

Joint Research Management Office Research News Bulletin

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Influence the future of UK research!

The 2024 Department for Science, Innovation and Technology (DSIT) 2024 Research and Innovation Workforce survey is now live!

Evidence collected through this survey is important for understanding how the R&I workforce is affected by government policy and will help the Government and funders make decisions based on evidence. The survey is being conducted by the [Behavioural Insights Team](#), an independent research organisation, on behalf of the DSIT.

Please [take the survey](#).

This is the second time this survey has been carried out, which is crucial for identifying changes for R&I workers over time. The [first workforce survey](#), conducted in 2022, has supported R&I policy work including research talent policy around research

culture, porosity, equality, diversity and inclusion.

The perspectives of all those who are involved in research set-up and delivery are crucial in helping to identify trends, challenges, and opportunities in UK R&I. This survey spans the full spectrum of R&I careers including but not limited to all researchers, technicians, engineers, R&I leaders, PhD students, and R&D managers. Your input can directly impact UK government policy and R&D funding decisions—get involved and participate now!

The survey takes 15-20 minutes to complete.

Further information on this year's survey can be found on [the Gov.UK website](#).

General queries about the questionnaire and survey outputs please contact the team at DSIT: riworkforcesurvey@dsit.gov.uk.



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~ Please 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

Seeking NIHR Regional Research Specialty & Settings Leads (RRSL)

The NIHR North London RRDN will be one of 12 Networks which will replace the existing Local Clinical Research Networks (LCRNs) throughout the country from 1 October 2024.

RRDNs will support the effective and efficient initiation and delivery of funded research across the health and care system in England for the benefit of patients, the health and care system and the economy.

The [29 specialties and four settings](#) roles will play a key leadership role in the ongoing development and performance of the RRDN. The function will provide leadership and advice, support research delivery, and participation in regional or national projects relating to specialty or setting capacity, capability and accessibility for research delivery.

The closing date for applications is 11.59 pm on Sunday, 15 September.

After shortlisting, shortlisted candidates will be contacted by email and invited to attend a virtual interview, which will take place from Wednesday, 2 October to Tuesday, 15 October.

For more details about the role along with the expression of interest form [please follow this link](#)



Changes to MHRA Annual Safety Reporting (DSUR) Submissions and Fees process

Payments associated with the submission of annual safety reports (DSURS and ASRs) to

the MHRA will only be accepted through the online portal [MHRA Pay](#)

A receipt generated via MHRA Pay will be sent by email upon completion of payment. That must be included in the submission of the annual safety report as proof of payment.

Failure to provide evidence of payment will result in the submission being made invalid and the risk of non-compliance.

The cover letter accompanying the submission must include

- a listing of all the IRAS IDs and/or EudraCT numbers of trials covered by the annual safety report
- an email address for correspondence
- the submission reference number in the format:

'DSUR-[5 digit MHRA company number – see below]-[IMP name]-[Payment date DD/MM/YYYY]'

Use the correct Company Number for your study:

QMUL Sponsor: 21313

Barts Health Sponsor: 14620

Further information, including details of how the fees apply and how this should be managed if trials have been approved via the Combined Review Process, can be found [on the Gov.UK website](#).

Payment for other submission types (initial applications/amendments) remains unchanged.

If you are unable to make payment using "MHRA pay" please contact your Sponsor finance team to discuss the process of making credit and debit card payments.

IQVIA publishes report: Rethinking Clinical Trial Country Prioritization - Enabling agility through global diversification

The biopharma clinical research ecosystem has been undergoing a significant evolution in the last five years as technological, environmental, societal, regulatory, and geopolitical shifts have reshaped the clinical trial pipeline of activity and operations.

Together these changes have converged to enable the emergence of new global players.

In places, the shifts have contributed to challenges, delays, capacity concerns, and ongoing uncertainty resulting in slower clinical development program timelines with an impact on patient treatment options and outcomes. With these changes, clinical trial country prioritization has become a critical focus across clinical research stakeholders.

This report details the need for clinical trial global diversification by assessing trends in enrolment timelines, trial characteristics, and country utilisation over the past five years. It examines the recent shifts and consolidation in regional and country clinical trial allocation, including an analysis of the role of single-country trials.

Key findings:

- Clinical trial enrolment duration has been increasing over the past five years, and the time from trial start to the end of enrolment has increased by 26%.
- Over the same period, clinical trial country utilization has been declining while key drivers of clinical trial complexity have been increasing.
- Combined with serial geopolitical, health and environmental disruption and uncertainty in the clinical trial operating ecosystem, this suggests an opportunity to diversify country use to mitigate risks.
- Country use by region has shifted significantly in the past five years with Western Europe's share declining from 32% to 25% of the global total; Eastern Europe's share decreasing from 17% to 11%; North America's share increasing from 19% to 23%, and China's share increasing from 10% to 15%.
- Analysis of country attributes has enabled an industry- and stakeholder-wide view of readiness for clinical trials in the form of a Clinical Trial Readiness Score that allows for ranking of countries by trial type and examination of specific investment and improvement opportunities to increase use of potentially underutilized countries.

For more information and to read the full report please [visit the IQVIA website](#).



QM transparent costing time allocation survey

Queen Mary's finance team is currently running a time allocation survey: the Transparent Approach to Costing (TRAC).

TRAC is an activity-based costing methodology that has been used by the Higher Education sector for several years. All universities must complete a yearly TRAC return, which is submitted to the Office for Students (OfS). The return entails assessing income and costs from audited financial documents and allocating time among the TRAC activities of teaching, research and 'other'.



This is more than just a data-gathering exercise. TRAC data is used to generate research income through the TRAC Research Charge Out Rates (indirect rate, estates rates, lab technician rates and research facility rates) which are used to apply for funding from Research Councils. Additionally, the data is used by the OfS for sector-wide benchmarking and can influence government decisions on funding for higher education.

