

# Joint Research Management Office Research News Bulletin

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

## Pioneering COVID-19 research

Barts Health NHS Trust and Queen Mary University of London, as part of their Barts Life Sciences initiative, have begun a new programme of COVID-19 research across Barts Health hospitals, including NHS Nightingale Hospital London.

COVID-19 patients will be recruited into clinical trials to understand why some people become severely affected by the disease and to investigate interventions to see if they can help more patients survive.



Faced with the return to the frontline of clinical researchers to the NHS, a new team of over a hundred volunteers has been built comprising clinical researchers or scientists from other medical areas. These volunteers have been organised into teams and trained to support enrolment and delivery of COVID-19 studies for the benefit of patients.

Just two weeks after opening the new NHS Nightingale Hospital at Barts Health, patients have already been enrolled in trials. This process, which would usually take months, has only been made possible thanks to the teamwork and courage of volunteers from across the NHS and university partners

(Queen Mary, UCL and the London School of Hygiene & Tropical Medicine).

Part of the work will also look to curate a large, de-identified research data set that will create a rich data source for future COVID-19 research by Queen Mary, Barts and others worldwide. Research data will be collected from patients daily to create a master data set and follow patients over time.

Professor Sir Mark Caulfield, from Queen Mary and Barts Health, has been leading on COVID-19 research delivery across Barts Health hospitals, including the NHS Nightingale Hospital London. He said: "The opening of research studies at the new Nightingale hospital in just 10 days ensures patients at all Barts Health Hospitals can get equal opportunities to participate in research. It was only possible through the amazing group of 100 plus clinical research volunteers who, at their risk, have stood shoulder to shoulder with frontline NHS staff in the fight against COVID 19 and that is what Barts Life Sciences is about."

Barts Health and Queen Mary Joint Research Management Office (JRMO) support, led by Prof Rupert Pearse and Dr Mays Jawad, are working to expedite approval of studies with a national priority. More information about those processes and other JRMO guidance can be found [here](#), and there are details [below](#).

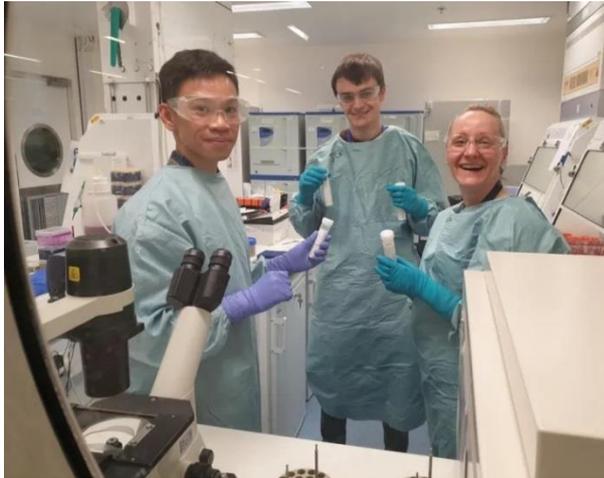
Professor Charles Knight, Chief Executive of the NHS Nightingale Hospital London and Professor of Cardiology at Queen Mary said "I'm deeply honoured to have been given this responsibility at a time of great pressure on the NHS and so proud that staff across Barts Health are rising to this challenge so magnificently."

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**Updates and guidance for our researchers on matters relating to research and the COVID-19 virus can be found on the JRMO website [here](#)**

## First COVID-19 research project one month on



Barts Health is not only working to provide excellent clinical care in these difficult times. It is also working to ensure that London's best COVID-19 research take pace to help provide answers to some of the questions that the disease is presenting us with.

First to get going last month was [a new research project led by Professor James Moon](#) consultant cardiologist at St Bartholomew's Hospital, aimed at discovering why some people exposed to coronavirus develop severe disease and others have only minor symptoms. The study will follow 400 members of staff from across the St Bartholomew's Hospital with data, nasal swabs and blood, collected weekly for four months throughout the outbreak. Samples will be divided up into over 50,000 separate samples and distributed across the UK to the best scientific laboratories to look at genetic and immune influences on the severity of disease and to identify potential targets for new treatments. The study hit its target of recruiting 400 participants in just 10 days, with many staff staying on after shifts to give blood to help the research. The team now plan to expand the research to 1,000 participants, including those working at the new NHS Nightingale Hospital London.

The team has already been approached by several scientists from organisations across the UK, all of whom have questions that the newly collected data can help to answer.

The study needs donations to continue. Please watch a film [explaining the study here](#) and visit the [JustGiving website here](#) to donate now via Barts Charity.

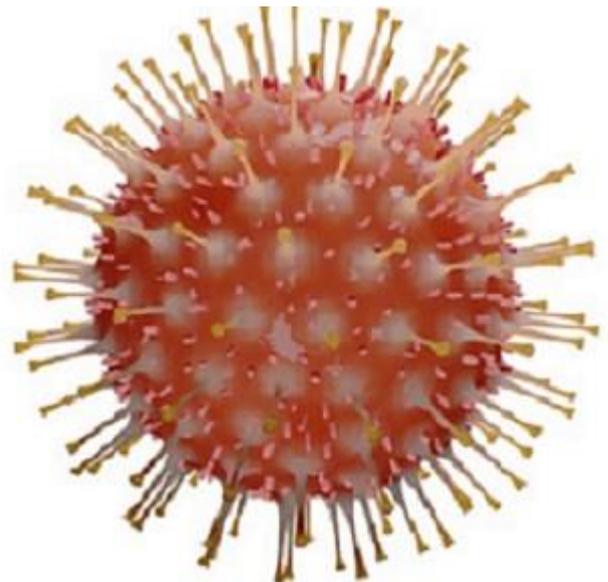
To find out more about this and other ongoing work [visit the COVID Consortium website here](#) or email [Bartshealth.COVID-HCW@nhs.net](mailto:Bartshealth.COVID-HCW@nhs.net)

## COVID-19 therapy, vaccine, epidemiology and policy development research boosted by twenty-one new projects

Twenty-one new studies into the novel coronavirus have now been funded by the UK Government, including the first clinical drug trial in primary care, vaccine and therapy development, and studying epidemiology, disease transmission, behavioural interventions and policy approaches to COVID-19.

