



Annual Report 2024-25

# UHS RESEARCH LEADERS PROGRAMME (RLP)

# Foreword



**DR KAREN UNDERWOOD**

Director of Research & Development,  
University Hospital Southampton

The Research Leaders Programme (RLP) continues to be a cornerstone of our commitment to nurturing research excellence across University Hospital Southampton. This programme exemplifies what is possible when we invest in people creating space for research, leadership, and transformation in patient care.

The individuals featured in this report are not only advancing their own research careers, but they are also shaping the future of healthcare delivery. Their work spans disciplines and professions, reflecting the diversity and strength of our research community. From nursing and pharmacy to medicine and healthcare science, these leaders are driving improvements that benefit patients today and lay the groundwork for tomorrow.

We are proud to see the RLP gaining national attention, with other organisations looking to replicate its success. This is a testament to the culture we are building, one where research is embedded in our strategy, valued by our Trust, and recognised as essential to delivering outstanding care.



**PROFESSOR CHRIS KIPPS**

Clinical Director of Research & Development,  
University Hospital Southampton

# Introduction

The UHS Research Leaders' Programme has now welcomed its 5<sup>th</sup> cohort of inspirational individuals. As the programme has expanded and diversified, we have welcomed healthcare researchers with medical, health professional and health science backgrounds, with a shared goal of improving care through research.

The programme has given individuals with exceptional potential the time and space to thrive, and this report provides just a snapshot of some of their many achievements and accolades.

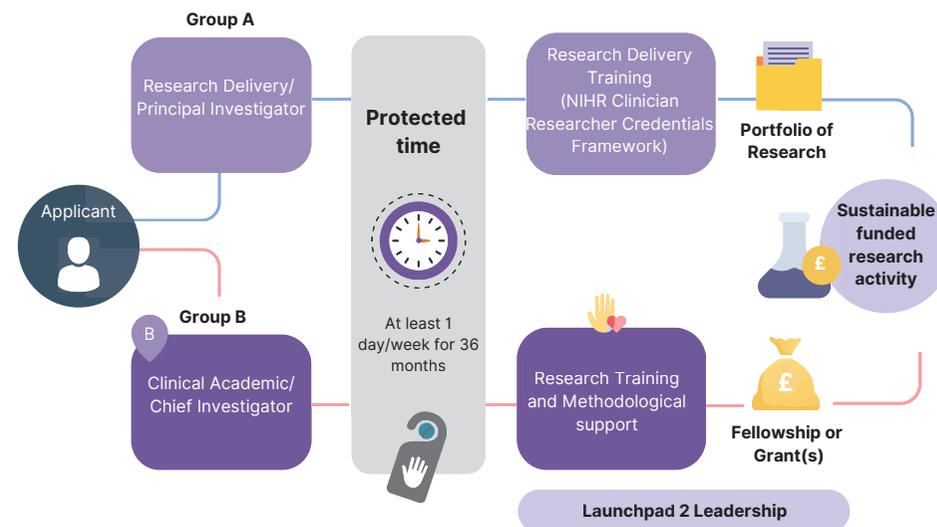
The RLP recruits individuals who live out our Trust values, and so this year's report focusses on how the RLP cohorts, and we as a team, are Always Improving, Working Together and putting Patients First at the heart of all that we do.



**DR KRISTIN VEIGHEY**

SOAR Associate Director  
and RLP Lead

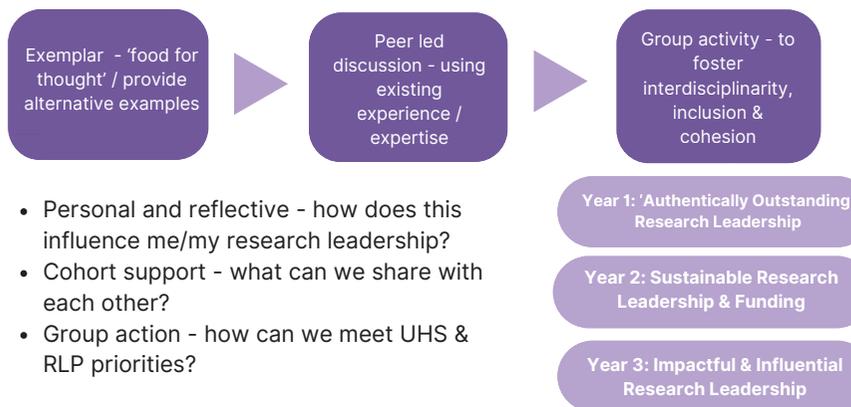
# Research Leaders Programme (RLP) Overview



