Minutes of the Council business meeting held at One Kemble Street on 13 July 2016

Present:

<table>
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<th>Council</th>
<th>Head Office staff</th>
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<td>Mr Donald Brydon (Chairman)</td>
<td>Ms Sam Bartholomew</td>
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<td>Sir John Savill (CEO)</td>
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<td>Professor Chris Day</td>
<td>Mr Hugh Dunlop</td>
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<td>Dr John Brown</td>
<td>Dr Declan Mulkeen</td>
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<td>Professor Dame Sally Davies</td>
<td>Dr Tony Peatfield</td>
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<td>Professor Dame Janet Finch</td>
<td>Dr Frances Rawle</td>
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<td>Professor Dame Sally Macintyre</td>
<td>Dr Jim Smith</td>
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<td>Dr Ruth McKernan</td>
<td>Mrs Helen Page</td>
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<td>Baroness Onora O’Neill</td>
<td>Mrs Kate Aylett (item 9)</td>
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<td>Dr Mene Pangalos</td>
<td>Dr Rhos Walker (item 9)</td>
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<td>Professor Michael Schneider</td>
<td>Dr Sarah Dickson (item 9)</td>
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<td>Professor Andrew Morris (item 9)</td>
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<td>Observer</td>
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<td>Ms Jenny Dibden (BIS now BEIS)</td>
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Apologies:
Professor Doreen Cantrell
Professor Paddy Johnston

Council business meeting

The meeting began at 2pm.

1A. Announcements and apologies

Mr Brydon welcomed members to the meeting and noted that it would be the last meeting for Dame Sally Macintyre, Professor Schneider and Dr McKernan as Council members. He thanked them for all the hard work, expertise and valuable input they had brought to Council.

Mr Brydon was joined by Council in congratulating Professor Day on his appointment as Vice Chancellor at the University of Newcastle. Mr Brydon also congratulated the MRC-associated people whose achievements had been recognised in the Queen’s Birthday Honours:
• Professor Doug Turnbull, mitochondrial disease expert and advocate of mitochondrial donation, and Dr Richard Treisman, Research Director at the Francis Crick Institute, had both been awarded knighthoods.
• Professor Sue Gathercole, Director of the MRC Cognition and Brain Sciences Unit, had been awarded an OBE for services to psychology and education;
• Kathy Hill White, MRC Manager in The Gambia, had been awarded an MBE for supporting research in developing countries; and
• Michele Marron, lately Director of Operations at the MRC National Institute for Medical Research, had been awarded a British Empire Medal for services to biomedical science.

Finally, Mr Brydon noted that apologies had been received from Professors Cantrell and Johnston.

1B. White space: Outcome of the EU referendum

Ms Dibden informed Council that Jo Johnson, Minister for Universities and Science, had given evidence at the House of Commons Science and Technology Committee inquiry into leaving the EU that morning. He had stressed that there should be no discrimination against UK institutions in applying for Horizon 2020 applications, and researchers who experienced EU-related incidents and discrimination were asked to report these to BIS (now BEIS). BIS was in the process of gathering stakeholder views and it would be important for the research community to make the case for the best model going forward.

Sir John reported that the view amongst research council CEOs was that the most important issue was people and the focus should be on attracting/retaining the best scientists. Sixteen per cent of researchers in the UK were non-British EU nationals, and at the Crick 31 per cent of the principal investigators and 56 per cent of post-docs were non-British EU nationals. Non-British EU citizens made a very important contribution to the UK research base and to the economy.

Council discussed the importance of providing reassurance to those MRC employees who were non-British nationals from the European Economic Area (EEA) regarding their future in the UK. Sir John would send an email to all MRC staff later that week and Council noted that the MRC would offer help and support to staff who wished to apply for permanent residency in the UK. The MRC would also investigate the feasibility of offering to reimburse permanent residence application fees.

2. Register of declared interests

The Chairman requested that members inform the secretariat of any updates to their declarations of interest.

3. Minutes of the Council business meeting held on 12 May

The minutes of the Council business meeting held on 12 May were approved as an accurate record.

Mr Brydon noted that he had recently undertaken an annual appraisal of each Council member’s contribution and thanked members for their participation. A report of the outcome of the appraisals had been tabled. Overall the report had been very positive although some issues had been highlighted such as how to achieve the optimum balance between Council and Strategy Board. Council agreed that the white space session at December Council should be focused on the issue.
4. Matters arising

4A. Report from the Council Audit and Risk Assurance Committee (CARAC)

Council noted the report from the CARAC meeting held on 21 June. CARAC had looked very thoroughly at the issues surrounding the Funding Assurance Programme (FAP) and had confirmed that there was satisfactory assurance for 2015/16.

