



Dementia research: Ready for take off

New role in Salford: Professor Alistair Burns

Dementia is one of the biggest health challenges facing the UK. Every 3.2 minutes someone in the UK develops dementia – there are now about 850,000 people living with the incurable condition here and it's expected that figure will rise to one million by 2025.

The statistics are frightening and the difficulties can seem overwhelming – but Professor Alistair Burns, the National Clinical Director for dementia in England, is fired with enthusiasm as he talks about his new role in Salford research. Prof Burns, who is also Professor in Old Age Psychiatry at The University of Manchester and Honorary Consultant Old Age Psychiatrist in the Manchester Mental Health and Social Care

Trust, has been invited by Salford Royal Chief Executive Sir David Dalton and Salford R+D Director Prof Bill Ollier to provide a focal point for dementia research in the area.

He describes his new role as a nurturing and collaborative one - to make the best of the research that is already taking place and to make the most of any opportunities that occur. While there is a lot of work to be done across the whole spectrum of the condition – research into cause, care, treatment and cure – he sees the current state of dementia research as accelerating on the runway,

ready to take off ... as long as it is given enough funding and enough interest.

Prof Burns said: *"Forty years ago people didn't talk about dementia. Memory loss and growing incapacity were seen as inevitable consequences of ageing for which nothing could – or should – be done.*

"Even 15 years ago there was very little research, a result of a lack of awareness by the public, researchers and academics.

"The challenge has been to change the culture around dementia and that has happened – there is a good deal more awareness, helped by the dementia charities, the Prime Minister's Dementia Challenge and 2013's G8 summit on dementia.

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“Here in Salford MP Hazel Blears has been a tremendous advocate and I was very proud to present Lead Nurse for Dementia and Delirium Janice McGrory with the Best Dementia Nurse Specialist award at the recent National Dementia Care Awards. It’s also telling that the Nursing Times Nurse of the Year this year is a dementia nurse – Lorraine Burgess from The Christie.”

Prof Burns, who was awarded a CBE in the New Year’s Honours, said Salford is especially well-placed to drive the search for better care, treatment and eventually cure, thanks to specialist services based here – such as the special dementia assessment service in Salford Royal’s Cerebral Function Unit, the opportunity to look at studies in primary care using the FARSITE model, e-health initiatives being pioneered here and the well-established links across health and social care.

He added: ***“Because the need for research is across the board, partnerships are particularly important – different organisations have expertise in different areas, so joining together will give us a bigger and better picture.***

“My role is make the best use of the talent and opportunities we have in Salford and to work with colleagues to increase the number of people in dementia research.”

Professor Burns will give Salford R+D’s winter 2015 professorial lecture on 16 December 2015, noon-2pm. Please save the date!

Celebrating World Stroke Day

Speaker: Dame Nancy Rothwell



More than 100 stroke survivors, carers, clinicians and scientists came together to celebrate World Stroke Day at Salford Royal.

The event was organised by the Trust’s Hyperacute Stroke Research Centre, the Manchester Science Festival, the Stroke Association and The University of Manchester.

Presentations on the day were given by Dame Nancy Rothwell, a stroke scientist and President of The University of Manchester, Salford Royal Chief Executive Sir David Dalton and Dr Jane Molloy, who leads stroke services at the Trust.

Audience members were able to tour a series of hands-on exhibits about stroke treatment and research, find out how clot-busting treatment is given, how weakened blood vessels are treated after subarachnoid haemorrhage and learn more about new research studies, including stem cell treatments, new medicines for stroke and hear about new ways of helping people get better after a stroke.

Professor Pippa Tyrrell, who has been a stroke doctor at Salford Royal for 20 years, said: ***“The audience was moved to tears by the testimony of a stroke survivor called Mary, who told us the moving story of her stroke and read a poem she had written as part of a poetry workshop organised by the Stroke Association.***

“We also heard from Kath, a carer, who described the devastating effect of her husband’s stroke on her young children, and their bravery in coping with it. “The Salford Royal stroke team work very closely with their research colleagues and the Stroke Association so it was wonderful to have a day when we could all meet with stroke survivors and their carers to raise awareness of the importance of stroke and new research into its treatment, and to celebrate the amazing work of the Stroke Association in working with stroke survivors to give them life after stroke.”