# Launchpad 2 Leadership

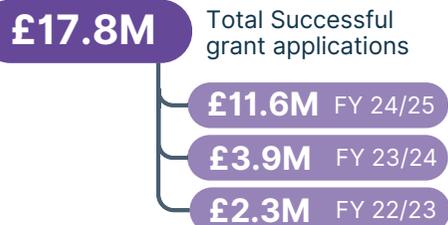
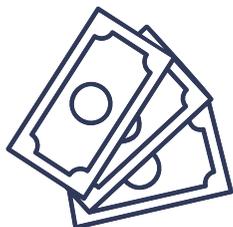
## 4 gatherings, 3 conversations & 3 annual themes

Each Leadership gathering has three components or 'conversations'



- Personal and reflective - how does this influence me/my research leadership?
- Cohort support - what can we share with each other?
- Group action - how can we meet UHS & RLP priorities?

# Outcomes



**101**  
studies



**9,223**  
participants recruited

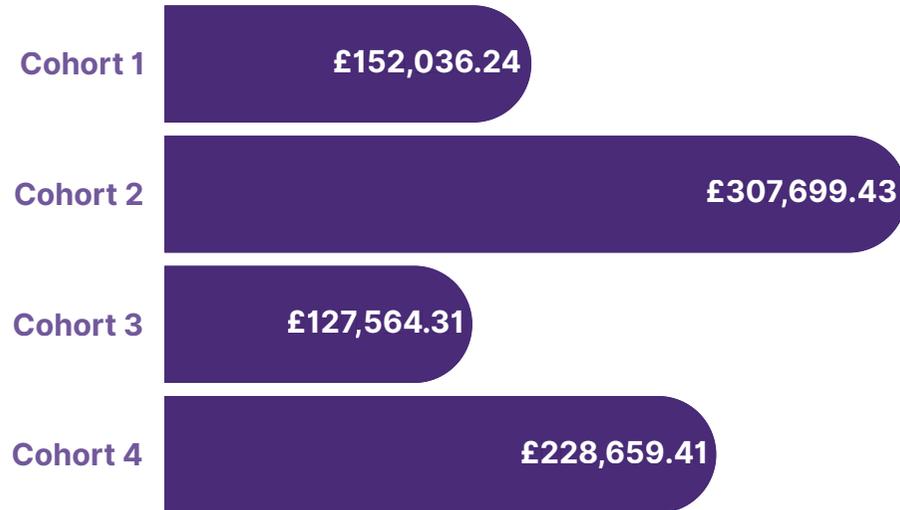


**514**  
publications



Cohort 1	<b>336</b>	Cohort 3	<b>51</b>
Cohort 2	<b>105</b>	Cohort 4	<b>22</b>

# Study income

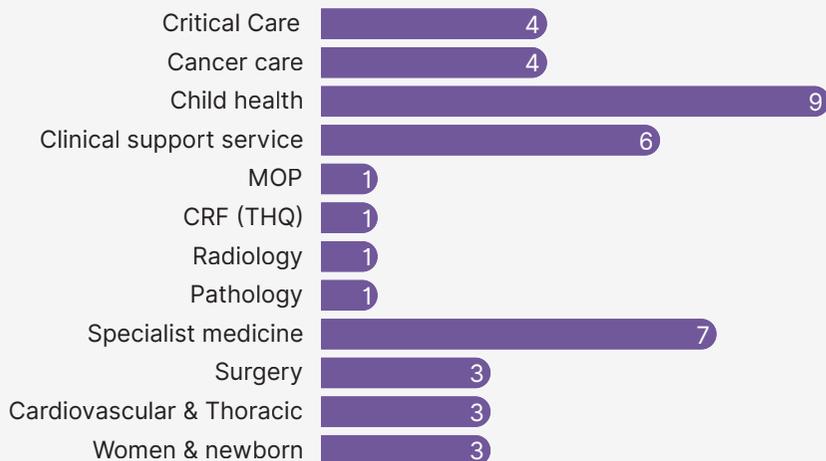


**£815,959**  
Total income generated

The data is only based on Sales invoices and credit notes and not any other forms of income. Source: A Geal, R&D Senior Management Accountant