This second round of projects receives £14.1 million as part of the [£24.6 million rapid research response](#) funded by UK Research and Innovation (UKRI), and by the Department of Health and Social Care through the National Institute for Health Research (NIHR).

These projects build on the UK's world-class expertise and capability in global health and infectious disease that has already shaped our understanding of the pandemic and is informing measures to tackle it. They support the UK government's efforts to save lives, protect the vulnerable and support the NHS so it can help those who need it the most. You can find out more [here](#).



## #Red4Research

The #Red4Research campaign is working to raise public awareness of COVID-19 research.



There has already been one day in early April where we all wore something red and publicised photos of that on social media. Pending the announcement of more dates from the NIHR the JRMO thinks it would be great if we combined this wearing red with our weekly Thursday evening, 8 pm clapping for the NHS.

So please wear red when you clap and take a photo or film of it. Get your family involved too!

Then post this on Twitter, Facebook or Instagram to spread the word. Please remember to use the following tags in your post: @BartsHealthResearch @NHSBartsHealth #BartsHealthResearch #NHSBartsHealth #Red4Research and #COVID19

## HRA: COVID-19: Regulatory Approval and Transparency

Research is central to understanding, treating and preventing COVID-19 and we all want research to start as quickly as possible and to maintain high standards of research practice.

Research Ethics Committee review is a vital component of COVID-19 research. It cannot be done retrospectively, so it is important to get this before you start any research. Studies without a favourable research ethics opinion may not be published by a journal and may not confirm to research governance standards.

Applying for ethics review of your COVID-19 study does not take long and the JRMO can provide support throughout the process. If you

are not sure whether your project is classed as research, please use the online [decision tool](#).

## Fast-track review of COVID-19 studies

The HRA is working with the rest of the research system to provide a coordinated process so that COVID-19 research can progress quickly and the JRMO is working to support that with a fast-track review process with bespoke advice and support for researchers.

We HRA has updated the [information on its website](#) about the fast-track review process, guidance for researchers, sites and sponsors, guidance about using confidential patient data without consent and information about how we are handling other types of research. That review takes place in parallel with the Chief Medical Officer's [prioritisation process for COVID studies](#).

## COVID-19 research transparency

Research transparency is even more important at this time. It ensures researchers and sponsors know about other studies taking place across the UK, and creates important visibility for the public, health and social care professionals and policymakers.

The HRA has introduced an additional step into normal transparency arrangements to ensure that information about COVID-19 related research is made public as quickly as possible. Summary information about each COVID-19 research project is [on the HRA website](#).

## Local fast-track process for reviewing proposed COVID-19 related research

The JRMO, together with the Clinical Directors of R&D, has been working hard to create a rapid and proportionate [governance process to review proposed COVID-19 research](#).

Our role, as it always has been, is to support high-quality research that is safe for both patients and staff. We have received expressions of interest for an unprecedented number of COVID-19 research projects. Many of these proposals are very similar, whilst others are testing treatments which the Trust expert review committee has recommended we do not use. In several cases, we are being

pressed to support studies even before anyone has agreed to act as principal investigator. We cannot undertake multiple studies on similar questions, nor can we place patients or staff at unnecessary risk. Both the Clinical Directors of R&D and JRMO staff are increasingly being overwhelmed by communication from researchers lobbying for their proposals. This situation is chaotic, unsafe and cannot continue.

For this reason, we have established a [COVID-19 research review committee](#) that will meet weekly to review and triage new COVID-19 applications taking place at Barts Health sites (including the Nightingale NHS Hospital).

Coupled with this expedited review process we will promote the most valuable research proposals, support our local research as well as national priorities and, most importantly, ensure this research is safe. Whilst we are always happy to be contacted about individual problems, can we ask you not to contact us simply to emphasise the importance of your work. All this does is slow down the process for everyone. Remember that the expedited processes are all subject to mandatory monitoring and audit by JRMO.

Information about all aspects of COVID-19 and its impact on research can be [found on the JRMO website](#):

- Guidance on the process of setting up new COVID-19-related research studies at Barts Health and Queen Mary
- General guidance for the continuation, or not, of clinical research at Barts Health and Queen Mary
- General guidance for non-clinical research at Queen Mary
- Guidance on whether research activities can continue at Queen Mary
- Queen Mary Ethics of Research Committee (QMERC) COVID-19 guidance for researchers
- A link to Queen Mary's Doctoral College FAQ on the COVID-19 situation

Also, within the above, are various links to the relevant guidance of various funding bodies and those who oversee our research.

We are updating these documents regularly, as matters change or become clearer, so please revisit this page from time to time.

If you have any questions about specific aspects of this guidance, including how it may affect your research, please [contact us](#).

### **NIHR commitment to Public Involvement, Participation and Engagement (PIE) during the COVID-19 Pandemic**

The NIHR has highlighted its continuing commitment to ensuring patients, carers and the public have a say in and help to shape health and care research during the COVID-19 pandemic, in line with its long standing commitment to patient and public involvement, engagement and participation (PIE) in health and care research.

It has said that it is encouraged by the groundswell of leadership and creativity from PIE leads and others, as we all work to ensure that PIE is maintained and progressed, both in COVID and other ongoing research, in these challenging times.

In support of this, the new Centre for Engagement and Dissemination (CED) has coordinated a statement and set of commitments on behalf of the NIHR Patient and Public Involvement Senior Leadership Team (PPI SLT). PPI SLT comprises the NIHR Coordinating Centre PIE Leads as well as public contributors. This statement and commitments can be found as follows:

NIHR PIE COVID-19 statement [here](#)  
NIHR PIE COVID-19 commitment [here](#)

For PIE support and guidance with or Barts Health/ Queen Mary research studies, please contact the Engagement and Diffusion team at [patientsinresearch.bartshealth@nhs.net](mailto:patientsinresearch.bartshealth@nhs.net)

There is also information on Barts Health's revamped [Take Part in Research webpage](#).