The event was brought to a close with an uplifting performance by the Stroke Choir, which is made up of members who are stroke survivors, carers, volunteers and people who work with the Stroke Association.



Uplifting: A musical end to the day



Dedicated Vikki is researcher of the year

Winner: Vikki O’Loughlin with Trust Chairman Jim Potter and Chief Executive Sir David Dalton

Dedicated Senior Stroke Research Nurse Vikki O’Loughlin is Salford’s Research Practitioner of the Year for 2014.

Vikki, Team Leader for the Hyper-acute Stroke Research Centre at Salford Royal and Senior Stroke Research Practitioner, received her accolade at Salford Royal’s Staff Awards in November.

She was praised as an outstanding member of the team who has opened the doors to so many patients to participate in vital stroke-related research and played a major role in establishing Salford Royal as the top recruiting site for stroke research in the country.

Vikki has worked in Salford since 2011, starting out as an Assistant Research Practitioner in stroke in the then new Hyper-acute Stroke Research Centre. Previously she’d worked in Emergency Medicine after completing a nursing degree at The University of Manchester

but jumped at the chance to make a difference to patients and patient care through research.

She said: ***“I love working with patients and giving them the opportunity to take part in research – they really appreciate that what they do is going to help others and improve patient care.*”**

***“From my point of view, it’s great to be able to see change happen and think ‘I’m part of that’.*”**

***“And I do feel my input is valued and appreciated, both by patients and my colleagues - I love where I work!”*”**

Vikki was selected from a very strong shortlist, which also included Consultant and Honorary Professor of Nephrology Phil Kalra and Research Assistant Susie Moschogianis.

Phil’s colleagues applauded the way he provides a voice for both patients and staff within research. His positivity, enthusiasm and his patient engagement work, including looking at better ways to provide information to patients, are what colleagues believe set him apart.

Susie was praised for her dedication and commitment, as well as the way she thinks outside the box to engage patients, academics and clinicians in dermatology research. She was the brains behind last summer’s successful Manchester Psoriasis Shout Out event.



Fellow award nominees: Professor Phil Kalra and Susie Moschogianis



Focus on patients' quality of life

Quality of life research: Professor Suzanne Skevington

Patients' quality of life has always played a role in the aims of medicine. Especially with chronic diseases and conditions, patients' quality of life may often be the most important outcome to consider when looking at the effectiveness of treatment.

But what tools can we use to measure quality of life and how can the information we gather be used to benefit patients?

Professor Suzanne Skevington, who holds a Chair in Health Psychology at The University of Manchester and directs an international centre for the study of quality of life, looked at these issues in the latest of Salford R+D's seminar series.

For 20 years, she has been part of an international collaboration - the WHOQOL Group – which was established by the World Health Organisation, Geneva, to measure quality of life in diverse cultures. WHOQOL tools are used to evaluate ill health and wellbeing in over 80 cultures world-wide.

Prof Skevington explained how the WHOQOL Group brought together people from diverse cultural backgrounds to define quality of life, consider what the priority groups were for quality of life assessment and devise a set of questions across different domains – such as physical, psychological, social relationships and environment – that could be used across different cultures.

She said: *"The international collaborative approach and universal concept is key to solving this problem in a multi-cultural society."*

Quality of life is an individual's perception of their position in life, in the context of the culture and value systems in which they live and in relation to their goals, expectations, standards and concerns.

From more than 2,000 issues the researchers thought might be important, they drafted an initial pilot questionnaire which has since been developed into WHOQOL-100, a 100-question survey, and WHOQOL-BREF, a condensed version with 26 questions that can be completed in about six minutes.

Prof Skevington highlighted how the information gathered from these surveys – which are available free of charge from the World Health Organisation for researchers – can be used to benefit patients:

- Provide reference norms for different group so that scores of individual patients can be better interpreted.
- Investigate health inequalities.
- Understand how interventions such as physical exercise impact.
- Help practitioners use quality of life information to make better decisions with patients.
- Share results with patients to assist them to manage their chronic disease or disability with the aim of improving their quality of life.

More information is available from Christine.rowland@manchester.ac.uk, who can supply UK versions of the questionnaire.

Save the date

Salford R+D's next research seminar is on Caring for people with colorectal cancer: Assessing nutritional status.

Dr Sorrel Burden will present evidence from the literature and research findings on the best approaches for nutritional interventions and what emerging measures can be used to evaluate effectiveness.

