



**HDR UK SCIENTIFIC
CONFERENCE**

Annual Awards 2022



Contents

| | |
|---|-----------|
| Welcome | 3 |
| Awards Overview | 4 |
| Awards Chairs and Panellists | 6 |
| Shortlisted Candidates | 9 |
| Impact of the Year Award | 10 |
| Team of the Year Award | 13 |
| Patient and Public Involvement and Engagement Award | 16 |
| Recognition Recipients | 19 |
| Reproducibility | 20 |
| Hidden Roles | 23 |
| Apply for our Annual Awards 2023 | 24 |

Welcome

This year we have seen significant research achievements made across the Institute, demonstrating the enormous power of data to advance medical knowledge and deliver radical improvements to people's lives. People working across academia, healthcare, industry, charities plus patients and the public have come together to further health data research and innovation.

Using large-scale data, advanced analytics and innovative developments in data governance, we have directly informed policy decisions and healthcare practices that, while often rooted in the pandemic, will make a difference to health outcomes long into the future.

Our annual awards aim to recognise the people behind the data research in our scientific community, through three awards:

- **Impact of the Year**
- **Team of the Year**
- **Patient and Public Involvement and Engagement**

Applications were invited in Summer 2022 and underwent a strict judging process by our panels of experts spanning research, health data technology and biopharma companies, government, and patients and the public.

Thank you to all the applicants for sharing their experiences and impacts with us this year.



Awards Overview



IMPACT OF THE YEAR AWARD

This award celebrates the work with the highest impact on people's lives, through the use of health data, within HDR UK and beyond. This includes algorithms, software, tools, digital resources, policy or practice change exemplars, publications and pre-prints, relating to health data research from the last year. Impacts have involved and engaged patients or service users, carers and the public at every appropriate stage of the research project life cycle.

The applications were assessed by a panel with a background in impactful science, based on:

- **Impact at scale**
- **Generating novel insights**
- **Collaborative working**
- **High quality public and patient involvement**
- **Equality, diversity and inclusion**
- **Alignment and relevance to HDR UK's mission**
- **Alignment to HDR UK values**



TEAM OF THE YEAR AWARD

This award celebrates team science achievement through collaborative endeavours by groups of researchers, innovators, technologists and others working together, within HDR UK and beyond. Teams spanning different disciplines and geographical centres have come together to tackle challenges, offering their own perspectives based on their own experiences.

The applications were assessed by a panel with experience in team science, based on:

- **Outstanding achievements relating to the HDR UK mission of uniting health data to improve people's lives**
- **Channelling HDR UK's values of transparency, optimism, respect, courage and humility**
- **Exemplary team-working characteristics and/or processes**
- **Coming through challenging times together**
- **Innovative and inclusive leadership**
- **Bringing together a highly-functional interdisciplinary and/or intersectoral team with complementary skills**



PATIENT AND PUBLIC INVOLVEMENT AND ENGAGEMENT AWARD

This award celebrates best practice and innovation in patient and public involvement and engagement (PPIE) across all aspects of research, infrastructure and service development, within HDR UK and beyond.

PPIE is core to HDR UK's mission. It is critical to ensure the views and ideas of patients and the public are strategically and meaningfully embedded into each stage of research, service design, data collation, storage and dissemination to ensure trustworthy approaches are developed and help build public confidence. By involving and engaging patients and the public throughout, it enables maximum research impact for health benefit and of relevance to people's lives.

In conjunction with the [UK Standards for Public Involvement](#), the applications were assessed by a diverse panel, with a range of experience in patient and public involvement and engagement, including patient and public partners. It was based on:

- **Creating active and meaningful public involvement and engagement opportunities, such as through co-production approaches, that are accessible and meaningfully address equality and diversity**

- **Working together in a way that values all contributions, and that builds and sustains mutually respectful and productive relationships**
- **Offering and promoting support and learning that builds confidence and skills for PPIE in research, infrastructure and service development**
- **Communications in PPIE plans and activities that are regular, appropriately timed, and use inclusive and flexible methods with plain language**
- **Impact of the project, team, patients and the public, other stakeholders or an innovative approach to PPIE. Ensuring transparency by publishing and proactively sharing the difference that involvement and engagement has made to the project whilst enabling shared learning on PPIE methodology**
- **Public proactively involved in management, regulation, leadership, shared decision making and strategic management**
- **Alignment and relevance to HDR UK's mission**
- **Alignment to HDR UK values of transparency, optimism, respect, courage and humility**

