

# Joint Research Management Office Research News Bulletin

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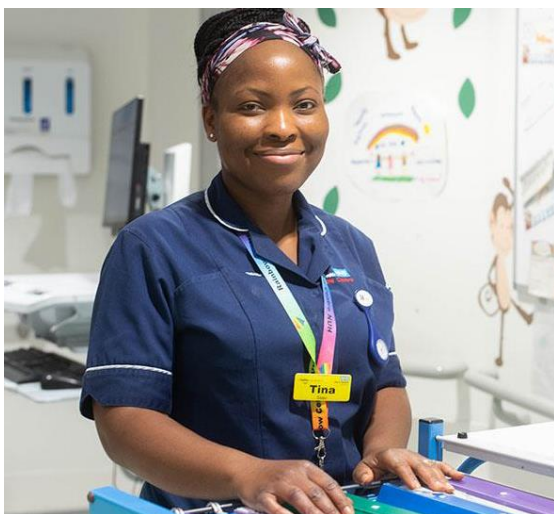
The Research News Bulletin is edited by Nick Good ~ [nicholas.good@nhs.net](mailto:nicholas.good@nhs.net)

## Barts Health's research leadership recognised in new regional role

Barts Health is to become the host of a new network for the whole of North London dedicated to boosting research into improving patient care.

Barts is one of twelve NHS trusts across the country chosen to host a regional research delivery network on behalf of [the Government](#) and the [National Institute for Health and Care Research \(NIHR\)](#). These regional networks will form part of the [NIHR Research Delivery Network](#), which will operate as a single organisation across England.

Funded by the [Department of Health and Social Care](#), as part of a strategy to make the UK the best place in the world for commercial companies to develop innovative new treatments and technologies, the new network will start in October, following a reorganisation



that will bring together existing clinical research networks covering North Thames, which we already host, and North West London, which is run by Imperial College Healthcare.

Dr Sharon Barrett, current COO of CRN-North Thames has been appointed as Director of the new RRDN, with effect from April. Two more senior posts are due to be appointed shortly, then clinical leads will be appointed to make up the RRDN's senior management team.

Barts Health is well-placed because of our track record in securing sponsorship from both commercial sources and NIHR, together with our ambitious plans to make [Barts Life Sciences](#) a magnet for healthcare innovation from industry.

Working with partners the new expanded geographical remit will further develop local efforts to focus research on communities with the greatest disease burden, and recruit more people from minority ethnic communities into clinical trials.

Dr Jenny Rivers, Director of Research and Development, said: "We are delighted to host this new partnership for advancing research that has the potential to transform patient care, and excited by the chance to shape local, regional and national policy in collaboration with our healthcare partners in the NHS and elsewhere."

More information can be found on the [Barts Health website](#)

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## Patient Research Experience Survey 2024

Are you a researcher who wants to gather rich data from your patients?

The Patient Research Experience Survey (PRES) is a short survey designed to collect patient's experiences on taking part in NIHR portfolio studies. This allows you to identify areas for improvement in your research delivery and implement changes to enhance this experience.

From feedback gathered previously, some of the changes our teams have made include:

- Creating an additional team outbox so patient emails can be checked and responded to quicker.
- Using Language Line or Advocacy service to ensure studies are offered to more patients of diverse backgrounds, whose first language is not English.
- Approach patients earlier to ensure sufficient time for them to consider taking part in a study.
- Offering virtual follow-ups for patients who travel further where possible, dependent on the relevant study protocol.

The [Research Engagement team](#) is keen to find researchers with NIHR portfolio studies to deliver the survey. If you want to learn more about doing so, get in touch with the team at [patientsinresearch.bartshealth@nhs.net](mailto:patientsinresearch.bartshealth@nhs.net)

## Draft guidance issued on obtaining and using human blood and tissue from healthy volunteers for research purposes

The JRMO's Research Governance team has produced revised guidance for all staff and students from Queen Mary and Barts Health who undertake work that requires the use of blood from human volunteers.

The central point is that individuals must be supported to produce high-quality work whilst volunteers are protected from unnecessary risks.

The document that can be [found on the JRMO website](#) outlines the requirements that staff and students of Queen Mary and Barts Health

should comply with when obtaining and using blood from human volunteers.

This guidance applies to all work involving blood from human volunteers for research, and activity that is not defined as research (including equipment calibration, preliminary assays, and proof of concept work). It also applies to the use of any biological samples, such as saliva or tissue samples, that are considered 'relevant material' under the [Human Tissue Act \(2004\)](#) (for more information please see here).



The guidance covers all forms of obtaining blood, including pin-pricks, venepuncture or arterial puncture, self-phlebotomy, and procurement of products through tissue banks or the NHS Blood and Transplant service. It does not apply to other forms of human tissues or samples, or non-human blood.

The guidance sets out good practice for obtaining blood, including the need for ethics approval, risk assessment, training and consent.

To find out more please read the document [on the JRMO website](#).

## HRA report shows strong support for research diversity

A new national survey has found strong public support for diversity in health and social care research.

Having a diverse group of research participants is important because it provides a better understanding of how different interventions work on different groups of people, providing more robust clinical data so that medicines and devices are effective for the whole population and help address health inequalities.

The YouGov survey, commissioned by the Health Research Authority (HRA), found nine in ten (88%) people think a diverse mix of participants in health and social care research is important. A majority of the public also said it's important to include a diverse mix of participants even if the research costs more money (70%) or takes more time (74%).



Diversity also impacts confidence in research funded by the private sector, such as pharmaceutical companies, with over half saying (52%) they have more confidence in the findings if the study includes a diverse mix of participants.

However, the survey also found that 30% of black people were not confident that they would be looked after if they took part in a health or social care research study. This lack of confidence is significantly higher than white people (18% not confident).

The new poll echoes a similar survey commissioned by [the HRA in 2017](#), which found strong public support for research, but less positive perceptions of research among ethnic minorities.

The survey followed the publication of the Government's response to the recommendations in the [Lord O'Shaughnessy review](#) into commercial clinical trials.

The review made recommendations to increase the number of commercial clinical trials taking place in the UK. It also recommended research organisations make sure that the participants in UK clinical trials reflect our diverse population to provide benefits to all patients, adding that the population diversity of the UK offers the potential for companies to demonstrate the effectiveness of products across a wide range of patient populations that can have a worldwide impact.

## Queen Mary Research & Innovation Awards 2024

### Applications

Applications for the Queen Mary Research and Innovation Awards 2024 are now open until 1<sup>st</sup> March 2024.

From research supervision to technical support to impact and much more, the eight categories are open to our whole research community.

For full information including guidance, deadlines, criteria and eligibility, please see the [Awards' SharePoint pages](#).

### Peer Reviewers

The Queen Mary Research and Innovation Awards team is looking for Queen Mary employed Peer Reviewers to shortlist this year's applications in March 2024.

In return for your time and expertise, you will get an insight into how a winning award submission is crafted and an invite to our award celebration at the Barbican in May.

You can register your interest at the [Awards' SharePoint pages](#).

## Barts Health public involvement payment changes

As a result of issues flagged up by users the system for making payments to patents has been improved. This has been reflected in changes to our online guidance.

Reimbursing expenses and payments for involvement and participation in research plays a vital role in developing and delivering our research, ensuring it focuses on outcomes that are important to patients and the public. There is growing support for paying or rewarding the public for their contribution to our research. Whether this is on a one-off or regular basis, we want to recognise best practices and ensure that our public contributors are not left out-of-pocket for being involved in our studies.

