



Without research there would be no new medicines, tests or treatments.

**Cleo volunteers with the Research & Innovation team** in the 'Genetics for eczema and food allergies' study. Thanks to her help, it will be easier to identify children who are at risk of these diseases and may help to develop new treatments in the future.

You can help too, by contacting: [www.ekhuft.nhs.uk/research-and-innovation](http://www.ekhuft.nhs.uk/research-and-innovation)

**Research & Innovation**

Good for you, good for the NHS



Scan the code to visit our website



## Foreword

As I sit back and reflect, it feels like the past year has been a period of consolidation – finishing, or making significant progress, on a number of important work streams and steadily growing our commercial-contract activity being particular highlights. Overall, I think we've had a good year, with more participants recruited to Clinical Research Network (CRN) Portfolio studies in any year since 2014-15. Perhaps more importantly, the breadth of our activity continues to grow with people being recruited to at least one study in 24 out of 30 of the CRN specialty groups.

Although not strictly speaking an event during the 2017-18 financial year, the announcement of a new medical school for Kent & Medway (KMMS, [www.kmms.ac.uk](http://www.kmms.ac.uk)) was an extremely welcome piece of news and, once underway presents, unprecedented opportunities for health research, innovation, education and training in our region.

We need to continue to position ourselves as the 'go-to' organisation in Kent for healthcare research and be visibly leading R&I across the region. With these considerations in mind, I am taking forward a number of initiatives with our various local partners which I hope to be able to expand upon in future editions of this report.



**Dr Tim Doulton**  
**Director of Research & Innovation**  
**September 2018**

(Front cover picture: One of our many young research participants who features in a Trust-wide poster campaign being launched in Autumn 2018)

## Contents

Foreword	2
Contents & acknowledgments	3
Executive summary	4
Key events during 2017-18 financial year	5
Public & Patient Involvement & Engagement	7
Key metrics	9
Overview of research activity (individual/team) during 2017-18 financial year	13
List of peer-reviewed publications from Trust researchers (April 2017 to March 2018)	30
Appendix: Finance Report	40

## Acknowledgements

I would like to express my thanks to all those PIs, delivery team staff, other researchers, James Rand, Jo Isaacs & Art Ationu who have contributed the content of this report, to Ruth Hulbert for the PPIE report, Jacky Douglas for the finance report and Jill Baker for assembling the first draft.

**Dr Tim Doulton**

## 1. Executive Summary

1. During the year a total number of 2297 patients were recruited by East Kent Hospitals University Foundation Trust (EKHUFT, hereinafter referred to as “the Trust”) researchers into National Institute for Health Research (NIHR) portfolio studies. This represents an increase of 7.9% on 2016-17, and is our highest recruitment for three years.
2. During 2017-18 there were 88 studies given Capacity & Capability approval by the Trust of which 58 were NIHR Portfolio studies. Of the 88 newly opening studies, 14 were clinical trials of investigation medicinal products (CTIMPs) and 15 were industry-funded/-sponsored studies.
3. Total income received on behalf of R&D during the year was £2.69m, and similar to 2016-17. Income related to commercial/industry study activities was down slightly to £0.74m (vs. £1.02m in 2016-17).
4. During 2017-18 financial year the Trust received £1.7m from NIHR/DH (via CRN: KSS, NIHR grant streams and directly). This included £96k from DH Research Capability Funding compared to £69k in 2016-2017.
5. We have provided eighteen training sessions on various topics to 210 colleagues throughout the year, with significant year on year growth in number of people receiving training.
6. During 2017-18 Trust researchers published 103 articles in peer-reviewed journals.
7. We launched our professionally produced short film about research in the Trust. This can be found at <https://www.youtube.com/watch?v=IYexuRsL7pg&feature=youtu.be>

## **2. Key Events during the 2017-18 Financial Year**

### **Joint post with Kent Community Health NHS Foundation Trust (KCHFT)**

Over the last couple of years EKHUFT has been working with our local community health provider KCHFT through a joint research nurse appointment. The postholder, who is substantively appointed by KCHFT, but who holds an honorary contract with EKHUFT, works to set-up and run studies that cross organisation boundaries. As more and more elements of patient pathways move from secondary care into the community the value of posts like this will become greater.

Through this post we have been able to open a number of studies some of which otherwise wouldn't have got going in East Kent:

- MIDFUT – Multiple Interventions for Diabetic Foot Ulcer Treatment Trial (with KCHFT)
- RETAKE - RETurn to work After stroKE (with KCHFT)
- Challenge-UK - A UK Cohort of the Colon Health And LifeLong Exercise ChaNGE trial (with CCCU)
- MePFAC - Methylphenidate versus Placebo for Fatigue in Advanced Cancer (with Pilgrim's Hospice)

### **Further CRN:KSS 'Highly Commended' Award**

Our Patient & Public Involvement & Engagement steering group has had an exceptionally busy year – see the relevant section below – and we were rewarded with a further award from Clinical Research Network Kent Surrey Sussex for our endeavours.

### **Launch of our short film about research**

Linking to our planned revamp of our R&I webpages later in 2018, we have commissioned a professionally produced short film about the scope and benefits to patients of the research that we undertake in the Trust. This was launched during the year, and can be found both via the Trust's main website and through this link: (<https://www.youtube.com/watch?v=IYexuRsl7pg&feature=youtu.be>)

### **Long-term growth in commercial-contract study activity**

Commercial-contract research is considered of vital importance to patients, the NHS and the UK economy. Developing this sector in East Kent offers our patients the opportunity to participate in more early-stage, cutting-edge research without having to travel to major academic centres. Compared to where we were five years ago we have seen substantial growth in our portfolio of commercial-contract research studies.

We have:

- increased the number of new commercial studies opening from an average of 5 to 15 per annum
- increased the spread of disease areas where we are active in commercial research from 3 to 9
- seen an approximate 8-fold in our gross income linked to commercial-contract research

## Health Foundation grant award

Dr Paul Stevens (Consultant Nephrologist & Trust Medical Director) and Professor Chris Farmer (Professor of Medicine, CHSS, University of Kent) were successful in their bid for £68,730 from the Health Foundation for a study entitled 'Providing clear insight into patients' clinical and social care needs by a novel use of combined hospital datasets'.

## Annual R&I awards

As in 2016-17 we made a number of awards at our end-of-year meeting. This year we received many more outstanding nominations, and choosing the winners and runners-up was exceptionally challenging – reflecting the manner in which those working in and for R&I in the Trust go 'above and beyond'. Recipients of awards were:

### 'Unsung Hero' category

Winner                           Aisling Potter (Research Scientist, Biochemistry, K&CH)  
Highly Commended       Sharon Turney (Multi Speciality Research Team, QEQMH)

### 'Exceptional Contribution' category

Winner                           Kent Haemophilia & Thrombosis Centre  
Highly Commended       Brent Murray (Patient Research Ambassador)  
Highly Commended       Jessica Evans (PI & Consultant Surgeon, QEQMH)

### 'Rising Star' category

Winner                           WHH Intensive Care Unit  
Highly Commended       Jo Deery (Multi Speciality Research Team, QEQMH)  
Highly Commended       Charlene Dodd (Physiotherapist, Haemophilia Centre, K&CH)

### 'Supporting Others' category

Winner                           James Rand (Ophthalmology Research Team, K&CH)  
Highly Commended       Karen Saunders (Physiotherapist, Neurorehabilitation, K&CH)



Above: Some of our R&I Award winners with Dr Tim Doulton, Director of R&I (far right)

### 3. Patient & Public Involvement & Engagement

Patient & Public Involvement & Engagement (PPIE) activity within R&I has continued throughout 2017-18 and good progress has been made with the majority of the PPIE related R&I strategic objectives. This work continues to be led by the PPIE Steering Group, who continued to meet regularly. Membership to this group increased during the year and there are now 10 members, including patient representatives.

Key achievements during 2017-18 include the following:

- Thank you letters continued to be sent to our research participants. The feedback survey incorporated into this received responses from 92 participants and were largely very positive.
- 163 participants volunteered to become an East Kent 'Research Friend' during the year. These volunteers can get involved in a variety of ways, such as helping with publicity events, taking part in events/meetings, helping with research design etc. A coffee morning was held in October 2017 and was well attended.
- During one week in May 2017, we joined forces with other NHS organisations in Kent for a series of publicity events to mark International Clinical Trials Day, including two external events. At the same time we undertook a survey to find out the views of staff and the public regarding what research areas should be the highest priority within east Kent.
- Work on our new R&I webpages has progressed, despite some unforeseen delays, and we are hoping to launch these during late 2018.
- Examples of research taking place within the Trust have been featured in the local press, the Trust magazine, and on internal & external webpages at regular intervals.
- In February 2018, we were Highly Commended by the CRN:KSS for the 'Involving Patients in Research' Award



**news**

**Research & Innovation**  
Good for you, good for the NHS

**Research Friends Coffee Morning - meet and greet for research participants**

EKHUFT's Research and Innovation team held a coffee morning recently to meet, greet and formally thank patients who have been participating in research studies within the Trust.

The patients who attended were those who have agreed to become 'EKHUFT Research Friends', so were invited to the event to meet with staff informally.

Held in the postgraduate centre at Kent and Canterbury Hospital, the event also enabled those who are interested in getting involved in our work to find out more about ways they can help.

Lead Research Nurse, Ruth Hulbert said: 'East Kent Hospitals has a great reputation for research and we're very proud of all the work that we carry out in a variety of areas, such as testing new drugs and treatments, helping to broaden the depth of human knowledge and ultimately saving patients' lives.'

'But none of this could be done without the invaluable contribution of our patients. Without their support, none of this would be possible. The coffee morning was a way of thanking patients for their help and us showing how appreciated they are, as well as involving them more in the work we do within R&I.'

EKHUFT also works closely with researchers in other hospitals and universities, as well as developing its own research in a diverse and wide range of areas, including occupational and physiotherapies to ophthalmology and advanced neuroimaging.

Top left: participants at our Research Friends morning

Bottom left: Ruth Hulbert (Lead Research Nurse) & Brent Murray (Patient Research Ambassador for EKHUFT) receiving CRN:KSS award from Jonathan Sheffield, CEO of the NIHR Clinical Research Network





Above: Photos from International Clinical Trials Day, May 2017



## 4. Key Metrics<sup>1</sup>

### Study activity

During 2017-18 the Trust had 314 active<sup>2</sup> research studies including 280 within the NIHR Portfolio and 34 non-Portfolio or “own account” studies. Included within these studies are 84 clinical trials of investigation medicinal products (CTIMPs) and 53 industry studies (49 Portfolio, 4 non-Portfolio).

We recruited to 118 NIHR Portfolio studies, across 24 discrete disease areas.

The Trust R&I Department issued approval for 88 new studies between 1st April 2017 and 31st March 2018 (58 NIHR Portfolio and 30 non-Portfolio), of which 14 were CTIMPs and 15 were industry studies.

### Participant Recruitment

Between 1<sup>st</sup> April 2017 and 31<sup>st</sup> March 2018 the Trust recruited 2297 participants to NIHR Portfolio studies compared to 2128 participants in 2016-17, an increase of 7.9%. We have continued to maintain a healthy balance with complex interventional (usually randomized controlled) and more straightforward observational and large-scale studies (Figure 1), across a very broad range of specialty areas.

### NHS Permission

The NIHR has set NHS organisations an aspirational target of achieving NHS permission for a research study to open with 15 days of a valid application for 80% of studies. In 2017-18 we approved 45 new NIHR Portfolio studies, of which 45 (85%) were within 15 days. Our mean and median times to permission were 6 days and 2 days respectively.

### Research Income

Research-related income to the Trust was similar to that seen last year (£2.69m vs. £2.85m in 2016-17) with income related to commercial/industry study activities down on the previous year, and to a level broadly in line with what we achieved over the period from 2014-16 (£0.74m vs. £1.02m in 2016-17). During the year the Trust was allocated £96k by the Department of Health via its Research Capability Funding stream, and this supported NIHR faculty members (present and future) directly and via the Trust’s Research Sessions Scheme (RSS).

---

<sup>1</sup> Data relating to NIHR Portfolio studies obtained from NIHR Open Data Platform (KSS QlikView Pages)

<sup>2</sup> Active defined as open to recruitment or in follow-up phase.

## GCP & R&I training for staff

In 2017-18 we provided 18 training sessions to 210 colleagues in a variety of locations as detailed below. In comparison, we provided training to 191 individuals in 2016-17 and 166 in 2015-16.

The Trust is the first organisation in Kent, Surrey & Sussex to run the Principal Investigator Masterclass – an NIHR developed & approved half-day course primarily designed to improve quality of oversight in CTIMPs. Since early 2017 we have run five masterclasses and received outstanding feedback from participants.

