Project Name	Requested Organisation	Project Description	Project Type	Target Disease / Area of Study	DAC Decision Date	Approved? Yes/No
Systemic Lupus Erythematosus (SLE)	University of Manchester	Lupus is a chronic autoimmune disease that frequently affects younger women in their childbearing years. It affects 100 per 100,000 people and people from non-white backgrounds tend to experience more severe disease. Other studies have not taken this into account. Lupus can lead to other long-term conditions such as kidney/heart problems/complications in pregnancy. The project team want to explore infections, vaccine uptake and pregnancy outcomes and explore rates of	Academic; Research - Retrospective Study	Lupus	May-24	Yes
Pre-emptive Pharmacogenetics Testing	University of Manchester	Not everyone responds the same way to medicines. Some people develop side effects, some don't respond at all, whereas others might respond well. There are lots of reasons for this variability, but one factor could be related to an individual's genetics; a concept known as pharmacogenetics. Manchester is an international leader for pharmacogenetics research. Two major trials are taking place at the moment: 1) to understand how pharmacogenetics might be used in Hospitals and 2) to develop a pharmacogenetic testing service in primary care.	Academic; Research - Prospective Study	Medicines Side Effects	Jun-24	Yes
Redesigning the Liver Care Pathways	University of Manchester	ADA LIVER is a project within the Innovate UK funded Greater Manchester Advanced Diagnostics Accelerator The project commenced in April 2023 for two years and aims to help patients with liver disease receive earlier, more accurate, and potentially life-saving diagnoses that will enable the more effective use of health care resources. Access to linked primary care and secondary care datasets will allow ADA LIVER to gain insight into the needs of the Greater Manchester population, as well as sub-populations within it. These datasets will allow Sollis Health Innovation Manchester and The University of Manchester (UoM) to identify which populations in Greater Manchester are at higher risk of chronic liver disease and determine resource use (and costs) of the diagnosis and management of liver disease.	Academic; Risk Stratification / Service Redesign	Liver Disease	Jun-24	Yes

People Living with Dementia	University of Manchester	There are recommendations for the ongoing care of people diagnosed with dementia. These include an annual review, regular medication reviews and care planning; these should be completed in community settings such as a GP surgery. To date there has been very little research exploring how accessible these services are for people from different socio-economic backgrounds. This research aims to bridge this gap.	Academic; Research - Retrospective Study	Dementia	Jun-24	Yes
Optimising Diabetes and Cardiovascular Care Pathways in Greater Manchester (ODIN-GM Phase 2)	Boehringer Ingleheim	The project will look at how patients being treated for diabetic and cardiometabolic diseases (such as heart disease, circulatory diseases, fatty liver etc) are moving between services, the waiting times and if patients are receiving treatment in line with national clinical guidance.	Commercial; Population segmentation and cohort identification / Population health and care profiles / Reducing unwarrented variation in outcomes / Service redesign	Diabetic and cardiometabolic diseases	Jun-24	Yes
Long Term Opioid Utilisation	University of Manchester	Increased opioid prescriptions in patients with chronic pain raises concerns about potential overdoses, misuse, and deaths. Research shows Manchester has the highest usage of opioids in England's cities making it a significant concern.	Academic; Research - Retrospective Study	Opioid Addiction	Jun-24	Yes
Health Economic Analysis of the ADAPT pathway across Greater Manchester Healthcare System	The Christie NHS Foundation Trust	ADAPT is a care pathway for Christie patients which aims to better manage the late treatment toxicities and long-term health risks associated with chemotherapy/radiotherapy in patients cured of lymphoma in a primary care setting. ADAPT aims to reduce the number of patients receiving inappropriate hospital based follow up whilst empowering patients and informing GPs to pro-actively co-manage the risks.	Academic; Service monitoring and evaluation	Cancer Pathways	Jun-24	Yes
Virtual Wards	University of Manchester	Virtual wards (or hospital at home) allow patients to get the care they need at home safely and conveniently, rather than being in hospital.	Academic; Research - Retrospective Study	Hospital-at-home care	Jun-24	Yes
Detecting EARLY Heart Failure	Manchester University NHS Foundation Trust	Heart failure is a growing public health problem in the North West, with the highest rate of heart failure in the country. It is often diagnosed too late with 80% of patients only diagnosed after their first heart failure. This project wants to use a "risk calculator" to identify those at risk.	Academic; Research - Prospective Study	Heart Failure	Jun-24	Yes
Optimising Lung Cancer Screenings	University of Manchester	Lung cancer is the UK's leading cause of cancer death. Screening can save lives by finding lung cancer early. However, people at risk of lung cancer are also at risk of dying from other diseases. Understanding who benefits most from screening and whether people with multiple diseases benefit is important.	Academic; Research - Retrospective Study	Lung Cancer	Jul-24	Yes

