

# Joint Research Management Office

## Research News Bulletin

Issue 112

28 January 2020

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

### #MakeitPublic - research transparency update

The Health Research Authority has announced its vision that trusted information about health and social care research studies is publicly available for the benefit of all.

Last year more than 700 individuals and organisations responded to the HRA's 'Make it Public' consultation. They asked for views on how they could drive a lasting change in research transparency, which is central to ethical research practice.

Responses included feedback on how best to ensure that studies are registered, results are made public and participants are informed of those results.

The HRA's new 'Make it Public' strategy was agreed, in principle, by the HRA's Board in December. The Board thanked everyone involved in the consultation and agreed that the strategy had been developed through a robust process. However, due to the General Election in December publication was postponed. The HRA Board meets again in early February 2020 and will then agree on an implementation plan.



As readers of this [Bulletin](#) will be aware, clinical trials need now to be registered and reported on the EUDRACT website within one year of publication. For all other interventional clinical trials, NHS Ethics Committees only give a favourable opinion on the condition that the trial is registered on a public database such as [clinicaltrials.gov](http://clinicaltrials.gov). The "All Trials" campaign website shows the percentage of CTIMPs that have been correctly reported for individual sponsors. The [HRA](#), the [House of Commons Science and Technology Committee](#) and the [International Committee of Medical Journal Editors](#) have all emphasised the need to meet this requirement and there are penalties for not doing so.

The JRMO governance team continues to work hard with our researchers to improve our compliance (see [Queen Mary](#) and [Barts Health](#) pages of the All Trials website). We expect the regulations to be extended soon to cover all types of clinical trials, not just CTIMPs, so the JRMO is also conducting an important exercise ensuring all Barts Health and Queen Mary sponsored project are complying with possible future requirements. Researchers can take action by inserting the existing or updated transparency wording from HRA into their patient information sheets.

The Engagement and Diffusion Team is also available to support researchers in their public engagement activities. Please contact: [patientsinresearch.bartshealth@nhs.net](mailto:patientsinresearch.bartshealth@nhs.net)

Summary information, to be included in patient information sheets, plus wording for general information to be provided alongside the patient information sheet can be [found here on the HRA website](#). To follow progress on the new 'Make it Public' strategy, please visit [the HRA website](#), or follow the HRA on social media via [Twitter](#) or [LinkedIn](#).

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## New standards published for Public Involvement in research

New UK Standards for Public Involvement are designed to improve the quality and consistency of public involvement in research.

Developed over three years by a [UK-wide partnership](#), the standards are a description of what good public involvement looks like and encourage approaches and behaviours that are the hallmark of good public involvement such as flexibility, sharing and learning and respect for each other.

The standards are for everyone doing health or social care research and have been tested by over 40 individuals, groups and organisations during a year-long pilot programme. They provide guidance and reassurance for users working towards achieving their own best practice. These standards cover six areas:

- Communications
- Governance Impact
- Working together
- Inclusive opportunities
- Support and Learning

[Please visit the NIHR website to find out more about the standards.](#) The website includes information about the six UK standards along with supporting materials, including downloadable documents in different formats.

For more information [visit the NIHR website here.](#)



## NIHR Programme Grant Committee Vacancies

The NIHR is seeking to appoint members to the Programme Grants for Applied Research (PGfAR) Committee. Applications from all applied health, public health and social care researchers are welcome - particularly those with experience of running trials and using diverse methodologies to demonstrate patient, service user and carer benefits.

The Programme Grants for Applied Research Programme makes significant awards of flexible funding and duration. Since the Programme was established in 2006, 28 rounds have been completed leading to 251 awards worth nearly £500 million. Professor Elaine Hay is the Programme Director. Posts normally last for four years in the first instance and successful applicants will be expected to attend three meetings a year in central London.

If you or a colleague are interested in applying please follow [visit the NIHR website here](#). If you have any queries or would like more information, please email [programme.grants@nihr.ac.uk](mailto:programme.grants@nihr.ac.uk) or call 020 8843 8056.

**The closing date for applications is 31 January 2020.**

## Taking human blood and tissue from healthy volunteers

The JRMO is publishing guidance on obtaining and using human blood and tissue from healthy volunteers for research purposes

This has a direct impact on staff and students from Queen Mary and Barts Health who undertake work that requires the use of human blood or human tissue from volunteers for research purposes.

In the first instance, it is necessary to establish whether the project is research. Please use the Health Research Authority (HRA) decision tool [that can be accessed here](#). If the work is defined as research, ethical approval is normally required before any activities can take place. If none of the criteria above applies, and the work is classified as research requiring blood from healthy volunteers with no long term storage, approval from the Queen Mary Ethics of Research Committee (QMERC) is typically required (for more information

please visit the [QMERC webpage here](#)). If the work requires blood from NHS patients or individuals with specific attributes (e.g. diabetic patients) or is to be stored in premises that do not hold an HTA licence, a favourable opinion from an NHS REC is required (for more information please visit the [HRA website here](#)).



If you have any questions or would like advice please contact [research.governance@qmul.ac.uk](mailto:research.governance@qmul.ac.uk).

Before blood can be taken from any volunteer or research participant a risk assessment to identify potential risks and methods for mitigating them should be completed. Please see [here](#) for risk assessment templates. Similarly, anyone taking blood from a volunteer or themselves should be sufficiently qualified and competent to do so by training and experience, and able to report any safety concerns.

Freely given informed consent should be obtained prior to taking any blood samples (see [JRMO SOP 25](#)). Potential participants should be given information regarding the nature of the intervention, significance, implications, and risks of their blood being taken and used, to allow them to make an informed decision. They should be provided explicit information in relation to all research usage and/or storage.

If you become aware of any unethical behaviour (e.g. coercion of volunteers to provide samples), please follow the JRMO's [SOP on Investigation and Resolution of Research Misconduct Allegations](#).

