



Name of Sub-Committee:	Research & Innovation Sub-Committee
Chair of Sub-Committee:	Professor Philip Kloer, Medical Director/Deputy Chief Executive
Reporting Period:	September to December 2023
Key Decisions and Matters Considered by the Sub-Committee:	
<p>The purpose of this report is to provide the People, Organisational Development and Culture Committee (PODCC) with an update on Research and Development (R&D), TriTech and Innovation Group (TIG) and University Partnership activities as well as governance, and the subsequent financial positions for assurance. The Research and Innovation Sub-Committee (R&ISC) met on 11 September 2023 and an Extra-ordinary R&ISC was held on 6 November 2023. The R&ISC have not routinely met as scheduled since submission of the R&ISC update to PODCC on 10 October 2023.</p> <p>The report is based on meetings and decisions taken at the following:</p> <ul style="list-style-type: none">• R&ISC Extra-ordinary meeting (6 November 2023)• Research Quality and Sponsorship Group (RQSG) (2 October and 6 November 2023)• Research and Development Leadership Group (LG) (16 October 2023)• Research and Development Delivery Leadership Team (DLT) (15 November 2023)• TriTech and Innovation Group (TIG) (25 September 2023)• Senior Innovation and TriTech Operational Team (SITOT) (30 October 2023)• University Partnership activities for the reporting period <p><u>R&I Strategy</u></p> <p>The R&ISC received an update against Hywel Dda University Health Board's (HDdUHB) Planning Objective 5b, which sets out the priorities for research and innovation (R&I) during 2023/2024, namely delivery of the third year of the R&I Strategy (2021-24) and third year of the five-year TriTech Business Plan.</p> <p>Progress against the Strategy and the associated action plan is routinely monitored at the bi-monthly Delivery Leadership Team meetings and reported to R&D Leadership Group and TriTech and Innovation Group. Reports provided to these groups during the reporting period for this SBAR described that the R&D and TriTech and Innovation Divisions are on target to deliver the goals contained within the Research and Innovation Strategy 2021-2024. The Year Three Action Plan for strategy delivery has focused on key areas which need to be prioritised to deliver the strategic goals and planning objectives.</p> <p>The 2023/24 action plan priorities are as follows:</p> <ul style="list-style-type: none">• Put in place arrangements to grow oncology research trials.• Adequate funding secured through Health and Care Research Wales to support core research delivery establishment.	

- Complete programme of work to establish 'fit for purpose' research facilities at all Hospital sites.
- Increase the number of clinicians with dedicated research time incorporated into their job plans/Performance Appraisal Development Reviews (PADR).
- Achievement of Site Level Research Delivery Plans.
- Delivery of year three of the TriTech Business Plan objectives.
- Explore and secure opportunities to diversify the TriTech and Innovation portfolio in view of national interest.
- Review the size, structure, and capabilities of the TriTech team in view of experience and priorities for the next 12 months.

Governance

Research & Development

Health and Care Research Wales R&D Framework

The R&D annual performance review with HCRW and Welsh Government took place on 17 October 2023 at Dura Park, during which the self-assessment of our current position against the ten pillars of the framework was discussed. The review also discussed what is working well within HDUHB and to identify actions that need to be taken to improve health and care research across the Health Board. The feedback overall was positive, as confirmed in writing by the Director of HCRW (Appendix 1). This feedback will be shared and discussed with R&ISC members alongside an action plan to address areas for improvement, which will be developed in response at the next scheduled meeting on 11 December 2023.

Research Quality and Sponsorship Group

The Research Quality and Sponsorship Group (RQSG) met on 3 October and 6 November and noted the following points:

- Study Sponsorship: No new applications for study sponsorship have been submitted since the previous PODCC meeting.
- Audits: No triggered audits have taken place. One routine early monitoring audit was completed on 17 October 2023. Two minor findings were reported: Version number omitted on a single document and a requirement to direct colleagues that the HDdUHB R&D portfolio of Standard Operating Procedures can be found on the intranet.

LG received an update on the Biobank and noted the following:

- Research Biobank: The R&D Division has now ceased the Human Tissue Authority License, as of 30 September 2023. Serum samples remain in storage with R&D; the Human Tissue Authority (HTA) have confirmed no license is required for these, and the application form is being finalised to transfer these samples to Cardiff University Biobank. The Material Transfer Agreement is also being completed. A close-down report has been submitted to R&ISC for 11 December 2023.

