

Joint Research Management Office Research News Bulletin

Issue 122

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New early-stage NIHR Clinical Research Facility for the Royal London Hospital

Barts Health NHS Trust has received £1m in funding from the National Institute for Health Research (NIHR) to integrate five Clinical Research Facilities (CRFs) and 18 disease-specific research groups into a combined CRF team. The team will operate at various sites within Barts Health NHS Trust and Queen Mary University of London across east London.



This award comes as the NIHR announced over £160m to fund 28 CRFs across England.

Our new NIHR Barts Clinical Research Facility will support the delivery of early translational and experimental medicine research, from studies testing new treatments in patients for the very first time through to early safety and efficacy trials. This will speed up access to new, innovative treatments for patients locally, nationally and internationally while also providing a boost to early-stage research and supporting the economy. It will also help to recruit and train a more diverse, specialised workforce and deliver a wider range of clinical

trials tackling a larger number of priority disease areas.

A significant investment of further funding to develop the new CRF will come from the Barts900 campaign led by [Barts Charity](#). The campaign aims to fully fund the construction of a new CRF at The Royal London Hospital, which Barts Charity has already invested in to support the technical design. Over the past five years, Barts Charity has provided substantial funding to support innovations in research and patient care at Barts Health and Queen Mary.

Professor Rupert Pearse, NIHR Professor of Intensive Care Medicine at Queen Mary University of London said that "This new funding will have a tremendous impact on research within Queen Mary's Faculty of Medicine and Dentistry. We know ethnically diverse people, like those in our local East London communities, are poorly represented in clinical trials, limiting the value of research for the overall UK population. The funding will give a huge boost to the Barts900 campaign and help create an innovative new CRF at the Royal London Hospital. This will enable us to provide local people with much-needed opportunities to participate in early-phase clinical trials of new drug treatments. By giving more people on our doorstep the opportunity to receive trials of new drug treatments, our research can become far more impactful and hopefully improve health outcomes both locally and around the country."

For further information [please see the Queen Mary website](#).

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~ Remember to upload your recruitment data regularly ~

It is the responsibility of the research team to ensure the EDGE record is accurate and that all research activity (recruitment) is recorded.

If you need any EDGE training or require further EDGE accounts, please contact zabed.ahmed@qmul.ac.uk in the JRMO

PPIE News

What's in a name? Our long-standing 'Engagement and Diffusion' team has changed its name to 'Research Engagement'. This shorter title captures in full what the team is about, helping to connect researchers and patients to better engage in more productive and relevant clinical research. More information about the team's work can be found [on the JRMO website](#).

How will you mark International Clinical Trials Day 2022?

This year, the Research Engagement team will be hosting a blended event, exploring the topic of Inclusion, Diversity and Equality in healthcare. The event will feature talks from researchers, research participants and public contributors and will include a facilitated discussion, pop-up surveys and other interactive elements. If you would like to be involved in this event as a speaker or event volunteer, contact the team at the email address below.

The provisional title for this year's event will be 'Levelling up: engaging under-represented groups and communities in healthcare research'.

The team is hoping to have as many of our researchers get involved as possible this year!

You might want to showcase your PPIE work or highlight the innovative practice or impact of your PPIE. You might want to disseminate results from a recent study or let people know about an upcoming study. Whether running your own events/ activities or getting involved in the event we are planning, we would like to hear from you.

*In a **change of plan**, this year's key ICTD event will take place in the Pathology Museum at Barts Hospital on **19 May**. It will be a 'blended event' with guests joining online. More details from the team nearer the time.*

Your thoughts and ideas for ICTD are welcome; including talks/ activities you think may be interesting and engaging for attendees. These could be online, in person or blended, so do consider all avenues.

Please contact the team to register your interest, discuss any ideas you may have -

perhaps for hosting your own activities to mark ICTD22 - or just to find out more at patientsinresearch.bartshealth@nhs.net
The team looks forward to hearing from/ seeing you!

Patient Research Champions (PRCs)

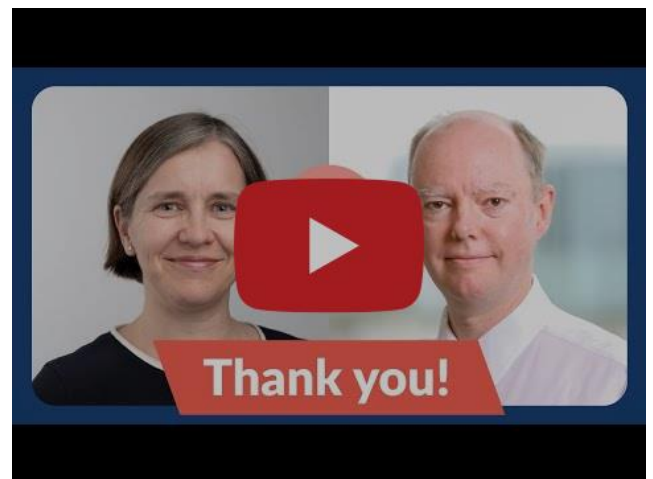
With many Trust volunteers returning to our hospitals it seems like a good time to look at re-introducing Patient Research Champions (PRCs), if and where possible. For those unaware, the role of a PRC is to promote health research from a patient's point of view, support our research staff in the tasks they undertake and help us to give our patients the best experience of taking part in research at Barts Health possible. This could include meeting and greeting trial participants, bringing them refreshments, or handing out PRES surveys.