The new Guidance will be published online in due course but in the meantime, a copy can be obtained from Dr Mays Jawad in the JRMO: [m.jawad@qmul.ac.uk](mailto:m.jawad@qmul.ac.uk).

## Engaging NHS staff in research survey: Closing 14 February

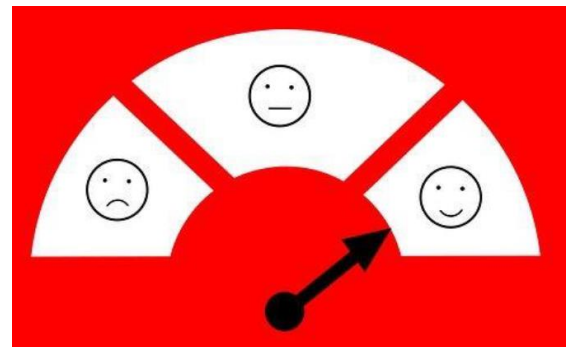
The CRN National Co-ordinating Centre and NHS R&D Forum have jointly launched a survey to find out about the experiences that research-active staff have had of engaging with non-research active colleagues in relation to the topic of research.

The survey is aimed at those who work in general research delivery, for the CRN or in R&D management and support within NHS Trusts.

It is a very short and easy to complete survey! After initially asking you to identify your role it asks 3 core free text questions, a single linear scale question, and a simple tick box. You are also invited to share stories (good and bad) or examples of practice that we may include as a showcase.

**The survey can be found here [here](#).**

It should be accessible to all without the need for login. Please email [Roger.steel@nih.ac.uk](mailto:Roger.steel@nih.ac.uk) if you have difficulties accessing it.



## QMERC: New annual progress reporting and end of study procedures

The Queen Mary Ethics of Research Committee (QMERC) is introducing new procedures to capture more information about the progress and outcomes of studies it approves. For all studies approved after 1 January 2020 the lead investigator must complete:

- An Annual Progress Report form, on the anniversary of the Ethics approval, and every year thereafter (not required for studies that commence and complete as planned within 12 months); plus

- An End of Study Notification form, on completion of the study.

Documents templates can be found along with further information about the Ethics Committee, applications and approvals process can be found [on the JRMO website here](#). Applications and queries should now be submitted by email to the Research Ethics Facilitator at [research-ethics@qmul.ac.uk](mailto:research-ethics@qmul.ac.uk)

Please note that this does not apply retrospectively to studies that received approval before 2020.

### **PRES 2019/20 results**

*'The team always treat me with dignity and respect and are always very responsive to questions in person, via email and on the phone. They have always been there to support me'. MSK patient*

The NIHR Patient Research Experience Survey (PRES), which gathers feedback from patients who take part in our studies, ended in December 2019. Barts Health finished with an impressive total of 831 surveys completed, against a target of 450, topping the CRN: North Thames leader board.

The research teams that took part in PRES will be reviewing their local results to learn what works best for their patients and to identify changes they can make to improve their experience in the future.



Early results indicate an overall improved patient experience at Barts Health over the past 12 months:

- I had a good experience: 89% compared to 85% in 2018/19 results
- I knew who to contact: 89% compared to 85% in 2018/19 results
- Were you aware your health care provider supported research: 43% compared to 24% in 2018/19 results
- I would take part again: 88.5% compared to 79% in 2018/19 results.

Look out for more news about Barts Health PRES results in the forthcoming weeks. The CRN: NT regional report and the NIHR's national report on PRES 2019 are scheduled for publication in March and June 2020, respectively.

### **International Clinical Trials Day: May 2020**

To mark International Clinical Trials Day (ICTD) the Engagement and Diffusion team hosts a programme of events and activities. It is an exciting opportunity to support staff with engaging directly with patients and the public about some of the great research taking place across Barts Health and Medical School.

This year public engagement becomes ever more important as the HRA has launched its #MakeItPublic campaign (see [page 1](#)) promoting transparency in research.

Embedded within that strategy are the principles of making the findings of the research publicly available and making information about the findings of the research available to participants.

Whether you are already doing innovative work to disseminate results of your recent studies or would like to promote your work more widely the Engagement and Diffusion Team can help. For more information about both this year's ICTD and general public engagement matters, contact Neeta and Olivia at [Patientsinresearch.bartshealth@nhs.net](mailto:Patientsinresearch.bartshealth@nhs.net)

# Research governance update

## Direct Care Team (DCT) update

The DCT definition and high-level criteria were agreed by Barts Health last summer.

Some hospital outpatient clinics will be taking part in a survey to obtain a better understanding of how they view research staff accessing their medical notes along with how consent can best be obtained.

When the definition was agreed the Trust's Information Governance (IG) committee requested a data impact assessment and a policy. The impact assessment is now underway and a DCT Policy is being drafted by Mays Jawad with colleagues across the Trust. Once drafted there will be a consultation on this. In the meantime, if you would like any information on this, please contact Dr Mays Jawad in the JRMO [m.jawad@qmul.ac.uk](mailto:m.jawad@qmul.ac.uk).

## GDPR Compliance of Sponsored studies

The Health Research Authority (HRA) has updated the transparency wording that must be inserted into the Patient Information Sheet and generic leaflet, to be provided alongside the PIS. The text for both is now [live on the HRA website](#). The Research Governance team (JRMO) has also conducted an important exercise ensuring all our Sponsored projects (Barts Health and Queen Mary) are compliant with GDPR requirements. All research leads should have received an email in December 2019 if one of their studies was flagged as non-compliant on our system giving them a timeline to respond by 31 January 2020. Please ensure you respond if you have received such an email so that the system can be updated accordingly. For any support please contact the team: [research.governance@qmul.ac.uk](mailto:research.governance@qmul.ac.uk).