The survey is split into three phases, each covering 4 months. The final phase covering the period from May to August will be surveyed in September, when academic staff will receive an email to request that they complete the survey. Responses from individual members of staff are confidential and are not revealed and will only be used to produce the aggregated data on the school.

More information about TRAC can be found on the [Queen Mary website](#). Please email Jeremy Beal - j.beal@qmul.ac.uk - if you have any queries regarding TRAC or the survey process.

HTRC Inspection Success

The Human Tissue Authority (HTA) recently inspected the Barts Human Tissue Resource Centre (HTRA) licence and the facility itself. The inspection took place on 29 May (remotely) and on 6 and 7 June on site.

The HTA's role is to ensure that human tissue is used safely, ethically, and with proper consent, in accordance with the Human Tissue Act. It regulates organisations that remove, store or use tissue for research, medical treatment, post-mortem examination, teaching and display in public.

The HTA Research Licence cover the hub site at Charterhouse Square, plus four satellite sites: the Blizard Institute, St Bartholomew's Hospital, the Institute of Dentistry, and the Mile End campus. In all, there are 22 centres storing tissue for research at Barts and Queen Mary.

The inspection outcome was very positive; no critical shortfalls and only three minor shortfalls. These were all immediately addressed and closed before the report was published. Five areas of advice were discussed to help further improve practices.

Katie Ersapah, the Designated Individual for the licence, said "I would like to thank all the colleagues who worked hard to prepare for this inspection. They should all be proud of such a successful outcome. The inspector was very complimentary of the robust governance system, the good communication and open relationship between the centres and the DI, as well as the strong work ethic of the teams."

Information about the work of the [HTRC can be found on the JRMO website](#). The full HTA inspection report can be found [on the HTA website](#)

For any further information regarding the HTA Research licence, please contact Katie Ersapah (k.ersapah@nhs.net).



Finding out what matters most to people in research

The Health Research Authority (HRA) has spent the past few months meeting charities and patient-representative organisations to find out about research issues that matter to people.



The HRA team met with representatives from Alzheimer's Research UK and members of Huntington's Disease Voice, an organisation hosted by the Huntington's Disease Association. The conversations were invaluable and will inform the next steps to improve people's experiences of health and social care research.

The HRA intends to use the feedback to think about what topics could be further discussed with its own staff and Research Ethics Committee members and identify whether they need further support to help them identify and act on issues that matter to people in research. The feedback will also help improve people's experiences of health and social care research and inform the HRA's future strategy.

Over the coming months, the HRA intends to reach out to more charities, patient-representative organisations, and community groups to discover what matters most to them.

If you work with an organisation that you think it would be useful for us to speak to please let us know by emailing kirsty.edwards@hra.nhs.uk

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

HRA report recommends improving clinical research for participants



The HRA has published [a report](#) that makes a series of recommendations for how to improve clinical research for participants. Earlier this year it carried out a project in partnership with members of the public, researchers and academics from the [University of Lincoln](#) that asked more than 400 people about their experiences of health and social care research.

The project aimed to find out what researchers should do to make sure that the people who take part in clinical research, and those who will be affected by the outcomes of research, are the focus. The conclusion was that research that works in the right way for people should be called '[people-centred](#)' research.

The report focussed on data from a survey carried out in 2023 plus additional feedback. It found that there were barriers that can stop research from being people-centred, as well as things that can help. Together these form 19 recommendations for actions that researchers need to take:

Possibility – make it possible for people to take part in research.

1. accessibility
2. available opportunities
3. cost and inconvenience
4. exclusion and inequity
5. information about research

Trust – treat people well and with respect.

6. fears about safety, confidentiality and disrespect
7. care and recognition
8. communication

Purpose – undertake meaningful research.

9. co-production and collaboration
10. research designs
11. impact
12. engagement

Culture and capacity – be people-focused.

13. mindset and attitude
14. advocacy
15. system capacity
16. system support, administration and leadership
17. ethics processes
18. training development and skills
19. funding and resources

[You can read more about these recommendations on the HRA website](#)

HRA removes requirement to submit annual progress reports (APR)

The Hra has removed this requirement to help reduce the burden on researchers. **This change took effect throughout the UK from 1 August 2024.** Further information about the new process is available [on the HRA website](#).

The changes are:

- removal of the requirement to submit annual progress reports
- changes to how HRA acknowledge Suspected Unexpected Serious Adverse Reactions (SUSARS) and annual safety reports

Annual reviews should continue to be submitted to the Confidentiality Advisory Group (CAG) using the form on [IRAS](#). In addition, researchers must still submit an end-of-study declaration and final study report to the REC.

To reduce duplication, the HRA has also changed how they acknowledge Suspected Unexpected Serious Adverse Reactions (SUSARS) and annual safety reports. Fatal and life-threatening SUSARS should continue to be reported to the Medicine and Healthcare Products Regulatory Agency (MHRA) and the REC as soon as possible.

SUSARS and safety reports for CTIMPs should now be submitted to the MHRA only. If the safety report requires action, the MHRA will instruct the study team to submit a substantial amendment. Other SUSARS or annual safety reports submitted UK-wide will be acknowledged by email by the REC but will not be signed and returned, the email will act as the formal acknowledgement.

Barts multiple listings for CRN NT Research Awards

The CRN North Thames Research Awards will take place on 12 September at the Royal College of Physicians in central London. Congratulations to all those shortlisted in the various categories.

Barts Health professionals and teams have been shortlisted in the following categories:

- Research Nurse of the Year
- Research Midwife of the Year
- Clinical Research Practitioner of the Year
- Allied Health Professional of the Year
- Data Manager of the Year
- NIHR Associate PI of the Year
- Excellence in PPIE of the Year
- Outstanding Achievement by a Team of the Year
- Outstanding Performance in Commercial Research Delivery
- R&D Office of the Year
- Community Engagement

We publish the results in the next issue of this Bulletin. To read more about the Awards and see the full shortlist please visit the [CRN NT awards website](#).