We also have five new prospective PRCs, for whom we are currently seeking volunteering opportunities. They are expected to complete the volunteer registration process by the beginning of April.

To find out more about PRCs please see the [JRMO website](#) or contact James at patientsinresearch.bartshealth@nhs.net if you would like to work with one of our new PRCs.

Two years on from the outbreak of Covid-19: Thank you!

The pandemic has posed an unprecedented challenge for everyone - and research staff all around the country have more than risen to that challenge over the past two years.



Professor Chris Whitty and Professor Lucy Chappell have issued a massive thank you for all the continued dedication and hard work displayed by staff working to support clinical research in the UK over the last two years.

Every single person in the NIHR Clinical Research Network has played their part so that research can make a real difference in all our lives.

The last two years have highlighted more than ever the impact and importance of clinical research.

So many people in the research community have gone above and beyond to deliver studies and care - from those who stepped up to deliver UPH studies or continue delivering other vital research, to those who worked beyond their usual roles to support wider NHS clinical services.

Because of the dedication and resilience of everyone throughout the network, discoveries from Covid-19 research were able to transform the pandemic response, shaping standards of care and saving lives in the UK and the rest of the world.

Please take this opportunity to reflect and be proud of what we have achieved together, and [watch the thank you message](#) from Professor Chris Whitty and Professor Lucy Chappell.

JRMO drop-in sessions are back!

JRMO drop-in sessions have returned, virtually, on the **second Wednesday of every month, 10-11 am**.

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 - 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



To 'drop in', please log on [via MS Teams](#) on the second Wednesday of each month between 10-11 am. The team looks forward to seeing you!

Reimbursing expenses

The JRMO website now has a [new page](#) covering the issue of reimbursing expenses and payments for involvement and participation in research.

The new page provides guidance on making payments to public contributors who are actively involved in health and social care research as well as reimbursing the expenses of people who are taking part in research as participants. This applies when people are partners in the various stages of research, from identifying and prioritising topics and commissioning, to evaluation and dissemination.

The page covers both public involvement payments at Barts Health and reimbursing expenses and paying public contributors at Queen Mary. It provides full details of the process at both organisations along with forms and links.

QMERC approval delays

The Research Ethics team is currently training new colleagues whilst working through a large backlog of applications submitted earlier this year. They are working very hard to review applications as quickly as possible and apologise for our current, extended turnaround times and apologise for any inconvenience caused.

Barts Health KLS Statistical Analysis support

Barts Health Knowledge and Library Services (KLS) does not currently provide access to a statistical analysis service or related training. However, there are other resources available that you may find useful.



R-Project

Freely available open-source statistical analysis software "R" is a very powerful and popular alternative to SPSS: <https://www.r-project.org/>

There are several online tutorials and guides to help beginners get started:

- The University of Illinois: <https://guides.library.illinois.edu/uiuc-tutorial>
- Washington University, St Louis: <https://libguides.wustl.edu/R>
- Edx.org (requires creating a free account): <https://www.edx.org/course/statistics-and-r>

Unless you know about programming and command-line scripting, you will need to download a graphical interface for R:

- R Studio is the most commonly used graphical user interface for R <https://rstudio.com/>
- R Commander is also based on SPSS. <https://socialsciences.mcmaster.ca/jfox/Misc/Rcmdr/>



PSPP

PSPP is another popular open-source programme that is freely available for the statistical analysis of sampled data and works similarly to SPSS: <https://www.gnu.org/software/pspp/>



StatsDirect

StatsDirect is another popular alternative to SPSS, with an interface based on Excel making it easy to use. It is a paid-for application, but it is much cheaper than SPSS and it has a pricing tier for NHS users: <https://www.statsdirect.co.uk/>

Other free resources

- Microsoft Excel features a descriptive statistics tool: <https://www.dummies.com/software/microsoftoffice/excel/how-to-use-excel-descriptivestatistics-tool/>
- OpenEpi - Open Source Epidemiologic Statistics for Public Health: <http://www.openepi.com>
- Anaconda: <https://www.anaconda.com/>

Barts Health library resources

Books and ebooks available for loan or download via the catalogue:

- Medical statistics: a textbook for the health sciences
- Statistics for research: with a guide to SPSS
- Medical statistics at a glance
- Oxford handbook of medical statistics

Search the library catalogue for further titles: <http://bartshealth.nhslibraries.com/>

Training

The KLS [Introduction to Critical Appraisal workshop](#) features an explanation of basic statistical concepts such as Power, p-values, and confidence intervals.

Sessions are virtual by default and can be facilitated at a time of your convenience. [Request in-person training](#) or [watch our series of videos](#) where Barts Health Knowledge and Library Services' Assad Lahlou and Adam Tocock, use the CASP Checklist to critically appraise a randomised controlled trial.

UKRI Governance of Good Research Practice Policy update

New UKRI Governance of Good Research Practice (GRP) policy replaces the RCUK policy and guidelines on the governance of good research conduct.

