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Research Matters: Changing lives in East London and beyond

Barts Health will be hosting its annual Research Matters forum at The Great Hall, St. Bartholomew's Hospital on Wednesday 22 May, 5.30 to 8.30pm. The event will showcase some of the ways in which we are improving Barts Health patients’ experiences of taking part in research and making research more accessible to our patients.

The programme will include a presentation of the NIHR Patient Research Experience 2018/19 survey results from a national, regional and Barts Health perspective, with network and local research staff describing the lessons learnt and improvement plans. Researchers from the Trust’s Renal Unit will present key findings following their study examining barriers to participation in research within the local Bangladeshi community and the measures they’ve introduced to build trust and understanding with patients about taking part in research. There will also be a brief update about the Patient Research Champions, followed by a wine reception.

All are welcome to attend but registration will be required. For registration instructions, and for news about other events taking place around International Clinical Trials Day, please visit the Barts Health website - here.

Additional information, from the researcher’s perspective, is available on the JRMO website.

NIHR Interactive Costing Tool nears launch

The fifth and final stage of user testing for the Interactive Costing Tool (iCT) project has ended and the project has moved into user acceptance testing with business change work underway. The anticipated launch of iCT is May 2019.

The iCT will, for the first time, enable the industry to input codes from their own Grantplan systems to help ascertain costs for their selected sites. It is hoped, with this collection of specific data, that we may be able to complete recommendations laid down by NHS England to provide a single cost per study nationally across the UK.

The new Interactive Costing Tool is being developed by a joint PA Consulting and CRN CPMS team led by Barts Health’s former Costing and Contracts Manager, Phillip Good.

For more information about the interactive Costing Tool please click here.

Greater clinical trials transparency

The Government has responded to the House of Commons Science and Technology Committee’s report on Research Integrity, including clinical trials transparency. The response from Baroness Blackwood, Parliamentary Under Secretary of State for Health, set out a number of recommendations, including:

- Enforceable clinical trials transparency requirements will be introduced, detail of which will be forthcoming;
- Establishing clear timelines for institutions to comply in full with clinical trials transparency requirements, along with the consequences of failing to meet those deadlines;
- The HRA will be responsible for a national audit programme of clinical trials transparency, including the publication of a single official list of which UK trials have published results and those which are due to but have not;
- In the first instance, this should focus on providing information on whether any
results have been published in an academic journal following global best practice, building on the automated methods already developed by others. We recognise that there are other dissemination routes for clinical trials results beyond academic journals that automated methods might not capture;

- The HRA will be asked to publish a detailed strategy for achieving full clinical trials transparency, with a clear deadline and milestones for achieving this; and
- There will be further consultation on delivering these improvements to clinical trials transparency.

The Government concluded that the UK science and research sector is world class and its reputation depends on adherence to the highest standards of research integrity. The overarching framework is that research must be conducted with integrity, and be able to build on the works of others. It was recognized that patients may suffer and money wasted repeating research that has already been conducted but not published. The full response can be found here.

Patient Research Champions

The Research Engagement and Diffusion team have a number of Patient Research Champions (Trust volunteers) who are ready to join your research team!

★ Olivia is newly registered and would like to volunteer at St. Bart’s Hospital. She is currently available to volunteer during the week between Monday and Friday. She has recently completed an MSc in psychology and research methods and is keen to gain some insight into how research is conducted within a hospital setting. Friendly, approachable and capable – she’ll be an asset to any team.

★ Drilona has been volunteering with the Stroke research team at Newham since Oct 2018 and was instrumental in delivering the NIHR Patient Research Experience Survey. Drilona has also recently signed up to be a Trial Steering Committee member on the SPACE study but is keen to have more volunteering hours.

If you would like a Patient Research Champion to join your team, please contact Olivia Coleman or Neeta Patel at patientsinresearch@bartshealth.nhs.uk or call: 020 7363 8923

Life Sciences Image Award, 2019

The Queen Mary Life Sciences Institute (LSI) has launched its 2019 Life Sciences Image Awards.