# Specialties

Recruited to cohorts 1-5



**43**

# Application Summary

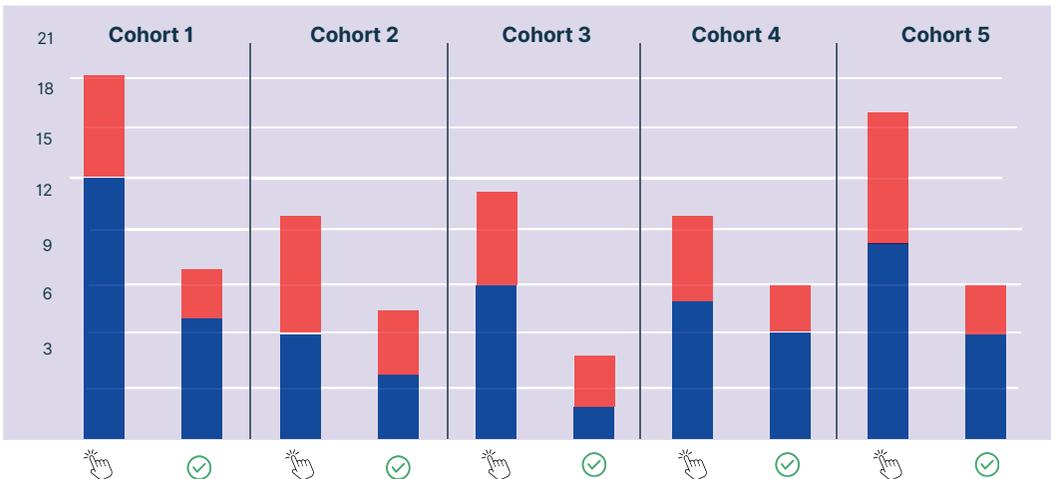
## Healthcare professions in the RLP

■ Other 
 ■ Clinical Scientist 
 ■ Pharmacist 
 ■ Allied health professional 
 ■ Midwife 
 ■ Nurse 
 ■ Clinical doctor



## Men and women in the RLP

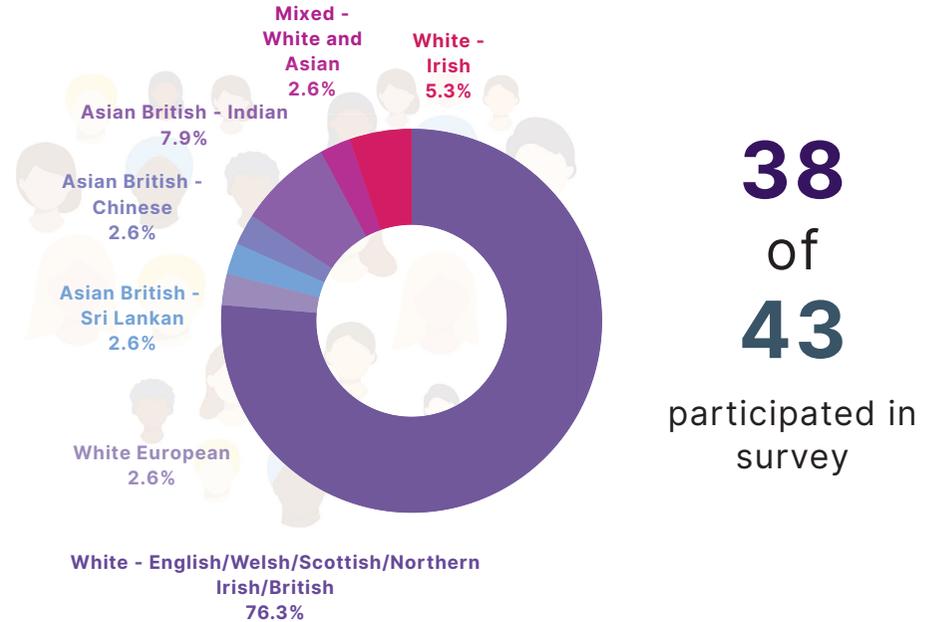
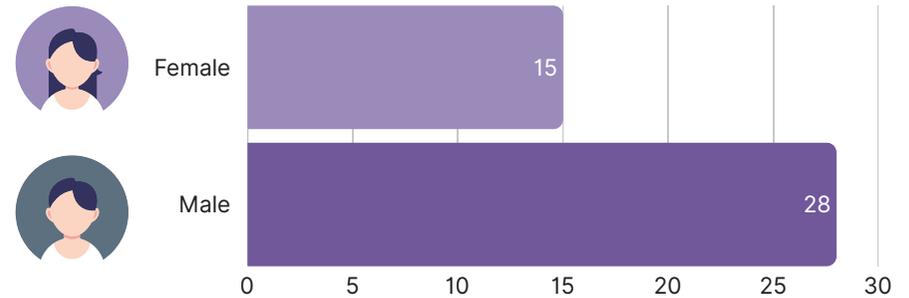
■ Male 
 ■ Female



