



Minutes of the Board meeting

8 June 2017

Present:

Professor Stephen Holgate CBE (SH) *Chair*
Dr Paul Brooker (PB)
Professor Chris Denning (CD)
Mr Paul Finnemore (PF)
Professor Ian Jackson (IJ)
Dr Ceri Lyn-Adams (CLA)
Dr Tony Peatfield (AP)
Mr Terry Priest (TP)
Professor Stefan Przyborski (SP)
Dr Ian Ragan (IR)
Dr Vicky Robinson (VR)
Professor Blanca Rodriguez (BR)
Professor Lucy Walker (LW)
Dr Carl Westmoreland (CW)

Office:

Dr Nathalie Percie du Sert (NPdS) *Item 6*
Dr Katie Bates (KB) *item 5*
Dr Anthony Holmes (AH) *Item 8*
Dr Mark Prescott (MP)
Kayleigh Purdon (KP) *Secretariat*

1. Welcome

1.1. SH welcomed members to the meeting.

SH introduced Dr Ceri Lyn-Adams, Head of Science Strategy, and Bioscience for Health who has replaced Dr Jef Grainger as the BBSRC representative on the Board.

2. Minutes and actions from the meeting on 30 June

2.1 The minutes from the January meeting were agreed to be an accurate account of the discussions.

3. NC3Rs Strategy

VR outlined the draft NC3Rs strategy for the next three years and thanked members who had already provided comments. Members discussed the issues covered in the strategy including the 3Rs “Valley of Death” between the development and uptake of new 3Rs approaches. KB gave examples from work presented to the Impact Group highlighting the different barriers to uptake and how these were being tackled by the NC3Rs. The Board agreed that a social science input would be useful in exploring how the NC3Rs could better address the cultural changes required to accelerate the adoption of 3Rs methods into routine practice.

4. NC3Rs summary on activities and updates

4.1 The Board noted the update on current activities. VR provided further details on:

Staff

- There were a number of vacancies to be filled including the position of Programme Manager for Early Career Awards. Only one of the five posts covering maternity leave has been recruited to. The Association of the British Pharmaceutical Industry had confirmed it will continue to fund the Programme Manager post for Disease Models, Efficacy and Safety Pharmacology for a further three years.

Fixed concentration procedure (FCP)

Following the last Board meeting, the fixed concentration procedure for acute inhalation studies had been accepted by the OECD.

Other

- 4.2 VR highlighted external funding and the funding bids that had been submitted or were in preparation. It was agreed that it was timely to consider whether there are other mechanisms for industry (and other organisations unlikely to provide core funding) to support the work of the NC3Rs beyond sponsoring posts. PB and VR to develop a plan.

5. Research funding update

- 5.1 KB provided the Board with the following updates:

ResearchFish

The 3Rs question set had been revised to improve the quality of data submitted. This included additional questions on challenges relating to publishing and disseminating 3Rs advances.

Project grants

Following the outline assessment panel meeting in March, 24 applicants were invited to submit full applications. These are currently undergoing peer review. Final awards will be made in July.

Skills and Knowledge Transfer

The Panel met for the first time in April and recommended four applications for funding. Awards are for 12 months and limited to £75k.

Studentships

A proposal had been submitted to the British Heart Foundation to continue co-funding three PhD studentships with the NC3Rs for the next three years.

Some amendments have been made to the application form and process. The outline form has been updated to include more emphasis on training and mentoring. Applicants are now required to provide a mandatory letter of support from the Head of Department at the outline stage.

David Sainsbury Fellowship

A webinar had been held for potential applicants. 9/21 participants submitted an outline application.

In total, 16 outline applications were received, with 11 invited to submit a full application following triage. Awards will be made in December.

Strategic award

Three applications were received for the strategic call on developing an Adverse Outcome Pathway (AOP) for cardiotoxicity. One award was made.

Other research funding activities

KB invited Board members to participate in the regular visits to grant holders. It was agreed that a list of visits would be circulated so that Board members could confirm which (if any) they wished to join.

6. Collaboration with F1000Research

- 6.1 NPdS outlined the NC3Rs new collaboration with F1000Research to establish an online Gateway for NC3Rs grant holders to publish their 3Rs method development where this had not been published in sufficient detail elsewhere for other labs to adopt. The choice of selecting F1000Research was described as well as the SWOT analysis that had been conducted by the NC3Rs Impact Group.
- 6.2 The aim is to launch the Gateway in spring 2018 and in preparation plans had been communicated to new grant holders, and staff had been working with existing grant holders to identify research to include when the Gateway is launched.

7. Non-mammalian models for disease research

- 7.1 Dr Tim Chico from the Bateson Centre, University of Sheffield gave an introduction to the work of the Centre which focuses on the use of non-mammalian models for disease research, providing examples of using the models for 3Rs purposes.
- 7.2 VR outlined a proposal for a collaboration to establish at the Bateson Centre a critical mass and research hub to maximise the 3Rs potential of non-mammalian model systems. The plan was to approach Wellcome for funding to support this. The Board agreed that the proposal was strong and that a sub-group of members would work with VR to review the funding bid before it was sent to Wellcome.

8. CRACK IT update and Business Growth scheme

- 8.1 AH gave an update on CRACK IT Challenges and Solutions. Since January five new CRACK IT Solutions have been showcased on the website. The funding for CRACK Solutions has increased from £30k to £50k per technology included. The NC3Rs has funded two new collaborative projects
 - Applying novel imaging platforms to tissue engineered corneal tissue constructs
 - Studying pain *ex vivo*
- 8.2 AH also provided an update on the Business Growth scheme. Following discussion with the CRACK IT Advisory Panel, one CRACK IT contractor had been invited to submit a full application for funding to maximise the business potential of the product developed. Two other contractors had attended the Panel meeting but were not considered to have a product with sufficient “technology-readiness” levels for further funding at this stage.

9. Annual review of the NC3Rs risk register

- 9.1 The Board reviewed the NC3Rs corporate risk register:
 - Relationship with MRC (R-3103) - AP requested the wording be amended to better reflect the relationship with the MRC.
 - Staffing (R-5035) - A new risk has been added due to the current number of vacant positions primarily because of staff on maternity leave.
 - The Board noted the remaining risks and existing control measures as appropriate.

10. AOB

10.1 The next Board meeting will be held on the 17 October.

10.2 VR proposed that the NC3Rs should establish a small ethics committee to review in-house projects involving data sharing since the question of ethical review of such work was increasingly being raised by referees when manuscripts were submitted for publication. VR to update at the next meeting.

10.3 MP's update the Board on the NC3Rs peer review and non-human primate activities to be deferred until the next meeting in October.