

UK Clinical Research Delivery Key Performance Indicators Report

Report date: 31 October 2025

NIHR RDN data cut date: 25 October 2025

MHRA data cut date: 8 October 2025

For circulation

Purpose

The Government is committed to maintaining new system-wide UK Clinical Research Delivery Key Performance Indicators (UK KPIs) to drive short-medium term progress towards delivering our vision for clinical research. We will also continue to monitor and publish a range of data to support the implementation of these indicators, understand their impact including on non-commercial studies, and address any unintended consequences. Building on our experience in delivering Research Reset, we will use these data to inform the development of impactful incentives and consequences to help drive achievement of the UK KPIs.

This report is produced monthly by DHSC on behalf of the UK research delivery system. It draws together data on the progress towards all the published UK KPIs providing transparent updates on progress towards our goals over time. The indicators apply at a UK system-wide level and implementation will be overseen by DHSC, the Devolved Administrations (DAs) and the NHS. The UK KPIs, and other commitments set out in the Full Government Response to the Lord O'Shaughnessy Review, are intended to provide clear and measurable goals from the time of publication to spring/summer 2025. Progress against these goals, delivery of a significant programme of activity to achieve them and wider work to improve the availability of data about the delivery of research are due to be completed by 2025, at which point a revised set of UK KPIs will be developed and published.

We are committed to maintaining a rich and balanced portfolio of early and late phase studies in rare and common diseases, ranging from complex, intensive studies in small, highly targeted populations to pragmatic population health research in large cohorts, using a range of methodologies and methods as appropriate to the research questions.

This report categorises data into three distinct groups:

- Commercial contract studies are studies sponsored and fully funded by the life sciences industry.
- Commercial collaborative studies are studies typically funded, wholly or in part, by the life sciences industry and sponsored by a combination of life sciences industry and noncommercial organisations. This category has previously been included in non-commercial figures but is being disaggregated going forward to better represent the breadth of commercial studies. Commercial collaborative studies are supported in the same way as other non-commercial studies, including provision of support costs and excess treatment costs via the National Institute for Health and Care Research (NIHR) Research Delivery Network (RDN) and the NHS.
- Non-commercial studies are studies sponsored and wholly funded by one or more noncommercial organisations, including medical research charities, universities and public funders, such as NIHR and UK Research and Innovation (UKRI).

Data source

All UK KPIs measure UK performance for studies on the NIHR RDN Portfolio¹, except for regulatory approvals (1) which will measure timelines for combined review and National Contract Value Review (4) which includes all commercial contract studies taking place in NHS trusts.

Note on methodology

From December 2023 onwards, all studies from the NIHR RDN's Central Portfolio Management System (CPMS) are included in charts and tables, regardless of UK lead country or participating countries unless otherwise stated. In addition, the methodology used to determine study progress

¹ The Clinical Research Network (CRN) is transitioning throughout 2024/2025 to the RDN. From October 2024, the CRN will be known as the RDN.

towards planned milestones has changed to use UK recruitment and UK target² with the exception of measure 5 (time and target).

UK Key Performance Indicators Overview

With the exception of combined review (1) and National Contract Value Review (4), all UK KPIs measure performance for studies on the NIHR RDN Portfolio. The indicators apply at a UK system-wide level and implementation will be overseen by DHSC, the devolved administrations (DAs) and the NHS.

		UK Key Performance Indicator	Target	Timeline for delivery	Baseline ³	October 2025 Report
1	All ⁴	Proportion of studies receiving a combined review decision within 60 days, measured from IRAS submission to combined MHRA and REC regulatory decision	99%	Maintain target for all new fully compliant initial applications received from 1 September 2023	100%	100%
2	C ⁵	Proportion of studies open to recruitment within 60 days of HRA approval letter or equivalent process used by the Devolved Administrations	90%	November 2024	39%	20%6
3	С	Proportion of studies recruiting first participant within 30 days of sites opening to recruitment, except where this is not expected in the study milestone plan (for example, rare diseases studies)	90%	November 2024	25%	0% ⁶
4	С	Proportion of NHS trusts in England who accept the local price generated as part of the NCVR process for late-phase studies without further negotiation following agreement of the resource required by the lead site	100%	December 2023	79%	100%
5	All	Proportion of open studies on track, delivering to time and target	80%	June 2023	80%	84% ⁷
6	All	Recruitment to all studies is maintained at high levels when	70,000 or more	Ongoing	70,000	84,173 ¹⁰

² UK target for commercial studies does not include private sites.

³ Some measures are new and therefore the baseline was established in different months.

⁴ All indicates a measure that applies to all studies.

⁵ 'C' indicates that it applies to commercial contract studies only.

⁶ There can be a lag between activity and data being recorded in the central system, therefore, previous months' data may be updated retrospectively.