The team is seeking outstanding and engaging images produced by Queen Mary and Barts Health staff and students under the themes of ‘health and wellbeing’, ‘health and technology’, and ‘beauty in medicine’.

Whether you are forever seeing life from behind the lens or simply have pledged to be more creative this year, this competition is the perfect opportunity to present your artistic perspective within the world of Life Sciences. To see previous winners, the prizes and find out how to enter visit the Queen Mary website here.

The closing date for entries is 27 May 2019, 5pm. Shortly after this date, they will confirm if your entry has been shortlisted.

Temporary Freeze on new CRN Business Case proposals

CRN North Thames has written to Partnership Trust R&D Directors to inform them that it is not in a position to provide additional funding for new business cases. This is due to a reduction in its budget. This situation will be reviewed in June, at which point further updates will be circulated.

In the meantime the Network would still like to see any new business case ideas so that it can maintain a log of cases. As usual applications should be sent to its Research Development Managers (RDMs).
Further information can be found on the NIHR CRN website. Any local queries can be directed to Jo Morgan, Associate Director Research Development at Barts Health: Jo.Morgan@bartshealth.nhs.uk

Barts Health expenses policy update

Please note that the policy for research-related expenses for Barts Health is the same as for all types of non-research expenses. The full position, with forms, is set out on the Trust's WeShare intranet.

Key points to note:
- The employee expenses policy and the guidance notes on the claim form provide claimants with clarity about what can be claimed and what documentation is required to support a valid claim.
- Employees are not permitted, under any circumstances, to purchase goods or services on behalf of the Trust and all reimbursement claims will be rejected.
- With regards to the provision of receipts for the differing types of travel only the following will be accepted as valid:
  - Air Travel - Copy of boarding pass and cost of the flight (included on booking confirmation)
  - Rail Travel - Original ticket, a PDF copy of the ticket, a photograph of the ticket
  - Rail Travel (Oyster Users) - Oyster statement (Transport for London)
- Separate claims forms exist for employee travel, telephone and subsistence and study, courses and conference travel and expenses. It is essential that the correct form is used.
- Expense claims for non-staff also need to be made in accordance with the staff employee expenses policy and non-staff should use the travel, telephone and subsistence claim form.
- The trust no longer requires batch headers BUT claim forms can only be signed by a relevant Trust Budget holder (see list).

This and more information can be found on the Trust's WeShare intranet.

Worktribe Helpdesk

The JRMO Helpdesk, launched in December, logs and monitors all costings and general account-related enquiries received by the JRMO - from both internal and external sources. Each enquiry receives a ticket number which the enquirer can monitor and update accordingly from a provided link. Each ticket is allocated to a named member of JRMO staff. This improves the flow of requests, enabling the team to prioritise requests and users to see how their issues are being progressed.

There is also a short User Guide available online.

To raise a ticket with the JRMO Helpdesk please email the following, depending on the nature of the enquiry:
- Pre-Award Queries: jrmo-helpdesk-preaward@qmul.ac.uk
- Post-Award Medical Queries (Whitechapel): jrmo-helpdesk-smdpostaward@qmul.ac.uk
- Post-Award Non-Medical Queries (Non-Medical): jrmo-helpdesk-nonmedpostaward@qmul.ac.uk
- EU Unit Queries: jrmo-helpdesk-eu@qmul.ac.uk
- Barts Health Queries: jrmo-helpdesk-bartshealth@qmul.ac.uk

Costings for Grant Applications must be submitted through the JRMO e-Costings website.

Please remember not to ‘cc’ the Helpdesk back into correspondence - this will only generate additional cases!

JRMO key performance data published

A new ‘JRMO Key Performance Data’ 1-page document has been placed on our website. It is hoped this will be useful in providing some core information to researchers and others when they are completing application forms – although it will not of course answer every question.
The data can be found on the 'About us' page of the JRMO website.

Our aim is to update this every six months, using data produced in various routine internal reports.

**Barts Health email addresses are changing**

In May, at a date to be specified, all Barts Health email account holders will be migrating to '@nhs.net' format email accounts. This will offer a more secure platform and improved functionality. Quite what a person's email address will be will vary as ‘nhs.net’ accounts cover the whole of England and Wales and not everyone's name is unique. Once we have a specific date for the launch new email addresses will appear on the JRMO's individual contacts page.

