

## Research and Development Annual Report 2024/5

<b>Audience</b>	Public
<b>Purpose</b>	<p>To describe the contribution that research, and a research culture, has on the ability of the Trust to serve patients.</p> <p>We believe this is important because research brings hope to patients, it adds meaning to the work of colleagues and this results in an organisation that is better able to serve others.</p> <p>We are sharing this information as part of our <a href="#">2025 – 30 Research Strategy</a>.</p> <p>Our goal is <i>“to be recognised and valued as an organisation where people can take part in, and benefit from, research”</i>.</p> <p>This strategy supports, and contributes to, the organisation being <i>‘trusted to provide consistently outstanding care and exemplary service’</i>.</p>
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<b>Further information</b>	If you would like further information please make a request by email to <a href="mailto:researchanddevelopment.enh-tr@nhs.net">researchanddevelopment.enh-tr@nhs.net</a>

## Research and Development Annual Report 2024/5

### **1 Context: Research is a key enabler to deliver the Trust's strategy, it enhances patient experience and outcome, and supports financial sustainability**

1.1 Encouraging a research-positive culture in health and care organisations is important to give patients wider access to clinical research and improve patient care and treatment options. Evidence shows clinically research-active hospitals have better patient care outcomes.

1.2 The Trust's [research strategy](#) has a single goal "**to be recognised and valued us as an organisation where people can take part in, and benefit from, research**". Progress in 2024/5 and plans for 2025/6 have been presented to the Q&S Committee in April 2025 and are not repeated here in detail (though see Appendix 1 for overview).

1.3 The Trust set six objectives for the four-year research strategy:

- Align research with local needs.
- Make research inclusive.
- Foster local and national collaborations.
- Research is an essential design consideration for all our services.
- All colleagues to recognise research as an essential and rewarding part of effective patient care.
- Implement national approaches to make best use of data and digital.

1.4 In the first year of the new strategy, we focused on building on current research strengths, developing plans to address known areas for improvement, implementing government initiatives, and developing a plan for financial growth to expand our research offerings to patients.

### **2 Context: The Trust is part of the National Institute for Health and Care Research**

2.1 The Trust is proud to be part of the [National Institute for Health and Care Research](#) (NIHR) which has a national vision "*to improve the health and wealth of the nation through research*".

2.2 During 2024/5 the function of the NIHR changed from being a Clinical Research Network (CRN) to a [Research Delivery Network](#) (RDN). The aim of this change was to make the NIHR better able to achieve its vision for the UK to be a global leader in the delivery of high-quality research that is inclusive, accessible, and improves health and care. The NIHR mission is to enable the health and care system to

attract, optimise and deliver research across England and has two primary [sic] purposes:

- to support the successful delivery of high quality research, and
- to increase capacity and capability of the research delivery infrastructure

2.3 In addition NIHR has been specifically asked to deliver a number of [government priority projects](#) by the Department of Health and Social Care to help make the UK a more attractive place to conduct high quality research.

2.4 As part of the transition from the CRN to the RDN the 15 regions of the CRN were reduced to 12 regions of the RDN. ENHT has remained in the [East of England](#) region and has been joined by a number of other NHS organisations from Essex, West Hertfordshire, Bedfordshire and Milton Keynes.

### **3 Context: The Trust also provides system leadership across our local geography to support partnership working**

3.1 The Trust provides leadership and support across our local system, the East of England, and nationally. Examples include leading the [East and North Hertfordshire Health Care Partnership](#) Research and Innovation Group, seconding research staff to the [Hertfordshire and West Essex Integrated Care Board](#) and working with the National Institute for Health and care Research [East of England Regional Research Delivery Network](#).

3.2 We work in partnership with the University of Hertfordshire, the life science industry and non-commercial research funders to enhance patient and experience through research and innovation. The Trust's partnership research with the University of Hertfordshire made a significant contribution to the Trust gaining Teaching Hospital status from 1<sup>st</sup> April 2025.

3.3 The Trust is leading a programme across the Hertfordshire and West Essex Integrated Care System to develop a more inclusive research participation with the goal of enabling all individuals and communities to be offered the opportunity, and be supported, to be involved in research (see for example Appendix 2).

## 4 Quality: Research activity at the Trust

4.1 The number of patients receiving relevant health services, provided or sub-contracted by the ENHT in 2024/5 that were recruited during that period to participate in research approved by a research ethics committee was 3,151 from 69 projects covering 15 different clinical specialties.

4.2 We are grateful to all those who chose to volunteer to take part in a research study as research enables the NHS to meet the changing health needs of those we serve.