LG received an update on the Medicines and Healthcare Products Regulatory Agency (MHRA) Inspection Ready report and noted the mock audit is due to take place in the coming weeks. A report detailing the findings will be presented at the next R&ISC on 11 December 2023.

TriTech & Innovation

Operational Report

Over this time period Trittech and Innovation have had two meetings: a TIG (Trittech and Innovation Group) on the 23 September and a SITOT (Senior Innovation and Trittech Operational Team Meeting) on the 30 October. The meetings reported on:

- Organisational Structure and Staffing: No changes to the organisational structure have been seen over this period.
- Process and Project Tracking Documentation: Trittech and Innovation have been undergoing a full review of their current process and project tracking documentation. The final version of the new combined scoping and project tracker was completed and went live on 18 September and is currently in use to track the progress on all scoping and project activities within Trittech and Innovation.
- Project Discussions: Reports on the progress for the High Risk cardiovascular disease (CVD) (AMGEN) project were brought to TIG on 25 September detailing a plan to get recruitment back in alignment with the project milestones. The plan was provisionally agreed at TIG with the action to take the plan to the company AMGEN for agreement of the new plan. AMGEN agreed to the plan with the request of a contract amendment which is currently being processed.
- Two new projects were approved in principle at the SITOT meeting on 30 October and agreed that contracting for the project can take place. The two projects were: BECCS project - an internal funding through the digital teams to perform an evaluation on a technology currently in use in the health board & the Agile Kinetic project – externally funded project for TriTech to undertake desk-based research on a 'move lab technology'.
- QUALITY MANAGEMENT SYSTEM – ISO 13485 Quality and safety standards for the Trittech Institute are part of the new ISO 13485 Quality Management System (QMS). The audit of the QMS by British Standards Institution (BSI) was subsequently undertaken between 12 and 15 September 2023 with only 3 minor findings and the QMS passed the audit.
- Technology Scientific Review Panel (ThoRP): SBARs were presented at both the TIG and SITOT meetings to discuss the current purpose of ThoRP and its place within the Trittech process. The review was advanced to consider the effectiveness of the panel and how it might be improved. At the TIG and SITOT meetings it was identified that ThoRP should remain a vital part of the TriTech project approval processes, as it can provide governance and assurance of the scientific validity/rigour and appropriateness of the planned service evaluations before contracting takes place. This mechanism is already catered for in research projects through the R&D processes and a similar mechanism is required for evaluations. Despite this, it was agreed that the current processes in TriTech lacked sufficient triggers or understanding of when ThoRP should be called upon. Comments were also made about balancing the need for robust review with effective contracting. Taking on board these discussions, it was decided that the ToR for ThoRP should be reviewed and amended and a new SBAR detailing improvements to the process of integrating ThoRP into the TriTech decision process would be brought to the next TIG and R&ISC for review and decision.

- **Terms of Reference Review:** the terms of reference for the TIG and SITOT were both reviewed and accepted by their respective committees. Only minor changes were implemented which will be brought to R&ISC for decision at the next meeting.

University Partnerships

Nothing to note.

Discussion Items

Research & Development

Accommodation

R&D LG received an update on actions being taken to develop fit for purpose research facilities at Withybush Hospital (WGH).

The works at WGH continue to be on-hold until essential Reinforced Autoclaved Aerated Concrete (RAAC) works have been completed. The Risk Register 1036 reflects the risk from delay.

TriTech & Innovation

TIG and SITOT noted the following updates on evaluation services provided:

Nurokor Project: The current position for Nurokor is still not resolved and final payment has not been received. The matter is currently with the finance teams, with support from the debt collection agency. In collaboration with NWSSP L&R, the Director for Research, Innovation and Value wrote to the CEO of Nurokor on 2 November 2023, in order to seek a resolution on the matter and a response (to date) has not been forthcoming. No response was received, Dr Leighton Phillips has now drafted a response as the next step.

Finalised reports: Since the last R&ISC two final project reports have been completed and these reports have now been presented to the companies. The projects have been moved to 'closed':

- Tunstall – To assess the implementation and economic impact of remote patient monitoring (RPM) in patients with COPD in a real-world health system.
- Llusern – Evaluation of the Llusern Point of Care Urinary Tract Infection (POC UTI) test – focus groups to understand acceptability and usability.