**New-look JRMO SOP webpage**

The JRMO’s Standard Operating Procedures (SOP) webpage has been revamped. Rather than dividing SOPs into type, there is now a simpler structure, listing SOPs by number and with SOPS and their associated documents set out on separate pages. Have a look here.

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**Local research**

**Barts Life Sciences spearheads new cutting edge AI research**

CAP-AI, a pioneering research programme in Artificial Intelligence (AI), is underway at Barts Life Sciences, placing healthcare in east London at the forefront of the AI and technology revolution. Comprised of five projects, CAP-AI is London’s first AI-enabling programme focused on stimulating growth in London’s AI cluster using AI and machine learning to deliver innovative healthcare and services to improve outcomes for patients.

An unpredictable and potentially deadly condition, is likely to develop in patients. This would enable patient care to be better managed and aortic ruptures detected ahead of time.

Another project, working with iPlato Healthcare and Queen Mary, aims to use AI to improve the treatment options for the thousands of patients across the UK with musculoskeletal (MSK) problems. Machine learning algorithms will be used within the ‘myGP’ app to offer appropriate alternatives for treatment to improve patient experience, reduce costs and free up GP time.

Future projects, due to start over the coming months, will aim to use AI to improve analysis of cardiac MRI scans, monitor online health boards to improve recruitment of suitable patients for clinical trials and predict vascular complications for patients with diabetes.

Artificial intelligence has the potential to address important health challenges, however, its advances have been limited by the quality and quantity of health data available. CAP-AI's collaborative approach seeks to tackle these challenges head-on by combining technical expertise, healthcare data knowledge and innovation. This should better enable exploration and trialling of AI for a range of
healthcare and research purposes, including detection and diagnosis of disease, management of chronic conditions and improved delivery of health services.

For more information see the Barts Health website here.

People choose healthy and sustainable lunches if given the green light

People are likely to choose healthier and more sustainable canteen meals if they are labelled with a traffic light system, according to research from Queen Mary.

The study, published in the journal Appetite, also shows that in some cases people were even inclined to choose ‘greener’ meals over ‘healthier’ meals.

Researchers led by Dr Magda Osman, lead author of the study from Queen Mary’s School of Biological and Chemical Sciences, looked at the use of traffic lights in a simulated lunchtime canteen set-up, for which the colours red, amber and green were designed to indicate how environmentally-friendly and healthy the meal options were. The idea was that when people see the traffic lights associated with different meals, they will opt for the more environmentally friendly options and healthy options.

Previous studies have examined the impact of traffic light systems on consumer choices for individual food products, but this study considered their use in an everyday simulated lunchtime set-up, much like the kinds of situation where people make actual meal choices. This kind of behavioural intervention designed to improve decisions in our day-to-day lives is commonly known as a ‘nudge’.

What was novel about this study is that it is able to compare the relative impact of traffic lights, as nudges, to support positive changes in behaviour when the traffic lights indicate healthy eating, and when they indicate environmental friendliness.

The findings also show that when accompanied with more information about what the traffic lights refer to, such as the actual values of daily calorie intake and acceptable levels of carbon emissions, this then boosted the positive changes towards healthier and more environmentally friendly meals.

Although presenting two traffic lights, one indicating ‘greener’ meals and the other indicating ‘healthier’ meals, at the same time might overload the consumer, the researchers found that presenting both, compared to just one, actually boosted the positive effect on consumers’ choice.

Surgery using ultrasound energy found to treat high blood pressure

A one-off operation that targets the nerves connected to the kidney has been found to maintain reduced blood pressure in hypertension patients for at least six months, according to the results of a clinical trial led by Prof Melvin Lobo at Barts Health’s Biomedical Research Centre, led in the UK by Queen Mary and Barts Health, supported by the National Institute for Health Research (NIHR).

