

NORTHUMBERLAND, TYNE AND WEAR NHS FOUNDATION TRUST

BOARD OF DIRECTORS MEETING

Meeting Date: 23 September 2015

Title and Author of Paper: NTW R&D Annual Report 2014/15
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Paper for Debate, Decision or Information: Information

Key Points to Note:

The R&D Annual Report is presented for information before September's Board meeting. Since the R&D strategy was approved in 2012 there has been significant progress and some clear evidence of the impacts of the strategy.

Research is generally recognised to be an important factor in high performing healthcare organisations, with a number of benefits accruing as a result of research involvement, from better outcomes for service users, more evidence of evidence-based treatment, evaluation and monitoring of outcomes, and improved staff recruitment and retention. The NTW research strategy aimed to promote the awareness and embedding of research in the Trust and increase research activity and engagement.

The last three years have seen increases in research activity through increases in numbers of research projects, numbers of service user participants, numbers of staff involved and grant income received. In Further achievements have been NTW being ranked as the 3rd most research active mental health and learning disability trust in terms of number of research studies and one of the best in the country for research approval times, a significant number of high profile national and international publications based on research in the Trust; significantly strengthened research collaborations across the region and further progress in successful funding applications

Specifically in 2014/15 there has been a further increase in the number of NIHR projects, although with a slight decrease in participant numbers which this can be explained by differences in the complexity of research projects underway.

The research strategy is currently being refreshed for the next 5 years.

Outcome required: information

Research and Development Annual Report 2014-15

Shining a light on the future



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Glossary and Abbreviations

NIHR	National Institute for Health Research	The research arm of the Department of Health
	NIHR Portfolio	A register of large scale research projects which meet certain standards of size and quality, usually funded by NIHR
MRC	Medical Research Council	Funding Provider
RfPB	Research for Patient Benefit	NIHR funding stream
PGfAR	Programme Grant for Applied Research	NIHR funding stream
EME	Efficacy and Mechanism Evaluation	NIHR funding stream
HTA	Health Technology Assessment	NIHR funding stream
NIHR CRN	NIHR Clinical Research Networks	The research delivery arm of NIHR, represented in the North East by CRN North East and North Cumbria (CRN NENC)
PID CR	Performance in Initiating and Delivering Clinical Research	A measure of performance of NHS Trusts in approving clinical research to run in the NHS, reported by DH
RCF	Research Capability Funding	Strategic funding given by NIHR to NHS Trusts based on previous year's NIHR grant income
LCRN	Local Clinical Research Network	Local (North East and North Cumbria) regional branch of the Clinical Research Network (CRN)
DenDRoN	Dementias and neurodegenerative diseases	Specialty Group of the LCRN

1. Executive Summary

Since the Research Strategy for Northumberland Tyne and Wear NHS Foundation Trust was approved by the Trust Board in October 2012 this report presents some of the impacts from the first three years of the strategy as well as specific progress from 2014/15. With the end of the first three years the strategy is now being re-developed with the same key strategic objectives to reflect the successes and progress so far.

The three key strategic objectives are:

- Maximised opportunities for NIHR portfolio investment in the Trust, by building on local, national and international research strengths, and supported by healthy university partnerships.
- Clear evidence that R&D is an embedded, mainstream, substantial element of the Trust's core business producing demonstrable impacts.
- A workforce whose culture and behaviours demonstrate the value of R&D to improving patient care, and which demonstrates the commitment to the promotion of new talent throughout the workforce.

Progress towards these objectives has been excellent and, importantly, the Trust is starting to see examples of research which provide benefit to Trust service users, some in the short term of the specific research project but others in service design and delivery, new treatment options or developments in diagnosis.

In 2014/15 research activity continued to increase, with increases in the number of large scale National Institute for Health Research (NIHR) funded projects within NTW and a broadly similar number of participants recruited to research as in the previous year. Commercial research continues to increase in terms of engagement with pharmaceutical companies and starting new projects.

NTW remains among the very best nationally for the time taken to approve clinical research in the Trust. Delays in NHS approvals were identified as a key reason why the UK's popularity as a place to conduct clinical trials, especially for industry, was declining. The last five years have seen a drive to improve through various reporting measures and NTW is at the forefront of this, one of the best nationally for approving research in a timely manner.

