publications



Number of public  
engagement events



Number of public  
involvement opportunities

## Clinical Trials Unit metrics



**170**

Number of  
studies awarded



**105**

Number of studies  
led by Welsh Chief  
Investigators



**182,747**

Total number  
of participants  
recruited



**5.04**

% participants  
from Wales

# 1

## **Work Package 1** Managing our work

Recruiting and supporting  
staff and developing working  
practices to make sure we meet  
high standards for research



Our successes in the last five years are built on the skills of individuals working in CTR amplified by the team structure to which they all form a part.

## Advancing Collaborative Clinical Research Through Innovation and Inclusion

Conducting high-quality research—from concept development and stakeholder engagement to securing funding, executing trials, and disseminating results—is a complex process that depends on a team-based approach. At the Centre for Trials Research (CTR), clinical trials represent a gold standard for team science. Our approach places a strong emphasis on listening to and supporting the individuals who make this work possible, both within CTR and across our network of collaborators.

Our teams have successfully integrated new UK regulations around trial delivery and data protection, while expanding international engagement and aligning with emerging systems such as the EU Clinical Trials Information System (CTIS). A major milestone was the transition of our database operations to include the open-source platform REDCap. While this required significant regulatory adaptation, it supports long-term sustainability by reducing reliance on costly proprietary systems.

Internally, we have partnered with CTR operational groups to align job descriptions and staff development with individual strengths—building resilience across teams while enabling career progression. Given that the majority of our team members are funded through individual project grants, we recognise the need to strengthen the structures that support our core operations. This is essential to sustain a broad and ambitious research portfolio.

The following highlights reflect the success of our team-based science approach and our ability to deliver high-impact, inclusive, and forward-looking research.



## Capacity Building: Internships and Student Placements



### Expanding Opportunities Through the HDR UK Black Internship Programme

In July and August 2024, CTR was proud to host our first intern through the Health Data Research UK (HDR UK) Black Internship Programme. Now entering its fifth year, this initiative is designed to address the under-representation of Black professionals in health data science and is helping to drive meaningful change across the sector.

We welcomed Amaka Dibigbo, a final-year medical student, to contribute to the HDR UK Transforming Data for Trials (TDfT) workstream. During her internship, Amaka produced two engaging training videos—*Why Public Trust Matters for Data-Enabled Trials* and *Engaging Underserved Groups in Data-Enabled Trials*—now publicly available via the HDR UK Futures platform.

Looking ahead to summer 2025, CTR will expand its involvement by hosting two interns: one funded through LEAP, the digital health hub for the South West and Wales, and one through the TDfT workstream. Our interns will work on enhancing existing training materials or developing new resources, with hands-on experience in content creation, scripting, and video production.



### Fostering Future Talent Through Placement and Training

Alongside formal internships, CTR continues to support student placements and training across our research teams. These opportunities are vital for cultivating new talent, offering early-career researchers and student's practical experience in clinical trials, data science, and public involvement. Whether through structured programmes or ad hoc placements, our commitment to mentoring and development ensures that future leaders in trials research are equipped with the skills, confidence, and insight to drive the field forward.



## **Contributions to Trial Methodology: CTR at ICTMC 2024**

Our Centre had a strong presence at the 7th International Clinical Trials Methodology Conference (ICTMC), held in Edinburgh in 2024. With over 1,300 delegates in attendance, the event provided a platform to showcase cutting-edge research and foster international collaboration. Our 22-member delegation represented a diverse mix of statisticians, trial managers, data specialists, and qualitative researchers. Our team delivered six oral presentations, hosted a workshop, and presented 16 posters.

A standout moment was the recognition of Dr Fiona Lugg-Widger, who jointly won the Excellence in Involving Patients and Public in Trials Methods Research award for her co-production work with public contributor Mike Molete. This accolade underscores our commitment to inclusive and community-oriented research.

Beyond individual achievements, our contributions at ICTMC 2024 reflected our leadership in shaping the future of clinical trials. Highlights included Dr Rob Trubey's workshop on using health systems data and Professor Kerry Hood's session on ethical challenges in trial biostatistics. These sessions emphasised our commitment to methodological innovation and collaborative research design. As we look ahead to ICTMC 2026, we aim to play a pivotal role in influencing global conversations on trials methodology and reinforcing our mission to conduct research that makes a difference.

# 2

## **Work Package 2** Working with other groups

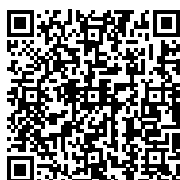
Working in collaboration with  
researchers from other organisations  
across Wales and beyond



We will only be successful if we are effective in reaching out to key stakeholders and then working in partnership with them.

Only by doing so can we develop research that will benefit the people of Wales and the broader international community. Our second work package focuses on the connections we make with networks and organisations to bring forward new research. We focus on two examples – the first a collaboration with industry partners on virtual reality innovation and a second with academic partners in a second Centre at Cardiff University. In addition, systemic partners across our work are the public and we describe that more fully in the public involvement section at the end of our report.

In 2020/21 we undertook a wide ranging stakeholder survey which informed a number of areas of our development.



**Scan the QR code to view the Stakeholder Survey.**

## Stakeholder Survey

In 2021, the Centre for Trials Research undertook a stakeholder survey to better understand how it was perceived by key partners and where it could improve. Of the 80 respondents, 80% were from core stakeholder groups including funders, Chief Investigators, and collaborators. The remainder represented prospective partners—providing vital insights into opportunities for future engagement.

The response was overwhelmingly positive. Stakeholders described the Centre as responsive, efficient, and staffed by experts who deliver high-quality support. Importantly, the feedback acknowledged the Centre's stability and clarity of communication during a turbulent post-pandemic research landscape. The survey surfaced key themes—communication and engagement, methods, resource management, and public involvement—which have since guided Centre-wide improvements.

