

NHS Greater Glasgow and Clyde	Paper No. 25/140
Meeting:	NHSGGC Board Meeting
Meeting Date:	30 October 2025
Title:	Department of Research & Innovation Board Report
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1. Purpose

The purpose of the attached paper is to:

- Describe R&I key achievements and activity in 2024, areas of strength and for priority for R&I this year

2. Executive Summary

The paper can be summarised as follows:

- Active research and innovation portfolio – over 1000 studies active in the Board.
- Drop in total recruitment to studies compared to 2023, particularly non-commercial research. This will impact activity-based funding component of the Board funding from the CSO
- Commercial CTIMP (regulated clinical trial) recruitment has increased, and the associated Board income has surpassed previous year
- New funding from VPAG programme – 5-year UK agreement brings opportunity to build research infrastructure
- New Commercial Research Delivery Centre in TLC
- Strength in innovative digital capability with projects using imaging, tissue and genomic data

3. Recommendations

The Board is asked to consider the following recommendations:

The Board is asked to note the research and innovation activity, areas for priority and upcoming opportunities

4. Response Required

This paper is presented for assurance.

5. Impact Assessment

The impact of this paper on NHSGGC's corporate aims, approach to equality and diversity and environmental impact are assessed as follows:

- | | |
|------------------------|------------------------|
| • Better Health | <u>Positive</u> impact |
| • Better Care | <u>Positive</u> impact |
| • Better Value | <u>Positive</u> impact |
| • Better Workplace | <u>Positive</u> impact |
| • Equality & Diversity | <u>Neutral</u> impact |
| • Environment | <u>Neutral</u> impact |

6. Engagement & Communications

The issues addressed in this paper were subject to the following engagement and communications activity:

Input & review by R&I Senior management team

7. Governance Route

This paper has been previously considered by the following groups as part of its development:

Boardwide Clinical Governance Forum – 18 August 2025

Corporate Management Team – 1 September 2025

Clinical and Care Governance Committee – 4 September 2025

8. Date Prepared & Issued

Prepared on: 7 October 2025

Issued on: 22 October 2025

Department of Research & Innovation

Board Report 2024

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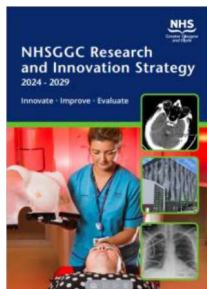
Foreword

As we reflect on the achievements of NHSGGC R&I in 2024, a huge thanks to all health care researchers, patients and carers, clinicians and members of the public involved in research and innovation in Glasgow over the last year. Not least, thanks to Professor Julie Brittenden, R&I Director in NHSGGC who since 2015 set the course for our future strategy and enabled so many innovative initiatives. Glasgow Health Science Partnership (GHSP) continues as the backbone for Research & Innovation (R&I) enabling the spectrum of discovery, development, delivery and adoption.

The pressures facing our health and social care system are significant and there are signs of impact in the R&I landscape. Addressing the complexities of healthcare through rapid, safe assessment of new medicines, interventions and technologies is more crucial than ever to achieve Moving Forward Together and our key corporate objectives - Better Care, Better Health, Better Value, Better Workplace.

Key Achievements

- **Launch of the NHSGGC R&I Strategy 2024-29**



Our new NHSGGC R&I Strategy was launched in August 2024 setting the benchmark on which to build Research & Innovation over the next five years. Central to the strategy is collaboration, building our workforce and enabling inclusive, innovative research and technology development. An implementation plan is in place and is being taken forward by the R&I Senior Management Team.

- **New clinical trial applications** to the MHRA for NHSGGC & University of Glasgow (UoG) Co-Sponsored studies.

NHSGGC are Co-Sponsors with the UoG for up-coming clinical trials in including Stroke, Cardiovascular disease and Rheumatology, all supported by Glasgow Clinical Trials Unit. In Q4 2024 four applications for Clinical Trial Authorisation were submitted to the MHRA: TARGET, CLASP, NOVEL and PROTECT. The PROTECT study, with Prof Colin Berry as Chief Investigator, is the first Gene therapy and First In Human trial (FIH) for the Co-Sponsors.