Date	Title of Training	Venue	Attendees
03/04/2017	Valid Informed Consent Workshop	WHH	11
28/04/2017	GCP Refresher	KCH	6
05/05/2017	Intro to GCP	WHH	18
07/06/2017	Valid Informed Consent Workshop	WHH	11
18/07/2017	PI Masterclass	WHH	9
21/09/2017	Commercial Costings Clinical Trials Workshop	KCH	8
22/09/2017	PI Masterclass	KCH	7
25/09/2017	Next steps in delivering Clinical Research - Day 1 of 2	WHH	17
27/09/2017	Commercial Costings Clinical Trials Workshop	KCH	12
02/10/2017	Next steps in delivering Clinical Research - Day 2 of 2	WHH	see above
16/10/2017	GCP Intro	Trinity House	18
08/11/2017	Valid Informed Consent Workshop	WHH	12
16/11/2017	GCP Refresher	Trinity House	19
29/01/2018	PI Masterclass	KCH	7
14/02/2018	GCP Refresher	WHH	14
07/03/2018	GCP Intro	WHH	18
12/03/2018	AcoRD Workshop	KCH	10
16/03/2018	Valid Informed Consent Workshop	Trinity House	13

## Statistical Advice

Statistical advice was provided by Paul Bassett (StatsConsultancy Ltd) to 12 Trust researchers by phone, e-mail and in face-to-face meetings.

Figures

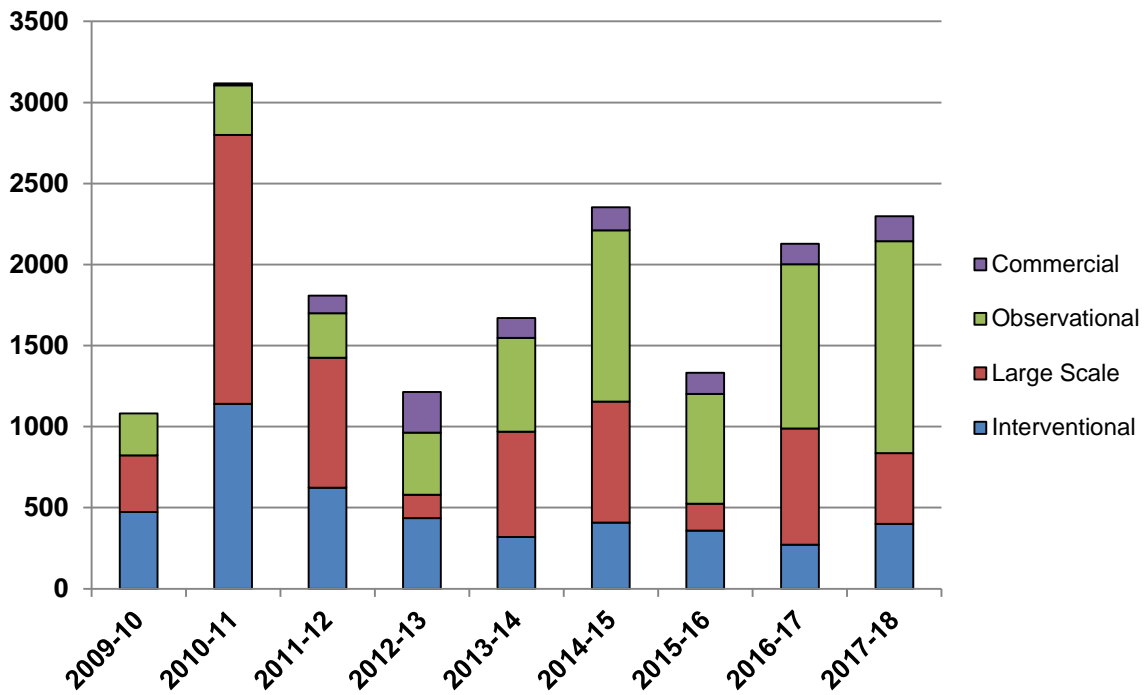


Figure 1. Recruitment to NIHR Portfolio studies by financial year and type of study

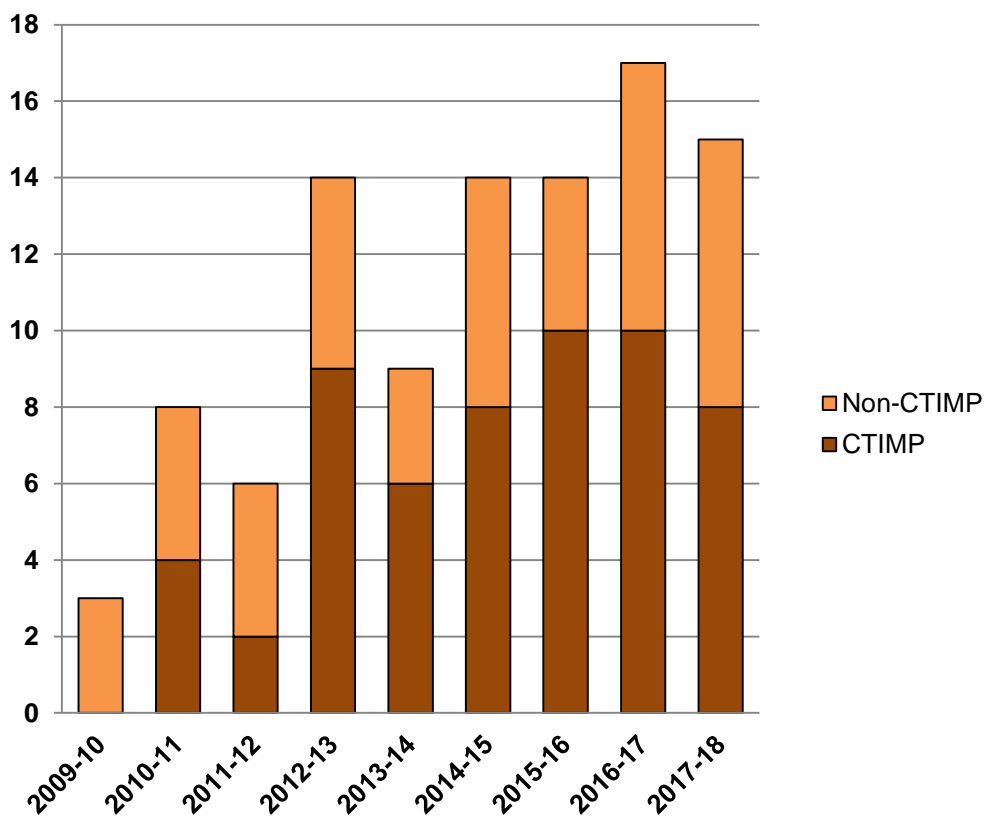
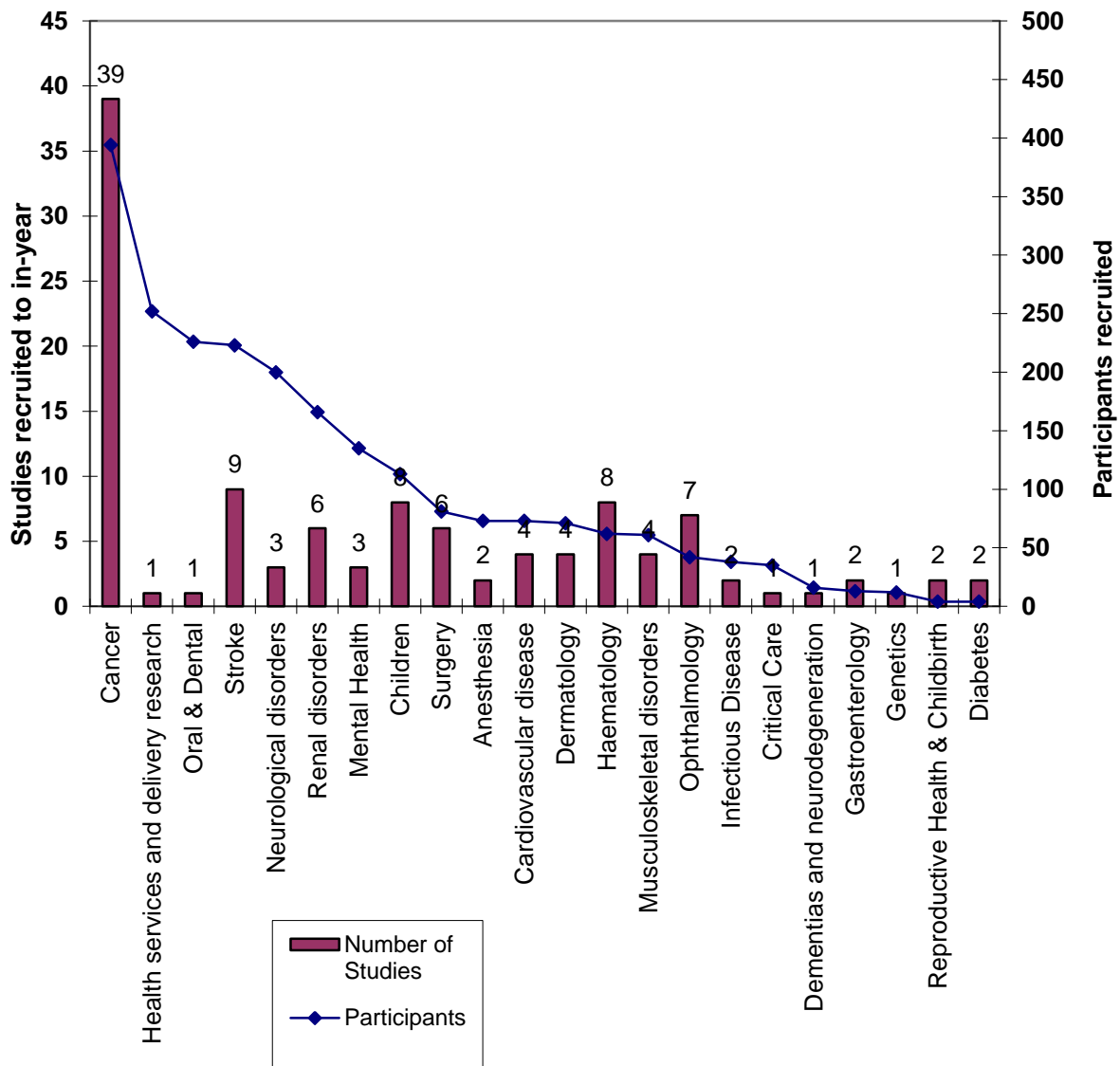


Figure 2. Industry studies opened by financial year



**Figure 3.** Recruitment and number of studies recruited to by NIHR specialty group (numbers above bars indicates number of studies recruited by each specialty group)

## 5. Overview of Research Activity during 2017-18 Financial Year

### **Solid Tumour oncology research team: Sue Drakeley & colleagues**

The Solid Tumour Oncology Research Team continues to provide opportunities for solid tumour cancer patients with the majority of tumour types to maximise treatments.

The team continued to perform well in 2017-18 by recruiting 288 patients into a varied portfolio of CTIMP, Cohort and QOL questionnaire studies. The radiotherapy portfolio continues to expand with three new studies being opened in the past three months and six more in the pipeline.

### **Add Aspirin - A phase III, double blind, placebo controlled, randomised trial assessing the effects of aspirin on disease recurrence and survival after primary therapy in common non-metastatic solid tumours**

In October 2017 East Kent was 2<sup>nd</sup> overall for Kent, Surrey & Sussex with 49 patients over all cohorts. Since November we have recruited a further 17 patients.

### **Optima – A phase III randomised trial - Optimal Personalised Treatment of early breast cancer using Multi parameter Analysis**

Since opening this study four patients have been recruited. None of them were randomised to receive chemotherapy which has saved the Trust thousands of pounds.

### **SCOT – Phase III Trial - Short Course Oncology Therapy - A study of Adjuvant Chemotherapy in colorectal cancer by the CACTUS & QUASAR 3 Groups**

SCOT is to our knowledge the largest single randomised study on the adjuvant treatment of colorectal cancer. The study achieved its primary endpoint of showing that three months of oxaliplatin – containing adjuvant chemotherapy is non-inferior to 6 months of the same treatment in the overall trial population. Three months of treatment might therefore be considered a new standard of care for adjuvant chemo. The SCOT study paper this can be viewed at:

([http://www.thelancet.com/journals/lanonc/article/PIIS1470-2045\(18\)30093-7/fulltext](http://www.thelancet.com/journals/lanonc/article/PIIS1470-2045(18)30093-7/fulltext))

### **POUT - A Phase III randomised trial of PeriOperative chemotherapy versus sURveillance in upper Tract urothelial cancer**

POUT aims to establish in upper tract urothelial carcinoma (UTUC) patients whether chemotherapy is superior to surveillance following surgery. Annual incidence of UTUC is between 2-4/100,000 and has a poor prognosis.

Based on the results of POUT, the recommendation is that every patient in the future who has locally advanced upper tract urothelial cancer should be offered chemotherapy after surgery instead of close observation. However, the chemotherapy has to be given within three months of having surgery. If patients did not receive chemotherapy as part of the POUT trial it is not recommended that anyone with UTUC receive chemotherapy now.

## **Haematological oncology (blood cancer): Dr Jindriska Lindsay, Lavinia Davey & colleagues**

During 2017-18 the primary focus of research within haemato-oncology has continued to be the improvement of treatment outcomes for cancer patients through the delivery of interventional, randomised, controlled CTIMPs.

Our recruiting portfolio included 12 interventional studies, 5 of which were commercially sponsored and 7 investigator-led (academically sponsored) trials. In addition we have recruited into 4 UK observational studies.