#StepForward to volunteer to be a REC member

The HRA is seeking doctors and pharmacists to #StepForward and volunteer as a Research Ethics Committee (REC) member to support vital health and social care research.

As a REC member, you'll meet virtually to review health and social care research proposals, making sure the research is ethical and fair for the people taking part. You'll also learn new skills, gain insights into research ethics, develop professionally and personally, and receive regular training and support.

You can also apply to share the role with someone else to halve the workload of being part of a REC.

[To find out more and apply visit the HRA website.](#)

ACHA appoints three lead professors

Professors Adam Gordon MBE, Liz Sampson, and Hamish Simpson have been appointed as Professorial Chairs for the Academic Centre for Healthy Ageing (ACHA).

ACHA is a new research, education and training centre from Barts Health NHS Trust and Queen Mary University of London, with funding from Barts Charity.

The professors will lead ACHA's transformative research, education, and training efforts to drive forward our mission to address key local priorities in healthy ageing research.

Their track records, expertise and leadership will be instrumental in delivering an internationally leading and innovative research agenda, to better support healthy ageing across north east London and beyond.

Prof Adam Gordon, MBE, is a clinical academic geriatrician with a focus on implementing evidence-based models of care to improve health outcomes for older people living with frailty. Prof Liz Sampson is a highly experienced clinical academic with an international reputation, focusing on conditions such as delirium, dementia, and cognitive frailty in acute hospital patients. Prof Hamish Simpson, FRSE, is an internationally renowned expert in orthopaedics and trauma, brings extensive experience in clinical research, with a focus on musculoskeletal infection, limb reconstruction, paediatric deformity and non-arthroplasty treatments for osteoarthritis.

Full information can [be found on the ACHA website](#).



Our research

Preserving research at Barts earns global recognition



A pioneering project led by the Barts Health Corporate Records Team should ensure that clinical trial records are easily available to future generations of researchers.

That project is receiving global recognition as it is on the shortlist for the most outstanding digital preservation initiative in commerce, industry and the third sector with the winners of the Digital Preservation Awards being unveiled at an international conference at Ghent University in Belgium later in September.

Strict regulations govern the retention of research records, and national guidance about storage is based on having paper copies. Until now organisations have shied away from exploring digital preservation, and the NHS has not attempted it at all.

However, Barts Health is at the forefront of the field, reflecting our ambitions for further expanding research on the back of our track record of recruiting more patients into commercial medicine trials than anywhere else in the country.

Simply saving data about trials in a file is not enough: digital preservation is about anticipating hardware and software changes so records can be retained and retrieved in up to 25 years' time.

The corporate records team flagged the risk to the trust of not having a digital archive and secured support to procure software from a specialist provider, Arkivium.

Having implemented the system last year, twelve research studies have so far been archived onto the system and the group is now looking to sell the service to others in the NHS.

As holders of one of the UK's largest historic collections of hospital and healthcare records, the Trust Archives will also use the software for its collections.

Sandra Blake, who led the project with her colleague Emma-Louise Day and support from others in the wider Information Governance team, said: "Without a digital archive these records would be at high risk of loss, corruption, and inappropriate access. They'd either need to be printed out as paper – and that means hundreds of pages for each trial – or stored on CDs, USBs, and shared drives wherever space could be found. We'd have no oversight of these records and could not guarantee their security or accessibility."

Dr Jenny Rivers, Director of Research & Development, said: "Research plays a vital role in diagnosis, treatment and care and preserving research records enables the knowledge gained from studies to transform healthcare for the benefit of our patients and the wider population. Having a digital archive provides confidence for research teams that information will be preserved and can be accessed for the whole of the required retention period."

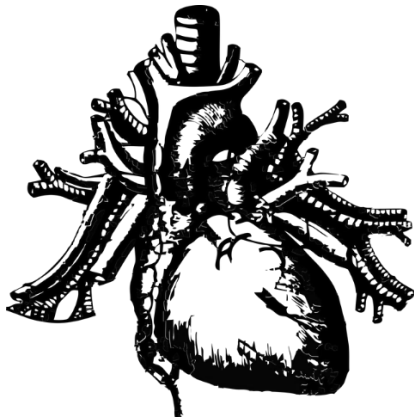
For more information please [visit the Barts Health website](#).

New study finds more people at risk of hereditary heart disease

More people in the UK are at risk of a hereditary form of cardiac amyloidosis, a potentially fatal heart condition than previously thought - according to a new study led by researchers at Queen Mary University of London and UCL.

The study, published in [JAMA Cardiology](#), used data from the UK Biobank to analyse the genes of 469,789 people in the UK and found that one in 1,000 possessed genetic variants with a likely link to cardiac transthyretin (ATTR) amyloidosis. Among study participants with African ancestry, incidence was much higher, with one in 23 (4.3%) having genes thought to be linked to the disease.

Cardiac amyloidosis is where abnormal proteins, called amyloid, build up in the heart tissue, making the heart stiff and less able to pump blood. If left untreated, it is likely to be fatal within four to six years.



First author Dr Nay Aung, from the William Harvey Research Institute, said: "Our study showed that people carrying these potentially harmful variants have a two-to-three-fold increase in the risk of heart failure and cardiac rhythm issues. This again highlights the need for early detection and monitoring for disease progression."

Previously, ATTR amyloidosis was considered rare, but in recent years in the UK the number of people being diagnosed has increased. While some cases do not have a genetic basis, many cases of ATTR amyloidosis are hereditary, caused by a mutation in the transthyretin (TTR) gene. This mutation is much more common in certain populations in Portugal, Japan and Sweden, and among individuals with Black African ancestry.