A key aspect of the developing research strategy is around improving academic partnerships and, while real progress has been made in 2014/15 with regard to setting up the Academic Clinical Collaborations (ACCs), the future developments of the strategy will promote this further ensuring that we develop relationships with academic partners right across the region.



Professor Paula Whitty
Director of Research Innovation
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2. Progress with the NTW Research Strategy – 3 years on

The NTW Research strategy was approved in 2012 and this year therefore sees the end of the first three year strategy period. This section summarises progress to date.

The strategy has provided an ambitious vision for the Trust to become one of the leading research active mental health and learning disability Trusts, generating and participating in increased large-scale research (NIHR Portfolio) activity, embedding research and evaluation into the Trust's service provision and developing the capability and capacity of the workforce.

The following pages discuss in more detail progress in 2014/15 but this section will look back at some of the impacts of research in the three years of the strategy.

Increasing grant income – the main focus has been on increasing grant income through hosting NIHR funded research; income is up by 38% on 2013/14 to £720,618. Evidence of a good range of supported and hosted funding bids with a good success rate (current 4xRfPB, 1xPGfAR) plus involvement of lead researchers and services in a range of others (MRC EME, HTA).

Increasing research activity - Involvement in large scale nationally funded research (NIHR Portfolio) has significantly increased from 30 research studies in 2011/12 to 51 in 2014/15. In 2013/14 NTW was ranked the third most research active mental health trust in England on the basis of number of studies (no figures yet available for 2014/15).

Increasing research recruitment – although not a satisfactorily robust measure of research activity on its own, the importance of increasing recruitment of service users into NIHR portfolio research is seen as a key aim of the strategy. While recruitment can be subject to a range of factors such as study complexity, different range of available research projects, low numbers required, the general trend in NTW has been upwards since 2008/09, with a slight decrease in 2014/15 on the previous year down to 1200.

Academic Partnerships – 2014/15 saw the development of academic partnerships in key research areas. Known as Academic Clinical Collaborations (ACCs) they are an opportunity to link together researchers, clinicians and academics with support from within clinical services (each ACC has a linked Clinical Director within NTW) and academia. While these originated from a Newcastle University model active involvement of other academic institutions is very much encouraged (see page xx for further details).

Impact of research

Research has been widely recognised as being an important factor in providing high quality care for healthcare organisations. Not only does organisational involvement in research improve clinical outcomes and service user satisfaction but it is also suggested in the evidence that organisations are able to attract higher quality employees, organisational culture benefits so that employees are more interested in basing care and treatment decisions on the best available evidence and measurable improvements in outcomes. While these are benefits of NTW involvement in research there should also be a demonstrable benefit for our service users. In some areas this is clear but for others it can take several years for benefits to filter through to front line services, this is something we should aim to address in future developments of the R&D strategy.

Concrete examples of impact in the three years of the strategy are summarised below:

World-leading impact in dementia research

Dementia with Lewy Bodies (DLB) has been recognised as a distinct disorder within the new DSM V (the US-based diagnostic manual) which is a major step forward for those service users with the disorder and will impact upon clinical trials and commercial investment in its treatment. The work has been led from Newcastle with NTW closely involved.

In addition a 5 year programme of research led from Newcastle and hosted by NTW is currently running with the aim of creating new models of assessment, diagnosis and management of DLB which should influence practice nationally and potentially more widely.

Influential Mood Disorders work

Members of Northern Centre for Mood Disorders have been influential with regards to national policies and guidelines. This is as a direct result of their involvement in research in this area. Recent examples of input include the NICE guidance regarding the use of transcranial magnetic stimulation, British Association for Psychopharmacology (BAP) depression guidelines and the BAP bipolar guidelines which are due to be published at the end of 2015/early 2016, along with editing a standard textbook of psychopharmacology aimed at psychiatrists and a chapter on medication for depression and anxiety in a BMJ book aimed at GPs.

