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Barts Health top in UK for Commercial Research

Early indications are that, for the third year running, Barts Health will come first in the NIHR’s National League tables for Commercial Research.

A full press release from our Clinical Network is expected early next month.

Full details will be published on the NIHR website here.

Launch of new research costing tool

The NIHR has announced the launch of its new web-based Interactive Costing Tool (iCT) - which supersedes the Excel-based version of the industry costing templates.

The new online costing tool, created by Barts Heath’s former Costings and Contracts Manager Phillip Good, enables faster costing and contracting with the NHS as part of the study set-up phase. This new system is now available for use by representatives from the life sciences industry and the NHS as a module within the NIHR’s Central Portfolio Management System (CPMS).

The CPMS-based system brings major improvements on the previous Excel version of the costing template, including:

- **User interface and usability**: With a simple layout, the new iCT is a fully automated costing solution - accessible from the NIHR Central Portfolio Management System (CPMS) and no longer involving any manual steps from users;
- **Reliability**: Updates or changes to the new system are now a seamless process, improving system reliability;
- **Compatibility**: The new iCT works on any computer - overcoming software compatibility issues inherent to the Excel-based version of the tool;
- **Improved audit functionality**: The new app contains a central log of all adjustments made as part of the contract negotiation process - enabling NIHR to further streamline processes by identifying any issues or delays in commercial study costing; and
- **Visibility**: The new iCT enables resource requirements determined at a site level to be shared with others involved in the study directly within the system, avoiding duplication of effort.

The iCT identifies resources required to deliver each specific study in the NHS (including NHS Trusts, primary care organisations and specialist research locations like Clinical Research Facilities) and applies a standardised costing methodology to provide a price estimate for the commercial company. A negotiation will then follow with each participating site until parties reach an agreement, which is then included in the site contract to undertake the study.

Use of the iCT underpins rollout of the single contract review process for commercial contract research. The first phase of implementation is now underway, with multiple volunteer national coordinators from participating sites conducting an enhanced validation on a single study. You can find out more about this on the NIHR website.

Professor Chris Whitty is the new Chief Medical Officer

The Government has announced that, as of October 2019, Prof Chris Witty will be the new Chief Medical Officer (CMO) at the Department of Health and Social Care (DHSC) and the Government’s Chief Medical Adviser.
Health Secretary Matt Hancock has said that Prof Whitty will bring both his extensive clinical experience and a passion for keeping the nation healthy to the role. Like his predecessor as CMO, Dame Sally Davies, he will continue to lead the NIHR in addition to this new role.

Dame Sally, who has led the NIHR since its creation in 2004 and was appointed CMO in 2011, will be taking up a new role as Master of Trinity College Cambridge from October. More information on this announcement can be found on the NIHR website here.

Celebrating International Clinical Trials Day 2019

For this year’s annual International Clinical Trials Day celebrations, the Research Engagement and Diffusion team co-ordinated a programme of researcher-led engagement activities across the Trust and hosted the annual Research Matters forum in The Great Hall at St Bartholomew’s Hospital on 22 May.

Among researcher activities taking place this year were the Barts Health Clinical Research Facility (BHCRF) open days at new Clinical Research Centre (CRC) at The Royal London Hospital and the Clinical Research Unit (CRU) at Whipps Cross Hospital. Staff were joined by the Diabetes research group and an enthusiastic Patient Research Champion (PRC) at the Royal London and gastroenterology researchers at Whipps Cross. The team also hosted information stands at both hospitals to engage staff and patients in their work and to promote clinical research open days.

Specific activities included:

- Tours of facilities with lab demonstrations illustrating what happens with a patient’s blood sample using a mixture of vegetable oil and red food dye. Spinning this mixture down with a centrifuge works remarkably well to illustrate how plasma (or serum) separates out from the red blood cells at the base of the tube;
- Short presentations on the history of clinical research and current studies within

New NIHR centre for patient and public involvement coming

Following the completion of a recent procurement process, LGC has been chosen by the Department of Health and Social Care (DHSC) to host, from April 2020, the NIHR centre to coordinate patient and public involvement, participation and engagement in research and NIHR research dissemination activity. The centre will be hosted by LGC for up to five years.

Over its 175 years of history, LGC has evolved from its roots as a UK government department to be a global life science company. As a trusted supplier to the UK government, LGC has been responsible for delivering the NIHR Central Commissioning Facility (CCF) and NIHR Office for Clinical Research Infrastructure (NOCRI) since 2006 and 2009 respectively. Both CCF and NOCRI have extensive experience of collaborating with patients and the public.

Building on the expertise and achievements of INVOLVE and the NIHR Dissemination Centre, LGC will focus on furthering stakeholder engagement, broadening the diversity of voices heard by NIHR in all of its activities, the use of alternative formats for dissemination products and making it easier for different stakeholder groups to access NIHR funded research results.