As part of the standard, twice-yearly updates to UKRI grants terms and conditions, the updated [UKRI policy on the governance of good research practice](#) is now available along with the UK Research and Innovation (UKRI) policy and guidance on GRP.



This new policy replaces the Research Councils UK (RCUK) policy and guidelines on the governance of good research conduct.

Updates online include:

- Revised text with improved clarity on the individual's and organisation's responsibility to enable positive research practice for high integrity research;
- A policy change that organisations must inform UKRI upon deciding to undertake formal investigations;
- A requirement that applicants for UKRI funding must ensure they provide information in accordance with the good practice specified in the document; and
- Clarification that UKRI will not investigate cases but will check processes at an institutional level.

The UKRI policy on GRP applied to all new and existing grants as of April 2022.

For further information please see the [Research Integrity resources](#) on the Good Research Resource hub.

Any questions about this can be directed to researchintegrity@ukri.org

Information about research integrity at Queen Mary, advice and contacts, can be found [on the JRMO website](#).

NIHR Open Access publication policy becomes effective

We have previously flagged-up changes that will come about from the [NIHR open access policy introduced in 2014](#). These changes will now be effective for all publications submitted on or after 1 June 2022.

Open access makes published academic research freely, immediately and permanently available online for anyone to read, share and reuse. This maximises the societal, academic, and economic impact of publicly funded research, and enhances the integrity and rigour of research through greater openness and transparency. This policy supports the Government [R&D Roadmap](#) and our commitment to [adding value in research](#), one aspect of which is ensuring that research results are published in full in an accessible and unbiased report. Through the [NIHR Journals Library](#) and [NIHR Open Research](#), we enable findings, including negative findings, from all NIHR funded research to be made open access.

The NIHR open access Publication Policy (the 'open access policy') is focused on our expectations concerning publishing academic, peer-reviewed journal articles – but this is just one way in which our researchers may choose to disseminate their research findings. We recognise and encourage a diversity of approaches to disseminating research findings so that people can make use of them. We are also committed to making sure that when we assess research outputs during funding decisions, we consider the intrinsic merit of the work and not the journal in which it is published (see our [position on responsible use of metrics](#)).

This policy applies to peer-reviewed articles describing NIHR funded research findings submitted on or after 1 June 2022, when it will supersede the NIHR open access policy. That policy goes live after extensive engagement with a wide range of stakeholders including the academic, publishing and health and care sectors and patients and the public.

This policy applies to all peer-reviewed research articles, including reviews not

commissioned by publishers and conference papers, submitted for publication on or after 1 June 2022 arising from:

- [NIHR Programmes](#), [NIHR Personal awards](#) and [NIHR Global Health Research Portfolio](#): Research studies where the research costs are funded in whole or in part by the NIHR. Personal awards that do not fund research are out of the scope of this policy.
- For [NIHR Infrastructure](#) (including NIHR research units and schools): Research studies where the majority of the research costs are funded by the NIHR.

It focuses on 4 principles:

- (i) Articles must be immediately, freely and openly accessible to all;
- (ii) There should be no barriers to the re-use and dissemination of NIHR funded;
- (iii) Articles must be freely discoverable; and
- (iv) NIHR will pay reasonable fees to enable immediate open access

Further information about this can be [found on the NIHR 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 7a Contracting for MHRA regulated studies
 - Associated Document 1: JRMO contract checklist
- SOP 7b Contracting for Interventional and Research Studies
- SOP 9 Sponsorship of Clinical Investigations and other MHRA-regulated Medical Device Studies
- SOP 22 JRMO Audits
 - Associated Document 1 Research audits guidance (auditees)
 - Associated Document 2 Research audits guidance (auditors)
- SOP 26c Pharmacovigilance (Sponsor and CI)
- SOP 26d Safety Reporting for Clinical Investigations of Medical Devices

- Associated Document 1 Guidance on safety reporting for Clinical Investigation Plans
- Associated Document 2 Clinical Investigation Safety Reporting Form
- Associated Document 3 Device Event Log
- Associated Document 4 Device Deficiency Log
- SOP 31 Non-Compliance and Serious Breach reporting
 - Associated Document 1 Non-Compliance guidance document
 - Associated Document 2 Non-Compliance Notification form
 - Associated Document 3 Notification of Serious Breach Form
 - Associated Document 4 Notification of serious breaches form (Interventional and Research studies)
 - Associated Document 5 JRMO Root Cause Analysis Template
 - Associated Document 6 Non-Compliance notification of closure certificate
- SOP 42b Pharmacy involvement in hosted studies

The following stand-alone associated documents have been updated:

- SOP 9 Sponsorship of Clinical Investigations and other MHRA-regulated Medical Device Studies, Associated Document 3 Clinical-Investigation Plan template
- SOP 11a Sponsorship of MHRA regulated studies (Process for Researchers), Associated Document 2 JRMO Protocol Template for MHRA regulated studies
- SOP 12a Sponsorship of interventional studies Process (Researchers), Associated Document 1 JRMO protocol template for interventional studies v4.0
- SOP 13a SOP 13a - Barts Health-Queen Mary sponsorship of research studies (Researchers), Associated Document 2 JRMO protocol template for research studies v4.0

All JRMO SOPs can be found [on the JRMO website](#)

Our research

New study shows light-to-moderate coffee consumption is associated with health benefits

The study by Queen Mary University of London and the Budapest Semmelweis University has shown that having up to three cups of coffee a day is associated with a protective effect on heart health. It is also associated with a reduction in the overall mortality rate and the risk of stroke. The results have recently been published in the European Journal of Preventative Cardiology.