University Partnerships

The Director of Research, Innovation, and Value reported that meetings had taken place with each regionally based university partner and priorities agreed for 2023/24. The PODCC will receive a further update on progress against these priorities following the next round of meetings with university partners. This will support the Health Board's university status and reporting to Welsh Government.

Assurance Items

Research & Development

HCRW funding update

LG members received an update on R&D financial plans on 17 October 2023 and took assurance from the report. The key points included:

- The revised Delivery Spending Plan for 23/24 has been received. The Research Delivery Total for 2023/24 was £1,196,601. The total Research Delivery Funding for 2023/24 has been reduced by 4.7% which has left us with a £57K cost recovery target in year to meet the end of year break even position. We have been advised by HCRW that funding is likely to be either static or decreased in 2024/2025, this may necessitate the R&D Division to reconsider its strategy and organisation in early 2024.
- Month 6 position (September) is showing the Research Delivery Total as £6,551 underspent.
- HCRW Month 6 position (September) is showing the Excess Treatment Costs (ETC) as £1,362 overspent. This is derived from: ETCs from M11 (February) and M12 (March) 2022/23 to be claimed within 2023/24 Spending Plan.

TriTech & Innovation

TriTech & Innovation Finance Update

TIG and SITOT received an update on the financial position of the TriTech and Innovation Division. The key points were:

- Financial Update: In 2023/24, financial performance is being monitored monthly through a financial tracker, a summary of which is included. The tracker also monitors performance of each individual project to ensure costs do not exceed funding. M6 Report 2023/24 – Month 6 position (end of September 2023) is showing a forecast end of year balance as £64,973k underspend. The underspend in month is mainly attributable to grants being awarded in full in advance of spend against the relevant projects. All grant income is fully committed, and the underspend is deferred into the next reporting period. The TriTech Business Plan forecasted return of £84,694 for 23/24, therefore the M6 forecast is £20,000 adrift of the end of year target.
- TriTech Key Performance Indicators (KPI(s)) report: A separate KPI report was taken to PODCC on 17 August and, whilst positive, some considerations and issues were raised by PODCC. PODCC asked that the current KPI tracker was revised as it was currently hard to track progress and it was asked that the language used in some of the descriptions and deliverables of the KPIs should be reviewed. In response, a new KPI Tracker has been completed and been reviewed at the TIG on 25 September. This will be presented at the next R&ISC on 11 December 2023, and will then be submitted to PODCC in February 2024.

University Partnerships

Nothing to report.

Information items

Research & Development

LG received an update on key performance and operational matters facing the Division, including:

Performance Key Indicators for HCRW being on target (data taken 17.10.23):

'Research to Time and Target' (RTT) is a key indicator of performance and relates to individual studies achieving the number of expected recruited patients over the period of study (or pro-rata for open studies). The percentage shown is the proportion of studies achieving RTT (commercial and non-commercial studies are considered separately).

In order to have local autonomy with our budget, the 6 month rolling data of RTT for closed non-commercial studies needs to be at least 70% of studies achieving their target recruitment.

- RTT – 6 month rolling trend data for closed non-commercial portfolio studies = 100%
- RTT – Closed Commercial studies 50% (2 national commercial studies were terminated by the sponsor which has impacted our trend data)
- Data completeness is 98%

Freezer On-Call: Non-pay costs are still being reviewed by HCRW, as part of this process R&D have reviewed current arrangements for managing the on-call costs for R&D freezers. These costs will now cease for R&D, and Pathology will manage the on-call system going forward. Consequently, R&D on-call staff are currently progressing through the Organisational Change Process (OCP), which is due for completion early 2024.

Communications: A post funded jointly by Research and Value Divisions (Band 5 Communications Officer) is in progress.

Pentre Awel: LG members were advised that the R&D and TriTech and Innovation Divisions continue to explore the potential of relocating from Dura Park to the Pentre Awel scheme. While it offers many opportunities, the decision will ultimately need to be considered in view of the ongoing lease negotiations being led by the Executive Director of Strategy and Planning, due to the financial constraints faced by the Divisions, which currently do not meet accommodation costs.

TriTech & Innovation

Nothing to report.

University Partnerships

Nothing to report.