More information on this can be found on the NIHR website here and please contact kay.pattison@dhsc.gov.uk if you have any questions about the procurement process.
the BHCRF, diabetes and gastroenterology services; and

- Roundtable discussions with clinical trial participants and members of the public exploring their experience of clinical research and what’s important to them when taking part in research.

The BHCRF open days attracted over 60 visitors including trial participants, members of the public and staff – all engaged in lively debate and discussions about clinical research and how to improve our patients’ experiences.

More information on the work of the Barts Health Engagement and Diffusion Team can be found here.

9 out of 10 adults in North Thames have ‘good’ or ‘great’ research experience

More than nine out of 10 adults had at least a good experience of taking part in NHS research in the North Thames region, new figures say. The 2018/19 CRN North Thames Patient Research Experience Survey (PRES) findings show that 91% of the 1337 adult responders strongly agreed or agreed they had a good experience of taking part in research – a 2% increase on 2017/18. 90% said they would agree to take part in research again in the future, compared to 81% in the previous survey.

The annual PRES is designed to find out how patients feel about participating in clinical research studies, and NHS trusts and GP surgeries use the results to improve how clinical trials are delivered.

There were 14 questions for respondents to answer in the PRES, using paper or online surveys. Face-to-face contact with doctors or nurses was the most popular choice (27%) when it came to the public being told about the benefits of taking part in research. The second most popular method, at 17%, was videos seen on a hospital or GP screen.

Overall, 81% of respondents found out about the research study they were on thanks to their doctor or nurse, and 91% of people knew who to contact if they had a question or concern throughout their participation in the study they were enrolled on.

To see the full PRES report for 2018/19 click here.

Making it easier to ‘Be part of research’

The Be Part of Research website is now live.

The site makes it easy for the public to participate in research and build on the success of the UK Clinical Trials Gateway (UKCTG). It has simplified navigation, improved search, the ability to feedback on study information, and lists studies for healthy volunteers. This is a useful resource and provides answers to all those keen to become involved:

- What is research?
- What are the benefits of research?
- What does taking part involve?
- What if I don’t have a condition?
- Are there other ways to help?
- How can I get my study on this site?

To find out more visit the Be Part of Research website here
Patient Research Champion update

Engagement and Diffusion currently have two Patient Research Champions waiting to start volunteering with our research staff:

- **Vochelle**, who is studying for a BTEC in Applied Science, has recently registered with the Trust and is keen to undertake admin tasks, meet and greet patients, conduct surveys and join patient panels. *Site preference: Newham and The Royal London. Availability: Friday afternoons*

- **Aishah** has a biochemistry degree and is interested in volunteering for our research staff and patients. Aishah has previously completed meet and greet sessions at Whipps Cross hospital but is happy to help out in other ways such as undertaking administrative tasks. *Site preference: Whipps Cross and The Royal London. Availability: Thursday 9am-1pm*

If you’d like to know more about how a PRC can add value to your team or have any questions about how the PRC role works, come and talk to the team. New PRCs register every month across all Barts Health sites, all keen to start volunteering but we need more placements!

For more information contact the Engagement and Diffusion team: patientsinresearch.bartshealth@nhs.net or visit their JRMO webpage where you will find more information about PRCs, including the PRC handbook for researchers and PRC request form.

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New process for inclusion of non-NHS/HSC Sites in research

From 5 June 2019, it has no longer been necessary for research applications involving non-NHS Sites to complete a non-NHS Site Specific Information form in IRAS and to submit this to the Research Ethics Committee. Assessment will continue to be made in relation to the suitability of the site and Principal Investigator but that will be undertaken in a more proportionate way based on the type of study.

Guidance will be available in IRAS to support this process and an updated version of the RES Standard Operating Procedure has been published. Queries relating to these changes should be directed to hra.queries@nhs.net.

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Direct Care Teams

Barts Health has created a working group to establish guidelines for what constitutes a member of the Direct Care Team. The current position is that this guidance is:

(i) Staff must have an honorary contract with Barts Health;
(ii) Line manager determines the level of Barts Health stat man training that must be completed commensurate to the type of access required with Good Clinical Practice (GCP) training as a minimum;
(iii) Oversight by named Barts Health line manager to ensure all appropriate training/supervision is in place to deliver the role;
(iv) An appropriate level of competency as determined by the line manager; and
(v) Line manager’s confirmation that the individual meets the above criteria

The group has agreed that this working group and indeed the JRMO cannot ‘police’ this but researchers will be asked to abide by the policy and be able at any point to justify/confirm that any individual who has access to identifiable patient information prior to consent can meet the above high-level guidance.