National exemplar for service user engagement in research

The ‘is there a pathway to recovery through care coordination?’ project in collaboration with Northumbria University has won numerous awards for service user engagement and has been held up as an exemplar for involvement. Many of the NTW service user researchers on the project gained research skills and experience and the outputs of the project have influenced some of the design work on Transforming Community Services. In addition the team has recently received the national award for ‘Promoting effective care processes and standards’ from the Care Coordination Association in recognition of their exemplary involvement of service users and carers in the research work and subsequent organisational development.

Recognition for alternative to drug treatments in schizophrenia

Work which took place in NTW and was published in the Lancet suggested that Cognitive therapy (CBT) significantly reduced psychiatric symptoms and seemed to be a safe and acceptable alternative for people with schizophrenia spectrum disorders who had chosen not to take antipsychotic drugs. Further research is on-going.

Improvements for eye care in dementia

NTW was the sponsor for a research study investigating the prevalence of visual impairment in dementia. The project has led to recommendations that eye care is an essential part of the dementia care pathway and that this is likely to significantly improve quality of life for those diagnosed with dementia.

Autism research improves treatments for anxiety and phobias

A programme of research led from NTW has led to improved treatment options for children with autism spectrum disorder (ASD), particularly including working with families to help them to

manage anxiety and other symptoms in their children. This has led to the development of further research and manuals for training. In addition further research programmes using virtual reality-based treatments for phobias with children with autism have shown positive initial results with further research funded in the area and significant publicity and recognition for NTW.

3. Research activity

Research activity is an important measure of progress in the R&D strategy and is evidenced through the number of large scale research projects which have recruited participants from NTW. Objective 1 of the strategy is focused on the level of NIHR portfolio activity, which encompasses those research studies which meet criteria of the National Institute for Health research portfolio, funded largely by DH/NIHR funders or national charities. This shows (fig 1 below) that the number of studies recruiting participants in NTW is increasing year on year and for 2014/15 were even better at 51 studies than the 2013/14 figure which placed NTW third nationally amongst mental health trusts (no figures yet available for 2014/15).

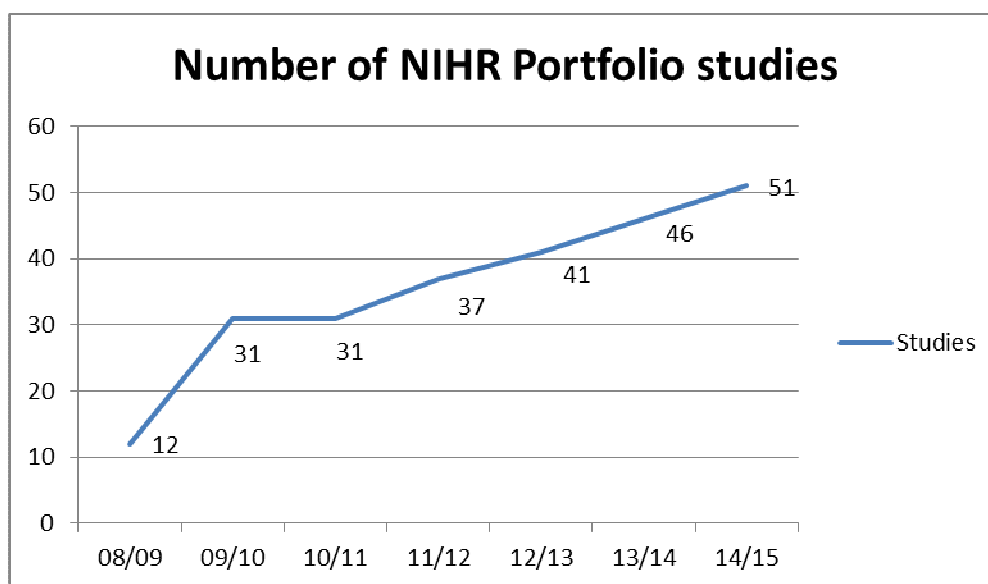


Figure 1 – Number of NIHR Portfolio Studies

While there is a focus within the strategy on large scale research there is also a significant amount of smaller scale research, ranging from student research to pilot work for larger scale funding bids and service evaluation work, all of which provides evidence to develop and improve the quality of the NTW service provision.