By 'covering expenses' we mean either paying for the costs directly or reimbursing the costs that are incurred by a member of the public whilst being involved in research-related activity. All out-of-pocket expenses should be covered. Covering expenses is not the same

as payment for time, skills and expertise. Payments for time and experience should be considered best practice. Rates of payment will depend on several variables that are covered in this guide, and some examples are given. However, because each situation is different, we do not attempt to be prescriptive about rates of payment.

The process for reimbursing R&D patient participation expense claims is set out in detail online, along with the relevant forms that must be submitted electronically, together with a copy of the receipts for the costs which are being reimbursed. Approval is made through the Oracle Accounts Payable system and all payments are made by BACS transfer.

More information can be found [on the JRMO website](#), and if you have any questions or wish to discuss special circumstances, please contact [apenquiries.bartshealth@nhs.net](mailto:apenquiries.bartshealth@nhs.net)

### New QMREC Risk information online

New risk infographics have been created to guide researchers through risk recognition and risk mitigation during the research design stage. This guide will also enable the QM Ethics Panels and Devolved School Research Ethics Committees to assess and review risk in applications.

When completing the QMEthics application it is important to identify the risks and explain clearly how to mitigate them.

However, the team recognise that ethical risks can be difficult to identify, so knowing how to identify them is important. When designing and planning your research you need to consider who is involved in your study, and how their participation might benefit them and your research. The risk infographic 'Ethics: Things to consider' highlights potential areas of ethical issues that might be relevant for a given research study.

Each bubble represents a different risk category, each interconnected and some with overlap. One should not be reflected upon in isolation, and each can carry risks that need to be mitigated or managed.

This includes risks and consequences for individual researchers, research participants, individuals, groups, communities connected either with the research participants or the

research topic, and the reputation of Queen Mary and its researchers.



Further information (including a larger version of the graphic!) can be found [on the JRMO website](#).



### NIHR Annual Report published

The Department of Health and Social Care (DHSC) has just published the NIHR's Annual Report and Accounts for 2022-23. It highlights the exciting, publicly funded work that helps maintain Britain's position as a global life sciences leader.

Through the NIHR, the DHSC continues to invest in a broad range of research. Focus has been given to three areas of impact: (i) improving people's quality of life; (ii) maintaining the excellence of UK science; and (iii) delivering economic returns from research, including for the NHS.

For every £1 invested by the NIHR, a return of £19 to the wider wealth of the nation is generated.

The [annual report](#) sets out several examples of important research, these include:

- Findings from the NIHR-funded Protect trial showed men with localised prostate cancer who are actively monitored, have the same survival rates after 15 years as men treated with radiotherapy or surgery.
- A teenage girl's incurable cancer was cleared from her body using genetically modified immune cells.
- Waiting lists for NHS bowel screening programme could be safely reduced by

increasing the blood level on the test that triggers an invitation for a colonoscopy.

- Changing gloves and instruments before closing wounds could reduce infections and provide safer surgery for thousands of patients in low- and middle-income settings.
- The establishment of ten Health Determinant Research Collaborations (HDRCs) is boosting local authorities' capacity to conduct high-quality research into the social, economic and environmental factors that lead to health inequalities.

Read the [Annual Report in full](#).

## Major study of UK health research funding published

A report new has been [published by the Health Research Classification System \(HRCF\)](#). **UK Health Research Analysis 2022**, provides the most detailed overview yet of UK health research funding from 2004 to 2022 from all public sectors.

The report found that annual funding had increased overall during these 18 years, reaching £5 billion in 2022. Most of this growth was in the first five years covered by the study (2004 to 2009) increasing by only 1.5% annually between 2009 and 2018.

However, since 2018 this growth has slowed to just 0.2% annually, resulting in a real terms decrease in funding of £110 million between 2018 and 2022.

The report attributes this decrease to both high inflation pressures and a shrinking of the charity sector's contribution to health research due to the impact of the Covid-19 pandemic on charitable income.

The report also found that funding for research projects over the study period was relatively stable for most areas of health but with some noteworthy trends. The largest growth has been in infections research boosted by Covid-19 research. Almost a fifth of health funding was spent on cancer research, but this has declined in proportion to overall funding (from 20.3% in 2004 to 16.8% in 2022).



To produce the report, the authors took an overview of all public funding for health-relevant research.

The analysis showed that of the £5 billion spent:

- £2.8 billion was invested directly in research projects;
- £1.4 billion was spent on infrastructure and other indirect support; and
- £865 million of health-relevant support funding was added from other sources not directly captured in the analysis, such as estimates of university core funding used for biomedical research.

The UK Health Research Analysis 2022 dataset has been made publicly available so that other funders can perform their own analyses and better support health and biomedical funding in the future.

For more information see the [HRCF website](#).

## New NIHR LGBTQ+ Network launches



The NIHR has announced the launch of a new LGBTQ+ Staff Network.

The NIHR LGBTQ+ Staff Network is open to all staff working as part of NIHR (such as staff in coordinating centres, LCRN core teams, delivery staff in LCRN partner organisations and staff in NIHR infrastructure such as ARCs and BRCs, who identify as part of the LGBTQ+ community or as allies.

The focus of the Network will be shaped by its people but will include peer support and wellbeing, social and community activities, development and training, LGBTQ+ research inclusion and communications and engagement.

The launch meeting for the Network will be held virtually on **7<sup>th</sup> February from 11 am to 12 pm**, where the process will start to put together the Coordinating Committee, share key information about the Network and allow members opportunities to connect with each other.

If you are interested in joining the mailing list for the NIHR LGBTQ+ Staff Network and would like to be invited to attend the launch meeting on 7 February and future meetings, please complete [this short form](#).

## Pan-London, Kent, Surrey and Sussex Research Champions event

On Friday 19<sup>th</sup> January, the Research Engagement team attended an event hosted by NIHR CRN North Thames and CRN North West London, to celebrate the work of our local Research Community Champions and Patient Research Champions.

Representatives from CRN Kent, Surrey and Sussex were there, as well as Angela Polanco,

National Head of Public Engagement, who presented an update on the work being carried out across the country.

This was a welcome opportunity to bring together staff and champions from across these organisations and geography to reflect on the successes of the last year and collaborate on what we plan to achieve in future.

Ahead of the merger between CRN North Thames and CRN North West London, the team is keen to be part of important ongoing work with our research champions.

If you are interested in the role of champions and would like to find out more about how they can help you in your research, please contact Neeta and James at [patientsinresearch.bartshealth@nhs.net](mailto:patientsinresearch.bartshealth@nhs.net).

## WMA launches consultation on revisions to the Declaration of Helsinki.

The World Medical Association (WMA) recently launched a [consultation on revisions](#) to the Declaration of Helsinki.

The revisions aim to help ensure the Declaration continues to address evolving global ethical challenges.

The HRA will be responding to the consultation and is currently working with its stakeholders, members of the public and Research Ethics Committee members to develop a response. A working group was created to lead the revisions at a WMA council meeting in April 2022. The Declaration has been amended seven times, most recently in 2013.

[The Declaration of Helsinki](#) is a statement of ethical principles for medical research involving humans, including research on identifiable human material and data. It was developed in 1964 by the World Medical Association (WMA) and is regarded as the most important document in the history of research ethics.



Although the document is addressed primarily to healthcare professionals, the WMA encourages others involved in medical research involving humans to adopt the principles, such as researchers, research ethics committees and governments. The Declaration's principles inform our work every day and help guide us in our strategy to make it easy to do research that people can trust. For example, our Research Ethics Committee members operate according to the principles, by helping to ensure research participants have adequate information to make an informed decision on whether to take part in research.

Whilst the Declaration is not a legal document, it is referred to in both the UK's Clinical Trials legislation and the UK Policy Framework for Health and Social Care Research. The Framework sets out the principles of good practice in health and social care research in the UK.

Further information about this work can be found [on the HRA's website](#).