Awards Chairs and Panellists



IMPACT OF THE YEAR AWARD

This award was chaired by
James O'Shaughnessy, House of Lords

"Once again the judging panel was pleased to see some very strong applications for the Impact of the Year award. We chose three finalists that we felt represented, in their different ways, excellent examples of health data being used at scale to generate very significant academic and real world impact. They are also highly reproducible programmes that bring to life HDR UK's core values. This group will provide a worthy winner and an exemplar for other future programmes to emulate."



James O'Shaughnessy
HDR UK board member and member of the House of Lords

PANELLISTS:

Arun Sujenthiran
Flatiron Health

Ben Johnson
SpringerNature (Public and Patient Representative)

Munisa Hashimi
Brunel University (Public and Patient Representative)

Samantha Ip
University of Cambridge

Vasa Curcin
King's College London



TEAM OF THE YEAR AWARD

This award was chaired by
Alison Paprica, University of Toronto

"Many of the most important health problems and opportunities for society can only be addressed by interdisciplinary teams. Most of us know, first-hand, how much harder it is to mobilise and coordinate work when team members come from different disciplines, have different backgrounds and experiences, and speak different languages (literally and figuratively). The teams nominated for HDR UK's team of the year, have not only mobilised talent and perspectives across disciplines to move the dial on important topics, they have all demonstrated a commitment to transparency and replicable research, tools, and processes."



Alison Paprica
Adjunct Professor and Senior Fellow at the Institute for Health Policy, Management and Evaluation at the University of Toronto



PATIENT AND PUBLIC INVOLVEMENT AND ENGAGEMENT AWARD

This award was chaired by
Debbie Keatley, HDR UK Public Advisory Board

"HDR UK is taking every opportunity to promote excellence in patient and public involvement. There is just so much good work that deserves recognition. The number and quality of applications for the PPIE Award signify that the time has come for this movement towards truly including people that research is for."

"These projects all share an understanding that great PPIE is core and an integral part of the project. We heard from projects with PPIE values that are authentic, responsive to the needs of the project and wider stakeholders, and reflect faithfully the range of voices of those most affected. We were blown away by these amazing projects that demonstrated social returns and positive impact that will endure. The people and projects involved are beacons of good practice - they are change makers."



Debbie Keatley
HDR UK Public Advisory Board

PANELLISTS:

Colin McCowan
University of St Andrews

Colin Wilkinson
Public Advisory Board

Holly Rogers
Academy of Medical Sciences

Jillian Hastings
Genomics England (Public and Patient Representative)

Matthew Bonam
AstraZeneca

Shortlisted Candidates



Impact of the Year Award



ECONOMIC ANALYSIS OF INTERMITTENT VERSUS CONTINUOUS CETUXIMAB IN KRAS WILD-TYPE PATIENTS WITH METASTATIC COLORECTAL CANCER

Raymond Henderson, Declan French, Ethna McFerrana, Richard Adams, Harpreet Wasan, Robert Glynn-Jones, David Fisher, Susan Richman, Philip Dunne, Lisa Wilde, Timothy Maughan, Richard Sullivan, Mark Lawler

Their research, published in the [Journal of Cancer Policy](#), compares the costs of intermittent versus continuous therapy in colorectal cancer and the value of treatment breaks for the patients' quality of life.

Using a combination of health economic modelling and in-depth data analysis, the research indicates that providing a break in treatment to patients with advanced bowel cancer could not only benefit a patient's response to treatment and their quality of life but could also help save up to £1.2 billion for the NHS in England. The data has informed policy, contributing to NHS England's decision to introduce treatment breaks for patients with bowel cancer nationally.

The panel applauded the translation of research results into policy in a short timeframe, alongside the focus on patients' quality of life. The panel found the study presents a strong analysis and demonstrates the potential of using health data for health economics.