**KEY:** Applications Successful

# Equality, Diversity and Inclusion

Recruited to cohorts 1-5



**38**  
of  
**43**

participated in survey

## Selected highlights



**Caroline Anderson**  
Paediatric Dietetics

- A successful application to Wessex Health Partnership (WHP) to lead INFORMED project - building dietetic and nutrition research capacity across Wessex.



**Mark Banting**  
Palliative Medicine

- Awarded £1.2 million to lead the national study to help terminally ill patients better manage pain and agitation at home



**Sophie Fletcher**  
Respiratory Medicine

- Helped demonstrate a new medicine that could help patients with fatal lung condition
- Honoured with a National Clinical Impact Award 2024



**Phil Hyde**  
Paediatric Intensive Care

- Key milestones in establishing world-first Pre-hospital Research and Audit Network (PRANA)
- Awarded Road Safety Trust Grant linking Healthcare to Road safety data



**Cathy McKenzie**  
Critical care Pharmacy

- Successful application to NIHR Senior Clinical and Practitioner Research Award Round 1
- Successful application to NIHR Efficacy and Mechanism Evaluation Award to lead the DELTA Study.



**Jessica Bate**  
Paediatric Oncology

- Successful application to NIHR Senior Clinical and Practitioner Research Award Round 1



**Bhaskar Somani**  
Urological Surgery

- First in UK to use revolutionary kidney pressure device



**Linden Stocker**  
Foetal Maternal Medicine

- Appointed as Reproductive Health and Childbirth Speciality Lead for the NIHR Regional Research Delivery Network



## Impact Statements



**PATIENTS FIRST**



**WORKING TOGETHER**



**ALWAYS IMPROVING**



## Hope grows through patient-centred research



**DR BOYD GHOSH**

Consultant Neurologist,  
University Hospital  
Southampton

There is no cure for Parkinson’s disease. This is a harsh reality faced by over 160,000 people in the UK.

The disease causes problems with balance, movement and speech. These symptoms can significantly impact daily life.

The same is true for people living with atypical parkinsonian syndromes (APS). These share many symptoms with Parkinson’s disease. However, progression tends to be much more rapid. The average lifespan is sadly only around six years from onset.

While treatments for all forms of Parkinsonism remain limited, research provides a glimmer of hope. Access to the latest techniques and therapies ensures patients have the best experience possible.

New understanding will also benefit future patients who receive these life-altering diagnoses.

## Finding hope in research

Dr Boyd Ghosh is a Consultant Neurologist at University Hospital Southampton (UHS). He runs a specialist clinic that treats people with APS from Hampshire, Wiltshire and Dorset. Boyd is creating more opportunities for patients to take part in research through the UHS Research Leaders Programme (RLP).

“One of the things that patients, carers and families say is that they want to be involved in research,” explains Boyd.

“People with APS quickly become very dependent. By getting involved in research, they start to have more hope for their disease as it progresses.”

## Putting patients first

In the three years since Boyd joined the RLP, he has made significant strides in APS research.

Highlights include drug trials for patients with Multiple System Atrophy and Progressive Supranuclear Palsy. The drugs being studied may help slow disease progression.

Other progress focusses on quality of life. For example, studies have explored how to reduce fractures, optimise feeding tubes and cut hospital admissions.

The team is now looking at care pathways nationally to ensure all patients receive the care and support they need. They are also forming new collaborations to improve end of life care.

Boyd credits the RLP with the huge amount of progress he’s made.