## Take part in the Festival of Communities 2024

Exploring living and learning together in Tower Hamlets, the Festival of Communities is a collaboration between Queen Mary and local-based organisations taking place in Stepney Green Park on Saturday 8 June and the Queen Mary Mile End Campus on Sunday 9 June.

Over 7000 people join us over the weekend, and we are looking for Queen Mary initiatives to take part and engage local families by running a hands-on activity, demonstration, stall, exhibit or in other ways – we're open to creative ideas!



The Festival provides a great opportunity for researchers to engage residents and community organisations with your work and opportunities, whilst you gain valuable insights, connections and ideas for the future.

To support creating new or adapting existing activities to showcase at the festival, QM staff and students can [apply for up to £400](#) of funding through the Centre for Public Engagement.

The CPE team is on hand to offer advice on proposed engagement activity design through festival [information, one-to-one advice sessions](#) and a 'How to design a Festival of Communities activity' training session.

The Festival call to share how you'd like to be involved and the funding opportunity closes at the end of Wednesday 27th March. Visit the [Festival website](#) or email [festival@qmul.ac.uk](mailto:festival@qmul.ac.uk) with any queries.

### New JRMO Governance and GCP Managers

Two new managers have joined the Research Governance team.

Sarah Webb is the new Research Governance and Performance Manager. This is a senior role, leading the Research Governance and Performance team that is responsible for clinical study set-up, management, oversight, and performance as well as the EDGE system.

Sarah joins us from the Royal Marsden NHS Foundation Trust where she worked as a Research Programme Manager and, before that, various roles in clinical trial management and administration.

Lucia Biancha is the new GCP and Governance Manager, taking over many of the responsibilities from Tom Waters who leaves in mid-February. Lucia has been supporting the GCP team in its preparations for the MHRA inspection and more recently overseeing the day-to-day activities of the monitors.

Sarah's email is [sarah.webb@qmul.ac.uk](mailto:sarah.webb@qmul.ac.uk); Lucia's is [l.bianchi@qmul.ac.uk](mailto:l.bianchi@qmul.ac.uk). Both teams are usually in Dept W Tuesdays and Fridays but they are all available online at other times. For further information please see [the JRMO website](#).



## Standard Operating Procedure changes

Since the last R&D News Bulletin was published, the following SOPs and associated documents have been updated and released:

### SOP 19 Annual Progress Reports

- AD1 APR and DSUR Template Emails v2.0
- AD2 Sponsor Oversight Annual Questionnaire v2.0
- AD3 Progress reports guidance for JRMO reviewers v2.0
- AD4 DSUR template v2.0
- AD5 DSUR MHRA cover letter template v2.0

### SOP 23 Risk Assessment v10.0

- AD 1: JRMO Comprehensive Risk Assessment Tool for Sponsored MHRA regulated studies v2.0

### SOP 34a Researcher Training v10.0

### SOP 43 Laboratories

- AD1 Minimum requirement for laboratories v2.0
- AD2 Laboratory Set Up Checklist v2.0
- AD3 Laboratory file checklist v2.0
- AD4 Specimen transfer log v2.0
- AD5 Specimen destruction v2.0
- AD6 Laboratory Close Out Checklist v2.0
- Template 1 Laboratory Delegation Log v2.0
- Template 2 Equipment Log v1.0
- Template 3 Laboratory equipment validation and maintenance v1.0

These and all JRMO SOPs can be found [on the JRMO website](#).

## Our research

### Prof Edel O'Toole awarded Moxon Medal by Royal College of Physicians

In November Prof O'Toole became the first woman to receive the Moxon Medal since its inception in 1891. The award, a gold medal, was founded in memory of Dr Walter Moxon FRCP (1836–86) and is awarded every three years by the Royal College of Physicians (RCP) to a person (not restricted to British subjects) who has produced distinguished observation and research in clinical medicine. Notable recipients include Prof Sir John Bell FRS in 2008, Sir John Parkinson (cardiologist at the London Hospital) in 1957, Sir Arthur William Mickle Ellis (physician and nephrologist at the London Hospital) in 1951, Sir Alexander Fleming in 1945 and Sir Jonathan Hutchinson in 1906.



Prof O'Toole was nominated to receive the medal by the British Association of Dermatologists (BAD). The citation was given by Dr Tanya Bleiker, a recent President of the BAD. She mentioned Edel's contribution to understanding the biology of rare genetic skin diseases including epidermolysis bullosa and rare forms of ichthyosis, her work on clinical phenotyping in rare skin diseases including palmoplantar keratoderma, her research on the biology of the basement membrane zone, her deep phenotyping project of atopic eczema in Bangladeshi children and young adults in east London and her efforts to bring clinical trials to rare skin disease patients. The award was presented by Dr Sarah Clarke, President of the RCP. The last dermatologist to receive the Moxon medal was Frederick Parkes Weber in 1930.

Edel is a professor of Molecular Dermatology and a co-director of the Wellcome-funded [Health Advances in Underrepresented Populations and Diseases \(HARP\)](#) doctoral training programme. She was Centre Lead of the [Centre for Cell Biology and Cutaneous Research](#) at the Blizard Institute from 2015-2022. She is also an honorary consultant dermatologist at the Royal London Hospital with clinical interests in paediatric dermatology and rare genetic skin disorders.

Her research mainly focuses on genetic skin diseases including epidermolysis bullosa, ichthyosis, palmoplantar keratodermas and atopic eczema. Her work is funded by the BBSRC, Unilever, Lifearc, the Chan Zuckerberg Institute, the Medical Research Foundation, Barts Charity and the Leo Foundation. She works closely with patient organisations including [Pachyonychia Project](#) and is Chair of the Medical Advisory Board of the [Ichthyosis Support Group](#) and Chair of the Scientific Grants Panel of [DEBRA UK](#).

### **Prof Rupert Pearse recognised with an OBE for services to intensive care medicine**



Prof Pearse joined Queen Mary in 2006 as a senior lecturer in intensive care medicine and became a professor in 2014. His clinical duties are based at the Royal London Hospital where he oversees the care of patients with critical illnesses of various causes. He led the team at Royal London during the recent pandemic.

Responding to the award Prof Pearse paid tribute to his colleagues: "It's a wonderful honour to be nominated for this award. Intensive medicine is at the sharp end of the NHS services, and we were truly put to the test during the pandemic. I see this as recognition for the amazing teams at Barts Health and Queen Mary University London who gave their all in the most difficult of circumstances."

### **Prof Tom Powles joins Nature's list of 'the ten people who shaped science in 2023'**

Prof Tom Powles, cancer researcher at Queen Mary and physician, is recognised for leading

a transformative clinical trial for the treatment of severe bladder cancer.



For over a decade, [Nature's 10](#) list explores key developments in science over the past year and recognises ten influential individuals who contributed to these amazing discoveries. Prof Powles' research, which has identified a treatment that can double the life expectancy of patients with this type of cancer, has earned him a place amongst a list of the top 10 individuals who have driven key developments this year. He takes his place alongside figures such as Ilya Sutskever, OpenAI's chief scientist who helped to create ChatGPT, and Kalpana Kalahasti, a leading engineer from India's successful moon landing.

Prof Powles said: "It's very humbling to appear on this list. This bladder cancer work has been a huge effort from a large number of scientists, doctors and patients across the globe, over many years. Representing this group is a real honour."

### **Landmark study supports use of whole genome sequencing in standard cancer care**

In the largest study of its kind, scientists today report how combining health data with whole genome sequence (WGS) data in patients with cancer can help doctors provide more tailored care for their patients.