The study, published in the journal Circulation and presented at the American College of Cardiology Conference in New Orleans, USA, also found that the patients treated with the procedure required fewer blood pressure medications. If confirmed in larger and longer clinical trials, this offers hope to patients with high blood pressure who do not respond to drugs, and are at increased risk of cardiovascular diseases, including stroke and heart attack.
Previous results from the study showed that renal denervation led to a significant and safe blood pressure lowering effect after two months in patients not taking antihypertensive medication.

In this second part of the study, the team investigated 140 patients to see if renal denervation remained effective in patients who had the option of restarting their blood pressure medication if required.

These results point towards an exciting future for this new technology. If long term safety and efficacy are proven in larger trials which are currently underway, we hope that renal denervation therapy could soon be offered as an alternative to many lifelong medications for hypertension.

The study was funded by ReCor Medical, Inc. which manufactures the Paradise® Renal Denervation System used in the study. More information can be found here.

Painkillers taken during pregnancy are not a cause of asthma

A Queen Mary study of almost 500,000 women indicates that taking paracetamol or other painkillers during pregnancy is not responsible for increasing the risk of asthma in children.

The research, which uses prescription data on painkillers, does support earlier findings that women taking paracetamol during pregnancy are more likely to have children who develop asthma. However, it also suggests that the painkillers are not the cause of this increase.

Researchers say their results, published in the European Respiratory Journal, should give women reassurance to take painkillers during pregnancy when they are prescribed by a doctor.

The research was led by Seif Shaheen, Professor of Respiratory Epidemiology, from Queen Mary's Blizard Institute, in collaboration with Professor Catarina Almqvist and colleagues at the Karolinska Institute in Stockholm, Sweden.

The link between paracetamol use during pregnancy and an increase in the risk of asthma in children has been seen in a number of studies in different countries, but until now there has been very little research on the use of other painkillers during pregnancy and the subsequent risk of asthma in children. The normal way to gain certainty would be to carry out a trial where pregnant women are randomly assigned to either take paracetamol or not, but there are obvious ethical problems with such an approach.

To get around this problem, Prof Shaheen and his colleagues studied 492,999 Swedish mothers and their children. They looked at data on prescriptions for different types of painkillers during pregnancy and compared this with rates of asthma diagnosis in the children. They also looked at other data on the mothers, fathers, and any sisters and brothers. They found that children born to mothers who had been prescribed paracetamol during pregnancy did have an increased risk of asthma, but that the risk was similar when women had been prescribed opioids (such as codeine and tramadol) or migraine medication.

For example, the increase in risk for asthma at five years of age was 50 per cent for paracetamol, 42 per cent for codeine and 48 per cent for migraine medication. The team’s interpretation of this is that it’s less likely that drugs are responsible for the instances of asthma. Instead, it seems more likely that another factor that had not been measured was the link, such as the possibility that women who are taking prescribed painkillers are likely to be suffering from chronic pain. If that is the case then the message would be that it is important to manage chronic pain during pregnancy and that women should not avoid prescribing painkillers when they are needed. Similarly, women should feel reassured that infrequent use of paracetamol in pregnancy, which is commonly obtained over the counter and is the recommended painkiller to take in pregnancy, is unlikely to cause asthma in their offspring.
First ever injectable HIV drug is a ‘paradigm shift’ for patients

A new injectable HIV drug could mean that patients no longer have to medicate themselves on a daily basis, according to a clinical trial led by researchers from Queen Mary and Barts Health, sponsored by Viiv healthcare.

The positive results, presented at the 2019 Conference on Retroviruses and Opportunistic Infections in Seattle, Washington on Thursday, shows that a monthly injection of an HIV drug combination is as effective as the standard daily oral treatment for suppressing the HIV virus, and a preferable choice in 90% of patients surveyed. Prof Chloe Orkin of Barts Health said that this is the first ever injectable treatment for HIV, which reduces therapy days from 365 to 12 per year. It is a paradigm shift for people living with HIV, as it finally liberates them from the cycle of a daily pill, which has been a defining characteristic of HIV therapy for several decades.