## Other news

### Barts Health Heroes Award

We are delighted to report that the RMO's Research Governance Team has been nominated for a Barts Health Heroes Award in recognition of the wonderful work the team does for Barts Health.

These awards are a way in which the Trust can publicly recognise and congratulate our nominees who demonstrate the Barts Health values in their daily working lives.



As part of this celebration, up to three team members are invited to attend a lunch in the Great Hall, St Bartholomew's Hospital in June.

#### The citation read as follows:

The Research Governance team has worked incredibly hard over the past two years to re-structure their team and to completely renew their working philosophy. Rather than policing researchers, they are now a strong force for promoting high-quality research which is safe for patients and improves the care provided throughout the Trust. I would like to nominate them for their outstanding team-work in ensuring the Barts Health delivers safe, accountable research for all of our patients.

### Innovate UK post-award information online

The JRMO has produced online guidance to assist researchers through the lifecycle of [Innovate UK](#) funding awards.

The online guidance, which can be found [here](#) covers starting and project set-up, matters relevant to projects that are underway, and then the closure of projects. This covers how

and what can be claimed, working with the JRMO and using [the Worktribe system](#). For more information please visit the JRMO webpage



### Changes to forms and templates for the QMERC

A new standard application form is now available on the Queen Mary Ethics of Research Committee (QMERC) page of the JRMO website. A version of that form which has been approved by the Queen Mary Disability & Dyslexia Service is also available on the page.

Also, new templates for Participant Information Sheets and Consent Forms have been uploaded.

These changes, plus other information about the QMERC, can be found online [here](#).

### JRMIO SOP changes and new guidance

Since the last Bulletin only one JRMO SOP has been revised:

#### [SOP 28 - Monitoring](#)

- Associated document 1: Monitoring plan template
- Associated document 2a: ISF monitoring form
- Associated document 2b: TMF monitoring form

- Associated document 2c: Single site monitoring form
- Associated document 2d: Pharmacy monitoring form
- Associated document 2e: Laboratory Set up form
- Associated document 2f: SDV monitoring form
- Associated document 2g: Laboratory ongoing monitoring form
- Associated document 3: Site visit log
- Associated document 4: Summary Monitoring Report

But three new [guidance documents](#) have been published on the following:

- Obtaining and using human blood and tissue from healthy volunteers for research purposes
- Barts Health /Queen Mary Sponsorship and Confirmation of Capacity and Capability of COVID-19 Studies
- JRMO COVID -19 Committee Guidance and Terms of Reference.

A full list of JRMO SOPs and copies of them, associated and guidance documents can be found [here](#).

## Research thinking

### Science and Engineering: logical thinkers

Norman Fenton, Professor of Risk and Information Management, Queen Mary University of London, Magda Osman, Reader in Experimental Psychology, Queen Mary University of London, Martin Neil Professor in Computer Science and Statistics, Queen Mary University of London, and Scott McLachlan, Postdoctoral Researcher in Computer Science, Queen Mary University of London have written an interesting article pointing out that country comparisons are pointless concerning COVID-19 unless we account for these biases in testing

They have developed an initial prototype “causal model” whose structure is shown in the article. The links between the named variables in the model show how dependent they are on each other. These links, along with other unknown variables, are captured as probabilities and as data is entered for specific, known variables, all of the unknown variable probabilities are updated using a method called Bayesian inference. The model shows that the COVID-19 death rate is as much a function of sampling methods, testing and reporting, as it is determined by the underlying rate of infection in a vulnerable population.

It may seem that different countries have different death rates, but that may only be because they have applied different sampling and reporting policies. It is not necessarily because they are managing the virus any

better or that the virus has infected fewer or more people.

This article makes fascinating reading and can be found [here](#).

### Alan Turing Institute: spotlight on Prof Prabhakar Rajan

A surgeon and a scientist, Turing Fellow Prabhakar Rajan’s work at Queen Mary University of London spanning medicine and biological science, [features on their website](#) in a short Q&A.

#### Describe your work in a nutshell.

One theme is the analysis of genetic and patient data to better understand and treat prostate cancer. My lab work focuses on a gene-shuffling process that affects thousands of genes and alters the way cancers grow or respond to treatment, while my clinical research explores patterns within prostate cancer patients' data that may lead to better treatments.

#### What aspect of your research is exciting you right now?

A project using machine learning to identify genetic changes in patients’ blood that predict how well they respond to treatment. It’s exciting because it may change how we monitor prostate cancer patients, moving from invasive needle biopsies to blood tests.

#### A recent highlight?

Using a Swedish database of over 100,000 prostate cancer patients, we previously found

that, in contrast to older prostate cancer patients, younger patients fared better with surgery than radiotherapy. We were concerned that this finding was an artefact of older patients having more comorbidities, rather than being older per se. Digging further into the database, I discovered that comorbidities don't affect prostate cancer survival after treatment with surgery or radiotherapy. This suggested that our previous findings were likely to be real, and is important in my clinical practice, where I recommend

surgery to younger men. It illustrates the power of big data.

#### **Your work in three words...**

Challenging; exciting; rewarding.

#### **What book would you recommend?**

'Did He Save Lives? A Surgeon's Story' by David Sellu. An extraordinary book about how a miscarriage of justice led to the imprisonment of a respected surgeon for manslaughter.

## Our research

### JRMO in Africa!



Just a few months ago, when the world was still a relatively sane place, Gerry Collins and Leah Wren from the JRMO travelled with Prof Jonathan Grigg to attend a team meeting of the ACACIA study in Tanzania.

The 'Achieving Control of Asthma in Children In Africa' (ACACIA) study, led by Queen Mary University of London, is a £2 million study funded by the National Institute for Health Research (NIHR). It will involve 3,000 children aged between 12 and 16 years old who have symptoms of asthma, and take place over three years in Ghana, Nigeria, South Africa, Uganda, Malawi and Zimbabwe.