The NTW approach to the use of Research Capability Funding (RCF) is illustrative of this. RCF can be used to strategically develop an NHS organisation's ability to engage in research. The approach in NTW has been to run an applications process aimed at targeting RCF to fund research or research programmes which will lead to subsequent NIHR funding bids. Throughout the three years of the research strategy this has been successful with four funded projects and numerous applications resulting from RCF-funded research.

Commercial Research

An important aspect of the original strategy was to develop the Trust's capability to compete for commercial research, usually sponsored by pharmaceutical companies. In general this is seen as a method of income generation, although this is considerably more difficult in mental health

than in some acute medicine specialities due to the limited number of possible research programmes. Although still relatively small scale in comparison with the non-commercial portfolio of research, from a baseline of one or two commercial studies per year the commercial portfolio has grown to five in 2014/15, with increasing focus on research in Huntington's Disease, for which NTW is being seen as a leader nationally.

4. Portfolio recruitment

Nationally, recruitment of participants to NIHR portfolio research is the key measure for NHS organisations. While this is sensitive to a range of factors such as study complexity, availability of research funding or outliers such as single high-recruiting projects, it does show evidence of progress over the life of the strategy (fig 2, below). The final total for NIHR portfolio recruitment in NTW was 1152 in 2013/14, just below the total of 1315 in the previous year but well above the goal of 850. The graph also illustrates the effect of outliers, both 2009/10 and 2013/14 were boosted by single studies which added significantly to the total, otherwise the NTW recruitment graph would show steady upward progress since 2008.

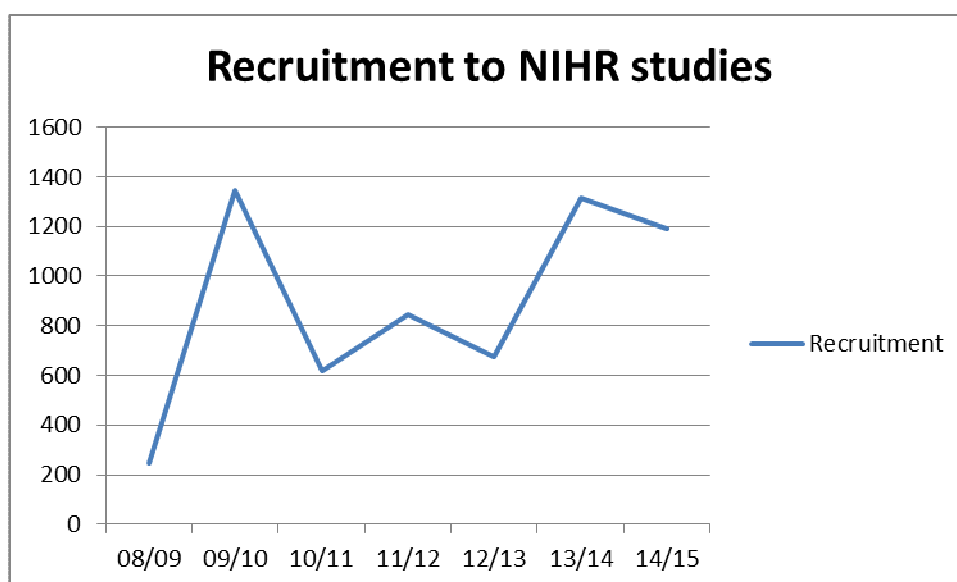


Figure 2 – Recruitment to NIHR Studies

5. Working in partnership

As a member of the Clinical Research Network North East and North Cumbria, NTW hosts a range of clinical research specialist staff who contribute to recruitment of participants into large scale NIHR Portfolio research. While there has been a period of readjustment in 2014/15 with the national reorganisation of the clinical research networks, the team within NTW has maintained a positive outlook and profile and had one of their best years yet. As in previous years there are two teams: the Mental Health Specialty and the Dendron Speciality, both led by NTW-based Clinical Leads.

The new development for 2014/15 was the creation of four Academic Clinical Collaborations (ACCs)(see table 1), partnerships between the Trust and, initially, Newcastle University but with involvement of other Universities, NHS Trusts and other organisations positively encouraged. ACCs will be pivotal in supporting the NTW R&D strategy (which forms the main academic strategy for NTW) and, overall, in maximising translational research opportunities for the benefit of people of all ages with serious mental health disorders (including neurodevelopmental

disorders), learning disabilities and neurorehabilitative problems. As well as the NIHR focus of objective 1 within the R&D strategy, objective 2 includes generating research questions that are of relevance to the Trust and its service users, along with service evaluation and audit; objective 3 includes 'talent management'; so all of these objectives would be promoted by the ACC initiative.