The new study used 12 years of data from UK Biobank participants and estimated the prevalence of 62 variants identified as having a possible link to the disease. It was found that people with these variants had a higher risk of heart failure, thickening of the heart muscle, and heart rhythm problems, even after adjusting for factors such as age, sex, BMI and cardiovascular risk factors. Despite this higher risk, hospital data showed only 2.8% of this group had been diagnosed with cardiac amyloidosis.

The researchers called for greater clinical vigilance for possible hereditary ATTR amyloidosis among people with these symptoms or with unexplained thickened heart muscle.

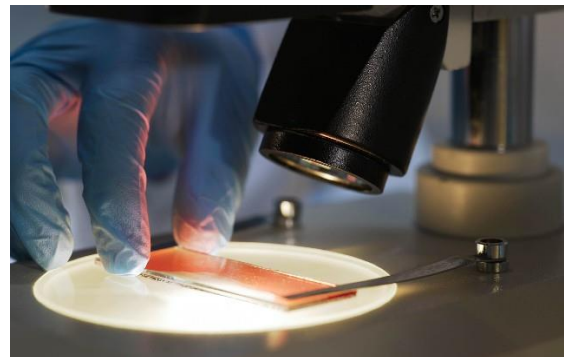
The study received funding from the Medical Research Council, the European Union's

Horizon 2020 programme, Queen Mary University of London, the National Institute for Health and Care Research (NIHR) UCLH and Barts Biomedical Research Centre, Barts Health NHS Trust, St George's University Hospitals NHS Foundation Trust and St George's University of London.

Blood proteins predict the risk of developing more than 60 diseases

Protein 'signatures', which can be obtained via a blood sample, can be used to predict the onset of 67 diseases including multiple myeloma, non-Hodgkin lymphoma, motor neurone disease, pulmonary fibrosis, and dilated cardiomyopathy. Using protein information to predict the onset of diseases could help with timely diagnosis, early initiation of treatment and improved patient outcomes.

The research, published today (22 July 2024) in [Nature Medicine](#), was carried out as part of an international research partnership between GSK, Queen Mary, University College London, Cambridge University and the Berlin Institute of Health at Charité Universitätsmedizin, Germany.



The researchers used data from the UK Biobank Pharma Proteomics Project (UKB-PPP), the largest proteomics study to date with measurements for approximately 3,000 plasma proteins from a randomly selected set of over 40,000 UK Biobank participants. The protein data is linked to the participants' electronic health records. The authors used advanced analytical techniques to pinpoint, for each disease, a 'signature' of between the 5 and 20 proteins most important for prediction. Researchers were able to use these protein signatures to predict the onset of 67 diseases including multiple myeloma, non-Hodgkin lymphoma, motor neurone disease, pulmonary fibrosis, and dilated cardiomyopathy.

The protein prediction models outperformed models based on standard, clinically recorded information. Predictions based on blood cell counts, cholesterol, kidney function and diabetes tests (glycated haemoglobin) performed less well than the protein prediction models for most examples.

The patient benefits of measuring and discussing the risk of future heart attack and stroke ('cardiovascular risk scores') are well established. This research opens up new prediction possibilities for a wide range of diseases, including rarer conditions. Many of these can currently take months and years to diagnose, and this research offers wholly new opportunities for timely diagnoses.

These findings require validation in different populations including people with and without symptoms and signs of diseases and in different ethnic groups.

Lead author Professor Claudia Langenberg, Director of the Precision Healthcare University Research Institute (PHURI) at Queen Mary and Professor of Computational Medicine at the Berlin Institute of Health at Charité Universitätsmedizin, said: "Measuring one protein for a specific reason, such as troponin to diagnose a heart attack, is standard clinical practice. We are extremely excited about the opportunity to identify new markers for screening and diagnosis from the thousands of proteins circulating and now measurable in human blood. What we urgently need are proteomic studies of different populations to validate our findings, and effective tests that can measure disease-relevant proteins according to clinical standards with affordable methods."

Review calls for further research on the impact on endocrine function by global climate changes

In a review, [published in Nature Reviews Endocrinology](#), Prof Rajesh Thakker from the William Harvey Research Institute and an international group of colleagues identify the risks of both increasing seasonal temperatures and the frequency and severity of heat extremes on hormone systems.

The researchers highlighted that endocrine diseases may impair a person's response to high temperatures, potentially leading to heat injuries. While studies of heat on healthy volunteers are numerous, more research is needed on the impact of temperature on

people who have already been diagnosed with endocrine diseases.

Professor Thakker said: "Climate change with increasing heat exposure are major global challenges confronting us, yet we know little about their effects on health, and identifying these gaps in our knowledge is important for planning strategies and future research for the benefit of humankind".

The review was conducted by researchers from the University of Oxford, the National University of Singapore, the London School of Hygiene and Tropical Medicine, and Queen Mary.

Prof John Gribben receives prestigious José Carreras award from EHA

Professor Gribben has been awarded recognition for his exceptional achievements and pivotal role in shaping the landscape of blood disorder (haematological) research.



Professor Gribben's research focuses on leukaemia, bone marrow transplantation and immunotherapy. His group investigates how cancer cells impair the function of the immune system to escape attack. He and his team identified that leukaemia and lymphoma cells [disrupt the function of the molecule actin within T cells](#), interfering with these cells' ability to communicate with other components of the immune system and launch an effective attack. They discovered that these defects could be reversed with the drug lenalidomide. Based on this work, Professor Gribben led a trial that resulted in the approval of lenalidomide and rituximab (a second immunotherapy) for follicular lymphoma. He has also led the

introduction of the innovative new immunotherapy CAR-T therapy at Barts Health NHS Trust.

Professor Gribben accepted the award at the European Haematology Association (EHA) Annual Congress in Spain last month, where he presented a lecture entitled: "The impact of

hematologic malignancies on the host immune system".

The José Carreras Award is named in honour of Spanish opera singer José Carreras, who was diagnosed with acute lymphoblastic leukaemia, and whose Foundation supports scholarship working in this field.