The Information Governance Review in 2013 by the National Data Guardian stated that ‘direct care is provided by health and social care staff working in ‘care teams’, which may include doctors, nurses and a wide range of staff on regulated professional registers, including social workers...Care teams may also contain members of staff, who are not registered with a regulatory authority, but who may need access to a proportion of someone’s personal data to provide care safely’.

To discuss this further please contact Dr Mays Jawad, R&D Governance Operations Manager in the JRMO: m.jawad@qmul.ac.uk

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William Harvey Day poster competition opens

William Harvey Day 2019 will be held on Wednesday 16 October 2019 this year at the West Smithfield campus. This flagship event gives staff and students the opportunity to hear from internal speakers about the work being undertaken as well as keynotes from experts external to the Faculty.
As per usual there is a Poster Competition open to all students and early career researchers. Please submit your poster abstract using the themes of ‘Discovery Science’, ‘Translational Medicine’, and ‘Population Health’.

Poster presentations will be organised within these themes so that different areas of the School are brought together. All abstracts submissions must include a lay abstract, to ensure your research is accessible to as wide an audience as possible, the impact of the research, either already existing outcomes or the plans to ensure an effective translation of the work into tangible benefits and the scientific abstract.

There will be a prize for the best poster in each of the three poster themes, a prize for Research Impact and a further prize for the best two research image/photo within a poster. The deadline for posters is Monday 22 July 2019, but submission before that date is encouraged. For more contact whd@qmul.ac.uk.

Key workers for Research Governance

Assigned key workers are now established to support researchers with their study set up, sponsorships and amendments. They are:

<table>
<thead>
<tr>
<th>NIHR CRN Division</th>
<th>Speciality</th>
<th>Key Worker</th>
</tr>
</thead>
<tbody>
<tr>
<td>Division 1</td>
<td>Cancer</td>
<td>Sandra Burke (also CSS)</td>
</tr>
<tr>
<td>Division 2</td>
<td>Diabetes, Metabolic &amp; Endocrine Disorders, Renal Disorders, Stroke, Cardiovascular Disease</td>
<td>Marria Khan &amp; Nadia Rahman</td>
</tr>
<tr>
<td>Division 3</td>
<td>Children, Haematology, Genetics, Reproductive Health &amp; Childbirth</td>
<td>Safia Ornelas</td>
</tr>
<tr>
<td>Division 4</td>
<td>Dementias and Neurodegeneration, Neurological Disorders, Mental Health</td>
<td>Lilima Begum &amp; Raheemah Akhtar</td>
</tr>
<tr>
<td>Division 5</td>
<td>Primary Care, Ageing, Health Services &amp; Delivery Research, Oral &amp; Dental Health, Public Health, Dermatology, Musculoskeletal Disorders, Palliative Care</td>
<td>Jack Biddle</td>
</tr>
<tr>
<td>Division 6</td>
<td>Anaesthesia, Peri-operative Medicine &amp; Pain Management, Critical Care, Injuries and Emergencies, Surgery, Ear, Nose and Throat, Infectious Diseases &amp; Microbiology, Ophthalmology, Respiratory Disorders, Gastroenterology, Hepatology</td>
<td>Safia Ornelas</td>
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Accessing Worktribe off campus? Not an issue anymore!

Having reviewed feedback received from researchers the Worktribe team are delighted to announce a new Worktribe LIVE Remote access which should improve customer experience.

There is now a 2-stage process to set up non-Queen Mary IT equipment to facilitate access to Worktribe:

**Stage 1**
To register please visit copy and paste “sspr.qmul.ac.uk” into your browser of choice and follow the necessary online prompts:
(i) Sign in using your Queen Mary ID abc123@qmul.ac.uk
(ii) Enter your Queen Mary password
(iii) Click on “Add security info” – we suggest that you input both mobile and email address
(iv) Log off once completed

Once mobile numbers and email addresses have been successfully registered, that is the SSPR registration done. You will not need to
repeat. For a video tutorial on this please click here.

Stage 2

The second part is called Multi-Factor Authentication (MFA) i.e. an app that will generate a unique code for you to enter going forward each time you wish to log in for a new session. For this, you will need a mobile phone or tablet and a laptop or computer that is not on the QM network.