4.3 During 2024/5 the Trust's top five recruiting studies were:

- The [BEST4 Screening trial](#) will find out if the [capsule sponge test](#) could be used to screen people with chronic heartburn for [Barrett's oesophagus](#) – a condition that can lead to oesophageal cancer (2,071 recruits). We made it easier for patients to take part using a mobile screening van.
- The international [RESOLVE](#) (Randomised Evaluation of Sodium dialysate Levels on Vascular Event) study is looking to find out what levels of salt in the dialysis fluid are best for your heart (187 recruits).
- The [Perioperative Quality Improvement Programme](#) measures complications, mortality and patient reported outcome from major non-cardiac surgery. The ambition is to deliver real benefits to patients by supporting clinicians in using data to improve patient outcomes across the UK, reducing variation and supporting implementation of best practice (169 recruits).
- [European Organisation for Research and Treatment of Cancer](#) to support the development of quality of life indicators for people with cancer (84 recruits).
- [Quantitative Biomarkers in Eosinophilic Oesophagitis](#) This study focuses on identifying quantitative biomarkers for Eosinophilic Oesophagitis (thickening of oesophagus which can make it difficult to swallow food) (80 recruits).

## 5 Quality: The patient experience of research at the Trust

5.1 We actively seek patient and public feedback. From our ongoing survey in 2024/5, we received 132 responses. Patients frequently mentioned the excellent care they received from doctors, nurses, and the research team. They appreciated the prompt responses to their questions and the constant updates on their treatment progress. Clear and informative communication was highly valued, as was personalised and compassionate care. Patients expressed satisfaction with the outcomes of their treatments and appreciated the efficiency of the treatment process.

5.2 We also ask specific questions to help us better understand the patient experience against. A summary from the last two years is given below.

Questions	2023/4 – 111 responses	2024/5 – 132 responses
1. The information that I received prepared me for my experience on the study	94% Agree or Strongly Agree	92.1% Agree or Strongly Agree
2. I feel I have been kept updated about the research	72% Agree or Strongly Agree	72.0% Agree or Strongly Agree
3. I know how I will receive the results of the research	74% Yes or Yes to some extent	70.5% Yes or Yes to some extent
4. I know how to contact the research team if I have any questions or concerns	92% Yes or Yes to some extent	86.4% Yes or Yes to some extent
5. The researchers have valued my taking part in the research	95% Yes or Yes to some extent	87.1% Yes or Yes to some extent
6. Research staff have always treated me with courtesy and respect	97% Yes or Yes to some extent	94.7% Yes or Yes to some extent
7. I would consider taking part in research again	90% Yes or Yes to some extent	83.3% Yes or Yes to some extent

5.2 Two examples of actual feedback are provided below:

*“The whole research team have been excellent, approachable and nothing has been too much trouble when I have had concerns or issues during my treatment.”*

*“All members of team extremely respectful and ready to answer questions. Will get even better when I know what questions to ask.”*

5.4 Patients also provided feedback on areas for improvement. They expressed a desire for more information about their treatment, including side effects, recovery times, and results of blood tests. Suggestions included better follow-up communication, handling of side effects and discomfort, and ensuring privacy and comfort during treatment. These issues have been shared with the various teams to support the development of local solutions.

5.5 The Trust's Patient and Public Involvement in Research Panel meets monthly to help us better understand how we can design our local research to meet the needs of our patients. A number of projects are given below to illustrate the variety of research areas considered:

- A capsule sponge in difficult swallowing (eosinophilic oesophagitis).
- A smartphone app as therapy for tinnitus (noises in one or both of your ears).
- The use of artificial intelligence to better manage menopause
- The experience of young adults to reduce social isolation in dialysis.
- An evaluation of patient and family for concern in deteriorating patients.
- Introducing risk communication in advanced chronic kidney disease.
- Developing person-centred outcome measures in end-of-life care.
- Provision of information for people with intellectual disabilities accessing critical care services.
- Music therapy in mechanically ventilated patients.
- Intelligent System Integration for Guideline-Based Treatment of Atrial Fibrillation

## **6 Quality: Embedding research into practice for the benefit of patients**

6.1 Research at the Trust supports the development of new knowledge. In 2024, the Trust had 348 [research publications](#) authored by Trust staff, including 35 jointly published with the [University of Hertfordshire](#). The publications encompass a diverse array of research fields and are disseminated in several high-impact journals.