The seminar is on Wednesday 28 January, 12.30-1.30pm in Seminar Rooms 5+6, Mayo Building, Salford Royal. Register at <http://seminarseriesjan15.eventbrite.co.uk>

The other seminars for 2015 are:

15 April – Professor Fiona Lecky on trauma research

15 July – Professor Peter Bower on health service delivery research

15 October – Professor John Keady on dementia research



New study to tackle swallowing problems after stroke

Testing new treatment: Professor Shaheen Hamdy

Stroke researchers are to test a new treatment that could help patients with swallowing problems (dysphagia) related to stroke.

Up to 50 per cent of patients with acute stroke develop dysphagia, which can have devastating consequences and even be fatal.

If patients can't swallow properly, food or drink can pass into the lungs and cause respiratory problems – which can progress to a more serious complication, aspiration pneumonia. They can also develop malnutrition, tend to need longer hospital stays and need more care on discharge.

While some patients recover, 30 to 40 per cent of those affected will have more chronic problems and will have to be fed through a tube into their stomach, often causing them great distress.

It's already known that a treatment called transcranial direct current stimulation (tDCS) can help stimulate brain activity in the part of the motor cortex area that governs

swallowing. If this is applied to the side unaffected by the stroke, it may encourage swallowing areas in that part of the brain to compensate for the loss from the damaged side.

The treatment delivers weak electrical currents through conducting pads precisely positioned on the scalp to target the right area. The treatment doesn't cause any discomfort and is quick and easy to do at the patient's bedside.

The new study, led by Professor Shaheen Hamdy at Salford Royal NHS Foundation Trust, will assess different doses of the treatment to see which has the best outcome for patients with sub-acute stroke (that is, within a six-week period after their stroke).

It is funded by the National Institute for Health Research (NIHR) and is a collaboration between Salford Royal and The University of Manchester, where Professor Hamdy is Professor of Neurogastroenterology.

Principal Investigator Professor Hamdy said: ***“Swallowing problems are very common after stroke and can be devastating for patients, affecting both their quality of life and their medical outcomes.*”**

It can be a life-threatening complication and even when mild, can be a major factor in patients' lives.

“Our previous research on tDCS has suggested it could offer a safe and effective treatment and our latest dose response study will help us to establish the best way of using this treatment.”

The NIHR dose ranging study 'Evaluating brain stimulation for dysphagia after stroke' will establish best treatment of tDCS in swallowing after stroke by examining outcomes in 48 patients over three years.



Lord Turnberg returns to mark 40th anniversary

Happy return: Lord Turnberg and his wife Edna with the new plaque in Turnberg Building

Lord Leslie Turnberg, Hope Hospital's first Professor of Medicine, returned to Salford in December to mark its 40th anniversary as a University Teaching Trust.

Lord Turnberg, who grew up in Lower Broughton, unveiled a plaque on the Salford Royal building named after him and gave Salford R+D's fifth professorial lecture about the past, present and future of the NHS.

He was welcomed by Chief Executive Sir David Dalton, who said Lord Turnberg had played a pivotal role in the Trust's development as a pioneering organisation. Since 1974, the Trust has helped to train thousands of doctors but its links with The University of Manchester also helped to bring about new departments, new specialisms, extra staff and more research.

Lord Turnberg, an eminent gastroenterologist whose research shed new light on Crohn's disease, colitis and the fundamental processes at work in absorption of salt, water and nutrients from the intestine, left Salford in 1997.

In his lecture he recalled the practical difficulties of starting an academic department from scratch with no seminar rooms or teaching accommodation and his own office in the former matron's sitting room, complete with piano!

Things were very different on the clinical side, too, with just one radiologist and one pathologist, no scanners, no medical physics and no ultrasound.

He said: ***"Despite all that, we had this enormous advantage of a great wave of enthusiasm that almost everyone on the staff produced. There was a great boost to morale that the new status had given to everyone and that alone was worth a lot.***

"It seemed slow at the time but when we paused for breath and looked back just a few years later, we found there was quite a lot that had happened. There were six quite large academic teams beavering away but what was significant was that we were pretty well integrated with our NHS colleagues and managers. Mutual respect and friendship characterised the beginning of this teaching hospital."