(i) On your mobile or tablet download the Microsoft Authenticator app – available on Play store or iOS.
(ii) On the computer/laptop AWAY from the QMUL network please click here.
(iii) Select the option “Set it up now”
(iv) Choose for your second factor of authentication, the mobile authenticator app with push notifications
(v) On your mobile phone open up the Authenticator app
   (a) if prompted select “Add Account”
   (b) Select Work/School account
(vi) The app will switch to the QR code scanning mode (your camera will be enabled – fancy), please scan the code displayed in your browser (as if you are taking a picture of your screen)
   (a) Please “Approve” sign in and or notification on the app
   (b) You will then be asked to provide an alternative phone number for verification in case you lose access to the app

For more detailed guidance please visit the Queen Mary ITS website. If you have any issues with this contact the ITS Service Desk on 8888 or email helpdesk@qmul.ac.uk

New JRMO SOPs online

Since the last Research News Bulletin the JRMO has released the following new or revised Standard Operating Procedures (SOPs) and associated documents:

SOP 10 - Confirmation of capacity and capability
- Associated Document 1 - JRMO hosted studies submission checklist
- Associated Document 2 - Initial contact email
- Associated Document 3 - Confirmation of c&c review template
- Associated Document 4 - Confirmation of c&c email template

SOP 18a - Project closure: sponsored regulated studies
- Associated Document 1 - EudraCT result flowchart
- Associated Document 2 - EudraCT result upload flow chart
- Associated Document 3 - EudraCT upload guidance

SOP 29 - Document control and creating
- Associated Document 1 - JRMO SOP template

SOP 18c - Project Closure: Sponsored interventional and research studies
- Associated Document 1 - JRMO end of study notification form: sponsored interventional and research studies

SOP 34b - JRMO staff training and induction
- SOP 34a&b Associated Document 1 - SOP reading log
- SOP 34b Associated Document 2 - New starter induction checklist
- SOP 34b Associated Document 3 - JRMO Staff Handbook
- SOP 34b Associated Document 4 - Training Log
- SOP 34b Associated Document 5 - GCP team training log
- SOP 34b Associated Document 6 - Leavers’ checklist
- SOP 34b Appendix A - JRMO training record contents page

These and all other current JRMO SOPs are available to download from the JRMO website.
Clinical calculator to spare patients from unnecessary therapy

New research led by Dr Ivana Sestak, from Queen Mary’s Wolfson Institute of Preventive Medicine, working with The Royal Marsden NHS Foundation Trust, confirms that an algorithm, called CTS5, accurately identifies patients who are at low risk of their breast cancer returning at a later stage.

This means some patients may need to take hormone therapy for 5 years, rather than 10, which could have a huge impact both psychologically and physically. Most breast cancer patients will be prescribed at least five years of hormone therapy after having standard treatment (surgery, chemotherapy and/or radiotherapy) to lower the risk of cancer returning. After 5 years, oncologists and patients must decide whether extending this type of therapy is worthwhile and appropriate. Hormone therapy can have significant side effects for some patients, including weakness of bone, blood clots, exacerbation of menopausal symptoms and the psychological burden of continuous treatment.

CTS5 was published in 2018, in a study that confirmed its prognostic value, but it had yet to be tested in a ‘real world’ setting and on both pre-menopausal and postmenopausal women.

This study confirms that CTS5 is effective at predicting relapse of breast cancer after 5 years. The CTS5 test was able to categorise a group of 2428 female breast cancer patients into three clear risk groups: high, medium and low. Importantly 41% of the postmenopausal women – 700 patients – were found to be at a significantly low risk of their breast cancer returning five to 10 years after their initial five-year hormone therapy treatment. This risk is so low, researchers concluded; it would not warrant extending endocrine therapy to ten years. In contrast to the previously published tests on CTS5, this new analysis took into account pre-menopausal female patients as well as post.

For more information see the Clinical validity of CTS5 for estimating the risk of late recurrence in unselected, non-trial patients with early ER+ breast cancer was presented at the 2019 ASCO Annual Meeting on 2 June 2019.

London heart disease patients take part in clinical trial to test alternative to statins

A clinical trial, coordinated by researchers from Queen Mary University of London, is currently recruiting patients in London to see whether a new cholesterol-lowering drug could save lives in people who are intolerant to statins.

Cardiovascular disease is the number one cause of death globally. High cholesterol is a major risk factor, and statins have been crucial in lowering cholesterol levels in many patients. However, some patients are intolerant to statins, causing symptoms such as muscle ache and pains, and need new therapeutic options to lower their cholesterol.

Currently, there are very few approved drugs that demonstrate cardiovascular risk reduction in these patients and these drugs are very expensive and not available to the majority of patients. The CLEAR Outcomes Study is recruiting 14,000 patients worldwide from 1000 sites located in over 30 countries, including London, to see if a new drug called Bempedoic acid reduces the risk of heart attacks and strokes in statin-intolerant patients who are at high risk for cardiovascular disease.
Lead researcher Dr Manish Saxena from Queen Mary’s William Harvey Research Institute has said that statins are effective in lowering bad cholesterol in the body and prevent heart attacks and strokes but, unfortunately, a small number of patients are unable to tolerate statins due to side effects such as muscle aches and pains. This new drug called Bempedoic Acid is well-tolerated in these patients and previous studies have shown it to be safe and efficacious in lowering bad cholesterol. This long term study is investigating its effect on preventing heart attacks and strokes in high-risk patients. In the future, Bempedoic Acid could be a safe alternative treatment option for lowering cholesterol in patients who do not tolerate statins.