Events

NIHR Associate PI Scheme: Launching your Research Career

An online event will take place to launch the NIHR's Associate PI Scheme: 'Launching your Research Career' on Tuesday **19 November 2024, from 9.30 am to midday.**

The NIHR Associate PI Scheme: Launching your Research Career event is aimed at all Nurses, Midwives and AHPs interested in learning more about the Associate PI Scheme. The scheme is a six-month in-work training opportunity, providing practical experience for health and care professionals starting their research careers. Further information is available on [the NIHR website](#).

The event will cover an overview of the Associate PI Scheme - How to register and what's involved and be an opportunity to hear about the Scheme from a variety of perspectives, learn about further NIHR learning opportunities, including the Principal Investigator Pipeline Programme (PIPP) for Research Nurses and Research Midwives.

Rachel Mandel, a certified Associate PI physiotherapist from the North Thames region is a confirmed speaker. There will also be a talk on the PIPP scheme for research nurses and research midwives.

If you would like to attend or have any questions please save the date and add your details to this [Expression of Interest Form](#) and the team will contact you as soon as more details are available.

Whilst the event and agenda are primarily aimed at Nurses, Midwives, and AHPs, Health and Care professionals from outside these professions are still welcome to participate. If you have any questions, please email the Associate PI Scheme Team at associatepisceme@nhr.ac.uk

Lunchtime Research Talks at the Royal London Hospital

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

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

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

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

For more details on talks and to book a place please contact Imogen Skene at i.skene@nhs.net

Medicine at the Crick: New Frontiers in Drug Discovery

18 November 2024, 9.30 am to 5.00 pm

The Francis Crick Institute's [Medicine at the Crick](#) event series showcases major advances in biomedical science and raises awareness of the medical implications of major scientific advances. Interested members of the wider UK biomedical community are invited to attend.

This 15th edition of Medicine at the Crick will be hosted as a full-day event by [Anne Schreiber](#) (The Francis Crick Institute) and [Radoslav Enchev](#) (The Francis Crick Institute) on behalf of the AstraZeneca-Crick-Imperial Prosperity Partnership.

Many human diseases are caused by a deregulation of cellular components. Most traditional drugs target disease-causing proteins aiming to inhibit their activity by binding to their active site. However, specificity is often challenging, and only a small subset of these harmful proteins can be targeted in this way. A promising new class of drugs, known as induced proximity therapeutics, addresses these shortcomings by bringing two proteins close together to trigger functional changes or degradation, thereby suppressing the disease-causing effect. This shift from blocking to actively changing a protein of interest by engaging other cellular factors represents a groundbreaking new approach in drug development, expanding into previously undruggable targets to treat many diseases including cancer, inflammation, and neurodegeneration.

Speakers and panellists include Prof Ray Deshaies (Amgen), Dr Miklos Bekes (Arvinas), Dr Leon Murphy (Casma Therapeutics), Prof Zoran Rankovic (Institute of Cancer Research), Prof Michael Bronstein (University of Oxford), Prof Charlotte Deane (EPSRC and the University of Oxford), Dr Cristina Mayor-Ruiz (IRB Barcelona), Prof Christina Woo (Harvard University), Prof Sagar Lonial (Winship Cancer Institute of Emory University), Prof Ivan Dikic (Goethe University Frankfurt). Lectures will be followed by a Q&A panel discussion and a networking reception for in-person attendees.

A more detailed programme will be made available soon.

For further information please visit [the Crick website](#) and [register to attend using Eventbrite](#). Send any questions to medicine-at-crick@crick.ac.uk

NIHR BRC Oxford Cardiovascular 'Masterclass' talks

The Oxford BRC Cardiovascular theme has organised a series of 'masterclass' talks all are hybrid and take place 1 – 2 pm on the

stated days online and at the Richard Doll Lecture Theatre, Oxford:

- **Big Data and the NHS: Challenges and Opportunities** - Speaker: Prof [Eva Morris](#)
Date: 10 September 2024 - [Register here](#)
- **Using AI and imaging in translational epidemiology** - Speaker: Prof [Charalambos Antoniadou](#)
Date: 19 September 2024, [Register here](#)
- **Exploiting genetic data to unravel our understanding of disease** - Speaker: Prof [Jemma Hopewell](#)
Date: 14 October 2024 - [Register here](#)

JRMO drop-in sessions

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

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

If you have a question about any of the following, come along and the team will be available on a first-come-first-served basis: Study set-up; Research governance and sponsorship; Research ethics; GCP advice; Research passports and staff access; Finance and funding; Costing and contracts; Patient and public involvement.

The team looks forward to seeing you!

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

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

The lectures will cover a variety of topics relating to basic science, clinical trial methodology and statistics. Providing career advice for anyone who wishes to know more

about research or work towards a career in research or academia. Attendees will have the opportunity to hear from and put questions to research experts from across the world. For more information, please visit the [NIHR website](#).

The team has taken a summer break but more lectures are on the way in the autumn. In the

meantime please see [the Research Learning website](#) for further information. You can also browse the future lectures in the series and register for those in advance. If you have any questions, please contact the Associate PI Scheme team at associatepisceme@nihr.ac.uk

Training

JRMO GCP Training

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

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

Dates for training this academic year can now be found [on the JRMO website](#). Most courses are now delivered by Zoom.

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



NIHR Learning for Involvement

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

- **Improving Inclusivity within Research:** BAME groups are more likely to suffer from poorer health outcomes and health and social care inequalities and are less likely to be represented in health and social care research studies. This [training module and toolkit](#) from CRN East Midlands and the Centre for BME Health will help your research become more inclusive of ethnic minority groups.
- **Patient and Public Involvement Toolkit:** Involving People's Public and Patient Involvement [Toolkit](#) is a very useful resource which will take you through each stage of the engagement process. This will help you understand what you are trying to achieve, plan how you will achieve it, produce a report based on your findings, and inform how your services can meet the needs of local people better.