⁷ Based on recruitment in England and England target.

		compared to pre-pandemic baseline of 61,000 ^{8,9}	per month ¹⁰			
7	С	Recruitment to all commercial studies to be monitored in support of the ambition to double and double again from the pre-pandemic baseline of 3,200 ^{8,9}	Report- ed per month ¹⁰	Ongoing	3,200	3,528 ¹⁰

Other Measures

We will continue to monitor and publish a range of data in addition to the UK KPIs to support their implementation, understand their impact including on non-commercial studies, and address any unintended consequences.

		Measure	Purpose	Baseline	October 2025 Report
8	All	Proportion of studies on the NIHR RDN Portfolio which are open to recruitment is ≥80%	A proportion of studies on the portfolio will be in set- up prior to opening. To enable all studies to progress to planned timelines, we aim for no more than 20% of studies to be in set-up	80%	82%

	Measure	Purpose	October 2025 registrations	Cumulative total registrations
9	Be Part of Research monthly registrations	We have set a goal of 1 million people to be signed up to Be Part of Research by April 2025	10,328	663,663

Average per month in England only from 2015 to 2020.
 Data on trial phase to be provided subsequent to implementation of digital infrastructure.

¹⁰ Rolling average across the previous 12 months.

Achieving globally competitive timelines

day	,s, meas	of stud sured fro decision	om IRAS							Baseline	
Study All stud		Measu ≥99%	re:	complia		tain targ applica 3				100%	
Nov 2024	Dec 2024	Jan 2025	Feb 2025	Mar 2025						Sep 2025	Oct 2025
99%	99% 98% 96% 92% 100% 98% 100% 96% 98% 97%										100%

For applications received with an effective date of 1 September 2023 onwards, 63 Initial Clinical Trial Authorisation applications were approved via the combined review process, with outcomes communicated in September 2025. One hundred percent (63/63) of applications were approved within 60 days from the application received effective date.

The Medicines and Healthcare products Regulatory Agency (MHRA) and Research Ethics Committee (REC) issued the joint outcome from the initial combined assessment on an average of 28.12 days from the application received effective date.

On receipt of the sponsor's response to the list of questions raised by the MHRA and REC, the MHRA and REC issued the joint final outcome in an average of 10.17 days.

The total average time to approve an Initial Clinical Trial Authorisation application via the combined review process was 38.30 days from the application received effective date.

It should be noted that the sponsor can choose to attend a REC meeting that is not the first available in the combined review system and therefore, the combined review assessment time does not start until 2 weeks prior to the REC meeting (i.e. the Integrated Research Application System (IRAS) submission date is different from the application received effective date). It should also be noted that the sponsor can request for extensions to the grounds for non-acceptance response deadline. This is granted and will extend the end-to-end timeline from IRAS submission to final approvals. The indicator measures the time that the MHRA and REC spent assessing the application only.

Other relevant reports:

MHRA also publish performance data for assessment of clinical trials and established medicines: https://www.gov.uk/government/publications/mhra-performance-data

2. Proportion of commercial contract studies open to recruitment within 60 days of HRA approval letter or equivalent process used by the Devolved Administrations

Month	Number of studies that received HRA approval	Open to recruitment	Opened to recruitment within 60 days	Opened to recruitment after 60 days	Not yet open to recruitment
December 2023	50	50	13 (26%)	37 (74%)	0 (0%)
January 2024	50	47	12 (24%)	35 (70%)	3 (6%)
February 2024	47	45	11 (23%)	34 (72%)	2 (4%)
March 2024	54	54	14 (26%)	40 (74%)	0 (0%)
April 2024	40	39	7 (18%)	32 (80%)	1 (3%)
May 2024	66	61	12 (18%)	49 (74%)	5 (8%)
June 2024	47	46	8 (17%)	38 (81%)	1 (2%)
July 2024	51	49	12 (24%)	37 (73%)	2 (4%)
August 2024	57	54	18 (32%)	36 (63%)	3 (5%)
September 2024	47	46	12 (26%)	34 (72%)	1 (2%)
October 2024	54	52	19 (35%)	33 (61%)	2 (4%)
November 2024	55	54	21 (38%)	33 (60%)	1 (2%)
December 2024	55	50	17 (31%)	33 (60%)	5 (9%)
January 2025	43	38	15 (35%)	23 (53%)	5 (12%)
February 2025	39	35	10 (26%)	25 (64%)	4 (10%)
March 2025	53	36	18 (34%)	18 (34%)	17 (32%)
April 2025	50	30	10 (20%)	20 (40%)	20 (40%)
May 2025	40	26	14 (35%)	12 (30%)	14 (35%)
June 2025	37	19	9 (24%)	10 (27%)	18 (49%)
July 2025	38	9	9 (24%)	0 (0%)	29 (76%)
August 2025	41	9	8 (20%)	1 (2%)	32 (78%)
September 2025	ember 2025 This will be calculated when 60 days have elapsed.			13	
October 2025	6	0	This will be cale		6

This is a new measure. This section presents data from the NIHR RDN's Central Portfolio Management System (CPMS). It measures the proportion of commercial contract studies which have received HRA approval, or its equivalent in the DAs, since 1 December 2023 and are open to recruitment within 60 days. The target is 90%, with an aim to achieve this by November 2024.