Actions included streamlining engagement routes for new collaborators, producing accessible guides for CIs and Research Partners, and amplifying the visibility of the Centre's full portfolio—showcasing both flagship and developmental studies. These improvements align with the Centre's strategic goal of attracting world-leading CIs and delivering value for funders like Health and Care Research Wales.

This exercise reflected our commitment to listening and evolving. It has positioned the Centre as a flexible, trusted research partner—well equipped to meet real-world needs through collaborative, inclusive, and methodologically rigorous research.



## VR-Melody

**Funder:** Innovate UK Mindset Extended Reality (XR) for Digital Mental Health

In 2023, we partnered with Rescape Innovation, and Universal Music Group (UMG) on VR-Melody, a pioneering research project exploring the use of music and virtual reality (VR) to treat symptoms of anxiety and support mental wellbeing. This innovative project combined personalised music, scenic VR environments, and immersive therapeutic content including active listening exercises, creating a unique, scalable intervention for mental health care. Forty participants user-tested VR-Melody at home for 10–14 days, gathering valuable insights into the acceptability and adoption of novel technologies for mental health. Supported by Innovate UK and Media Cymru, this collaboration reflects our commitment to cutting-edge research and impactful interdisciplinary partnerships.

VR-Melody builds on Rescape's award-winning DR.VR™ technology, which has already demonstrated a 40% reduction in anxiety in clinical settings. The technology recently earned Rescape Innovation the prestigious Music Ally S:IX Innovation Award, highlighting its transformative potential. With anxiety affecting 60% of the UK population and significant economic costs, the research is a timely response to mental health challenges. Led by a multidisciplinary team, including ethical AI company Bria.ai, this project exemplifies the Centre's leadership in innovative research. Results are eagerly anticipated in 2025, offering new hope for scalable, impactful mental health treatments.



## Social Workers in Schools (SWIS): A Landmark Study in Children's Social Care

**Funder:** Department for Education via What Works for Children's Social Care

The Social Workers in Schools (SWIS) study represents a significant milestone in our portfolio, combining robust evidence generation with a commitment to addressing complex social care challenges. The trial was conducted across 291 schools, 21 local authorities in England and included over 280,000 students. Working in partnership with the CASCADE Centre in Cardiff, the study evaluated whether embedding social workers in schools could reduce enquiries to place children in care, whether children were put into care, the number of days in care and children's academic achievement. The trial found putting social workers in schools was not an effective or cost-effective policy. It found no evidence of benefit in the outcomes of children's social care enquires, days in care or other outcomes.

The SWIS study was highlighted in Chancellor Rachel Reeves' 2024 spending review as an example of rigorous evaluation to ensure public spending delivers tangible benefits. This recognition underscores the value of producing high-quality research that influences policy decisions and promotes accountability in public services. SWIS demonstrates our Centre's expertise in addressing critical societal issues and contributing evidence to national debates on cost-effectiveness and innovation in service delivery.

# 3

## **Work Package 3** Developing new studies

Designing new studies and winning  
the funding to make them happen



In this section we tell you about some of our new studies. These are drawn from across all four of our divisions and reflect some of our longest established research themes as well newly emergent areas of focus. Featured studies reflect building programmes of research over several projects led by external local and nationally based investigators as well as those led from within the Centre.



## Brain Health and Mental Wellbeing Division

**Funder:** National Institute for Health and Care Research (NIHR)

From feasibility to definitive evaluation: treatment and prevention of poor mental health in people with a Learning Disability. We have developed a programme of work to establish feasibility of a range of psychosocial interventions to treat and prevent poor mental health outcomes in children and adults with Learning Disability and their carers. People with Learning Disability are at significant risk of health inequalities and are underserved by research, in particular randomised controlled trials.

The Early Positive Approaches to Support (E-PaTS) programme is a group programme for carers of children with Learning Disability. Previously subject to a successful **feasibility trial**, we are working in partnership to evaluate effectiveness and cost-effectiveness of E-PaTS.



CTR were part of a team who secured National Institute for Health and Care Research (NIHR) funding for feasibility trials in response to two commissioned calls. **BEAMS-ID** was a feasibility study of a behavioural intervention to treat anxiety in adults with autism and moderate to severe LD, and **SPIRIT** focused on adaptation and feasibility of an exposure-based intervention to treat specific phobias in children with Learning Disability. Results indicated both interventions were acceptable and feasible to deliver in the NHS. NIHR have since launched two commissioned calls for effectiveness trials based on the findings from BEAMS-ID and SPIRIT and we are working in partnership to develop applications for submission to both calls.

Following on from a previously published feasibility study of an intervention to promote stigma resistance and mental health resilience in young people and adults with Learning Disability: The STanding up fOR Myself (**STORM**) psychosocial group intervention, we have developed a larger programme of work to evaluate effectiveness and implementation of STORM. As an integral part of this programme, we aim to develop people with Learning Disability as leaders in anti-stigma research (submitted to NIHR Programme Grants for Applied Research).



### PICCOS: New techniques for delivering anti-cancer therapies

**Funder:** NIHR Efficacy and Mechanism Evaluation (EME) Programme

Peritoneal metastases (PM) represent a significant unmet clinical need and there is an urgent need for improved treatments for this poor prognosis patient group. A novel anti-cancer technology, Pressurised IntraPeritoneal Aerosolised Chemotherapy, PIPAC aims to improve target specificity of anti-cancer therapies such as chemotherapy by delivering this directly to the PM.

NICE Interventional Procedures Guidance reviewed the evidence for PIPAC in 2021 and stipulated that it should only be used within the context of a randomised controlled trial to demonstrate efficacy compared to standard treatments. The PICCOS trial (PIPAC In Cancers of the Colon, Ovaries and Stomach) is a prospective, multicentre, phase II, basket, RCT designed to provide high quality evidence of the efficacy of PIPAC in improving progression free survival. It is funded by a four-year NIHR EME grant that commenced in November 2022.