Matters Requiring People Planning and Performance Assurance Committee Level Consideration or Approval:

The PODCC are asked to:

- **TAKE ASSURANCE** from Research & Development (R&D), TriTech & Innovation Group (TIG) and University Partnership activities and decisions reported.
- **NOTE** and consider the following matters:
 1. WHG accommodation and the enforced relocation following the RAAC works, and the associated impact to research and development activities.
 2. The 4% cut in funding from HCRW and the potential impact this may have on fixed-term posts during 2024/24 (funding for these posts is covered up to March 2024)
 3. R&I requirements in Pentre Awel; including consideration of collaboration opportunities with education and other functions on the site – subject to agreeable terms.
 4. Final payment for the Nurokor project remains outstanding. R&D Finance partners continue to work with the debt recovery team to resolve, in line with Health Board policies and procedures.
 5. TriTech KPI Tracker has been reviewed and re-framed to ensure clarity around each KPI. This will be presented to R&ISC in December 2023 and PODCC in February 2024.

Risks / Matters of Concern:

R&D risk:

Total Number of Risks	3
New risks	0
Closed/Archived risks	2
No change in risk score →	3
Increase in risk score ↑	0
Reduction in risk score ↓	0

Risk Reference and Title	Date Risk Identified	Executive Director	Current Risk Score	
1036 – Inadequate clinical space in Withybush Hospital	26.05.2016	Professor Philip Kloer	16	Score was 12 prior to R&ISC, where members agreed the ‘likelihood’ score should increase to 4, thus making the risk score 16.
1492 – annual spending plan as agreed with HCRW fluctuates and is monitored	29.09.2022	Professor Philip Kloer	9	Capacity funding has been identified to cover some fixed term contracts for the first 6 months of 2023/24.

and reviewed monthly				
1160 – Lack of research leadership (Directorate Level)	07/08/2018	Professor Philip Kloer	9	In May 2023, the likelihood score was reduced in view of increased numbers of staff with research leader time awards.

R&ISC received the R&D risk update on 11 September, and the Committee noted and accepted the report based on the revised scores to risk 1036 in light of the RAAC situation at WGH.

TriTech & Innovation risk:

Total Number of Risks	5
New risks	0
Closed/Archived risks	
No change in risk score →	5
Increase in risk score ↑	0
Reduction in risk score ↓	0

Risk Reference and Title	Date Risk Identified	Executive Director	Current Risk Score	Update
1511 – The risk that the regulatory climate may impact on opportunities to innovate	31/08/2022	Professor Philip Kloer	3x2=6 → (reviewed 23/08/23)	<p>Actions can only expect to reduce the impact of the risk. As ISO13485 is an international standard, successful certification reduces the impact that changes in national regulatory framework could have.</p> <p>We have to assume the likelihood is low as the government is unlikely to change regulations that will affect medical device innovation in the UK.</p>
1510 – Timely Delivery of Project Outputs	31/08/2022	Professor Philip Kloer	3x2=6 → (reviewed 23/08/23)	<p>Most projects carried out to date have been delivered on time and the only exception to this, which was delivered late, the company was satisfied and no issues arose. No customer complaints have been received to date.</p> <p>The risk remains open as reputational damage could impact on the financial risk, staff recruitment and retention and other projects.</p>
1509 – The risk of competitors developing a	31/08/2022	Professor Philip Kloer	2x3=6 → (reviewed 23/08/23)	<p>It is difficult to prevent emerging competitors, but the impact of competitors can be reduced by maintaining a competitive advantage.</p>

similar model to TriTech				<p>There is potential for other Health Boards to adopt the TriTech model.</p> <p>In 2023, TriTech has been considering working with other health boards across Wales to help them develop in collaboration with HDdUHB rather than against us to adopt the TriTech model.</p>
1508 – The risk of a lack of clinical leadership to support TriTech projects	31/08/2022	Professor Philip Kloer	<p>3x2=6 → (reviewed 23/08/23)</p>	<p>No issues have arisen thus far in identifying clinical leads to take on research or evaluation projects.</p> <p>For TriTech to effectively increase the number of projects, an increase in the number of clinical leads able to take on clinical investigations or evaluations is also required.</p> <p>This risk remains open as there is the potential for an increase in risk score in the future.</p>
1507 – TriTech and Innovation: Financial Delivery Year 3	01/04/2022	Professor Philip Kloer	<p>4x1=4 → (reviewed 23/08/23)</p>	<p>Current demand for services is sufficient to meet income generation targets with positive forecasts as outlined in the business plan. Monthly finance tracker is monitored with Finance business partners. Multiple measures are in place to increase exposure and reputation of TriTech Institute towards potential commercial partners. Year 3 target has already been completed as of April 2023. This year, the focus is to build up surplus for Year 4 targets. Monthly finance tracker is monitored with Finance business partners. Multiple measures are in place to increase exposure and reputation of TriTech Institute towards potential commercial partners.</p>