4B. Report from the Nominations Committee

Mr Brydon informed members that the four Council vacancies (two science, one industry and one lay) had been advertised with a closing date of 19 July.

4C. Minutes from the Strategy Board meeting held on 8 June

Sir John updated Council on discussions at the Strategy Board meeting that had been held on 8 June and thanked Dr Brown for attending the meeting.

Items discussed by Strategy Board had included the commitment budget (following Council’s approval of the principles of allocation and budgets on 12 May); the direction of travel of the MRC’s mental health strategy; and the proposed future strategy for the Population and Systems Medicine Board (PSMB) presented by the incoming Chair, Professor Paul Elliott.

Baroness O’Neill highlighted that the new EU Data Protection Regulation would not be implemented until May 2018 so, following the EU Referendum outcome, it was unclear how this would apply to the UK.

Dame Janet stressed the importance of ensuring that the social science dimension was adequately represented in mental health research. For example, how city-living affected mental health. It would be important to ensure that mental health research was truly interdisciplinary and she suggested that Strategy Board membership should be reviewed to ensure it had the right skill set to reflect this. Sir John informed members that the ESRC had identified mental health as a key strategic objective and ESRC’s CEO, Jane Elliott, would be meeting with Strategy Board to discuss how to align strategies.

Council agreed that further thought should be given as to how Strategy Board reported to Council to ensure that Council members were fully engaged and informed.

5. CEO’s report

Sir John Savill introduced this item and discussed the following issues.

The Crick
Dr Smith informed members that although the date for practical completion of the new building had now slipped to the end of July, he was optimistic that the migration plans for the relocation of staff into the building would be maintained.

Council agreed that an oral report from Professor Cantrell, who represented the MRC on the Crick Board, should be included at future meetings.

UK Dementia Research Institute (DRI)
Sir John informed Council that an update on progress with the Dementia Research Institute had been included in the CEO’s report. A final decision on the business case was expected shortly. Twenty applications for the role of Director of the DRI had been received from international and UK candidates and a number of excellent candidates had been shortlisted. Interviews would take place on 22 September.
MRC Pension Scheme – new Chair of Trustees
The tenure of the current Chair of Trustees of the MRC Pension Scheme, David Cranston, would end in October 2016 and a suitable replacement had been identified. The final selection panel, which consisted of Donald Brydon, Bruce Minty and Sally-Louise Smith, had recommended the appointment of Mr Bill Rayner to the Chair position. Mr Rayner had over 30 years’ experience in the private sector and had recently held a post with the UK Government Actuary’s Department (GAD) sitting on various Boards.

Council approved the appointment.

UKRI and the Higher Education and Research Bill
Ms Dibden reported that work on the bill was progressing and the second reading in parliament was expected to take place before the summer recess.

Sir John Kingman had started in his role as interim Chair of UKRI and had met many stakeholders including research council staff.

6. Finance report

Mr Dunlop informed Council that the 2015/16 Annual Report and Accounts had been signed by the Comptroller and Auditor General and would be laid before Parliament that day. The FAP issues had been resolved satisfactorily and a review would take place to make changes for 2016/17.

7. Risk Management Annual Report

Dame Janet introduced the Risk Management Annual Report which summarised the risk management activities for the period 1 April 2015 to 31 March 2016. The report showed that both risk management and assurance were becoming increasingly embedded and integrated within the organisation. Dame Janet drew Council’s attention to the existence of the Assurance Map which set out the areas against which the MRC required assurance together with the sources of assurance.

8A. University units update

Council noted the progress with the university unit programme which had been outlined in the paper. Mr Minty highlighted that the MRC Clinical Trial Service Unit had transferred to MRC university unit status at the University of Oxford on 1 July 2016. The unit would now be known as the ‘MRC Population Health Research Unit (MRC PHRU) at the University of Oxford’. The MRC Institute of Hearing Research (IHR) had transferred to MRC university unit status at the University of Nottingham on 1 June 2016. The unit would now be known as the ‘MRC Institute of Hearing Research (MRC IHR) at the University of Nottingham’.

9. Delivering a National Institute in Health and Biomedical Informatics Research

Professor Andrew Morris (Farr Institute), Dr Walker and Mrs Aylett (both MRC Head Office) were welcomed to the meeting.