The study shows that combining whole genome sequence and clinical data together, at scale, supports the delivery of precision cancer care, where cancer diagnosis and treatment can be tailored to the individual patient. This supports the increased use of genomic testing in cancer care via the NHS Genomic Medicine Service and demonstrates the value of data from the ground-breaking 100,000 Genomes Project to improve

understanding of cancer and help researchers develop new treatments.

The research, published today in [Nature Medicine](#), shows that linking WGS data to real-world clinical data can identify changes in cancer DNA that may be relevant for an individual patient's care, for example by helping identify what treatment might work best for them based on their cancer.



The study, led by Genomics England, NHS England, Queen Mary University of London, Guy's and St Thomas' NHS Foundation Trust and the University of Westminster, analysed data covering over 30 types of solid tumours collected from more than 13,000 participants with cancer in the [100,000 Genomes Project](#). By looking at the genomic data alongside routine clinical data collected from participants over five years, such as hospital visits and the type of treatment they received, scientists were able to find specific genetic changes in the cancer associated with better or worse survival rates and improved patient outcomes.

The study showed that WGS could provide a more comprehensive view of a tumour's genetic landscape by detecting various genetic changes using a single test.

The analysis also revealed patterns across several cancers and uncovered different types of genetic changes that might explain response to treatment or predict possible patient outcomes. Together, the findings show the value of combining genomic and clinical data at scale to help healthcare professionals make the best treatment decisions with their patients.

WGS allows us to read someone's entire genome – the 3.2 billion letters that make up our DNA – with just one single test. For patients with cancer, this technique can be used to compare DNA from their tumour to the DNA in their healthy tissues.

The 100,000 Genomes Project laid the foundations for the NHS to become the first national health system to offer WGS as part of routine care via the NHS Genomic Medicine Service. This study shows the value of investment in national infrastructure to generate clinical and genomic data at scale on patients and participants who consent to research in an NHS setting - allowing researchers to uncover insights to drive improved diagnosis, care and treatment for patients with cancer.

Prof Sir Mark Caulfield, VP Health at Queen Mary University of London, said: "This study shows how we can transform cancer care from a 'one size fits all' approach into precision healthcare and defines specific genomic signatures that predict treatment response and outcomes, which may usher in expanded use of whole genomes for cancer care."

[Watch an interview](#) with Professor Sir Mark Caulfield about the 100,000 Genomes Project.

Andrew Stephenson, Health Minister, said: "This ground-breaking research demonstrates the power of genomics and is already helping to transform care, allowing patients to receive more tailored treatment and driving improved diagnosis. But we won't stop there. We want to harness this innovation to improve care for patients and affirm our position as a life sciences superpower – leading to quicker and more targeted interventions."

## **Blood test may show which women would benefit most from drug for breast cancer**

Research led by Queen Mary University of London's Wolfson Institute of Population Health has found that hormone levels, measured through blood tests, are an important indicator of whether post-menopausal women who are most at risk of developing breast cancer will benefit from aromatase inhibitors such as anastrozole.

This type of drug is recommended by the National Institute of Clinical Care and Excellence (NICE) as an option for preventive therapy in post-menopausal women at high risk of breast cancer. The study, published today (6 December) in [Lancet Oncology](#), could lead to better ways to identify those post-

menopausal women who would most benefit from these drugs.

1 in 7 women in the UK will develop breast cancer, with almost 56,000 cases diagnosed every year. Post-menopausal women who have higher concentrations of the hormone oestrogen in their bloodstream are at higher risk of developing breast cancer. Aromatase inhibitors stop the production of oestrogen and reduce the amount made in the body. They are currently the most effective preventive agent for oestrogen-receptor-positive breast cancer.

Led by Prof Jack Cuzick at Queen Mary, an international team of authors from the UK, Australia, Finland, Germany, Italy, and the USA tested whether measuring oestrogen in the blood could identify which women at increased risk of breast cancer will benefit most from the preventive effects of an aromatase inhibitor. The study was funded by Cancer Research UK, the National Health and Medical Research Council, Australia, and the Royal Marsden Cancer Charity.



The study analysed data from the IBIS-II prevention trial, an international randomised controlled trial of anastrozole in high-risk post-menopausal women conducted from 2003 to 2012. It found that there was a 55% reduction in the risk of developing cancer in three-quarters of the women receiving anastrozole.

However, women who had the lowest 25% of oestradiol levels showed a much-reduced risk. This suggests that inexpensive blood tests to measure hormones could identify those women who would benefit most from this medication and offer them the best balance of managing cancer risk and side effects.

Prof Jack Cuzick said: "These results are very exciting and can refine how we choose preventive medication for post-menopausal women at high risk of breast cancer. In our study, the 25% of these women with the lowest oestradiol measurements benefitted little from taking anastrozole, while still suffering from the side effects of the drug. A simple blood hormone test could improve the benefit of anastrozole if we use it to select the patients best suited to take it. We now need to routinely assess hormone levels in post-menopausal women at high breast cancer risk before prescribing anastrozole, to identify those who are at greatest risk and will respond well."

Dr David Crosby, head of prevention and early detection at Cancer Research UK, said: "It was really exciting when anastrozole was approved by NICE as a preventive treatment for some women at high risk of breast cancer. This research now gives us some clues about which women would benefit most from the drug while identifying women who won't benefit and can be spared unnecessary side effects. Cancer Research UK carried out some of the key work on developing these drugs, known as 'aromatase inhibitors'. It's an area with a lot of potential, and larger trials building on the results in this study will be key to further understanding who is most likely to benefit."

Prof Cuzick was presented with the [William L. McGuire Memorial Lecture Award](#) at the [December 2023 San Antonio Breast Cancer Symposium \(SABCS\)](#).

## Events

### SBK Healthcare Events & Training

[SBK Healthcare](#) provides training for clinical research that covers topics from quality assurance, skills development, preparing for inspections, and information governance, to support research in specific clinical areas.

In addition, they run several interactive forums, free webinars and have various video training resources. More information about all that can be found on their website: <https://www.sbk-healthcare.co.uk/>

If you are interested in attending any of the courses you can contact Nichola Cadwallader - [nichola.cadwallader@sbk-healthcare.co.uk](mailto:nichola.cadwallader@sbk-healthcare.co.uk) -

quote 'JRMO' in the subject line of your email and she may be able to offer a reduced rate.

## Queen Mary Clinical Academic Training School Research Day

The 2024 Clinical Academic Training School Research Day will be held on Tuesday 16<sup>th</sup> April 2024 in the Octagon, Mile End campus. This will be an all-day, in-person event. Do make sure you book study leave and cancel clinics in good time if required.

This event will showcase the excellent research done by Queen Mary's clinical academic trainees drawn from across the training pathway - Specialised Foundation Programme Fellows, Clinical Fellows, NIHR Academic Clinical Fellows and Clinical Lecturers. The programme will feature talks from fellows and lecturers, external academics, panel discussions and opportunities for networking.

All clinical academic trainees are invited to submit abstracts to present their research at the Research Day. We invite abstracts of no more than 250 words for poster or 10-minute oral presentations. Prizes will be awarded on the day.

The submission deadline is 4 pm on 16th February 2024. To submit your abstract please email [fmd-cats@qmul.ac.uk](mailto:fmd-cats@qmul.ac.uk)

To book your ticket for the event [visit the Eventbrite website.](#)

## JRMO drop-in sessions

JRMO drop-in sessions continue to take place on the **second Wednesday of every month, from 10 am to noon**. To attend a session during that time please [follow this MS Teams link](#)

You can of course continue to contact the team at any time  
- [research.governance@qmul.ac.uk](mailto:research.governance@qmul.ac.uk) - if you have a query regarding research governance, amendments or other GCP-related matters.

If you have a question about any of the following, come along and the team will be available on a first-come-first-served basis: Study set-up; Research governance and sponsorship; Research ethics; GCP advice;

Research passports and staff access; Finance and funding; Costing and contracts; Patient and public involvement.