The researchers analysed data from 468,629 UK Biobank participants, who didn't have any record of heart disease at the start of the research period.

Participants were asked about their coffee-drinking habits and lifestyle (for example smoking and physical exercise) in a detailed questionnaire and data was also gathered on their individual cardiovascular risk factors such as high blood pressure, diabetes, and cholesterol level. They were divided into three groups: non-coffee drinkers, light-to-moderate coffee drinkers and those who consumed a significant amount of coffee a day.



The researchers also used MRI scans to gain a better understanding of how coffee-drinking habits affect the anatomy and functioning of the heart over time.

Professor Steffen Petersen of the William Harvey Research Institute at Queen Mary said: "The large sample size, linked health data, and detailed heart MRI scans available in the UK Biobank offered a strong base to address this research question. According to the results, light-to-moderate coffee consumption is not damaging from a cardiovascular point of view, and it could be beneficial. As far as we know, this has been

the largest study to date which focused on the effect of coffee on cardiovascular health."

Ground coffee in moderate amounts was associated with lower mortality risk – but this benefit was not found among the regular instant coffee drinkers. The reason behind this may relate to the different production processes of the ground and instant forms as they contain different additives.

It also emerged from the study that the type of coffee also matters. Even decaffeinated coffee was associated with lower all-cause mortality risk which also suggests that it's not only the caffeine that plays a role in the positive effects of coffee, but this will need further research.

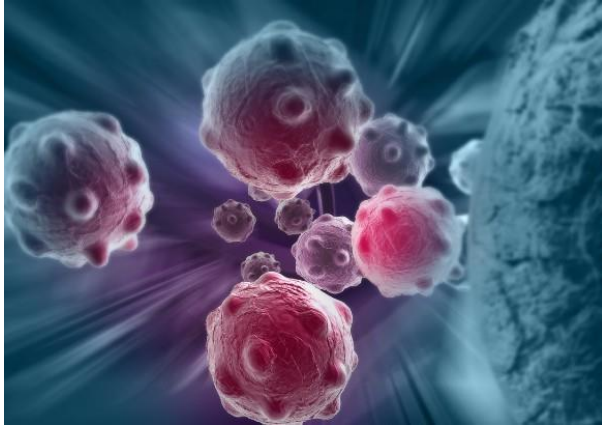
Coffee is one of the most consumed beverages in the world, however, its cardiovascular effects are not well-known, and some previous studies have shown contradictory results. This latest analysis of the UK Biobank data is a valuable contribution to existing research in this field providing a comprehensive evaluation of the relationship between coffee consumption and several aspects of cardiovascular health. For more information see the [Queen Mary website](#).

New PCR test for oral cancer set to revolutionise diagnosis and treatment

qMIDS, the world's first rapid oral cancer test, has been developed by Queen Mary University of London and an international team of researchers. It has the potential to relieve pressure on the NHS and may improve the early detection of oral cancer.

Researchers at Queen Mary have developed the world's first PCR test for mouth cancer. The test has now been proved with patients from China, India and the UK, with the results published in the international journal, [Cancers](#). The inventor, Dr Muy-Teck Teh, named the test the Quantitative Malignant Index Diagnosis System (qMIDS).

The test is quick and easy. It only needs the PCR machine as used in Covid testing, and a technician to operate it. It could be rapidly rolled out around the world at very little extra cost, with only a tiny sample, the size of half a grain of rice, being taken from a suspicious area in the patient's mouth and a 90-minute test.



There are 8,300 cases of mouth cancer in the UK every year. Most cases start with white or red patches in the mouth, called pre-malignant lesions, but only a tenth will turn into cancer. Until now there has been a grading system that highly skilled consultant oral pathologists use to assess the tissue samples through a microscope.

qMIDS diagnostic accuracy means that 90% of low-risk patients could be discharged from hospital to go back to their dentist or GP for review. Or they might be tested in the dentist's surgery and only referred to secondary care if they were high risk. High-risk cases could also be detected in the pre-cancer period and treated definitively, thereby saving the patient's life with minor surgery, better cure rates and quality of life, as well as a huge reduction in health service costs. The test process is largely automated, removing the need for expensive pathologists. There's also no need for invasive biopsies. The tests can be carried out on multiple sites when patients have lesions affecting large areas throughout the mouth.

Co-study lead, Professor Iain Hutchison, stated: "qMIDS dramatically improves our management of mouth cancer and its pre-cancerous state, saving lives and healthcare costs. Surgeons and dentists anywhere in the world can use this test for minimally invasive tissue samples because all it needs is a PCR machine and the technician who operates it. It is a powerful tool, especially when used in conjunction with conventional histopathology assessment."

New early signs of Parkinson's uncovered in the most diverse UK study to date

Hearing loss and epilepsy are early features of Parkinson's, according to pioneering new research from Queen Mary University of London – the first UK study of the condition in such a diverse population, published today in *JAMA Neurology*.