The four ACCs are situated so as to benefit from existing research collaborative strengths but with the aim of increasing the potential and outputs of these groups through widening participation and collaboration across organisations. The four current ACCs are:

ACC	Academic Lead(s)	Link Clinical Director
Autism (including learning disabilities)	Professor Ann Le Couteur / Dr Vicki Grahame	Professor Eilish Gilvarry
Dementia	Dr John-Paul Taylor	Dr Rebecca Courtney-Walker
Mood Disorders	Dr Hamish MacAllister-Williams	Professor Eilish Gilvarry
Psychosis	Dr Iain McMillan	Dr Patrick Keown

Table 1 – NTW Academic Clinical Collaborations

This year also saw the launch of Newcastle Academic Health Partners; a collaboration between NTW, Newcastle University and Newcastle upon Tyne Hospitals NHS Foundation Trust. The aim of this partnership is to formalise links related to clinical and research programmes, particularly in the case of NTW in the field of ageing. This will undoubtedly strengthen NTW's ability to be successful in future funding bids and could have extra benefits in expanding current research themes to encompass whole lifecourse approaches

6. Research governance

It has been a focus for some years to reduce the time taken for NHS Trusts to approve research projects. In 2013/14 the goal for approval to be granted by the NHS Trust was within 30 days of the application being received by them it has since been reduced to 15 days. As NTW already has a lean system and process in place this change did not impact significantly on the Trust, except in instances where aspects of the research set up process were outwith Trust control.

The focus for NTW has remained on ensuring engagement with clinical services to promote and speed up the approvals process. In 2014/15, all 26 NIHR Portfolio projects were approved by NTW within the target of 15 days, with a mean approval time of 6 days, compared against a mean approval time of 8 days in 2013/14.

NTW also reports directly on research approvals process for particular types of important research projects, including commercial pharmaceutical projects, to the Department of Health through the Performance in Initiating and Delivering Clinical Research (PID-CR) process. This is reported quarterly to DH and publicised by them and on the [Trust external website](#), with potential financial penalties for NHS Trusts who fail to deliver within the target timescales of 70 days from submission of valid application for NHS approval to the recruitment of the first research participant.

In 2014/15 NTW had nine trials eligible for PID reporting, of which eight were approved and recruited the first participant within the target of 70 days. The remaining trial failed to meet the 70 day target for first recruit because of staffing issues within the service. Thus NTW remained one of the top performing NHS Trusts nationally on research governance, albeit from a relatively low number of studies.

7. Financial report

The increased income from NIHR portfolio grants and commercial income just failed to balance the expected loss from network income due to the LCRN reconfiguration which took effect on 1st April 2014. This meant that NTW no longer received hosting costs for the two regional networks (MHRN and Dendron) as in previous years and also some staff moved to other organisations to better manage their research trials. Despite this the significant increase in both NIHR Grant income and commercial income suggests the focus on this in objective 1 of the strategy is proving successful.

Income type	2012/13 £	2013/14 £	2014/15 £	Change from 13/14
Grant income	430,837	521,996	720,618	38%
DH funding (RCF)	297,447	288,840	240,182	-17%
NIHR funding (LCRN – now includes MHRN and Dendron specialties)	556,564	564,811	1,107,677	N/A
Network-related income (MHRN/DeNDRoN)	901,894	918,897	N/A	N/A
Commercial income	127,819	54,038	81,588	51%
Total	2,314,561	2,348,582	2,150,065	-8%

Table 2 – income figures

As suggested above Research Capability Funding (RCF) which is funding that NTW receives from NIHR based on the amount of NIHR Grant funding which comes in to the Trust was reduced slightly this year. The usual annual allocations process was run with a range of very high quality applications of which 14 were funded, ranging from funding to support writing of fellowship applications to research time for analysis of video data as background for further large-scale grant funding applications.