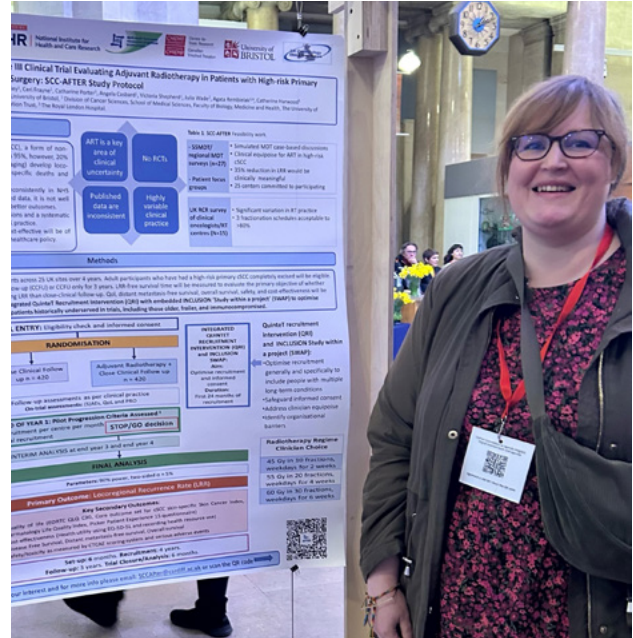
PICCOS is a multi-disciplinary cancer trial with strong Welsh leadership including a new Chief Investigator Sadie Jones (Gynae Oncology Consultant). Sadie was supported by CTR in her Research Time Award from Health and Care Research Wales, leading to the development of PICCOS. The trial is open to patients with bowel, ovarian or stomach cancer. Each cancer type has its own individual eligibility criteria and protocols to allow for the necessary variations in treatment. In all cancer types, patients are randomised 1:1 to receive either standard care systemic anti-cancer therapy (SACT) or a combination of SACT and/or PIPAC, where three PIPAC procedures are performed. The trial will recruit 78 colorectal, 66 ovarian and 72 stomach cancer patients with peritoneal metastases over 2.5 years. The trial commenced recruitment in England and Wales in March 2024.

The results of PICCOS will strongly influence a future NICE review of PIPAC. As well as implications for patients in the UK, the results of the PICCOS trial are eagerly awaited internationally. The results will be crucial for the design of a confirmatory phase III trial and the exploration of aerosolised novel agents delivered via the intraperitoneal route.



## Preventing skin cancer and improving outcomes

Over the last 5 years we have built upon feasibility work and developed new collaborations with a focus on skin cancers. These are exemplified by three phase III studies which have the potential to inform future clinical practice on a global scale:



### EXCISE

**Funder:** NIHR Health Technology Assessment (HTA) Programme

EXamining antibiotics for ulCerated skin cancer Surgical Excision: a pragmatic, double-blinded clinical and cost effectiveness randomised controlled trial. Led by our Infection, Inflammation and Immunity division in collaboration with the cancer division EXCISE focuses on antibiotic use to prevent post-operative infections. We will recruit 380 people with ulcerated skin cancers from UK NHS hospitals. Immediately before surgery, participants will be randomly allocated to have a one-off dose of antibiotic tablets or no antibiotics (placebo).

### SCC-After

**Funder:** NIHR HTA Programme

Adjuvant radiotherapy in patients with high-risk primary cutaneous Squamous Cell Carcinoma after surgery: an open label, multicentre, two-arm phase III randomised trial. SCC-After was developed after an extensive evidence review and community engagement exercise and will inform the need for radiotherapy after removal of larger skin cancers to prevent cancer recurrence. One of the sub-studies in this trial will focus on the specific needs of those patients with early to moderate dementia.

### SPOT-IT

**Funder:** Cancer Research UK

Cutaneous SCC Prevention using Topical Therapy in Immunocompromised Patients. Immunocompromised people, including organ transplant recipients, have a much higher risk of developing new cutaneous Squamous Cell Cancers than non-immunosuppressed individuals. Cutaneous Squamous Cell Cancer prevention is, therefore, especially important for this population. In this study we will explore the best topical skin treatments that both prevent these skin cancers occurring and are tolerable for people with immunosuppressive conditions.



### Advancing HIV and Sexual Health Policy and Practice in Wales

#### Funder: NIHR

Research conducted by staff in the Infection, Inflammation & Immunity Division has sought to measure, understand, and optimise sexual health services, practice, and policy in Wales. This has particularly focussed on the HIV sector.

Below we outline some of the underpinning research, collaborations, and policies we have been involved with, and finish with a description of new awards.

- DO-PrEP (Development of an intervention to optimise the use of HIV pre-exposure prophylaxis in at-risk individuals living in Wales), led by **Dr David Gillespie** involved the study of HIV pre-exposure prophylaxis (a pill that, when taken as prescribed, prevents HIV). The work covered how people use it, how they use it in relation to their potential HIV risk exposure through sexual contacts, how these things varied over time, their experiences of using PrEP, and their views on ways in which access to PrEP could be expanded in the future. Findings have informed actions in the **Wales HIV Action Plan 2023-2026**.
- UPrEP (Understanding the relationship between HIV pre-exposure prophylaxis, sexually transmitted infections, and antimicrobial resistance), led by **Dr Adam Williams** aimed to determine the extent to which the introduction of PrEP has led to a change in sexually transmitted infections in Wales and whether this has influenced antimicrobial resistance.
- Smaller projects have investigated topics such as HIV stigma, retention in clinical care, the measurement of wellbeing in people living with HIV, online sexual health testing services, HIV peer support, public campaigns around HIV testing, and HIV services in community pharmacies.
- Through these projects, we became involved with the Fast Track Cities initiative (through **Fast Track Cardiff & Vale** and **Fast Track Cymru**), an initiative which involved forming cross-sector partnerships (e.g. academia, third-sector, public health, clinical services, councils, and most importantly communities) to meet the **UNAIDS 95/95/95 targets**, as well as reaching zero new transmissions of HIV in Wales by 2030.
- Our most recent awards include:
  - T4T (Texting for Testing), which focuses on the effectiveness of universal signposting via General Practice to online sexually transmitted infections testing services.
  - WAVU (Wales Applied Virology Unit), which is a Catalytic Centre funded by Health and Care Research Wales and aims to accelerate interdisciplinary research which focuses on the prevention, diagnosis, management, and outcomes of viral infectious diseases.