SBK Healthcare Events & Training

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

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

If you are interested in attending any of the courses you can contact Nichola Cadwallader - nichola.cadwallader@sbk-healthcare.co.uk - quote 'JRMO' in the subject line of your email and she may be able to offer a reduced rate.



Human Tissue Act and the Implications for Research

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

Upcoming dates are:
19 Sept 2024 2-3 pm via Teams
14 Nov 2024 2-3 pm via Teams

Bookings can be made by contacting Katie Ersapah, Human Tissue Resource Centre Manager at k.ersapah@nhs.net

HARP developmental training

- **Developing your career in clinical research:** Attend our research careers engagement session, in collaboration with HARP, to hear from current Barts Health staff who are developing clinical academic careers and speak directly to the HARP programme lead, to learn more about opportunities available.

- **Health Advances in Underrepresented Populations and Diseases (HARP)** is an exciting new PhD Programme for all health professionals based in London's vibrant East End. The programme is open to any health professional, regardless of personal background, who is enthusiastic and can show their ability to conduct world-class research that tackles health inequality.

For more information and to book a place in person, Barts Health staff and students should follow this [link to book Barts Health training](#).

If you wish to attend online, please do not book as above but instead email Imogen Skene i.skene@nhs.net, for an MS Teams link to join.

UCL BRC PPIE Training

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

There are five modules available, including an introduction to PPIE and sessions on running focus groups, finding people and filling in grant applications. You can attend all 5 modules to build up knowledge progressively or you can pick the one that best suits you.

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

Research funding

NIHR grant calls

NIHR | National Institute
for Health Research

- [EME Advanced Fellowship: Building clinical trials experience](#)

The MRC-NIHR Efficacy and Mechanism Evaluation (EME) Programme and the NIHR Fellowships Programme are accepting applications for a joint funding opportunity, EME Advanced Fellowship: Building clinical trials experience. Closes: 1 pm on 17 September 2024

- [**Programme Development Grants - Competition 40**](#)
Applications are invited for Programme Development Grant funding. Programme Development Grants are available for researchers to undertake preparatory work to develop a future programme of research and to develop and enhance the quality and value of an ongoing or recently completed Programme Grants for Applied Research (PGfAR) award.
Closes: 13:00 on 18 September 2024
- [**Research on Interventions for Global Health Transformation - Call 8**](#)
Applications are invited for proposals that focus on addressing the global burden of unintentional injuries and accidents arising from any cause in ODA-eligible countries. In this call, we are especially interested in interventions relevant to unintentional injuries and accidents occurring in relation to climate change and natural hazards.
Closes: 13:00 on 23 October 2024
- [**Global Health Research – Researcher-led bands 1 to 3**](#)
Our Global Health Research (GHR) – Researcher-led programmes are looking for applications for this new, annual funding opportunity. GHR – Researcher-led funds research that aims to improve health outcomes for the most vulnerable people in low- and middle-income countries (LMICs).
Closes: 1 pm on 6 November 2024
- [**24/80 NIHR NICE Rolling Call \(HSDR Programme\)**](#)
The Health and Social Care Delivery Research (HSDR) Programme is accepting Stage 1 applications for this funding opportunity.
Closes: 13:00 on 21 November 2024
- [**24/81 HSDR Researcher-led call**](#)
The Health and Social Care Delivery Research (HSDR) Programme is accepting Stage 1 applications for this funding opportunity.
Closes: 13:00 on 21 November 2024
- [**24/82 Comparing surgery to conservative management for the treatment of tennis elbow with persistent symptoms**](#)
The Health Technology Assessment (HTA) Programme is accepting Stage 1 applications to their commissioned workstream for this primary research topic.
Closes: 1 pm on 27 November 2024
- [**24/67 Discontinuing thickened fluids in adults with oropharyngeal dysphagia**](#)
The Health Technology Assessment (HTA) Programme is accepting Stage 1 applications to their commissioned workstream for this primary research topic.
Closes: 1 pm on 27 November 2024
- [**24/72 Increasing social support and parenting skills for parents with learning disabilities**](#)
The Health Technology Assessment (HTA) Programme is accepting Stage 1 applications to their commissioned workstream for this primary research topic.
Closes: 13:00 on 27 November 2024
- [**24/73 Intravascular lithotripsy in peripheral arterial disease**](#)
The Health Technology Assessment (HTA) Programme is accepting Stage 1 applications to their commissioned workstream for this primary research topic.
Closes: 13:00 on 27 November 2024
- [**24/68 Management of blood pressure in elderly people with hypertension and symptomatic postural hypotension**](#)
The Health Technology Assessment (HTA) Programme is accepting Stage 1 applications to their commissioned workstream for this primary research topic.
Closes: 1 pm on 27 November 2024
- [**24/69 Improving diagnosis of Urinary Tract Infection in older adults**](#)
The Health Technology Assessment (HTA) Programme is accepting Stage 1 applications to their commissioned workstream for this primary research topic.
Closes: 1 pm on 27 November 2024
- [**24/88 Ambitious data-enabled "e-trials"**](#)
The Health Technology Assessment (HTA) Programme is accepting Stage 1 applications to their commissioned workstream for this primary research topic.
Closes: 13:00 on 27 November 2024
- [**24/87 CBT adapted for autistic adults with a mental health problem**](#)
The Health Technology Assessment (HTA) Programme is accepting Stage 1 applications to their commissioned workstream for this primary research topic.
Closes: 1 pm on 27 November 2024
- [**24/78 Ultra-processed foods**](#)
The Public Health Research (PHR) Programme is accepting Stage 1 applications to their commissioned workstream for this topic.
Closes: 13:00 on 13 December 2024
- [**Technology-Enabled Social Care Highlight Notice**](#)

NIHR Research Programme for Social Care (RPSC) is inviting proposals for collaborative research projects that examine the development and utilisation of digital technology in social care.
Closes: 30 October 2024