Asthma in African children was previously not thought to be a major health issue. But more African children are developing this long-term disease as they move to urban areas. South Africa has one of the highest mortality rates from asthma worldwide. Recent surveys in schools found that between 10 and 20 per cent of children in sub-Saharan Africa aged 13 to 14 have ongoing asthma symptoms.

A similar UK study led by the Queen Mary University of London research group found that 46 per cent of young people had suboptimal asthma control and that many young people faced a range of barriers to good asthma management, including lack of knowledge, forgetfulness and perceived stigma.

The team will use the new African school survey data to design and test a school-based intervention, which will include the adaptation of an existing theatre performance, written by the Nigerian-born playwright Tunde Euba, which addresses asthma knowledge and stigma.

ACACIA is part of the IMPALA Programme, more details of which can be found [here](#).

### **New study shows that current landfill regulations are insufficient**

A new study from Queen Mary shows that flooding of historic coastal landfill sites by seawater could significantly increase the number of soluble metals released to the marine environment. The findings have significance for coastal management policy and the way historic landfills are managed.

Climate change is increasing the likelihood that historic coastal landfills will be inundated by sea-level rise and storm surges or eroded resulting in the release of contaminants to the coastal zone, posing a potential threat to the marine environment.



At present landfill regulation and risk assessment only consider the potential impacts of sites being flooded by freshwater resulting in the release of soluble contaminants (or 'leachates'). This means that the potential consequences of climate change on the UK's many older coastal landfill sites, with the potential for inundation from saltwater, is largely unknown.

The study has shown that the erosion of solid waste materials from poorly-maintained historic coastal landfill sites poses a greater threat to the environment than leaching from well-maintained sites.

Dr James Brand, Honorary Research Fellow at Queen Mary, and lead author of the study said: "Our research shows that current landfill regulations don't adequately assess the risk of pollution due to metals leaching from landfills in coastal environments. However, leaching of metals from well-maintained landfill sites is unlikely to be a problem, the real concern is the erosion of solid waste materials from poorly-maintained historic landfills."

Kate Spencer, Professor of Environmental Geochemistry at Queen Mary and co-author of the study and project lead said: "Our previous research has shown that historic landfill sites have begun to erode with potentially serious consequences for the marine environment. This research shows that the way we manage these sites is vitally important, policy interventions should prioritise eroding sites as these present the biggest risk to the coastal environment."

It is estimated that there are more than 10,000 historic landfills in Europe that are vulnerable to flooding or erosion. Previous research from Queen Mary University of London has indicated that there are around 1,200 such sites on England's coastline, constructed before modern environmental regulation with little monitoring or knowledge of waste

content, and some have already started to erode.

For more information see the research paper: [J.H. Brand and K.L. Spencer, Will flooding or erosion of historic landfills result in a significant release of soluble contaminants to the coastal zone?](#), *Science of the Total Environment* (2020)

### **Queen Mary academics leading the debate on COVID-19 policy**

Our academics have expertise in many key areas relating to the coronavirus crisis, its implications, the strategy and its data. From social distancing to healthcare provisions, they have shared their analysis and advice.



The UK is a month into lockdown, and as the government's response around COVID-19 policy has continued to evolve, so has the debate on everything from testing regimes to the government's overall coronavirus strategy.

Queen Mary academics have been quoted extensively on the fight against coronavirus. They have produced vital information and analysis on everything from non-pharmaceutical interventions on the course of the epidemic to biases in testing. Here we take a look at some of the voices leading the way in the debate.

[Professor David McCoy](#) from the [Blizard Institute](#) has examined whether the government's strategy to combat COVID-19 has been the right one. In a [piece on the Queen Mary website](#), Professor McCoy assesses this strategy based on three key response areas: dealing with the disease, managing the health system and planning for the social and economic impacts of the pandemic. Pointing out that "a coherent scientific and moral debate about current

plans” has been difficult, Professor McCoy holds the government to account over still-existing gaps in each key area.

He has also appeared on [Newsnight](#) to discuss potential omissions from the government’s strategy.

The effectiveness of interventions like social distancing has been an area of particular contention. [Dr Rob Knell](#), reader in evolutionary ecology at Queen Mary, and [Dr Axel Rossberg](#), reader in theoretical ecology, have researched factors such as social distancing on how long the coronavirus crisis will last for and its severity. In the [MailOnline](#), Dr Knell explains how timing could be vital in suppressing the pandemic. His findings are based on a new modelling approach that looks at the impact of non-pharmaceutical interventions and public compliance.

Could this crisis have been prevented? According to [Professor Sophie Harman](#), Professor of International Politics with the School of Politics and International Relations, the evidence suggests so. Her opinion piece in the [New Statesman](#) explains that although it is not always possible to predict a virus’ form or origins, healthcare systems around the world did have the tools to “prepare, identify, and respond to the threat of destructive pandemics” – and these were largely ignored. Professor Harman also [recorded a video](#) in collaboration with the Mile End Institute, discussing the role of the World Health Organisation concerning the COVID-19 crisis.

With so much of the NHS’ resources dedicated to fighting coronavirus, an emergency programme to train community health workers could ease the pressure and provide a vital service to vulnerable members of the community. In [The Lancet](#), [Professor Anita Berlin](#), Professor of Primary Care Education at Queen Mary, was among a team of researchers to propose that an online-based learning programme could be used. This training would carry lower risk while enabling basic assessments, and provide support for widespread testing and community follow-up for COVID-19, as well as potentially being a long-term model of care in the UK.

[Find out more](#) about Queen Mary’s research into coronavirus, and read [updates for students and staff](#).

## Screening of zebrafish identifies gene involved in human nicotine addiction

Researchers at Queen Mary University of London have shown that zebrafish can provide genetic clues to smoking, a complex human behaviour.



By studying genetically-altered zebrafish they were able to pinpoint a human gene, *Slit3*, involved in nicotine addiction and also discover how it may act.

While zebrafish have been used extensively in genetic research, they have been used only in developmental models, such as identifying genes associated with a disease, rather than to predict genes involved in a complex cognitive behaviour such as smoking.

Although smoking has long been known to have a genetic element, relatively little has been known about the genes involved since it has been difficult to identify them from human studies alone.