8. Communications

The Third Annual NTW Research and Development Conference was held in February 2015. Opened by NTW CEO John Lawlor it featured a keynote presentation by the National Clinical Director for Learning Disabilities, Dr Dominic Slowie, who promoted the case for a more strategic approach to funding for this important area of research and clinical practice. In addition there were a range of presentations from researchers from diverse specialties within mental health, learning disability and neurodegenerative which provided an exceptional overview of the wide range of activity within NTW and beyond. The conference was attended by over 200 participants,

many of them NTW staff but with the addition of a number of representatives from local universities, demonstrating the increasing research links between the Trust and academics.

Further work on the R&D communications strategy has led to an ongoing redesign of the NTW website, which should provide better information for service users and staff looking to become involved in research.

9. Workforce

The research skills training programme for AHPs was completed in 2014/15, which stemmed from the NTW Allied Health Professions Strategic Action plan. The aim was to develop “capacity to initiate and sustain research activities” and “stimulate the development of an AHP research friendly culture”, to meet the needs of service users and the organisation. The training has been rolled out to over 350 AHP staff (Dietitians, Occupational therapists, Physiotherapists and Speech and Language Therapists and AHP support staff), across all Directorates. This has resulted in the development of a range of research ideas/activity, audit and service evaluation initiatives.

On-going awareness-raising has continued with for example medical trainees and Trust induction. Trust staff continue to do well in applications for fellowships and research training awards and we have targeted these during the year. Among the successes were:

- Health Education England (HEE) Clinical Academic Internship award
- NIHR/HEE Clinical Lectureship (post-Doctoral) Award
- Several research-based Professional Doctorates (completed and in progress)

10. Summary and Conclusions

Progress since the development of the NTW Research strategy has been significant, with increases in research activity, participation, knowledge, understanding and engagement. Awareness across the organisation is higher and more staff and service users than ever before are involved and engaged in research at all levels. This level of involvement can not only drive further interest in research but also standards and quality of care, culture and evidence-based practice.

Engagement of service users and carers as collaborators in the research process remains a priority and the success of the “is there a pathway to recovery through care coordination?” project has provided a model which is nationally recognised for how this may work in the future.

The refresh of the research strategy is currently underway, and this will produce the NTW research strategy for the next five years, building on the successes and finding new ways to tackle the challenges of the original strategy. We aim to further promote and develop: the opportunity for every NTW service user to take part in research which is relevant to them; opportunities for NTW staff to pursue their interests in research and to be supported in doing so; the embedding of research into clinical operations to make it Trust core business and a culture where staff engage with research and other evidence to ensure clinical practice is the best it can be.

Appendix 1:

Table 1 – Performance on key R and D measures related to the R&D strategy (End of year 2014/15)

Strategic Objective 1 – Financial Performance, Recruitment & external relationships	2013/14	2014/15 Goal	2014/15
Stable infrastructure (Research Network) income *	£1,483,708	+/- 10%	£1,107,677
Increase in Commercial Income	£54,038	+ 20%	£81,588
Increase in NIHR Grant income*	£521,996	+ 20%	£720,618
Increase in RCF income *	£288,840	+ 5%	£240,182
Last ½-year spending within budget variance of 1%	+0.7%	+/- 1%	0%
NIHR Portfolio Recruitment (NTW)	1315	750	1192
NIHR Portfolio Recruitment (all network, all Trusts)	2351	1500	2175
NIHR Studies recruiting in year	41	45	51
Commercial Recruitment	62	70	16
Number of NTW-hosted NIHR funding applications this financial year	6	6	6
*projected for 14/15 total			
Strategic Objective 2 - internal Processes Internal Relationships			
Service Approval turnaround (from receipt of service approval form)	11 days	20 days	15 days
Caldicott approval Turnaround (from receipt of valid application)	17 days	15 days	NA
Contract turnaround (from receipt of draft)	10 days	30 days	15 days
Internal research awareness (tbc – annual trust intranet survey?)			NYA**
Service User involvement in research funding bids (tbc)			NYA**
Strategic Objective 3 - Learning and Development			
Number of Trust staff involved in Portfolio research	40	50	NYA**
Number of Trust staff attending GCP training			NYA**
Number of staff attending Trust Research Training	N/A	50	134
Number attending PI development Group (now SG group)	70	60	89
Communications			
Articles in The Bulletin	40	24	31
Articles on Trust intranet	19	24	17
Monthly e-bulletins on time	12 (100%)	12	100%
Annual conference registrations	199	200	182
Annual lunchtime research seminar registrations	N/A	150	76
Other Operational Performance			
Approval measure for researchers (post approval survey – initiated February 2015)			NYA**
Research Governance			
Portfolio Approval Times	95%	100%	100% (23)
Non-Portfolio Approval Times	95%	90%	93% (54)
Commercial Approval times	100%	100%	100% (4)
Performance in initiating Research (PID) raw	66% (4/6)	100%	100% (7)
Performance in initiating Research (PID) adjusted	NYA	100%	100% (5)
Peer Reviewed Projects			NYA