The team looks forward to seeing you!

## Expressions of interest: Sharing Research Cultures at Queen Mary

The newly established Research Culture team wish to bring together colleagues from across the University for an afternoon exploring research culture at Queen Mary, taking place on Thursday 21<sup>st</sup> March, from 2 to 3:30 pm

To find out more and register your interest please visit the [Queen Mary website.](#)

## Lunchtime Research Talks at the Royal London Hospital

Monthly research talks have been running at the Royal London for almost a year now. These events started small and are now running as hybrid meetings, live and via MS Teams.

The talks aim to foster and sustain Barts Health clinical research environment. They are delivered by guest speakers or members of clinical research teams on a wide range of topics. They provide an open forum in an informal setting to share best practices and engage with topics relating to embedding research, clinical research delivery and workforce development.

They usually last an hour, including a presentation followed by a discussion. Everyone is welcome, topics will likely be of particular interest to the research delivery workforce and clinical staff looking to learn about research. Sessions are hybrid, no need to register for online attendance.

Room size is limited so please contact the team if you are planning to attend in person.

**Upcoming talk:** 21<sup>st</sup> March by Barts Life Sciences' data science team.

For more details and to book a place please contact Imogen Skene at [i.skene@nhs.net](mailto:i.skene@nhs.net)

## NIHR Associate Principal Investigator (PI) Scheme hosts the Research Learning Lectures

The [NIHR Associate Principal Investigator \(PI\) Scheme](#) hosts the Research Learning Lectures; a series of lectures for anyone in Health and Social Care interested in learning more about research.



The lectures will cover a variety of topics relating to basic science, clinical trial methodology and statistics. Providing career advice for anyone who wishes to know more about research or work towards a career in research or academia. Attendees will have the opportunity to hear from and put questions to research experts from across the world. For more information, please visit the [NIHR website](#).

Upcoming lectures are:

- **How to be a good Principal Investigator**  
Date & time: 15<sup>th</sup> February 2024, 1:00-2:00 pm  
Speaker: Dr Duncan Gilbert (MRC Clinical Trials Unit at UCL)

Chair: Hannah Rush (MRC Clinical Trials Unit at UCL)

- **Lessons learned from REMAP-CAP**  
Date & time: 5<sup>th</sup> March 2024, 2:00-3:00 pm  
Speaker: Prof. Tony Gordon (Imperial College London)

Chair: Dr Kiran Reddy / Dr Bronwen Connolly (Queen's University Belfast)

- **How to do a systematic review and why they are useful**

Date & time: 14<sup>th</sup> March 2024, 1:00-2:00 pm  
Speaker: Dr Claire Vale (MRC Clinical Trials Unit at UCL)

Chairs: Matt Nankivell (Dr Claire Vale (MRC Clinical Trials Unit at UCL))

- **Principal Investigator Pipeline Programme (PIPP) for Research Nurses and Research Midwives**

Date & time: 21<sup>st</sup> March 2024, 2:00-3:00 pm  
Speaker: Sharon Dorgan (NIHR Clinical Research Network)

Chairs: Dr Kiran Reddy / Dr Bronwen Connolly (Queen's University Belfast)

- **Health Economics in Clinical Trials**

Date & time: 26<sup>th</sup> April 2024, 1:00-2:00 pm  
Speaker: Dr Caroline Clarke (MRC Clinical Trials Unit at UCL)

Chair: Hannah Rush (Dr Claire Vale (MRC Clinical Trials Unit at UCL))

To register please visit the [Eventbrite webpage](#). You can also browse the future lectures in the series and register for those in advance. If you have any questions, please contact the Associate PI Scheme team at [associatepischeme@nihr.ac.uk](mailto:associatepischeme@nihr.ac.uk)

## Best Practice for Sex Inclusive Research Workshop

Wednesday 14<sup>th</sup> February 2024, 1-5 pm,  
Derek Willoughby LT, John Vane Science Centre



This workshop is suitable for pre-clinical (PhD Student to Professor) researchers with an interest in learning how to incorporate biological sex as an experimental variable.

The training will explore both the misconceptions and practical blockers to sex-inclusive research. It will explore what sex and gender-inclusive research is and when sex and gender should be considered. It will consider the drivers behind the changing landscape of sex-inclusive research, the blockers to sex-inclusive research, and finally explore how to analyse and power experiments with both sexes.

This will be an interactive workshop with the host (Amrita Ahluwalia) and leads (Naatsha Karp & Benjamin Philips) speaking briefly and the rest of the time allocation devoted to an interactive session. This will include an interactive section where in small groups attendees apply the knowledge gained in scenario exploration where a design question

is posed and the researchers suggest the solution.

To register [visit the Eventbrite website](#).

## Training

### JRMO GCP Training

Both Queen Mary and Barts Health require all those undertaking clinical research at our sites to attend appropriate training. It is mandated that all researchers conducting MHRA-regulated trials must complete a GCP course and refresh it every two years. The same is advised as the best practice for all other researchers.

More details regarding research-specific training can be found in [JRMO SOP 34a Researcher Training](#) and [SOP 12b Associated Document 2: JRMO Sponsorship review proportionality document](#)

Dates for training up to Easter 2024 can be [viewed on the JRMO website](#). Most courses are now delivered by Zoom.

To book a course please email [research.governance@qmul.ac.uk](mailto:research.governance@qmul.ac.uk) with the subject title 'GCP COURSE BOOKING', including in the body of the email the name of the JRMO course you wish to attend. Your place will be confirmed by email.

### Human Tissue Act and the Implications for Research

This course provides an overview of the human tissue legislation in the UK and the role and importance of the Human Tissue Authority (HTA). This course is for research staff and students who need to be trained to take consent for research studies, and to understand the rules governing the use of human tissue, set out in the Human Tissue Act, before working with human tissue and/or data.

Bookings can be made by contacting Katie Ersapah, Human Tissue Resource Centre Manager at [k.ersapah@nhs.net](mailto:k.ersapah@nhs.net)

Upcoming dates are:  
8<sup>th</sup> Feb 2024 2-3 pm via Teams  
25<sup>th</sup> April 2024 2-3 pm via Teams

13<sup>th</sup> June 2024 2-3 pm via Teams

19<sup>th</sup> Sept 2024 2-3 pm via Teams

14<sup>th</sup> Nov 2024 2-3 pm via Teams

### **NIHR** | National Institute for Health Research **NIHR Learning for Involvement**

**Centre for BME Health BAME Toolkit:** The Centre for BME Health has produced a checklist to help researchers when designing and recruiting for studies, as well as when conducting PPIE activities. The toolkit aims to capture best practices and provide researchers with a framework on how to improve the participation of people from ethnic minorities in research. Available on their [website](#).

**Improving Inclusivity within Research:** BAME groups are more likely to suffer from poorer health outcomes and health and social care inequalities and are less likely to be represented in health and social care research studies. This [training module and toolkit](#) from CRN East Midlands and the Centre for BME Health will help your research become more inclusive of ethnic minority groups.

**Patient and Public Involvement Toolkit:** Involving People's Public and Patient Involvement [Toolkit](#) is a very useful resource which will take you through each stage of the engagement process. This will help you understand what you are trying to achieve, plan how you will achieve it, produce a report based on your findings, and inform how your services can meet the needs of local people better.



**The Centre for Ethnic  
Health Research**  
national centre for tackling health inequalities

### UCL BRC PPIE Training

University College London's BRC provides regular PPIE training sessions for researchers.

The award-winning sessions build up researchers' skills and confidence in involving laypeople in activities, including setting research priorities and designing protocols. Evaluation in BMJOpen (Yu et al. 2021) showed marked increases in researchers' PPIE confidence after our training.