Hormone Replacement Therapy (HRT) Prescribing	**University of Manchester**	**There has been a dramatic increase in Hormone Replacement Therapy (HRT) prescribing. This may be the result of celebrity influencers such as Davina McCall. The surge in demand has led to supply issues and women having to switch to alternative HRT preparations. This can cause bleeding which is a risk factor for Endometrial cancer. Women presenting with this symptom may end up with an unnecessary referral to Secondary care and the cancer pathway. The project team also want to explore differences (according to ethnicity, socio-economic status, disability etc.) in access and perception of menopause and HRT in different communities.**	**Academic; Research - Retrospective Study**	**Hormone Replacement Therapy**	**Aug-24**	**Yes**
Analysis of health and care funding distribution within Greater Manchester	**NHS Greater Manchester**	**This project will draw on expertise of Health Economists within the University of Manchester to analyse a linked dataset to quantify the distribution and citizen/patient utilisation of current resource use; estimate related measures of need; and compare current resource use against need. The results of the analysis will inform our understanding of health inequality and identify gaps in service provision or allocation against need that can underpin the strategic objectives of NHS GM's commissioning intentions and sustainability**	**Population segmentation and cohort identification; Population health and care profiles; Health Equity Audits; Reducing unwarranted variation in outcomes; Strategic Planning; Capacity and demand planning; Gap analysis**	**Population Health**	**Sep-24**	**Yes**

Case Findings for Falls prevention (Direct Care)	**NHS Greater Manchester**	**The Ageing Well programme at the GMCA is working in conjunction with NHS GM to identify individuals who are pre-frail, using the Electronic Frailty Index Tool (Version 2) (eF12) to generate a list of adults over the age of 65 years who are between 10-25% at risk of having a fall in the next 12 months. The list will be created by the NHS GM Data and Intelligence (DII) Team and made available to PCN Care Coordinators. A list of authorised Care Coordinators will be made available to the DII Team by the GP Practices. GPs will undertake a clinical validation of the data set to make sure that the individuals are appropriate for an evidence-based intervention to reduce their risk and improve their overall health and wellbeing. A letter will then be sent out to all those identified from the GP Practice to make them aware they will be receiving a call from their surgery in relation to this project. The Primary Care Network (PCN) Care Coordinators will contact the individuals identified via phone to invite them to take part in the project. If they agree they will take part in a holistic health-based conversation with the Care Coordinator to understand what the most suitable intervention for them would be, based on their personal circumstance.**	**Case Finding / Risk Stratification (Frailty/Falls)**	**Frailty/Falls**	**Oct-24**	**Yes**
Case Findings for Falls prevention (Secondary uses)	**NHS Greater Manchester**	**The Ageing Well programme at the GMCA is working in conjunction with NHS GM and the University of Manchester to evaluate a Falls Prevention project where individuals at risk of a fall have received an evidence-based interventions to reduce their risk of a fall and improve their overall health and wellbeing. The evaluation will focus primarily on the process aspects of implementing the eFalls case finding model within one PCN area in GM. This will consist of a mixed methods approach including descriptive analysis of routine data (pseudonymised); service provider level data (pseudonymised) and bespoke service evaluation data collection via questionnaires and in-depth interviews by the team at the University of Manchester.**	**Academic; Service monitoring and evaluation**	**Frailty/Falls**	**Oct-24**	**Yes**