Innovate • Improve • Evaluate

- **New investment** from the pharmaceutical industry



Voluntary Scheme for Branded Medicines Pricing, Access and Growth (VPAG) is a new UK-wide investment programme to support the delivery of clinical trials in the NHS. NHSGGC is one of four 'Hubs' in Scotland receiving new funding from this year and over the next four years, to build our existing research infrastructure. A new Glasgow Clinical Research Delivery Centre is being established on the QEUH Campus in the Teaching and Learning Centre. This will increase our capacity to take forward practice-changing research.

- **First in UK ISO 20387:2018 accreditation** for Biobanking Standards

UKAS have awarded accreditation to the NHSGGC Biorepository to ISO 20387:2018 Biobanking Standards– the first Biobank to be accredited by UKAS. This reflects the team's drive and motivation to ensure the highest quality of approach in the field, being an exemplar for others and will further enable future opportunities for research collaborations.



- **Artificial Intelligence (AI)** for Chest X-Ray Reporting

Chest x-rays (CXR) are often the first investigation for suspected lung cancer. The RADICAL study is assessing AI software for automatically categorising chest X-rays to support clinical decision making, distinguishing between 'normal' images and those with abnormalities such as masses or lung nodules. Quicker identification of CXRs that are suspicious for cancer, allows prompt reporting by radiologists and quicker CT scans, reducing the time to diagnosis. Sponsored by NHSGGC, funded by the Detecting Cancer Early (DCE) programme, and in partnership with Qure.ai Technologies, 65,000 CXRs have been analysed from Clyde, North and South sectors in NHSGGC in 2024. The final report is expected early 2025 and will inform the Scottish Government policy on AI use in the DCE programme.



1. Delivering Research & Innovation in 2024

New funding opportunities for growing our R&I capacity and capability have been taken forward in 2024, including the significant new UK-wide investment in the NHS to support commercial clinical trial delivery the Voluntary Scheme for Branded Medicines Pricing, Access and Growth (VPAG).

Voluntary Scheme for Branded Medicines Pricing, Access and Growth (VPAG) 2024



This agreement between the UK Government and ABPI includes an investment programme across the four UK nations to strengthen delivery of commercial clinical trials. In Scotland, this will be achieved by expanding existing dedicated commercial clinical research infrastructure, and by increasing workforce capacity and resources. Phase one is underway and involves the creation of dedicated space, infrastructure, staff, and models to effectively deliver commercial research within the four newly created Commercial Research Delivery Centres (CRDC) located in NHS Grampian, Tayside, Lothian and Greater Glasgow and Clyde.

Glasgow CRDC is being established in the Teaching and Learning Centre on the QEUH Campus. This space offers room for CRF expansion (releasing clinical space in level 5 INS), a 'front door' for industry partners to meet with the clinical research teams, for conducting Site Qualification and Initiation Visits, to host external monitors and auditors, administrative space for virtual patient visits and data management. There is also large lab space for research sample processing and short-term storage. The funding for the CRDC also offers opportunity to increase our research workforce, recurring until 2029, enabling time to build-in sustainability using ongoing reinvestment of the capacity building component of commercial contracts.

Deliverable objectives associated with this investment include a demonstrable uptick in commercial research delivery (number of studies, number of patients taking part) UK-wide. In addition, the investment programme are looking for initiatives to ensure inclusive access to clinical trials: enabling participation closer to home, easier access to clinical trials. As one of the four 'Hubs' in Scotland, phase 2 of the programme will be to develop and support 'Spokes' to extend the reach of Clinical Trial access, and retention during the follow-up phase.

There is also a measurable objective to reduce commercial trial set up timelines in the NHS and a focus on simplifying and streamlining review required for approvals. Improving set up times is a priority for NHSGGC and this will further maximise our attractiveness for Sponsors to select our Health Board as a study site, and maximise the window of opportunity for patient participation.