- [**24/61 Healthy Homes: Overcrowding**](#)
The Public Health Research (PHR) Programme is accepting Stage 1 applications to their commissioned workstream for this topic.
Closes: 13:00 on 13 December 2024
- [**24/62 Active Travel facilitators and barriers within different populations**](#)
The Public Health Research (PHR) Programme is accepting Stage 1 applications to their commissioned workstream for this topic.
Closes: 13:00 on 13 December 2024

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

UKRI grant calls



**UK Research
and Innovation**

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

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

Currently open UKRI funding includes:

- [**UK future internet NetworkPlus: outline**](#)
Apply for funding for a UK future internet NetworkPlus which brings together the research community and stakeholders. This funding opportunity is part of the UKRI Creating Opportunities, Improving Outcomes strategic theme. You must be based at a UK research organisation eligible for UKRI funding. Maximum award: £5,200,000
Closing date: 10 September 2024 4.00 pm UK time
- [**Eureka collaborative R&D: Eurostars three call seven**](#)

UK registered organisations can apply for a share of up to £2.5 million for collaborative research and development (R&D) in partnership with organisations from participating Eurostars countries.
Closing date: 12 September 2024 11,00 am UK time

- [**MRC Centre of Research Excellence: round two: invited full application**](#)
Apply for MRC CoRE funding to tackle complex and interdisciplinary health challenges. You must be invited to apply for this stage of the funding opportunity. Maximum award: £26,250,000
Closing date: 12 September 2024 4.00 pm UK time
- [**Neurosciences and mental health: new investigator: responsive mode**](#)
Apply for funding to research neurosciences and mental health and take the next step towards becoming an independent researcher. You must have the skills and experience to 'transition to independence' and the support of a host research organisation eligible for MRC funding.
Closing date: 17 September 2024 4.00 pm UK time
- [**Population and systems medicine: new investigator: responsive mode**](#)
Apply for funding to research neurosciences and mental health and take the next step towards becoming an independent researcher. You must have the skills and experience to 'transition to independence' and the support of a host research organisation eligible for MRC funding.
Closing date: 17 September 2024 4.00 pm UK time
- [**Infections and immunity: new investigator: responsive mode**](#)
Apply for funding to research neurosciences and mental health and take the next step towards becoming an independent researcher. You must have the skills and experience to 'transition to independence' and the support of a host research organisation eligible for MRC funding.
Closing date: 17 September 2024 4.00 pm UK time
- [**Molecular and cellular medicine: new investigator: responsive mode**](#)
Apply for funding to research neurosciences and mental health and take the next step towards becoming an independent researcher. You must have

the skills and experience to 'transition to independence' and the support of a host research organisation eligible for MRC funding.

Closing date: 17 September 2024 4.00 pm UK time

- **[Neurosciences and mental health: programme: responsive mode](#)**

Apply for funding to support a programme of research focused on neurosciences and mental health. You must be employed at an eligible research organisation to apply for MRC funding and have a record of securing funding and delivering research.

Closing date: 17 September 2024 4.00 pm UK time

- **[Infections and immunity: programme: responsive mode](#)**

Apply for funding to support a programme of research focused on infections and immunity. You must be employed at an eligible research organisation to apply for MRC funding and have a record of securing funding and delivering research.

Closing date: 17 September 2024 4.00 pm UK time

- **[Molecular and cellular medicine: programme: responsive mode](#)**

Apply for funding to support a programme of research focused on molecular and cellular medicine. You must be employed at an eligible research organisation to apply for MRC funding and have a record of securing funding and delivering research.

Closing date: 17 September 2024 4.00 pm UK time

- **[Molecular and cellular medicine: research grant: responsive mode](#)**

Apply for funding to support research projects focused on molecular and cellular medicine. You must be employed at a research organisation eligible to apply for MRC funding. You can involve more than one research group or organisation in the project.

Closing date: 17 September 2024 4.00 pm UK time

- **[Infections and immunity: research grant: responsive mode](#)**

Apply for funding to support research projects focused on infections and immunity. You must be employed at a research organisation eligible to apply for MRC funding. You can involve more than one research group or organisation in the project.

Closing date: 17 September 2024 4.00 pm UK time

- **[Population and systems medicine: research grant: responsive mode](#)**

Apply for funding to support research projects focused on population and systems medicine.

You must be employed at a research organisation eligible to apply for MRC funding. You can involve more than one research group or organisation in the project.

Closing date: 17 September 2024 4.00 pm UK time

- **[MRC: partnership: responsive mode](#)**

Apply for funding to support new partnerships between diverse groups of researchers within the remit of MRC. You must be employed by a research organisation eligible to apply for MRC funding.

Closing date: 17 September 2024 4.00 pm UK time

- **[Health inequalities in the food system](#)**

Apply for funding to design and deliver interventions to reduce dietary health inequalities in the UK food system. Your project can be led by any discipline and must collaborate with at least one stakeholder organisation. You must be based at a UK research organisation eligible for BBSRC funding.

Closing date: 19 September 2024 4.00 pm UK time

- **[Experimental medicine stage one](#)**

Apply for funding to undertake mechanistic studies in humans. Your application must include an intervention to investigate the causes, progression or treatment of human disease. This is an ongoing funding opportunity. Stage one application rounds close every April and October.

