

Birmingham Health Partners

Collaboration. Innovation. Application.

Birmingham Health Partners – Annual Review of Activity **2025-2026**

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Introduction

The past 12 months are an exemplar of what Birmingham Health Partners can achieve when organisations work beyond institutional boundaries and focus their combined expertise on shared challenges. Across our universities, NHS trusts and innovation partners, colleagues have continued to turn research into tangible improvements for patients, communities and the health and care system.

One of the clearest examples is our work to improve Birmingham's environment for clinical research. This year, BHP and partners have secured £21 million through the Local Innovation Partnership Fund (LIPF) to establish the West Midlands Clinical Commercial Catalyst – a major programme designed to accelerate innovation, attract investment and improve patient outcomes.

BHP's Reducing Bureaucracy in Clinical Trials programme has strengthened research contracting and data-sharing arrangements and supported the adoption of Florence as a shared digital research management platform.

This work is complemented by the first full year of the Central and North West Midlands NIHR Commercial Research Delivery Centre, and its strong start: 81% of its studies opened within the national 60-day benchmark and 86% recruited their first participant within 30 days. Partners recruited 433 participants to commercial interventional studies, while additional investment has been secured to strengthen digital infrastructure, industry engagement, investigator support and research delivery.

We have also made important progress in health data. Hosted by **UHB**, the West Midlands Secure Data Environment (WMSDE) is creating a secure regional resource through which data can be linked and used for research and innovation. Its growing assets include an astonishing 10 billion rows of inpatient data, more than 20 million free-text letters and reports, one million digital pathology slides and nine million retinal images. Working with **UoB**, the programme has extended the DEXTER analytics platform, generating analysis-ready datasets from healthcare records, into secondary care and has supported major collaborations in ovarian cancer, colorectal cancer, cardiomyopathy and lung disease.

Just as importantly, the WMSDE has placed public benefit and public oversight at the centre of its approach. More than 500 people have taken part through 64 community groups, and a 15-member public Data Access Committee reviews every proposed use of data before research can proceed. This is a powerful example of how innovation and public trust must develop together.



These examples reflect a consistent priority across BHP: ensuring that research responds to the needs of the people and communities it is intended to serve.

None of this happens through structures or strategies alone. It is made possible by researchers, clinicians, managers, support staff, patients, public contributors, industry partners and community organisations choosing to work together. I would like to thank everyone who has contributed to BHP's work during 2025/6.

The challenges facing health and care are significant, but so too are the opportunities. Birmingham has the scale, diversity, expertise and collaborative culture to lead nationally and internationally. Our task now is to build on the foundations set out in this review: widening participation in research, making better use of data, accelerating trials and innovation, developing our people and ensuring that the benefits are felt across all our communities.

Richard Meddings CBE, Chair



Review of objectives

Streamline clinical trial governance Accelerate and simplify clinical trial setup and delivery through unified governance, digital processes, and reduced bureaucracy.	• Contract training programme attracted over 50 attendees from six partner organisations • Florence, a digital research management platform roll-out, securing cost savings for members • CRDC programme targets exceeded with 86% of studies recruiting first participant within 30 days • ~£1m additional funding secured • (See pages ***22*** and ***23***)
Enhance public engagement Broaden and diversify patient and public involvement in research through deeper community partnerships and expanded training.	• Institutional PPIEP strategy developed for all NIHR awards, supporting NHS Trusts as well as universities • 11 pre-grant PPIE awards made since January 2026 (see page ***20***)
Optimise data integration Create a unified, cutting-edge data ecosystem linking clinical, genomic, and population data to drive innovation and improve care.	• WMSDE now includes >25 years of data from **UHB**, as well as data and free-text records from **BSMH**, **SWB** and other trusts (see page ***10***)
Develop research leaders Invest in and empower the next generation of research leaders through targeted fellowships, mentorship, and leadership programmes.	• Birmingham's NIHR Integrated Clinical Academic Training (ICAT) programme – which supports academic trainees across our partner NHS Trusts – has been rated joint top alongside Oxford, out of 36 programmes nationwide (see page ***18***) • **UoB** and **Aston** leading the new Medical Research Council West Midlands Regional Account for Clinical Researchers (WMRACR), aimed at increasing the number of clinical academics in the region (see page ***18***)
Tackling health inequalities Deliver evidence-based, community-informed research and interventions to reduce health inequalities across the region.	• Aston and BCHC building better joined-up health and care services in local neighbourhoods across Birmingham and Solihull, aligning with the government's 10-year plan and enabling researchers to identify, understand and tackle health inequalities (see page ***8***) • BHP Evaluation Service and BWC are developing an evaluation toolkit for neighbourhood multi-disciplinary teams for children and young people to improve health and wellbeing in our poorest neighbourhoods (see page ***24***) • 2026 NIHR Early Career Research Impact Prize awarded to **BWC** researcher for work with Sparkbrook Children's Zone (see page ***16***)
Foster industry collaboration Strengthen partnerships with industry to accelerate innovation, evaluation, and commercial research opportunities.	• World-first treatment trial for rare liver disease launched in collaboration between the **BRC**, **UHB**, **UoB**, and industry partner Yaqrit • Multiple partnerships with industry via WMSDE (see page ***10***)

Review of objectives (continued)

Expand BHP's reach Extend BHP's research capacity into primary care and community settings to broaden impact and participation.	• DaRe2THINK enhanced digital platform launched to transform how NHS GP practices take part in clinical trials, making research quicker, easier and more inclusive for patients across the UK • Trial to investigate weight loss drugs for treating blinding headache condition launched in partnership between the **BRC** and Specsavers • From 1 April 2026, BHP member **SWB** moved into a formal NHS Group Model with The Dudley Group NHS Foundation Trust (DGFT) with a single Group Board. Serving overlapping populations and with similar operational, workforce and financial pressures, the plan ensures that deeper collaboration will help us go further and faster on improvement and reform, particularly in areas such as quality, equity, workforce development and resource use
Community and communication Amplify BHP's impact through effective storytelling, shared learning, and collaborative events that showcase success.	• Second annual meeting held, Professor Waljit Dhillo (Dean of the NIHR Academy) as our keynote speaker • Rare Disease showcase held • Midlands Orthopaedic Strategy workshop hosted by BHP • Two BHP People awards





From early detection to treatment: transforming type 1 diabetes care

A world-leading collaboration across BHP is helping to reshape how type 1 diabetes is detected, monitored and treated in children.

Led by researchers at **UoB**, with clinical leadership and delivery from **BWC** and **UHB**, the ELSA study has demonstrated that screening children for early-stage type 1 diabetes is both feasible and effective – as well as informing the adoption of a world-first immunotherapy drug to delay the onset of disease.

Type 1 diabetes is often diagnosed only after symptoms appear, and more than a quarter of children are already in diabetic ketoacidosis – a potentially life-threatening emergency – at the point of diagnosis. ELSA aims to identify the condition much earlier by testing children for autoantibodies that can appear years before insulin treatment is needed.