One of our most significant successes this year has been the opening of the Janssen sponsored AQUILA trial in high risk smouldering multiple myeloma (SMM) which has got off to a very positive start. Currently there is no approved treatment for patients with SMM. Clinical management currently involves monitoring patients for the development of symptomatic disease which can lead to not insignificant long term morbidity including renal impairment and pathological bone fractures. SMM accounts for approximately 15% of all myeloma patients and subjects with high-risk SMM have an approximate 50% risk of progression to MM within the first two years. The primary objective of this study is to determine whether treatment with Daratumumab, administered SC prolongs progression-free survival (PFS) compared with active monitoring in subjects with high-risk SMM. We are therefore very excited to be able to offer this cutting-edge trial to our patients locally. To date we have screened 12 patients and randomised 6. Since opening to recruitment East Kent has consistently been the leading global recruiter into AQUILA. Dr Jindriska Lindsay is the UK CI for this study.

As a consequence of the timely and effective set up of the above study the team has been successful in attracting another Janssen study, PLEIADES, which offers Daratumumab (SC) to eligible patients who require myeloma treatment in both frontline and relapsed settings. Daratumumab, an anti-CD38 antibody, is given to all patients entered into the study in addition to their immuno-modulatory and/or proteasome inhibitor based combination therapy. There is already published evidence showing considerable improvement in PFS and depth of responses when IV Daratumumab is added to Velcade, Melphalan and Prednisolone (ALCYONE Study). We are accordingly very excited to offer this very efficacious treatment to our local population. Outside of clinical trials Daratumumab is otherwise unavailable to NHS patients except as single agent, 4<sup>th</sup> line therapy.

This year has seen Roche receive NICE approval for the use of GAZYVARO with chemotherapy in frontline advanced stage follicular lymphoma which resulted from the GALLIUM trial. East Kent were the highest UK recruiting site and 3rd highest globally with 38 patients randomised into the study.

Myeloma XI (120 EK patients randomised into this largest ever study in frontline myeloma) is now reporting and changes to UK treatments are anticipated – see related oral abstracts below:

### **Conference Proceedings**

American Society of Haematology:

Charlotte Pawlyn, Faith E. Davies, David Cairns, Alina Striha, Phillip Best, Rachel Sigsworth, John R Jones, Bhuvan Kishore, Mamta Garg, Cathy Williams, Kamaraj Karunanithi, Jindriska Lindsay, Matthew W Jenner, Gordon Cook, Martin F Kaiser, Mark T Drayson, Roger G Owen, Nigel H. Russell, Walter M Gregory, Graham EKHUFT Research & Innovation Annual Report 2017-18  
Edited by: Tim Doulton

Jackson and Gareth J. Morgan. Continuous Treatment with Lenalidomide Improves Outcomes in Newly Diagnosed Myeloma Patients Not Eligible for Autologous Stem Cell Transplant: Results of the Myeloma XI Trial. Blood 2017 130:1854

Graham Jackson, Faith E Davies, Charlotte Pawlyn, David Cairns, Alina Striha, Anna Hockaday, Inga Sakauskienė, John R Jones, Bhuvan Kishore, Mamta Garg, Cathy Williams, Kamaraj Karunanithi, Jindriska Lindsay, Matthew W Jenner, Gordon Cook, Martin F Kaiser, Mark T Drayson, Roger G Owen, Nigel H. Russell, Walter M Gregory and Gareth J. Morgan. Lenalidomide Maintenance Significantly Improves Outcomes Compared to Observation Irrespective of Cytogenetic Risk: Results of the Myeloma XI Trial Blood 2017 130:436

European Haematology Association:

C. Pawlyn, F. Davies, D. Cairns, A. Striha, A. Waterhouse, C. Collett, J. Jones, B. Kishore, M. Garg, C. Williams, K. Karunanithi, J. Lindsay, M. Jenner, G. Cook, M. Kaiser, M. Drayson, R. Owen, N. Russell, W. Gregory, G. Jackson, G. Morgan. LENALIDOMIDE INDUCTION AND MAINTENANCE THERAPY FOR TRANSPLANT ELIGIBLE MYELOMA PATIENTS: RESULTS OF THE MYELOMA XI STUDY. 318 | haematologica | 2017; 102(s1)

C. Pawlyn, F. Davies, D. Cairns, A. Striha, A. Waterhouse, C. Collett, J. Jones, B. Kishore, M. Garg, C. Williams, K. Karunanithi, J. Lindsay, M. Jenner, G. Cook, M. Kaiser, M. Drayson, R. Owen, N. Russell, W. Gregory, G. Morgan, G. Jackson. QUADRUPLET VS SEQUENTIAL TRIPLET INDUCTION THERAPY FOR MYELOMA PATIENTS: RESULTS OF THE MYELOMA XI STUDY. 142 | haematologica | 2017; 102(s1)

American Society of Clinical Oncology:

Graham Jackson, Faith Davies, Charlotte Pawlyn, David Cairns, Alina Striha, Anna Waterhouse, John Jones, Bhuvan Kishore, Mamta Garg, Cathy Williams, Kamaraj Karunanithi, Jindriska Lindsay, Matthew Jenner, Gordon Cook, Martin Kaiser, Mark Drayson, Roger Owen, Nigel Russell, Walter Gregory and Gareth Morgan Lenalidomide induction and maintenance therapy for transplant eligible myeloma patients: Results of the Myeloma XI study Journal of Clinical Oncology 35, no. 15\_suppl (May 2017) 8009-8009

### **Gynaecological oncology: Mr Andy Nordin, Jo Williams & colleagues**

Our gynaecological oncology research team continues to provide opportunities for women diagnosed with ovarian, cervical, endometrial and vulval malignancies to participate in clinical trials. Over the past year we have once again expanded our portfolio significantly. We opened the JAVELIN Trial in October 2017 which we recruited quickly and successfully to. JAVELIN was our very first commercial study to be opened in the gynaecological oncology team. This was a randomised open label, multicentre, phase 3 study to evaluate the efficacy and safety of Avelumab, a novel agent, in combination with and/or following chemotherapy in patients with previously untreated epithelial Ovarian cancer which is expected to increase progression free survival by more than 7 to 8 months . As this was a global study the recruitment target was achieved extremely quickly and has now closed to recruitment. Our patients in East Kent continue in follow up.

We continue to successfully recruit to ICON 8B which is a phase 3 randomised trial for the first line treatment of women with newly diagnosed high risk stage 3-4 epithelial ovarian, fallopian tube or primary peritoneal comparing dose fractionated chemotherapy compared to standard three weekly chemotherapy

and soon to open will be the RESPECT study; communicating clinical trial results to participants in the ICON 8 academic phase III trial. We are also running the NiCCC trial using Nintedanib vs. chemotherapy for women with clear cell carcinoma of ovary or endometrium.

We have a further three trials we are expecting to open very shortly: COMICE a trial of Olaparib and Cediranib as maintenance therapy in advanced/ recurrent cervical cancer, ICON 9 , evaluating the efficacy of olaparib and cediraninb or olaparib alone as maintenance therapy for relapsed platinum sensitive ovarian cancer following a response to chemotherapy and due to the our successful commercial recruitment, we were invited to participate in ATHENA , open to Ovarian Cancer Patients evaluating Rucaparib and Nivolumab as maintenance treatment following response to first-line platinum-based chemotherapy for ovarian cancer patients.

Aside from the ovarian cancer trials we are part of the European Organisation for Research and Treatment of Cancer (EORTC) Quality of life Group and have been involved in the development of specific modules relating to gynaecology patients and their wellbeing. For women diagnosed with endometrial cancer we have the ENGOT 55102, a randomised trial involving post-operative chemotherapy or no further treatment with node negative stage I-II intermediate or high risk cancer patients and also our quality of life studies; Developing questionnaires for individuals at risk for a hereditary cancer predisposition syndrome (HCPS), an international field study testing the reliability and validity for assessing sexual health in cancer patients and our Phase III development of a QOL cancer survivorship questionnaire. Our lead clinician for cancer and President of the British Gynaecological Cancer Society, Mr Andy Nordin, will be Chief Investigator for an international field study of the reliability and validity of the EORTC Vulva Cancer Questionnaire module.

Our radiology MrOC study looks at the impact of multiparametric MRI on the staging and management of patients with suspected or confirmed ovarian cancer. For those diagnosed with low risk early stage cervical cancer we have the SHAPE study which compares a radical hysterectomy and pelvic node dissection vs. simple hysterectomy and pelvic node dissection.



## Multi-Speciality Research Team: Angela Moon & colleagues

Over the past 12 months, the team has diversified to support and deliver observational and medical devices studies. This has provided learning opportunities for the team, which has been shared with the wider research teams as a whole. Strong collaborative connections have been made with other departments such as Medical Devices and Procurement.

Success in this area of study has led to an appetite for other medical device studies. Commercial sponsors are now interested in collaborating with three separate surgical teams based at QEQM to trial a new innovative dressing.

The MS Registry study was opened in October 2017 - an observational study which will inform future researchers about this often debilitating disease. This study has been a catalyst for engagement with the Motor Neurone Disease (MND) specialist teams. The MS registry has proved to be our largest recruiting study to date, with over 300 participants in EKHUFT.

One of the most exciting developments is that we welcome a MND specialist nurse and a gastroenterology specialist nurse undertaking the role of Principal Investigator with 2 new studies opening later this year, one of which is commercial. Other areas of growth include engagement with teams in Critical Care (ICU) and anaesthetics across the three main sites.

A team member has been instrumental in working with Pathology to appoint a Research Associate Practitioner based within QEQMH Pathology Department who will work across all sites to assist in delivery of Pathology services for studies which will benefit all teams.

Many research events have been supported by this team over the past 12 months including ICT day and invitations to speak at multi-disciplinary meetings to spread the news about research



(Above: Members of the Multi-Specialty Research Team)

## Ophthalmology: Sarah Stirrup & colleagues



(Left to right: James Rand, Sarah Stirrup, Mr Afsar Jafree, Mr Nishal Patel)

Ophthalmology research within the Trust has expanded to new disease areas and has developed new PIs over this last year, despite the challenges of departmental changes. Commercial funding has supported staff attendance at training courses, with the development of skills essential to research within this field. In addition to the Portfolio studies detailed below, we are in discussion with the University of Kent regarding joint projects, and we are working on protocols for home-grown research.

**Afsar Jafree** – The STAR study (Sponsor: King’s) is open, a double masked randomised control trial in Age Related Macular Degeneration (AMD), and looks at the use of stereotactic radiotherapy with patients requiring ranibizumab - we are the third highest recruiter in the country. ARIES (Bayer) is in follow-up, a randomised study researching the different treatment patterns in AMD patients being treated with Aflibercept. LEAVO (Moorfields) is also in follow-up, another double-masked randomised study comparing ranibizumab, aflibercept and avastin in patients with Central Retinal Vein Occlusion (CRVO).

**Nick Kopsachilis** – Nick is a new PI in a new research area for this Trust. The IKERVIS study (Santen) is monitoring Ciclosporin eye drops as treatment for severe keratitis in adults with dry eye disease, and is recruiting well within the cornea clinics.

**Mike Mota** – Another new PI in a new research area, Mike is leading on the Artificial Eye study (Queen Vic), which is a nationwide survey of prosthetic eye users.

**Nishal Patel** – BVMP (University of Oxford) is open and has Ophthalmology Matron **Lynne Hadley** as Co-Investigator. It is a prospective randomised controlled trial to assess improved binocular visual function in young patients undergoing monocular cataract surgery with a bifocal intraocular lens. IRISS (Almeira Sciences) looks at the safety of the Iluvien implant and is in follow-up, after recruiting over target. Also in follow-up after recruiting over target is DRAKO (Bayer), looking at effectiveness of aflibercept in patients with Diabetic Macular Oedema. iBOI (Roche), looking at burden of illness in patients with Geographical Atrophy (GA), recruited to target and was our fastest ever first patient recruit with Sponsor ‘green light’ late afternoon and first patient at 10am the next morning!

**David Schultz** – PI for ASCOT (Moorfields), a double masked randomised control trial studying the use of steroids in vitreoretinal surgery for open globe trauma. The first participant has completed treatment and the study is still open.

**Hilary Webb** – a new PI and we are the first site at which an Orthoptist is leading this study, which is called EuPatch (Leicester Ophthalmology Group). This is our first paediatric research study, looking at the roles of patching and glasses wearing in Amblyopia treatment, and we have our first two participants already.

**Rosina Zakri** - the SAFARI study (Novartis), looking at ranibizumab for those patients who do not respond to aflibercept, closed in October 2017. It recruited over target and we were second highest recruiter in the UK.

### **Conference Presentations**

February 2018: 2<sup>nd</sup> International Swept Source OCT and Angiography conference (ISSOCT), Paris: LA Novel OCTA biomarker to diagnose and monitor activity of neovascular retinal diseases: Emily Shao, Eleni Tsolakou, Chris Holmes, Nishal Patel, EKHUFT.