“The dedicated research time provided by the RLP has been really valuable”, Boyd explains. “Consolidating all our findings wouldn’t have been possible without it.”

## Creating more opportunities

Boyd is also expanding into Parkinson’s disease research.

During his time in the RLP, he has built relationships with a range of drug companies. This has laid the groundwork for Southampton to run Parkinson’s disease trials.

An exciting phase 1 trial of a gene therapy is due to open at UHS this autumn.



Boyd's team is also building a network that will promote Parkinson's disease research across all three Wessex counties. UHS will support other sites in the region.

Increasing diversity will be a priority for the network. "Research needs to benefit everyone," Boyd says. "This work will ensure that patients from a diverse range of backgrounds get opportunities to take part."

## Improving the lives of young people with kidney disease

Kidney disease is a lifelong condition with no cure. It can get worse over time, but a well-managed diet can help young people with it to live well for longer.

The UHS Research Leaders Programme is enabling Dr Caroline Anderson, a Clinical Academic Paediatric Dietitian, improve care for these young people.

Patients are at the centre of her research, as she delivers it with them. For example, she set up a Youth Panel with LifeLab, where young people discussed the feasibility of campaigns to help them eat less ultra-processed food, and has integrated patient-led digital dietary assessment.

Successfully obtaining an NIHR Senior Clinical and Practitioner Research Award through the support of the RLP means Caroline can dedicate 40% of her time to research over the next five years. She plans to co-produce all future studies, and explore early prevention and digital interventions.

"It's all about having children, young people and families at the heart and centre of any initiatives going forward," she says.



**DR CAROLINE ANDERSON**

Clinical Academic Paediatric Dietitian, University Hospital Southampton

## Working together to grow our lung research



**DR SOPHIE FLETCHER**

Consultant Respiratory Physician, University Hospital Southampton

Interstitial lung disease (ILD) is a group of conditions that cause inflammation and scarring in the lungs, making it harder to breathe. The most common form has a life expectancy of three to five years from diagnosis, with limited treatment options.

Dr Sophie Fletcher, Consultant Respiratory Physician at University Hospital Southampton (UHS), has dedicated her research career towards improving care for these patients. However, she is aware that she cannot do this alone.

The Research Leaders Programme (RLP) has allowed her to mentor and support others, as well as develop new collaborations.

## Creating more opportunities

Over the last three years, the RLP has enabled Sophie to develop her research.

“What it's done for me, personally, is it's allowed me to grow a portfolio of national and global clinical trials in interstitial lung disease,” she says, “which I've led as Principal Investigator and Chief Investigator.”

She's focussed mainly on commercial studies, as they provide opportunities for patients to access novel treatments sponsored by the pharmaceutical industry. Commercial studies provide an income stream that allows expansion of the research team that facilitates the work of others with the Respiratory group. These studies also cover care costs for patients in the 'standard care' arm of treatment.

“My research team has got bigger,” she says. “As I've taken on more studies, the income has grown, and our team has grown.” This has increased opportunities for patients with ILD at UHS to take part in research, allowing them to gain early access to new drugs.

## Embedding research culture

Sophie has long been committed to supporting others to follow in her footsteps.

Her RLP has accelerated this work, allowing her to recruit, supervise and mentor eight clinical fellows. These are doctors undertaking a fixed-term role that includes research.

She has also supervised five NIHR Associate Principal Investigators. This six-month training opportunity aims to develop health and care professionals to become the Principal Investigators of the future.

Sophie says the research experience the fellows gain is still valuable, even if they decide not to pursue a career in research.

“Research should be part of clinical care,” she says. “If that's something introduced to you at an early part of your career, you're more likely to carry on doing it. It's about embedding good practice, with research as part of your everyday clinical care.”

## Forging new collaborations

Sophie also works closely with her colleagues, and has created new working relationships with other respiratory researchers.

One example is with Dr Aisha Fazleen, a newly appointed consultant investigating Alpha-1 antitrypsin deficiency. This genetic condition increases the risk of lung diseases.

“She started up her research portfolio from scratch, and didn't have a research fellow, so I lent her mine,” says Sophie. “I've become her mentor, as well as providing her with practical support.”

Sophie also works closely with asthma researcher and RLP awardee Dr Hitasha Rupani. Hitasha didn't have enough funding for a fellow last year, so Sophie suggested they each fund half of a joint role.