Improving study set-up times

For commercial contract research we are an active partner in the [National Contract Value Review \(NCVR\)](#) which means reciprocal recognition of contract values across NHS organisations in the UK. This reduces the time spent in negotiation. This year, NCVR has been extended to include studies of greater complexity and intensity (Phase I and Advanced Therapies) and one of our commercial study coordinators has been selected as one of two NCVR Champions for NHS Research Scotland. For VPAG, the time to set up studies will be reviewed at UK level, and nationally through the NRS Management Board and Scottish Advisory Board.

As part of a Task and Finish project with NRS Central Management Team, the R&I Informatics team have enabled NHSGGC commercial contract data inclusion in the UK-wide data set. A new live dashboard has been developed by NRS CMT. In 2024, NHSGGC has above Scottish average R&I approval timelines for commercial contract research, however, similar to other Boards, our time from site Regulatory Green Light to First Subject In (FSI) averages two months, this is twice our key performance indicator. For highly specialised, early phase and rare conditions this is expected, but for globally competitive later-phase studies this is too long and a key area for us to focus improvement and engage all available tools such as use of Research Registries (SHARE), our EHR data through the Safe Haven, and proactive communication. This is being taken forward through the R&I Research Resilience and Growth Group.

Research Activity

NHSGGC has over 1000 active studies (recruiting and in follow-up) across all therapeutic specialties. However, 2024 did see a drop in overall patient/participant recruitment (down 19%) compared to 2023 (Table 1). In the non-commercial (NHS/academic driven, public/charity funded) study portfolio, completion of higher recruiting studies in Emergency Medicine, Ophthalmology and Cardiovascular Specialities accounts in part for this, along with an absence of newly initiated higher recruiting projects. Nationally, there is a downward trend in number of non-commercial clinical trials (CTIMPs), and locally there has been a reduction in Glasgow-led clinical trials: in part, the impact of a reduction in core CTU funding being realised. Study performance is regularly reviewed and addressed through CRF Specialty-specific operational groups, however a priority for the teams going forward will be on the pipeline of opportunity for participation in non-commercial studies which the size of population in NHSGGC would enable significant contribution to. Part of the Board's annual funding from the Chief Scientist Office (CSO) is Activity-based Funding (Researcher Support and Service Support Costs); the top-line reduction in activity requires reflection, analysis and actions to redress and the team are fully committed to this and improving our position.

Table 1 NHSGGC patient recruitment by year by study type (by calendar year)

Recruitment						
All Specialties	2019	2020	2021	2022	2023	2024
Commercial	1,509 (294*)	1322 (689*)	679 (384*)	764 (208*)	1013 (242*)	874 (313*)
Non Commercial	6,587 (1698*)	7,226 (1318*)	7,847 (2,591*)	6,763 (722*)	7,566 (652*)	6034 (452*)
Total	8,096 (1992*)	8,545 (2007*)	8,526 (2,974*)	7,527 (930*)	8,579 (894*)	6908 (765*)

*of which CTIMP recruitment

The number of patients recruited to commercial clinical trials (CTIMPs) has increased, and is as strong as pre-Covid (Covid vaccine trials boosted CTIMP recruitment figures in 2020/21). Sixty-eight percent of clinical trials active in the Board are commercially sponsored. Early phase clinical trials (phase I and Phase II) account for 44% of clinical trials in the Board, a key area of strength for the Clinical Research Facilities and reflective of impactful Experimental Cancer Medicine Centre (ECMC) investment. Net commercial income to the Board has surpassed 2023. (Table 2).