There are five modules available, including an introduction to PPIE and sessions on running

focus groups, finding people and filling in grant applications. You can attend all 5 modules to build up knowledge progressively or you can pick the one that best suits you.

The training is available to all researchers, although non-UCL/ UCLH/UCLP-related staff do have to pay a small fee for each workshop attended. For more information, please visit [the UCLH BRC website](#).

## Research funding

### NIHR grant calls

**NIHR** | National Institute  
for Health Research

- [23/180 Evaluation of an NHS England pilot for use of a multi-cancer early detection blood test](#)  
The Health and Social Care Delivery Research (HSDR) Programme is accepting Stage 1 applications for this funding opportunity.  
Closes: 1 pm on 12 February 2024
- [Invention for Innovation - Connect 8](#)  
Invention for Innovation - Connect 8  
Closes: 13:00 on 21 February 2024
- [23/169 Metformin to prevent antipsychotic-induced weight gain](#)  
The Health Technology Assessment (HTA) Programme is accepting Stage 1 applications to their commissioned workstream for this primary research topic.  
Closes: 13:00 on 28 March 2024
- [23/168 Higher calorie refeeding compared with lower calorie refeeding in malnourished adults with anorexia nervosa](#)  
The Health Technology Assessment (HTA) Programme is accepting Stage 1 applications to their commissioned workstream for this primary research topic.  
Closes: 13:00 on 28 March 2024
- [23/155 Repetitive Transcranial Magnetic Stimulation for depression in adolescents](#)  
The Health Technology Assessment (HTA) Programme is accepting Stage 1 applications to their commissioned workstream for this primary research topic.  
Closes: 13:00 on 28 March 2024
- [23/163 Rituximab in Systemic Lupus Erythematosus](#)  
The Health Technology Assessment (HTA) Programme is accepting Stage 1

applications to their commissioned workstream for this primary research topic.  
Closes: 1 pm on 28 March 2024

- [23/140 New research on skills, training, development and support for the health and social care workforce](#)  
The Health and Social Care Delivery Research (HSDR) Programme is accepting Stage 1 applications for this funding opportunity.  
Closes: 13:00 on 9 April 2024  
Closes: 13:00 on 9 April 2024
- [24/6 NIHR NICE Rolling Call \(HSDR Programme\)](#)  
The Health and Social Care Delivery Research (HSDR) Programme is accepting stage one applications for this funding opportunity.  
Closes: 13:00 on 9 April 2024
- [23/171 Efficacy and Mechanism Evaluation Programme researcher-led](#)  
The Efficacy and Mechanism Evaluation (EME) Programme is accepting Stage 1 applications to their researcher-led workstream.  
Closes: 1 pm on 23 April 2024
- [23/173 NIHR NICE rolling call \(EME Programme\)](#)  
The Efficacy and Mechanism Evaluation Programme is accepting Stage 1 applications for this funding opportunity.  
Closes: 13:00 on 23 April 2024
- [23/170 EME Platform studies to efficiently evaluate the efficacy of multiple interventions](#)  
The Efficacy and Mechanism Evaluation Programme is accepting Stage 1 applications to their commissioned workstream.  
Closes: 13:00 on 23 April 2024
- [23/172 NIHR James Lind Alliance Priority Setting Partnerships rolling call \(EME Programme\)](#)



- The Efficacy and Mechanism Evaluation (EME) Programme is accepting Stage 1 applications for this funding opportunity. Closes: 13:00 on 23 April 2024
- [\*\*23/175 Public Health Programme researcher-led\*\*](#)  
The Public Health Research (PHR) Programme is accepting Stage 1 applications to their researcher-led workstream. Closes: 13:00 on 23 April 2024
  - [\*\*23/176 NIHR James Lind Alliance Priority Setting Partnerships rolling call \(PHR Programme\)\*\*](#)  
The Public Health Research (PHR) Programme is accepting Stage 1 applications to their researcher-led workstream. Closes: 13:00 on 23 April 2024
  - [\*\*23/177 NIHR NICE Rolling Call \(PHR Programme\)\*\*](#)  
The Public Health Research (PHR) Programme is accepting Stage 1 applications for this funding opportunity. Closes: 13:00 on 23 April 2024
  - [\*\*23/178 Continuing areas of research interest to the PHR Programme\*\*](#)  
The Public Health Research (PHR) Programme is accepting Stage 1 applications to their commissioned workstream for these topics. Closes: 13:00 on 23 April 2024
  - [\*\*23/174 Optimising treatment duration with immunomodulators to reduce overtreatment \(EME Programme\)\*\*](#)  
The Efficacy and Mechanism Evaluation (EME) Programme is accepting Stage 1 applications to their commissioned workstream. Closes: 1 pm on 23 April 2024
  - [\*\*23/147 Men's mental health\*\*](#)  
The Public Health Research Programme (PHR) is accepting Stage 1 applications to their commissioned workstream for this topic. Closes: 13:00 on 23 April 2024
  - [\*\*23/143 Application Development Award \(ADA\): Data mapping as the first step to understanding e-cigarettes better through modelling\*\*](#)  
The Public Health Research (PHR) Programme is accepting direct-to-Stage 2 applications for this funding opportunity. Closes: 13:00 on 23 April 2024
  - [\*\*23/149 Faith-based groups and the impacts on health and health inequalities\*\*](#)  
The Public Health Research Programme (PHR) is accepting Stage 1 applications to
- their commissioned workstream for this topic. Closes: 13:00 on 23 April 2024
- [\*\*RfPB Under-represented disciplines and specialisms highlight notice: Allied Health Professionals\*\*](#)  
The Research for Patient Benefit (RfPB) programme invites applications from allied health professionals to the third highlight notice addressing the NIHR strategy to strengthen careers of under-represented disciplines and specialisms. Closes: 24 April 2024
  - [\*\*24/4 NIHR James Lind Alliance Priority Setting Partnerships Rolling Call \(HTA Programme\)\*\*](#)  
The Health Technology Assessment (HTA) Programme is accepting Stage 1 applications for this funding opportunity. Closes: 13:00 on 1 May 2024
  - [\*\*24/3 NIHR NICE Rolling Call \(HTA Programme\)\*\*](#)  
The Health Technology Assessment (HTA) Programme is accepting Stage 1 applications for this funding opportunity. Closes: 13:00 on 1 May 2024
  - [\*\*24/2 Health Technology Assessment Programme Researcher-led \(evidence synthesis\)\*\*](#)  
The Health Technology Assessment (HTA) Programme is accepting Stage 1 applications for this funding opportunity. Closes: 13:00 on 1 May 2024
  - [\*\*24/1 Health Technology Assessment Programme Researcher-led \(primary research\)\*\*](#)  
The Health Technology Assessment (HTA) Programme is accepting Stage 1 applications for this funding opportunity. Closes: 13:00 on 1 May 2024
  - [\*\*23/166 L-dopa for neovascular \(wet\) age-related macular degeneration? Can it reduce the need for anti-VEGF injections?\*\*](#)  
The Health Technology Assessment (HTA) Programme is accepting Stage 1 applications to their commissioned workstream for this primary research topic. Closes: 1 pm on 15 May 2024
  - [\*\*23/167 Optimising treatment duration with immunomodulators to reduce overtreatment \(HTA Programme\)\*\*](#)  
The Health Technology Assessment (HTA) Programme is accepting Stage 1 applications to their commissioned workstream for this primary research topic. Closes: 1 pm on 15 May 2024
  - [\*\*23/152 Clinical prediction models for early-onset neonatal infection\*\*](#)

The Health Technology Assessment (HTA) Programme is accepting Stage 1 applications to their commissioned workstream for this primary research topic. Closes: 13:00 on 22 May 2024

- [23/158 Treatment of steroid-resistant ulcerative colitis with tofacitinib compared with infliximab](#)

The Health Technology Assessment (HTA) Programme is accepting Stage 1 applications to their commissioned workstream for this primary research topic. Closes: 1 pm on 22 May 2024

Information on all NHIR funding can be found on the [NIHR Funding website](#).