The FLAIR (First Long-Acting Injectable Regimen) trial, sponsored by Viiv Healthcare, compared a new long-acting drug combination injected every four weeks, with the standard daily oral treatment which contains a combination of three drugs. Suppression rates of HIV at Week 48 of the trial were similarly high in both treatments (over 93%). Patient preference data at Week 48 showed that 9 out of 10 patients preferred the long-acting injectable.

If approved, this two-drug regimen would give people living with HIV one month between each dose of antiretroviral therapy, changing HIV treatment from 365 dosing days per year, to just 12.

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Events

Research Matters: Changing lives in East London and beyond

Barts Health will be hosting its annual Research Matters forum at The Great Hall, St. Bartholomew’s Hospital on Wednesday 22 May, 5.30 to 8.30pm. The event will showcase some of the ways in which we are improving Barts Health patients’ experiences of taking part in research and making research more accessible to our patients.

For more information see the article in ‘Need to Know’ above, or visit the Barts Health website - here.

NELFT Annual Research & Development Conference

NELFT NHS Foundation Trust has announced that its 18th Annual Research & Development Conference will take place on Tuesday 11 June 2019. They welcome everyone, from all professional backgrounds, and the day is designed both for those who are actively involved in research and for those interested in the area. The Open Day will be held at CEME Conference Centre, Rainham, Essex, RM13 8EU from 9:30am to 4:30pm.

For more information follow this link to the NELFT website.

If you would like to take part in the NELFT research poster competition, or if you require any further information, please contact R&D@nelft.nhs.uk
CREATE Lab Launch Symposium

The CREATE Lab is a new cross-faculty facility dedicated to ‘biofabrication’ and the development of next-generation engineered tissues. The facility is now fully open and available to all Queen Mary researchers.

To celebrate the official launch, we will be hosting an afternoon symposium on 3D Bioprinting on Wednesday 10 April. The event will include two keynote seminars from leaders in the field, Prof. Daniel Kelly from Trinity College Dublin and Prof. Jürgen Groll from the University of Würzburg. In addition, there will several short talks from QMUL students and a drinks reception to follow.

Registration for the event is free for all Queen Mary staff, students, and guests.

JRMO drop-in sessions

The JRMO runs monthly research advice drop-in sessions on the second Wednesday of every month. There is no need to book - please just turn up. We will be happy to assist with any research support topics including:

- Project Set-up
- Research Governance
- Finance
- Costing and contracts
- Patient and public involvement

All sessions take place from 10 am to 12 noon. The next planned dates are 10 April 2019

Venue: JRMO meeting room, Lower Ground Floor, QM Innovation Centre, 5 Walden Street, Whitechapel. More details can be found on the JRMO website.

New JRMO Trial Co-ordination Course at Whitechapel Campus

The JRMO is pleased to announce three new one day courses on trial coordination. The courses are aimed at staff working on Barts Health and Queen Mary sponsored studies (of any type), who are new to coordination or who wish to broaden or strengthen their knowledge.

The courses are designed to run once a month from April to June, with one full day per month. It is expected that participants will attend all three days, but attendance to individuals days is permitted.

- **Day 1 Study Set up** – This session will focus on the early stages of setting up a research study, from developing a study idea through to gaining the necessary approvals to start. Topics include the documents that are required and why they are required; the research pathway and how to navigate it; submitting a high-quality project for ethical approval.

- **Day 2 Managing a study** – This session aims to discuss the importance of managing a study effectively and the various aspects in which can help ensure the smooth and successful running of a study. Topics include site selection, essential documentation, monitoring and risk assessment, and recruitment strategies.

- **Day 3 Data management and databases**
  - This session will focus on the importance of data integrity and how to maintain robust research data. Topics covered include – methods of data collection and storage; developing and implementing case report forms and databases; ongoing data management during and at the end of a trial.

Courses are limited to 20 places and are currently available on the QMUL CAPD booking system. Please click here to book your place.

Other JRMO core courses available are:

- GCP full course
- GCP refresher
- GCP for Labs
- Good practice for research studies
- Good practice for interventional studies
- Planning and managing your ethically approved research project

For more information on dates and instructions on how to book your places please see the JRMO website or email research.governance@qmul.ac.uk
HRA bite-size eLearning modules

The Health Research Authority (HRA) has launched three bite-size eLearning modules aimed at students and their academic supervisors.