There is a latency or lag between activity and data being recorded in the central system, therefore, previous months' data may be updated retrospectively. Changes in performance for individual recent months should not be taken as an indication of overall trend in performance.

3. Proportion of commercial contract studies recruiting first participant within 30 days of sites opening to recruitment, except where this is not expected in the study milestone plan (for example, rare diseases studies)

Study type: Commercial contract studies

Measure: ≥90%

Timeline: Achieve by November 2024

Month	Number of studies open to recruitment	Recruited first participant	Recruited first participant within 30 days	Recruited first participant after 30 days	Not yet recruited first participant
December 2023	19	17	9 (47%)	8 (42%)	2 (11%)
January 2024	23	19	11 (48%)	8 (35%)	4 (17%)
February 2024	24	21	10 (42%)	11 (46%)	3 (13%)
March 2024	20	20	13 (65%)	7 (35%)	0 (0%)
April 2024	27	22	9 (33%)	13 (48%)	5 (19%)
May 2024	12	11	5 (42%)	6 (50%)	1 (8%)
June 2024	19	19	9 (47%)	10 (53%)	0 (0%)
July 2024	29	28	14 (48%)	14 (48%)	1 (3%)
August 2024	18	17	8 (44%)	9 (50%)	1 (6%)
September 2024	25	24	9 (36%)	15 (60%)	1 (4%)
October 2024	31	28	14 (45%)	14 (45%)	3 (10%)
November 2024	24	23	12 (50%)	11 (46%)	1 (4%)
December 2024	20	20	7 (35%)	13 (65%)	0 (0%)
January 2025	21	16	12 (57%)	4 (19%)	5 (24%)
February 2025	32	30	11 (34%)	19 (59%)	2 (6%)
March 2025	24	22	12 (50%)	10 (42%)	2 (8%)
April 2025	21	17	8 (38%)	9 (43%)	4 (19%)
May 2025	21	15	10 (48%)	5 (24%)	6 (29%)
June 2025	22	13	7 (32%)	6 (27%)	9 (41%)
July 2025	23	14	4 (17%)	10 (43%)	9 (39%)
August 2025	14	5	3 (21%)	2 (14%)	9 (64%)
September 2025	12	0	0 (0%)	0 (0%)	12 (100%)
October 2025	4	0	This will be cal		4

This is a new measure. This section presents data from the NIHR RDN's Central Portfolio Management System (CPMS). It measures the proportion of commercial contract studies which have recruited their first participant within 30 days of opening to recruitment.

There is a latency or lag between activity and data being recorded in the central system, therefore, previous months' data may be updated retrospectively. Changes in performance for individual recent months should not be taken as an indication of overall trend in performance.

Contracting and delivery

the local price process for la studies withou	NHS trusts in Eng generated as part te-phase commero ut further negotiati the resource requi	t of the NCVR cial contract ion following	Baseline	December 2023
Study type: Commercial Contract Studies	Measure: 100%	Timeline: Achieve by December 2023	79%	100%

This section presents data from the NIHR RDN and is the number of organisations that have agreed to accept outputs of the negotiated agreement reached between the company or Clinical Research Organisation (CRO) and the single National Contract Value Review (NCVR).

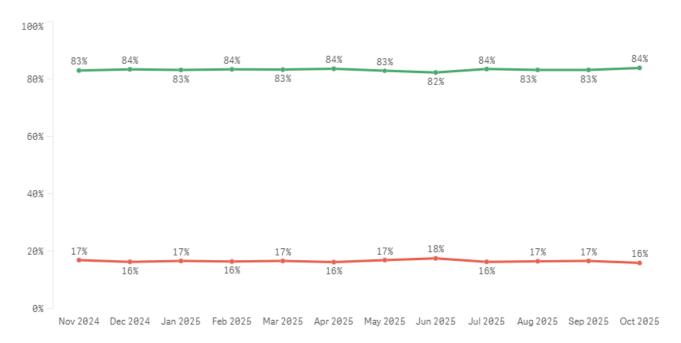
NCVR is now mandatory for all commercial contract studies, excluding those taking place in primary care. There is a voluntary NCVR scheme for GP practices.

Between October 2023 and October 2024, NCVR was mandatory for all commercial contract studies, excluding Advanced Therapeutic Medicinal Product (ATMP) and early phase studies, taking place in secondary, specialist and mental health trusts.