Among 17,283 children aged three to 13 screened during the study's first phase, 75 were found to have one autoantibody, indicating increased future risk, while 160 had two or more autoantibodies and were identified as having early-stage type 1 diabetes. A further seven children had previously undiagnosed symptomatic diabetes and were able to begin insulin treatment immediately.

Clinical Immunology Services played a vital role in the programme, analysing dried blood spot samples and validating the collection method by comparing the results with traditional blood samples taken from the same children. This helped establish a reliable and accessible approach to large-scale screening that could be used across the UK.

The study was also supported by Research FIRST, BHP's specialist research delivery service. The team developed and managed the study database, provided data management and regulatory support, coordinated participating sites and oversaw the dispatch of dried blood spot testing kits. This infrastructure enabled families to begin screening quickly and helped maintain the quality and momentum of the national study.

The partnership has also helped turn early detection into earlier treatment. Children identified through ELSA have been offered clinical monitoring, family support and, in some cases, teplizumab – the first immunotherapy shown to delay the onset of insulin-dependent type 1 diabetes. The first young person in the UK to receive the drug was treated at Birmingham Children's Hospital.

Following NICE approval, teplizumab will now be available through the NHS for eligible children and adults with stage 2 type 1 diabetes. ELSA 2 is building on this progress, expanding screening to children aged two to 17 and establishing the NHS Early-Stage Type 1 Diabetes Clinics.

The ELSA study has since received national recognition, winning the Research (Patient Engagement) Award at the Royal College of Physicians' Excellence in Patient Care Awards 2026.

Together, BHP partners are creating a pathway from screening and diagnosis through to monitoring, treatment and long-term support – moving type 1 diabetes care from emergency response towards earlier, more proactive intervention.

£21m boost for West Midlands' health and life sciences

BHP members and regional partners have secured £21 million through the Local Innovation Partnership Fund (LIPF) to establish the West Midlands Clinical Commercial Catalyst – a major programme designed to accelerate health and life sciences innovation, attract investment and bring new treatments and technologies to patients faster.

The investment builds on some of the region's greatest strengths in health research and innovation. These include internationally-recognised clinical trials expertise; access to a stable and diverse population of five million people; leading capabilities in health data, genomics and regulation; and expertise in advanced therapies. BHP itself brings together organisations responsible for more than 50,000 staff and five million patient contacts each year, providing the scale and clinical links needed to translate research into real-world impact.

The funding will connect these existing strengths into a more joined-up regional offer. This will include the region's first NHS and commercial cleanroom facility within PHTA at Birmingham Health Innovation Campus to enable near-patient biomanufacturing; a shared, digitally enabled clinical trials platform; better integration of clinical research with health data, samples and genomics; and targeted funding and support to help promising health and life sciences companies grow and attract further investment.

For patients, this means more opportunities to take part in commercial clinical trials and faster access to innovative treatments, diagnostics and technologies. By making it easier to undertake research across communities throughout the region, the programme will also help ensure that new treatments are developed and tested in populations that better reflect the people who will use them. The programme aims to double regional recruitment to commercial clinical trials over the longer term.

The economic impact will also be substantial. The programme is expected to leverage more than £100 million in private investment, create or safeguard 1,000 high-value jobs and generate more than £335 million in economic value within five years.

Crucially, the investment is designed to create lasting capability rather than a short-term programme. By establishing shared research infrastructure, manufacturing capacity, skills and business support, it will create a sustainable environment able to attract repeat private investment, retain growing companies and strengthen the region's position as a nationally and internationally important centre for health and life sciences.

The Local Innovation Partnership Fund (LIPF) is funded by the Department for Science, Innovation and Technology through UK Research and Innovation (UKRI), and brings together academic, business and public sector leaders to deliver projects to accelerate regional economic growth, scale up high-potential innovation clusters, and bridge the gap between research and commercialisation.



Redesigning Birmingham and Solihull's NHS

Aston and **BCHC** have established a new three-year knowledge transfer partnership (KTP) to build better joined-up health and care services in local neighbourhoods across Birmingham and Solihull.

The project, funded by Innovate UK, will develop England's first comprehensive system for monitoring the impact of the Government's 10-year health plan to create a Neighbourhood Health Service - by moving care out of large hospitals and closer to people's doorsteps; shifting focus towards preventing illness; and moving from analogue to digital systems.

To guide this transformational piece of work, health and organisational management researchers will develop a monitoring system to measure outcomes – and impact on staff and patients – as each service and clinic is redesigned. This will combine qualitative methods, systems mapping and big data into critical metrics on people's health, their experiences of care, and the well-being of NHS staff, so that continuous improvement can be informed by a detailed understanding of what works well.

The partnership will also be critical in enabling researchers to identify, understand and tackle health inequalities, so that services can be made fairer and more accessible for all.

As other UK towns and cities look to redesign their health and care services in response to the UK government's 10-year plan for the NHS, the Birmingham and Solihull model could offer a blueprint for others to learn from.



Establishing the NIHR Challenge Maternity Disparities Consortium

The £50m NIHR Maternity Disparities Consortium (MDC) commenced in August 2025, under the leadership of **UoB** and Newcastle University, and bringing together **UHB**, **BWC** and **SWB's** maternity units, academic partners and third sector voices. This marks a significant milestone in embedding Birmingham's leadership in addressing systemic maternal and neonatal inequalities, and comes at a pivotal moment for maternity care in the UK, with national attention increasingly focused on improving safety, equity and women's experiences of care.

Key areas of research

Before and between pregnancies (Preconception and Interpregnancy care)

The consortium will examine how women and families can be better supported before pregnancy and between pregnancies. This includes improving access to advice and care that can help people prepare for pregnancy, manage existing health conditions and reduce risks before they build up.

Pregnancy, birth and early recovery after birth

Research will focus on improving care during pregnancy, birth and the early weeks after birth. This will include work on major causes of poor maternal health, such as high blood pressure, diabetes in pregnancy, obesity, perinatal mental health and complications during recovery after birth.

Care for babies and families after birth

The consortium will develop and test better ways to support babies and families who are at higher risk of poor outcomes. This includes improving follow up care after birth, strengthening links between hospital and community services, and supporting families as they move from maternity and neonatal care into longer term child and family support.

Access, communication and experience of care

The programme will look at how services can be easier to access, easier to understand and more responsive to women and families. This includes improving communication, language support, shared decision making and the overall experience of care, particularly for those who are least well served by current systems.

Tackling racism, discrimination and unfairness

The consortium will ensure that research directly addresses racism, discrimination and other forms of unfairness that affect maternity care and outcomes. This will be built into how interventions are designed, delivered and evaluated.

Working with communities

Women, families and community organisations will help shape the research from the beginning. The consortium will work with peer researchers, charities and community partners to make sure the work reflects real experiences and is useful to the people most affected by maternity inequalities.

Using data and evidence to drive change

The programme will use data, digital tools, health economics and real-world evaluation to understand what works, for whom and in what circumstances. This will help identify practical changes that can be delivered fairly and scaled across different parts of the UK.



Data-driven research and innovation

During 2025/6, BHP has continued to support the development of the West Midlands Secure Data Environment (WMSDE), creating a shared infrastructure through which NHS data can be linked and used for research and innovation. Its ISO 27001 certified design is underpinned by the '***Five Safes***' framework, ensuring strong safeguards for patient privacy.