May 2017: Association for Research in Vision and Ophthalmology (ARVO), Baltimore:

- Lee HB, Zakri R and Patel N “Subretinal Hyperreflective Material seen on Optical Coherence Tomography as a Quantitative Biomarker in Retinal Angiomatous Proliferation treated with Intravitreal Ranibizumab”
- Ong BB, Katta M, Yvon C, Lu L and Patel N “SHRM as a biomarker of disease activity in classic and occult AMD subtypes”
- Patel, N on behalf of the Aflibercept Users Group, Medisoft UK “Intensification of Aflibercept monotherapy and outcomes at 24 months in patients with persistent wet AMD”
- Patel N, Sivaprasad S and Talks J “Vision improvement maintained at year 2 in patients with persistent neovascular AMD requiring intensive intravitreal aflibercept monotherapy through week 56”
- Zakri R, Patel N “Analysis of foveal angle after successful VMT detachment”



(Above left: Raphaella De Bousies – participant in the EuPatch study – having her visual assessment with PI Hilary Webb



Above right: Jacqui Baldwin, participant in the STAR study)



(Above: Nikolaos Kopsachilis (right) and Mohamed Elanwar, PI and co-PI for the IKERVIS study)

## **Stroke: Dr David Hargroves, Dr Gunaratnam Gunathilagan, Tracey Cosier & colleagues**

EKHUFT was once again the top recruiting trust for Stroke Research within Kent, Surrey & Sussex for 2017-18. We conducted various commercial and non-commercial studies on both the QEQMH and the WHH sites, incorporating stroke prevention, treatment, imaging and genetics. We also embarked on our first collaborative study with Kent Community Trust, RETAKE, which has resulted in us recruiting new PIs from our stroke rehabilitation therapy teams at both sites.

In 2017-2018 the stroke research team expanded, and we welcomed a new band 6 clinical studies officer, Natasha Schumacher to the WHH team. Natasha is piloting a new joint role in which she supports both the stroke and the multi-speciality research team, encompassing R&I's vision of collaborative working.

The stroke research team worked hard during 2017-18 to raise the public profile of clinical research within the Trust, to both members of the public, and colleagues alike. At WHH we initiated multi-disciplinary team ward based research sessions, in which we gave overviews of any current and prospective studies, as well as GCP training information & guidance to various colleagues. This had very positive results in that on the back of these sessions we were able to recruit new co-investigators for some of our studies, which in turn had a significant impact on our recruitment levels.

## **Renal (kidney) disease: Dr Tim Doulton, Elizabeth Clarke & colleagues**

This year, our team have faced the challenge of a smaller workforce but have maintained the high standards that we strive for, prioritizing patient safety and ensuring patients have a positive and personalised experience when taking part in research. We have achieved this by timely follow up of patients in all research studies, offering appointments over the seven hospital sites we cover, to minimise travelling for the patient and by ensuring we work closely with the clinical team in charge of their care.

As well as seeing our existing patients who are in follow up, we have recruited 174 new patients to studies this year. The Trust has continuously been the 2<sup>nd</sup> highest recruiter to PAVE study, a double-blind randomised controlled clinical trial to determine the efficacy of paclitaxel-assisted balloon angioplasty of venous stenoses in haemodialysis access. Well done Pam Offord, Dr Neelan Das and the vascular team!

We have enjoyed working with new Principal Investigators in new areas, offering different opportunities for our patients. Overall we have opened seven new studies this year, including successfully recruiting to another industry study – ADVOCATE (a Randomized, Double-Blind, Active-Controlled, Phase 3 Study to Evaluate the Safety and Efficacy of CCX168 (Avacopan) in Patients with Anti-Neutrophil Cytoplasmic Antibody (ANCA)-Associated Vasculitis).

Zara Garratt, our clinical trials administrator, has taken over the management of the ALPHA study, a study of bone alkaline phosphatase in haemodialysis patients, which is led from the Trust and is in now in the follow up phase at 31 sites across the UK. Zara's diligence and hard work has ensured the smooth application and implementation of HRA approved study amendments via the HRA.

The whole team have continued to promote research to the public and to staff. We have continued to maintain a presence at the renal support group and education mornings, as well as running a workshop at

the renal staff Band 6 staff education day. We have taken the opportunity to celebrate national awareness days this year, in the Trust QII Hubs for World Kidney day and in the renal outpatients department for Rare Diseases Day. As well as this, we have benefited from a new pull up poster funded by the Kent Kidney Patient Association (KKPA, see below) to display some of our patients' views of taking part in research. We have also continued to network on social media, where we now have over 300 followers on Twitter.

Elizabeth Clarke has completed her MSc in Applied Health Research at the University of Kent with merit. She has also been involved in the wider promotion of the PIVOTAL study, and was invited to sit as guest on national study advisory board, to represent the research nursing role in PIVOTAL and presented this project to the Anaemia Nurses Specialist Association, ANSA, conference in May 2017 and Kings Hospital Research Meeting in December 2017.

Helen Hobbs presented work arising from her PhD: 'What is the cause of death in patients managed in the community with acute kidney injury?' (EDTA/ERA in Madrid 3-6<sup>th</sup> June 2017 and the UK Kidney Week Liverpool 19-21<sup>st</sup> June 2017).

Being part of the wider research team has been important to us too. Frances Morris led the R&I departments entry into the EKHUFT Pedometer challenge in 2017 – as the 'Road Runner Researchers' – and the team won the award for the furthest distance walked at 7,538,278 steps, 5744 km or 3, 569 miles!



(Above: Our KKPA funded poster [left], other displays and Elizabeth Clarke & Zara Garratt [bottom right])

## **Neonatal medicine: Dr Vimal Vasu & colleagues**

Neonatal clinical research continues to thrive. This is largely due to enthusiasm of parents of babies and our neonatal team. During the last year, the team has successfully recruited patients to NIHR portfolio studies, local research studies and presented abstracts/posters at national conferences. There are now four out of six neonatal consultants who have acted as local PI for NIHR portfolio studies supported by a team of two experienced and dedicated neonatal research nurses (Shermi George & Claire Maloney).

Non NIHR Portfolio work includes 'Consent in neonatal medicine (CoNe) trial. A pilot evaluation of parental and professional views of consent in neonatal medicine.' (CI: Dr V. Vasu). Portfolio studies recruited to include:

- The Enteral Lactoferrin (ELFIN) Trial was a large multi-centre placebo controlled RCT of prophylactic enteral lactoferrin supplementation to prevent late onset invasive infection in very preterm infants. (PI: Dr V. Vasu)
- The Baby OSCAR trial is aiming to find out whether or not a confirmed large patent ductus arteriosus in very premature babies should be treated with ibuprofen within 72 hours of birth. (PI: Dr A. Gupta)
- The SPRING study aims to understand how genetic inheritance and preterm birth work together to influence the prevalence of neurodevelopment disorders. (PI: Dr V. Vasu)
- The OPTI-PREM study aims to improve neonatal service delivery for babies born between 27 and 31 weeks of gestation in England, by providing evidence-based data for the development of national policy, on the optimal place of care for such babies. (PI: Dr S. Mun)

## **Conference Proceedings**

Johnson S, Marseille C, Toussaint P, Hill C, Vasu V, Battersby C. Validation of transcutaneous bilirubinometry as a method to monitor newborn jaundice in a low income country. RCPCH Conference, International Child Health Group, Glasgow (2018). Oral presentation.

Battersby C, Loidl V, Lloyd-Jones R, Toussaint P, Hill C, Vasu V. Implementation of a neonatal minimal dataset in a low income country. RCPCH Conference, International Child Health Group, Glasgow (2018). Poster.

## **Invited lectures**

Vasu V. Documenting sepsis in the neonatal unit. A Challenge for audit and research. National Neonatal Audit Programme Collaborators Meeting, Birmingham, April 2017.

<https://www.youtube.com/watch?v=qPfmGk7SmvQ&feature=youtu.be>

Vasu V. Parental and professional views regarding consent in neonatology. RCPCH Annual conference (Ethics and Law Forum), Birmingham, May 2017

## **Orthodontics: Mr Andrew DiBiase**

Research within the Orthodontic Department continues to concentrate on the effectiveness of new treatment techniques. We completed our multicentre randomised trial on the effectiveness of vibration force on the speed of tooth movement with the final outcome paper being published in the American Journal of Orthodontics and Dentofacial Orthopedics, the highest impact orthodontic journal. It was their cover article for April 2018. We are still recruiting to a multicentre randomised trial on the use of bone anchored maxillary protraction for the early treatment of class III. Other departmental research concentrates on the psychosocial aspects of malocclusion and orthodontics and recruitment has started on a large cross-sectional study looking at the relationship between features of malocclusion, peer relations and susceptibility to being bullied, which hopefully will form part of a PhD thesis. We have also started two new MSc theses looking at relationship between morphological outcomes of treatment and patient satisfaction and how social perceptions change following surgery to address dentofacial deformity. Finally we have set up a course with a professor from Guys to promote the use of evidence to help inform our clinical decisions. There have been two sittings of this and the feedback has been very positive. .

## **Book chapters**

Martyn T. Cobourne, Andrew T. DiBiase, Neil Woodhouse, Spyridon N. Papageorgiou. Myths and Legends: Unravelling the complex associations between vibrational force, tooth movement and pain with fixed appliances. In Anecdote, Expertise and Evidence: Applying new knowledge to everyday orthodontics Kapila SD, Vig KWL, Huang GJ. The University of Michigan Center for Human Growth and Development and the Department of Orthodontics and Pediatric Dentistry 2017

Andrew DiBiase and Paul Jonathan Sandler. Early Treatment of Class II Malocclusion. In Orthodontic Management of the developing Dentition: An Evidence-Based Guide. Cobourne MT. Springer 1<sup>st</sup> edition 2017

## **Oral presentations**

Angle Society of Europe January 2017

Edinburgh Orthodontic Study Group, April 2017

Evidence Based Orthodontic courses run December 2017 and April 2018, London



## **Neuro-rehabilitation: Dr Mohamed Sakel & Karen Saunders**

This was a successful year for a diverse neuro-rehabilitation research programme. We completed RAPPER 3, a clinical robotic balance interventional trial for people diagnosed with multiple sclerosis (MS). The study results have been accepted for presentation in the ACRM Dallas Annual conference and we have also secured support for the next stage RAPPER 4 clinical trial starting in summer 2018. Our consultant research fellow, Karen Saunders, received an award in April from R&I for her contribution to research. Karen is also working with Dr Sakel, who is Principal Investigator for two large EU-funded projects ADAPT & EDUCAT. This year we completed ASPIRE (multi-national project on spasticity and Botox). Dr Sakel expects several publications from this largest ever real-life data gathering project on this clinically relevant topic. Collaborative projects on traumatic brain injury in civilian and military contexts were also completed. Neuromodulation study on Parkinson's disease completed and published. Caloric Vestibular Stimulation (CVS in Neuromodulation) is recruiting fast for ongoing Parkinson's plus syndrome.

Karen has made several invited presentations this year (see below) and has just completed a nine month mentorship program supporting a physiotherapy colleague on the HEE/ NIHR Integrated Clinical Academic Programme. Over the year, we have further consolidated partnerships with three patient charities: Kent Brain Injury Forum, Sir William Beveridge Foundation and Kent MS Therapy Centre.

### **Conference Proceedings**

International Society of Physical and Rehabilitation Medicine Conference (Argentina, 30<sup>th</sup> April – 4<sup>th</sup> May, 2017):

Karen presented an invited E-poster of her clinical case report entitled "Case report to identify effective neuro-physiotherapy treatment of spasticity post-stroke focused on patient centred goals, carer support and use of botulinum toxin". Eposter: RAPPER multinational trial on safety & efficacy of Rex Bionic in spinal injury.

10th World Congress for Neuro-rehabilitation, (Mumbai, India , 7-10<sup>th</sup> February 2018):

Three presentations given by Dr Sakel:

- Sub-sensory galvanic vestibular stimulation can provide long-term relief from hemi-spatial neglect (Oral Presentation)
- Repeated sessions of caloric vestibular stimulation reduce the frequency and severity of episodic migraine (Oral Presentation)
- Robotics in Neuro-rehabilitation (Keynote lecture)

Armed Forces Medical College (Dhaka, Bangladesh, February 2018):

Dr Sakel presented invited lecture on clinical robotic walking research studies, and Karen presented an individual example of an ethnographic case study, with narrative thread, related to qualitative research.

Selkams Regional Meeting (For health and social care professionals working with people living with MS, Kent, January 2018):

Karen presented invited talk on Rapper clinical research projects.

## Grant awards

ADAPT: Assistive Devices for empowering disAbled People through robotic Technologies.  
Start date: 06/2017. Duration 48 months. Grant amount £7,291,666. Source: Interreg Va France (Channel) England. Principal Investigator (PI) & Co-applicant. 2017-2021.

## Pain management and Anaesthesia: Dr Athmaja Thottungal & Jayanti Rai

*Effectiveness of a brachial plexus superior trunk nerve block and neuromyostimulation for chronic shoulder pain.* Superior trunk neurostimulation and block under ultrasound guidance is a new innovative way to treat chronic shoulder pain which is developed by Dr Athmaja Thottungal, Consultant in Anaesthesia and Pain Management & Trust clinical lead for Pain management. This technique has been used to treat around 75 patients now. Funding from the R&I department through R&I Catalyst in 2017 has enabled me to complete a retrospective analysis of first 49 patients through funding a research assistant, physiotherapist Jayanti Rai. Our data has shown that this technique is providing better longer lasting analgesia and improvement in functionality and Quality of life (QoL) improvement. We believe our novel technique will provide significant benefit to those suffering from shoulder pain due to arthritis, rotator cuff pathology and other aetiologies like stroke, and our preliminary data will assist in the development of a proposal for a future prospective randomised control trial.