### OBS UK: Transforming Maternal Care through Innovation and Inclusivity

**Funder:** NIHR

The Obstetric Bleeding Strategy UK (OBS UK) is a groundbreaking trial addressing postpartum haemorrhage (PPH), the most common childbirth complication. Funded by the National Institute for Health and Care Research (NIHR) and coordinated by our Centre, this stepped wedge cluster randomised controlled trial is designed to evaluate a care bundle proven to reduce severe blood loss. All women and birthing people are included, if they are attending one of the 36 maternity hospital units involved in the UK. This ethos of inclusivity is reflected in all aspects of the study. We have partnered with Equality Health to ensure that communities traditionally underserved by health research are represented. Equality Health initially facilitated four workshops, over a ten-month period, each led by a community partner, and attended by a further 12 members of the public, all affected by PPH.

The first meeting identified critical areas to address, such as encouraging more obstetric engagement to prevent health inequalities and the importance of not perpetuating the 'broken Black and Brown bodies' narrative. The subsequent workshops built on these areas, resulting in significant changes to the study materials and the co-production of additional materials. This included changes to the study logo, specifically the silhouetted image, and the re-design of the study posters, both with the aim to promote inclusivity. In addition, members of the research team were involved with the co-production of five videos with the aim to aid recruitment of marginalized groups and to raise awareness among women and birthing people who may have delivered at an OBS UK site. Finally, the group co-produced an equality diversity and inclusion handbook with the aim of it being useful for NHS members of staff recruiting participants to the psychological and health economic sub-studies.

# 4

## **Work Package 4** Overseeing funded studies

Running studies to a high quality  
and producing outputs that will  
make a difference to the public



Delivering funded research over the last five years has been more challenging than anticipated, particularly due to the disruption caused by the COVID-19 pandemic. Despite these challenges, the Centre has adapted swiftly – developing, collaborating on, and delivering critical studies. Some projects were delayed, others gained heightened relevance, and several new studies were specifically initiated in response to the pandemic to generate urgent, actionable evidence. Below is an overview of selected studies across our divisions during this period.



## Brain Health and Mental Wellbeing Division

### Developing novel treatment approaches in neurodegenerative disorders

In collaboration with a range of partners, we have developed a programme of work around novel approaches to treatment in neurodegenerative disease. This includes development and feasibility evaluation of rhythmic training interventions such as HD-DRUM. **HD-DRUM** is a tablet-based app to enhance movement synchronisation skills and improve cognitive and motor abilities in people with Huntington's Disease. This has led on to further research, specifically in the use of Artificial Intelligence for deeper personalisation of the drumming app (DRUM-AI) again led by Dr Metzler Baddeley.

### Expanding our work to people with Parkinson's Disease

We are also working with a group that has developed a new community-based samba percussion activity (**SParky Samba**) designed for and by people with Parkinson's Disease. An initial qualitative evaluation of a small number of individuals has shown that people with Parkinson's Disease attending SParky Samba sessions feel several benefits affecting their movement, health and well-being.

We are now undertaking a clinical evaluation of SParky Samba to see if it has potential to help improve health outcomes and wellbeing in a larger group of people affected by this disease. The first step is to understand, through observations and interviews, what the key components of SParky Samba are. We will then undertake a feasibility trial of the SParky Samba intervention in people with Parkinson's Disease. With support from Arts Council Wales funding and additional support from Parkinson's Cymru, we will set up three new community SParky Samba groups in Wales specifically in areas that are underserved both in terms of community activities and research for people with Parkinson's Disease. We aim to recruit 60 participants who will be randomised to either attend a SParky Samba group or continue their usual activities for 12 weeks. We will measure movement, cognition and wellbeing and key feasibility outcomes including recruitment and retention, with a view to designing a larger trial to test effectiveness and cost-effectiveness of SParky Samba for treatment of Parkinson's Disease symptoms.



### Internationally leading research in Acute Myeloid Leukaemia

We continue to drive pioneering studies in oncology, delivering significant improvements in cancer treatment through innovative trials and methodologies. Notably, the Centre's leadership in acute myeloid leukaemia (AML) trials has generated world-leading insights with international impact.

Our AML17, AML18, and AML19 trials have formed one of Europe's largest AML research programmes, involving over 7,000 participants since 2009. Recently, pivotal findings from AML17, published in *The Lancet Haematology*, demonstrated that a highly sensitive bone marrow test, capable of detecting minimal residual disease (MRD) could significantly improve survival rates. For patients with specific genetic mutations, this approach doubled their chances of survival by allowing early intervention months before clinical relapse was detectable through conventional methods. Cardiff University's role as lead sponsor and coordinator ensured rigorous regulatory oversight and high-quality trial management, positioning us as leaders in large-scale clinical research.

These advances provide unprecedented, large-scale data and definitive answers that have shaped clinical practice internationally. They showcase how a Wales-based trials centre is leading globally significant research, positioning the Centre as a trusted partner for national and international Chief Investigators. The Centre's work on AML, including integrating MRD monitoring, contributing data to the HARMONY Alliance, and informing U.S. Food and Drug Administration initiatives, demonstrates a leadership role in transforming cancer trial methodology and influencing international treatment guidelines. These achievements go beyond single-study outputs; they contribute to changes in clinical practice and policy at scale.



AML18, concluding recruitment in December 2022, further explored innovative treatments tailored for older adults, examining novel drug combinations and treatment strategies across multiple international sites. AML19, the ongoing trial for younger adults, continues this trajectory by evaluating risk-adapted therapies based on evolving patient responses, ensuring treatments are personalised and responsive to individual patient profiles.