People interested in taking part in the study can get in touch with the team on 020 7882 5662 or whri-clinical-trials@qmul.ac.uk

First patient recruited for new ITP study

The North Thames Clinical Research Network leads, Prof Margaret Johnson and Prof David Warner, have written to congratulate Dr Vickie McDonald on the recruitment of the first patient to this major study.

Dr McDonald of Barts Health is leading the team that will look into inhibiting Immune thrombocytopenia (ITP). ITP is a type of thrombocytopenic purpura in which there is a low platelet count (thrombocytopenia) coupled with normal bone marrow and the absence of other causes of thrombocytopenia. It causes a characteristic purpuric rash and an increased tendency to bleed. Two distinct clinical syndromes manifest as an acute condition in children and a chronic condition in adults. The acute form often follows an infection and has a spontaneous resolution within two months. Chronic immune thrombocytopenia persists longer than six months with a specific cause being unknown.

BTK inhibitors have been used successfully in other clinical areas but this is the first time one has been trialled in relation to ITP. We wish the team well on recruiting further patients and taking this research forth.

Blood cancer’s Achilles’ heel opens the door for new treatments

New findings about a fatal form of blood cancer could aid the development of new drugs with significantly less harmful side effects than existing chemotherapy.

The discovery by researchers from Queen Mary could lead to novel treatments that efficiently eliminate blood cancer cells in acute myeloid leukaemia (AML), without harming healthy blood cells.

Researchers have discovered how a protein in the body plays a key role in AML – an aggressive cancer of white blood cells with very poor survival rates. The study showed that the protein, known as YTHDF2, is needed to trigger and sustain the disease, but is not needed for healthy cells to function. This identifies YTHDF2 as a promising drug target for leukaemia.

Further tests enabled scientists to determine the biological pathway by which interfering with the function of YTHDF2 selectively kills blood cancer cells and importantly, they also showed that the protein is not needed to support the function of healthy blood stem cells, which are responsible for the production of all normal blood cells. In fact, blood stem cells were even more active in the absence of YTHDF2. For more information see the research paper published in Cell Stem Cell.
The Queen honours Queen Mary staff

Prof Mark Caulfield, Professor of Clinical Pharmacology at William Harvey Research Institute and the interim Chief Executive at Genomics England, has been awarded a knighthood in the Queen’s Birthday Honours List.

Since 2013 Prof Caulfield has been instrumental in delivering the world-leading 100,000 Genomes Project, which hit its target of sequencing 100,000 whole genomes in 2018 and has already delivered life-changing results for patients. This NHS transformation programme used whole genome sequencing to bring new diagnoses to people with rare diseases and help choose cancer therapies.

Also receiving an honour from the Queen is Graham MacGregor, Professor of Cardiovascular Medicine at Queen Mary’s Wolfson Institute of Preventive Medicine, who has been awarded Commander of the Order of the British Empire (CBE) for services to Cardiovascular Disease. To read the full article please click here.

Materials science research project wins national Engineering Excellence Award

A Queen Mary research project has won a national Engineering Excellence Award at Innovate UK’s Knowledge Transfer Partnership (KTP) Best of the Best awards.

The award was presented at The Royal Society of Chemistry in London to LMK Thermosafe, which entered into a KTP with Queen Mary and KTP associate Dr Harshit Porwal to develop novel conductive polymer composites.

The project was supervised by Dr Emiliano Bilotti and Professor James Busfield from the School of Engineering and Materials Science and led to two patents, several high impact journal papers including one in Advanced Functional Materials. The project has also been supported by two further completed PhD students.

Safe electrical heaters made from the materials developed during the KTP are in development. For more information on this please see the Queen Mary website here.

Best of clinical research to be highlighted at upcoming conference

Registration is now open for the Barts Health Research Day which will highlight the best of clinical research taking place across our hospitals.

The research day will take place on 12 September 2019 in the Robin Brook Education Centre and is hosted by the Barts Health Clinical Board of Surgery.
All are invited to attend and registration is free for staff. To register to attend, please visit the Eventbrite webpage here.

The Barts Health NHS Trust’s Clinical Board of Surgery is one of the largest clinical boards incorporating diverse, but related clinical specialties such as interventional radiology, pain, anaesthesia, critical care, dental/OMFS, hepatobiliary-pancreatic, upper gastrointestinal, colorectal, breast, general, vascular, orthopaedics, ENT, gynae-oncology, ophthalmology, plastic and urology.

Research activities within the surgical broad focus on virtually all aspects of medicine and research active clinicians within the Board are working in areas of basic sciences, translational medicine, clinical trials, epidemiological research and quality and process related research. Individual investigators are performing world-leading research, including leadership of national and international multi-centre randomised studies.