Hosted by **UHB**, the WMSDE received a positive national SDE Network audit and has secured more than £2 million of funding for 2026/7, in addition to existing commissioned programmes such as digital pathology.

25 years of data

Significant progress has been made in assembling a rich regional data resource. **UHB** data now available through the WMSDE includes inpatient activity dating back to 2010, representing:

- ~310,000 admissions per year
- ~360,000 A&E attendances each year
- 10 bn rows of inpatient data
- 20m free-text letters and reports
- Cancer registry data covering more than 600,000 patients
- Pre-curated data subsets from ***PIONEER*** and in rare diseases

Other data includes:

- Structured and unstructured mental health records from **BSMH**
- Maternity records covering more than **250,000 patients** each year from **UHB**, **SWB** and Shrewsbury and Telford Hospital NHS Trust
- Records of ~22,000 deliveries each year from **UHB**, **SWB** and Shrewsbury and Telford
- 1m digital pathology slides from the West Midlands Pathology Network
- 9m retinal images and associated clinical records
- Highly-curated datasets in a range of cancer diagnoses established by the **PathLAKE** programme

The WMSDE provided the data platform for SONATA – an NIHR-funded evaluation of an ovarian cancer diagnostic test involving 39,000 women, led by **UoB** and **SWB**.

Working with **UoB**, the WMSDE has extended the DEXTER analytics platform, which generates analysis-ready datasets from complex data held in electronic healthcare records, from primary care into secondary care. It is now being applied to maternity data from **UHB**, **SWB** and Shrewsbury and Telford, as well as acute care data from **UHB**.

In March 2026, the partners held their first regional **datathon**, bringing together clinicians, researchers, data scientists, engineers and patient representatives to analyse curated acute and maternity datasets securely and test new research approaches.

Partnering with industry

In partnership with biotechnology company Owkin, WMSDE supported validation of an AI tool using 2,200 colorectal cancer slides from five international centres, 39% of which came from the West Midlands, and a study of hypertrophic cardiomyopathy involving 1,044 patients, with 43% drawn from the region.

It also curated multimodal imaging and clinical data from 2,200 patients to support Qureight's development of AI biomarkers for lung disease.

Demonstrating public benefit

Public involvement has been, and will remain, central to the programme. WMSDE engagement activity generated 2,017 contacts, involved 525 people through 64 community groups representing seldom-heard populations, and secured 186 questionnaire responses at six high-footfall public events.

A 15-member public Data Access Committee now reviews every proposed research use of WMSDE data and must confirm that it offers demonstrable public benefit before access is granted.

Data-driven research and innovation (continued)

Looking ahead

In 2026/7, BHP and the WMSDE will focus on expanding the breadth and depth of the regional data asset. Priorities include:

- Bringing in genomic and primary care data
- Widening coverage across additional acute trusts
- Increasing access to "deep data" such as imaging, pathology and free-text records
- Recruiting a clinician to work with the technical and analytical teams to develop data driven insights that will improve patient care, whilst improving processes and pipelines for data provision and analysis, via a BHP Fellowship
- Developing cost-effective data flows, data sharing agreements and oversight to develop access to primary care data with Our Health Partnership
- Piloting multi-modal data evaluation in breast cancer with ***DATACAN***

WMSDE plans to second a data engineer to **BWC** to support genomic data flows, while discussions are continuing with **SWB** and University Hospitals Coventry and Warwickshire to develop acute care data pipelines.

The partnership will also build on the use of DEXTER for secondary care research, supporting clinicians to work with technical and analytical teams on acute and maternity datasets. Alongside this, WMSDE will continue work to link regional data with national datasets, strengthen collaboration with other Secure Data Environments, and develop more efficient routes for research feasibility, clinical trials and industry partnerships.

What this means for BHP partners

For BHP member organisations, the WMSDE provides a single, secure route to access and analyse linked NHS data across organisational boundaries. This reduces duplication and delays, gives researchers access to datasets that would be difficult to use within a single institution, and supports faster study design, feasibility testing and insight generation. Partners can contribute data, use shared analytical tools such as DEXTER, and benefit from specialist services for data linkage, standardisation and governance.

As the regional data asset grows, it will also strengthen partners' ability to lead larger-scale research, develop and validate AI technologies, support data-enabled clinical trials and work with industry. Participation will help organisations realise more value from their own data while improving Birmingham's competitiveness for future NIHR funding and wider life sciences investment.





Case studies in brief

New Birmingham Implant Retrievals Centre set to advance patient safety

A new research partnership led by **UoB** and **ROH** brings together clinicians, engineers, regulators and industry to improve understanding of joint implant performance and failure. The Birmingham Implant Retrievals Centre will focus on analysing retrieved orthopaedic implants and associated tissue samples to identify why devices fail, how implants behave inside the body, and how patient safety can be improved through earlier identification of risk.

Managing arthritis as a side effect of cancer treatment

A UK-first trial led by Birmingham researchers aims to improve treatment of arthritis in people who have developed the condition due to cancer immunotherapy. The REmission induction of Arthritis caused by Cancer ImmunoTherapy (REACT) trial, led by **UoB**, delivered by the **BRC** and with patients recruited through **UHB** and **CRCTU**, is testing whether powerful arthritis treatment is suitable for patients receiving ongoing cancer treatment.

Connecting healthcare through technology

The ***West Midlands Living Lab*** (**UoB**, **UHB**, **WMSDE**, Cisco) will explore the use of digital technology to improve patient communication, enable community care, avoid unnecessary hospital admissions, and support a more prevention-based health service.

Pilot studies are planned to run through community hubs, NHS Primary Care and hospital trusts, looking at how best to break down siloes between existing services and orchestrate better, connected health and social care. Partnerships with community organisations will help address the needs of diverse neighbourhoods and be a blueprint for global benefit.

Tackling heart health inequalities in cities

Researchers from the NIHR Birmingham Biomedical Research Centre (**BRC**) will collaborate with international partners on an ambitious project aiming to help reduce the burden of cardiovascular disease in urban environments, as well as reducing the health inequality gap. The European Union Innovative Health Initiative-funded 'Cities@Heart' consortium will design, pilot and evaluate a series of city-level strategies to improve cardiovascular health for all.

Case studies in brief (continued)

The project consortium involves 34 international partners, including the World Health Organization (WHO) European Healthy Cities Network, World Heart Federation, European Heart Network, European Society of Cardiology, European Public Health Association and multiple European universities. Birmingham joins another six cities committed to city-wide improvement that will test and implement strategies that can be scaled across the WHO's network of more than 1,800 cities: Belfast, Cork, Łódź (Poland), Izmir (Turkey), Udine (Italy) and Utrecht (Netherlands).

£7.9m trial to explore diet to reduce depression in bipolar disorder

A study led by **UoB** and the University of Edinburgh, with **BSMH** as a key delivery partner, will compare the effects of two dietary approaches on depressive symptoms in people with bipolar disorder: a nutritional ketosis diet and the NHS EatWell guidelines. By comparing two well-defined nutritional strategies in a rigorous randomised controlled trial, the study aims to generate evidence that could reshape clinical practice and public health guidance, offering new hope to individuals affected by bipolar depression.