Mark Lawler, Professor of Digital Health and Scientific Director, DATA-CAN, the UK's Health Data Research Hub for Cancer:

"Our work, in close collaboration with Bowel Cancer UK, a leading UK cancer charity, has had tremendous impact. It provided the vital evidence that led NHS England to end a ban on 'treatment breaks' for advanced bowel cancer patients, allowing them a vital break from two drugs that can cause significant toxicities, without the risk of having to pay thousands of pounds to continue treatment. Using health economic modelling and bespoke data analysis, we found that employing a treatment break approach would not only have no negative impact on a patient's quality-of-life or clinical outcome, but would also help save up to £1.2 billion for NHS England. So, significant impact for both the patient and the health system. The decision by NHS England to end their ban on treatment breaks represents a long overdue victory for patients, which we are delighted to be part of. It shows how turning data into evidence is critical to influencing a change in NHS policy and delivering a significant impact that directly benefits our patients."



DATA AND CONNECTIVITY NATIONAL CORE STUDY

Andrew Morris, Lara Edwards, David Seymour, Ruby Kell, Office for National Statistics, SAIL Databank, NI Honest Broker Service Scottish National Data Safe Haven, NHS Digital, BHF Data Science Centre, and OpenSAFELY

[Data and Connectivity](#) connects UK health data, accelerating research on COVID-19 and enabling stronger, research evidence-informed policies for COVID-19 response, pandemic recovery and future health threat preparedness.

The team has created the first national UK Trusted Research Environment (TRE) network and enabled access and linkage to 111 UK priority datasets. This study enabled rapid and high impact COVID-19 research which has helped inform the national and international COVID-19 policy response.

The panel recognised the importance of this study as an enabler of research and its legacy

to continue to deliver impact. The panel were further impressed with the study's strong patient and public involvement and alignment to HDR UK's values.

David Seymour, Director of Infrastructure and Services

"The National Core Studies, and in particular Data & Connectivity, are one of the silver linings to emerge from the pandemic. They have shown the power of collaboration in delivering impact through policy shaping research and ecosystem shaping infrastructure. I am delighted to see this recognised through the shortlisting process."



ASSOCIATION OF COVID-19 WITH MAJOR ARTERIAL AND VENOUS THROMBOTIC DISEASES: A POPULATION-WIDE COHORT STUDY OF 48 MILLION ADULTS IN ENGLAND AND WALES

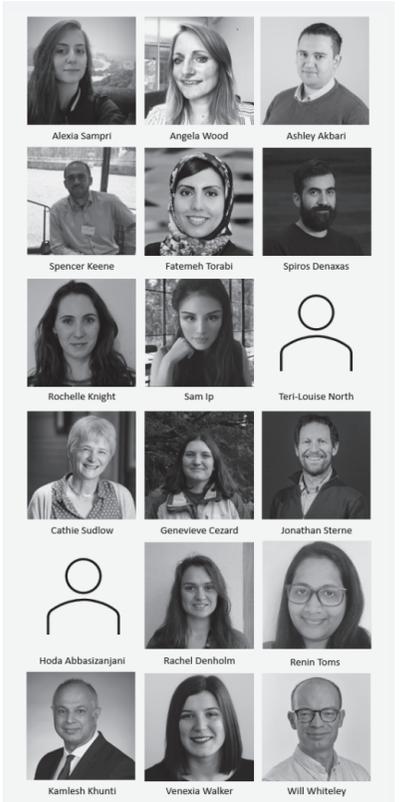
Rochelle Knight, Venexia Walker, Samantha Ip, Jennifer A. Cooper, Thomas Bolton, Spencer Keene, Rachel Denholm, Ashley Akbari, Hoda Abbaszanjani, Fatemeh Torabi, Efosa Omigie, Sam Hollings, Teri-Louise North, Renin Toms, Xiyun Jiang, Emanuele Di Angelantonio, Spiros Denaxas, Johan H. Thygesen, Christopher Tomlinson, Ben Bray, Craig J. Smith, Mark Barber, Kamlesh Khunti, George Davey Smith, Nishi Chaturvedi, Cathie Sudlow, William N. Whiteley, Angela M. Wood, Jonathan A.C. Sterne and the CVD-COVID-UK/COVID-IMPACT Consortium and the Longitudinal Health and Wellbeing COVID-19 National Core Study

The study, published in the American Heart Association's [Circulation](#), explored the impact of COVID-19 infection on incidences of vascular disease. The aim was to enhance the ability of public health professionals to design targeted, effective, evidence-based policy, and minimise the impacts of COVID-19. Ultimately to influence public behaviour, drive cost savings to the health and social care system and improve patient outcomes.