For more information visit the Barts Health website here.

**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 July, 14 August and 11 September 2019. **Venue:** JRMO meeting room, Lower Ground Floor, QM Innovation Centre, 5 Walden Street, Whitechapel. More details can be found on the JRMO website.

**Training**

**JRMO training**

The JRMO runs a wide range of in-house courses on research best practice. There is also a list of other courses we endorse available on our website.

Please note that it is the policy of both Queen Mary and Barts Health that all researchers conducting research at our sites must attend appropriate training. It is mandated that all researchers of MHRA regulated trials must complete a GCP course and refresh it every 2 years. The same is advised as the best practice for all other researchers.

For Chief Investigators and their team leads our substantive and refresher courses are mandatory; for all other sponsored research the please see the sponsor’s criteria for what training is necessary, and for site delivery staff the NIHR training programme is generally suitable.

In addition, the JRMO has designed a 3-day course aimed at helping new investigators and research managers/ coordinators navigate through the life cycle of a study. The course provides training on how to cost up a study, who/where to go to seek funding, how to apply for sponsorship and local approvals to start recruitment, how to set up the trial master file to managing the study throughout its lifecycle, accessing budgets and supporting invoices. For more information on all JRMO training, including how to book, please see the Training page on the JRMO website.

**Free online course 'Improving healthcare through clinical research'**

Everything in healthcare has to be discovered and thoroughly tested before it can be put into practice.

Future Learn has developed a course that helps attendees explore clinical research, its challenges and its huge benefits to modern healthcare. Attendees will work through case studies and examine how research contributes to the treatment of major diseases, such as cancer and dementia, examining the process of conducting research and the ethical questions raised. You will learn how members of a research team, academics and
participants in clinical research all contribute to this process of discovery. To read more visit the Future Learn website here.

RDS London drop-in clinics

RDS London holds regular next drop-in clinics for researchers preparing applications to NIHR Applied Health Streams (RIPB, 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 28 June, 26 July and 30 August, 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.

Involving young people in research

The Centre for Public Engagement is running a new master class on ‘Involving Children and Young People in Research’ which is aimed at researchers who want to learn more about involving children and young people in health and social care research. This will be at St George’s Hospital, Tooting, London on Tuesday 16 July from 1.30pm - 4.30pm.

Places are limited, so for further information and how to book please click here.

Research funding

NIHR funding deadlines

- **Fourth call for research to improve adolescent health in low and middle-income countries** Closing date: 16 July 2019 - Applications are invited to this new NIHR/MRC joint initiative into adolescent health in LMICs
- **R2HC Funding call** Closing date: 16 July 2019 - Applications are invited to this new NIHR/ELRHA/Wellcome joint initiative into public health interventions in humanitarian crises.
- **Programme Development Grants - Competition 25** Closing date: 17 July 2019 - Applications are invited for Competition 25 of the Programme Development Grants programme.
- **19/19 - Public Health Research Programme: Researcher-led** Closing date: 23 July 2019 - The Public Health Research Programme are accepting stage 1 applications to their researcher-led workstream
- **19/57 Continuing priority research topics of interest to the PHR Programme** Closing date: 23 July 2019 - The Public Health Research (PHR) Programme wishes to draw your attention to the following commissioning briefs that we would like to fill with high-quality research.
- **Research for Patient Benefit Programme - Competition 39** Closing date: 24 July 2019 - Applications are invited for Competition 39 of the Research for Patient Benefit programme.
- **Programme Grants for Applied Research - Competition 30** Closing date: 24 July 2019 - Applications are invited for Competition 30 of the Programme Grants for Applied Research programme.
- **19/20 Tobacco cessation, control and harm reduction interventions (PHR Programme)** Closing date: 30 July 2019 - The Public Health Research Programme is accepting stage 1 applications for this primary research topic
- **19/01 Improving health and wellbeing for people who are at risk of or exposed to Adverse Childhood Experiences (ACEs)** Closing date: 30 July 2019 - The Public Health Research Programme is accepting stage 1 applications to their commissioned workstream for this topic.
- **19/02 Interventions that reduce harmful substance use with a focus on novel psychoactive substances** Closing date: 30 July 2019 - The Public Health Research Programme is accepting stage 1 applications to their commissioned workstream for this topic.
- **19/03 Systems approaches to local influences on food choices and diet** Closing date: 30 July 2019 - The Public Health Research Programme is accepting stage 1 applications to their commissioned workstream for this primary research topic.

- **19/34 Medication for ADHD in adults with a history of psychosis or bipolar disorder** Closing date: 31 July 2019 - The Health Technology Assessment Programme is accepting stage 1 applications to their commissioned workstream for this primary research topic.