The study is flagship initiative within the **Mental Health Mission Midlands Translational Centre**. A major focus of the Centre is to accelerate mental health research across the Midlands, leveraging regional infrastructure, and to develop and test novel and innovative treatments focused on helping people with major mood disorders such as bipolar disorder.

Reducing national health inequalities in heart disease

UoB, supported by **Aston**, Citizens UK and Birmingham City Council, will lead one of nine consortia that have been selected to take part in the NIHR Cardiovascular Inequalities Challenge. Developed in partnership with the British Heart Foundation, this £50 million project aims to tackle the huge inequalities that persist across under-served communities in the UK. The work synergises with a range of other programmes led by BHP organisations that are already opening up the benefit of clinical research to broader populations. This includes the ***DaRe2THINK*** national primary care trial platform, the **Cities@Heart** Innovative Health Initiative, the ***West Midlands Secure Data Environment*** and the ***Living Lab for HealthTech***.

Clinical use of nitrous oxide could help treat depression

Researchers from **UoB**, **BSMH** and the University of Oxford have found that patients with major depressive disorder, including those who have not responded to first-line antidepressants, may benefit from short-term nitrous oxide treatment. Building on this translational pathway from discovery to clinical practice, the team is now preparing the first NHS trial in the UK to assess whether nitrous oxide can be delivered safely and acceptably as a treatment for major depression. The findings will help determine how nitrous oxide could be integrated into NHS care and may expand the range of innovative options available for patients who have not benefited from standard approaches.

Spotting dental risks earlier for children with heart conditions

Via a Health Innovation Fund grant, **HIWM** and **BWC** have developed a new approach to identifying dental problems earlier in children with heart conditions. The project brings together paediatric dentistry and cardiology, using handheld scanners to capture high-resolution images and an AI tool to flag suspicious dental images for specialist review. The approach will also support ward nurses to provide preventative fluoride treatment during longer hospital stays, helping to reduce avoidable dental harm and improve care for thousands of children across the region.

Improving mobility for amputees

Due to the increasing rate of diabetes and the population ageing, the global amputee population is expected to double by 2050. Funded by NIHR, the MoFit study led by **BCHC** and **UoB**, is evaluating a model-driven Functional Electrical Stimulation (FES) intervention designed to improve gait, mobility and functional independence in people living with limb loss. The study seeks to generate evidence to support innovation in rehabilitation and improve long-term outcomes for amputees.

Patient-Reported Outcomes in integrated care

In collaboration with **UoB**, **BCHC** is examining how patient-reported outcome measures (PROMs) can be implemented and used within integrated care services to better understand patient experiences, outcomes and service impact. The work aims to strengthen the use of patient-centred outcome data to inform service improvement and support high-quality integrated care.

Case studies in brief (continued)

Supporting loved ones with long-term conditions

Delivered in collaboration with **UoB** and BHP colleagues, **BCHC's** Couples Therapy Study is exploring the feasibility and impact of therapeutic interventions designed to support people living with long-term conditions and their partners in managing the challenges associated with illness, rehabilitation and recovery. The study aims to improve emotional wellbeing, relationship functioning and overall quality of life for patients and families.

Earlier detection of scoliosis

ROH and **Aston** researchers are collaborating on the development of a smartphone app to help detect scoliosis (curvature of the spine) earlier in young people. Earlier detection would allow better all-round management. As part of this research, anonymised historical imaging data (X-ray, MRI/CT, and back topography photographs) collected at The Royal Orthopaedic Hospital between 2008 and 2017 will be used by to train the app.

New approach to detecting meningitis and encephalitis

Life-threatening and life-changing infections like meningitis and encephalitis require rapid diagnosis and treatment - but this isn't always straightforward.

A cross-BHP team led by **Aston** working with **UHB** and **UoB**, has developed a new approach which could help identify the pathogens responsible for central nervous system infections when conventional testing does not provide an answer.

The method combines highly sensitive metagenomic sequencing - which can search for a wide range of microorganisms at once - with a new computational filtering system designed to separate genuine pathogen signals from the 'background noise' found in complex samples.



Other exemplars

Simulation Suite training for future healthcare experts

Simulation Suites at **BWC's** Women's Hospital and **UHB** are among the first sites in the Midlands to be selected as a national initiative to deliver realistic, scenario-based simulation training, to build confidence while improving awareness around patient safety. The Suites are part of the NHS England-led the IPEX (Interprofessional Experience) project which provides undergraduates with opportunities to work together in a realistic setting during their training.

Doctoral Training Partnership

Funded by Listers Group, **Aston** and **SWB** have come together to form the ***Listers Cardiovascular (CV) Research Group*** - pioneering initiative dedicated to advancing CV health. The Group is currently supporting four PhD studentships, addressing diverse aspects of CV health through innovative research.

- Majedah Khamayseh: Investigating the screening for Coronary Artery Disease using Computed Tomography Coronary Angiogram (CTCA) and Computed Tomography Fractional Flow Reserve (CT-FFR) in a multi-ethnic cohort
- Nustratul Firdaus: Platelet reactivity and PEAR1 function in patients with cardiovascular disease
- Rumanveer Duley: Exploring the role of community pharmacy in preventing cardiovascular disease within minority ethnic communities
- Kavithra Hariharajah: Linking lipid oxidation to Outcomes in Drug-Coated Balloon Therapy for De Novo Coronary Artery Disease

ALIGN (Arthroplasty & Orthopaedics Interdisciplinary Group for Evidence & Outcomes) network

Co-founded by **ROH** and **UoB**, ALIGN brings together clinicians and methodologists in orthopaedic surgery to create high-quality, inclusive, and scalable research. Its focus is understanding and improving outcomes for underrepresented groups in orthopaedic care, drawing on expertise in evidence synthesis, rehabilitation, and stakeholder engagement. To date, it has:

- Won £50k seed funding for an evidence synthesis paper
- Published in Bone and Joint on '***reimagining joint arthroplasty care pathways***'
- Secured an NIHR Development and Skills Enhancement (DSE) award for Dr Michael Mansfield, who will complete his research at both partners
- Won a Private Physiotherapy Education Foundation award to ROH physiotherapist Hayley Jennings, for the ETHKnee cohort study
- Completed an NIHR Research for Patient Benefit (RfPB) grant application which will fund two co-supervised PhD students

Gynaecologists investigate the use of weight-loss drugs in treating PCOS

Co-applicants from **Aston** and **SWB** have won an NHS research grant to investigate the use of weight-loss drugs in the treatment of polycystic ovary syndrome (PCOS) – now known as Polyendocrine Metabolic Ovarian Syndrome (PMOS).

A multidisciplinary team will investigate whether GLP-1 receptor agonists – more commonly known as weight-loss and blood sugar control drugs, such as Mounjaro (tirzepatide) and Ozempic (semaglutide) – could help women with PMOS, who are more likely to experience obesity, insulin resistance, diabetes, and related heart and circulation problems.