The panel commended the direct impact of this work on the public and its commitment to transparency as exemplified by a well-documented GitHub repository sharing codelists, executable code, and visualisations.

Jonathan Sterne, Professor of Medical Statistics and Epidemiology and Deputy Director, NIHR Bristol Biomedical Research Centre at University of Bristol:

"We have shown that even people who were not hospitalised after COVID-19 faced a higher risk of blood clots after COVID-19 in the first wave before vaccination became available. While the risk to individuals remains small, the effect on the public's health could be substantial and strategies to prevent vascular events will be important as we emerge from the pandemic."



Team of the Year Award



MuM-PreDiCT

Krishnarajah Nirantharakumar, Adeniyi Fagbamigbe, Amaya Azcoaga-Lorenzo, Anuradhaa Subramanian, Astha Anand, Beck Taylor, Catherine Nelson-Piercy, Christine Damase-Michel, Colin McCowan, Christopher Yau, Dermot O'Reilly, Helen Dolk, Gillian Santorelli, Holly Hope, Jonathan Kennedy, Kelly-Ann Eastwood, Kathryn M Abel, Louise Locock, Maria Loane, Mairead Black, Ngawai Moss, Peter Brocklehurst, Rachel Plachcinski, Richard Riley, Sinead Brophy, Shakila Thangaratinam, Utkarsh Agrawal, Zoe Vowles, Siang Ing Lee, Neil Cockburn, Katherine Phillips, Megha Singh, Yuangen Li, Francesca Crowe, Stephanie Hanley, Steven Wambua, Mohamed Mhereeg, Charles Gadd, Lisa Kent, Sharon McCann, Jemma Healey, Sudasing Pathirannehelage Buddhika Hemali Sudasinghe



The team is recognised for its leadership and inclusivity, particularly for the involvement and support of early career researchers. The panel applauded the team's public and patient involvement and engagement which shows real evidence of co-production in an underserved area.

Ngawai Moss, PPI Coordinator & Co-applicant:

"We have a wonderful MuM-PreDiCT team with a broad range of people and disciplines across the UK. It has been really exciting and enjoyable working together and sharing this research journey to improve care for pregnant women with two or more health conditions. As a team we are constantly aware that we do it for them."

[MuM-PreDiCT](#) aims to improve maternity care for women who are also managing two or more long-term health conditions. It is a consortium of eight universities from all four UK nations with a multidisciplinary team, comprising health data scientists, clinicians (maternity care, primary care, public health), and patient and public representatives. The team was established with the vision of using data-driven research to characterise and understand the determinants and consequences of multimorbidity in pregnant women; and to predict and prevent multimorbidity and its adverse consequences in women and their offspring.



EAVE II – EARLY PANDEMIC EVALUATION AND ENHANCED SURVEILLANCE OF COVID-19

Vittal Katikireddi, Colin McCowan, Mark Woolhouse, Aziz Sheikh, Igor Rudan, Sarah Stock, Lewis Ritchie, Colin Simpson, Rachael Wood, Jim McMenamin, Josie Murray, Sandra Jayacodi, David Weatherill, Carrol Lamouline, Deb Smith, Emily Lam, Eve Smyth, Farzana Kausir, JC, Joanna C, Kamil Sterniczuk, Lynn Laidlaw, Peter McDade, Philip Bell, Tamara Jayacodi, Hameed Khan, Steven Kerr, Ahmar Shah, Tristan Millington, Fasih Haider, Sam Hillman, Fatima Almaghrabi, Holly Tibble, Calum Macdonald, Karen Jeffrey, Luke Daines, Ting Shi, Utkarsh Agrawal, Ronan McCabe, Sharon Kennedy, Zoe Grange, Chris Sullivan, Lana Woolford, Vicky Hammersley, Natalia Reglinska-Matveyev, Gabriella Linning, Laura Brook, Calder Hudson, Amie Willson



The panel recognised the team as an exemplar of inclusive and innovative leadership, as demonstrated through their cross-country collaboration with Brazil. The team's work has had a clear impact on policy, decision-making, and people's lives.