Since the previous PODCC report, a full review of the TriTech & Innovation risk register has been undertaken. One risk has been closed (1506 – Workforce Retention- as there is currently no staff retention risk. The team currently has sufficient capacity, and the current risk score remains unchanged for all the other risks. All risks are at Service Level with a current score of 6 or lower. R&ISC reviewed the TriTech risk report on 11 September and noted and accepted the report, based on the agreement that risk 1507 be formally reviewed and considerations given to mitigating the risk and raising the score if required. This review will be presented to the next R&ISC meeting for discussion.

Planned Sub-Committee Business for the Next Reporting Period:

Future Reporting:

- RESEARCH and DEVELOPMENT– Quality, Performance & Finance
- R&D Team Activity Report
- R&D Performance
- R&D Risk Register
- R&D Governance from RQSG
- R&D Financial Report
- HCRW / National Developments
- Any Other R&D Papers
- INNOVATION – Strategy & Futures
- TriTech & Innovation Activity Report
- TriTech Revised KPI Tracker
- TriTech Risk Register
- TriTech Financial Report
- National Developments
- Any Other Innovation Papers
- Reports on Strategy Progress
- Strategy Action Plan for 23/24 & progress report
- University Partnerships
- Update from Partnership Meetings

Date of Next Meeting:

11 December 2023



Ymchwil Iechyd
a Gofal Cymru
Health and Care
Research Wales



Llywodraeth Cymru
Welsh Government

Feedback from the annual review meeting between Health and Care Research Wales and Hywel Dda UHB

2 November 2023

Dear Leighton and Phil,

Thank you for meeting with me and my colleagues from Health and Care Research Wales (HCRW) as part of the annual review process to discuss how health and care research and development in Hywel Dda University Health Board (H DUHB) is progressing.

As outlined, the purpose of the meeting was to have a structured and mutual dialogue, to discuss and agree between yourselves and HCRW what is working well within H DUHB and to identify actions that need to be taken to improve health and care research across the Board. We used the recently published Welsh Government NHS R&D Framework and your completed assessment template, alongside data for all Health Boards and Trusts previously circulated on HCRW Faculty awards and membership; research delivery funding and activity; and HCRW research project funding scheme applications and awards.

We felt it was a really constructive meeting, and I am writing to provide some feedback and to propose some next steps. Those present at the meeting are listed at the bottom of this letter.

1. We discussed your R&I strategy and the meaningful stakeholder activity and peer review which led to its development, and we felt that it was a really thoughtful and detailed document. With regard to implementation, there were strong governance and monitoring processes in place via the People, Organisation Development and Culture Committee (PODCC) and the Research and Innovation Sub Committee (R&ISC), and these committees are engaged in the research agenda and meet regularly.
2. In discussing the profile of R&D at Executive Board, we noted that you have held a board development day on R&D, have strong relationships with your colleagues covering value based healthcare to integrate research into a



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broader agenda and also use the board's Datix management system to report risks to support resolving issues such as the lack of research facilities and lack of protected time for staff, which has been an effective mechanism to also raise the profile and impact of research. You mentioned that you will be refreshing your R&D strategy as the current version covering 3 years from 2021 will soon run out and that provides you with an opportunity to reflect on your successes, what has worked well and also to ensure the next version has strong alignment with the NHS R&D Framework in areas where you have gaps.