The £60,000 project has been funded through the **SWB** NHS Research Fellowship scheme which connects frontline clinicians and academic partners to improve patient care.

Generation Study

The Generation Study is a research programme being delivered by Genomics England in partnership with the NHS. It is set to recruit 100,000 newborn babies, whose genomes will be sequenced after birth, with the aims of facilitating the earlier identification of rare genetic conditions in babies; gathering genomic data for wider research purposes; and exploring the risks and benefits of storing an individual's genome over their lifetime. To date **BWC** have recruited more than 3,700 babies, with **UHB** consenting 2,461.

Other exemplars (continued)

Improving engagement with digital health services

BCHC and **UoB** secured a four-year collaborative PhD studentship through CENTRE-UB to investigate how people with long-term conditions engage with digital NHS services. The project will identify barriers and enablers to access and sustained use among diverse patient groups, and examine the potential impact on health outcomes, quality of life and healthcare costs.

NIHR Early Career Researcher award

Dr Christopher Bird of **BWC** has received a 2026 Early Career Researcher Impact Prize for his work on the BHP-supported project 'Co-produced neighbourhood care for underserved children and young people: improving prevention, equity, and cost-effective healthcare through the Sparkbrook Children's Zone clinic'. The judging panel commented: "There was an exceptionally strong field of applicants for this year's awards and your success reflects the considerable quality of your submission and the impact of your research."



Grants and awards

- LifeArc funding of £5m - A randomised controlled trial of oral vancomycin for the treatment of primary sclerosing cholangitis (PSC) – involving **UHB** and **UoB**
- NIHR HALT-colitis award of £3.37m involving **UoB**, **BCHC** and **UHB** – investigating whether the addition of FMT to standard treatment in newly diagnosed mild-to-moderate ulcerative colitis reduces the need for therapy escalation
- NIHR OPAL Study award of £3.4minvolving **UHB**, **UoB** and **BCTU** - Investigation of long-term outcomes of a Direct Oral Penicillin Challenge in Secondary Care to De-label Low Risk penicillin allergy patients by Clinical Pharmacists – a randomised controlled trial with a mixed methods approach
- NIHR funding of £3.2m for the LION Trial - Low risk thyroid cancer: Intervention or ObservatioN trial – led by **UoB**'s Hannah Nieto, a BHP Clinical Scientist, with recruitment based at **UHB**
- Wellcome award of £2.8m to **BSMH** and **UoB** for the Keto-BD study: A Randomised Controlled Trial of a Ketogenic Diet for Bipolar Depression: Efficacy, Mechanism of Action and Implementation
- BHF Intermediate Basic Science Research Fellowship of £740k for Stop The Clot: a study targeting Platelets And Neutrophils In Platelet Factor 4 Associated Immune Thrombocytopenia And Thrombosis (PITT), involving **UoB** and **UHB**
- NIHR Invention for Innovation (I4I) THRIVE Award of £146k for Fit4Surgery Digital Prehabilitation involving **UHB**, **HIWM** and **UoB**
- MRC Impact Acceleration Award of £50k: Early Intervention with Model-driven FES to Manage Post-Amputation Phantom Limb Pain and Optimise Gait involving **UoB** and **BCHC**
- Vas Chortis from the first cohort of BHP Clinician Scientists has been awarded an MRC Clinician Scientist Fellowship within **UHB's** Endocrinology department

Evaluating a virtual ward programme for patients with acute COPD exacerbations

Developed by **BCHC** and **UoB**, the BRIDGE Study received ~£1.32m from NIHR through its Health and Social Care Delivery Research Programme. The study is evaluating the COPD virtual ward service across Birmingham and Solihull against standard models of care and was informed by the evaluation of **UHB**'s virtual wards pilot, undertaken by BHP's Evaluation Service.

END-RNP

END-RNP (Multidomain Evaluation and Data-Driven Approaches to Predict Recurrent Neck Pain) study was awarded >£809k by the MRC to improve understanding of the factors underpinning recurrent neck pain and support the development of more personalised interventions. It is led by **UoB** and **BCHC** working with the University of Essex.

Lullaby Trust Research Grant

UoB and **BCHC** have received ~£25k from the Lullaby Trust and Teddy's Wish to investigate whether vaping during and after pregnancy increases the risk of sudden unexplained death in infancy (SUDI), addressing an important public health challenge affecting children and families.

Improving anxiety treatment for adults with learning disabilities

Led by **BCHC** in collaboration with **UoB**, the BEAMS-ID Trial received funding from NIHR through its Health Technology Assessment Programme. Building on an earlier feasibility study, the trial aims to improve support and therapeutic interventions for autistic adults and people with intellectual disabilities who experience anxiety and associated mental health challenges.





Education and workforce development update

Top rating for Birmingham's NIHR Integrated Clinical Academic Training (ICAT) programme

Birmingham's ICAT programme has been rated joint top alongside Oxford, out of 36 programmes nationwide. It is led by **UoB**, supported by NHS members of BHP, and provides opportunities for medical and dental graduates to have dedicated research time alongside their clinical training and NHS commitments. It also supports the new ICAT programme at Aston through the annual research retreat.

Since Birmingham's ICAT Programme launched in 2015, 55 of our 86 NIHR Academic Clinical Fellows (64%) have progressed to clinical research training fellowships or other academic posts and 55 of 73 our NIHR and locally-funded Clinical Lecturers have progressed to senior academic positions (75%), including 17 as research-active consultants.

BHP part of new regional programme to support early career researchers

A new partnership aims to strengthen support for early career clinical researchers, thanks to major funding from the Medical Research Council (MRC), helping build research capacity across the region and beyond.

The MRC provided funding for the establishment of 10 Regional Accounts for Clinical Researchers (RACR), working with NHS organisations to benefit approximately 200 clinicians across the UK. **UoB** will host the West Midlands Regional Account for Clinical Researchers (WMRACR), a partnership programme in collaboration with fellow BHP member Aston University, and the universities of Warwick and Keele, aimed at increasing the number of clinical academics in the region. As Birmingham's strategic research partnership, BHP is one of three academic-NHS alliances within the WMRACR. ***Learn more and apply here***.

BHP Clinician scientist explores early nutritional support for emergency abdominal surgery patients

A major new UK-wide clinical trial led by BHP Clinician Scientist Matthew Lee will investigate whether early nutritional support can improve recovery and reduce complications in patients undergoing emergency abdominal surgery.

The trial is supported by the NIHR Health Technology Assessment Programme, and will be one of the first and largest nutritional emergency surgery trials of its kind.

Called TONIC (Timing Of Nutritional Intervention after emergency laparotomy/laparoscopy), the trial will evaluate whether providing early Parenteral Nutrition (PN), or nutritional supplementation delivered directly into the bloodstream, within the first 48 hours after surgery can lead to better outcomes than current standard care. It will be delivered by BCTU.