5. Pro	5. Proportion of open studies on track, delivering to time and target												
Study	Study type: All studies							Timeline: Maintain ≥80% achieved in June 2023					
Nov 2024	Dec 2024	Jan 2025	Feb 2025				Jun 2025	Jul 2025	Aug 2025	Sep 2025	Oct 2025		
83%	84%	83%	84%	83%	84%	83%	82%	84%	83%	83%	84%		

This section presents data from the NIHR RDN's Central Portfolio Management System (CPMS) combined with self-reported data provided by sponsors through the Sponsor Engagement Tool. This approach recognises that sponsors and funders have the most accurate view of a study's progress towards its planned milestones and enables us to focus our efforts more precisely on the studies where progress is not being made. We aim for 80% of all open studies on the NIHR RDN Portfolio to be on track towards delivering to time and target.

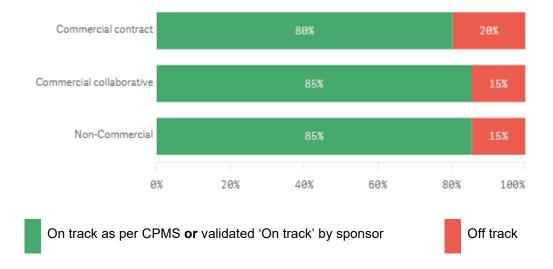
Chart 5a: Proportion of open studies delivering to time and target by month



On track as per CPMS **or** validated 'On track' by sponsor



Chart 5b: Proportion of open studies delivering to time and target by current month and study type



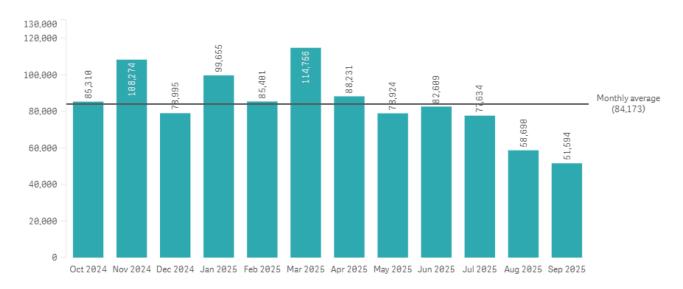
Levels of recruitment

	6. Recruitment to all studies is maintained at high levels when compared to pre-pandemic baseline of 61,000												
	Study type: All studies Measure: 70,000 or more per month (reported per month, a a rolling average across the previous 12 months)		nth, as compared to pre-pandemic baseline of 61,0										
Nov 2024	Nov Dec Jan Feb Mar Apr			Apr 2025	May 2025	Jun 2025	Jul 2025	Aug 2025	Sep 2025	Oct 2025			
89,648	90,955	90,624									84,173		

This section presents data from the NIHR RDN's Central Portfolio Management System (CPMS). Overall recruitment is an indication of a well-functioning research delivery system. There is currently no target for overall recruitment as performance remains high compared to the prepandemic baseline of c.61,000¹¹. A benchmark of an average of 70,000 or more recruits per month enables us to monitor overall levels of activity.

There is a latency or lag between activity and data being recorded in the central system, therefore, previous months' data are expected to change. 12 Drops in performance for individual recent months should not be taken as an indication of overall trend in performance. It should be further noted that we would expect recruitment numbers to be lower over the holiday period (July/August and December).

Chart 6a: Recruitment by month - all studies



¹¹ Average per month in England only from 2015 to 2020.

¹² The figures reported in table 6 are the recruitment figures as reported by NIHR at the time of the data cut and are not updated retrospectively. Chart 6a is updated retrospectively as the central data system is updated.

	7. Recruitment to all commercial studies to be monitored in support of the ambition to double and double again from the pre-pandemic baseline of 3,200											
Study type: Commercial contract studies		as a rol	•	orted per rage acro		double	and dou	tor in su _l ble agair line of 3,	n from th		ion to	
Nov 2024					Apr 2025	May 2025	Jun 2025	Jul 2025	Aug 2025	Sep 2025	Oct 2025	
11,938	10,876	9,130	8,750	7,932	7,016	5,830	5,209	4,201	3,836	3,615	3,528	

7b. Red	7b. Recruitment to commercial collaborative studies												
Comme	Measure: Reported per month as a rolling average across the previous 12 months studies					Timelir	ne: No tir	meline					
Nov 2024					May 2025	Jun 2025	Jul 2025	Aug 2025	Sep 2025	Oct 2025			
10,209	9,970	9,764	9,798	9,460	9,116	8,603	8,112	7,650	8,139	7,727	7,230		

This section presents data on two sub-sets of the overall recruitment figures presented in section 6, specifically focusing on recruitment to commercial contract studies (sponsored and fully funded by the life sciences industry) and recruitment to commercial collaborative studies (typically funded, wholly or in part, by the life sciences industry and sponsored by a combination of life sciences industry and non-commercial organisations).