Table 2 Net commercial income (by FY)

Summary	2019/20	2020/21	2021/22	2022/23	2023/24	2024/25
Duration	M1-12	M1-12	M1-12	M1-12	M1-12	M1-9
Net commercial income (invoiced)	£5,967,057	£5,584,744	£7,338,575	£8,752,082	£5,902,599	£6,094,383

The Pharmacy Clinical Trials team track Phase III projects to calculate both projected and real savings where standard care therapy may be replaced by experimental study treatment (saving NHSGGC standard spend) or where the standard care therapy is funded by Sponsors in addition to provision of the experimental arm. This demonstrates added benefit of potential savings to the drug budget from undertaking Clinical Trials. Actual cost savings from 2019-2024 are now tracking at ~£5.6M as recruitment continues to open trials that offer savings against high cost standard care medicines that are supplied by Sponsors or where trial medication replaces standard care.

2. Building our Research Workforce and Infrastructure

In addition to VPAG, Glasgow continues to work closely with other UK-wide initiatives to improve our research capability. For instance, we are part of the UK Vaccine Innovation Pathway, taking forward vaccines for infectious disease and cancer vaccine research. We are in discussions to expand the Cancer Vaccine Launchpad to Scotland, currently active in NHS England only. The Advanced Therapy Treatment Centre Network (ATTC) have new nation-wide investment (see section 5). As part of the NIHR Mental Health Mission, competitive funding applications were open for infrastructure to support a UK Networks Mood Disorder research clinic. Glasgow have been successful in a £750K award to take this forward with a goal to increase research access for this specialty.



Vaccine Innovation Pathway

Alongside the VPAG programme, the UK Vaccine Innovation Pathway aims to build and enhance the capacity and capability across NHS research centres to deliver vaccine research from traditional and mRNA vaccines to cancer immunotherapy (cancer vaccines) such as personalised neoantigen cancer therapy. Through the VIP for infectious diseases, NHSGGC is a centre for a Norovirus vaccine study, with a strong emphasis on inclusion of older age groups. The Beatson WoSCC is one of the first centres in the UK to deliver a novel personalised cancer immunotherapy vaccine for colorectal cancer (see section 8), and we expect to join the [Cancer Vaccine Launchpad in 2025](#) which will enable greater efficiency in trial access and 'match-making' process. .



Glasgow Health Science Partnership

Our strong relationship with the University of Glasgow (UoG) through Glasgow Health Science Partnership (GHSP) continues. Four new Glasgow-led CTIMPs are in setup stage, all fully funded, and have been submitted for Clinical Trial Authorisation by the MHRA. All four are Co-Sponsored through our GHS Partnership, and have pharmacovigilance, monitoring and governance oversight from the R&I team and are supported by Glasgow Clinical Trials Unit (CTU). The PROTECT Trial will be the first NHSGGC & UoG Co-Sponsored First in Human (FIH) and Gene therapy clinical trial. The trial is testing the feasibility and safety of gene therapy (AdTIMP-3) to prevent graft failure in Coronary Artery Bypass Grafts.

The UoG [Centre of Clinical Trials Collaboration \(CETC\)](#) offers new infrastructure to support researchers to navigate and access available support and expertise and mentorship for research design and grant applications. Over the next year there will be significant progress on

transformation of the Clinical Trial Units which will enable confidence and growth for future research collaborations. There will also be investment to modernise and expand the Trusted Research Environment (TRE). Key priorities include developing enhanced digital infrastructure, establishing dedicated technical personnel to enhance service delivery and innovation and launching key Artificial Intelligence/Machine Learning workflow development projects to drive future advances. The West of Scotland (WoS) Safe Haven and WoS Innovation Hub will continue to work closely through this evolution.

Building Research skills

The NHSGGC GCRF Education team have continued to build UK-wide collaboration for research-training, particularly through the UKCRF Network. The GCRF Education and Quality (E&Q) lead holds the Deputy Chair for UKCRF Network workforce development theme (WP3) hosting support forums for CRF managers and leaders, and teaching on the UKCRF Leadership Programme. In addition and in collaboration with Edinburgh CRF and the NIHR, the education team has progressed the implementation of the NIHR PI Pipeline Programme in Scotland – a new programme to support research nurses and midwives become Principal Investigators (PI). The candidate selection for the first Scottish cohort is complete, with the teaching element commencing in March. This programme adds to the work already completed to support the NIHR Associate PI Scheme, increasing capacity and capability of the current workforce. Across NHSGGC there are currently 29 accepted and active applications on the API scheme, and 97 NHSGGC staff have completed the programme since it began.

