



**National Institute for  
Health Research**

**Advisory Board**

11 May 2011

**Note of meeting**

***Members Present:***

Candy Morris (Chair)  
Angela Barnard  
Peter Beresford  
Hilary Chapman  
Mike Cooke  
Sally Davies  
Simon Denegri

David Foster (for C Beasley)  
Russell Hamilton  
David Loughton  
Malcolm Lowe-Lauri  
Michael Moore  
***Secretariat:***  
Sally Bishop

***Apologies:***

Chris Beasley  
Kathy Doran  
Nigel Edwards  
Michael Farthing  
Liam Hughes

Danny Keenan  
Bruce Keogh  
Ron Kerr  
Patrick Maxwell  
Stephen Smye  
John Tooke

**Welcome and apologies**

1. Candy Morris welcomed everyone to the meeting. Apologies are noted above.
2. The Board congratulated Dame Sally on her appointment as Chief Medical Officer and Simon Denegri on his appointment as Chair of INVOLVE. The Board agreed that Simon should remain a member of the Board after he has taken up post as Chief Executive of Ovarian Cancer Action.

**Note of last meeting**

3. No amendments were made to the note.

## **Update from Dame Sally and reflection on comments received from the Board (NIHR(11)01 refers).**

4. Dame Sally said that she was retaining the R&D leadership role as well as being CMO.
5. Sally informed the Board about the formation of the NIHR Strategy Board at which Directors of NIHR Programmes and Co-ordinating Centres will meet to discuss NIHR strategy and corporate issues.
6. Sally ran through some of the achievements, which the NIHR has made over the last year. (Details are available on the news page of the NIHR website [www.nihr.ac.uk/news/Pages/default.aspx](http://www.nihr.ac.uk/news/Pages/default.aspx)). The Board congratulated the team on the impressive list of important achievements. In particular, they welcomed the NIHR School of Public Health.
7. Russell Hamilton reported that he was working with HEFCE to try to change the RAE/REF system so that the NIHR income to HEIs is included alongside that of BIS Research Councils'. He was also seeking to include access to NIHR funded faculty time in the system being proposed to recognise income-in-kind to HEIs from access to Research Council faculty time.

## **Translational Research**

8. Dame Sally informed the Board about progress with the new Biomedical Research Centres and Units competition; plans for new NIHR Research Professorships; and programmes to fund Health Technology Co-operatives, invention for innovation, e-health and efficacy and mechanism evaluation research.
9. Malcolm Lowe-Lauri reported that the NIHR was now seen as on a par with the MRC. People put the same amount of effort into applying for, and store by receiving, NIHR research funding as they did for other prestigious research funders.

## **Growth Review**

10. Russell Hamilton outlined the research related elements of the Growth Review. Details can be found at: [www.nihr.ac.uk/about/Pages/GovernmentsPlanforGrowth.aspx](http://www.nihr.ac.uk/about/Pages/GovernmentsPlanforGrowth.aspx)
11. The Advisory Board welcomed these developments. The charity and industrial sectors had lobbied hard for recognition of the role of health research in the economic recovery. The SR settlement and the plans for growth showed that this point was understood by Government. It would also be important to re-iterate the importance of the demand-side.

## **Research in the new health commissioning system and the listening exercise.**

12. Russell Hamilton outlined the current provisions of the Health Bill with respect to research and asked what changes the Board thought were needed.
13. The Board expressed concern that where people were not already research enthusiasts, the Bill did not do enough to ensure that research would be supported. For example, there was a danger that the treatment costs associated with research would be not funded. Not all future commissioners would be 'steeped in research'. Requirements to support research should be mandated. How people would be held to account for the effect of their actions on research required consideration. It would be important for commissioners to understand the wider benefits of research to patients, the NHS and the economy and not just to focus on research of parochial interest.
14. The importance of engaging with new NHS bodies as they emerged about the importance of research was highlighted. Board members who were involved in the Listening exercise and other relevant fora would feed-in the importance of research. DH would provide some briefing. Pressure from patients/patient bodies could also help. **Action: Sally Bishop and Board members**
15. Sally Davies should use her speech at the NHS Confederation to explain how to be a research oriented commissioner and give them her 'top 10 tips re research'. **Action: Sally Davies.**
16. Some of the NIHR research networks were working with GPs who will become commissioners to outline the processes and benefits of being involved in research.
17. The Board expressed concern about the effect of changes to education and training on research.

## **Any other business**

21. There was no other business.

**Date of next meeting:** 14 September 2011.