In the past year, Jayanti completed two Portfolio studies - MOCAM, UKFROST – and collaborated with Dr. Athmaja Thottungal on a Grey Area Project looking at superior trunk nerve block for chronic shoulder pain. She's also completed an NIHR ICAP2 Fellowship with University of Greenwich, and was runner-up for her oral presentation at NIHR closing ceremony, Brighton (June 2017).

## Grant awards

EKHUFT Research Session Scheme: £3500, 0.1 WTE for 11 months to enable my ongoing involvement in UKFROST & MOCAM studies

NIHR ICAP 1 & 2 University of Greenwich: £6100, Return to work after rotator cuff repair.

## Corporate Clinical Quality: Kim Manley

In my capacity as a joint clinical chair between the Trust and Professor of Practice Development in the England Centre for Practice Development hosted by Canterbury Christ Church University, the following summarises my main contributions to activity within EKHUFT:

- Completion of the Safety Culture, Quality Improvement Realist Evaluation across four acute trusts in the South-East of England funded by the Academic Health Science network. This included EKHUFT and specific recommendations have underpinned the trusts quality strategy. Report: Manley K; Jackson C; McKenzie C; Martin A; Wright T (2017) Safety Culture, Quality Improvement, Realist Evaluation (SCQIRE) Evaluating the impact of the Patient Safety Collaborative initiative developed by Kent Surrey and Sussex Academic Health Science Network (KSSAHSN) on safety culture, leadership, and quality improvement capability. ISBN 978-1-909067-79-0
- Part of the Evaluation team for the CASCADE project introducing a dementia village in Dover and learning from best European practice. Community Areas of Sustainable Care and Dementia Excellence in Europe (CASCADE; Overall funding: €9,295,278) aims to develop a financially sustainable approach to elderly/dementia care that can be replicated across the 2Seas area & potentially further across Europe. Uniquely this will be tested via existing state owned buildings. The facilities created will provide short term respite & longer term care & will fully engage with the local community, and EKHUFT is a key partner in this project.
- Continued implementation of findings from the Transforming urgent and emergency care workforce through the Tiers of Care and STP roll-out across eleven client groups across the health economy.
- Current co-principal investigator with University of West of Scotland: Strengthening Nursing, Midwifery and Allied Health Professional Leadership. Funding: £50k from Burdett Trust (4 countries of the UK). The aim of the project is to identify the processes & indicators that nursing, midwifery and AHP leaders use to impact & embed innovative practices across different contexts (clinical care, environment of care, social care & education) as well as, organisations, communities & multi-professional teams.
- Person, Interaction, Environment (PIE) Project: NIHR-funded research completed and being rolled out across areas in WHH. Led by Ann Skingley, Senior Research Fellow, EKHUFT was the only research site that achieved full implementation across England. See: <https://www.google.co.uk/url?sa=t&rct=j&q=&esrc=s&source=web&cd=1&ved=0ahUKewjiraTR79LbAhXFAMAKHS0WDEYQFggpMAA&url=https%3A%2F%2Fnjl-admin.nihr.ac.uk%2Fdocument%2Fdownload%2F2010932&usg=AOvVaw0t9dE174-vD-b3Oc6fdKw>
- Our 'Singing for Health' feasibility study has been completed and we are now rolling out across other sites with Louise Ross as PI with support from Ann Skingley.

## Grant awards

£50k from the Burdett Trust for Realist Evaluation and Appreciative Inquiry into Nursing, Midwifery and AHP leadership in every context

## Higher degree supervision

- On-going Doctoral supervision: Helen Stanley - using realist evaluation to identify what works in the trusts' clinical leadership programme; Ian Spink - Realist evaluation: Optimising person-centred music therapy in the content of long-term NHS Care
- On-going support through a community of practice and 1:1 supervision for senior clinicians working on a PhD by publication using participatory approaches. Four have imminent final versions of their first publication linked to: (1) assessing readiness to implement best practice in maternity services; (2) advanced practice concepts across all disciplines; (3) the concept of clinical systems leadership across acute medical care; (4) meal times in an acute hospital setting
- Completed Doctoral supervision: Claire Thurgate, Director, Centre for Work-Based Learning and Continuing Development, has completed her doctoral studies. Claire has used a phenomenological approach to develop a framework that describes the enabling factors, attributes and consequences of effective pathways for supporting the development of associate practitioners using the workplace as the main resource for learning for transition into a new role within the same workplace
- Completed Masters supervision: Erin Toner (Ward Leader, WHH) - Appreciative Ward Culture; Ruth Leonard (Learning and Development Facilitator, Theatres, QEQM) – Staff Wellbeing

## Key Notes

Manley, K., Keynote Speaker. Ambulatory Emergency Care Developing an Integrated Approach to Ambulatory Care through the Tiers of Practice Model (Professor Kim Manley The 11th International Scientific Conference, The Society for Acute Medicine International Convention Centre (ICC) Birmingham (11-12<sup>th</sup> September 2017).

Manley, K., Keynote Speaker. Working Together to Enhance Patient Safety (4-5<sup>th</sup> September 2017) British Association of Critical Care Nurses 32<sup>nd</sup> Annual Conference Park Plaza Riverbank, London.

Manley, K., Keynote Speaker. Leadership and Working across Organisational Boundaries. Nursing in Kent and Medway Conference (22<sup>nd</sup> June 2017).

## Research Symposia

Manley, K., Jackson, C., McKenzie, C., Martin, A., Wright, T. (2018) Using participatory, practice development, Delphi and realist research approaches to understand how frontline teams can use the workplace to integrate learning, development, improvement and innovation. Symposium. Royal College of Nursing International Research Conference, 17-19 April, Birmingham

Manley, K., Jackson, C., McKenzie, C., Martin, A., Wright, T. (2018) Using participatory, practice development, Delphi and realist research approaches to understand how frontline teams can use the workplace to integrate learning, development, improvement and innovation. Symposium. STTI 4th Biennial European Conference, 4-6 June, Cambridge.

## **Workshop Facilitation**

Manley, K. and Jackson, C. Practice Learning Is Everybody's Business –Facilitating in the Moment of Practice Workshop with Education Partners across Kent and Medway, Augustin Hall, Canterbury, 7th July 2017.

Manley, K. and Jackson, C. How can Practice Development Help Organisations Deliver Person Centered Safe and Effective Care? Aspiring Deputy Directors of Nursing, London South Bank University for NHS Improvement. June 2017.

Manley, K. O'Connor S. (2017) Practice Development and Implementation Science. University of Applied Sciences, Hochschule Osnabrück, May 12th.

Manley, K. and Jackson, C. Co Creating the Development of a Personal Leadership Impact Framework for GPs, 12th September 2017 Health Education England (HEEKSS PG Cert GP Leadership Programme), London

## **Community & Acute Joint Research Nurse Post: Nikki Crisp**

This innovative joint working role has been developed from collaboration between East Kent Hospitals University Foundation Trust and Kent Community Health Foundation Trust. Strong links have been established between research delivery and clinical teams, in acute and community organisations, along the patient care pathway. This has led to the identification of several NIHR portfolio studies which would fit with the collaborative delivery model and are currently in development:

MIDFUT – Multiple Interventions for Diabetic Foot Ulcer Treatment Trial (EKHUFT & KCHFT)

RETAKE - RETurn to work After stroke (EKHUFT & KCHFT)

Challenge-UK - A UK Cohort of the Colon Health And LifeLong Exercise Change trial (EKHUFT & CCCU)

MePFAC - Methylphenidate versus Placebo for Fatigue in Advanced Cancer (EKHUFT & Pilgrim's Hospice)

## **Conference Proceedings**

Poster presentation at Annual R&D Forum 2017 - *Working Together To Deliver Research That Follows The Patient Journey*

The role was also included as a case study in the report published by the Royal College of Physicians - *Research for all: Sharing good practice in research management (2017, p.10)*.

## 6. Peer-reviewed publications from April 2017 to March 2018<sup>3</sup>

1. Abdulla S, Lynes K, Nagendram S, Akhtar M. Amyand's hernia managed with open repair and laparoscopic appendectomy. *J Surg Case Rep*. 2017 Nov 28;2017(11):rjx223. doi: 10.1093/jscr/rjx223. eCollection 2017 Nov.
2. Abrahamson V, Jensen J, Springett K, Sakel M. Experiences of patients with traumatic brain injury and their carers during transition from in-patient rehabilitation to the community: a qualitative study. *Disabil Rehabil*. 2017 Aug;39(17):1683-1694. doi: 10.1080/09638288.2016.1211755. Epub 2016 Aug 24.
3. Aggarwal K, Sherwin JC, Zia R. Are we overestimating intraocular pressure in overweight patients? *Clin Exp Ophthalmol*. 2018 Apr;46(3):303-305. doi: 10.1111/ceo.13032. Epub 2017 Aug 25. No abstract available.
4. Ahmad E, Hafeez K, Arshad MF, Isuga J, Vrettos A. Hypothyroidism conversion to hyperthyroidism: it's never too late. *Endocrinol Diabetes Metab Case Rep*. 2018 Aug 3;2018. pii: 18-0047. doi: 10.1530/EDM-18-0047. eCollection 2018.
5. Aikoye AA, Khushal A, Parkin C, Bates T. Laparoscopic colectomy in a district hospital: the single surgeon can be safe. *Acta Chir Belg*. 2017 Aug;117(4):216-222. doi: 10.1080/00015458.2017.1284422. Epub 2017 Feb 7.
6. Athar MS, Ashwood N, Arealis G, Hamlet M, Salt E. Acromioclavicular joint disruptions: A comparison of two surgical approaches 'hook' and 'rope'. *J Orthop Surg (Hong Kong)*. 2018 Jan-Apr;26(1):2309499017749984. doi: 10.1177/2309499017749984.
7. Bhamra JS, Dhinsa BS, Patel S, Davies C, Oliver M. Does a dedicated orthopaedic day surgery list improve delivery of trauma services? *J Perioper Pract*. 2017 Nov;27(11):263-267.
8. Birch N, Graham J, Priestley T, Heywood C, Sakel M, Gall A, Nunn A, Signal N. Results of the first interim analysis of the RAPPER II trial in patients with spinal cord injury: ambulation and functional exercise programs in the REX powered walking aid. *J Neuroeng Rehabil*. 2017 Jun 19;14(1):60. doi: 10.1186/s12984-017-0274-6.
9. Bitmead J, Oliver G. A safe procedure: best practice for intravenous peripheral cannulation. *Br J Nurs*. 2018 Feb 1;27(Sup2):S1-S8. doi: 10.12968/bjon.2018.27.Sup2.S1. No abstract available.
10. Björk J, Bäck SE, Ebert N, Evans M, Grubb A, Hansson M, Jones I, Lamb EJ, Martus P, Schaeffner E, Sjöström P, Nyman U GFR estimation based on standardized creatinine and cystatin C: a European multicenter analysis in older adults. *Clin Chem Lab Med*. 2018 Feb 23;56(3):422-435. doi: 10.1515/cclm-2017-0563.

---

<sup>3</sup> Articles appearing in peer-reviewed publications are identified through two sources: firstly, by PubMed search using search term (((((((((Queen Elizabeth the Queen Mother Hospital[Affiliation]) OR William Harvey Hospital[Affiliation]) OR Kent and Canterbury Hospital[Affiliation]) OR East Kent University[Affiliation]) OR East Kent University NHS[Affiliation]) OR East Kent University Hospital[Affiliation]) OR East Kent University Hospitals[Affiliation]) OR East Kent Hospital) OR East Kent Hospitals)) AND ("2017/04/01"[Date - Publication] : "2018/03/31"[Date - Publication]), following which each abstract is manually checked for at least one EKHUFT author affiliation; secondly, through contributors to this report self-identifying publications attributable to themselves.