Queen Mary researchers funded by [Bart's Charity](#) used electronic primary healthcare records from over a million people living in East London between 1990 and 2018 to explore early symptoms and risk factors for Parkinson's.

The researchers found that known symptoms associated with Parkinson's, including tremors and memory problems, can appear up to ten and five years before diagnosis respectively. They also uncovered two new early features of Parkinson's, epilepsy and hearing loss, and were able to replicate these findings using additional data from the [UK Biobank](#).

Whilst early signs of Parkinson's have been described previously, these studies have largely focused on affluent white populations, with patients from minority ethnic groups and those living in areas of high social deprivation largely underrepresented in Parkinson's research to date. The new study provides further evidence of risk factors and early signs of Parkinson's, using data from such a diverse and deprived urban population for the first time.



In East London, conditions like hypertension and Type 2 diabetes were associated with increased odds of developing Parkinson's. The researchers also observed a stronger association between memory complaints within this population than previously described. East London also has one of the

highest proportions of ethnic minority groups, which make up around 45% of residents, in comparison to a 14% average across the UK. It also has some of the highest levels of deprivation in the UK, and 80% of patients included in the study were from low-income households.

Lead study author [Dr Cristina Simonet](#), neurologist and PhD student at Queen Mary, commented: "This is the first study focusing on the pre-diagnostic phase of Parkinson's in such a diverse population with high socioeconomic deprivation but universal access to health care. People from minority ethnic groups and deprived areas have largely been underrepresented in Parkinson's research up till now, but to allow us to get a full picture of the condition we need to ensure research is inclusive and represents all those affected. Our results uncovered novel risk factors and early symptoms: epilepsy and hearing loss. Whilst previous research has hinted at the association, such as epilepsy being more prevalent in Parkinson's patients than in the general population, more research is now needed for us to fully understand the relationship. In the meantime, it is important that primary care practitioners are aware of these links and understand how early the symptoms of Parkinson's can appear so that patients can get a timely diagnosis and doctors can act early to help manage the condition."

[PREDICT-PD](#) is a large research project funded by [Parkinson's UK](#) that aims to identify people at high risk of developing the condition. The researchers are looking for 10,000 people aged 60-80 years from all backgrounds who do not have Parkinson's, to take part in a simple set of online tests that screen for factors linked to increased risk of the condition.

Queen Mary awarded funding for new healthy ageing networks

Researchers at Queen Mary have been selected by UK Research and Innovation (UKRI) to create new networks aimed at transforming ageing research in the UK.

In total, 28 universities will collaborate to create [11 new networks](#), funded with £2 million from the Biotechnology and Biological Sciences Research Council (BBSRC) and the Medical Research Council (MRC).



As part of their research efforts, the networks will also include working with the public, industry, charities, policymakers and health practitioners to translate findings into policy, public health and new therapies.

The [full article is available to read here](#).

Landmark for Queen Mary-led Genes and Health Study

The Genes & Health study has hit a key milestone with 50,000 research volunteers now participating nationally to help address the under-representation of South Asian communities in genetic research.

The initiative benefits from £25 million of investment by a group of life sciences companies to investigate how genes may help us understand health problems, develop new treatments and support the diversification of health research data. British Pakistani and British Bangladeshi populations, which are the largest ethnic minority groups in East London, have historically been under-represented in the large genetic data sets used by scientists, doctors, and policy-makers to guide decisions about healthcare.

[Genes & Health](#) is addressing this by recruiting volunteers from British Pakistani and British Bangladeshi heritage, beginning to reverse health and research inequalities that have traditionally disadvantaged people from these communities.

The project, led by Queen Mary University of London in partnership with King's College London, started in East London in 2015 and has since expanded to Bradford and more recently Manchester, with the 50,000th volunteer, Zahid Chauhan OBE, being the first recruit to the newly opened Manchester Genes & Health. The study is now halfway towards achieving its goal of recruiting 100,000 volunteers by 2024.

Events



Festival of Communities and Science Festival – 10 to 12 June 2022

The **Barts and Queen Mary Virtual Science Festival** will take place on 10 June, 10 am-4 pm. This is a family-friendly science festival for secondary school pupils to promote and encourage careers in the life sciences. Being delivered virtually for the second year running, the festival will feature live short talks and fun website activities. If you would like to deliver a short talk or get involved with other activities, please contact Jane Batchelor at j.batchelor@qmul.ac.uk

The **Festival of Communities**, 11-12 June, offers a great opportunity for Queen Mary staff and students to engage local communities surrounding Queen Mary campuses with their research, teaching and other Queen Mary opportunities and projects. The Centre for Public Engagement is offering funding and training/ advice sessions throughout March for those who wish to host a workshop or activity. For more information about the Festival, and other news, training and funding opportunities, check out the latest newsletter from the Centre for Public Engagement. You can also email: publicengagement@qmul.ac.uk or call 020 7882 6115.

[More information is online.](#)

Training

JRMO research governance training

The JRMO runs various good research practice training sessions. These include:

- Good Clinical Practice (GCP) full course;
- GCP refresher;
- Good Practice for non-CTIMPs; and
- GCP for Labs.

A full list of our research courses can be found [on the JRMO website](#).