The free modules take around five to 10 minutes to complete and can be accessed directly via the HRA’s recently revised student research webpage.

Jen Harrison, HRA Approval Change Manager, said: “By improving the information we provide to student researchers, who may be new to research and the processes to follow, we can support them to avoid common errors and navigate the requirements to undertake research in NHS.”

You can find the resources and more information on the HRA website.

SBK Healthcare Courses

- **Costing NHS Commercial Clinical Research**
  - Enhance budgeting skills, improve accuracy and build costing awareness, Wednesday 19 June 2019, Holiday Inn Manchester City Centre, Manchester.

- **Clinical Research Contracts in Practice**
  - Practical insight and key legal advice on how to ensure watertight, robust agreements, Thursday 20 June 2019, Holiday Inn Manchester City Centre, Manchester.

- **Introduction to Effective Clinical Research Management**
  - This interactive workshop will be led by Karl Ward, Lead Nurse - Research at Leeds Teaching Hospitals NHS Trust who has been described as a “fantastic facilitator” who “makes everything interesting”. Tuesday 25 June 2019, Birmingham City Football Ground, Birmingham.

RDS London drop-in clinics

RDS London holds regular next drop-in clinics for researchers preparing applications to NIHR Applied Health Streams (RfPB, EME, HTA, Programme Grants, Programme Development Grants and Fellowships) or medical charities. Drop-ins take place in East London on the last Friday of the month. RDS London can support researchers at all stages of preparing grant applications. Advice and guidance can be provided on study design, identifying a research team and targeting an appropriate funding stream.

The next East London clinic will be held on Fridays 30 November, 12 – 2 pm. There is no need to book, just turn up on the day: Room G15, Yvonne Carter Building, 58 Turner Street, London, E1 2AD (reception: 020 7882 5882). For more information please click here.

How to include PPI in funding applications

The NIHR has launched a new interactive online course for public reviewers, researchers and research managers to help boost knowledge of patient and public involvement. Module three is particularly useful for researchers as it provides guidance on aspects to include in research funding applications, and how these are assessed.

NIHR funding deadlines

- **Invention for Innovation (i4i) Product Development Awards - Call 18**
  - Potential advert date: 24 April 2019
  - Applications are invited for the NIHR Invention for Innovation (i4i) Product Development Awards. These awards comprise both early and late stages of R&D including the clinical development of laboratory-validated technologies or interventions.

- **19/05 - Health Services & Delivery Research Programme (researcher-led evidence synthesis)**
  - Closing date: 25 April 2019
  - The Health Services and Delivery Research (HS&DR) Programme is accepting stage 2 evidence synthesis applications to their researcher-led workstream.
- **19/06 - Health Services & Delivery Research Programme (standard researcher-led)**
  Closing date: 25 April 2019
  The Health Services and Delivery Research (HS&DR) Programme are accepting stage 1 applications to their researcher-led workstream.

- **18/164 Tobacco cessation, control and harm reduction interventions (HS&DR Programme)**
  Closing date: 9 May 2019
  The Health Services and Delivery Research (HS&DR) Programme are accepting stage 1 applications to their commissioned workstream.

- **19/14 Community health and care services to support people with learning disabilities and behaviour that challenges, and their families and carers**
  Closing date: 9 May 2019
  The Health Services and Delivery Research (HS&DR) Programme are accepting stage 1 applications to their commissioned workstream.

- **19/13 Support interventions for carers**
  Closing date: 9 May 2019
  The Health Services and Delivery Research (HS&DR) Programme are accepting stage 1 applications to their commissioned workstream.

- **19/10 Health Technology Assessment Programme - researcher-led (evidence synthesis)**
  Closing date: 15 May 2019
  The Health Technology Assessment Programme is accepting stage 1 applications to their commissioned workstream.

- **19/11 Health Technology Assessment Programme - researcher-led (primary research)**
  Closing date: 15 May 2019
  The Health Technology Assessment Programme is accepting stage 1 applications to their researcher-led workstream.