11. Bland JDP. Hydrodissection for treatment of carpal tunnel syndrome. *Muscle Nerve*. 2018 Jan;57(1):4-5. doi: 10.1002/mus.25759. Epub 2017 Aug 21. No abstract available.
12. Bland JDP, Fowler JR. Nerve Conduction Studies for Carpal Tunnel Syndrome: Gold Standard or Unnecessary Evil? *Orthopedics* 2017;40(3):141-42. doi: 10.3928/01477447-20170419-01
13. Boshnaq M, Phan YC, Martini I, Harilingam M, Akhtar M, Tsavellas G. Limberg flap in management of pilonidal sinus disease: systematic review and a local experience. *Acta Chir Belg*. 2018 Apr;118(2):78-84. doi: 10.1080/00015458.2018.1430218. Epub 2018 Feb 1.
14. Boshnaq MH, Merali N, El Abbassy IH, Eldesouky SA, Rabie MA. Financial Burden Secondary to Delay in Cholecystectomy Following Mild Biliary Pancreatitis. *J Invest Surg*. 2017 Jun;30(3):170-176. doi: 10.1080/08941939.2016.1231857. Epub 2016 Sep 30.
15. Brierley CA, DiBiase A, Sandler PJ. Early Class II treatment. *Aust Dent J*. 2017 Mar;62 Suppl 1:4-10.
16. Brimiouille M, Al-Lami A, Marzouk S, Emerson H, Balfour A, Dhar V, Nixon IJ. Ensuring patient safety when implementing a new diagnostic pathway for thyroid nodules. *Ann R Coll Surg Engl*. 2018 May;100(5):366-370. doi: 10.1308/rcsann.2018.0031. Epub 2018 Mar 15.
17. Caine EA, Newman TH, Marzouk O, Lynes K, Akhtar M. Subacute bowel obstruction secondary to an obturator hernia: case report and a review of the literature. *J Surg Case Rep*. 2017 Apr 21;2017(4):rjx061. doi: 10.1093/jscr/rjx061. eCollection 2017 Apr.
18. Ceccarelli D, Hargroves D, Balogun I, Webb T. Hypertensive encephalopathy mimicking cerebral vasculitis with pontine oedema, cerebellar white matter lesions and multiple cerebral infarctions. *BMJ Case Rep*. 2017 Jul 19;2017. pii: bcr-2016-218155. doi: 10.1136/bcr-2016-218155.
19. Chitambira B, McConaghy C. Use of optokinetics based OKCSIB protocol in restoring mobility in primary progressive MS. *BMJ Case Rep*. 2017 Oct 4;2017. pii: bcr-2017-220384. doi: 10.1136/bcr-2017-220384.
20. Clark RE, Polydoros F, Apperley JF, Milojkovic D, Pocock C, Smith G, Byrne JL, de Lavallade H, O'Brien SG, Coffey T, Foroni L, Copland M. De-escalation of tyrosine kinase inhibitor dose in patients with chronic myeloid leukaemia with stable major molecular response (DESTINY): an interim analysis of a non-randomised, phase 2 trial. *Lancet Haematol*. 2017 Jul;4(7):e310-e316. doi: 10.1016/S2352-3026(17)30066-2. Epub 2017 May 26.
21. Collins-Sawaragi YC, Jain K. How to use... Hip examination and ultrasound in newborns. *Arch Dis Child Educ Pract Ed*. 2018 Feb;103(1):34-40. doi: 10.1136/archdischild-2014-307942. Epub 2017 Oct 12.
22. Coltart GS, Irvine C. Skin Failure. *Skinmed*. 2018 Jun 1;16(3):155-158. eCollection 2018. No abstract available.
23. Davenport A, Sheikh MF, Lamb E, Agarwal B, Jalan R. Acute kidney injury in acute-on-chronic liver failure: where does hepatorenal syndrome fit? *Kidney Int*. 2017 Nov;92(5):1058-1070. doi: 10.1016/j.kint.2017.04.048. Epub 2017 Aug 23. Review.
24. Davies M, Allen M, Bentley A, Bourke SC, Creagh-Brown B, D'Oliveiro R, Glossop A, Gray A, Jacobs P, Mahadeva R, Moses R, Setchfield I. British Thoracic Society Quality Standards for acute non-invasive

ventilation in adults. *BMJ Open Respir Res.* 2018 Apr 5;5(1):e000283. doi: 10.1136/bmjresp-2018-000283. eCollection 2018.

25. Dhinsa BS, Hussain L, Singh S. The management of dorsal peroneal nerve compression in the midfoot. *Foot (Edinb).* 2018 Jun;35:1-4. doi: 10.1016/j.foot.2017.12.005. Epub 2017 Dec 28.
26. Dhutia H, Malhotra A, Yeo TJ, Ster IC, Gabus V, Steriotis A, Dores H, Mellor G, García-Corrales C, Ensam B, Jayalapan V, Ezzat VA, Finocchiaro G, Gati S, Papadakis M, Tome-Esteban M, Sharma S. Inter-Rater Reliability and Downstream Financial Implications of Electrocardiography Screening in Young Athletes. *Circ Cardiovasc Qual Outcomes.* 2017 Aug;10(8):e003306. doi: 10.1161/CIRCOUTCOMES.116.003306.
27. DiBiase A. Orthognathic surgery: principles, planning and practice. *J Orthod.* 2017 Jun;44(2):145. doi: 10.1080/14653125.2017.1322340. No abstract available.
28. DiBiase AT, Papageorgiou SN, Cobourne MT Vibrationen und Kieferorthopädie. *Informationen aus Orthodontie & Kieferorthopädie* 49(02):153-156 · June 2017
29. DiBiase AT, Woodhouse NR, Papageorgiou SN, Johnson N, Slipper C, Grant J, Alsaleh M, Khaja Y, Cobourne MT. Effects of supplemental vibrational force on space closure, treatment duration and occlusal outcome: a multicentre randomized clinical trial. *Am J Orthod Dentofacial Orthop* 2018;153:469-80.
30. Duhovic C, Reckling C. Detecting photoallergic contact dermatitis with patch testing and daylight. *Contact Dermatitis.* 2018 Jan;78(1):85-86. doi: 10.1111/cod.12759. No abstract available.
31. Edwards AE, Bowsher GM, Deepak S, Ali M. Improving local anaesthetic systemic toxicity (LAST) awareness in maternity care using tailored educational tools. *BMJ Open Qual.* 2018 Apr 17;7(2):e000070. doi: 10.1136/bmjopen-2017-000070. eCollection 2018.
32. Emmett M, Gildea C, Nordin A, Hirschowitz L, Poole J. Cervical cancer - does the morphological subtype affect survival rates? *J Obstet Gynaecol.* 2018 May;38(4):548-555. doi: 10.1080/01443615.2017.1379062. Epub 2018 Feb 6.
33. Fawzy M, Wong-Morrow WS, Beaumont A, Farmer CKT. Acute kidney injury and critical limb ischaemia associated with the use of the so called "legal high" 3-fluorophenmetrazine. *CEN Case Rep.* 2017 Nov;6(2):152-155. doi: 10.1007/s13730-017-0263-4. Epub 2017 Jul 15.
34. Ferdi A, Kopsachilis N, Parmar D. "Phlyctenulosis: a systemic diagnosis made or missed in the blink of an eye". *Clin Exp Optom.* 2017 May;100(3):285-287. doi: 10.1111/cxo.12474. Epub 2016 Oct 5. PMID: 27704610
35. Gillham M, Pepper M, Kelly S, Howells G. Stakeholder views addressing the development and uptake of powered wheelchair assistive technology. *Disabil Rehabil Assist Technol.* 2017 Dec 14:1-15. doi: 10.1080/17483107.2017.1416186. [Epub ahead of print]
36. Gleeson M, Counsell N, Cunningham D, Chadwick N, Lawrie A, Hawkes EA, McMillan A, Ardeshtna KM, Jack A, Smith P, Mouncey P, Pocock C, Radford JA, Davies J, Turner D, Kruger A, Johnson P, Gambell J, Linch D. Central nervous system relapse of diffuse large B-cell lymphoma in the rituximab era: results of



the UK NCRI R-CHOP-14 versus 21 trial. *Ann Oncol*. 2017 Oct 1;28(10):2511-2516. doi: 10.1093/annonc/mdx353.

37. Gordon NC, Pichon B, Golubchik T, Wilson DJ, Paul J, Blanc DS, Cole K, Collins J, Cortes N, Cubbon M, Gould FK, Jenks PJ, Llewelyn M, Nash JQ, Orendi JM, Paranthaman K, Price JR, Senn L, Thomas HL, Wyllie S, Crook DW, Peto TEA, et al. Whole-Genome Sequencing Reveals the Contribution of Long-Term Carriers in *Staphylococcus aureus* Outbreak Investigation. *J Clin Microbiol*. 2017 Jul;55(7):2188-2197. doi: 10.1128/JCM.00363-17. Epub 2017 May 3.
38. Gulihar A, Shaunak S, Novak PL, Vinayakam P, Dhinsa B, Taylor G. Glucosamine reduces the inhibition of proteoglycan metabolism caused by local anaesthetic solution in human articular cartilage: an in vitro study. *J Exp Orthop*. 2017 Nov 13;4(1):37. doi: 10.1186/s40634-017-0106-4.
39. Hadavi M, Hasannia S, Faghihi S, Mashayekhi F, Homazadeh H, Mostofi SB. Zein nanoparticle as a novel BMP6 derived peptide carrier for enhanced osteogenic differentiation of C2C12 cells. *Artif Cells Nanomed Biotechnol*. 2018 Jan 26:1-9. doi: 10.1080/21691401.2018.1431649. [Epub ahead of print]
40. Hadavi M, Hasannia S, Faghihi S, Mashayekhi F, Zadeh HH, Mostofi SB. Novel calcified gum Arabic porous nano-composite scaffold for bone tissue regeneration. *Biochem Biophys Res Commun*. 2017 Jul 8;488(4):671-678. doi: 10.1016/j.bbrc.2017.03.046. Epub 2017 Mar 14.
41. Haider Z, Syed MA, Saran D. Atraumatic sequential bilateral locking of the knee joints secondary to dislocation of non-discoid lateral menisci without radiological abnormality. *J Clin Orthop Trauma*. 2017 Aug;8(Suppl 1):S26-S28. doi: 10.1016/j.jcot.2017.06.002. Epub 2017 Jun 4.
42. Hainline B, Turner JA, Caneiro JP, Stewart M, Lorimer Moseley G. Pain in elite athletes- neurophysiological, biomechanical and psychosocial considerations: a narrative review. *Br J Sports Med*. 2017 Sep;51(17):1259-1264. doi: 10.1136/bjsports-2017-097890. Review.
43. Hainline B, Derman W, Vernec A, Budgett R, Deie M, Dvořák J, Harle C, Herring SA, McNamee M, Meeuwisse W, Lorimer Moseley G, Omololu B, Orchard J, Pipe A, Pluim BM, Ræder J, Siebert C, Stewart M, Stuart M, Turner JA, Ware M, Zideman D, Engebretsen L. International Olympic Committee consensus statement on pain management in elite athletes. *Br J Sports Med*. 2017 Sep;51(17):1245-1258. doi: 10.1136/bjsports-2017-097884. Erratum in: *Br J Sports Med*. 2018 Jan 3;.
44. Hameso A, Bland JD. Prevalence of decompression surgery in patients with carpal tunnel syndrome 8 years after initial treatment with a local corticosteroid injection. *J Hand Surg Eur Vol* 2017;42(3):275-80. doi: 10.1177/1753193416671102
45. Haque S, Sandler J, Cobourne MT, Bassett P, DiBiase AT. A retrospective study comparing the loss of anchorage following the extraction of maxillary first or second premolars during orthodontic treatment with fixed appliances in adolescent patients. *J Orthod*. 2017 Dec;44(4):268-276. doi: 10.1080/14653125.2017.1333248. Epub 2017 Jun 8.
46. Harilingam M, Sebastian J, Twum-Barima C, Boshnaq M, Mangam S, Khushal A, Marzouk D, Tsavellas G. Patient-related factors influence the risk of developing intestinal stoma complications in early post-operative period. *ANZ J Surg*. 2017 Oct;87(10):E116-E120. doi: 10.1111/ans.13397. Epub 2015 Dec 3.

47. Hassan Serry MY, Rasoul H. Re: An evaluation of medical student-led podcasts: what are the lessons learnt? *Adv Med Educ Pract*. 2018 Jul 4;9:507-508. doi: 10.2147/AMEP.S167218. eCollection 2018. No abstract available.
48. Hegarty E, Campbell C, Grammatopoulos E, DiBiase AT, Sherriff M, Cobourne MT. YouTube™ as an information resource for orthognathic surgery. *J Orthod*. 2017 Jun;44(2):90-96. doi: 10.1080/14653125.2017.1319010. Epub 2017 May 2.
49. Hills AJ, Holden AM, McGurk M. Sialendoscopy-assisted transfacial removal of parotid calculi. *Acta Otorhinolaryngol Ital*. 2017 Apr;37(2):128-131. doi: 10.14639/0392-100X-1602.
50. Hone RWA, Rahman E, Wong G, Annan Y, Alexander V, Al-Lami A, Varadharajan K, Parker M, Simo R, Pitkin L, Mace A, Ofo E, Balfour A, Nixon IJ. Do salivary bypass tubes lower the incidence of pharyngocutaneous fistula following total laryngectomy? A retrospective analysis of predictive factors using multivariate analysis. *Eur Arch Otorhinolaryngol*. 2017 Apr;274(4):1983-1991. doi: 10.1007/s00405-016-4391-9. Epub 2016 Dec 23.
51. Hurt CN, Jones S, Madden TA, Fiander A, Nordin AJ, Naik R, Powell N, Carucci M, Tristram A. Recurrence of vulval intraepithelial neoplasia following treatment with cidofovir or imiquimod: results from a multicentre, randomised, phase II trial (RT3VIN). *BJOG*. 2018 Aug;125(9):1171-1177. doi: 10.1111/1471-0528.15124. Epub 2018 Feb 9.
52. James ND, de Bono JS, Spears MR, Clarke NW, Mason MD, Dearnaley DP, Ritchie AWS, Amos CL, Gilson C, Jones RJ, Matheson D, Millman R, Attard G, Chowdhury S, Cross WR, Gillessen S, Parker CC, Russell JM, Berthold DR, Brawley C, Adab F, Aung S, et al. Abiraterone for Prostate Cancer Not Previously Treated with Hormone Therapy. *N Engl J Med*. 2017 Jul 27;377(4):338-351. doi: 10.1056/NEJMoa1702900. Epub 2017 Jun 3.
53. Jenkins LA, Mauger A, Fisher J, Hopker J. Reliability and Validity of a Self-paced Cardiopulmonary Exercise Test in Post-MI Patients. *Int J Sports Med*. 2017 Apr;38(4):300-306. doi: 10.1055/s-0042-122818. Epub 2017 Feb 20.
54. Johnson P, Griggs C. How lack of physiotherapist out-of-hours led to nurses developing their role: A UK case study. *Int J Orthop Trauma Nurs*. 2018 Feb;28:30-32. doi: 10.1016/j.ijotn.2017.08.002. Epub 2017 Aug 12.
55. Kaile E, Bland JDP. Safety of corticosteroid injection for carpal tunnel syndrome. *J Hand Surg Eur Vol*. 2018 Mar;43(3):296-302. doi: 10.1177/1753193417734426. Epub 2017 Oct 11.
56. Kaleva AI, Hone RW, Tikka T, Al-Lami A, Balfour A, Nixon IJ. Predicting hypocalcaemia post-thyroidectomy: a retrospective audit of results compared to a previously published nomogram in 64 patients treated at a district general hospital. *Clin Otolaryngol*. 2017 Apr;42(2):442-446. doi: 10.1111/coa.12610. Epub 2016 Feb 22. No abstract available.
57. Kallinikas G, Habib H, Tsimiliotis D, Koutsokostas E, Bokor B. Renal cell cancers: unveiling the hereditary ones and saving lives-a tailored diagnostic approach. *Int Urol Nephrol*. 2017 Sep;49(9):1507-1512. doi: 10.1007/s11255-017-1625-8. Epub 2017 May 31. Review.