Education and workforce development update (continued)

BHP programmes

We offer a variety of programmes designed to provide a launch pad for clinicians interested in translational research. In 2025/6, the recipients included:

BHP Starter Fellowships Allowing individuals to start their research career providing cost to cover one year's salary and to undertake a Master's by Research. This highly successful launchpad scheme has now recruited its 11th cohort, for award take up in Autumn 2025. 83% of the 30 graduates of the scheme have secured funding for and undertaken a PhD Fellowship.	Two Starter Fellows – a medical trainee in renal medicine and a diabetes clinical nurse specialist
CARP Clinical Academic Research Partnerships (CARP) support individuals to continue their research careers while delivering clinical service providing salary funding for two programmed activities (PAs) – or 8 hours per week – of protected research time for two years.	Two CARP awards – both working in hepatology
BHP Clinician Scientist 50:50 appointments providing an academic post at **UoB** alongside a consultant role based at one of our NHS trusts. These provide comprehensive mentoring and career development support, notably with applications for prestigious externally-funded fellowships, and aim to develop individuals as successful independent clinical researchers.	Three Clinician Scientists, funded by partners and in collaboration with the Eveson Trust; two posts jointly appointed at **UoB** and **UHB**, and one at **UoB** and **SWB**. The postholders' specialities are haematology, gastroenterology and ophthalmology

Starter Fellowships and CARP will not open for recruitment in 2026/7, but BHP has been successful in securing funding for further BHP Clinician Scientist appointments in 2026/7, with recruitment open during autumn/winter2026 via ***our website***.

Health and Care Professions Oversight Group (HCPOG)

The NMHAPS Strategic Oversight group has been re-named the Health and Care Professions Oversight Group (HCPOG) to take into consideration the diversity of membership, which now includes social work, psychology, and clinical scientists.

In the coming year we will be completing an exercise to fully map regional research capacity and capability with member organisations willing to pool their data so that we can better describe the resources available to health and care professionals across BHP.

The members of the HCPOG have also been actively engaged in preparation of the West Midlands INSIGHT consortium bid to host a second round of NIHR INSIGHT funding from April 2027. We have recently been informed that we have been conditionally approved to host the award with the University of Birmingham leading and all BHP partners named as active collaborators. The new INSIGHT programme incorporates the INSPIRE programme formerly run by the Academy of Medical Sciences.

Developing an institutional PPIEP strategy

We have finalised a single institutional strategy for Patient and Public Involvement, Engagement and Participation (PPIEP), providing a consistent framework across BHP partner organisations and, in particular, Birmingham's NIHR awards.

Vision	Mission
To create a culture where people and communities across Birmingham are meaningfully involved in shaping health and care research, ensuring it is inclusive, equitable, and driven by the needs and priorities of those it serves.	We will embed high-quality public involvement at every stage of health and care research in Birmingham by working in genuine partnership with diverse communities, building trust, removing barriers to involvement, and ensuring that lived experience informs decision-making, improves research relevance, and leads to better health outcomes for all.

Delivery will combine BHP-wide coordination with individual action plans for each NIHR award, while shared infrastructure and resources will support outreach, training, community relationships and the exchange of learning and good practice, reducing duplication while allowing activity to reflect local contexts. A common monitoring and reporting approach will assess who is involved, what difference their involvement makes and where improvements are needed.

The strategy will be overseen by a steering committee including public and community representatives, with strategic oversight from Professor Lorraine Harper and reporting into BHP and NIHR governance.

Strategic aims and objectives

Create inclusive opportunities	Strengthen partnerships, collaboration and governance	Develop skills and capacity in PPIEP	Capture impact	Value, reward and recognise PPIEP
Make involvement opportunities inclusive, flexible, and responsive so everyone can meaningfully shape research.	Work in trusted partnerships, with clear governance to ensure research is co-produced with, and reflects, the communities it serves.	Equip people with the skills, knowledge, confidence and support needed to design and deliver high-quality, meaningful PPIEP.	Make the impact of PPIEP in research visible so that it is recognised, learned from, and sustained.	Ensure people and communities are valued, recognised and rewarded as equal partners in research.

Developing an institutional PPIEP strategy (continued)

Birmingham Public Involvement Hub

Launched in 2024, the Hub streamlines collaboration across the region and provides expert advice, training and delivery support, while strengthening links with local communities to ensure a diverse range of public voices are represented in research.

Since establishment, it has supported more than 350 research applications, trained over 120 public contributors and increased opportunities for involvement across a broad range of specialties and research settings.

As BHP members, researchers can now access, for free:

- ***Introduction to PPIE Training*** – 90-minute, monthly online sessions
- ***One-to-one drop in sessions*** – 30 minutes with a PPIE expert to help develop PPIE plans or provide general PPIE guidance
- ***Pre-Grant PPIE Fund*** - a BHP scheme offering up to £500 per award to fund PPIE at the pre grant stage. 11 have been awarded since the scheme's launch in early 2026 with several more applications under review
- ***Online resources*** – wealth of advice, templates and guidance, as well as case studies

To contact the PPIE team, email: ***bhp-publicinvolvement@contacts.bham.ac.uk***

EPICare and DECODE:
Lived Experience at the Heart of Digital Innovation

As part of the ***Mental Health Mission Midlands Translational Centre*** (**UoB**, **BSMH**), EPICare and DECODE are pioneering digital mental health tools shaped by lived experience. EPICare focuses on personalised support for those accessing Early Intervention in Psychosis services. From bid development to delivery, Experts by Experience have guided every stage, helping define meaningful outcomes, accessible language, and features like a private diary to enhance autonomy.

A dedicated Lived Experience Advisory Group (LEAG), formed of individuals with lived experience of psychosis or caregiving, continues to influence EPICare's design and implementation. Their feedback has shaped software development, content creation, and national rollout plans.

DECODE, part of the Mood Disorder workstream, has embedded youth voice into PPIEP since June 2024 with a dedicated group of youth advisors (18-25). Across the Demonstrator site there is a vibrant Midlands Advisory Group (16-25) sitting within the Children and Young People's Mental Health (CYP) Workstream, with new cohorts (11-15) and parent/carer groups underway, the Centre is building a dynamic, inclusive research environment.

Supported by The McPin Foundation, these groups co-produce materials, test digital platforms, and share insights through blogs and events. As one youth advisor shared, "being involved in research has helped me find my voice. It's truly empowering."

The Midlands Translational Centre is committed to creating safe, sustainable spaces for young voices to lead the future of mental health research ensuring their experiences shape the outcomes that matter most.