These trials exemplify the Centre's commitment to collaborative research and its significant role in translating scientific discoveries into improved patient outcomes. By integrating advanced diagnostic methods into routine care, our work in AML not only transforms clinical practice but also offers tangible hope and improved quality of life for patients facing aggressive forms of blood cancer.



## New treatments for advanced breast cancer

**Funders:** Cancer Research UK and AstraZeneca

The FAKTION trial is a randomised, Phase 2, double-blind, placebo-controlled feasibility trial that investigated whether the addition of capivasertib (a selective oral inhibitor of AKT) to fulvestrant increased time to significant cancer growth for post-menopausal women with estrogen receptor positive, HER2 negative, metastatic or locally advanced inoperable breast cancer. The trial was funded by AstraZeneca and Cancer Research UK.

The primary analysis showed that progression free survival is significantly longer in participants who received capivasertib + fulvestrant than those who received placebo + fulvestrant. A **further analysis** showed that the combination of the two drugs also extends survival and suggested that capivasertib predominantly benefits patients with PI3K/AKT/PTEN pathway-altered tumours.

These findings persuaded Astra Zeneca to undertake a larger trial - the Phase 3 CAPItello-291 trial, which demonstrated the same outcome and affirmed the biomarker work that had been evaluated in the FAKTION trial. Capivasertib received approval by United States FDA on 16 Nov 2023 and by UK NICE on 11 Apr 2025. The drug (also called Truqap) can now be prescribed in the UK.



**Read the primary  
FAKTION analysis**



### Evaluating antimicrobial stewardships interventions

We have extensive expertise in designing and delivering research aiming to optimise the use of antimicrobials and limit the impact of antimicrobial resistance. Many of our studies focus on determining whether clinical management informed by biological markers (biomarkers), which are present during infection, and can be used to safely reduce the use of antimicrobials.



#### Some of our recently completed studies are summarised below:

##### BATCH

**Funder:** NIHR HTA Programme

BATCH (Biomarker-guided duration of Antibiotic Treatment in Children Hospitalised with confirmed or suspected bacterial infection), concluded that, in children with suspected or confirmed bacterial infection admitted to hospitals in England and Wales for intravenous antibiotic treatment of at least 48h, the introduction of a procalcitonin (PCT)-guided algorithm did not reduce duration of intravenous antibiotics treatment and is non-inferior to usual care for safety outcomes.



**Read more about BATCH**

##### PEACH

**Funder:** NIHR COVID-19 Recovery and Learning (L&R) Programme

PEACH (Procalcitonin: Evaluation of Antibiotic use in COVID-19 Hospitalised Patients), found that PCT testing appears to have been an effective and cost-effective antimicrobial stewardship tool early in the pandemic. The study also identified clinical, situational, and organisational factors which influence the implementation of antimicrobial stewardship programmes, all of which could be optimised.



**Read more about PEACH**

##### STTT

**Funder:** National Health Service (NHS)

STTT (sore throat test and treat) was an NHS funded service introduced in selected community pharmacies in Wales. A comprehensive evaluation demonstrated that STTT offers a safe option for patients. It can be delivered at scale to align with a pre-specified pathway that promotes appropriate use of point of care tests and antibiotics, even during surges in consultations due to spikes in cases of invasive Group-A *streptococcus*.



### POOL Study: Ensuring Safety in Waterbirths



#### **Funder:** NIHR HTA Programme

The **POOL study**, conducted by our Centre in collaboration with the School of Healthcare Sciences, has provided robust evidence on the safety of waterbirths for women with uncomplicated pregnancies. Drawing on NHS records from over 87,000 births across 26 organisations in England and Wales, the study is the largest global investigation of its kind. The research addressed critical concerns about potential risks, such as severe maternal tears or neonatal complications, and conclusively demonstrated that waterbirths are as safe as births out of water under similar conditions. These findings mark a significant milestone in empowering women to make informed decisions about their birthing options while ensuring their safety and that of their babies.

The study's insights will equip midwives with evidence-based guidance to confidently recommend waterbirths to eligible women. Key results showed that severe maternal tears occurred in only 1 in 20 first-time mothers and 1 in 100 mothers with previous births, with comparable rates for those birthing out of water. Neonatal complications, including the

need for antibiotics or breathing support, were similarly rare and unaffected by the choice of waterbirth. By addressing a gap identified in NICE recommendations since 2007, the POOL study ensures midwives can provide clearer advice to expectant mothers and has prompted the development of freely available resources to support shared decision-making during labour.

The high-quality research and multidisciplinary collaboration underpinning the POOL study earned it the Royal College of Midwives Excellence in Midwifery for Research Award 2024. The study's findings have not only reassured healthcare professionals and expectant mothers but have also paved the way for future recommendations on waterbirths in clinical guidelines. The POOL team's commitment to patient and public involvement ensured their findings were accessible and impactful, with resources designed to enhance understanding among midwives and families alike. As the findings continue to influence global practices, the Centre for Trials Research remains at the forefront of inclusive and transformative healthcare research.



## KiVa Programme: Reducing Bullying in Schools

**Funder:** NIHR

The KiVa anti-bullying programme, a Finnish initiative focused on treating bullying as a community issue, has demonstrated remarkable success in UK primary schools. In the largest randomised controlled trial of its kind outside Finland, led by Bangor University and managed by the Centre for Trials Research, over 11,000 students from 118 schools participated. The study showed that the programme reduced bullying incidents by 13% compared to standard school practices. By fostering empathy among students and empowering bystanders to intervene, KiVa effectively transformed school social dynamics, creating safer environments for learning.