58. Kapadia FN, Kapoor R, Trivedi M. Interventions affecting mortality in critically ill and perioperative patients: A systematic review of contemporary trials. *J Crit Care*. 2017 Dec;42:206. doi: 10.1016/j.jcrc.2017.07.042. Epub 2017 Jul 25. No abstract available.
59. Kasapidis P, Bassioukas S, Mavrogenis G, Tribonias G, Delis K, Georgopoulos S, Christodoulou D, Emmanouil T, Paraskeva K, Panteris V, Papalois A, Triantafillidis J, Tsiamoulos Z, Fukuhara T, Komeda Y, Kashida H. Experimental gastric endoscopic submucosal dissection: training in a porcine model. *Ann Gastroenterol*. 2017;30(4):446-449. doi: 10.20524/aog.2017.0147. Epub 2017 Apr 12.
60. Kasaven LS, Goumenou A, Adegoke K. Multiorgan failure associated with severe ovarian hyperstimulation syndrome due to inadequate protocol optimisation: a rare but avoidable complication. *BMJ Case Rep*. 2018 Mar 5;2018. pii: bcr-2017-223418. doi: 10.1136/bcr-2017-223418.
61. Kotecha D, Mohamed M, Shantsila E, Popescu BA, Steeds RP. Is echocardiography valid and reproducible in patients with atrial fibrillation? A systematic review. *Europace*. 2017 Sep 1;19(9):1427-1438. doi: 10.1093/europace/eux027. Review.
62. Kühnl A, Cunningham D, Counsell N, Hawkes EA, Qian W, Smith P, Chadwick N, Lawrie A, Mouncey P, Jack A, Pocock C, Ardeshta KM, Radford J, McMillan A, Davies J, Turner D, Kruger A, Johnson PW, Gambell J, Rosenwald A, Ott G, Horn H, Ziepert M, Pfreundschuh M, Linch D. Outcome of elderly patients with diffuse large B-cell lymphoma treated with R-CHOP: results from the UK NCRI R-CHOP14v21 trial with combined analysis of molecular characteristics with the DSHNHL RICOVER-60 trial. *Ann Oncol*. 2017 Jul 1;28(7):1540-1546. doi: 10.1093/annonc/mdx128.
63. Martin A, Manley K. Developing standards for an integrated approach to workplace facilitation for interprofessional teams in health and social care contexts: a Delphi study. *Journal of Interprofessional Care* 2018 Jan;32(1):41-51. doi: 10.1080/13561820.2017.1373080
64. Manley K, Buscher A, Jackson C, Stehling, H, O'Connor S. Overcoming synecdoche: why practice development and quality improvement approaches should be better integrated. Commentary Response to Lavery G (2016) Quality improvement – rival or ally of practice development? *Critical Commentary International Practice Development Journal*,6, (1) (15) May. [www.fons.org/library/journal/volume6-issue1/article15](http://www.fons.org/library/journal/volume6-issue1/article15)
65. Mayo E, Sharma S, Horne J, Yuen HM, Lee A, Gulati A. Squamous cell carcinoma of the pinna: which histological features could be used to predict prognosis? *Br J Oral Maxillofac Surg*. 2017 Jun;55(5):524-529. doi: 10.1016/j.bjoms.2017.02.013. Epub 2017 Mar 29.
66. Muglu J, Casey L, Rather H, Makhija S, Brockbank E, Kokka F, Faruqi A, Singh N, Jeyarajah A. Routine Appendicectomy is Unnecessary in Mucinous Borderline Ovarian Tumors. *Int J Gynecol Pathol*. 2018 Jan;37(1):57-58. doi: 10.1097/PGP.0000000000000372. No abstract available.
67. Munir T, Howard DR, McParland L, Pocock C, Rawstron AC, Hockaday A, Varghese A, Hamblin M, Bloor A, Pettitt A, Fegan C, Blundell J, Gribben JG, Phillips D, Hillmen P. Results of the randomized phase IIB ADMIRE trial of FCR with or without mitoxantrone in previously untreated CLL. *Leukemia*. 2017 Oct;31(10):2085-2093. doi: 10.1038/leu.2017.65. Epub 2017 Apr 20.

68. Nagendram S, Lynes K, Hamade A. A case report on a left sided gallbladder: A rare finding during cholecystectomy. *Int J Surg Case Rep.* 2017 Nov 14;41:398-400. doi: 10.1016/j.ijscr.2017.11.004. eCollection 2017.
69. Newell CP, Martin MJ, Richardson N, Bourdeaux CP. Protective mechanical ventilation in United Kingdom critical care units: A multicentre audit. *J Intensive Care Soc.* 2017 May;18(2):106-112. doi: 10.1177/1751143716683712. Epub 2016 Dec 19.
70. Newman TH, Caine EA, Lynes K, Sebastian J. An uncommon right iliac fossa mass in an older woman. *BMJ.* 2017 Jul 27;358:j3279. doi: 10.1136/bmj.j3279. No abstract available.
71. Oberguggenberger AS, Nagele E, Inwald EC, Tomaszewski K, Lanceley A, Nordin A, Creutzberg CL, Kuljanic K, Kardamakis D, Schmalz C, Arraras J, Costantini A, Almont T, Wei-Chu C, Dehandschutter S, Winters Z, Greimel E; EORTC Quality of Life Group.. Phase 1-3 of the cross-cultural development of an EORTC questionnaire for the assessment of sexual health in cancer patients: the EORTC SHQ-22. *Cancer Med.* 2018 Mar;7(3):635-645. doi: 10.1002/cam4.1338. Epub 2018 Feb 13.
72. Oliver G. What's your proof? *Br J Nurs.* 2018 Jan 25;27(2):S3. doi: 10.12968/bjon.2018.27.2.S3. No abstract available.
73. Patel P, Rebollo-Mesa I, Ryan E, Sinha MD, Marks SD, Banga N, Macdougall IC, Webb MC, Koffman G, Olsburgh J. Prophylactic Ureteric Stents in Renal Transplant Recipients: A Multicenter Randomized Controlled Trial of Early Versus Late Removal. *Am J Transplant.* 2017 Aug;17(8):2129-2138. doi: 10.1111/ajt.14223. Epub 2017 Mar 17.
74. Pottel H, Dubourg L, Schaeffner E, Eriksen BO, Melsom T, Lamb EJ, Rule AD, Turner ST, Glassock RJ, De Souza V, Selistre L, Goffin K, Pauwels S, Mariat C, Flamant M, Bevc S, Delanaye P, Ebert N. Data on the relation between renal biomarkers and measured glomerular filtration rate. *Data Brief.* 2017 Sep 1;14:763-772. doi: 10.1016/j.dib.2017.08.034. eCollection 2017 Oct.
75. Pottel H, Dubourg L, Schaeffner E, Eriksen BO, Melsom T, Lamb EJ, Rule AD, Turner ST, Glassock RJ, De Souza V, Selistre L, Goffin K, Pauwels S, Mariat C, Flamant M, Bevc S, Delanaye P, Ebert N. The diagnostic value of rescaled renal biomarkers serum creatinine and serum cystatin C and their relation with measured glomerular filtration rate. *Clin Chim Acta.* 2017 Aug;471:164-170. doi: 10.1016/j.cca.2017.06.005. Epub 2017 Jun 7.
76. Rabie MA, Godavitarne C. A wandering folded liver displaced by the distended bowel: a new case report with review of the literature. *Acta Chir Belg.* 2017 Oct;117(5):319-323. doi: 10.1080/00015458.2016.1272252. Epub 2017 Jan 3. Review.
77. Rhind JH, Gulihar A, Smith A. Trans-triquetral Perilunate fracture dislocation. *Trauma Case Rep.* 2018 Feb 1;14:27-30. doi: 10.1016/j.tcr.2018.01.003. eCollection 2018 Apr.
78. Rolls S, Rajan S, Shah A, Bourke JF, Chowdhury MM, Ghaffar SA, Green C, Johnston GA, Orton DI, Reckling C, Stone NM, Wilkinson SM, Buckley DA. (Meth)acrylate allergy: frequently missed? *Br J Dermatol.* 2018 Apr;178(4):980-981. doi: 10.1111/bjd.16402. Epub 2018 Mar 10. No abstract available.
79. Samuel M, Selway R. Newer epilepsy surgeries. *J Neurol Neurosurg Psychiatry.* 2017 Apr;88(4):282. doi: 10.1136/jnnp-2016-314413. Epub 2016 Dec 30. No abstract available.

80. Singh A, Zarei-Ghanavati M, Avadhanam V, Liu C. Systematic Review and Meta-Analysis of Clinical Outcomes of Descemet Membrane Endothelial Keratoplasty Versus Descemet Stripping Endothelial Keratoplasty/Descemet Stripping Automated Endothelial Keratoplasty. *Cornea*. 2017 Nov;36(11):1437-1443. doi: 10.1097/ICO.0000000000001320. Review.
81. Singh S, Reddy S, Shrivastava R. Erratum to: Does laminar airflow make a difference to the infection rates for lower limb arthroplasty: a study using the National Joint Registry and local surgical site infection data for two hospitals with and without laminar airflow. *Eur J Orthop Surg Traumatol*. 2017 Jul;27(5):711. doi: 10.1007/s00590-016-1875-7. No abstract available.
82. Sonoo M, Menkes DL, Bland JDP, Burke D. Nerve conduction studies and EMG in carpal tunnel syndrome: Do they add value? *Clin Neurophysiol Pract*. 2018 Apr 5;3:78-88. doi: 10.1016/j.cnp.2018.02.005. eCollection 2018. Review.
83. Steele K, Hall A, Nash R, Lingam RK, Singh A. How I Do It: Examining the value of an otology multidisciplinary team meeting. *Laryngoscope*. 2018 Jan 13. doi: 10.1002/lary.27079. [Epub ahead of print] No abstract available.
84. Stephensen D, Classey S, Harbidge H, Patel V, Taylor S, Wells A. Physiotherapist inter-rater reliability of the Haemophilia Early Arthropathy Detection with Ultrasound protocol. *Haemophilia*. 2018 May;24(3):471-476. doi: 10.1111/hae.13440. Epub 2018 Mar 1.
85. Stephensen D, Hashem F, Corbett K, Bates A, George M, Hobbs RP, Hopkins M, Hutchins I, Lowery DP, Pellatt-Higgins T, Stavropoulou C, Swaine I, Tomlinson L, Woodward H, Ali H. Effects of preoperative and postoperative resistance exercise interventions on recovery of physical function in patients undergoing abdominal surgery for cancer: a systematic review of randomised controlled trials. *BMJ Open Sport Exerc Med*. 2018 Apr 25;4(1):e000331. doi: 10.1136/bmjsem-2017-000331. eCollection 2018.
86. Tekeli KM, Altman K. Longstanding unilateral dislocation of the temporomandibular joint in a 6-year-old girl. *J Surg Case Rep*. 2017 Oct 7;2017(10):rjx187. doi: 10.1093/jscr/rjx187. eCollection 2017 Oct.
87. Tekeli KM, McKenzie J, Goodger NM, Hendy CW. Transplant-related experience in pharyngo-oesophageal reconstruction: use of organ preservation techniques to improve ischaemic tolerance in free jejunal flaps. *Br J Oral Maxillofac Surg*. 2017 Apr;55(3):287-289. doi: 10.1016/j.bjoms.2016.07.023. Epub 2016 Aug 9.
88. Thachil J, Bagot C, Bradbury C, Cooper N, Lester W, Grainger JD, Lowe G, Evans G, Talks K, Sibson K, Garg M, Murphy MF, Watson HG, Bolton-Maggs PHB, Watson S, Scully M, Provan D, Newland A, Hill QA. A United Kingdom Immune Thrombocytopenia (ITP) Forum review of practice: thrombopoietin receptor agonists. *Br J Haematol*. 2018 Feb;180(4):591-594. doi: 10.1111/bjh.14395. Epub 2016 Nov 23. No abstract available.
89. Thomson C. Spinal cord compression secondary to epidural abscess: the importance of prompt diagnosis and management. *BMJ Case Rep*. 2018 Feb 7;2018. pii: bcr-2017-220694. doi: 10.1136/bcr-2017-220694.