** NYA=Not yet available

Appendix 2: Non-commercial research studies recruiting in NTW in 2014/15

Study	Clinical Service	Topic
NCISH	Adult Mental Health	Mental Health
Validation of risk assessments for patients from MSS (VoRAMSS)	Adult Mental Health	Mental Health
DPIM - bipolar disorder	Adult Mental Health	Mental Health
AMICUS	Adult Mental Health	Mental Health
DPIM - schizophrenia	Adult Mental Health	Mental Health
DPIM - alcoholism	Adult Mental Health	Mental Health
Homicide by patients with schizophrenia: a case-control study	Adult Mental Health	Mental Health
OBSERVA	Adult Mental Health	Mental Health
The ATLAS Trial	Adult Mental Health	Mental Health
Ketamine-ECT Study	Adult Mental Health	Mental Health
EIMD	Adult Mental Health	Mental Health
Focusing on Clozapine Unresponsive Symptoms	Adult Mental Health	Mental Health
Self-help in adjunct to Pharmacotherapy	Adult Mental Health	Mental Health
ASPIRE Phase 1	Adult Mental Health	Mental Health
EQUIP: Training to promote user involvement in care planning 3	Adult Mental Health	Mental Health
Volunteering in Mental Health Care for People with Psychosis (VOLUME3)	Adult Mental Health	Mental Health
Letting the Future In	Children and Young People	Mental Health
FAB: Family focused treatment for Adolescents with Bipolar Disorder	Children and Young People	Mental Health
PACT 7-11	Children and Young People	Mental Health
Y-SBNT	Children and Young People	Mental Health
Deaf children with autism	Children and Young People	Mental Health
Measuring anxiety in Autism Spectrum Disorder	Children and Young People	Mental Health
YETI - Young people's Experiences of Translition	Children and Young People	Health services and delivery research
Qualitative Evaluation of Non Drug Interventions in Dementia	Cognitive function and neuro	Primary Care
BDR-Donor Recruitment	Cognitive function and neuro	Dementias and neurodegeneration
DEMO-POD study	Cognitive function and neuro	Dementias and neurodegeneration
PrOVIDe	Cognitive function and neuro	Dementias and neurodegeneration
LewyPro	Cognitive function and neuro	Dementias and neurodegeneration

AMPLE	Cognitive function and neuro	Dementias and neurodegeneration
LonDownS cohort	Cognitive function and neuro	Dementias and neurodegeneration
Minocycline in Alzheimer's Disease Efficacy (MADE) trial	Cognitive function and neuro	Dementias and neurodegeneration
BRU VEEGStim Study	Cognitive function and neuro	Dementias and neurodegeneration
BRU ACDC-Study	Cognitive function and neuro	Dementias and neurodegeneration
Visual hallucinations, visuoperceptual function and attention	Cognitive function and neuro	Dementias and neurodegeneration
Enroll-HD	Cognitive function and neuro	Dementias and neurodegeneration
Diagnosis of Alzheimer's disease by measuring blood proteins	Cognitive function and neuro	Dementias and neurodegeneration
DIAMOND-Lewy Work Package 2	Cognitive function and neuro	Dementias and neurodegeneration
IDEAL study	Cognitive function and neuro	Dementias and neurodegeneration
Supporting excellence in end of life care (SEED)	Cognitive function and neuro	Dementias and neurodegeneration
Cost efficient service provision in neurorehabilitation	Neurorehabilitation	Health services and delivery research