Levels of recruitment to commercial contract research can be significantly affected by a small number of studies with very high recruitment targets. While we continue to aim to attract high recruiting studies to the UK, we are committed to a rich and diverse portfolio, which meets both industry and patient needs, and we recognise many commercial contract studies recruit relatively small numbers of participants. To address this inherent variability, our target reflects average monthly recruitment figures over the five years prior to the pandemic, and, as with recruitment to all studies, current figures represent a rolling 12-month average.

As in section 6, there is a latency or lag between activity and data being recorded in the central system, therefore, previous month's data are expected to change.¹³ Drops in performance for individual recent months should not be taken as an indication of overall trend in performance. It should be further noted that we would expect recruitment numbers to be lower over the holiday period (July/August and December).

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¹³ The figures reported in tables 7 and 7b are the recruitment figures as reported by NIHR at the time of the data cut and are not updated retrospectively. Charts 7a to 7d are updated retrospectively as the central data system is updated.

The following charts break down overall recruitment by study type over the last 12 months or the period running from five years before the pandemic through to the current month.

These categorises studies into three distinct groups:

- <u>Commercial contract studies</u> are studies sponsored and fully funded by the life sciences industry.
- Commercial collaborative studies are studies typically funded, wholly or in part, by the life sciences industry and sponsored by a combination of life sciences industry and noncommercial organisations. This category has previously been included in non-commercial figures but is being disaggregated going forward to better represent the breadth of commercial studies. Commercial collaborative studies are supported in the same way as other non-commercial studies, including the provision of support costs and excess treatment costs via the NIHR RDN and the NHS.
- <u>Non-commercial studies</u> are studies sponsored and wholly funded by one or more noncommercial organisations, including medical research charities, universities and public funders, such as NIHR and UK Research and Innovation (UKRI).

We are committed to maintaining a rich and balanced portfolio of early and late phase studies in rare and common diseases, ranging from complex, intensive studies in small, highly targeted populations to pragmatic population health research in large cohorts, using a range of methodologies and methods as appropriate to the research questions.