Dates for the Spring season training are:

- Good Clinical Practice (GCP) Refresher - GCP003: 16 May 2-4.30 pm
- Governance training: study set-up, split over 2 half-days - GCP011A: 18 May 9:30 am–1 pm and 19 May 1-4.30 pm

- GCP for non-CTIMP research, split over 2 half-days - GCP008B: 25 May 1-4.30 pm and 26 May 1-4.30 pm
- Governance training: managing a study, split over 2 half-days - GCP012A: 15 June 1-4.30 pm and 16 June 9:30 am–1 pm
- GCP Refresher - GCP003: 13 July 2-4.30 pm
- Governance training: data management and databases, split over 2 sessions - GCP013A: 14 July, 9:30 am–1 pm and 18 July 1:30–5 pm
- GCP for Lab staff - GCP001: 20 July 2-4.30 pm and 21 July 2-4.30 pm
- GCP, full course split over 2 half-days GCP002A: 27 July 2-5 pm and 28 July 2-5 pm

Barts Health staff and Queen Mary staff and students should book this training through

the [Queen Mary CPD online booking system](#). Please note you will need a Queen Mary email address to do this. NHS users, without a Queen Mary ID, please contact Rhona Atkin, Clinical Trials Facilitator at Rhona.atkin@qmul.ac.uk to book your place.

JRMO courses are also open to staff working on NIHR portfolio studies across North Thames free of charge and to external participants for a fee. Individuals in either group should contact research.governance@qmul.ac.uk for course details and fee information.

Please note the following:

- New users need to register before booking (select the register button on the site and

follow the instructions) with a Queen Mary email address

- All users will be asked to select an appropriate course
- Please ensure that you read the details of each course and meet the description of the target audience;
- Select a date and course to meet your needs
- Once you have made your booking, you will receive an automated email to confirm your place
- We can only accept booking through the above route

More detail on all these courses is available on the ['What training do I need' webpage](#).

Public Engagement Masterclass

This half-day workshop is designed for anyone looking to take their first steps in public engagement or those who have undertaken projects before but would like to cement their learning in this area:

Friday 8 April, 10am-12:30pm

Wednesday 11 May, 10am-12:30pm

Monday 6 June, 10am-12:30pm

Thursday 7 July, 2 pm-4:30 pm

[Book onto the Public Engagement Masterclass](#) (course code RD-PE-005)

Introduction to involving patients in your research

This workshop will introduce how engaging patients, carers and the public can serve as an effective means to inform health-related research throughout the research process:
Thursday 4 August, 2 pm-4 pm

[Book onto the Introduction to involving patients in your work](#) session (course code: RD-PE-006)

Please note: this training is open to members of Barts Health NHS Trust, although booking using the online system may not be possible. If this is the case, please contact the CPE directly to book your space (publicengagement@qmul.ac.uk).

Research funding

NIHR funding highlights

- [22/1 HTA Researcher-led call Primary Research](#)
Closes: 13:00 on 4 May 2022
The Health Technology Assessment Programme is accepting stage 1 applications to their researcher-led workstream.
- [22/2 HTA Researcher-led call Evidence Synthesis](#)
Closes: 13:00 on 4 May 2022
The Health Technology Assessment Programme is accepting stage 1 evidence

synthesis applications to their researcher-led workstream.

- [22/3 NIHR NICE Rolling Call \(HTA Programme\)](#)
Closes: 13:00 on 4 May 2022
The Health Technology Assessment (HTA) Programme is accepting stage one applications for this funding opportunity.
- [21/598 Health and social care outcomes and cost-effectiveness of assistive technologies](#)
Closes: 13:00 on 4 May 2022
The Health Technology Assessment Programme is accepting stage 1

- applications to their commissioned workstream for this primary research topic.