In a study published in *eLife* journal, the researchers tested families of genetically altered zebrafish for nicotine preference. When one family showed a much stronger nicotine preference compared to the others, the researchers identified all the mutations in the family, eventually narrowing down to a mutation in the *Slit3* gene linked to the behaviour.

To see if the same gene affected nicotine preference in people, the researchers looked for an association between variants in the human *Slit3* gene and smoking behaviour, such as decreased or increased desire to smoke and how easy it was to quit, in groups of people in the UK and Finland. They found 3 variants in the human *Slit3* gene that were significantly linked to smoking activity.

To then learn more about how the *Slit3* gene might be working, the researchers tested both mutant and wild type fish for sensitivity to a dopaminergic drug. In humans this drug affects the startle reflex – our physical reaction to a sudden loud noise - that is linked to addictions, including nicotine addiction. When tested with the startle reaction, the mutant fish showed decreased sensitivity to the drug. After testing various receptors that might be involved in the reduced drug sensitivity, the researchers found that only one receptor was implicated - the serotonin receptor 5HT 1AA.

Caroline Brennan, Professor of Molecular Genetics at Queen Mary University of London, led the research. She explained: "This gives us a hypothesis for how the *Slit3* gene works in humans. It is somehow altering the level of serotonin receptors present, and the differences in the levels are presumably then influencing sensitivity to nicotine addiction."

Professor Brennan added: "As well as finding out more about the genes involved in nicotine addiction, most importantly, we've found an easier way of finding these genes in the future. Although zebrafish are a 'lower' organism, they have a similar genetic structure to humans and share 70% of genes with us. 84% of genes known to be associated with human disease have a zebrafish counterpart; and while there has been scepticism regarding their usefulness in terms of human cognition, we have shown that they can give insight into the genetics of that as well."

For more information see the publication: [Identification of Slit3 as a locus affecting nicotine in zebrafish and human smoking behaviour](#) is published by eLife. DOI: 10.7554/eLife.51295

### **Queen Mary researchers lead in UK first tuberculosis screening for migrants**

For the first time in the UK, Queen Mary researchers are leading clinics at Barts Health NHS Trust to offer latent tuberculosis infection (LTBI) screening for pregnant migrants in antenatal care.

The UK has one of the highest tuberculosis (TB) rates in Western Europe, with 4,655 cases in 2018, including 1,691 cases in London. People with LTBI have TB bacteria in their

body but have no symptoms because the bacteria is inactive.



Women with LTBI have a high risk of developing active TB during pregnancy and after childbirth, which carries a high risk of complications, and poor foetal and maternal outcomes.

The Screening for Tuberculosis in Pregnancy (STOP) programme, funded by the National Institute for Health Research (NIHR), is being offered at The Royal London Hospital, Newham Hospital and Whipps Cross Hospital. Screening for LTBI at the clinic only involves one blood test in addition to the screening tests routinely offered to patients in antenatal care.

Chief Investigator Dr Heinke Kunst, honorary consultant in respiratory medicine at Barts Health NHS Trust and Senior Lecturer in Respiratory Medicine at Queen Mary University of London said: "The programme, which has already screened 200 patients, provides a unique opportunity for migrant women to be screened and treated for LTBI to avoid the risk of developing active TB."

"Treatment for LTBI is given after once breastfeeding has stopped and will reduce the risk of active TB. This also allows migrant women who may not have GPs and who may not have had any contact with healthcare, to be screened for TB."

Veronica White, Clinical Director, Respiratory Medicine at St Bartholomew's Hospital said: "Screening for and then treating latent TB is an invaluable way of reducing active TB cases in the future and we are delighted that we have the funding for this project from the NIHR."

The service is offered for pregnant women aged 16 -35 years who entered the UK from countries with high TB rates such as the Indian

Subcontinent or sub-Saharan Africa. Migrants who have LTBI, and come from countries with a high TB incidence, are at high risk of developing active TB after they arrive in the

UK. Patients who have been booked for an appointment in antenatal care at the Royal London Hospital, Newham Hospital or Whipps Cross Hospital will be screened.

## Events

### RDS London drop-in sessions

Our drop-in sessions are an opportunity for you to have an informal chat with one of our advisers to get advice on your research idea or grant application and find out more about the support we provide.

The next session on 29 May, 12-2 pm will take place on a callback basis. Please submit your request on [this call-back form](#) in advance and they will phone back between 12:00 – 14:00.

To make the most of your time with their advisers they recommend that applicants have to hand a brief overview of their research, outlining the areas in which they are having difficulties and where they would like support and feedback.

If you cannot make a drop-in session, please don't wait to get advice: fill out our more detailed [request support form](#) and an adviser will provide you with initial feedback within two weeks.

## Training

### WFC Training

WFC recognises 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.

WFC 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 according to their needs. The content of the course is developed to be fully bespoke to the client.

[Contact WFC](#) to discuss your bespoke needs for 2020. Recent courses that have been delivered include:

Understanding and applying AcoRD principles (Including a module covering the use of the SoECAT and NHS England ETC process)

- Informed consent for research
- Clinical protocol development
- Principles of clinical research involving human subjects
- Regulatory compliance in clinical research
- Effective sponsorship of research

### 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.

## Research funding

### **Queen Mary Enterprise Zone Pump Priming Fund (PPF)**

The Pump Priming Fund (PPF) is available through [“Queen Mary Enterprise Zone” QME](#) to fund life science businesses for up to £50k for research and development projects to be undertaken in collaboration between Queen Mary academics and industry. The PPF is designed to prime new and innovative concepts that have the potential to impact the local businesses and local innovation system. In particular, PPF should provide an opportunity to obtain pilot data that enables subsequent submission of a collaborative R&D grant application to an external funding agency. Funding will be available for feasibility trials and demonstrations of new concepts including costs related to staff, consumables and small scale equipment.

The PPF operates a two-stage process; an initial one-page “Expression of Interest” followed by a full presentation by shortlisted applicants to a review panel consisting of internal stakeholders and external industry and investment experts. PPF awards will be a maximum of £50k per project, although applications for smaller amounts will be considered.