As well as the now established PI training and bite-size workshops, the Education team has initiated a 'Welcome to research' study day to support new researchers and new research staff induction. A comprehensive 3 day research induction programme has also been established and well attended from researchers across the West of Scotland. We are also collaborating on the development and delivery of a new (UoG) MSc in MedTech and a new MSc in Clinical Trials: the design phase is complete and the first course plans to accept students in September 2025.

NHSGGC has a reputational strength for enabling research-specific student placements (hosted within the GCRF) for student nurses and medical students and continues to be a well-evaluated placement. The GCRF was approached by the RCN to become the first CRF to support those on the nursing Cadet Scheme, a scheme designed to help young people develop their skills and support them towards a career in nursing. This has evaluated extremely well, with further placements anticipated.

3. Inclusive Research

Making research available and accessible across NHSGGC will help to improve inclusivity. Currently across NHSGGC we have bespoke research facilities at the GRI, QEUH, the Beatson WoSCC and the Dental Hospital. Space to develop a new Research Facility has been identified in the Royal Alexandra Hospital and plans are underway to develop the space. The ambition will be to have a clinical area for patient visits, a Clinical Trials Pharmacy, and lab space for sample processing and short-term storage. Being able to process research samples alone will open up opportunity for a much greater range of clinical studies including commercial research.

Patient and Public Involvement and Engagement (PPIE) is active across research design and delivery in NHSGGC. GCRF support have developed, delivered and supported a breadth of public and patient involvement and engagement events across a range of specialties. There has been significant focus on the upskilling of staff in PPIE through workshop and conference attendance, with a particular emphasis on Equality, Diversity and Inclusion. The team are taking forward a programme of work using a Frontline Equality Assessment Tool (FEAT) in collaboration with NHSGGC PEPI and EDI teams. For cardiovascular disease, there has been particular emphasis on improving women's access to cardiovascular research. The team created Talking Head videos covering topics including diagnosis, involvement in research, research experience, and 'own words' to describe study participation. With a focus on hypertension, the cardiovascular team invited patients and their families to come and hear about the results of projects they participated in, and the direction of travel for future research. Building on previous work, the GCRF team supported a hypertension awareness day at Glasgow Mosque. Working with the Scottish Huntington's Association, the team helped to develop a video and educational materials for use on the SHA website, describing research participation experience. Upcoming patient and families' events are in planning for rheumatology and paediatrics.

The Cancer CTU (GO CTU), ECMC and Beatson CRF have a mature and embedded PPIE programme. The Glasgow Adult ECMC Broadening Participation Working Group which was formed to help drive initiatives in PPIE and EDI, held its first meeting in January 2024. Discussions centred on current and future PPIE strategies, outreach to potential new PPIE members and under-represented groups in Clinical Research, and potential collaborations with various groups to help meet these objectives. PPIE contribute to reports and grant applications and a designated member of the PPI Panel is a committee member and inputs to the monthly Clinical Trials Executive Meeting (CTEC). Our PPI colleague is pro-active in addressing equality needs to ensure, where possible that as many patients have access to treatment within clinical trials.

4. Optimising Tissue and Data

Health and Social Care Data for Research & Innovation

The West of Scotland Safe Haven has initiated 70 new projects, datasets, and feasibility studies in 2024, and continues to work closely with colleagues in the West of Scotland Innovation Hub to deliver novel data-driven approaches to improve local clinical services. The Safe Haven portfolio for this year has included linked datasets to support surveillance of severe respiratory diseases, imaging and clinical data for AI-based studies (such as RADICAL and ACCEPT), and continued collaboration with the Regional Scottish Safe Haven network on new federated governance pathways. The West of Scotland Safe Haven provides access to a variety of unique, CHI-linked secondary care datasets derived from the world-class medical facilities serving the Greater Glasgow population. The extended data services offered by the West of Scotland Safe Haven include provision of ethnicity data for local service planning, hosting of the TriNetX real-world data platform to support trial recruitment, and regular data jobs for Public Health Scotland-funded studies such as ASSIST and CHARISMA.