**The trial tested the Finnish-based KiVa programme in over 100 primary schools across England and Wales, involving more than 11,000 students. The results showed a 13% reduction in bullying incidents, with the programme proving effective across a wide range of school types.**

The KiVa programme works through disrupting the social rewards typically gained by perpetrators and enhancing peer support for victims. Schools implementing KiVa reported reduced peer conflicts and heightened empathy among students. Importantly, the programme proved effective across diverse socio-economic settings, from small rural schools to large urban institutions. Reducing bullying not only improves mental health outcomes but also removes barriers to learning, enabling students to thrive academically and socially.

KiVa's success is not only measured in reduced bullying but also in its cost-effectiveness, an essential factor for budget-conscious schools. Economic analyses by Bangor University confirmed the programme's affordability, ensuring accessibility for schools across England and Wales. The whole-school approach reduces the social acceptability of bullying, delivering sustained benefits over time. Published in *Psychological Medicine*, the study highlights the Centre's pivotal role in conducting impactful, large-scale trials that address critical societal challenges, setting the stage for evidence-based interventions in education and beyond.



## Preventing and Reducing the Health Impacts of Homelessness

Our Centre in collaboration with the School of Geography, has led pioneering UK-based trials evaluating interventions to prevent and reduce the health impacts of homelessness.

As part of the government's COVID-19 response, 15,000 rough sleepers were offered self-contained temporary accommodation, mainly in hotels. The Moving On pilot was the UK's first RCT in the homelessness sector. It assessed whether transitioning rough sleepers to settled housing reduced COVID-19 infection risk. Despite inviting 144 local authorities, only two participated, reflecting low acceptability of randomisation. Follow-up was achieved with 56% of participants at six months. A process evaluation revealed that local authorities lacked equipoise, limiting their willingness to randomise.

The PhACT pilot trial tested the feasibility of a Critical Time Intervention (CTI) delivered by Crisis to prison leavers at risk of homelessness. Conducted in three men's prisons across England and Wales, it recruited 34 participants, with only 18% retained at one follow-up. While CTI was acceptable to staff and participants, the trial faced challenges, including ethical concerns over consent, a protracted prison

approval process, and systemic barriers such as limited social housing and high recall rates. Nonetheless, data collection - particularly via routine data linkage - was feasible.

Test and Learn is an ongoing pilot RCT evaluating the integration of nurses into outreach teams to improve housing stability. Funded by the UK government and part of a **broader evaluation programme**, the trial spans 16 local authorities. Working with DECIPHer, we completed an optimisation phase to clarify intervention components and mechanisms. Recruitment is ongoing, and routine data from nurses and services are being piloted for outcome assessment.

As anticipated in a sector new to trials, challenges include recruitment, retention, and acceptability of randomisation. Embedding process evaluations has been crucial in understanding and addressing these issues. Support from the ESRC, NIHR, and the Department for Levelling Up, Housing and Communities via the Centre for Homelessness Impact reflects strong funder commitment to our homelessness research.

# 5

## **Work Package 5** Ensuring methodological and professional development

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



Over the last 5 years, methodologists in the Centre have been responsible for disseminating a substantial number of methodological publications with an average of over 20 methodological papers published per year.

This body of work encompasses the breadth and depth of methodological work across both quantitative and qualitative fields as well as from professional teams within the centre covering themed areas of novel methods, trial conduct and efficiency. The development and sharing of knowledge is core to our mission and every team within the centre has been part of this combined effort from trial and data management, through to quality assurance and information services. We pride ourselves in being an academic trial unit and recent methodological publications from across our teams demonstrate our commitment to this purpose in everything we do. Alongside our methodological success, sits clear evidence of professional development. Our methodological expertise has grown significantly over time and several members of our methods teams have achieved academic promotion and/or doctorates, as well as career development via doctoral and advanced fellowships.

## Adaptive Designs

Over the past five years, the Centre for Trials Research has established itself as a UK leader in the design, delivery, and methodological advancement of adaptive clinical trials. These innovative designs introduce planned flexibility into clinical trial protocols, allowing key elements—such as sample size or treatment allocation—to be modified in response to interim findings without compromising scientific integrity.

Adaptive trials can be more efficient than conventional designs, accelerating access to effective treatments, reducing unnecessary patient exposure, and improving value for public funders. Their complexity, however, requires dedicated expertise and infrastructure—both of which the Centre has actively cultivated.

Notably, **Dr Philip Pallmann**, Principal Research Fellow in Statistics at the Centre, has played a pivotal role in shaping national and international guidance on adaptive methodology. He co-led the development of PANDA, a UK-wide self-learning platform for adaptive trial designs, and contributed to the ACE-CONSORT and SPIRIT-DEFINE reporting checklists. Through this work—and his leadership of the MRC-NIHR Adaptive Designs Working Group—he has directly influenced the uptake of adaptive methods across the UK, and enhanced the quality of adaptive trial design and reporting globally.

This methodological leadership is already translating into impact. The Centre is delivering several live adaptive trials across oncology, infectious disease, and digital health, applying Bayesian and frequentist approaches to real-world challenges. These studies illustrate how Welsh Government investment is not only delivering high-quality research but is creating a national environment where methodological excellence thrives.

By embedding adaptive trial design within its operations, the Centre is positioning Wales as a preferred destination for Chief Investigators and industry collaborators seeking efficient, flexible, and world-leading clinical trials.



## Capacity Building: Internships and Student Placements

### Integrating qualitative research within a clinical trials unit: developing strategies and understanding their implementation in contexts

Our Centre has significantly expanded its qualitative research capacity and expertise over the last five years, enhancing the depth, impact, and relevance of its trials and broader research portfolio. Qualitative methods have increasingly been integrated into trial designs, ensuring patient voices and lived experiences meaningfully shape research outcomes.

One key area of growth has been the embedding of qualitative researchers within multidisciplinary trial teams from inception through to dissemination. By collaborating directly with clinicians, statisticians, and patient representatives, our qualitative experts have enriched the research design and interpretation process. This integrated approach has informed the development of research questions, refined interventions, and ensured trial outcomes are genuinely aligned with patient and clinician priorities.