Sir Aziz Sheikh, Director, Usher Institute and Dean of Data, University of Edinburgh:

"It has been an incredible privilege to work with the outstanding, interdisciplinary, Scotland-wide EAVE II team to help address the most pressing global health threat in a generation. The ways in which these colleagues from diverse backgrounds and institutions came together to produce a raft of world-leading analyses has been both humbling and inspiring, offering a model of team science that will hopefully live on way beyond the pandemic."

[EAVE II](#) uses patient data to track the COVID-19 pandemic and vaccine effectiveness across Scotland. It is a highly interdisciplinary team, including public health practitioners, epidemiologists, statisticians, data scientists, data wranglers, patient and public involvement and policy experts, and data and project managers.

They have created one of the world's most comprehensive, longitudinal multi-dimensional COVID-19 surveillance platforms. This has been interrogated in near real-time to answer urgent questions in relation to the epidemiology of COVID-19, risk stratification deliberations, assessing the uptake, effectiveness and safety of vaccines and COVID-19 therapeutics, and health system disruption.



UK HEALTH SECURITY AGENCY SARS-COV2 IMMUNITY AND REINFECTION EVALUATION (UKSHA SIREN)

Susan Hopkins, Ana Atti, Andrew TaylorKerr, Andre Charlett, Angela Dunne, Anna Howells, Ayoub Saei, Claire Neill, Colin Brown, Dominic Sparkes, Edgar Wellington, Edward Monk, Enemona Adaji, Ferdinando Insalata, Iain Milligan, Jean Timeyin, Jerry Ye Aung Kyaw, Joanna Conneely, Jameel Khawam, Jasmin Islam, Jonathan Broad, Katie Munro, Michelle Cole, Maria Zambon, Naomi Platt, Nipunadi Hettiarachchi, Nishanthan Kapirial, Paul Conneely, Peter Kirwan, Sarah Foulkes, Victoria Hall, Tim Brooks, Ashley Otter, Amanda Semper, Jacqueline Hewson, Silvia D'Arcangelo, Ezra Linley, Simon Tonge, Lesley Price, Lynne Haahr, Nicole Sergenson Sally Stewart, Josie Evans, Ayodeji Matuluko, Emily Godden, Lisa Cromey, Diane Corrigan, Chris Norman, Elen De Lacy, Guy Stevens, Yvette Ellis



Victoria Hall, Consultant Epidemiologist, SARS-CoV-2 Immunity & Reinfection Evaluation – SIREN Study, UK Health Security Agency:

"Setting up the SIREN Study, and running it for the past two and a half years, continually adapting our design and research questions in response to the evolving pandemic has demanded coordinated effort across the brilliant interdisciplinary SIREN team. As a new team we have been proactive in thinking about how we work: our team structure, internal communication and embedding regular reflection, recognising this underpins our scientific endeavours. Collaboration has also been key as we have built partnerships across the UK public health agencies, NHS sites and academic partners. Working in this way has built resilience and enabled us to rapidly adapt our study and ways of working in response to new pandemic scenarios and scientific questions."

[UKSHA SIREN](#) provides vital research into COVID-19 immunity and vaccine effectiveness nationally. The study is a unique, large-scale partnership with NHS healthcare workers providing an agile response to an evolving pandemic. The team consists of a wide variety of specialists including a core team of epidemiologists, physicians, data scientists, business operatives, management specialists and laboratory scientists - with an extended team far wider, with 135 sites across four UK nations.