6.2 Eight examples of research to demonstrate the generation of new knowledge benefiting patients across our main services:

- Therapeutic Hypothermia in Neonates: Research on the initiation of therapeutic hypothermia in neonates with hypoxic-ischaemic encephalopathy has led to improved outcomes for newborns suffering from this condition.
- Cancer Diagnostics: The development of a multidisciplinary diagnostic centre for early detection of cancer in patients with nonspecific symptoms has enhanced early diagnosis and treatment, improving patient survival rates.
- Cardiopulmonary Exercise Testing: Studies on cardiopulmonary exercise testing parameters associated with postoperative outcomes in colorectal cancer patients have provided insights into better preoperative assessments and postoperative care.
- Asthma Care Pathways: Research on the greenhouse gas emissions of severe asthma care pathways has highlighted the environmental impact of asthma treatments and suggested more sustainable practices.
- Clinical Trials in Oncology: The phase III trial of Lenvatinib plus pembrolizumab versus chemotherapy for advanced endometrial cancer has

provided new treatment options for patients, improving survival rates and quality of life.

- Diabetes Management: Studies on motivational interviewing among healthcare professionals caring for people with diabetes have improved patient engagement and self-management, leading to better health outcomes.
- Nephrology: Research on the impact of residual kidney function on haemodialysis survival has informed better management practices for patients with chronic kidney disease, enhancing their quality of life.
- Paediatric Emergency Medicine: Investigations into the leadership development in paediatric emergency medicine have identified key experiential opportunities that shape effective clinical leadership, ultimately benefiting patient care in emergency settings.

6.3 Research is well embedded into service design and delivery at Mount Vernon and the challenge now is to embed research into service design, planning and operations across all care groups and support departments.

6.4 Trust colleagues have published research around sustainability and this work supports the Trust's Green Plan. Examples include:

- One study, led by Khezrian et al., examined the [greenhouse gas \(GHG\) emissions associated with severe asthma exacerbations along the care pathway](#). The findings, presented at the European Respiratory Journal conference, emphasise the need for sustainable healthcare practices to mitigate environmental impact.
- Another study by Tran et al., published in Thorax, explored the [carbon footprint disparities in inhaler device use across Nordic countries and the UK](#). The research highlights the significant environmental burden of inhaler devices and calls for more eco-friendly alternatives.
- Vartiainen and colleagues conducted a study, also published in Thorax, which revealed that [thoughtful prescription of inhaled medication could reduce inhaler-related GHG emissions by 85%](#). This study advocates for more sustainable prescribing practices to minimise the environmental impact of asthma care.
- Wilkinson et al. contributed to the body of research with their study on the [SABINA healthCARE-Based enviroNmental cost of treatment \(CARBON\) study](#), published in Thorax. This research quantified the GHG emissions associated with suboptimal asthma care in the UK, highlighting the need for improved asthma management to reduce environmental harm.
- Lastly, another study by Vartiainen et al., published in BMJ Open Respir Res, examined the potential to [reduce inhaler-related GHG emissions through](#)

[better prescribing practices](#). The study underscores the importance of integrating environmental considerations into healthcare decisions.

## **7 Assurance: Governance and assurance arrangements for the safe conduct of research**

7.1 Research at the Trust is supported by a number of well-defined policies, processes and guidance notes to ensure that all research is compliant with national research and ethical standards (e.g. [UK Policy Framework for Health and Social Care Research](#)).

7.2 The oversight of research is the responsibility of the R&D Board and is led by research triumvirates at Mount Vernon Cancer Centre and Lister Hospital (which also covers research at Hertford County hospital and the new QEII Hospital). Each Triumvirate comprises representation from the consultant body, nursing and operational management.

## **8 Risk: Management of risk and incidents via the risk register**

8.1 Risks and incidents are identified and reported via an internal system called ENHance. Risks and incidents are then managed through a variety of levels to ensure timely and appropriate attention.

8.2. Risks and incidents are regularly reviewed by the Trust's two multi-disciplinary Research and Development Steering Groups which meet monthly.

8.3 Risks are also reviewed by the R&D Board on a quarterly basis. As a group of research leaders we are developing our abilities to identify and assess risk in a way that is comparable with the general use of the risk matrix (i.e. impact vs likelihood) and this means that some of the reported risk scores require moderation. On this basis none of the risks, after mitigation, exceed a risk score of 10.

8.4 For 2024/5 the R&D Board identified research governance as having a risk score of 9 (Likelihood 3, Impact 3). This was mainly due to out of date Standard Operating Procedures (SOPs) for the design, oversight and conduct of research. Updated SOPs are due for completion in May 2025.

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