## UKRI grant calls



UK Research and Innovation

UKRI is developing funding along strategic themes with a variety of co-funders including the MRC. Look out for information on its website relating to its themes:

- Building a green future
- Securing better health, ageing and wellbeing
- Tackling infections
- Building a Secure and Resilient World
- Creating opportunities, improving outcomes

Currently open UKRI funding includes:

- [BBSRC-STFC facility access funding for bioscience partnerships round two \(invite only\)](#)

Apply for funding that supports industrially relevant bioscience research through access to STFC expertise and world-class facilities. This stage of the application is by invitation only and must be completed by an individual based at a UK research organisation eligible to receive BBSRC funding. Award range: £10,000 - £100,000  
**Closing date:** 8 February 2024 4:00 pm UK time

- [Applied global health partnership: stage one](#)

Apply for funding to support a partnership to enable research that will address global health challenges and inequities. We will accept applications of all sizes, including large projects and small to medium-scale

applications. Award range: £150,000 - £1,000,000

**Closing date:** 13 February 2024 4:00 pm UK time

- [Applied global health research: stage one](#)

Apply for funding to support applied research that will address global health challenges and inequities. We will accept applications of all sizes, including large research projects and small to medium-scale applications. Award range: £150,000 - £2,000,000

**Closing date:** 13 February 2024 4:00 pm UK time

- [Needle-free medicines delivery technologies: feasibility studies](#)

UK-registered businesses can apply for a share of up to £1 million for feasibility studies. These will be to support the development and manufacturing of needle-free technologies to administer medicines.

**Closing date:** 14 February 2024 11:00 am UK time

- [SBRI phase three: enhanced clean air innovation trials](#)

Organisations can apply for a share of £800,000 to further develop pre-commercial innovations related to monitoring, mitigating or extracting air pollution. They must conduct extended field trials to evaluate and enhance the solution for commercialisation.

**Closing date:** 14 February 2024 11:00 am UK time

- [Develop interdisciplinary research proposals to tackle epidemic threats](#)

Apply for seed funding to build interdisciplinary teams and develop research ideas to tackle epidemic diseases of animals, humans and plants. You must be based at a UK research organisation eligible for UK Research and Innovation (UKRI) funding. Maximum award: £100,000

**Closing date:** 27 February 2024 4:00 pm UK time

- [Creative Catalyst 2024](#)

UK registered micro or small businesses in the creative industries sector can apply for funding of up to £50,000 with a package of tailored support to grow their business.

**Closing date:** 6 March 2024 11:00 am UK time

- [Environmental monitoring innovation](#)

UK registered businesses can apply for a share of up to £5 million for collaborative projects to develop innovative solutions in

environmental monitoring. This funding is from Innovate UK and Defra.

**Closing date:** 6 March 2024 11:00 am UK time

- [Innovate UK innovation loans future economy: round 13](#)

UK registered businesses can apply for loans for innovative projects with strong commercial potential to significantly improve the UK economy.

**Closing date:** 6 March 2024 11:00 am UK time

- [Funding for early-stage development of new healthcare interventions](#)

Apply to the Developmental Pathway Gap Fund (DPGF) to generate critical preliminary data and de-risk your development strategy for a new medicine, medical device, diagnostic test, or other medical intervention. You must be based at a research organisation eligible for Medical Research Council (MRC) funding. Award range: £50,000 - £300,000

**Closing date:** 13 March 2024 4:00 pm UK time

- [Eureka collaborative R&D: Eurostars 3 Call 6](#)

UK registered organisations can apply for a share of up to £2.5 million for collaborative research in partnership with organisations from participating Eurostars countries.

**Closing date:** 14 March 2024 11:00 am UK time

- [Knowledge Asset Grant Fund: explore, spring 2024](#)

Eligible UK public sector organisations can apply for up to £25,000 from the Knowledge Asset Grant Fund in this strand. The funding will aid the exploitation of intangible assets that have a broader application or client base than their owner organisation.

**Closing date:** 14 March 2024 11:00 am UK time

- [Knowledge Asset Grant Fund: expand, spring 2024](#)

Eligible UK public sector organisations can apply for up to £100,000 from the Knowledge Asset Grant Fund in this strand. The funding will aid the exploitation of intangible assets that have a broader application or client base than their owner organisation.

**Closing date:** 14 March 2024 11:00 am UK time

- [Knowledge Asset Grant Fund: extend, spring 2024](#)

Eligible UK public sector organisations can apply for up to £250,000 from the

Knowledge Asset Grant Fund in this strand. The funding will aid the exploitation of intangible assets that have a broader application or client base than their owner organisation.

**Closing date:** 14 March 2024 11:00 am UK time

- [JPIAMR: antimicrobial resistance \(AMR\) interventions](#)

Apply for funding to support international collaborative research projects aiming to: design new interventions against fungal infections, and improve, compare and evaluate the effectiveness, cost-effectiveness, and uptake of existing interventions against bacterial or fungal infections. You must be based at a UK research organisation and be eligible for MRC funding. Maximum award: £350,000

**Closing date:** 14 March 2024 1:00 pm UK time

- [Public Health Intervention Development \(PHIND\)](#)

Apply for funding for the early-stage development of an intervention that seeks to address a UK or global public health challenge. You must be a researcher employed by an eligible research organisation. Maximum award: £150,000

**Closing date:** 19 March 2024 4:00 pm UK time

- [Strengthening the resilience of the UK food system](#)

Apply for funding to strengthen the resilience of the UK food system. Your project should be interdisciplinary, and you must collaborate with at least one stakeholder organisation (government, business and the third sector). You must be based at a UK research organisation eligible for BBSRC funding. Award range: £1,000,000 - £1,400,000

**Closing date:** 19 March 2024 4:00 pm UK time

- [Pre-announcement: UKRI systems approaches to advance the UK's transition to net zero](#)

Apply for funding to establish a flagship transdisciplinary research programme in systems approaches to advance the UK's transition to net zero. This opportunity is part of the UKRI Building a Green Future strategic theme. You must be based at a UK research organisation eligible for UKRI funding. Maximum award: £4,625,000

**Closing date:** 26 March 2024 4:00 pm UK time

- [UK Japan Engineering Biology for Novel Therapies and Diagnostics Research Collaboration](#)

Apply for funding to work with researchers in Japan in the field of engineering biology for novel therapies and diagnostics research. You must be based at a UK research organisation eligible for MRC funding. You must submit a parallel joint application to the Japan Agency for Medical Research and Development.  
**Closing date:** 16 April 2024 4:00 pm UK time

- [Japan-UK engineering biology for discovery research and cross-cutting technologies](#)  
Apply for grant funding to support research projects focused on the fundamentals of engineering biology and cross-cutting technologies. Your proposal must involve researchers from Japan and the UK. UK applicants must be based at a UK research organisation eligible for BBSRC funding. Japanese applicants must be eligible for JST funding.  
**Closing date:** 16 April 2024 4:00 pm UK time
- [Experimental medicine stage one](#)  
Apply for funding to undertake mechanistic studies in humans. Your application must include an intervention to investigate the causes, progression, or treatment of human disease. This is an ongoing funding opportunity. Stage one application rounds close every April and October.  
**Closing date:** 17 April 2024 4:00 pm UK time
- [Smart grants: Jan 2024](#)  
UK registered organisations can apply for a share of up to £25 million for game-changing and commercially viable research and development innovations that can significantly impact the UK economy.  
**Closing date:** 24 April 2024 12:00 pm UK time
- [Pre-announcement: African Research Leaders](#)  
Apply for funding to support exceptional early to mid-career African researchers to conduct excellent global health research across sub-Saharan Africa (SSA). Researchers should be supported by an enthusiastic local research environment and by a UK-based partner as part of a partnership between the African and UK institutions. Award range: £250,000 - £750,000  
**Closing date:** 24 April 2024 4:00 pm UK time

For more information please [visit the UKRI website](#).