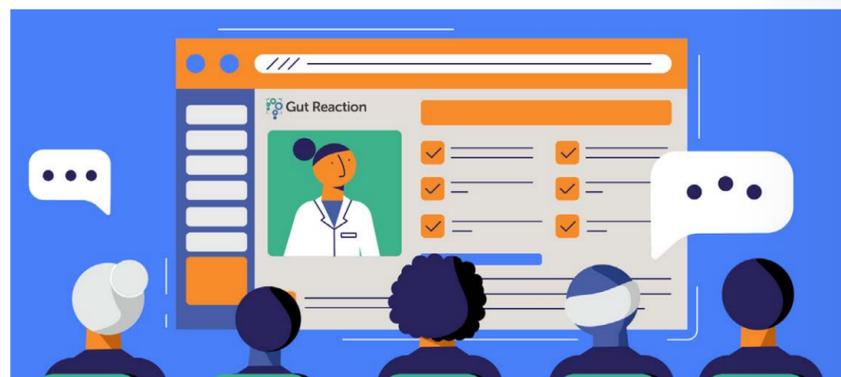
The team was applauded for their noteworthy accomplishments during a difficult time. Utilising vast amounts of health data to answer the most pressing questions relating to COVID-19 including vaccine effectiveness and risk of reinfection, they have impressively influenced data flows.

PPIE Award



GUT REACTION

Gemma Winsor, Sarah Sleet, Amanda Stranks, Mark Avery, Eleanor Hall, Charlie Clarke, John Bradley, Neil Walker, Nathalie Kingston, Mary Kasanicki, Miles Parkes, Laetitia Pele



[Gut Reaction Health Data Research Hub](#) is a unique, secure data resource designed to facilitate academic and industry research in Inflammatory Bowel Disease (IBD). The team works with the IBD community to improve treatment options and patient outcomes through safe, transparent and responsible use of patient data.

With the support of Crohn's & Colitis UK, Gut Reaction's Patient Advisory Committee was formed at inception to facilitate patient involvement in planning and decision-making. The team uses linked health data from patients who have consented to its use through the NIHR BioResource. They use this information combined with data from other sources, which can include NHS records, to create a powerful tool for research.

Gut Reaction has completed a significant amount of work developing training materials to support patient involvement in health data research. The panel believes this to be an exceptional resource and a contribution to PPIE that will remain valuable well into the future.

Gemma Winsor, Research & Quality Improvement Lead, Crohn's & Colitis UK:

"Gut Reaction is a research programme that brings together health data from thousands of people living with Crohn's and Colitis across the UK. It means that research can be carried out faster, using large sets of data. We understand that some people have concerns about the use of health data, which is why working with people with Crohn's and Colitis has been so important. Their involvement has shaped how Gut Reaction functions now and in the future."



PIONEER

Elizabeth Sapey, Suzy Gallier, Andrew Percy, Ben Crosby, Rima Doal, Alec Topham, Sarah Lim, Lily Li, Alan Kwok, Mark Bayliss, Kiki Chan, Jadene Lewis



[PIONEER](#), the Health Data Research Hub for Acute Care, enables researchers and companies to develop, test and deliver advances in clinical care with real-time information and support services. They aim to improve healthcare pathways and treatments by understanding the symptoms and diseases people have when they become unwell: whether they had been to hospital or other healthcare providers before with the same problems; the time it took to make a diagnosis; and the care they received.

Their work is a great example of collaboration across SMEs, the NHS, patient groups and more. The project is recognised for its novel approaches to inclusivity and involvement, alongside demonstrated impacts. For example, the team has worked closely with a Young Persons Advisory Group and guardians, to co-develop a Data Trust Committee term of reference for young people.

Liz Sapey, PIONEER Director:

"The PIONEER team believes that access to highly detailed, individually linked health data, supported by patients and the public, can transform healthcare for our population. PIONEER has actively involved, learned from, and benefited from working with underserved communities, patients, and carers, including young people. This has enabled PIONEER to deliver real change in the public's oversight of the use of their health data for research and innovation, and how healthcare is delivered. The impact of patient and public involvement in health data research is clear; researchers who have accessed health data via PIONEER feed back time and time again that the public and patients groups we introduce them to accelerate their research and ensure their findings are meaningful."