The West of Scotland Safe Haven has initiatives supporting clinical trials using real-world data, such as working with the CRF and research teams to enable more targeted recruitment aid (e.g. THARROS COPD study), or dashboards to help in designing high-throughput trials. New work for 2024 has included datasets for epilepsy, infectious diseases, cancers, and surgical procedures. Radiological imaging studies continue to be supported with access to a platform that can connect to local servers and de-identify large volumes of X-ray and CT images. The support from our eHealth and Diagnostics Directorates has been essential in delivering this and is a strength for NHSGGC. We will continue to build on this approach and in particular aim to expand our portfolio of work with Primary Care and in community settings in keeping with our moving forward together principles.



Tissue for Research & Innovation

In 2024, the Biorepository has been involved in 90 research projects, and provision of over 600 tissue samples to 20 different organisations. We continue to support the [SHARE Biobank](#) for consented blood samples via NHSGGC labs, taken for diagnostic purposes but surplus to requirement. As well as a central lab for projects such as PRIME-RT and iCORMICA, the Biorepository are also key to the delivery of UoG Living Lab Radiogenomics and Cygnus projects. We continue to support the delivery of the translational arm of the Glasgow-led SCOT trial – TransSCOT; one of the largest collection of colorectal cancer samples globally. Resource within this study has enabled research collaborations across the UK and Europe. The Biorepository's HTA licence required for Tumour-infiltrating lymphocyte (TIL) handling for Advanced Therapy cancer trials has been renewed following inspection.

A major achievement in 2024 has been the achievement of UKAS accreditation to ISO20387:2018 Biobanking Standards for tissue, body fluid and data across the scope of acquisition, preparation, presentation, storage and distribution. The Biorepository are the first to be accredited under this standard by UKAS, and 12th globally for human tissue. This reflects the team's drive and motivation to ensure the highest quality of approach in the field, being an exemplar for others and will further enable future opportunities for research collaborations.

Opportunities to optimising digital pathology in NHSGGC are growing, including new innovation projects such as development of a Foundation AI model (FM) to enable understanding of all aspects of cancer using Whole Slide Images (WSI).

5. Novel Medicines and Technology



Advanced Therapies

In March 2024, the NIHR announced £17.9m in funding to the Advanced Therapy Treatment Centre (ATTC) network, supporting it for an additional four years to enhance the UK environment for advanced therapy medicinal product (ATMP) clinical trials. NHSGGC continue to be represent Scotland, along with colleagues in Edinburgh (NHS Lothian and University of Edinburgh) and Scottish National Blood Transfusion Service (SNBTS) within the Northern Alliance Advanced Therapy Treatment Centre Network (NAATTC). The share of funding for NHSGGC will help to maintain our reputation as a location of choice for advanced therapy research within the UK.

The number of Advanced Therapy clinical trials hosted within NHSGGC continues to grow and includes in-vivo and ex-vivo gene therapies and other cellular therapy products. There are 30 ATIMP trials open or in follow-up currently with 11 others in set-up. Industry collaborations via CSO should lead to further expansion in this area with the use of novel mRNA gene therapy products for the treatment of cancer. Additional expansion is being seen in wider therapy areas – with trials in solid tumour oncology, cardiovascular and rheumatology/immunology diseases.

The paediatric neurology research team have opened a complex ATIMP trial – EXPEDITION which is a clinical trial delivering a gene therapy intra-ventricularly to children with SCN1A-positive Dravet Syndrome. This has required close interdepartmental working with the paediatric neuro and CRF teams, neurosurgeon, theatres, pharmacy (trials & aseptic) and external stakeholders - the Sponsor and other research sites within the UK and internationally. The team are currently setting up the follow-on trial from this project. NHSGGC continues to be approached and on-boarded by the pharmaceutical industry as a centre of excellence in Scotland to deliver ATIMP products when they are fully licensed.

