# MINUTES OF THE CROSS-PARTY GROUP OF MEDICAL RESEARCH 14<sup>TH</sup> OF DECEMBER 2022, 12PM – 1PM.

Held online via Microsoft Teams

### <u>List of attendees:</u>

Russell George MS

David Rees MS

Ryland Doyle (on behalf of Mike Hedges MS)

Nigel Rees, Welsh Ambulance Services NHS Trust

Simon Jones, Cardiff University

Christopher George, Swansea University

Rachel MacManus, British Heart Foundation Cymru

Gemma Roberts, British Heart Foundation Cymru

Hannah Peeler, British Heart Foundation Cymru

Carys Thomas, Health and Care Research Wales

Mark Briggs, Cardiff and Vale UHB

Jonathan Moore, Bangor University

Dr Lee Campbell, Cancer Research Wales

Dr Orod Osanlou, North Wales Clinical Research Facility

Dr Sacha Moore, ABUHB

Rachel Adams, Cardiff Metropolitan University

Joanne Ferris, Association of the British Pharmaceutical Industry

Emily Griffin, The Stroke Association

Lowri Jackson, Royal College of Physicians

Rhiannon Williams, Cardiff and Vale UHB

Michael Bowdery, Health Care Research Wales

Megan Cole, Cancer Research UK

## **ITEM 1 – WELCOME AND INTRODUCTIONS**

The chair, Russell George MS, welcomed speakers and attendees to the meeting.

He gave a short introduction into the agenda of the meeting which was a focus on the workforce benefits of medical research; how medical research can improve staff retention in the NHS.

#### ITEM 2 - PRESENTATION: INTEGRATING RESEARCH AND CLINICAL PRACTICE

#### DR. OROD OSANLOU, DIRECTOR OF THE NORTH WALES RESEARCH FACILITY

The chair invited Dr. Orod Osanlou to give his presentation which focused on the work of the North Wales Research Facility (slides to be shared separately).

Dr. Orod Osanlou gave his presentation about the North Wales Research Facility and highlighted the 'One Wales' approach to upskill staff and infrastructure through medical research.

The North Wales Clinical Research Facility (NWCRF), which specialises in early phase clinical studies, was partly created to improve staff recruitment and retention in Wales through engagement with medical research whilst addressing healthcare inequalities as participants for trials have been recruited from Mid and West Wales. The NWCRF has created two academic trial fellow posts which would see successful applicants having a fully funded MSC. He is hoping for higher level agreement from healthboards to allow for ringfenced time for research and to ultimately create innovative posts to attract talent from across Wales and over the border.

## <u>ITEM 3 – AGM, RE-ELECTION OF THE CHAIR AND ELECTION OF THE SECRETARIAT.</u>

Russell George MS conducted the election of the CPG chair and Secretariat.

Russell George was elected chair of the CPG, and this was seconded by David Rees MS. The AGM then proceeded to elect Hannah Peeler from BHF Cymru as the Secretariat for the CPG, this was also seconded by David Rees MS.

British Heart Foundation Cymru now holds sole Secretariat of the CPG.

#### ITEM 4 – PRESENTATION: TIME FOR RESEARCH

# LOWRI JACKSON, HEAD OF POLICY AND CAMPAIGNS (WALES), ROYAL COLLEGE OF PHYSICIANS

The Chair then invited Lowri Jackson from the Royal College of Physicians to give her presentation: Time for Research (slides to be shared separately).

Lowri commented that medical research covers a wide variety of areas, not just clinical trials but also in terms of quality improvement and service development. She highlighted that research could help us run the NHS in a more effective and sustainable way.

#### <u>ITEM 5 – PRESENTATION: TIME FOR RESEARCH: A TRAINEE PERSPECTIVE.</u>

# DR SACHA MOORE, IMT3 DOCTOR AND ROYAL COLLEGE OF PHYSICIANS ASSOCIATE COLLEGE TUTOR, ABUHB.

The chair invited Dr Sacha Moore to give his presentation about the trainee perspective of undertaking research whilst studying (slides to be shared separately).

Sacha commented on the importance on being able to conduct research through training and how research can drive a clinical career as it creates the evidence which guides clinical work. He highlighted significance of NHS staff having protected, ring-fenced time for research.

Sacha talked about trainee-led research collaboratives; one example was a study called *Identify* that recruited 10,00 patients over 26 countries. He spoke about the benefits and challenges of research as a clinician. It offers a unique bridge between academia and the front line that can provide insight. Sacha highlighted that undertaking research drives forward innovation in patient care, draws in funding and is a fantastic draw for NHS staff to Wales.

#### **ITEM 6 – Q&A**

The chair thanked the speaker and invited comments and questions.

Lowri Jackson asked how do we make sure, after the NHS executive is introduced, that research becomes a theme in the work of the NHS executive?

Dr Osanlou responded that it is important to link different areas, such as medical schools, to ensure a joined-up approach.

Russell George MS asked about English patients participating in clinical trials and if there are any political barriers to this?

Dr Osanlou responded saying that he hasn't encountered any barriers in this respect and cross border transfers to occur.

Carys Thomas mentioned a new initiative that each healthboard has an independent member that is the designated champion for R&D to work with the NHS executive. She also commented on the strategic framework for R&D and consultation workshops taking place in January to develop this.

Dr Lee Campbell raised the workforce issue in terms of R&D; unless resources can be provided, research will suffer, how do we backfill time due to having protected time for research?

Gemma Roberts asked Dr Moore how he sees the NHS workforce being able to benefit from medical research whilst also solving the staffing issue?

Dr Moore responded that in the short term, it is difficult to plan for protected time but explained the medium-term benefits of creating an attractive research environment to keep more staff in the NHS and in Wales.

Dr Osanlou responded by saying that the NHS has to firefight to keep staff, but innovation makes a workplace more attractive. Dr Osanlou commented that even though ring-fencing time for research does cause staffing issues it will ultimately led to more clinicians coming to Wales and therefore more staff in hospitals.

Lowri echoed the thoughts of Dr Osanlou and Dr Moore and commented on the importance of keeping the staff we already have by making roles more attractive.

The chair thanked the speakers for their time and comments.

#### ITEM 7 – ACTIONS AND NEXT STEPS

The chair discussed ideas for the following meeting which could be held face to face or a drop in event at the Senedd.

The chair thanked everyone for attending and drew the meeting to a close.

Copies of the minutes of the meeting will be circulated by the Secretariat and the next meeting of the CPG will be communicated via the Secretariat.

Meeting ended at 1.05pm.