MuM-PreDiCT

Rachel Plachcinski, Ngawai Moss and the MuM-PreDiCT Research Team



[MuM-PreDiCT](#) aims to improve maternity care for women who are also managing two or more long-term health conditions. The project involves women with experiences of multimorbidity and pregnancy from a variety of backgrounds - and is investigating the interaction of two or more health conditions with pregnancy, birth, and early parenthood, and the implications for women and their babies.

The project is recognised for its purposeful involvement and deliberately broad PPIE group, including people with HIV and from the LGBTQ+ community. Of note is the team's novel approach of 'deep dives' with underserved communities to provide a convenient and comfortable space for participation.

Rachel Plachcinski, Parent, patient and public involvement lead, MuM-PreDiCT:

"MuM-PreDiCT aims to understand multimorbidity (MM) in pregnant women, and then develop tools and strategies to tackle MM and its adverse outcomes before, during and after pregnancy. Our public involvement and engagement programme is a vital component in delivering this goal. Including the views and experiences of women and families with a range of health conditions and from diverse backgrounds helps ensure the development and dissemination of our research is sensitive and accessible to a lay audience and leads to more personalised maternity care."

Recognitions

In addition to our annual awards, HDR UK seeks to recognise good practices in reproducibility and celebrate the hidden roles that support research delivery.

REPRODUCIBILITY RECOGNITION

Reproducibility is central to HDR UK's values. Applicants were asked to highlight any practices employed by their team that support reproducibility and reuse, including pre-registration, use of reporting guidelines, FAIR data, open-source software and registered reports.

HIDDEN ROLES

HDR UK is celebrating the practices and people who have had an impact on research delivery such as: data stewards and managers, librarians, technicians, Research Software Engineers, Professional Services Personnel, Research Managers and Administrators.



Reproducibility

1

CO-CONNECT

co-connect.ac.uk

Phil Quinlan, Gordon Milligan, Tom Giles, Joe Best, Sam Cox, Philip Appleby, Christian Cole, Andrew Hadfield, Scott Horban, Emily Jefferson, Daniel Lea, Calum MacDonald, Erum Masood, Shahzad Mumtaz, Vasiliki Panagi, Esmond Urwin, Jenny Johnston, Robert Santos, Christopher Hall, David Schlessinger, Simon Tarr, Joseph Lavagna, Ipek Birced, Jill Hampton, Claire Collins, Sam Rising, Susan Hopkins, Aziz Sheikh



A platform with reproducibility at its mission, Co-Connect is recognised for openly available, easy to reuse, and well-documented tools that are ‘oiling the wheels’ of health data science.

2

HDR UK TEXT ANALYTICS

github.com/HDRUK-Text/resources

Richard Dobson, Angus Roberts, Thomas Searle, Honghan Wu, Vlad Dinu, Xi Bai, Alex Handy, Elizabeth Ford, Kerina Jones, James Teo, Georgios Gkoutos, Wai Keong Wong, Amos Folarin, Daniel Bean, Simon Ball, Elizabeth Sapey, Rob Harland, Nigel Collier, William Whiteley, Luke Slater, Andreas Karwath, Sarah Wang, Amy Gosling, Natalie Fitzpatrick

HDRUK-Text/ resources

Applications and datasets for healthcare text analytics developed and shared by the HDR UK Text community.



The HDR UK Text Analytics team is recognised for going beyond a well-maintained GitHub repository and helping others to use their work. The team’s dedication to training and capacity building is an important element of reproducibility, though often overlooked, and is reflected in the community they have created.

3

THE PHENOTYPE LIBRARY

phenotypes.healthdatagateway.org

Spiros Denaxas, Emily Jefferson, Harry Hemingway, Dan Thayer, Shahzad Mumtaz, Martin Chapman, Helen Parkinson, Vasa Curcin, Hannah Davies, Muhammad Elmessary, Natalie Fitzpatrick

As an open platform for storage, dissemination, re-use, evaluation and citation curated algorithms and metadata - reproducibility is at the core of the Phenotype Library’s purpose. It provides standardisation and speed, supporting time-pressing research across multiple disciplines with an impact well beyond HDR UK.