## Barts Health new Records Retention and Disposal Policy

Key points of the new policy for those who use the Barts Health Records Management system for storing their research-related files are as follows:

- Record to retained include all documentation, in any format, of any type from any departments, including, but not

limited to, Sponsor Files, Contracts, financial records, Trial Master file, site file, pharmacy site file, laboratory files, laboratory accreditation, and lab books, source data, Standard operating procedures, personal training records

- Research falling under the remit of the Medicines & Healthcare products Regulatory Agency or international equivalent: 25 years' retention.
- Advanced therapy medicinal products (as defined by MHRA): 30 years' retention
- Research where participants Care or treatment is being changed (interventional studies): 25 years' retention
- Research studies (ie, any study related to human research where no change to participant care or treatment occurs) or any non-clinical research project: 5 years' retention.

For those with access to the Trust's WeShare system, a copy of the full new Policy can be found [here](#).

To discuss this further please contact either Dr Mays Jawad, R&D Governance Operations Manager at [m.jawad@qmul.ac.uk](mailto:m.jawad@qmul.ac.uk) or Barts Health's Records Management team at [records.management@nhs.net](mailto:records.management@nhs.net)

## Electronic Health Records and MHRA Compliance

Recently, in anticipation of a routine MHRA inspection, a plan to validate Barts Health's Electronic Health Record (EHR) system against MHRA requirements has been signed-off. The JRMO's GCP Team is now working with Trust-IT/Clinical Systems to compile a list of electronic data systems where patient source data may be held as the MHRA expects these systems to comply with GCP. An audit checklist, validating this compliance, is now in place and system owners need to complete that checklist to enable their systems to be signed-off, ready for any potential MHRA inspection. The first system that has been validated and confirmed to be MHRA compliant is Millennium. Other systems will now be prioritised. Please contact Marie-Claire Good on [m.good@qmul.ac.uk](mailto:m.good@qmul.ac.uk) for further information.

## Data migration and cleaning

This is ongoing within the Research Governance Section (JRMO) as the team migrates data from ReDA to EDGE (Local Portfolio Management System). All study teams have been contacted by the JRMO to request updates on study status to ensure that our data is accurate and up-to-date. The aim is to update our system with regards to data accuracy, Annual Progress Reports, study closures and registration of Clinical trials on public databases. Please ensure you respond promptly if you receive an email request so that the system can be updated. For any support please contact the team: [research.governance@qmul.ac.uk](mailto:research.governance@qmul.ac.uk).

## New JRMO SOPs online

Since the last Research News Bulletin the JRMO has released the following revised Standard Operating Procedure (SOP) and associated documents:

### [SOP 47 Trial Committees](#)

- AD1 - NIHR TSC Guidance
- AD2 - Sample Charter template
- AD3 - DAMOCLES Charter DMC
- AD4 - Competing interests form
- Guidance appendices

A full set of our SOPs can be found on [the JRMO website here](#).

# Research people

## Queen Mary academics receive New Year honours

Two research-active academics from Queen Mary University of London have been recognised in the Queen's New Year Honours list.

- **Dr Victoria Tzortziou Brown**, an academic in Barts and The London School of Medicine and Dentistry, General Practitioner in the London Borough of Tower Hamlets and Joint Honorary Secretary at the Royal College of General Practitioners (RCGP), has been appointed an Officer of the Order of the British Empire (OBE) for services to General Practice.
- **Prof Colin Bailey**, President and Principal of Queen Mary University of London has been appointed a Commander of the Order of the British Empire (CBE) for services to Engineering.

A full list of this the 2020 New Year honours can be found [here](#)

## Barts Urologist receives award for work improving young men's health

Richard Menzies-Wilson, Clinical Research Fellow in Urology at Whipps Cross Hospital, received the Winter Short Papers Prize from Mike Dineen, President of the RSM Section of Urology for his innovative work on Testicular Torsion.

Testicular Torsion occurs when a testicle twists causing it to lose its blood supply. When this happens there is a crucial window of about six hours to intervene. Torsion occurs in about 1 in 4,000 men under 25 years old and is the most common reason for men in this cohort to lose a testicle. Salvage rates have not improved for around 20 years, with testicles saved in only 60% of cases.



Richard Menzies-Wilson, working with Prof James Green, obtained data from NHS England of all the 'serious incidents' which occurred in England over a 12 year period relating to testicular torsion. This data was then analysed to establish the common factors which result in lost testicles. They found that there were 1,009 serious incidents over 12 years and that the common reasons for delays in treatment included misdiagnosis, doctors

being unclear on which specialists to refer cases to, cases not being recognised as urgent, and delays in ambulance transfers.

[More information about this award and research project can be found here.](#)

## Our research

### **A new low-cost, non-intrusive solution to save children's teeth**

A study led by Queen Mary's Professor of Dental Public Health, Prof Cynthia Pine, has identified a low-cost and low-intensity intervention technique that could prevent tooth decay for thousands of children across the UK

During 2017-18, 33,779 children aged nine or under were admitted to hospital to have teeth extracted because of tooth decay. It is the single highest reason for children to be admitted to a hospital and each extraction costs the NHS around £1,000. While surgery deals with the immediate problem, it cannot stop future decay. In a study led by Prof Pine, researchers found that a single therapeutic conversation by trained dental nurses with families of children having teeth extracted has led to a 29% reduction in risk of those children having new tooth decay.



Prof Pine and her team developed a 'talking' intervention and trained dental nurses to have a therapeutic conversation with parents of children coming to have their children's teeth taken out. The 'Dental Recur Brief Negotiated Interview' (DR-BNI) is based on two methods: motivational interviewing; and behaviour change techniques. The trial ran in 12 centres in the UK with over 200 families of five to seven-year-old children having baby teeth extracted. Families had an equal chance of having the DR-BNI or a control conversation about new adult teeth.