West of Scotland Innovation Hub

The WoS Innovation Hub acts as a “front door” and single point of contact for both innovators and industry and provides end-to-end support for innovation projects. The aim is to transform delivery of health and social care by driving forward the early adoption, or early rejection, of novel devices, products and services through an end to end pathway. Core WOSIH business includes the support for Contracts for Innovation (formally Small Business Research Initiatives (SBRIs)). Examples of current projects include:

- The development of a clinical dashboard and patient-facing app for people at risk of or early signs of dementia to manage their medicines;
- Near-patient bilirubin testing to enable family centred care at home for babies;
- Remote asthma management for young people to help proactive, targeted management and prediction of asthma attacks;
- Technology to better understand menopause - symptom identification and options for support and self-help;
- Wearable devices for detecting physiological signs of overdose to help reduce drug deaths;
- Co-designing a data-driven clinical system for patients with ADHD

The Hub continues to build expertise and processes to enable R&I projects with Artificial Intelligence (AI) solutions for healthcare pathways and clinical decision making. The RADICAL study is in the final stages of analysis and reporting. This project assesses AI for triaging patients who have been referred for a chest X-Ray (CXR): 65,000 CXRs have been analysed from Clyde, North and South sectors in NHSGGC. The final report is expected early 2025 and will be assessed through the Accelerated National Innovation Adoption (ANIA) pathway. The DYNAMIC-AI COPD project has now completed follow-up data collection and is moving to the final analysis stage. This project has been part of a programme of work using a digital support service to help proactive management and interventions, reducing the need to attend hospital.

As part of the Living Lab programme with UoG, there has been significant work-up of a pharmacogenetics project – PHOENIX – which will commence in the QEUH in 2025. This large-scale project will evaluate the effectiveness of pharmacogenomics testing in reducing adverse drug reactions and treatment failures across 15 different medicines.

In November of 2023 [Hi Scotland](#) was launched – an innovation collaboration between the clinical teams at the Royal Hospital for Children, Glasgow, Glasgow Children’s Hospital Charity, and the West of Scotland Innovation Hub. **Hi** supports paediatric and perinatal innovations by leveraging the existing innovation infrastructure of WoSIH alongside the fundraising and partnership expertise of Glasgow Children’s Hospital Charity. **Hi** benefits from a Multidisciplinary Leadership Group

bringing expertise from clinical, financial, commercial and charitable sectors. Launch projects have included:

- Hospital in My Hand: bringing clinical information to the fingertips of clinical teams and patients together.
- Cardiac Remote Home Monitoring – supporting children with major congenital heart disease to be at home with their families
- BrAIwaves – developing AI to accelerate diagnosis of neurological disease

In collaboration with Atom Design, a [new 360 immersive tour of the Neonatal Unit](#) at the Royal Hospital for Children in Glasgow has been developed to give parents the opportunity to familiarise themselves with the unit and the team to help to reduce anxieties. The tour has launched as of August 2024 and due to the success of this project we are now working with Atom Design to create tours throughout the RHC and NHSGGC Maternity Services

Conclusion

Current pressures on services across NHSGGC create big challenges and difficult decisions for future care provision. There are signs of the impact of these pressures on research design and delivery, with a lower number of new non-commercial studies and an overall reduction in the total number of patients taking part in clinical research compared to last year. However, commercial trial delivery and associated board income remains strong, and has increased from last year. New funding through VPAG presents opportunity to build research infrastructure for commercial trials and continue our key strength in delivering novel therapies and precision medicine. Looking at the achievements of 2024, the NHSGGC R&I community also demonstrates ability to flex to developing digital capability for improving patient pathways and support clinical decision making. The R&I team will embrace new opportunities and ensure continuing high standards for supporting the 2025 research and innovation portfolio in NHSGGC.