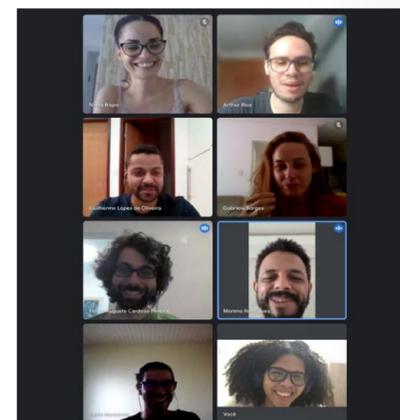
4

PAMepi

github.com/PAMepi

Juliane Fonseca de Oliveira, Moreno S Rodrigues, Pablo IP Ramos, Nivea B da Silva, Arthur R de Azevedo, Andressa CS Ferreira, Felipe AC Pereira, Fabio MHS Filho, Luis IO Valencia

Motivated by the urgent need to support a rapid response to the COVID-19 pandemic, the PAMepi team developed an open data-sharing platform for researchers and policymakers. The platform features a multilingual data explorer that allows users to view metadata, column descriptions, variable types, and more – facilitating reuse and exemplifying the power and importance of translation in science.



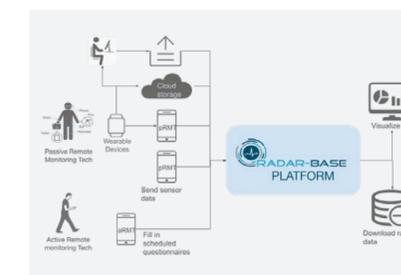
5

RADAR-BASE

github.com/RADAR-base

Yatharth Ranjan, Amos Folarin, Pauline Conde, Heet Sankesara, Zulqarnain Rashid, Richard Dobson

An open source platform to leverage data from wearables and mobile technologies, RADAR-Base has supported national and international research projects spanning diseases. Of particular note is the extensibility of the platform.



6

CVD-COVID-UK/COVID-IMPACT CONSORTIUM

github.com/BHFDSC

Rouven Priedon, Tom Bolton, John Nolan, Mehrdad Mizani, Zach Welshman, Ashley Akbari, Fatemeh Torabi, Hoda Abbasanzani, Cathie Sudlow, Lynn Morrice, Samaira Khan, Kate McAllister, Angela Wood, Spiros Denaxas and all other members of the CVD-COVID-UK/COVID-IMPACT consortium

Embracing good practices that span the research cycle, this consortium is recognised for its commitment to transparency as exemplified by a well-documented BHF Data Science Centre GitHub repository sharing codelist, executable code, and visualisations.



Hidden Roles

Hidden roles recipients are those whose work has been instrumental in the conduct of research, but may not have been recognised in traditional research outputs. This includes administration, programme management, software engineers, data engineers, computer scientists and PPIE coordinators, and include:

PROJECT MANAGERS AND ADMINISTRATIVE STAFF

- Jenny Johnston
- Laetitia Pele
- Vicky Hammersley
- Natalia Reglinska-Matveyev
- Megha Singh
- Yuangen Li



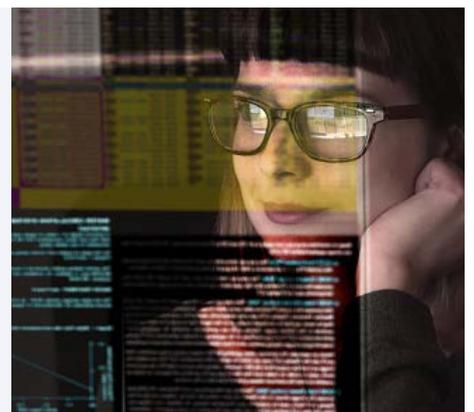
PUBLIC AND PATIENT INVOLVEMENT AND ENGAGEMENT PROFESSIONALS

- Lana Woolford
- Rachel Plachcinski
- Ngawai Moss



SOFTWARE ENGINEERS, DATA ENGINEERS, COMPUTER SCIENTISTS, AND DIGITAL RESEARCH TECHNOLOGISTS

- Erum Masood
- Joe Best
- Alecsandru Vitoc
- Aditya Acharya
- Krishna Gokhale



Annual Awards 2023

If you are working on an impactful project that you believe deserves HDR UK recognition, apply for our 2023 Awards. Applications open in Summer 2023.