3. We also discussed engagement across the clinical directorates across the DGHs and you recognised that there is not a formal mechanism to do this and that it is variable – understanding that there are challenges with geography. Again, using the NHS R&D framework as a platform for wider discussions as well as using your existing networks of lead nurses could provide an opportunity to think about whether you have the right strategy in place to ensure that research has visibility across the organisation.
4. We heard about the working relationships and engagement with academia, and how the previous University Partnership Board has been replaced by bilateral meetings between the Health Board and each of the Universities (Swansea, Aberystwyth, and University of Wales Trinity St David's) which have proved more beneficial and led to wider conversations in non-medical areas and joint appointments via TriTech. Having strong partnerships with academia is a key part of developing the workforce therefore you may wish to think about how the strategic alignment of priorities could facilitate further joint appointments between your organisations and respective HEIs, and explore rejuvenating relationships in rural health which is a pertinent due to the geography of the Health Board.
5. We were pleased to hear that there is commitment from the Health Board to continue funding for those who have successfully been awarded a HCRW Research Time Award and that the Health Board is also focusing on staff from non-medical backgrounds, although you acknowledged this is an area that is underdeveloped. There is opportunity now to evolve a research workforce strategy and increase engagement with the HCRW Faculty, and working with the Director of Faculty we have agreed that a next step would be to establish a regional workshop to motivate those with an interest in research and explore how the HCRW Senior Research Leaders can be used to support research interested staff.
6. The work the Health Board has done to facilitate access to studies for Hywel Dda patients and the development of smooth patient pathways was recognised, with established sites for recruitment in three of the Health Board's four hospitals. The challenges of Health Board patients accessing oncology studies that are being led in Swansea Bay UHB was discussed which is contrary to the existing regionalised service model for oncology. Currently this inequitable clinical trial activity is not sustainable or fair, and you advised that resolution of this is a key priority for Hywel Dda UHB. The reasons behind this are not clear, and you suggested that appointing a regional delivery manager could provide a solution, as well as aligning with the national - CREST strategy. HCRW agreed (via the Director of Support and Delivery) to facilitate and support discussions between Hywel Dda and Swansea Bay University Health Boards.

7. We noted the lack of commercial research activity at Hywel Dda UHB and discussed the possible reasons for this. You advised that this is related to having only small pockets of interest across the organisation (i.e. respiratory) and having less experienced clinicians. Capacity and capability issues and the geographical operational challenges of having cross cover across the sites is also an issue for commercial studies and this is something that the R&D team are mindful of, and it is hoped that the growth of the commercial portfolio is something that will happen in slower time. A Once for Wales approach, using the Moderna and BioNTech Strategic Partnership was acknowledged as assisting here as well as establishing a relationship with Swansea Bay UHB to grow commercial research is something that is needed, and that will unlock the gateway and relationship to commercial companies. Swansea Bay UHB needs to have an interest in Moderna and BioNTech to enable Hywel Dda UHB to participate.
8. Your self-assessment was candid about the need for more Patient and Public Involvement (PPI) support and expertise to improve your practice in this area especially with regards the National Standards on Public Involvement and expanding your engagement with more diverse communities. It was great to hear about positive research news stories and the ambassadors you have for research in Hywel Dda UHB so please also keep sharing them with us so we can highlight more widely. We also discussed the value of more creative internal communications to raise awareness of research with all staff and how to get visibility and 'cut through' for research at the main Board. We would be happy to support you with PPI and strategic comms and value the representation you regularly have on our national Alliances.

We hope you find this feedback helpful, and I and colleagues would be happy to discuss and clarify any points we have made. We recommend that you share this feedback with everyone who attended the meeting or was invited to do so; with your board; and with other relevant colleagues in the organisation. It would be helpful if you could respond to this letter in due course with a brief note of actions that you plan to take – though this could of course be incorporated into a wider implementation plan.

As we mentioned in the meeting, we want the implementation of the NHS R&D Framework to support ongoing improvement in health and care research and development across Wales. To this end, once we have completed all board and trust reviews we will produce a summary document of common themes and findings and we will work with R&D directors and other stakeholders on what we can do to help share good practice and continue to raise the profile of research and development.

Best wishes



Professor Kieran Walshe
Director, Health and Care Research Wales

Attendees	
Phil Kloer	Medical Director, Hywel Dda University Health Board
Leighton Phillips	Director, Research Innovation & Value, Hywel Dda University Health Board
Sam Rice	Clinical Director, Hywel Dda University Health Board
Sally Hore	Head of R&D, Hywel Dda University Health Board
Jennifer Thomas	Senior Finance Business Partner, Hywel Dda University Health Board
Professor Kieran Walshe	Director of Health and Care Research Wales
Carys Thomas	Head of R&D Policy, Research and Development Division, Welsh Government
Monica Busse	Director of the Health and Care Research Wales Faculty
Nicola Williams	Director of Support and Delivery, Health and Care Research Wales
Helen Grindell	Deputy Director of Support and Delivery, Health and Care Research Wales
Felicity Waters	Head of Communications, Engagement and Involvement, Health and Care Research Wales
Claire Bond	Senior Funding and Performance Manager, Research and Development Division, Welsh Government