Closing date: 2 October 2024 4.00 pm UK time

- **[UKRI Digital Research Technical Professional Skills NetworkPlus](#)**

Apply for funding for a Digital Research Technical Professional (RTP) Skills NetworkPlus which brings together disciplines, sectors and domains to address cross-cutting challenges related to digital RTP skills and careers. You must be based at a UK research organisation eligible for UKRI funding. Award range: £1,000,000 - £2,000,000

Closing date: 2 October 2024 4.00 pm UK time

- [Canada-UK: Biomanufacturing of Biologics and Advanced Therapies Round 2](#)
UK registered organisations can apply for a share of up to £3 million for collaboration with Canadian SMEs on joint R&D projects, for enabling technologies and innovations in the biomanufacturing of biologics and advanced therapies.
Closing date: 16 October 2024 11.00 am UK time
- [Launchpad: marine and maritime in the Great South West, round two CR&D](#)
UK registered organisations can apply for a share of up to £3 million for business-led projects that grow their innovation activities in the marine and maritime cluster in the Great South West. This funding is from Innovate UK.
Closing date: 16 October 2024 11.00 am UK time
- [Launchpad: marine and maritime in the Great South West, round two MFA](#)
UK registered businesses can apply for a share of up to £3 million for projects that grow their innovation activities in the marine and maritime cluster in the Great South West. This funding is from Innovate UK.
Closing date: 16 October 2024 11.00 am UK time
- [Smart grants: Jul 2024](#)
UK registered organisations can apply for a share of up to £25 million for game-changing and commercially viable research and development innovations that can significantly impact the UK economy.
Closing date: 23 October 2024 11.00 am UK time
- [Eureka collaborative R&D: UK-Israel round three](#)
UK-registered organisations can apply for a share of up to £1 million to develop projects focused on industrial research with the Israel Innovation Authority.
Closing date: 30 October 2024 11.00 am UK time
- [Eureka Disaster Resilience Programme collaborative research and development 2024](#)
UK registered organisations can apply for a share of up to £1 million to develop technologies in the field of disaster resilience, response and recovery, in partnership with organisations from participating Eureka countries.

Closing date: 31 October 2024 11.00 am UK time

- [Pre-announcement: UKRI cross research council responsive mode pilot scheme: round 2](#)
Apply for funding for breakthrough or disruptive interdisciplinary ideas that transcend, combine or significantly span disciplines that are not routinely funded through existing UKRI responsive mode schemes. Project leads must be based at an organisation eligible for UKRI Research Council funding. Award range: £200,000 - £1,200,000
Closing date: 19 November 2024 4.00 pm UK time
- [Applied global health research: stage one](#)
Apply for funding to support applied research that will address global health challenges and inequities. We will accept applications of all sizes, including large research projects and small to medium-scale applications. Award range: £150,000 - £2,000,000
Closing date: 3 December 2024 4.00 pm UK time
- [Applied global health partnership: stage one](#)
Apply for funding to set up a new research partnership to enable the development and delivery of novel applied research that will address global health challenges and inequities, developing a portfolio of high-quality partnerships, which will be diverse, promote multidisciplinary and strengthen global health research capacity. Award range: £150,000 - £1,000,000
Closing date: 3 December 2024 4.00 pm UK time

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



ARIA funding

Created by an Act of Parliament, and sponsored by the Department for Science, Innovation, and Technology, the Advanced Research and Invention Agency (ARIA) funds projects across the full spectrum of R&D disciplines, approaches, and institutions.

ARIA's programmes and projects are directed by our Programme Directors, scientific and technical leaders with deep expertise and a focused, creative vision for how technology can enable a better future.



ARIA's current open funding programme is 'Technical Area 4: Testing and Evaluation'.

For further information [visit the ARIA website.](#)



Barts Charity Research Seed Grants

Barts Charity

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

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

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

Barts Charity welcomes applications for this scheme four times a year. The next deadline for applications is **17 October 2024**.

Barts Charity Research Project Grants

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

Barts Charity welcomes applications for this scheme twice a year. The next deadline for applications is **1 October 2024**.

British Academy – additional needs funding pot

The British Academy is introducing a new initiative to support researchers with additional needs. It is inviting current and new award holders who would like to apply for additional funding to support their awards or applications.

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

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

International and EU Research and Innovation Funding Opportunities

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

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

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



Fellowships and related opportunities

UKRI fellowships



UK Research
and Innovation

- [Daphne Jackson fellowship](#)
These fellowships are for those looking to return to a research career after a break. Fellowships combine a personalised retraining programme with a challenging research project. They are flexible, usually lasting two years at 0.5 full-time equivalent, although some UKRI funders may award longer.
Open - no closing date
- [Researching ME/CFS: highlight notice](#)
Apply for funding to research myalgic encephalomyelitis/chronic fatigue syndrome, also known as ME/CFS.
Open - no closing date
- [Researching motor neurone disease: highlight notice](#)
Apply for funding to research motor neurone disease (MND). You can get funding through any grants from MRC research boards or panels or MRC fellowships. You should apply through the existing funding opportunity that is most relevant to your science area and career stage.
Open - no closing date

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

NIHR fellowships

NIHR | National Institute
for Health Research

- [24/20 NIHR Application Development Award for Health and Care Professionals](#)
NIHR is seeking to commission up to ten Application Development Awards (ADA) to carry out development work prior to research applications.
Closes: 13:00 on 26 September 2024
- [Harkness Fellowships in Health Care Policy and Practice](#)
Co-funded in the UK by the NIHR and The Health Foundation, the Harkness Fellowships are designed for mid-career

professionals who are committed to advancing health policy and practice.
Closes: 1 November 2024

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



**Barts Charity
Healthcare
Professional
Clinical**

Research Training Fellowships

3rd round of funding now open for applications.

Barts Charity's PhD Fellowship scheme provides opportunities for local healthcare professionals to undertake health-related research that could improve the lives of people in East London.

The 3-year PhD Fellowship scheme is open to all healthcare professionals including [Allied Healthcare Professionals](#), Clinicians (including General Practitioners and Dentists), [Healthcare Scientists](#), Midwives, Nurses, Pharmacists, and Psychologists. Further details about the scheme can be found on the [Barts Charity website](#).

The charity welcomes applications annually. The deadline for submission of applications for this coming round is **31 October 2024** and interviews will take place in March 2025.

If you have any specific questions about the scheme or your eligibility, please contact ellie.estchild@bartscharity.org.uk.

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