DR-BNI focuses on how families can prevent tooth decay in the future. Rather than telling families what to do, they choose goals they feel they can do, like swapping sweet drinks for unsweetened ones or brushing their child's teeth at bedtime. The 'control' families were advised to visit the dentist as usual.

In a wide range of high-risk children across the UK, this single, low cost, and low-intensity intervention was successful in significantly reducing the risk of new decay experience. DR-BNI provides opportunities for dental nurses to go beyond clinical prevention to facilitate behaviour change, and to support oral health improvements for children at high risk of developing tooth decay. The research team have now been invited by Health Education North West to develop the DR-BNI into a training module for dental nurses in the NHS. They plan to have the DR-BNI available by early Spring 2020.

Full details of this research are available in the [Journal of Dental Research](#)

### **Major funding award for collaborative UK-German research secured**

Dr Daniel Lee, Lecturer in Modern French History in Queen Mary's School of History has successfully secured a collaborative research award under the Arts and Humanities Research Council (AHRC) and the German Research Foundation (DFG).



The research project, 'Jewish Pimps, Prostitutes and Campaigners in a



Transnational German and British Context 1875-1940', is a collaborative project with the Center for Research on Antisemitism (Zentrum für Antisemitismusforschung, ZfA) at Berlin's Technische Universität, Berlin.

Dr Lee will work with Dr Stefanie Fischer on the project which received almost £700,000 in funding and encompasses disciplines including Modern and Current History, Religious Studies as well as Jewish Studies.

The project is expected to begin in 2020 and will run for three years. It will draw on the expertise of a project group specialising in the study of gender, antisemitism and migration to investigate the phenomenon of Jewish involvement in the sex trade. While in the late nineteenth century up until the Second World War, Jews were consistently demonised by anti-Semites because of their role in the trade as prostitutes, pimps and brothel owners, they have featured only marginally in recent studies of prostitution that in recent years has experienced a renewed interest.

This AHRC and DFG research award brings together arts and humanities researchers in the UK and Germany to conduct outstanding joint research projects. The successful projects were selected through a competitive process, leading to a joint peer review panel meeting in autumn 2019. Demand for the awards was high with over 170 joint applications submitted.

To find out more about the [collaborative research award under the AHRC and the DFG](#) [click here](#).

### **Researchers identify link between cannabis use and changes to the heart**

Regular cannabis use could affect the structure and function of the heart, research led by Dr Mohammed Khanji consultant cardiologist at Newham Hospital and Barts Heart Centre, suggests.

Analysing MRI images from the UK Biobank population study, the team identified an association between regular cannabis use and an enlarged left ventricle – the heart's main pumping chamber – together with early signs of impairment of heart function.

The study analysed cardiac scans for 3,407 individuals with an average age of 62 who did

not have cardiovascular disease.



Most (3,255) rarely or never used cannabis, 105 had used it regularly but more than five years before they were interviewed and 47 were current regular users. The latter group were more likely to have larger left ventricles and show early signs of impaired heart function, measured by how the heart muscle fibres deform during contraction. However, there appeared to be no difference between the three groups in the overall mass of the left ventricle or the amount of blood ejected with each heartbeat. No changes were identified in the size and function of the other three chambers of the heart. The analysis also found that people who had used cannabis regularly but given up had similar heart size and function to those who had rarely or never taken the drug.

This is the first study to systematically report changes in heart structure and function associated with recreational cannabis using cardiac MRI. Further work in this area will allow health professionals and policymakers to improve advice to patients and the wider public.

[For more information on this please visit the Barts Health website here.](#)

### **Queen Mary research team identifies new route for tackling drug resistance in skin cancer**

Researchers at Queen Mary University of London have found that melanoma cells fight anti-cancer drugs by changing their internal skeleton (cytoskeleton) – opening up a new therapeutic route for combatting skin and other cancers that develop resistance to treatment.

The team from Barts Cancer Institute, led by Prof Victoria Sanz-Moreno, found that

melanoma cells stop responding to both immunotherapies and drugs targeted at the tumour's faulty genes by increasing the activity of two cytoskeletal proteins – ROCK and Myosin II. The researchers found that these molecules are key for cancer cell survival and resistance to these treatments.

The molecules had previously been linked to the process of metastatic spread but not to the poor impact of current anti-melanoma therapies. This work points to a strong connection between metastasis and therapy resistance – confirming that the cytoskeleton is important in determining how aggressive a cancer is.

Malignant melanoma has very poor survival rates despite being at the forefront of personalised immunotherapy. This is largely due to the development of resistance. Around 16,000 people in the UK are diagnosed with malignant melanoma each year, with more than 2,300 deaths. The team discovered that blocking the ROCK-Myosin II pathway not only reduces cancer cell growth but also attacks faulty immune cells that are failing to kill the tumour. This action boosts anti-tumour immunity.

These findings are published [in the journal Cancer Cell](#).

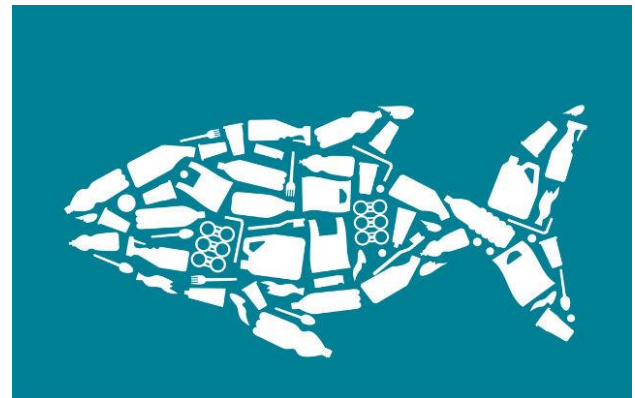
This research was part-funded by Barts Charity, Cancer Research UK and the Harry J Lloyd Charitable Trust and involved researchers from the Francis Crick Institute, King's College London and the Institute of Cancer Research, [for more information click here](#).