“It's all about collaborative work to find a solution,” she says.

## Collaborating with researchers across the South

Working together is a central part of research, as you cannot do it alone.

One of the main reasons Dr Linden Stocker joined the RLP was to form new collaborations with other researchers.

Linden is a Foetal Maternal Medicine Consultant. She is investigating the relationship between a woman's circadian rhythm, or 'body clock', and pregnancy outcomes.

As the Lead for Women and Reproductive Health at the NIHR South Central Regional Research Delivery Network (RRDN), she is now well placed to form new regional collaborations.

The south-central RRDN is one of 12 established in October 2024.

“The RLP has supported me to become a true research leader,” says Linden. “I now work with researchers across our region to improve reproductive and pregnancy outcomes for patients.”



**DR LINDEN STOCKER**

Foetal Maternal  
Medicine Consultant,  
University Hospital  
Southampton



## Meet the 'engine oil' helping UHS work smarter



**DR MATT STAMMERS**

Consultant Gastroenterologist and Data Scientist, University Hospital Southampton

Dr Matt Stammers doesn't just treat patients - he is also improving the systems around them.

He isn't your typical consultant gastroenterologist. Thanks to his place on the Research Leaders Programme (RLP), Matt has been able to turn his ideas into real improvements for patient care.

"I'm not the fuel in the engine," he says. "I'm the engine oil - I help everything run better."

Matt's work ensures that UHS is always improving. During the COVID-19 pandemic, he helped identify where infections were spreading inside the hospital. He was part of a team that introduced rapid testing in a key ward, cutting waiting times from over 20 hours to just three. That change helped stop the spread of infection and saved lives.

He's also tackled problems in how patients with inflammatory bowel disease (IBD) are treated. His research showed that some treatments, like steroids, were causing harm. As a result, the team now uses them more carefully - especially in patients who need surgery.



## Improving services

But Matt's impact goes beyond clinical trials. He's built new patient pathways that fast-tracks diagnosis, cutting wait times from over 200 days to just 30. "We're now running at half the average wait of many other trusts," he says. "And we did it without extra resources - just smarter systems."

His passion for informatics led him to build an open-source algorithm that uncovered thousands of "missing" patients in hospital records. "We found 38% more IBD patients than we thought we had," Matt says. "That means more people can be invited into trials and get better care. We're probably the only hospital in the world with a full grip on this."

Matt's work has helped digitise outpatient services, reduce emergency admissions and improve how patients are followed up. He's even helping develop tools to speed up hospital discharges and link genetic data with patient records.

## Building a legacy

The RLP gave him the time, tools and support to make all this happen. But more than that, it changed how he thinks. "I joined thinking I'd become a better programmer," he says. "Instead, I became a better leader."

Now, Matt focuses on building systems that help others succeed. "I used to think legacy was about building things," he reflects. "Now I know it lives on in people."

Matt is quietly transforming how our hospital delivers care, using research as a tool for real-world change. "This is just the start," he says. "And thanks to the RLP, I'm better equipped to keep improving things - for our hospital, our patients and the NHS."

## Virtual stroke assessments: Faster help, better outcomes

In stroke care, every minute counts.

"For every half an hour you delay treatments in this setting, patients have a 10% less likely chance of returning to independent living," Dr Richard Marigold explains.

"Relatively small amounts of time can make a big difference to outcomes."

Stroke patients are getting faster, life-saving treatment at UHS through the innovation of virtual stroke assessment.

The hospital piloted video calls between paramedics and specialist nurses to assess patients in the ambulance. This means faster scans, quicker treatment and better chances of recovery.

The process is also helping doctors spot non-stroke cases early, saving time and resources.

Dr Marigold is supported by the UHS Research Leaders Programme. "This is an incredibly exciting project that has the potential to revolutionise acute stroke care," he says.

The next steps will include regional roll-out so that more hospitals can realise the benefits.



**DR RICHARD  
MARIGOLD**

Consultant Stroke  
Physician,  
University Hospital  
Southampton

## Looking to the future

The RLP has now reached a point of maturity, with streamlined processes, tangible outputs and a growing reputation for excellence.

This report highlights how the programme's success both financially and reputationally is building year on year. Several cohort members have secured funding early in their journey, enabling them to support their own research time and reinvest their RLP award for the benefit of future participants.