A standout example of this approach is our qualitative work within complex interventions, such as the DELIVER-MS and PRIMUS studies in multiple sclerosis. Here, patient and clinician perspectives were captured through qualitative interviews, enabling more patient-centred measurement strategies and enhancing the

applicability and transferability of findings. Similar integrated qualitative work has taken place across diverse clinical areas including mental health, oncology, and palliative care.

Our team have led in methodological innovation, for example, new methods for conducting remote qualitative interviews, developed rapidly in response to the COVID-19 pandemic, have enabled continued patient involvement and provided lasting lessons on conducting flexible, inclusive research. This has further cemented the Centre's position as a leader in integrating contemporary qualitative research practice into trials.

Going forward, our investment in qualitative research continues to highlight the added value of listening deeply and systematically to patients, healthcare professionals, and wider stakeholders. This patient-centred ethos aligns closely with Welsh Government priorities, maximising the value and impact of investment in health and care research, and positioning the Centre as an attractive environment for current and future Chief Investigators keen to incorporate robust qualitative methods into their studies.

## Building capacity in the methods of patient reported outcome measures

**Funder:** Health and Care Research Wales

The SOCRATES study involved the development of a patient reported outcome measure for Rheumatoid arthritis. Publications resulting from the study include a **systematic review**, with two further manuscripts in submission with Rheumatology. The results have been presented at national and international methodology and rheumatology conference, including oral presentation at the International Society of Quality of Life Research (ISOQOL) Conference in 2022 and a poster at the American College of Rheumatology Convergence in 2023. SOCRATES was completed as part of a Health and Care Research Wales Doctoral fellowship by **Tim Pickles** a research fellow in statistics in CTR. He successfully completed his viva in April 2024 and was awarded a Health and Care Research Wales Next Steps Award (PLAN-HERACLES). This has led to an application to MRC Career Development Award to further the research of SOCRATES and PLAN-HERACLES. Tim has been successful in obtaining funding for patient-reported outcome measure research in grief and dermatology and has also been a co-applicant on bids in vision, trauma, shared decision making and pre-Rheumatoid Arthritis.

Tim now supervises two PhD students in topics related to vision and physiotherapy. Through the Health and Care Research Wales Faculty, Tim attended leadership training with Leaderful Action and Methodological Innovation In Public Health Intervention Science: Development, Evaluation And Adaptation provided by DECIPHer. Tim attended multiple training courses with the funding available for the SOCRATES study and is now lecturing at the University of Copenhagen and the University of Aarhus on psychometrics and patient-reported outcome measure research. Tim has also engaged with the National Rheumatoid Arthritis Society (NRAS), Outcome Measures in Rheumatology (OMERACT) and NHS Wales Executive National Strategic Clinical Network for Musculoskeletal Conditions, and is now a statistical reviewer for Rheumatology.



## CONSULT Training: Pioneering Inclusivity in Research

**Funder:** Health and Care Research Wales

The **CONSULT Training Programme** led by **Dr Vicky Shepherd** has emerged as a cornerstone in advancing inclusive research practices. This initiative is designed to equip researchers with the skills and knowledge they need to include adults lacking capacity to consent in clinical trials. The training aligns with our Centre's commitment to diversity and inclusivity, addressing a critical gap in trial design and delivery. The project was supported by a Lay Advisory Group and a team of researchers with expertise in this area.

The CONSULT training was launched at a webinar which included researchers, health professionals, and ethics committee members, showcasing its broad appeal and impact. Supported by our Communications Team, the webinar provided a platform for sharing expertise and practical solutions to overcome barriers in inclusive research. As one participant noted, "I feel less daunted by the prospect of involving people with impaired capacity in research activities." Another attendee pledged immediate action, stating, "I'm planning to distribute the training to my team to better inform future studies."

The programme's free, self-paced, series of e-learning modules has been widely praised for its accessibility and practical application, with participants emphasising its value in fostering more equitable research environments. The content is based on the CONSULT research programme, funded by Health and Care Research Wales, and was informed by a survey to identify researchers' training needs. The e-learning modules cover the legal and ethical frameworks governing trials involving adults with impaired capacity to consent, as well as methodological considerations. It includes case studies, videos, and links to resources help researchers understand how to design and conduct clinical trials involving this underserved group. The training complements the Centre's overarching mission to generate robust evidence that improves public health and social care outcomes.

CONSULT exemplifies our dedication to producing high-quality research that is inclusive and impactful. By addressing underrepresentation in clinical trials, we ensure that the benefits of research extend to all members of society, aligning with our values of equity and innovation.



**Read more  
about CONSULT**

# 6

## **Work Package 6**

Development  
of all Wales  
remit/approach



In this section we describe, with examples how we support 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.

## Treialon Cymru

Treialon Cymru was launched by CTR in April 2023 to provide opportunities for health and social care professionals across Wales to engage with trials, to build research collaboration, capacity and capability. It was designed to support the all-Wales remit (both in terms of geographical and research area coverage) of CTR, providing information about the broad spectrum of work that takes place in the Centre and opportunities for active participation in the Centre's activities.

A core feature is the Associate Members Programme which provides mentoring for each associate to develop their understanding of trial design and delivery. Thirteen members from across Wales having joined the programme to date. A parallel mentoring training scheme has been rolled out across all resource groups in CTR and an ongoing programme of mentoring skills development has been introduced.

Alongside this, Treialon Cymru established a Research Development Group, designed to target emerging research priority areas in Wales, which identified women's health as its first priority area. Two large-scale bids have been supported (menopause care and HPV), and several smaller scale projects in women's health also achieving success, including a James Lind Alliance Priority Setting Partnership in Poly Cystic Ovary Syndrome. The work in women's health has now been integrated into the Women's Health Research Centre Wales on which CTR is a partner.



The Stakeholder Engagement Programme has run, or co-run a series of inclusive webinars (with 100+ attendees) in partnership with NWOOTH, Swansea Trials Unit, Velindre, and Hywel Dda, among others. Regular face-to-face events have taken place across Wales, including workshops at the PRIME Conference in Wrexham and North Wales engagement visits. Events have focused on inclusivity, routine data, platform trials, and early career development. A session on “How to Be a Good CI” was delivered in 2024.