### **Fish oil does fight inflammatory disease**

The debate about the potential for exploiting omega-3 fatty acids to improve health has been going on for years. A new study led by Prof Jesmond Dalli, Professor of Molecular Pharmacology at Queen Mary's William Harvey Institute, has found that properly-formulated enriched fish oil supplements do

increase levels of anti-inflammatory molecules or mediators in the bloodstream and reduced inflammation. These mediators regulate the work of certain components in the blood. Inflammation is linked to a number of serious health conditions including some heart disease and rheumatoid arthritis.

Prof Dalli and his colleagues gave 22 healthy volunteers aged between 19 and 37 three doses of an enriched fish oil supplement containing a mix of omega-3 fatty acids. They then tested their blood at varying intervals for levels of the specific anti-inflammatory molecules that those fatty acids produce. The team found the supplement increased the level of the anti-inflammatory molecules for up to 24 hours.



Prof Dalli said that while it remains unclear if those molecules reduce cardiovascular disease, they do supercharge macrophages, specialized cells that destroy bacteria and eliminate dead cells, and they also make platelets less sticky, potentially reducing the formation of blood clots. The molecules have also been shown to play a role in tissue regeneration. Further research is needed to also discover if fatty acids have the same anti-inflammatory effects in people over 45 and in those who already have cardiac disease.

The study was part-funded by Barts Charity, the European Research Council, Wellcome Trust and the Royal Society. The full paper can be accessed [here](#).

# Events

## On the road with JRMO Drop-in Sessions

The JRMO is delighted to announce it is continuing with an expansion of Drop-in Sessions across the various Barts Health hospital and Queen Mary campus sites.

Further to the ongoing success of [monthly drop-in sessions for researchers](#) on the **Royal London Hospital** and **Whitechapel campus sites**, which continue to take place on the second Wednesday of every month at the JRMO Office on Walden Street, and an event at **Newham Hospital** last week, the following events are planned:

- **Charterhouse Square:** Tuesday 3 March, 9.30am – 12.30pm. Venue: Top Floor, John Langdon Down House (Old Lodge House), Charterhouse Square, EC1M 6BQ
- **Whipps Cross Hospital:** Tuesday 11 February; before and after the Grand Round (1-2pm). Venue: MEC Lecture Theatre, Medical Education Centre, Whipps Cross Hospital, Whipps Cross Road, E11 1NR

There is no need to book - please just turn up.

JRMO staff are happy to assist with any research support topics including study set-up, research governance and sponsorship, research ethics, GCP advice, research passports and staff access, finance and funding, costing and contracts, and patient and public involvement in research.

For further information please click [here](#).



## The Future of Health: The future of diagnostics (Royal Institution)

How are genes, proteins, and smartphones shaping the way we tackle disease? Is wearable technology such as the Apple Watch, which can monitor people for signs of stroke/heart attack and alert health services automatically, the future? What are the emerging ethical issues around digital health data, different risk profiles, and can they be overcome? What is the future of screening, and what are the decision trees in allocating scarce resource? These questions and many more will be answered by a panel of experts at this event 7 - 8.30 pm on Tuesday 4 February. The event is the first in The Royal Institution series on 'The Future of Health'. For more details, and to book your place, [click here](#)

## Bookings now open for RDF20

The Annual R&D Forum Conference for 2020 will take place in Newcastle from the 10-12 May. Over 500 delegates from across health and care research are expected to attend.

RDF advises delegates to book early to ensure a place and take advantage of the early-bird rate that ends on 31 January 2020. The Sunday night workshop and networking buffet will take place in the Crowne Plaza Newcastle and the rest of the conference is being held at Sage Gateshead.

This year delegates have the option of choosing their conference hotel during the booking process. Make sure you read the notes for each hotel and their location before you complete your booking.

All the details are available on [the conference website](#)

Any enquiries should be directed to [RDF20@delegant.co.uk](mailto:RDF20@delegant.co.uk)

## Be part of the Festival of Communities 2020

The Festival of Communities is returning for its fifth year on the weekend of 13-14 June, taking place in Stepney Green Park on Saturday 13 June and the Queen Mary Mile End Campus on Sunday 14 June.



The Festival of Communities is a collaboration between Queen Mary and local-based organisations. Over 3500 visitors joined us over the weekend last year with activities designed to enable local families to learn something new or try something different.

The team is looking for projects and for people interested in taking part by running a hands-on activity, demonstration, stall, exhibit, or help in other ways – they are open to fun and creative ideas!

To support the creation of new activities for the festival, or to adapt existing ones, anyone with a Queen Mary budget code can [apply for up to £500](#) of funding through the Centre for Public Engagement. The CPE team are available to offer advice on your engagement activity design through Festival [advice sessions](#) and a [training session](#). This funding opportunity closes at the end of day on Monday 30 March.

Please [visit the Festival website](#) or email [publicengagement@qmul.ac.uk](mailto:publicengagement@qmul.ac.uk) for more details.

## Training

### JRMO researcher training courses

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](#).

- GCP Refresher courses are held monthly and the next course is February 26 (spaces available).
- GCP Full courses are alternate months with the next course being February 11 – 12 (spaces available).
- The next Non-CTIMP GCP course is April 21 and spaces are available.
- The next GCP for Lab staff course is May 20, 2020. This is now full but you can book on to the waiting list.
- The next 3-day Governance training is March – April 2020 (which is full) but spaces are available on June – August 2020 courses.

For more information on all JRMO training, including how to book, please [see the Training page on the JRMO website](#).

The Full, Refresher and Non-CTIMP Good Clinical Practice courses are now accredited on the TransCelerate GCP Mutual Recognition Program for ICH E6 Good Clinical Practice Training.

This program is focused at investigator site personnel and provides assurance to sponsors that personnel have attained ICH Good Clinical Practice training meeting the identified minimum criteria.