Applications are now open with a deadline of 3 May 2020.

Academics, researchers and clinical staff with innovative concepts are encouraged to co-apply with existing local partners. Further details can be found [here](#), but if you have any enquires or help in finding a commercial partner, contact [g.m.brown@qmul.ac.uk](mailto:g.m.brown@qmul.ac.uk) or [jay.patel@qmul.ac.uk](mailto:jay.patel@qmul.ac.uk)

### **UKRI funding**

#### **[ISCF digital security by design: technology-enabled business-led demonstrator, phase 1](#)**

UK businesses can apply for up to £5.8 million to collaborate on digital security by design demonstrator project in which an additional technology 'ingredient' is required. This

funding is from the Industrial Strategy Challenge Fund.

Closes: 13 May 2020

#### **[5G enabled road and rail transport trials in the West Midlands](#)**

UK businesses can apply for a share of up to £2.5 million to support the development of 5G enabled transport innovations.

Closes: 15 May 2020

#### **[EUREKA collaborative R&D: advanced materials, March 2020](#)**

UK registered businesses can apply for a share of up to £1 million for advanced materials R&D projects partnering with EUREKA country organisations, including South Korea.

Closes: 30 June 2020

#### **[GCRF demonstrate impact in developing countries: round 2, phase 1](#)**

Organisations can apply for a share of up to £9.3 million to demonstrate market-creating innovations in lower-income countries and emerging economies.

Closes: 6 May 2020

#### **[SBRI: monitor and visualise domestic pollution to safeguard health](#)**

Organisations can apply for a share of £100,000 including VAT, to develop an air quality monitor to provide information and advice on pollutants in the home.

Closes: 20 May 2020

#### **[Innovation Scholars secondments: biomedical sciences, strand 2](#)**

UKRI has allocated up to £5 million to fund innovation projects across the 3 streams. This competition is open to collaborations only.

Closes: 1 July 2020

#### **[Innovation Scholars secondments: biomedical sciences, strand 3](#)**

UKRI invites applications for individuals from any discipline wishing to spend up to 36 months (full or part-time) on secondment in the biomedical sciences sector.

Closes: 1 July 2020

#### **[UK-Canada: enhancing agricultural productivity and sustainability](#)**

UK businesses with Canadian business partners can apply for a share of up to £2 million, from the Industrial Strategy Challenge Fund, for innovative projects that enhance productivity and sustainability of crop, livestock and aquaculture systems.  
Closes: 20 May 2020

## **NIHR funding**

### **[COVID-19 Rapid Response Rolling Call](#)**

(open all 2020)

Building on the initial rapid funding round for COVID-19 research, the NIHR and UKRI are holding a rolling call for proposals for research into COVID-19.

### **[Research to support COVID-19 response in humanitarian settings](#)**

Closes: 3 May 2020

ELRHA is launching an urgent funding call for research proposals to support the COVID-19 response in humanitarian settings.

### **[Translating Research into Policy \(TRiP\)](#)**

Closes: 1 pm on 19 May 2020

The second round of the Research into Policy Call, now entitled Translating Research into Policy (TRiP)

### **[Invention for Innovation - Product Development Awards Call 20](#)**

Potential advert date: 3 June 2020

NIHR Invention for Innovation - Product Development Award Call 20

### **[Invention for Innovation - Challenge Awards Call 10](#)**

Potential advert date: 5 June 2020

NIHR Invention for Innovation - Challenge Awards Real World Implementation Call 10.

### **[20/19 Nasal decolonisation of MRSA](#)**

Closes: 13:00 on 29 July 2020

The Health Technology Assessment Programme is accepting stage 1 applications to their commissioned workstream for this primary research topic.

### **[20/18 Minimally invasive operative interventions for bladder outlet obstruction due to benign prostatic hyperplasia](#)**

Closes: 13:00 on 29 July 2020

The Health Technology Assessment Programme is accepting stage 1 applications to their commissioned workstream for this primary research topic.

### **[20/20 Imaging in paediatric osteomyelitis](#)**

Closes: 13:00 on 29 July 2020

The Health Technology Assessment Programme is accepting stage 1 applications to their commissioned workstream for this primary research topic.

### **[20/21 Subcutaneous vs oral methotrexate for rheumatoid arthritis](#)**

Closes: 13:00 on 29 July 2020

The Health Technology Assessment Programme is accepting stage 1 applications to their commissioned workstream for this primary research topic.

### **[20/23 Diagnostic tools to establish the presence and severity of peripheral arterial disease in people with diabetes](#)**

Closes: 13:00 on 29 July 2020

The Health Technology Assessment Programme is accepting stage 1 applications to their commissioned workstream for this primary research topic.

### **[20/24 Psychological intervention for complex post-traumatic stress disorder](#)**

Closes: 13:00 on 29 July 2020

The Health Technology Assessment Programme is accepting stage 1 applications to their commissioned workstream for this primary research topic.

### **[20/25 Guided self-help for depression in adults with autism spectrum disorder](#)**

Closes: 13:00 on 29 July 2020

The Health Technology Assessment Programme is accepting stage 1 applications to their commissioned workstream for this primary research topic.

### **[20/26 Antifungal stewardship in haematology](#)**

Closes: 13:00 on 29 July 2020

The Health Technology Assessment Programme is accepting stage 1 applications to their commissioned workstream for this primary research topic.

### **[20/27 Management of ankle fractures in children](#)**

Closes: 13:00 on 29 July 2020

The Health Technology Assessment Programme is accepting stage 1 applications to their commissioned workstream for this primary research topic.

### **[Doctoral Fellowship Round 4](#)**

Closes: 13.00 on 13 August 2020

For individuals from a range of health and social care professions to undertake a PhD in an area of NIHR research.

#### **[Advanced Fellowship Round 4](#)**

Closes: 13.00 on 29 July 2020

The NIHR Advanced Fellowship funds post-doctoral individuals from a range of health and social care professions.