90. Tsatsos M, Athanasiadis I, Kopsachilis N, Krishnan R, Hossain P, Anderson D. (2017) "Comparison of the Endosaver with noninjector techniques in Descemet's stripping endothelial keratoplasty". *Indian J Ophthalmol*. 2017 Nov;65(11):1133-1137. doi: 10.4103/ijo.IJO\_360\_17. PMID: 29133638
91. Tsiamoulos ZP, Misra R, Rameshshanker R, Elliott TR, Beintaris I, Thomas-Gibson S, Haycock A, Suzuki N, Rees C, Saunders BP. Impact of a new distal attachment on colonoscopy performance in an academic screening center. *Gastrointest Endosc*. 2018 Jan;87(1):280-287. doi: 10.1016/j.gie.2017.04.001. Epub 2017 Apr 13.
92. Tudose A, Hogg FR, Bland JD, et al. Electrophysiological/sonographic mapping of the superficial peroneal nerve to facilitate biopsy under local anaesthesia. *Br J Neurosurg* 2017;31(2):264-65. doi: 10.1080/02688697.2016.1244256
93. Van Bruwaene S, Namdarian B, Challacombe B, Eddy B, Billiet I. Introducing new technology safely into urological practice. *World J Urol*. 2018 Apr;36(4):543-548. doi: 10.1007/s00345-018-2173-2. Epub 2018 Jan 11.
94. Vanzan S, Wilkinson D, Ferguson H, Pullicino P, Sakel M. Behavioural improvement in a minimally conscious state after caloric vestibular stimulation: evidence from two single case studies. *Clin Rehabil*. 2017 Apr;31(4):500-507. doi: 10.1177/0269215516646167. Epub 2016 Jul 10.
95. Vasu V. Pilot evaluation of parental and professional views regarding consent in neonatal medicine by telephone interviews and questionnaires. *BMJ Paediatr Open*. 2017 Nov 1;1(1):e000128. doi: 10.1136/bmjpo-2017-000128. eCollection 2017.
96. Vasu V, Turner KJ, George S, Greenall J, Slijepcevic P, Griffin DK. Preterm infants have significantly longer telomeres than their term born counterparts. *PLoS One*. 2017 Jun 28;12(6):e0180082. doi: 10.1371/journal.pone.0180082. eCollection 2017.
97. Vrettos A, Mota P, Nash J, Thorp I, Baghai M, Baghai M. Pneumococcal pulmonary valve endocarditis. *Echo Res Pract*. 2017 Jun 20. pii: ERP-17-0026. doi: 10.1530/ERP-17-0026. [Epub ahead of print]
98. Waugh J, Hooper R, Lamb E, Robson S, Shennan A, Milne F, Price C, Thangaratinam S, Berdunov V, Bingham J. Spot protein-creatinine ratio and spot albumin-creatinine ratio in the assessment of pre-eclampsia: a diagnostic accuracy study with decision-analytic model-based economic evaluation and acceptability analysis. *Health Technol Assess*. 2017 Oct;21(61):1-90. doi: 10.3310/hta21610. Review.
99. Wilkinson D, Ade KK, Rogers LL, Attix DK, Kuchibhatla M, Slade MD, Smith LL, Poynter KP, Laskowitz DT, Freeman MC, Hoffer ME, Saper JR, Scott DL, Sakel M, Calhoun AH, Black RD. Preventing Episodic Migraine With Caloric Vestibular Stimulation: A Randomized Controlled Trial. *Headache*. 2017 Jul;57(7):1065-1087. doi: 10.1111/head.13120. Epub 2017 Jun 27.
100. Williamson M, Sehjal R, Jones M, James C, Smith A. How critical cost analysis can save money in today's NHS: a review of carpal tunnel surgery in a district general hospital. *BMJ Open Qual*. 2018 Jun 4;7(2):e000115. doi: 10.1136/bmjog-2017-000115. eCollection 2018.
101. Wlodek C, Penfold CM, Bourke JF, Chowdhury MMU, Cooper SM, Ghaffar S, Green C, Holden CR, Johnston GA, Mughal AA, Reckling C, Sabroe RA, Stone NM, Thompson D, Wilkinson SM, Buckley DA. Recommendation to test limonene hydroperoxides 0.3% and linalool hydroperoxides 1.0% in the British

baseline patch test series. *Br J Dermatol*. 2017 Dec;177(6):1708-1715. doi: 10.1111/bjd.15648. Epub 2017 Nov 16.

102. Yang Y, Downey L, Mehta H, Mushtaq B, Narendran N, Patel N, Patel PJ, Ayan F, Gibson K, Igwe F, Jeffery P. Resource Use and Real-World Outcomes for Ranibizumab Treat and Extend for Neovascular Age-Related Macular Degeneration in the UK: Interim Results from TERRA. *Ophthalmol Ther*. 2017 Jun;6(1):175-186. doi: 10.1007/s40123-017-0091-9. Epub 2017 May 15.
103. Zarkali A, Cousins O, Athauda D, Moses S, Moran N, Harikrishnan S. Glial fibrillary acidic protein antibody-positive meningoencephalomyelitis. *Pract Neurol*. 2018 Aug;18(4):315-319. doi: 10.1136/practneurol-2017-001863. Epub 2018 Feb 9.

## Appendix: Financial report - April 2017 to March 2018

### CRN: KSS – 2017 - 2018

The tabulation below reflects the notified baseline allocation for the CRN: KSS contract for the financial year 2017 – 2018.

Annual Allocation £000's	Pay	Vacancy Factor	Total Pay	Non pay	Host Fees	Total	%
Nursing	559	(24)	535	10	32	577	51%
AC Support	276	(10)	266	4	13	284	25%
Pharmacy	212	(9)	203	4	11	218	19%
sub-total	1047	(42)	1004	18	56	1079	
Radiology				23		23	2%
Pathology				20		20	2%
<b>Total Core Funding</b>	<b>1047</b>	<b>(42)</b>	<b>1004</b>	<b>61</b>	<b>56</b>	<b>1122</b>	<b>100%</b>
Specialty Leads	15		15			15	
In-year funding	7		7			7	
<b>Total Additional Funding</b>	<b>22</b>		<b>22</b>			<b>22</b>	
In-year adjustment							
<b>Overall CRN:KSS Allocation</b>	<b>1069</b>	<b>(42)</b>	<b>1027</b>	<b>61</b>	<b>56</b>	<b>1144</b>	

### CRN: KSS Financial Position

The financial position to Month 12 reports a break-even position year to date

Annual Allocation £000's	Annual Budget	Budget YTD	Actual YTD	Var YTD
Nursing	559	559	559	()
AC Support	276	276	273	3
Pharmacy	212	212	181	31
Vacancy factor	(42)	(42)		(42)
sub-total Pay	1004	1004	1013	(9)
Non Pay	18	18	18	
Host Fees	56	56	56	
sub-total Other	74	74	74	
Radiology	23	23	16	7
Pathology	20	20	19	1
sub-total SSDs	44	44	35	8
<b>Total Core Funding</b>	<b>1122</b>	<b>1122</b>	<b>1123</b>	<b>(1)</b>
Specialty Leads	15	15	15	
In-year funding	7	7	7	1
<b>Total Additional Funding</b>	<b>22</b>	<b>22</b>	<b>22</b>	<b>1</b>
In-year adjustment				
<b>Overall CRN Allocation</b>	<b>1144</b>	<b>1144</b>	<b>1144</b>	

Cumulative variance as a % of gross budget

0.02%



## Other Income/Direct Receipts (Non-CRN:KSS)

A comparison between financial years for Q1 – Q4 is illustrated below:

£000's	Yr 2016 - 2017					Yr 2017 - 2018					Diff
	Q1	Q2	Q3	Q4	Total	Q1	Q2	Q3	Q4	Total	
Source											
Research Capability Funding	(17)	(17)	(17)	(17)	(69)	(24)	(24)	(24)	(24)	(96)	(28)
NIHR Projects	(130)	(81)	(64)	(64)	(338)	(116)	(113)	(124)	(124)	(476)	(138)
MRC/Other/Non-industry	(26)	(49)	(22)	(22)	(120)	(30)	(130)	(32)	(49)	(241)	(121)
Industry	(188)	(491)	(184)	(158)	(1022)	(187)	(193)	(237)	(120)	(737)	285
Total	(362)	(639)	(287)	(261)	(1548)	(356)	(460)	(416)	(317)	(1550)	(2)

Total Other Income receipts for Yr 2017 -2018 are on par compared to the previous financial year. A significant reduction in Industry derived income has been offset by increased receipts in all other areas.

Income derived from Industry sources for Yr 2017 -2018 can be broken down as follows:

£000's	Yr 2017 - 2018			
	Patient Activity etc	Drugs	Total	%
Source				
Clinical Haematology	(445)	(30)	(475)	64%
Ophthalmology	(41)	()	(42)	6%
Stroke	(31)		(31)	4%
Clinical Oncology	(30)	(18)	(48)	7%
Dermatology	(12)	(1)	(14)	2%
Neuro Rehab	(33)		(33)	4%
ENT	(24)	(2)	(25)	3%
Other	(66)	(4)	(69)	9%
Total	(681)	(56)	(737)	100%

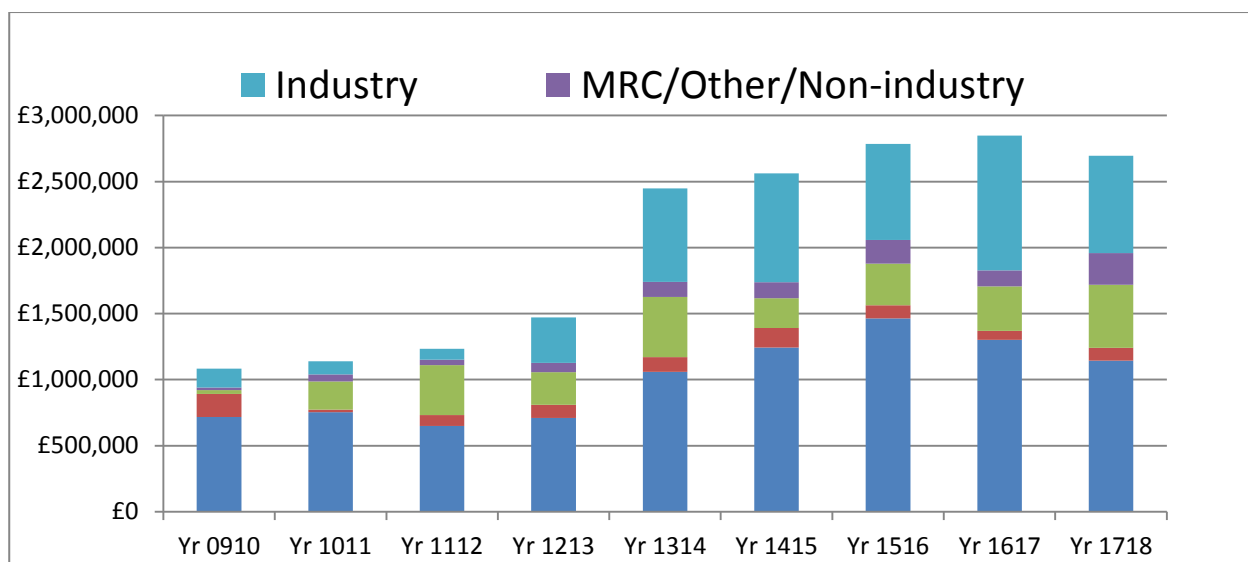
The majority of industry derived income is sourced from Clinical Haematology with a 64% share of the total receipts recorded to date.

**CRN: KSS – 2018 – 2019 Contract Baseline**

Budgets have been allocated for the new financial year as follows:

Annual Allocation £000's	Pay	Vacancy Factor	Total Pay	Non pay	Host Fees	Total	%
Nursing	750	(32)	718		42	760	75%
AC Support	189	(8)	181		11	192	19%
Pharmacy	66	(3)	63		4	67	7%
<b>Total Core Funding</b>	<b>1005</b>	<b>(42)</b>	<b>963</b>		<b>56</b>	<b>1019</b>	<b>100%</b>

<b>Overall CRN:KSS Allocation</b>	<b>1005</b>	<b>(42)</b>	<b>963</b>		<b>56</b>	<b>1019</b>
-----------------------------------	-------------	-------------	------------	--	-----------	-------------



**Jacky Douglas**  
**R&I Finance Manager**