He went on: ***"Hope really did begin to flourish and we became a serious rival to the well-established central hospital, the Manchester Royal Infirmary.***

"Our research work expanded and in the 1980s we had one of the most active research gastroenterology departments in the country with over 30 research fellows and support staff and quite a few of those went on to chairs elsewhere—such as Tony Morris and Geoff Sandle, Alastair Watson and David Anderson."

Turning to the current state of the NHS, he hailed Salford Royal as an exemplar of how the NHS should be run and especially praised the way the Trust is working with social services and local GPs to integrate services.

He said of the national picture: ***"We have a service designed for the acutely ill while most of our problems lie in how we care for those with long-term illnesses and disability.***

Some of the guests at the lecture



"We now have two distinct levels of care: Reasonable acute care for most of the time but much poorer long-term care for the elderly.

"It's said that of beds in acute hospitals, about 30% are occupied by patients, usually elderly, who don't need to be there and would be much better off at home or in a care home. They'd be much safer, too.

"Local authorities are even more stretched than the NHS. They're quite unable to provide the support for the many lost and lonely dependent and elderly people at home. Nor do they have adequate resources to fund their care in care homes. So too many stay in hospital, a place least suited to their long-term needs.

"But the NHS could not do much better than to take a leaf out of what Salford is doing and follow what you have managed to achieve here.

"Of course integration of your services, your NHS Trust with primary care and social services, didn't happen overnight here. It took many years of planning and chipping away at the barriers.

"But that must be the way forward and Government can clearly help set the scene for local integration of the type you've shown is possible. It's good that the current Government has belatedly recognised what you are doing and has enlisted Sir David Dalton to help spread at least some of your messages.

"You are showing how the future of an integrated service should look, in which a hospital is simply one element in a seamless service with primary and community care all working closely together in providing for the population's needs."



Save the date

Save the date to find out about the Power of improvement

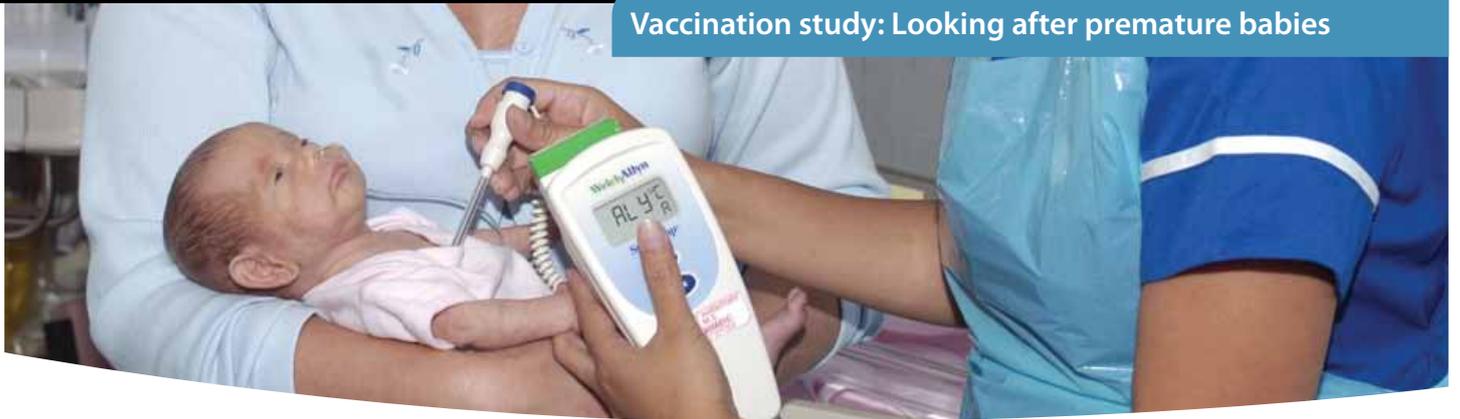
Salford R+D's next professorial lecture will be given by Professor Maxine Power, Salford Royal's Director of Innovation and Improvement Science and Managing Director of Haelo.

She will look at the value of spontaneous versus planned improvement and what each has to teach the other, as well as exploring the secrets of 'underground improvers' and their success.

The lecture is on **Thursday 18 June, 4.30-5.30pm**, Humphrey Booth Lecture Theatre, Mayo Building, Salford Royal.