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

### Improving Healthcare through Clinical Research - NIHR 'Massive Open Online Course' (MOOC)

The next presentation of 'Improving Healthcare through Clinical Research' starts on 3 February 2020.

The online course runs for four weeks and new learners can join at any time. During this course, you will learn how medical treatments are discovered, tested and evaluated to

improve healthcare for all.

[To find out more please log into the NIHR hub here](#)

### **Research - but not as we know it! Managing novel methods in research symposium**

Following on from the success of a recent symposia, RD Forum has planned a third event to focus on exploring how we can manage novel studies that have complex or novel designs like adaptive and umbrella trials. This symposium has been put together following the industrial strategy and life sciences sector deal 2.

Adaptive designs are likely to become more commonplace for both sites and sponsors and so we aim to look at how we can build our confidence as a community to ensure they are able to run well in the NHS.

Taking place on 2 March 2020 in London, keynote speakers include:

- Emma Lowe, Research Policy Senior Manager – Industry Relations & Growth, Department of Health & Social Care,
- Dr Kirsty Wydenbach, Deputy Unit Manager / Senior Medical Assessor, Clinical Trials Unit, MHRA
- Joanne Plumb, Deputy Director of Research Development and Innovation, University Hospitals Birmingham NHS Foundation Trust
- The Conduct Methodology team at MRC CTU at University College London

[For more information, and to book a place, please click here.](#)

### **WFC Training**

WFC recognise that your needs are unique and an off-the-shelf solution is rarely sufficient. As such, we offer our selection of training, education and workforce development courses on a hosted basis only.

Their hosted courses are capped at 15 delegates to ensure that an entire team can attend. Hosted courses are delivered upon the request of a client; the client provides the training venue and the course is scheduled in accordance with their needs. The content of the course is developed to be fully bespoke to the client.

Visit [the WFC group website](#) to discuss your training needs.

### **ECRs Network Workshops**

The Humanities and Social Sciences (HSS) Early Career Researchers (ECRs) Network was established to offer support to researchers at the beginning of their academic careers. As well as regular talks and workshops there are opportunities to meet other ECRs from across the Faculty to share the experience and knowledge in getting careers started.

Forthcoming courses include:

- The Art of Costing your Research Grant – 11 February, 11am
- Importance of Public Engagement and Impact beyond REF - 25 February, noon
- Routes into Academia: External Funding Opportunities for ECRs – 18 March, noon
- How to make social media work for you and your career – 5 Mays, noon

For more information and to book a place on one of these courses [please click here](#).

### **Free Courses in England**

The Free Courses in England website is the home of flexible learning. It works to support the professional development of individuals and businesses across England with free online courses. The following are just some of the courses you can link onto from its website:

- [Digital Skills Level 1](#)
- [Technology-based Solutions Within a Health and Social Care Setting](#)
- [Understanding Personal Care Needs](#)
- [Awareness of Bullying in Children and Young People](#)
- [Event Planning](#)
- [Understanding Stewarding at Spectator Events](#)
- [Improving Service User Experience in Health and Social Care](#)
- [Digital Skills for Work](#)
- [Understanding Workplace Violence and Harassment](#)
- [Awareness of Mental Health Problems](#)
- [Counselling Skills](#)
- [Understanding Autism](#)
- [Principles of Team Leading](#)
- [Principles of Business Administration](#)

Click on the links above to learn more. All of these courses are fully accredited by NCFE and successful completers will be awarded a formal qualification. They are also all funded, meaning there is no cost to you whatsoever. They are an excellent way of providing valuable professional development.

### RDS London drop-in clinics

RDS London holds regular next drop-in clinics for researchers preparing applications to NIHR Applied Health Streams (RfPB, EME, HTA, Programme Grants, Programme Development Grants and Fellowships) or medical charities.

Drop-ins take place in East London on the last Friday of the month. RDS London can support researchers at all stages of preparing grant applications. Advice and guidance can be provided on study design, identifying a research team and targeting an appropriate funding stream.

The next East London clinic will be held on Fridays 31 January, 28 February and 27 March, all 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.](#)

## Research funding

### NBIC Proof of Concept Call Now Open

The National Biofilms Innovation Centre (NBIC) has launched its third call for proposals for Proof of Concept (POC) projects from interested parties who have the experience and knowledge necessary to investigate and exploit areas in which biofilms play a central part. All projects proposed will be considered and ranked on their merits based on a number of criteria, with the intention that the selected projects will form a high-quality portfolio of POC projects.

To apply to NBIC for funding for a POC project, you must use the NBIC POC application form and should answer all questions within the word count suggested, as well as obtaining relevant approval on funding and initial agreement on IPR arrangement. The project may be the first between a set of collaborators or may come from an existing relationship.

NBIC expects to fund up to 25 projects, lasting on average 6 months, and for NBIC's contribution to be on average £50K in total for each project. Projects should propose additional sources of matched funding either as in-kind and/or financial support that will enhance the quality of the bid and the outcomes anticipated. The level of matched funding will be used as part of the assessment process of the project. Historically the average successful projects have a matched contribution from collaborating partners of 30% of the total project value.

**Call closes on 6 March 2020** with decisions and offers being made in early June.

The collaborative POC application should be jointly written but must be submitted by the lead academic from the NBIC Partner Research Institutions. For more information [please click here.](#)

### The Curriers' Company Millennium Healthcare Bursary 2020

The Curriers' Millennium Trust awards bursaries (up to £10,000 over two years) on an annual basis providing funding for pilot research projects and professional development training courses. Applications are welcomed from any qualified practitioner in Primary Healthcare working in the London area.

The next closing date is **31 March 2020**. Interviews this year are in June 2020 and awards made the same day.

Please [visit the Curriers Company website here](#) for more information.