One year of the Central and North West Midlands NIHR Commercial Research Delivery Centre

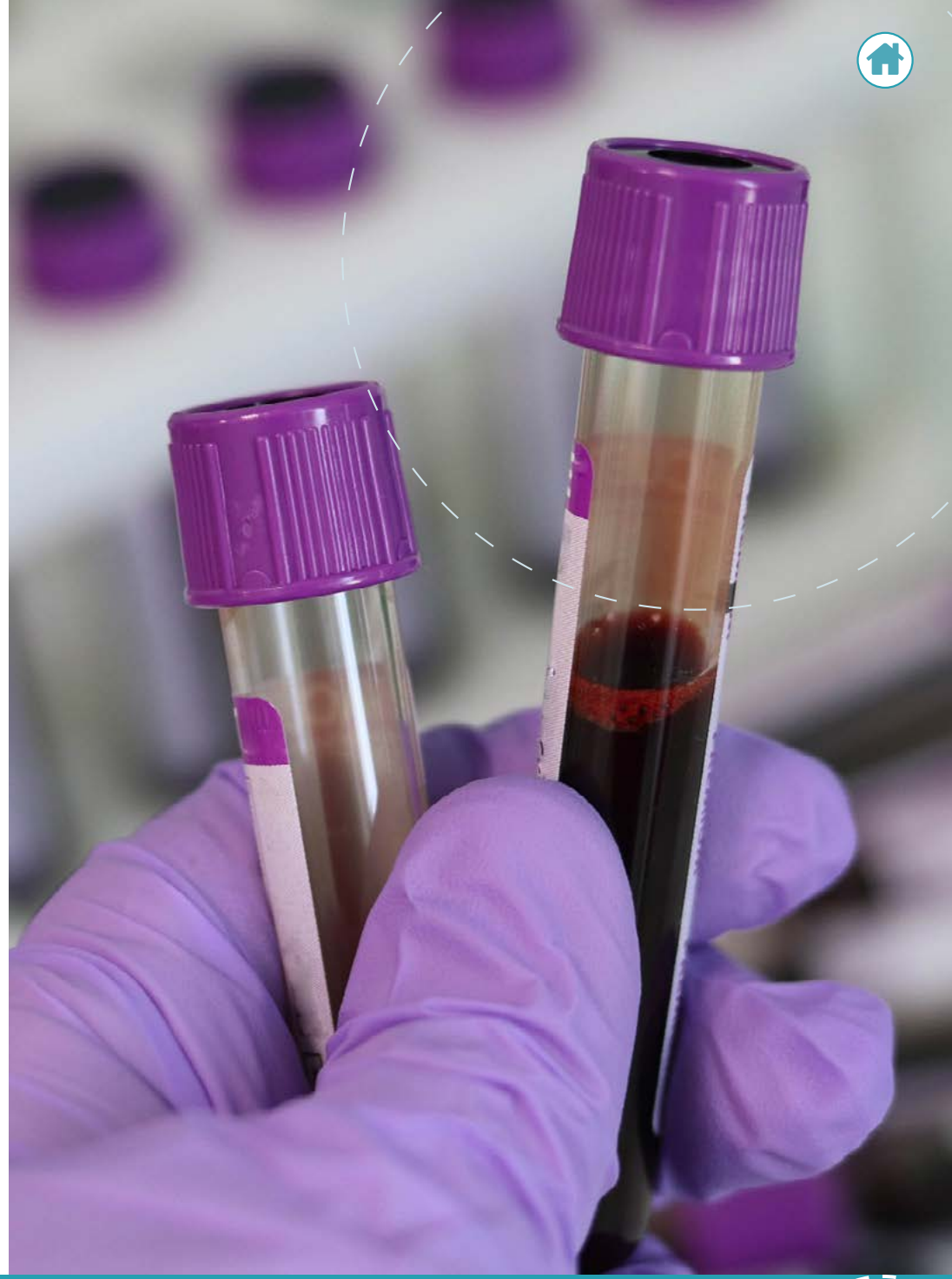
Having commenced in April 2025, the £7m Central and North West Midlands (CNWM) NIHR Commercial Research Delivery Centre (CRDC) hosted by **BWC, and including all BHP members**, has now been operational for just over a year.

In that time, the CRDC has demonstrated strong performance against its year one objectives, with 81% of studies opened within the national 60-day benchmark and 86% of studies recruiting their first participant within 30 days of opening. Commercial interventional recruitment remains above national performance, with partners recruiting 433 participants and achieving 78% of pre-pandemic recruitment levels compared with 47% nationally, however recruitment remains low overall compared to our population. These results demonstrate the value of the CRDC model but also highlight opportunities to further increase research activity and patient participation across the population served.

Over the last financial year, the CRDC has secured almost an additional £1m for partners for:

- An electronic Trial Master File (eTMF)
- Industry Manager support (**UHB**)
- PI mentorship
- Primary Care Research Practice Managers
- Strategic support for unblocking the 90-day, including a governance/contracting lead, an Operational lead for 'Hospital to Home' and Radiology, Pharmacy and Labs Leads.

This demonstrates the support from funders regionally and nationally to deliver on our ambitions for the region.



Reducing bureaucracy in clinical trials update

BHP has a large and diverse clinical trials community, with extensive expertise in many areas. However, the increasing size and scale of its trial portfolio, coupled with a rapidly changing national landscape creates increasing complexities.

Our Reducing Bureaucracy in Clinical Trials Programme aims to accelerate trial set-up by implementing harmonised measures that increase the efficiency of the set-up of clinical trials across BHP, from initial concept through to first patient recruited.

Key workstreams in 2025/6 include:

- **Standardisation of clinical trial performance metrics**

The way clinical trial set-up timelines and performance metrics were defined and reported across BHP partner organisations varied greatly, limiting meaningful benchmarking and opportunities for performance improvement.

To address this, a **common set of BHP data definitions has been agreed** for key stages of trial set-up and delivery, drawing on the work of the Black Country collaborative. These definitions are aligned with national expectations, including the Government's target of setting up commercial clinical trials within 150 days.

The next stage of the project will focus on embedding the agreed definitions within local policies, procedures and reporting systems. This will include ensuring that staff understand the 150-day target and its implications for research delivery, alongside training and change-management activity to support consistent application across the partnership.

- **Improving sponsor-site communication and trial governance**

We identified improved communication, transparency and collaboration between sponsors and participating sites as critical to the efficient delivery of clinical studies.

BHP partners have collectively invested in Florence, a digital research management platform that supports document exchange, milestone tracking, sponsor engagement, remote monitoring and audit readiness while helping organisations maintain regulatory compliance.

To maximise the value of this investment, the Reducing Bureaucracy Programme is now supporting consistent adoption of Florence across research teams, engagement from operational staff and key stakeholders, and greater alignment of local processes where appropriate. Sustained organisational commitment will be important to realising the platform's full benefits for research efficiency and regional collaboration.

- **Research contracting and data sharing**

We recognised that delays in establishing research agreements were a significant barrier to speeding up the activation of clinical studies.

Several improvements have now been introduced, including an agreement to implement a common BHP master data-sharing framework; and targeted contractual training to improve knowledge and confidence among research staff to accelerate contract execution.

The next stage will involve embedding the agreed processes with BHP organisations, applying lessons learnt from the training programme and continuing to develop collaborative approaches to resolving contractual challenges.

- **Workforce capability and training**

Variations in the knowledge, experience and confidence of staff responsible for key research activities have been linked to delays in research processes.

The programme is developing a coordinated training offer drawing on expertise from across BHP. The first workshop, focused on research contracting, was well attended and positively received. Further sessions are planned for investigators, research and development teams, clinical research staff and support services. These will focus on what is required to achieve the 150-day target and how study set-up processes can be streamlined.

2026/7 and beyond

The next phase of the programme will focus on sharing good practice and accelerating implementation across BHP organisations, including developing approaches to achieving the 150-day target for both commercial and non-commercial studies, and implementing recent Health Research Authority IR(ME)R guidance to support faster radiology approvals.