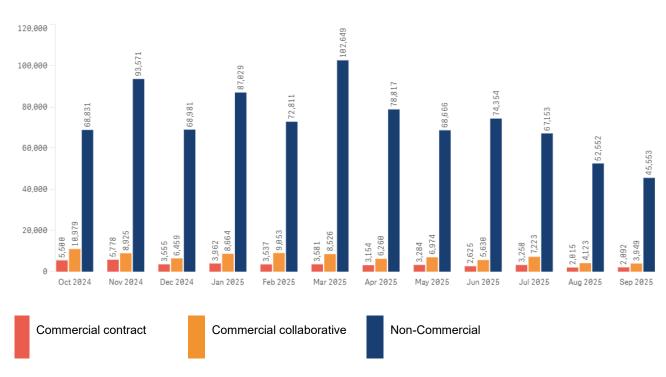


Chart 7a: Recruitment by month and study type over the last 12 months

Chart 7b: Commercial contract recruitment since April 2015

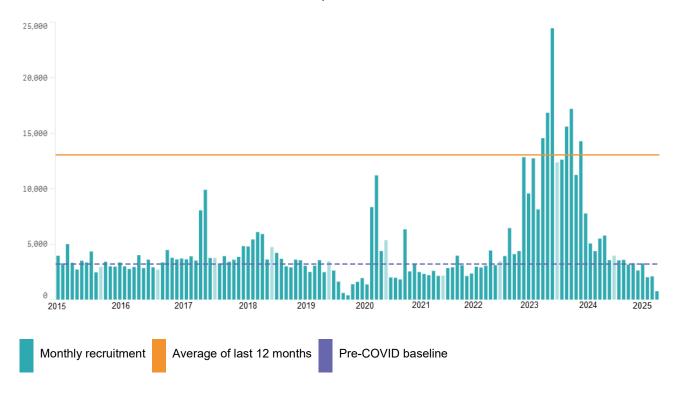


Chart 7c: Commercial collaborative recruitment since April 2015

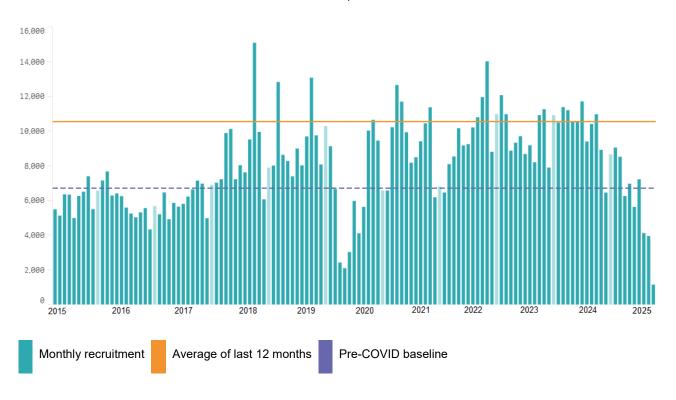
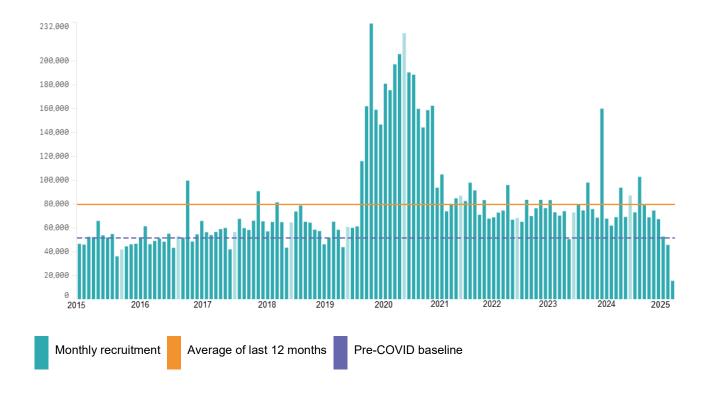


Chart 7d: Non-commercial recruitment since April 2015 (excluding commercial collaborative)



Other measures

8. Proportion of studies on the NIHR RDN Portfolio which are open to recruitment or suspended											
Study type: All studies Measure: No target We monitor the proportion of open or suspended studies expect this to be c.80% open or suspended / c.20% in se sign of a healthy pipeline of studies.											
Nov 2024	Dec 2024	Jan 2025	Feb 2025	Mar 2025	Apr 2025	May 2025	Jun 2025	Jul 2025	Aug 2025	Sep 2025	Oct 2025
82%	82%	82%	83%	83%	83%	83%	82%	83%	82%	81%	82%

This section presents data from the NIHR RDN's Central Portfolio Management System (CPMS). The active portfolio consists of studies defined as either 'open or suspended' or 'in set up'.

We have 5,667 studies on the portfolio. 82% of studies are classed as open or suspended.

Chart 8a: Proportion of studies that are open or suspended (last 12 months)

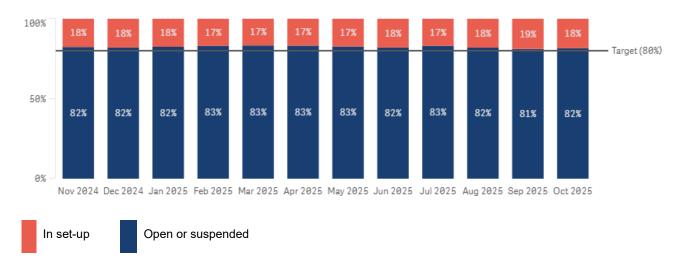


Chart 8b: Proportion of studies that are open or suspended by current month and study type

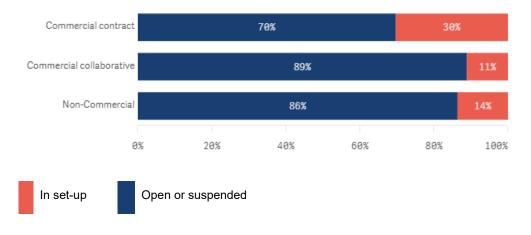


Table 8a: Number of active studies on the NIHR RDN Portfolio, by study type and status

Study type	In set-up	Open	Suspended	Total	% Total
Commercial contract	516	1,150	36	1,702	30%
Commercial collaborative	49	371	22	442	8%
Non-commercial	480	2,924	119	3,523	62%
Total	1,045	4,445	177	5,667	100%

Table 8b: Number of new studies added to the NIHR RDN Portfolio, last 12 completed months by study type and month

Month	Commercial contract	Commercial collaborative	Non-commercial	Total
Oct 2024	61	12	85	158
Nov 2024	64	8	83	155
Dec 2024	44	3	70	117
Jan 2025	51	10	91	152
Feb 2025	45	13	77	135
Mar 2025	49	14	82	145
Apr 2025	48	3	76	127
May 2025	59	10	92	161
Jun 2025	69	6	83	158
Jul 2025	80	9	114	203
Aug 2025	65	5	90	160
Sep 2025	68	7	98	173
Monthly Average ¹⁴	59	8	87	154

¹⁴ Table 8b now contains correct monthly average figures, correcting a previous error.