### International and EU Research and Innovation Funding Opportunities

A bi-monthly bulletin of various non-EU international funding opportunities is available on the JRMO International Team's [SharePoint site](#). In addition, EU Horizon funding opportunities are also set out on [SharePoint](#)

Together these contain a huge number of research funding schemes from the EU and other international sources many of which are of relevance to clinical researchers.

If you don't already have access to the EU/International Sharepoint site please contact a [member of the international team](#) to obtain it.

### CSL Research Acceleration Initiative

**Applications close: 27 February 2024**

QM Innovations has announced a new partnership opportunity with CSL, a leading global biotech company that develops and delivers innovative biotherapies to help people living with life-threatening medical conditions live full lives.

CSL is a leading global biotech company that develops and delivers innovative biotherapies to help people living with life-threatening medical conditions live full lives. CSL's Research Acceleration Initiative aims to fast-track the discovery of innovative biotherapies through partnerships between CSL and global research organizations. If you're working on immunology, haematology, oral delivery, cardiovascular and metabolic, nephrology and transplant, vaccines, respiratory, gene therapy, or plasma protein research, you can apply for up to \$400,000 over 2 years through CSL's Research Acceleration Initiative.

Please contact Deborah Carter - [deborah.carter@qmul.ac.uk](mailto:deborah.carter@qmul.ac.uk) - or Monika Hamilton - [monika.hamilton@qmul.ac.uk](mailto:monika.hamilton@qmul.ac.uk) - to express interest in applying and to obtain online application submission instructions. Submit a non-confidential, 300-word abstract via the CSL online application portal by **27<sup>th</sup> February 2024**.



## Barts Charity Research Seed Grants

Barts Charity Research Seed Grants provide seed funding up to £75,000 to support the generation of research data and information that enhances our understanding of health and illness and could lead to improved lives in East London and will support a grant application to another funding organisation or pump-prime a new academic-clinical collaboration.

The charity particularly encourages applications from researchers at the start of their independent career or those who want to develop ideas that are outside their discipline or area of expertise.

You can find out more about the Research Seed Grants on [the Barts Charity website](#):

Barts Charity welcomes applications for this scheme four times a year. The next deadline for applications is **11<sup>th</sup> March 2024**.

## Barts Charity Research Project Grants

Barts Charity Research Project Grants provide funding up to £600,000 to support innovative research that enhances our understanding of health and illness and could lead to improved lives in East London and will generate research outputs of local and international significance that could form the basis of substantial ongoing support from other funders. You can find out more about the Research Project Grants scheme on [the Barts Charity website](#).

Barts Charity welcomes applications for this scheme twice a year. The next deadline for applications is **19<sup>th</sup> June 2024**.



## British Academy – additional needs funding pot

The British Academy is introducing a new initiative to support researchers with additional

needs. It is inviting current and new award holders who would like to apply for additional funding to support their awards or applications. This funding pot is available for both current award holders and applicants who would like to apply for an award but need support with submitting their applications. In all cases, the Academy will need a case to be set out requesting this support, including a brief explanation as to why these needs cannot be met by the applicant's employing or host university or research organisation. Applications must be submitted online using the British Academy's Grant Management System (GMS), Flexi-Grant®.

For more information please [visit the British Academy website](#).

*This is a rolling funding call with no deadline, but you are recommended to apply as soon as you are able.*

## Funding Call – Horizon Europe Pump Priming Collaboration between UK and EU Partners

The British Academy with the support of the Royal Society, the Academy of Medical Sciences, and the Royal Academy of Engineering are inviting proposals from UK and EU/Associated Countries-based researchers to pump prime collaborations to support the effective uptake of the opportunities provided by the UK's association to Horizon Europe.

The second round is now open for applications, with a **deadline of 21<sup>st</sup> February 2024, 5 pm**.

Horizon Europe is the largest ever EU Framework Programme for research and innovation, with a budget of over €95 billion (2021–2027, excluding contributions from Associate Countries). Such EU programmes offer significant opportunities to access new knowledge, partners, markets, customers, and suppliers. The purpose of this call is not to implement the proposed projects that will be submitted to Horizon Europe, but to give the UK-based partners the resources needed to collaborate with EU organisations and stakeholders to further develop the idea and the market opportunities. For more information see the [Horizon Europe funding portal](#).

To find out more please visit the [British Academy website](#).

# Fellowships and related opportunities

## UKRI fellowships



UK Research  
and Innovation

- [Pre-announcement: Future Leaders Fellowships: round 9](#)  
Funding to support ambitious research and innovation across UK Research and Innovation (UKRI)'s remit.  
**Closing date:** 18 June 2024 4:00 pm UK time
- [Daphne Jackson fellowship](#)  
These fellowships are for those looking to return to a research career after a break. Fellowships combine a personalised retraining programme with a challenging research project.  
**Closing date:** Open - no closing date
- [Researching ME/CFS: highlight notice](#)  
Apply for funding to research myalgic encephalomyelitis/chronic fatigue syndrome, also known as ME/CFS.  
**Closing date:** Open - no closing date
- [Researching motor neurone disease: highlight notice](#)  
Apply for funding to research motor neurone disease (MND)  
**Closing date:** Open - no closing date
- [Renewal scheme for current Future Leaders Fellows](#)  
Successful applicants to the Future Leaders Fellowships (FLF) scheme have the opportunity to extend their four-year fellowship by up to a further three years. Maximum award: £567,000  
**Closing date:** Open - no closing date

For more information [visit the UKRI website](#)

## Moderna Fellowships

Moderna has announced that applications are now open for [United Kingdom Fellowship 2024](#). The fellowship program aims to support

novel research in the field of **mRNA Science**, with a specific focus on the stated areas of interest.

**Application Deadline:** February 29<sup>th</sup> 2024

## NIHR fellowship highlights

**NIHR** | National Institute  
for Health Research

- [NIHR Doctoral Fellowship Round 11](#)  
The NIHR Doctoral Fellowship is a three-year full-time award that supports individuals to undertake a PhD in an area of NIHR research.  
Closes: 13.00 on 1 February 2024
- [NIHR Development and Skills Enhancement Award \(DSE\)](#)  
The DSE award is a post-doctoral level funding opportunity aimed at supporting early to mid-career researchers in gaining specific skills and experience to underpin the next phase of their research career.  
Closes: 29 March 2024

Information on all NIHR funding can be found on the [NIHR Funding website](#).

## British Academy: Researchers at Risk Fellowships

The British Academy with [Cara \(the Council for At-Risk Academics\)](#) has established the *Researchers at Risk Fellowships Programme* with the support of the Academy of Medical Sciences, the Royal Academy of Engineering and the Royal Society. The Programme is receiving £3 million of government funding from the Department for Business, Energy and Industrial Strategy. The Nuffield Foundation, an independent charitable trust, is contributing £0.5 million towards the scheme. This is an ongoing fund. For more information, please visit [the British Academy website](#).

## Research Professional

Research Professional (formerly Research Research) has an easy-to-use sign-up process: <http://www.researchprofessional.com/>

**Funding information:** [Up-to-the-minute information about all types of research funding can be found on the Research Professional website – to access this click here \(account and password required\).](#)