- **18/166 Tobacco cessation, control and harm reduction interventions (HTA Programme)**
  Closing date: 15 May 2019
  The Health Technology Assessment Programme is accepting stage 1 applications for this primary research topic.

For further information on these and other grants available from the NIHR please see the NIHR website: [http://www.nihr.ac.uk/funding-and-support/current-funding-opportunities/](http://www.nihr.ac.uk/funding-and-support/current-funding-opportunities/)

To subscribe to the NIHR’s themed call mailing list please [click here](http://www.nihr.ac.uk/funding-and-support/current-funding-opportunities/).

**Fellowships**

**NIHR Fellowships**

The NIHR’s Integrated Clinical Academic Programme provides personal research training awards for non-medical healthcare professionals who wish to develop careers that combine clinical research and research leadership within continued clinical practice and clinical development. Competitions for pre-doctoral, doctoral and post-doctoral awards are now open until April 2019.

Five levels of award are available, each requiring the support of clinical and academic host organisations, which together form a career pathway for aspiring and developing non-medical clinical academics:

(i) **Internships**
(ii) **Pre-doctoral Clinical Academic Fellowship** - currently open for applications
(iii) **Clinical Doctoral Research Fellowship** - currently open for applications
(iv) **Clinical Lectureship** - currently open for applications
(v) **Senior Clinical Lectureship** - currently open for applications

Doctoral and Post-Doctoral award holders are also eligible for ICA Programme-funded mentorship support through the ICA Mentorship scheme. More information can be found on the NIHR website here.
British Academy/Wolfson Fellowships

The British Academy is now inviting applications to the British Academy / Wolfson Fellowships. The application form is available online on the Flexi-Grant Application system. The deadline for applications is **Friday 15 May 2019, 5pm UK time**.

These fellowships provide early-career academics with the most valuable commodity – time – by releasing them from some of their administration and teaching duties to pursue their research, along with funding for public engagement and travel. Award duration is three years. Applicants must be resident in the United Kingdom, within 5 years of the award of their doctorate, and have a permanent post at a UK university or other research institution (including museums and galleries). The grant maximum is £130,000 across three years.

More information can be found on the British Academy website here.

British Academy ‘Borders’ funding

The British Academy is inviting proposals from UK-based researchers in the humanities and social sciences – active at any career stage – looking to develop and lead interdisciplinary projects on questions related to borders under our programme on The Humanities and Social Sciences Tackling the UK’s International Challenges. The aim is to support research projects wishing to explore varying understandings of borders and to shape thinking about both internal dynamics within borders and cross-border issues that have global significance. Borders are defined for this purpose in as broad a sense as possible, encompassing not only traditional borders that demarcate territory but also any boundary – whether articulated or hidden, formal or informal – drawn around or between peoples and experiences.

The lead applicant must be based at an eligible UK university or research institute, and be of postdoctoral or above status (or have equivalent research experience). Collaboration between researchers in different disciplines and institutions is particularly encouraged.

The deadline for submissions and UK institutional approval is **15 May 2019 at 17.00 (UK time)**.

For more information visit the British Academy here.

Innovative Medicines Initiative

The Innovative Medicines Initiative (IMI) is Europe’s largest public-private initiative between the EU and the European Federation of Pharmaceutical Industries and Associations (EFPIA), aiming to speed up the development of better and safer medicines for patients. IMI supports collaborative European research projects to support pharmaceutical innovation in Europe.

The second IMI programme (IMI2) will deliver tools, methods and prevention and treatment options (directly or indirectly) that will progress the vision of personalised medicine and prevention. It is not purely focused on the development of new medicines, but on solutions that provide a holistic, personalised healthcare package. The Strategic Research Agenda for IMI 2 is set to achieve the vision of delivering ‘the right prevention and treatment to the right patient at the right time’ for priority diseases.

More information on the topics is available on the IMI call page.

The deadline for stage 2 calls is **15 May 2019**.

Research professional

Research Professional (formerly Research Research) now offers an easy to use sign up: http://www.researchprofessional.com/

Funding information: Further funding information can be found on the Research Professional website – to access click here (account and password required).