- **19/35 Short-term use of benzodiazepines for the acute management of acute low back pain** Closing date: 31 July 2019 - The Health Technology Assessment Programme is accepting stage 1 applications to their commissioned workstream for this primary research topic.

- **19/36 Antioxidant supplements to slow AMD progression** Closing date: 31 July 2019 - The Health Technology Assessment Programme is accepting stage 1 applications to their commissioned workstream for this primary research topic.

- **19/39 Minimally invasive operative interventions for bladder outlet obstruction due to benign prostatic hyperplasia** Closing date: 31 July 2019 - The Health Technology Assessment Programme is accepting stage 1 applications to their commissioned workstream for this primary research topic.

- **19/40 Needle and syringe exchange schemes and opiate substitution therapy in the UK** Closing date: 31 July 2019 - The Health Technology Assessment Programme is accepting stage 1 applications to their commissioned workstream for this primary research topic.

- **19/41 Cannabis-based products for medicinal use** Closing date: 31 July 2019 - The EME Programme is participating in the Themed Call: cannabis-based products for medicinal use.

- **Global Health Policy and Systems Research (Global HPSR) Development Awards** Closing date: 31 July 2019 - The NIHR Global Health Policy and Systems Research Programme are accepting applications to their Development Awards.

- **19/21 Mechanisms of Action of Health Interventions** Closing date: 15 August 2019 - The Efficacy and Mechanism Evaluation Programme is accepting stage 2 applications to their commissioned workstream.

- **19/24 Efficacy and Mechanism Evaluation Programme - Researcher-led** Closing date: 28 August 2019 - The Efficacy and Mechanism Evaluation Programme is accepting stage 1 applications to their researcher-led workstream.

- **19/62 Epigenetics** Closing date: 28 August 2019 - The Efficacy and Mechanism Evaluation Programme is accepting stage 1 applications for this primary research topic.

- **19/61 Mitigation of the adverse effects of health and social care interventions** Closing date: 28 August 2019 - The Efficacy and Mechanism Evaluation Programme is accepting stage 1 applications for this primary research topic.

- **19/49 Call for ambitious data-enabled trials, health services and public health research studies** Closing date: 4 September 2019 - We are accepting stage 1 applications for this primary research cross programme topic.

- **19/55 - Health Services & Delivery Research Programme (standard researcher-led)** Closing date: 5 September 2019 - The Health Services and Delivery Research (HS&DR) Programme are accepting stage 1 applications to their researcher-led workstream.

- **19/56 - Health Services & Delivery Research Programme (evidence synthesis)** Closing date: 5 September 2019 - The Health Services and Delivery Research (HS&DR) Programme is accepting stage 2 evidence synthesis applications to their researcher-led workstream.

- **19/65 - Unmet need in Healthcare Resource Allocation** Closing date: 5 September 2019 - The Health Services and Delivery Research (HS&DR)
Programme is accepting stage 2 applications to their commissioned workstream

- **19/58 Health Technology Assessment Programme researcher-led evidence synthesis** Closing date: 11 September 2019 - The Health Technology Assessment Programme is accepting stage 1 applications to their researcher-led workstream.

- **19/59 Health Technology Assessment Programme researcher-led primary research** Closing date: 11 September 2019 - The Health Technology Assessment Programme is accepting stage 1 applications to their researcher-led workstream.

- **19/60 HTA Tobacco Cessation, Control and Harm Reduction Interventions** Closing date: 11 September 2019 - The Health Technology Assessment Programme is accepting stage 1 applications for this primary research topic.

- **19/48 Tobacco cessation, control and harm reduction interventions (HS&DR Programme)** Closing date: 12 September 2019 - The Health Services and Delivery Research (HS&DR) Programme are accepting stage 1 applications to their commissioned workstream.

- **19/26 Maternal intrapartum glycaemic control** Closing date: 18 September 2019 - The Health Technology Assessment Programme is accepting stage 1 applications to their commissioned workstream for this primary research topic.

- **19/27 Peritoneal endometriosis: to treat or not?** Closing date: 18 September 2019 - The Health Technology Assessment Programme is accepting stage 1 applications to their commissioned workstream 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/).

**MRC Public Health Intervention Development Scheme (PHIND)**

This scheme is designed to support the development of innovative new interventions that address important public health issues. These include complex, population-level interventions, with a focus on non-health care settings e.g. transport, education, employment, leisure. Healthcare settings are not excluded, but projects should demonstrate the potential for improved health of general, high risk or vulnerable populations such as defining intervention, developing theory, modelling process and outcomes, developing procedures and protocols.

Applications can be submitted in collaboration with an industrial partner using MICA (MRC Industrial Collaboration Application).