PLCM Genomics	North West Genomic Medicine Service Alliance (hosted by Manchester University NHS Foundation Trust)	There is little to no reporting on Equity of Access to genomic medicine in relation to prevalence of Cancers and Rare Diseases. We can currently measure genetic testing rates across localities, but we can't ascertain if the testing rates are higher or lower than they should be unless we can understand the disease prevalence. This project will enable us to identify patient cohorts that are appropriate for genetic testing and analyse if these patients are being given fair opportunities to access Genomic medicine.	Population segmentation and cohort identification; Population health and care profiles; Health equity audits	Cancer and rare diseases (genomics)	Dec-24	Yes
Health Economic Analysis of the One Stop Lung Cancer Clinic	Greater Manchester Cancer Alliance	The one stop model has already been demonstrated to have significant benefits for GM patients. These include reducing delays in the pathway to treatment decision, as well as improving the patient experience through a reduced number of hospital visits and a more streamlined pathway. Through wider health economic analysis of the One Stop Lung Cancer Clinic (OSLCC), it is anticipated that the following benefits will be able to be articulated: • Impacts/benefits to the wider GM healthcare system. • Potential benefits of the one stop model across different cancer pathways as well as nationally. The ability to articulate these benefits will provide further evidence to support the one stop model and its expansion beyond the lung pathway both in GM and nationally which will, in turn, further benefit patients	Academic; Service monitoring and evaluation	Cancer	Apr-25	Yes
Elective Risk Stratification Tool Pilot	Manchester University NHS Foundation Trust	Proof of concept to trial and demonstrate the benefit of recently developed digital capability. Linking MFTs RTT waiting list to the GM longitudinal record to give insight and understanding to the health, wellbeing and service access of the citizens on the hospital waiting list. The purpose is to enable clinicians as professionals involved in current, future, or ongoing care of patients on the Referral To Treatment (RTT) waiting list, to stratify the list using multiple attributes and risk factors with a view to assess and potentially intervene, prioritise patients based on increased knowledge and understanding of the impact of the wait duration of the patients alongside additional context, with a view to improve outcomes and experience.	Direct Care; Risk Stratification / Population Health Management	Elective care waiting lists (multi-condition / cross-specialty)	Aug-25	Yes

GP data support to National Neighbourhood Health Improvement Programme (NNHIP) for HMR and Stockport locality	**NHS Greater Manchester**	**The HMR locality has been selected to take part in the National Neighbourhood Health Implementation Programme (NNHIP). As part of this programme GP practices within the locality require access to patient level GP data that has been manipulated by the Primary Care Data, Insight and Intelligence Function, calculating scores such as the Electronic Frailty Index 2 (eFI2) that is not available within GP IT systems.** **Stockport has been selected to take part in the National Neighbourhood Health Implementation Programme (NNHIP). As part of this programme GP practices within the locality require access to patient level GP data that has been manipulated by the Primary Care Data, Insight and Intelligence Function, calculating scores such as the Electronic Frailty Index 2 (eFI2) that is not available within GP IT systems.**	**Direct Care; Case Finding and Risk Stratification (Frailty / Population Health Management)**	**Frailty / older adults / CVD**	**Nov-25**	**Yes**
Transforming Migraine Care in GM	**Health Innovation Manchester**	**Health Innovation Manchester and pharmaceutical industry partner AbbVie have launched an ambitious programme to try and improve the lives of local people affected by migraine across Greater Manchester.** **The collaborative working project, Transforming Migraine Care in Greater Manchester, will aim to understand the current migraine patient journey across Greater Manchester, analysing real-world data, identifying gaps in care and variation, assessing clinical and economic burden and impact on productivity. This will be undertaken in close partnership with health and care professionals and people living with migraine in Greater Manchester. By modelling the approach on Greater Manchester's 3m population, the programme has the potential to inform future care pathways that can be scaled nationally to better support**	**Service monitoring and evaluation; Population health and care pathway analysis**	**Migraine/Neurology**	**Feb-26**	**Yes**