## NIHR funding deadlines

- [19/131 Short-term use of benzodiazepines for the acute management of acute low back pain](#)  
**Closes:** 29 January 2020  
 The Health Technology Assessment (HTA) Programme is accepting stage 1 applications to their commissioned workstream for this primary research topic.
- [19/132 A clinical prediction rule for postoperative atrial fibrillation in patients undergoing cardiac surgery](#)  
**Closes:** 29 January 2020  
 The HTA Programme is accepting stage 1 applications to their commissioned workstream for this primary research topic.
- [NIHR Global Health Research Short Placement Award for Research Collaboration Pilot](#)  
**Closes:** 7 February 2020  
 NIHR Global Health Research Short Placement Award for Research Collaboration (NIHR GHR SPARC) Pilot (Round 1 2019) is OPEN for applications until 1pm (GMT) on 7 February 2020.
- [19/119 Mechanisms of action of health interventions](#)  
**Closes:** 5 March 2020  
 The Efficacy and Mechanism Evaluation (EME) Programme is accepting stage 2 applications to their commissioned workstream for this funding opportunity.
- [Research for Patient Benefit Programme - Competition 41](#)  
**Closes:** 18 March 2020  
 Applications are invited for research proposals that are concerned with the day-to-day practice of health service staff, and which have the potential to have an impact on the health or wellbeing of patients and users of the NHS.
- [9/133 Continuing priority research topics of interest to the PHR Programme](#)  
**Closes:** 24 March 2020  
 The Public Health Research (PHR) Programme are accepting stage 1 applications to their commissioned workstream for this topic
- [19/134 Public Health Research Programme Researcher-led](#)  
**Closes:** 24 March 2020  
 The PHR Programme is accepting stage 1 applications to their researcher-led workstream.
- [19/156 PHR oral and dental health](#)  
**Closes:** 24 March 2020  
 PHR is interested in research interventions that operate at a population level and of relevance to local government. It is not calling for research of individual-level interventions.
- [19/136 Evaluating interventions for the diagnosis and treatment of autoimmune diseases](#)  
**Closes:** 16 April 2020  
 The EME Programme is accepting stage 1 applications for this primary research topic.
- [19/137 Bipolar disorder](#)  
**Closes:** 16 April 2020  
 The EME Programme is accepting stage 1 applications for this primary research topic.
- [19/138 Efficacy and Mechanism Evaluation Programme Researcher-led](#)  
**Closes:** 16 April 2020  
 The EME Programme is accepting stage 1 applications to their researcher-led workstream.
- [19/139 Mitigation of the adverse effects of health and social care interventions](#)  
**Closes:** 16 April 2020  
 The EME Programme is accepting stage 1 applications for this primary research topic.
- [20/04 Building clinical trials experience: Applications to lead an EME-funded clinical efficacy study as part of an NIHR Advanced Fellowship](#)  
**Closes:** 16 April 2020  
 The EME Programme is accepting applications for this funding opportunity.
- [19/153 EME oral and dental health](#)  
**Closes:** 16 April 2020  
 The EME Programme is accepting stage 1 applications for this funding opportunity.
- [20/02 - Health Services and Delivery Research Programme Researcher-led \(standard\)](#)

**Closes:** 23 April 2020  
The Health Services and Delivery Research (HS&DR) Programme are accepting stage 1 applications to their researcher-led workstream.

- [20/03 - Health Services and Delivery Research Programme Researcher-led \(evidence synthesis\)](#)  
**Closes:** 23 April 2020  
The Health Services and Delivery Research (HS&DR) Programme is accepting stage 2 evidence synthesis applications to their researcher-led workstream.
- [19/160 - Health Technology Assessment Programme researcher-led primary research](#)  
**Closes:** 6 May 2020  
The Health Technology Assessment Programme is accepting stage 1 applications to their researcher-led workstream.
- [19/161 - Health Technology Assessment Programme researcher-led evidence synthesis](#)  
**Closes:** 6 May 2020  
The Health Technology Assessment Programme is accepting stage 1 applications to their researcher-led workstream.
- [19/155 HTA oral and dental health](#)  
**Closes:** 6 May 2020  
The HTA Programme is accepting stage 1 applications for this funding opportunity.
- [19/154 HSDR oral and dental health](#)  
**Closes:** 7 May 2020  
The HS&DR Programme is accepting stage 1 applications for this funding opportunity.

For further information on these and other grants available from the NIHR please see the NIHR website:

<https://www.nihr.ac.uk/researchers/funding-opportunities/>

To subscribe to the NIHR's themed call mailing list please [click here](#).



**UK Research  
and Innovation**

## UKRI-MRC funding deadlines

- [Joint Global Health Trials \(JGHT\) – Call 10 Trial Development](#)  
**Closing date:** 5 Feb 2020  
The UK Department for International Development (DFID), the National Institute for Health Research (NIHR), the MRC and Wellcome are pleased to announce the launch of the 10th call for proposals under this initiative to fund global health trials.
- [Confidence in Concept 2019](#)  
**Closing date:** 5 Feb 2020  
The Confidence in Concept (CiC) scheme is a key part of MRC's translational research strategy and provides annual awards of up to £1m to institutions, to be used flexibly to support the earliest stages of multiple translational research projects.
- [Tackling multimorbidity at scale: Understanding disease clusters, determinants & biological pathways](#)  
**Closing date:** 11 Feb 2020  
Multimorbidity is associated with a reduction in quality of life, increased use of health services and reduced life expectancy. As the number of conditions that an individual has increases so does the likelihood of increased healthcare costs. Multimorbidity has suffered scientifically from being seen as a random assortment of diseases, making it difficult to address.
- [MRC-AMED Regenerative Medicine and Stem Cell Research Initiative](#)  
**Closing date:** 20 Feb 2020  
The MRC and the Japan Agency for Medical Research and Development (AMED) are pleased to invite proposals to the UK-Japan Regenerative Medicine and Stem Cell Research Initiative.
- [UK Nutrition Research Partnership \(UK NRP\): Travelling Skills Awards for Nutrition-related Research](#)  
**Closing date:** 27 Feb 2020  
The UK NRP (Nutrition Research Partnership for health and disease) wishes to strengthen the UK nutrition research base by supporting the integration of nutrition-related science with research in health and disease with the aim of optimising health outcomes.