The programme will also evaluate and encourage wider adoption of the HRA Letter of Intent process to improve planning at the grant-award and site-selection stages.



BHP Evaluation Service

Our Evaluation Service provides time-sensitive, formative evidence on innovations in healthcare and capacity building, carrying out agile and effective service evaluations, often running in parallel with service implementation. In 2025/6, its key projects and outputs were:

Digital Health Collective

With leadership from BHP's Evaluation Service, the collective brings together individuals to address some of the persistent disparities in digital health engagement. It comprises a diverse group of clinicians, citizens and technology providers, supported by academics, and voluntary, community, faith, and social enterprise organisation staff from the West Midlands. Its ongoing projects include:

Raising digital health literacy

The theme of lack of digital health literacy was raised by members as a topic to explore collectively, noting challenges of inclusive language, and support for using digital tools. Two sub-groups have been formed: one looking at the effectiveness of different delivery locations and content of digital health support; the other into the use of pictorial language with the aim of supporting access to primary care systems.

Amar Doctor

Amar Doctor is an AI-enabled translation tool designed to support triage and access in general practice, with functionality to capture symptoms, clinical problems, across diverse Bangladeshi dialects. Currently in use in Bangladesh, MedAi Health is in the process of adapting the App for Bangladeshi communities in the UK. A sub-group of the Collective are supporting this adaptation linking the developers with a range of representatives from the local Bangladeshi community and clinicians to ensure it captures local dialects and workflows.

Inclusive health coaching in primary care

In December 2025, the BHP Evaluation Service working with BCHC was awarded £140k by NIHR to review the role of health and well-being coaches in multi-disciplinary primary care teams.

These are trained individuals that set shared goals with patients and support them in making a range of positive lifestyle choices that can improve their overall health, including better diet, increased physical activity, and improved mental well-being.

The potential value of these coaches has been recognised by NHS England and funds have been provided to train and introduce them into primary care teams. However, because the role is relatively new exactly what they do is little understood, and there is limited interest from patients who don't understand what coaches can offer, particularly in those communities that can benefit the most.

The aims of this work are to develop guidance for senior staff in primary care to help them support coaches in their organisations. Alongside this it will develop information and messaging around the role of coaches to promote interest and engagement in all sections of the patient population.

Developing an evaluation toolkit for neighbourhood multi-disciplinary teams for children and young people

Children and young people's (CYP) health and wellbeing have worsened in the last decade as child poverty has increased. There are also long waits in emergency departments and difficulties getting to see a GP. To help tackle this, the government wants to integrate health and social support for CYP and make this accessible within our poorest neighbourhoods. With limited budget allocated, these new neighbourhood services must actually help children and young people lead healthier and happier lives and provide good value for money.

In January 2026 the team, working with BWC, was awarded £115k by NIHR to develop a practical evaluation toolkit that can be used to collect and understand evidence of safe and effective integrated care by neighbourhood multi-disciplinary teams for children and young people (NMDTs) across multiple domains.

BHP Evaluation Service (continued)

Papers published

- *Experiences of families using an early example of a neighbourhood multidisciplinary care team for children and young people in Birmingham, UK: a qualitative exploration of acceptability* [August 2026]
- *Understanding digital inclusion through the transformation of services and users: a narrative review and novel framework* [April 2026]
- *Understanding acceptability of AI triage tools amongst underserved populations: lessons from the early phases of co-production with Bangladeshi communities in Birmingham, UK* [December 2025]
- *Increasing the inclusivity of digital health co-production: an integrative review* [October 2025]
- *Understanding the influences on the design and delivery of an integrated child health and social care service in underserved communities in the UK: A qualitative exploration using the SELFIE framework* [October 2025]
- *Mixed-method evaluation of the Fairer Futures Fund: a £22.2 m public health initiative designed to reduce health inequalities in Birmingham and Solihull* [September 2025]
- *Early activity and impact of a neighbourhood multidisciplinary team that integrates health and social support for underserved children and young people in Birmingham, UK: an observational study* [September 2025]



Appendices

Board composition 2025/6

Mr Richard Meddings CBE	BHP Chair
Professor Neil Hanley	Pro-Vice-Chancellor and Head of the College of Medicine and Health, UoB
Professor Adam Tickell	Vice-Chancellor and Principal, UoB
Mr Matt Boazman	Chief Executive Officer, BWC
Professor Sir Bruce Keogh	Chair, BWC
Mr Jonathan Brotherton	Chief Executive Officer, UHB
Dame Yve Buckland	Chair, UHB
Professor Aleks Subic Professor Mike Caine (interim)	Vice-Chancellor and Chief Executive Officer, Aston University
Professor Anthony Hilton Professor Claire Farrow	Pro-Vice-Chancellor and Executive Dean of the College of Health and Life Sciences, Aston University
Ms Diane Wake	Chief Executive Officer, SWB
Sir David Nicholson	Chair, SWB
Mr Matthew Hartland	Chief Executive Officer, ROH
Mr Simon Page	Chair, ROH
Ms Roisin Fallon Williams	Chief Executive Officer, BSMH
Mr Philip Gayle	Chair, BSMH
Mr Richard Kirby	Chief Executive Officer, BCHC
Professor David Sallah	Chair, BCHC
Mr Tim Jones Ms Amanda Risino	CEO, HIWM
Jonathan Pearson	Chair, HIWM

Glossary of terms

AI	Artificial intelligence
BCHC	Birmingham Community Healthcare NHS Foundation Trust
BCTU	Birmingham Clinical Trials Unit
BHIC	Birmingham Health Innovation Campus
BHP	Birmingham Health Partners
BRC	NIHR Birmingham Biomedical Research Centre – delivered in partnership between UoB, Aston, UHB, BCHC, BWC and SWB, working with the Universities of Oxford and Keele
BSMH / BSMHFT	Birmingham and Solihull Mental Health NHS Foundation Trust
BWC	Birmingham Women's and Children's NHS Foundation Trust
CARP	Clinical-Academic Research Partnership
CNWM	Central and North West Midlands
CRDC	Commercial Research Delivery Centre
CRF	NIHR/Wellcome Trust Clinical Research Facility – delivered in partnership between UoB, UHB and BWC
CTIMP	Clinical Trial of an Investigational Medicinal Product
DGFT	The Dudley Group NHS Foundation Trust
ENT	Ear Nose and Throat
HIWM	Health Innovation West Midlands
LIPF	Local Innovative Partnership Fund
MRC	Medical Research Council
NIHR	National Institute for Health and Care Research
NMAHPs	Nurses, Midwives and Allied Health Professionals
PHTA	Precision Health Technologies Accelerator
PPIE	Patient and public involvement and engagement
REDCap	Research Electronic Data Capture
ROH	The Royal Orthopaedic Hospital NHS Foundation Trust
SAS	Specialist, associate specialist, and specialty doctors
SDE	Secure Data Environment
SWB	Sandwell and West Birmingham NHS Trust
UHB	University Hospitals Birmingham NHS Foundation Trust
UoB	University of Birmingham
VW	Virtual ward



Birmingham Health Partners

Collaboration. Innovation. Application.