The engagement with potential co-investigators and new Chief Investigators across Wales through the stakeholder events and associate members programme, continues the focus on nurturing practitioner-led research and embedding trials culture across the Welsh NHS and social care sectors.

## Public Involvement and engagement

Public involvement and engagement at the Centre for Trials Research has evolved significantly over the last five years, driven by the growth and development of our Public Involvement and Engagement Hub. Initially, public involvement primarily meant representation on trial management groups or steering committees, but we have expanded this considerably. Today, Research Partners play integral roles across the research lifecycle, including involvement in Patient Advisory Groups to determine meaningful outcome measures and direct public consultations—for example, the DELIMIT study’s public consultation on synthetic data.

Our wider pool of Research Partners actively contributes to the Strategic Advisory Group, ensuring public perspectives inform our overall research strategy. Alongside this expansion, we have deepened our commitment to embedding public involvement into education and dissemination. We co-produced a series of accessible explainer animations in partnership with Oxford CTU and public contributors, clearly communicating complex clinical trial concepts such as consent, randomisation, and safety. Available in multiple languages, these animations help ensure trials are inclusive and comprehensible to diverse communities.

We have also prioritised broader community engagement, exemplified by initiatives like the Science in Health Live events, public lectures addressing advanced therapies for neurodegenerative diseases, and innovative approaches such as our Pop-up Barber Shop supporting men’s mental health. Additionally, our active participation in Pride events demonstrates our commitment to raising awareness of vital health issues such as HIV, fostering community connections, and promoting inclusivity in research.

These developments have been captured in influential publications, further establishing the Centre as a leader in public involvement and engagement. By continually expanding the role and visibility of public voices, the Centre ensures that research remains patient-centred, relevant, and impactful—reflecting genuine partnership with the communities we serve.



## Public Involvement and Engagement: Reflections from the Research Partner

### Strengthening Voice and Community through the PIE Hub

As a public member of the PIE (Public Involvement and Engagement) Hub, I've had the privilege of witnessing its steady evolution into a meaningful and inclusive space. The Hub has grown into more than just a forum for discussion—it's become a community rooted in mutual respect and a shared commitment to improving research.

One of the key strengths of the Hub has been the opportunity to build relationships across disciplines and with Centre staff. This trust has enabled open dialogue and the space to explore how the public perspective can be woven into trials research from the very beginning. We've moved from simply "being involved" to actively influencing how studies are designed, communicated, and delivered.

Over the last few years, I've valued the willingness of the team to ask hard questions—what does good public involvement really look like? Are we reaching a diverse enough range of voices? How do we ensure our feedback is acted on, not just recorded? This ongoing reflection has kept our work grounded and evolving.

Personally, I've appreciated the Centre's openness to different types of contribution—not everything needs to come in the form of a formal review or meeting. Sometimes it's the informal conversations, the chance to ask "what if?" or "how might we?" that bring about the most creative change.

While there's always more to do, the PIE Hub has become a clear signpost that public voices are welcome, needed, and heard. It's been a pleasure to be part of something that takes inclusion seriously and continues to ask how we can do better, together.



**Sarah Peddle**  
Research Partner

“One of the key strengths of the Hub has been the opportunity to build relationships across disciplines and with Centre staff.”

# Conclusion

The Centre for Trials Research remains a central hub for leadership, collaboration, and the coordination of high-quality research in health and social care.

Over the past five years, our divisions have thrived in their respective areas of expertise, and our leadership in the use of routine data and methodological innovation has been firmly established. We have significantly enhanced our engagement with patients and the public, ensuring our research is inclusive and relevant to those it seeks to serve.

This report showcases a number of high-profile studies that have been funded, completed, or are underway—each with the potential to inform policy and clinical practice for years to come. Despite a reduction in core funding from Cancer Research UK during this period—historically a key enabler of innovation—we have strategically adapted to ensure the long-term sustainability of the CTR in a more constrained fiscal environment. These efforts are beginning to yield results.

Our strength lies in the depth and breadth of our interdisciplinary teams and collaborations. This solid foundation positions us well to meet current challenges and to continue shaping the future of applied research in the UK and beyond.





## **Sue Campbell passed away in Nevill Hall hospital on 17th June 2025**

Sue was a research partner and consistently vocal supporter of the work of the Centre and one of our strongest advocates in a range of settings. Having this support from Sue over many years has meant a great deal to us and is much appreciated.

Sue Campbell was an integral member of the Centre for Trials Research Public Involvement and Engagement (PI&E) Hub from its very beginning. She played a key role in shaping and sustaining the Centre's commitment to meaningful public involvement. From the outset, Sue's dedication ensured that the voice of the public was embedded at the heart of our research. She provided valued input across a wide range of activities, including supporting Research Design and Conduct Service (RDCS) presentations and numerous events, always championing the importance of clear communication and genuine collaboration between researchers and the public.

Sue brought a wealth of experience from working with a range of groups beyond CTR, including the Wales Cancer Biobank lay group, the Wales Cancer Research Centre, national prioritisation panels, and research ethics committees. She consistently advocated for transparency and inclusivity in research and was always ready to share a thoughtful and constructive opinion. Her ability to challenge, question, and support in equal measure strengthened the quality and relevance of the work undertaken. Sue's enthusiasm for ensuring that study results were communicated in accessible and engaging ways was a hallmark of her contribution.

Sue's loss will be felt deeply by all who worked with her. Her generous spirit, wise counsel, and steadfast commitment to improving health research have left a lasting impact. We are grateful for the time, expertise and energy she shared with the Centre and with so many partners across the wider research community. She will be greatly missed.

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Informational poster on a red board, partially visible on the right side of the image.

VANS  
"OFF THE WALL"

## 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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