Participants consistently express how valued they feel working in a Trust that actively supports their development as researchers. The integration of research into our Trust strategy has fostered a culture where research is not only encouraged but celebrated. As a result, we continue to receive interest from national research funders and NHS/HEI partnerships from across the UK keen to learn from our model. The RLP also featured as a case study in "Research matters: enabling and sustaining a research-positive culture for nurses, midwives and allied health professionals - A guide for executive chief nurses" published by NHS England in October 2025.<sup>1</sup>

As we navigate the challenges facing both the NHS and academia, the RLP stands as a beacon of what sustained, strategic investment can achieve. Our researchers contribute directly to improvements in patient care, innovation, and income generation that supports both research and routine clinical services. Research is a vital component of delivering efficient, high-quality care and building on these foundations will strengthen our position as a University Teaching Hospital.

<sup>1</sup>[www.england.nhs.uk/long-read/research-matters-enabling-and-sustaining-a-research-positive-culture-for-nurses-midwives-and-allied-health-professionals/](https://www.england.nhs.uk/long-read/research-matters-enabling-and-sustaining-a-research-positive-culture-for-nurses-midwives-and-allied-health-professionals/)



**UHS RESEARCH LEADERS PROGRAMME**  
**RESEARCH AND DEVELOPMENT**  
Developing our future leaders in research

# APPENDICES

- Full Biographies available  
[www.soar-southampton.org/research-leaders-programme-award-holders](http://www.soar-southampton.org/research-leaders-programme-award-holders)

## Appendix A - Biographies

- Cohort 1 - 01 April 2022



Katherine Lachlan  
*Clinical Genetics*



Matthew Wheeler  
*Medical Oncology*



Ahilanandan Dushianthan  
*Intensive Care and Respiratory  
Medicine*



Bhaskar Somani  
*Urological Surgery*



Jessica Bate  
*Paediatric Oncology*



Hitasha Rupani  
*Respiratory Medicine*



Stephen Lim  
*Geriatric Medicine*



Matthew Guy  
*Healthcare Science and Digital  
Diabetes*



Mark Banting  
*Palliative Medicine*



Phil Hyde  
*Paediatric Intensive Care*

# APPENDICES

- Cohort 2 - 01 Oct 2022



Hannah Markham  
*Histopathology*



Luise Marino  
*Paediatric Dietetics*



Cathy McKenzie  
*Pharmacy*



Andy Fox  
*Pharmacy*



Sophie Fletcher  
*Respiratory Medicine*



Matthew Stammers  
*Gastroenterology and Data  
Science*



Boyd Ghosh  
*Neurology*

- Cohort 3 - 01 April 2023



Hazel Evans  
*Respiratory Paediatrics*



Linden Stocker  
*Foetal Maternal Medicine*



Mark Wright  
*Hepatology*



Judith Cave  
*Medical Oncology*



Thomas Daniels  
*Respiratory Medicine and Data  
Science*

# APPENDICES

- Cohort 4 - 01 April 2024



Rebecca Cusack  
*Critical Care Medicine*



James Douglas  
*Urological Oncology*



Tracy Coelho  
*Paediatric Gastroenterology*



Richard Marigold  
*Stroke Medicine*



Sofia Michopoulou  
*Nuclear Medicine Physics*



Caroline Anderson  
*Paediatric Dietetics*



Peter Cowburn  
*Cardiology*



Mark Johnson  
*Neonatology*



Andrew Flett  
*Cardiology*

# APPENDICES

- Cohort 5 - 01 April 2025



Veena Agarwal  
*Neurological Physiotherapy*



Sean Main  
*Neuro-oncology*



Jacqueline Young  
*Paediatric Audiology*



Kevin Goss  
*Neonatology*



Thomas Dudding  
*Colorectal and Pelvic Floor Surgery*



Richard Felwick  
*Gastroenterology*



Donna Austin  
*Paediatric Intensive Care Nurse*



Michel Erlewyn-Lajeunesse  
*Paediatric Allergy and Immunology*



Alex Aarvold  
*Paediatric Orthopaedic Surgery*



Andrew Bates  
*Critical Care Nurse*



Philip Newland-Jones  
*Consultant Pharmacist for Diabetes and Endocrinology*



Matthew Harmer  
*Consultant in Paediatric Nephrology*