Vaccination helps to protect premature babies from winter bugs

Vaccination study: Looking after premature babies



Premature babies with chronic lung disease can be protected from respiratory infections by having monthly vaccinations though the winter, a large regional study has found.

The two-year study found that babies with moderate as well as severe chronic lung disease benefited from the vaccinations, which helped avoid hospital admissions with symptoms such as severe coughing and wheezing.

Around six in every 1,000 newborns will suffer from chronic lung disease, also known as bronchopulmonary dysplasia or BPD. It's often seen in babies who have needed 28 days or more of oxygen after being born prematurely.

Once they have left hospital, the chronic lung disease makes them more prone to common winter illnesses that affect the wider community, such as colds, coughs, flu and sore throats, most of which are caused by viruses.

One of the viruses responsible for winter illnesses is respiratory syncytial virus (RSV) but it's known that infections due to RSV can be reduced by the use of palivizumab vaccination, given as monthly injections between October and March.

The research, sponsored by Salford Royal NHS Foundation Trust and involving 11 hospitals across Greater Manchester, looked at just under 250 babies with chronic lung disease. Overall during the study, 44 per cent of them had to be admitted to hospital with respiratory illnesses; of which 7.6 per cent were admitted because of RSV.

Chief Investigator Dr Ravi Agarwal, a Consultant Neonatal Paediatrician at the Royal Oldham Hospital, said: *"Although these infections are not usually life-threatening for premature babies, they can be very unpleasant for the child and really worrying for their parents."*

"The vaccination offers benefits for babies with moderate as well as severe chronic lung disease, meaning they have less risk of hospitalisation due to RSV, during the winter months. The babies who do end up being admitted for treatment usually have to stay for several days and need oxygen support and support with feeding. We can avoid some of the upset for the children and parents by offering this course of vaccinations."

- More information about RSV and bronchiolitis is available at www.morethanacold.co.uk



R+D Update: Help plan the future of research

Looking ahead: Colleagues working on the new R+D strategy at a recent event

Research is crucial to Salford Royal NHS Foundation Trust – it's how we help to improve public health and patient care, improving treatments and making a real difference to people's lives.

The Research and Development department is working on its strategy for the next five years, in response to Salford Royal's five-year plan 'Saving Lives, Improving Lives'. Discussions recently took place with senior managers, clinicians and key opinion leaders to consider the main focus areas for the strategy. Further meetings will take place between now and April to help shape what Research and Development should do and how in the next five years.

If you'd like to be involved in these, please watch for details on our website www.salfordresearch.org.uk or send your contact details to Kirstin.greenhalgh@manchester.ac.uk.

A look at HRA Approval

What is it?

HRA (Health Research Authority) Approval will provide a single approval for research taking place in the NHS that will incorporate an NHS R+D assessment with the Research Ethics Committee opinion. This will mean that decisions at local NHS sites will be made based solely on capacity and capability to deliver the study.

How will I apply?

Application for HRA Approval will be similar to the current application process for REC and R+D approval, using electronic submission through IRAS.

How will it benefit researchers?

Researchers will benefit from having a single application system, and reduced paperwork, which will reduce the time taken to complete the approvals process. This will enable researchers to set up sites more quickly, and focus on recruiting participants and completing studies on time.

How will it benefit NHS Trusts?

HRA Approval will shift the focus from completing checks, to ensuring effective set up and delivery of studies. R+D staff will be able to concentrate on developing and assessing capacity and capability, improving the successful delivery of research.

How will it benefit sponsors?

HRA Approval will reduce complexity and increase consistency, meaning that sponsors do not need to negotiate multiple processes.

Does it apply to all studies?