Circulation Health	Health Innovation Manchester	This initiative builds on Greater Manchester's established Integrated Neighbourhood Care Model (INCM), applying a population health management approach to proactively identify, engage, and support individuals at risk of or with established CKD and related CVRM conditions who are not receiving optimal GDMT. By intervening earlier in the care pathway and through a single service roll out, the programme aims to deliver meaningful improvements in long-term outcomes, reduce unwarranted variation, and support system sustainability through efficient care. HInM now aims to evaluate to objectives of this programme to evidence success or failure of such an ambition.	Service evaluation; Population health management; Risk stratification	Cardiovascular, renal and metabolic diseases	Apr-26	Yes
Regional population-level analysis of autism, ADHD and mental health service pathways across Greater Manchester	University of Cambridge	The government has commissioned an independent Review to understand how people access NHS support for ADHD, autism and mental health conditions, and how services can be improved. There is widespread concern about rising demand, long waits, and variable experiences of assessment and care. This work aims to build a clearer, evidence-based picture of how demand and service pathways have changed over time and what is driving these changes The project aims to examine how demand for services (including referral volumes and referral sources), assessment processes, waiting times, care provided, and outcomes have changed over the last 10–20 years. It also aims to understand pathways for people with more than one condition (for example autism plus mental health needs), and to estimate trends in diagnoses that may have been obtained privately. The findings will support recommendations to government on how services can be improved to better meet need.	Population health management; Population segmentation and cohort identification; Service evaluatio	Autism, ADHD and mental health	Apr-26	Yes

Music for Dementia	Manchester Camerata and University of Manchester	The rational is based on extensive research and evidence that music making has a positive and beneficial impact for people living with dementia. It eases distress and anxiety, boosts confidence and communication, stimulates memory and social connection,enhances creativity and self-expression/confidence etc. As evidence of the beneficial impact of music making for the participants is well-researched and understood, this is not the primary research focus of this project The solution this project is seeking to demonstrate is that the known benefits of regular music making (as outlined above) for people living with dementia correlate with a reduced need, and therefore use of, key NHS and care services, such as GP appointments, unplanned hospital admissions, A&E attendances, prescribed medication, ambulance call outs & social service packages.	Service evaluation; Health economics / impact evaluation	Dementia/Mental Health	May-26	Yes
ACCESS4ALL: A Data-Driven Study to Improve Engagement with Cardiac Rehabilitation Services Following an Acute Cardiac Event	Manchester Metropolitan University	ACCESS4ALL is a research project led by Manchester Metropolitan University that aims to understand why many people who are eligible for cardiac rehabilitation after an acute coronary syndrome (ACS) do not attend rehabilitation services. Using linked primary and secondary care data from Greater Manchester, the study will identify demographic, socioeconomic and clinical factors associated with non-attendance and health inequalities. The project will compare patients who attend cardiac rehabilitation with those who do not, examining factors such as age, ethnicity, deprivation, comorbidities and geography. The findings will be used to inform more equitable rehabilitation services, improve commissioning decisions, and support the development of a scalable rehabilitation model that could be applied to other long-term conditions	Research (Observational, Descriptive Study)	Cardiovascular, renal and metabolic diseases	Jul-26	Deferred
Use of primary care record to systematically identify participants eligible for Lung Cancer screening	Manchester University NHS Foundation Trust (MFT)	Request for access to GM SDE primary care data to enable centralised identification of eligible patients for the Greater Manchester Lung Cancer Screening Programme, support invitation and cohort management, reduce administrative burden on GP practices, and improve timely access to screening and early cancer diagnosis across Greater Manchester.	Direct Care	Cancer	Jul-26	Yes