9. Be Part of Research monthly registrations					
We have set a goal of 1 million people to be signed up to Be Part of Research by April 2025					
October 2025 registrations	Cumulative total registrations				
10,328	663,663				

Chart 9a: Be Part of Research cumulative registrations

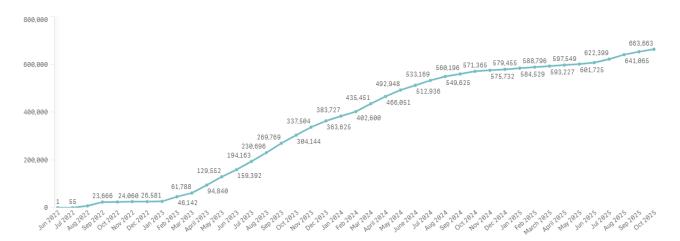


Table 9a: Be Part of Research registrations by month¹⁵

Month and Year	Total monthly registrations	Cumulative total registrations		
Jun 2022	1	1		
Jul 2022	54	55		
Aug 2022	7,595	7,650		
Sep 2022	16,016	23,666		
Oct 2022	394	24,060		
Nov 2022	1,433	25,493		
Dec 2022	92	25,585		
Jan 2023	996	26,581		
Feb 2023	19,561	46,142		
Mar 2023	15,646	61,788		
April 2023	33,052	94,840		
May 2023	34,712	129,552		
Jun 2023	29,840	159,392		
Jul 2023	34,771	194,163		
Aug 2023	36,533	230,696		
Sep 2023	39,073	269,769		
Oct 2023	34,375	304,144		
Nov 2023	33,360	337,504		
Dec 2023	26,121	363,625		
Jan 2024	20,102	383,727		
Feb 2024	18,873	402,600		
Mar 2024	32,851	435,451		
April 2024	30,600	466,051		
May 2024	26,897	492,948		
June 2024	19,988	512,936		
Jul 2024	20,233	533,169		
Aug 2024	16,456	549,625		
Sep 2024	10,571	560,196		
Oct 2024	11,169	571,365		
Nov 2024	4,367	575,732		
Dec 2024	3,723	579,455		
Jan 2025	5,074	584,529		
Feb 2025	4,267	588,796		
March 2025	4,431	593,227		
April 2025	4,322	597,549		
May 2025	4,176	601,725		
Jun 2025	6,103	607,828		
Jul 2025	14,571	622,399		
Aug 2025	18,666	641,065		
Sep 2025	12,270	653,335		
Oct 2025	10,328	663,663		

END OF REPORT

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¹⁵ Please note that a data correction has been made to previous months data where completed registrations were being counted in both the month of registration commencement and month of registration completion.

Annex A: UK clinical research recruitment to interventional and observational studies

Report date: 31 October 2025

NIHR RDN Data cut date: 25 October 2025

For circulation

Overview

Charts 10a to 10f show the number of participants recruited each month into studies held on the National Institute for Health and Care Research (NIHR) Research Delivery Network's (RDN) Central Portfolio Management System (CPMS).

The data in each of these charts are broken down into interventional and observational studies:

- Interventional studies are studies in which participants are assigned to receive one or more
 interventions (or no intervention for control) so that researchers can evaluate their effects on
 biomedical or health-related outcomes. The aim is to find out if a new intervention is suitable
 for people. Participants may receive diagnostic, therapeutic, or other types of interventions.
- Observational studies are studies in which the investigator observes without manipulation or intervention. These studies do not involve a new intervention but aim to find out information by observing the people taking part and seeing what happens in different situations.

As with the main UK Clinical Research Delivery Key Performance Indicators Report, the data are divided into three distinct study types:

- Commercial contract studies are studies sponsored and fully funded by the life sciences industry.
- Commercial collaborative studies are studies typically funded, wholly or in part, by the life
 sciences industry and sponsored by a combination of life sciences industry and noncommercial organisations. This category has previously been included in non-commercial
 figures but is being disaggregated going forward to better represent the breadth of
 commercial studies. Commercial collaborative studies are supported in the same way as
 other non-commercial studies, including the provision of support costs and excess treatment
 costs via the NIHR RDN and the NHS.
- Non-commercial studies are studies sponsored and wholly funded by one or more noncommercial organisations, including medical research charities, universities and public funders, such as NIHR and UK Research and Innovation (UKRI).

There is often a lag between activity taking place at a study site and data being recorded in the system; therefore, previous months' data may be updated retrospectively. Changes in recruitment for individual recent months should not be taken as an indication of overall trend in recruitment. It should be further noted that we would expect recruitment numbers to be lower over the holiday period (July/August and December).