 - [21/593 Pain management for children and young people \(0-19 years\)](#)
Closes: 13:00 on 4 May 2022
 The Health Technology Assessment Programme is accepting stage 1 applications to their commissioned workstream for this primary research topic.
 - [21/592 Hypertension in pregnancy](#)
Closes: 13:00 on 4 May 2022
 The Health Technology Assessment Programme is accepting stage 1 applications to their commissioned workstream for this primary research topic.
 - [Invention for Innovation - Product Development Awards Call 24 Joint Industry Call](#)
Closes: 13:00 on 10 May 2022
 i4i Product Development Awards (PDA) supports the translational research and development of medical devices, in-vitro diagnostics and high-impact patient-focused digital health technologies for ultimate NHS use.
 - [22/12 Applications with industry collaboration - The development and evaluation of predictive algorithms using Artificial Intelligence \(AI\) \(HTA Programme\)](#)
Closes: 13:00 on 10 May 2022
 The Health Technology Assessment Programme is accepting applications for this funding opportunity.
 - [22/18 Applications with industry collaboration - The development and evaluation of predictive algorithms using Artificial Intelligence \(AI\) \(EME Programme\)](#)
Closes: 13:00 on 10 May 2022
 The Efficacy and Mechanism Evaluation Programme is accepting stage 1 applications for this funding opportunity.
 - [22/19 HSDR Researcher-led call](#)
Closes: 13:00 on 17 May 2022
 The Health and Social Care Delivery Research (HSDR) Programme are accepting stage 1 applications to their researcher-led workstream.
 - [NIHR Population Health Career Scientist Award](#)
Potential advert date: 17 May 2022
 The NIHR Population Health Career Scientist Award (PHCSA) is a UK-wide initiative to enable senior researchers to take the next step to Reader/Professor level in their host institutions.
- [22/20 NIHR James Lind Alliance Priority Setting Partnerships Rolling Call \(HSDR Programme\)](#)
Closes: 13:00 on 17 May 2022
 The Health and Social Care Delivery Research (HSDR) Programme is accepting stage one applications for this funding opportunity.
- [Programme Development Grants - Competition 33](#)
Closes: 18 May 2022
 Applications are invited for Programme Development Grant funding. Programme Development Grants are designed to increase the rate and number of successful applications for a full Programme Grant by supporting the completion of the necessary preparatory work to suitably position the research team to submit a competitive Programme Grant application.
- [21/577 Supporting the delivery of net zero health and social care system](#)
Closes: 13:00 on 24 May 2022
 The Health and Social Care Delivery Research (HSDR) Programme is accepting stage one applications for this funding opportunity.
- [22/25 Evaluating the implementation of the Transforming Children and Young People's Mental Health Provision Green Paper](#)
Closes: 13:00 on 25 May 2022
 The Health and Social Care Delivery Research (HSDR) Programme is accepting stage one applications for this funding opportunity.
- [22/26 Evaluating the High Volume Low Complexity \(HVLC\) surgical hubs model](#)
Closes: 13:00 on 25 May 2022
 The Health and Social Care Delivery Research (HSDR) Programme is accepting stage one applications for this funding opportunity.
- [22/9 Delivering a Sustainable Health and Care System \(HSDR Programme\)](#)
Closes: 13:00 on 25 May 2022
 The Health and Social Care Delivery Research (HSDR) Programme is accepting stage 1 applications to this NIHR Themed Call.
- [HEE/NIHR ICA Doctoral Clinical and Practitioner Academic Fellowship \(DCAF\)](#)
Closes: 13:00 on 9 June 2022
 The Doctoral Clinical and Practitioner Academic Fellowship (DCAF) scheme funds registered health and social care professionals to undertake a PhD by

research and, concurrently, to undertake further professional development and practice.

- [HEE/NIHR ICA Advanced Clinical & Practitioner Academic Fellowship \(ACAF\)](#)
Closes: 13:00 on 9 June 2022
The HEE/NIHR ICA Advanced Clinical and Practitioner Academic Fellowship (ACAF) supports post-doctoral researchers to develop their academic careers whilst developing their health or care careers.
- [Public Health Research Programme – future topics](#)
Potential advert date: 28 June 2022
The Public Health Research (PHR) Programme is considering the following topics for future commissioned research.
- [Research and Innovation for Global Health Transformation - Call 5](#)
Closes: 13:00 GMT on 29 June 2022

The fifth Research and Innovation for Global Health Transformation (RIGHT) call will support targeted research to strengthen health service delivery and resilience in low and middle-income countries in the context of extreme weather events.

- [IAT Clinical Lectureships in Medicine 2022](#)
Closes: 13:00 on 30 June 2023
NIHR IAT CLs provide opportunities for postdoctoral research and facilitate applications for further research funding.
- [NIHR Clinical Lectureships in Medicine 2021](#)
Closes: 13:00 on 30 June 2022
NIHR Clinical Lectureships in Medicine are part of the Integrated Academic Training Programme.
- [NIHR Population Health Career Scientist Award](#)
Closes: 13:00 on 30 June 2022

We are accepting applications for the NIHR Population Health Career Scientist Award (PHCSA).

- [i4i FAST \(Funding At the Speed of Translation\) Awards Pilot Scheme](#)
Closes: 1 July 2022
The brand new i4i FAST (Funding At the Speed of Translation) funding scheme is inviting innovators to submit applications that will answer a specific question, fund a single piece of activity or fill a specific evidence gap across all technology readiness levels.
- [Research for Patient Benefit - Competition 48](#)
Closes: 13:00 on 13 July 2022

Applications are invited for research proposals that are concerned with the day-to-day practice of health service staff, and that have the potential to have an impact on the health or wellbeing of patients and users of the NHS.

- [22/11 Implementing the Mental Capacity Act in practice \(Mental Capacity Assessments\)](#)
Closes: 13:00 on 19 July 2022
The Health and Social Care Delivery Research (HSDR) Programme is accepting stage one applications for this funding opportunity.
- [22/10 Adult social care needs assessment and care planning](#)
Closes: 13:00 on 19 July 2022
The Health and Social Care Delivery Research (HSDR) Programme is accepting stage one applications for this funding opportunity.
- [NIHR Doctoral and Advanced Fellowships Round 8 April 2022](#)
Closes: 13:00 on 21 July 2022
The National Institute for Health and Care Research (NIHR) is launching the 8th round of Doctoral and Advanced Fellowships as part of the NIHR Fellowship Programme. The Advanced Fellowship is for those at a post-doctoral level and can be utilised at several specific points of a researcher's career development. Whilst the NIHR Doctoral Fellowship is a three-year full-time award that supports individuals to undertake a PhD in an area of NIHR research.
- [22/40 HTA Application Development Award: Towards evaluation of digital and technology-enabled healthcare](#)
Closes: 13:00 on 27 July 2022
The Health Technology Assessment Programme is accepting stage 2 applications to their commissioned workstream, for this primary and secondary research topic.
- [22/28 Management of antipsychotic-induced sexual dysfunction](#)
Closes: 13:00 on 27 July 2022
The Health Technology Assessment Programme is accepting stage 1 applications to their commissioned workstream for this primary research topic.
- [22/29 Pseudomonas aeruginosa eradication treatment in bronchiectasis](#)
Closes: 13:00 on 27 July 2022
The Health Technology Assessment Programme is accepting stage 1 applications to their commissioned workstream for this primary research topic.