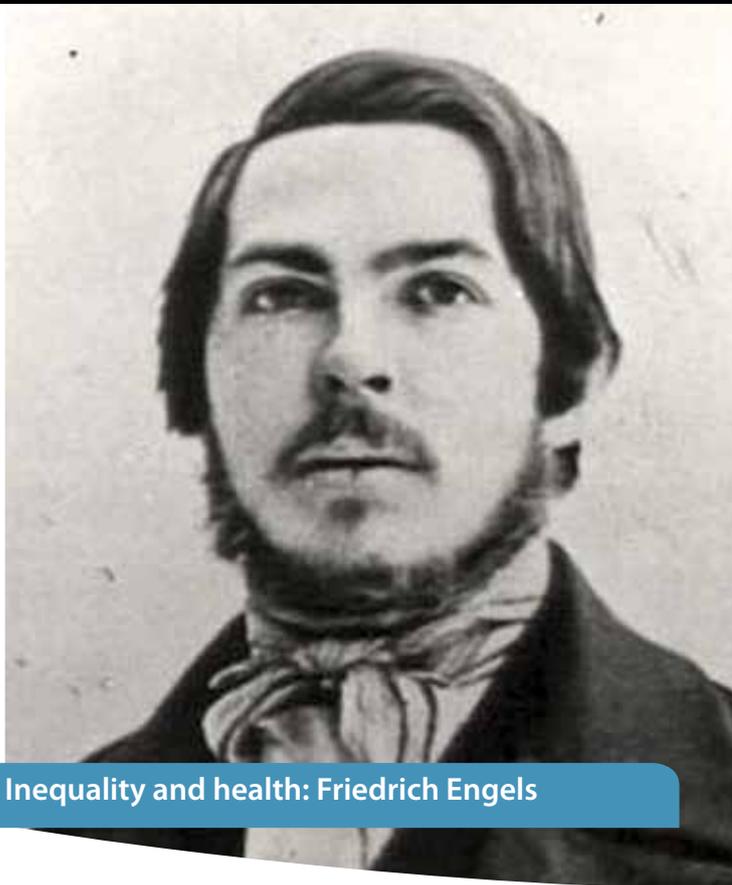
HRA Approval will include all studies taking place in the NHS, both portfolio and non-portfolio, and commercial and non-commercial.

When is it happening?

HRA approval is being introduced in phases, starting with primary care and health services research. The HRA has an ambition to implement single HRA Approval for all studies by the end of 2015.

For further information see <http://www.hra.nhs.uk/about-the-hra/our-plans-and-projects/assessment-approval/>

History of Health: Friedrich Engels in Salford



Inequality and health: Friedrich Engels

Friedrich Engels is best known for his co-authorship of the original Communist Manifesto (1848) with Karl Marx. But it is less appreciated that Engels spent a significant proportion of his life in Salford where his observations on inequality and its relationship to health shaped much of his political thinking.

impact and misery that was the unpleasant side of the coin to wealth and Empire generation.

Salford was ideally placed to shape Engels' thinking and he recognised the relationship between inequality, health and life expectancy. During the two years he was first living in Salford he collected population based data to inform his thinking.

On his return to Germany he used this information to write 'The Condition of the Working Class in England 1844' which described in detail the living conditions of working people and was largely based on what he had witnessed in Salford and Manchester. This book contains interesting information and paved the way for documenting public health data.

Engels, born in Germany into a wealthy textile family, was a political firebrand at an early age. His father looking to 'refocus' his son, sent him abroad at 22 to work in the Ermen and Engels Victoria Mill, Weaste, Salford, of which he was a co-owner. En route to Salford, Engels met Karl Marx with whom he struck up a life long friendship.

In 1842 Salford and Manchester represented one of the most dramatic examples of how increasing urbanisation and population density, driven by the industrial revolution, was resulting in exploitation, pollution, squalor and poverty.

Parallel to the rise of 'industrialised capitalism', came individuals and movements seeking to address the social issues that arose as its consequence. These took many forms, ranging from Quaker-inspired model factory towns to philanthropy, Fabianism, radical political movements and trade unionism. Charles Dickens and Elizabeth Gaskell were just two of the social commentators of the day describing the

Engels returned to Salford in 1850 and continued to work in Weaste until 1870. He set up home with Mary Burns, a Salford woman of Irish extraction, with whom he remained until her death in 1863. During this time he was also under police surveillance. He then moved to London where he remained until his death in 1895.

It is an interesting concept that the development of communism and all of its subsequent world-wide impact (from bad to good and from wars to political ideologies) can be traced back as the legacy of this one man living and working in Salford and perhaps his regular meetings with Marx in Salford public houses. Furthermore it underlines the impact that data can have in changing things in that, even 170 years later, collecting population health data across Salford is still shaping health care policies and improvement.

Professor Bill Ollier



Dr Monty Silverdale



Professor Anthony Jones

Collaboration expands Parkinson's pain research

Sharing expertise across departments at Salford Royal has led to a new study looking into the causes of pain in Parkinson's disease.