Chart 10a: Recruitment into commercial contract studies over the last 12 months broken down by interventional and observational studies

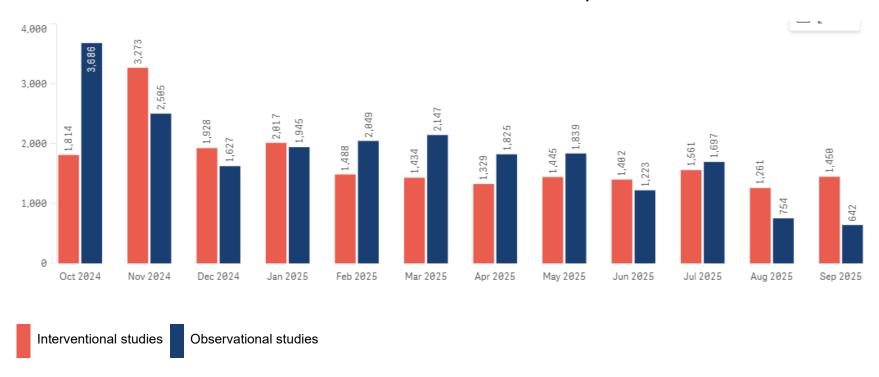


Chart 10b: Recruitment into commercial contract studies since April 2015 broken down by interventional and observational studies

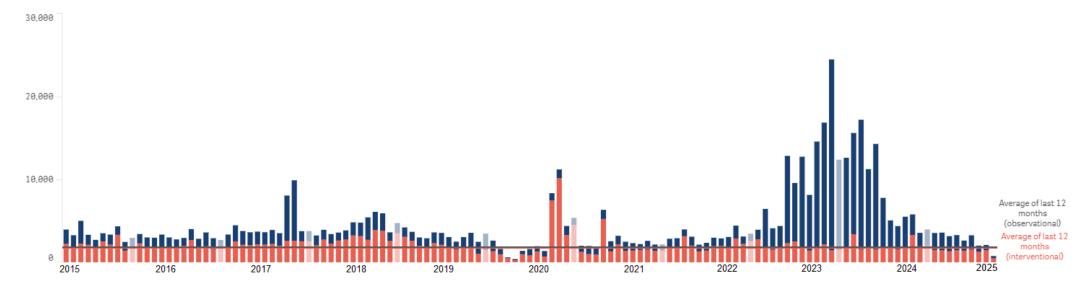


Chart 10c: Recruitment into commercial collaborative studies over the last 12 months broken down by interventional and observational studies

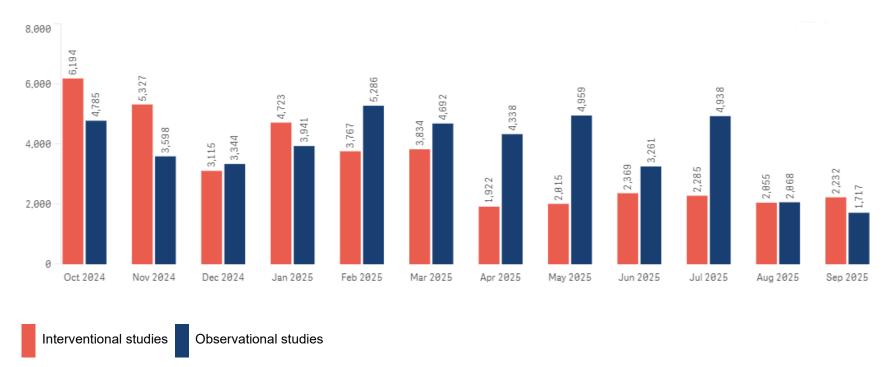


Chart 10d: Recruitment into commercial collaborative studies since April 2015 broken down by interventional and observational studies

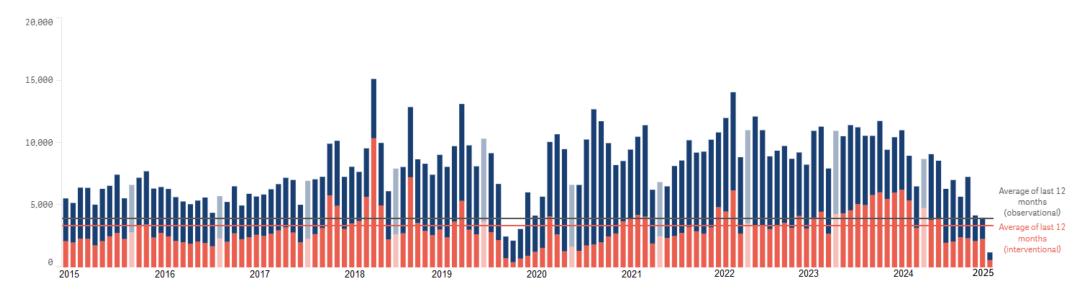


Chart 10e: Recruitment into non-commercial studies over the last 12 months broken down by interventional and observational studies





Chart 10f: Recruitment into non-commercial studies since April 2015 broken down by interventional and observational studies