**Deadline: 18 July 2019. For more information please see the MRC website here.**

**Cancer Research UK: Pioneer Award**

This award is made for novel ideas to tackle cancer from any discipline – from basic science to technology development. Funding is up to £200k over 2 years. This is open to PDRAs, Professors, Clinicians and start-ups. There is a simple application form which does not require large amounts of data – the idea potential is the important factor!

**Deadline: 3 September 2019. For more information visit the CRUK website here.**

**Detailed designs of smart, local energy systems**

UK organisations can apply for a share of up to £30 million UK Research and Innovation (UKRI) funds to develop clean, cheap local energy systems that create prosperous, resilient UK communities. This funding is from the ISCF’s Prospering from the Energy Revolution challenge.

**Deadline: 7 August 2019 noon. For more information visit the UK Government website here.**
**BIH Excellence Award for Sex and Gender Aspects in Health Research**

For the second time, the Berlin Institute of Health announces the "BIH Excellence Award for Sex and Gender Aspects in Health Research". The award aims to bring more visibility to sex and gender issues in translational research. It recognizes research excellence among scientists working in the field of biomedicine, who integrate sex and/or gender aspects into their research.

**Deadline:** 30 June 2019. [For more information visit the BI Health website here.](#)

**Funding digital innovation in healthcare**

Funding is currently available for NHS organisations and AHSNs to create digital innovation hubs supporting partnerships between patients, clinicians, industry, researchers and innovators to stimulate a new wave of innovation that will benefit the NHS and drive economic development.

**Deadline for applications:** 2 July. [For more information and to apply please click here for more information.](#)

**Bloodwise projects grants**

Bloodwise is the UK's specialist blood cancer research charity dedicated to improving the lives of people living with and beyond blood cancer. The charity's research is targeted at understanding more about blood cancer, finding causes, improving diagnosis and treatments, and running ground-breaking clinical trials for patients. Applications are now being accepted for projects of up to £250,000 and up to three years for clearly defined research projects addressing key questions in the field of blood cancer. The remit of the project grant scheme also includes research projects that maximise the value and outcome of a clinical trial.

**Deadline for project grant applications:**
4pm on 20 September 2019. [For more information see the Bloodwise website here.](#)

**SBRI Healthcare: challenges in CVD in integrated and social care**

Cardiovascular Disease (CVD), including the following sub-categories: Detection and Prevention; - Intervention and Invasive Investigations; and Efficiency of CVD pathway. Integrated Care and Social Care, including the following categories: Improve effective data sharing system across the care network, and Reduce social care workforce pressure.

SBRI Healthcare is funded by NHS England to develop innovative products and services that address unmet health needs. Phase 1 is intended to show the technical feasibility of the proposed concept. The development contracts placed will be for a maximum of 6 months and up to £100,000 (inc. VAT) per project.

This Competition has been supported by the following AHSNs: Health Innovation Network South London, Innovation Agency AHSN for the North West Coast, South West AHSN and Health Innovation Manchester, but applications are invited from across England.

Briefing events with clinicians for interested companies will take place in London on 01 July 2019 and Manchester on 10 July 2019.

**The deadline for applications is 14 August 2019. Further details of this can be found on the SBRI Healthcare website.**

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**Research professional**

Research Professional (formerly Research Research) now offers an easy to use sign up: [http://www.researchprofessional.com/](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).
‘Rescuing’ asthma sufferers with vitamin D – £125,000
Most asthma attacks are triggered by colds and other viral infections. Preventing those infections with vitamin D lowers the chances of an asthma attack. However, many people forget to take daily vitamin supplements. To counter this, Barts Charity have funded a new study to investigate whether taking a big ‘rescue’ dose of vitamin D at the first sign of a cold could stop it developing and triggering an asthma attack. Read more >

Stunted growth in East London – £499,000
Within East London, you can find some of the most economically deprived communities in the UK. Poverty is associated with a variety of health conditions, including poor growth in childhood. This study will test whether East London is a hotspot for stunted growth, then develop a screening algorithm to identify poor growth at 3 years old. This will enable early interventions for medical disorders and socioeconomic disadvantages. Read more >

IBD and intestinal fungi – £131,000
Inflammatory Bowel Disease (IBD) is a life-long disease with social, emotional and physical impacts. There is currently no known cure. Barts Charity is funding research into whether treating intestinal fungi could protect you from developing this incurable disease. Read more >

Screening for skin cancer – £498,000
Every year, more than 50,000 people in the UK are diagnosed with cutaneous squamous cell carcinoma (CSCC), a type of skin cancer. Research into the causes of CSCC hopes to identify the risk factors for developing the cancer, leading to new personalised treatments. Read more >

Did you know: over the last financial year, Barts Charity granted £14.4m to the Barts and The London School of Medicine and Dentistry.

You can find out about all our large grants from the last year in our Year In Grants magazine.