Consultant Neurologist Monty Silverdale and Professor of Neuro-Rheumatology Anthony Jones are collaborating on the project, due to start in October 2015, and will appoint a PhD student to help drive it forward.

Dr Silverdale is already conducting the largest ever study into pain in Parkinson's, a symptom which affects more than half of all those with the progressive disease. There are about 127,000 people in the UK with Parkinson's – it's currently incurable and other symptoms include tremor, slowness of movement and rigidity.

Now he has also teamed up with Professor Jones, a pain expert and member of the Greater Manchester Pain Consortium, who mainly specialises in rheumatological conditions such as fibromyalgia.

It's known that people with fibromyalgia experience severe pain even when there is little damage to tissue – research has shown that the area of the brain responding to pain is overactive, as if the person is expecting severe pain. This means they experience more pain than they should.

There are some similarities between the pain experienced by people with fibromyalgia and Parkinson's, with both

groups sometimes having pain affecting large areas of the body without much damage to tissue.

The new study, funded by charity Parkinson's UK, aims to find out whether the area of the brain responding to pain is also overactive in people with Parkinson's.

Researchers will apply a mild painful stimulus to the hand using a laser and record the brain wave activity of 18 people with Parkinson's and 18 healthy volunteers. During the test, participants will watch a screen and shortly before the stimulus is applied, the screen will change colour. The team is looking to see what happens in the brain when the person is expecting a pain stimulus.

Dr Silverdale said: ***"We hope to find out if people with Parkinson's expect to experience more pain because of a chemical change in the brain which causes the area responding to pain to become overactive."***

"If we discover that the area of the brain responding to pain is overactive, then we may be able to use new treatments to manage pain in Parkinson's – such as meditation training, which has been used successfully in other conditions."

Dr Silverdale added: ***"We have a lot of people with different areas of expertise at Salford Royal and this project shows how collaborating and sharing ideas can help us take research forward. I'm delighted to be working with Anthony who has pioneered several new approaches to treating chronic pain."***

Enabling research delivery: Catch up with CROps



CROps team leaders: Lorraine Trainor and Wendy Osborne

Supporting Salford as a highly research-active Trust with a diverse research portfolio across all clinical areas is a comprehensive research delivery infrastructure - Clinical Research Operational Delivery or CROps for short.

The CROps team works within the Trust and extends into primary care to facilitate research across commercial and academic, sponsored and hosted, observational and interventional, spanning phase I-IV. NIHR portfolio adopted studies make up the bulk of the portfolio although there are some non NIHR studies being supported.

Lorraine Trainor joined the Trust as Senior Clinical Trials Manager in June 2010 and leads the CROps team.

Lorraine came to the Trust with 20 years' experience in the pharmaceutical industry and initially had the remit of developing the Barnes Clinical Research Facility (BCRF).

The BCRF now offers a pool of generic research nurses managed by Anne Keen, a team of dedicated research delivery

staff, generic research physicians and expanding purpose-built, clinical research space that gives clinical teams access to the resources they need for their research. The BCRF Clinical Lead is Dr David Rog, Clinical Research Steering Committee Chair, Consultant Neurologist and Specialty Lead for the CRN-GM, which provides significant funding for the Research Nurse Delivery teams across the Trust.

In the spirit of Salford Royal's values of Continuous Improvement and Patient and Customer Focus, the team's ongoing priority is to engage with new investigators and further develop the delivery infrastructure and Clinical Research Nurse teams across the Trust. With the development and expansion of

the CROps infrastructure (11 Research Delivery Teams – and more than 80 dedicated research delivery staff) a new Senior Clinical Research Nurse Manager role has been created to offer enhanced support, further development, and professional oversight to the 10 nurse-led teams.

Wendy Osborne was appointed to this post in August 2014, bringing with her extensive experience from nine years of ward-based nursing followed by eight years as a clinical research nurse. She has worked in a variety of settings and managed both Cardiology and Neurology Research Teams before taking up this role. Wendy is already demonstrating her value in creating opportunities for staff development and overcoming resource challenges.

Lorraine and Wendy work closely together to meet the needs of Research Nurses, researchers, wider service users and stakeholders, both internally and externally.

For further information please contact **lorraine.trainor@srft.nhs.uk** or **wendy.osborne@srft.nhs.uk**