- [22/30 Post-operative pain in patients undergoing spinal surgery](#)
Closes: 13:00 on 27 July 2022
The Health Technology Assessment Programme is accepting stage 1 applications to their commissioned workstream for this primary research topic.
- [22/31 Glucagon-like peptide-1 receptor agonist therapy for people with severe mental illness living with overweight or obesity](#)
Closes: 13:00 on 27 July 2022
The Health Technology Assessment Programme is accepting stage 1 applications to their commissioned workstream for this primary research topic.
- [22/32 Biologic disease-modifying anti-rheumatic drugs in pregnancy](#)
Closes: 13:00 on 27 July 2022
The Health Technology Assessment Programme is accepting stage 1 applications to their commissioned workstream for this primary research topic.
- [22/33 Botulinum toxin in the management of chronic masticatory myofascial pain](#)
Closes: 13:00 on 27 July 2022
The Health Technology Assessment Programme is accepting stage 1 applications to their commissioned workstream for this primary research topic.
- [22/34 Surgical and non-surgical management of basal thumb osteoarthritis](#)
Closes: 13:00 on 27 July 2022
The Health Technology Assessment Programme is accepting stage 1 applications to their commissioned workstream for this primary research topic.
- [22/35 Thromboprophylaxis in lower limb immobilisation](#)
Closes: 13:00 on 27 July 2022
The Health Technology Assessment Programme is accepting stage 1 applications to their commissioned workstream for this primary research topic.
- [22/27 Antipsychotics for the treatment of borderline personality disorder](#)
Closes: 13:00 on 27 July 2022
The Health Technology Assessment Programme is accepting stage 1 applications to their commissioned workstream for this primary research topic.

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

MRC Equipment funding

The Medical Research Council (MRC) has announced a funding opportunity 'Expression of interest: purchase mid-range equipment for biomedical research: MRC Equip – UKRI'.

The MRC is inviting Expressions of Interest for an Equipment Funding Opportunity, for items of equipment above £100k. The MRC contribution requested can be up to 100%, at a maximum of £800k per item (the total item cost may be higher, with the remainder being met by institutional or partner contributions).

Applications from all scientific areas within the MRC remit ([see the MRC website](#)) are eligible at this Expression of Interest stage, but we may need to focus the remit of the full funding opportunity to manage demand and maintain an appropriate success rate.

It is expected that awards would be made in October 2022. Successful awards might need to complete their spending by 31 March 2023.

It is mandatory to complete the Expression of Interest stage before submission of a full application. There is no limit to the number of Expressions of Interest a research organisation can submit, however, we may impose a limit on the number that an organisation can advance to the full application stage if demand is high. We would encourage organisations to discuss and prioritise their submissions as soon as possible.

The Expression of Interest stage will close at 4 pm on 28 April 2022.

Please note, that MRC welcomes applications from eligible facility staff as either principal investigators or co-investigators.

[For further information, and to apply, visit the UKRI site here.](#) Queries should be directed to CA@mrc.ukri.org

Fellowships and related opportunities



Researchers at Risk Fellowships

The British Academy with [Cara \(the Council for At-Risk Academics\)](#) is establishing *Researchers at Risk Fellowships Programme* with the support of the Academy of Medical Sciences, the Royal Academy of Engineering and the Royal Society. The Fellowships will cover the natural sciences, medical sciences, engineering, humanities and social sciences with applications made via UK-based institutions.

This Programme is a response to the Russian invasion of Ukraine, which has exposed Ukrainian-based researchers to direct threats. We wish to open the scheme more widely when possible. There is an immediate need to provide support for these researchers to enable them to have the space to continue their work. 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.

For this Programme, a 'researcher' is considered to mean a person who has been engaged in teaching or research at a university, research institute or equivalent

institution. The UK host institution will lead on completing an application.

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



Healthcare Professional Clinical Research Training Fellowships

Barts Charity is launching a new PhD Fellowship scheme that aims to provide opportunities for all Healthcare Professionals to undertake research that enhances our understanding of health and illness and could lead to better health for East London

The 3-year PhD Fellowship scheme is open to all Healthcare Professionals (including [Allied Healthcare Professionals](#), clinicians (including general practitioners), [Healthcare Scientists](#), midwives, nurses, pharmacists and psychologists).

Further details about the scheme (including eligibility and application process) can be found [on the Barts Charity website](#). For those interested to find out more, Barts Charity is hosting a virtual workshop on **Tuesday 10 May 12-1 pm**. You can register to attend [on the Barts Charity site](#).

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 \(account and password required\)](#).