## BMA Foundation for Medical Research grants

The BMA Foundation for Medical Research has various grants available – see below. They all have the closing dates of 6 March 2020 and are for up to £60,000.



- **Dawkins & Strutt grant for research into gastroenterology** - To assist research in the field of gastroenterology. Applicants must be UK-registered medical practitioners or research scientists working in the UK. Projects must relate to the UK only.
- **Doris Hillier grant for research into rheumatism and arthritis** - To assist research into rheumatism and arthritis. Applicants must be UK-registered medical practitioners and a member of the BMA.
- **H C Roscoe grant for research into viral diseases of the respiratory system** - To promote research into the elimination of the common cold and/or other viral diseases of the human respiratory system. Applicants must be UK-registered medical practitioners or research scientists working in the UK.
- **Helen H Lawson grant for paediatric research** - To assist paediatric research. Applicants must be UK-registered medical practitioners and a member of the BMA.
- **J Moulton grant to assist research into mental health through clinical trials.** Applicants must be UK-registered medical practitioners or research scientists working

in the UK. Projects must relate to the UK only.

- **The James Trust grant for research into asthma** - To assist research into asthma. Applicants must be UK-registered medical practitioners and a member of the BMA.
- **Josephine Lansdell grant for research into heart disease** - To assist research in the field of heart disease. Applicants must be registered medical practitioners in the UK and a member of the BMA.
- **Kathleen Harper grant for research into antimicrobials** - To assist research into antimicrobials. Applicants must be UK-registered medical practitioners or research scientists in the UK.
- **Margaret Temple grant for research into schizophrenia** - To assist research into schizophrenia. Applicants must be UK-registered medical practitioners or research scientists working in the UK. Projects must relate to the UK only.
- **Scholarship grant to promote research into the mental health of medical students** - Applicants must be UK-registered medical practitioners or research scientists working in the UK. Projects must relate to the UK only.
- **TP Gunton grant for research into public health relating to cancer** - To assist research into public health relating to cancer. Applicants must be UK-registered medical practitioners or research scientists working in the UK.
- **Vera Down grant for research into neurological disorders** - To assist research into neurological disorders. Applicants must be registered medical practitioners in the UK and a member of the BMA.
- **J Moulton grant to assist research into stroke** - Applicants must be UK-registered medical practitioners or research scientists working in the UK. Projects must relate to the UK only.

For full details of these grants, along with the application methods, please [visit the BMA website here](#).

### Research professional

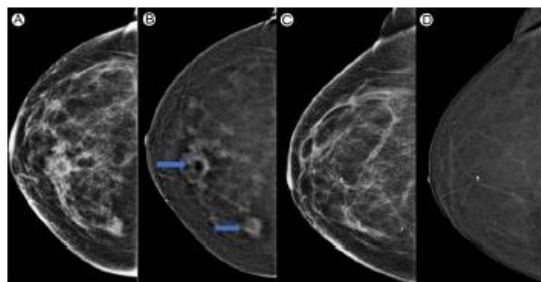
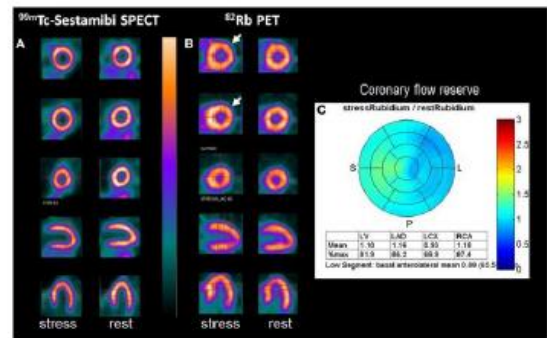
Research Professional (formerly Research Research) has an easy-to-use sign-up process: <http://www.researchprofessional.com/>

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

# Barts Charity funding at the Trust and School

## Transforming scans with unique tracer – £299,000

Scans for cardiac patients are being enhanced thanks to Barts Charity funding for a new type of camera and the tracer, rubidium. Scans will now provide doctors with more information to guide diagnosis, and the tracer is safer for patients as the radiation dose is only 1/5 of the normal risk. The tracer also means that imaging can be completed in one short appointment, while the current scans need to be taken on separate days.



## Improving cancer diagnoses on mammograms – £112,000

MRIs are the gold standard for breast cancer that is difficult to diagnose. However, the MRI unit is in high demand and can cause delays on patient's tests. Barts Charity is bringing a new technique to the service called Contrast Enhanced Spectral Mammography. It has been shown to be as good as MRI, but takes less than 15 minutes to perform and only a few minutes to interpret, meaning that patients can get started on the journey to recovery far faster.

## Cutting edge CT software helps clinicians make earlier diagnoses of lung cancer – £150,000

Survival rates for lung cancer can vary widely, depending on how far the cancer has spread at the time of diagnosis. Early diagnosis can make a big difference. With this Barts Charity grant, Barts Health will purchase a more advanced, accurate software which not only detects, but also measures lung nodules in a reliable way.



## New ultrasound machine for children at The Royal London – £96,000

Barts Charity is funding a new ultrasound machine for The Royal London's children's service. Currently, the service only has one dedicated ultrasound – meaning that patients requiring emergency scans may not have immediate access to the machine. Clinicians also hope to use the new machine to research techniques, such as elastography and contrast ultrasound, to save children from more risky tests.

# BARTS CHARITY

This is just a snapshot of Barts Charity's recent funding. Over the last financial year, the Charity have given the Trust and School £31m in total.

[Find out more about their funding >](#)  
[Apply for funding >](#)