#### **[20/32 Public Health Research Programme Researcher-Led](#)**

Closes: 13:00 on 28 July 2020

The Public Health Research Programme are accepting stage 1 applications to their researcher-led workstream.

#### **[20/31 Continuing priority research topics of interest to the PHR Programme](#)**

Closes: 13:00 on 28 July 2020

The Public Health Research Programme are accepting stage 1 applications to their commissioned workstream for this topic.

#### **[NIHR-Wellcome International Master's Fellowships](#)**

Closes: 17:00 BST on 21 April 2020

The International Master's Fellowships scheme offers nationals of low- and middle-income countries (LMICs) the opportunity to receive training at Master's degree level.

#### **[NIHR-Wellcome International Intermediate Fellowships](#)**

Closes: 17:00 on 7 May 2020

The International Intermediate Fellowships scheme offers nationals of low- and middle-income countries (LMICs) the opportunity to lead their own research programmes.

#### **[NIHR-Wellcome International Training Fellowships](#)**

Closes: 17:00 on 7 May 2020

The International Training Fellowships scheme offers nationals of low- and middle-income countries (LMICs) the opportunity to receive training at postgraduate or postdoctoral level.

#### **[Research for Patient Benefit Programme - Competition 42](#)**

Closes: 13:00 on 15 July 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.

#### **[20/30 Local Authority Research System call - Exploring how to support local government health research](#)**

Closes: 13:00 on 22 May 2020

The Public Health Research Programme are accepting Stage 2 applications to this funding opportunity.

#### **[Programme Development Grants - Competition 27](#)**

Closes: 13.00 on 13 May 2020

Applications are invited for Programme Development Grant funding. Programme Development Grants are designed to increase the rate and number of successful applications for a full Programme Grant by supporting the completion of the necessary preparatory work to suitably position the research team to submit a competitive Programme Grant application.

#### **[Public Health Intervention Responsive Studies Teams \(PHIRST\) call for Local Authority Initiatives](#)**

Closes: 13:00 on 9 June 2020

The Public Health Research Programme is accepting Expressions of Interest from Local Government for research ideas for the Public Health Intervention Responsive Studies Teams (PHIRST).

#### **[HEE/NIHR ICA Clinical Doctoral Research Fellowship](#)**

Closes: 13:00 on 7 July 2020

The CDRF funds eligible healthcare professionals to undertake a PhD and professional development in parallel, alongside continued clinical practice.

#### **[HEE/NIHR ICA Clinical Lectureship Round 6](#)**

Closes: 13.00 on 7 July 2020

The ICA Clinical Lectureship scheme supports post-doctoral non-medical healthcare professionals.

#### **[IAT Clinical Lectureships in Medicine 2020](#)**

Closes: 30 June 2021

NIHR IAT CLs provide opportunities for postdoctoral research and facilitate applications for further research funding.

#### **[HEE/NIHR ICA Senior Clinical Lectureship Round 6](#)**

Closes: 13.00 on 7 July 2020

The ICA Senior Clinical Lectureship schemes supports post-doctoral non-medical healthcare professionals.

#### **[20/12 Evaluation of the Low-Calorie Diet Programme - UPDATED](#)**

Closes: 13:00 on 14 July 2020

The Health Services and Delivery Research (HS&DR) Programme is accepting stage 2 applications to their commissioned workstream.

#### **[Global Health Research Presentation and Training Travel Award Pilot](#)**

Closes: 24 July 2020

This award allows eligible applicants to enhance presentation, networking and communication skills and to maximise cross NIHR opportunities.

#### **[20/06 Reducing health inequalities in coastal towns and communities](#)**

Closes: 13:00 on 28 July 2020

The Public Health Research Programme (PHR) accepting stage 1 applications to their commissioned workstream for this topic.

#### **[20/07 Mobile data for public health](#)**

Closes: 13:00 on 28 July 2020

The Public Health Research Programme (PHR) accepting stage 1 applications to their commissioned workstream for this topic.

#### **[19/161 - Health Technology Assessment Programme researcher-led evidence synthesis](#)**

Closes: 13:00 on 6 May 2020

The Health Technology Assessment Programme is accepting stage 1 applications to their researcher-led workstream.

#### **[19/160 - Health Technology Assessment Programme researcher-led primary research](#)**

Closes: 13:00 on 6 May 2020

The Health Technology Assessment Programme is accepting stage 1 applications to their researcher-led workstream.

#### **[19/164 PHR Injuries, accidents and urgent and emergency care themed call](#)**

Closes: 13:00 on 28 July 2020

The Public Health Research Programme (PHR) is accepting stage 1 applications for this Themed Call.

#### **[19/154 HSDR oral and dental health](#)**

Closes: 13:00 on 7 May 2020

The HS&DR Programme is accepting stage 1 applications for this funding opportunity.

#### **[19/155 HTA oral and dental health](#)**

Closes: 13:00 on 6 May 2020

The HTA Programme is accepting stage 1 applications for this funding opportunity.

#### **[19/135 Interactive electronic devices and children and young people's wellbeing](#)**

Closes: 13:00 on 28 July 2020

The Public Health Research Programme (PHR) accepting stage 1 applications to their commissioned workstream for this topic.

#### **[19/120 Relapsing polymyalgia rheumatica](#)**

Closes: 13:00 on 29 July 2020

The Health Technology Assessment Programme is accepting stage 1 applications to their commissioned workstream for this primary research topic.

#### **[19/122 A cross-sectional study and modelled evaluation of the performance of bowel cancer screening in England](#)**

Closes: 13:00 on 29 July 2020

The Health Technology Assessment Programme is accepting stage 1 applications to their commissioned workstream for this primary research topic.

#### **[19/124 Effectiveness of meniscal allograft transplantation](#)**

Closes: 13:00 on 29 July 2020

The Health Technology Assessment Programme is accepting stage 1 applications to their commissioned workstream for this primary research topic.

#### **[19/128 Administration routes of steroids in the first-line treatment of idiopathic sensorineural hearing loss](#)**

Closes: 13:00 on 29 July 2020

The Health Technology Assessment Programme is accepting stage 1 applications to their commissioned workstream for this primary research topic.

#### **[Global Alliance for Chronic Diseases: Primary and/or Secondary Prevention of Cancer](#)**

Closes: 16:00 on 30 July 2020

The NIHR and the MRC, in partnership with the Global Alliance for Chronic Diseases (GACD), is seeking to generate new knowledge on interventions and their implementation for the primary and/or secondary prevention of cancer in Low- and Middle-Income Countries (LMICs).

#### **MRC funding**

#### **[Career Development Award \(CDA\): April 2020](#)**

Closing date: 6 May 2020 16:00 GMT+1

The CDA supports talented post-doctoral researchers to lead their own research plans

and establish their own research team to make the transition from post-doctoral researcher to independent investigator.

**[Senior Non-Clinical Fellowship \(SNCF\): April 2020](#)**

Closing date: 6 May 2020 16:00 GMT+1  
The SNCF supports proven independent researchers with an effective track record of internationally competitive independent research to make the transition to research leadership.

**[ERA-HDHL Call for Joint Transnational Research Proposals \(PREVNUT\)](#)**

Closing date: 12 May 2020 17:00 GMT+1  
BBSRC and MRC are pleased to announce support for UK participation in the JPI HDHL Joint Action on Development of targeted nutrition for prevention of undernutrition for older adults (PREVNUT) and encourage their research communities to apply for funding as part of transnational consortia.

**[Health Systems Research Initiative Call 7: Providing evidence to strengthen health systems in low and middle-income countries](#)**

Closing date: 28 May 2020 16:00 GMT+1  
Innovative proposals are sought from across the public health, social and biomedical sciences to the seventh annual call for the Health Systems Research Initiative. Up to £4.7 million is available for funding foundation and full proposals under this call.

**[Strategic Priorities Fund: Centre for Doctoral Training \(CDT\) in Food Systems](#)**

Closing date: 28 Jul 2020 16:00 GMT+1  
Categories: UK Research and Innovation (UKRI) in partnership with the government are pleased to announce a £5 million call to support one Centre for Doctoral Training (CDT) focused on developing the next generation of interdisciplinary food systems thinkers.

**[GACD: Primary and Secondary Prevention of Cancer Funding Call](#)**

Closing date: 30 Jul 2020 16:00 GMT+1  
The Medical Research Council and the National Institute for Health Research, in partnership with the Global Alliance for Chronic Diseases (GACD), are seeking to generate new knowledge on interventions and their implementation for the prevention of cancer in low and middle-income countries (LMIC).

**The Academy of Medical Sciences Springboard Round 6, 2020 now open.**

These awards provide up to £100,000 over two years and a personalised package of career support to help newly independent biomedical scientists to launch their research careers. Please [visit the Academy's website here](#) to check eligibility.

A maximum of 4 candidates can be nominated from Queen Mary. Nominations for Springboard need to be triaged through the Queen Mary Springboard panel lead by Kairbaan Hodivala-Dilke.

If you are eligible and are interested in applying please contact Meagan Dreihaupt ([m.dreihaupt@qmul.ac.uk](mailto:m.dreihaupt@qmul.ac.uk)) who is helping coordinate applications.

Full application must be submitted for Queen Mary internal review by 1 May 2020.

**UKRI Innovation Scholars**

UK Research and Innovation have launched a new cross-cutting programme. The Innovation Scholars scheme aims to increase the porosity of the research environment by supporting the transfer of talent and skills between academia, business and other sectors.

For the pilot phase, academics at any post-PhD career stage will be funded to work in a business involved in biomedical science research and innovation. This includes pharmaceutical, biotech, venture capital, devices, biomedical engineering and/or diagnostics.

For more information click [here](#), or contact: [InnovationScholars@ukri.org](mailto:InnovationScholars@ukri.org)

**Jordan – UK El Hassan bin Talal Research Chair in Sustainability**

The British Academy is now inviting applications to the Jordan – UK El Hassan bin Talal Research Chair in Sustainability. The application form is available online on the Academy's Flexi-Grant system. The deadline for applications is **Wednesday 6 May 2020, 5 pm UK time**.

The Jordan – UK El Hassan bin Talal Research Chair in Sustainability is a new

collaboration between the Royal Scientific Society of Jordan (RSS) and the British Academy initiated in 2020 and supported by the Newton-Khalidi Fund.

The availability and supply of highly skilled researchers, capable of driving excellent research and innovation, is of the utmost importance for the sustained growth of the Jordanian economy and for improving its competitiveness in a world economy that is increasingly becoming knowledge-based. This programme is aimed at increasing research capability in Jordan through the development of human capacity and the generation of new knowledge in an area that is of strategic relevance to Jordan. It is also intended to support the realisation of Jordan's transformation into a knowledge economy in which scientific knowledge translates into socio-economic development.

To find out more information, and to apply, click [here](#).

#### **AXA Research Fund - Exceptional Flash Call for Proposals on COVID-19**

In response to the current COVID-19 crisis, the AXA Research Fund Team is launching a flash call for projects: Mitigating risk in the wake of the COVID-19 Pandemic.

Projects should focus on the following:

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- **Protecting vulnerable populations from epidemics and catastrophes, including COVID-19:** be it migrants, informal settlements, workers in the informal economy, isolated people, people with disabilities, the elderly.
- **Improving data collection and quality in health:** how can data and technology help us get out of the crisis, understand it and mitigate it? How can it inform future containment and epidemic control?
- **Understanding the effects of confinement and social distancing:** what are the effects of confinement and social distancing on society and households? What are mental health consequences? The social and domestic repercussions?
- **Early warning and preparedness:** how do we re-enforce our health infrastructure and ecosystem (including medical devices and drug supply) to be better prepared and how do we protect our health workers and caregivers?
- **Preserving the environment and our health:** connections between climate change, biodiversity loss and the origin of viral disease including socioeconomic dynamics leading to infectious disease outbreaks and sanitary crisis; Learnings from COVID-19 for mitigating future related crises in climate and biodiversity

The call will close on **May 7, 2020, 4 pm Paris time**. More information can be found [here](#).

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