Sir John reminded members that Council has previously discussed the intention to establish a national institute for health and biomedical informatics research, to build on and consolidate the MRC’s previous informatics investments in the Farr Institute and Medical Bioinformatics Awards. The institute would capitalise on the momentum created by the existing Farr Institute and MRC Medical Bioinformatics Awards, incorporating the £70m of UK-wide infrastructure established through these awards.
Dr Graham Spittle, Vice-President IBM and a former chairman of the Technology Strategy Board, had been appointed as Strategic Advisor, and a Scientific Leaders Team had been convened to develop the plans. Dr Spittle had led discussions to identify the major priorities and the strategic and scientific need for a national informatics institute. As Dr Spittle had been unable to attend the Council meeting, he had pre-recorded a video presentation outlining the vision and ambition of the institute which was played for members.

Sir John commended Dr Spittle’s remarkable leadership and the impressive job he had done in the last nine months convening many institutions – the strength of partnership support was very strong.

Members then discussed the purpose of the institute and requested greater clarity on its aims and ambitions. Sir John drew members’ attention to the draft illustration at figure 4 in the paper which summarised the core and data-driven medical research themes of the proposed institute. He explained that the proposed institute was bold, ambitious and enterprising and its unique contribution would be to enable research using a depth and scale of data that could not be achieved currently. An international search would be undertaken to find an outstanding director and through their leadership, the institute would deliver a co-ordinated and proactive UK-wide programme of medical data science research and embed data science capabilities, for the benefit of the UK. The specific research priorities and challenges to be addressed by the institute would be set by the director once they had been appointed.

Mr Brydon left the meeting and Sir John chaired the remainder of the meeting in his capacity as the Deputy Chair of Council.

Sir John noted that Dame Fiona Caldicott’s recently published review of data security, consent and opt-outs had been helpful in arguing the benefits of sharing data and made proposals about how to gain public trust. The protocols for making data available for research purposes had been covered in the review. In the future a national institute would take a lead in demonstrating best practice on the safe use of data.

Council turned to the proposed budget for the institute. Investment within a national institute would need to provide long term, sustainable and flexible support. A request of £37.5m was being made to Council to support the institute over a five-year period from the MRC Strategic Budget. Additional funding was being sought from the existing Farr funder partners for a further ~£10m to bring the core funding of the institute to £45m-50m over five years. The approved funding package would be presented to the director, who would develop detailed budgetary plans within this funding envelope. These plans would be reviewed and scrutinised by an independent expert committee.

Council endorsed the plans for the establishment of the institute and the £37.5m indicative budget in principle, subject to further information regarding the purpose and remit of the institute, and further clarification of the relationship with NHS data providers.

Council agreed that the director’s recruitment package should be drafted to address these matters and be shared with Council for approval prior to the advertisement going live.

Council also agreed that Dr Spittle should be invited to be the interim chair of the Board and to chair the appointments panel for the director search.

Post-meeting note: Council approved by correspondence the requested amendments and clarifications of the director’s recruitment package; to avoid potential confusion with organisations such as NIHR and NIH, the working title for the institute will be "UK Institute for Health and Biomedical Informatics Research (UKIHBIR)."
10. **MRC strategic evaluation update**

Sir John welcomed Dr Viney to the meeting and congratulated him on the award of an MBE in the New Year’s Honours list for his services to research funding and evaluation.

Dr Viney updated Council on progress with the MRC’s strategic evaluation programme. In 2015 the MRC had led the case for research councils to establish a shared cross-council team to support the gathering of annual feedback from researchers via researchfish®. This was the second year that all seven research councils had used the researchfish® system, and the number of other funding agencies that were collecting data via the federated researchfish® system had now grown to 62. In order to set the MRC results in the context of other organisations, the MRC would invest time in joint analysis with other researchfish® users to build a “UK community of practice for output collection and analysis”.

Dr Viney informed Council that 64 funders of UK health research had contributed data to the UKCRC *UK Health Research Analysis 2014* which had been led by the MRC. Analysis of changes in research activity between 2004 and 2014 showed that over the years a greater proportion of research funding had been spent on translation. Work was now underway to enable the data to be available on an annual basis with coding to be carried out via an automated process.

Following three rounds of funding, seven MRC projects (total commitment £1.3m) had been supported with the aim of better understanding the link between research and economic, societal and academic impact. The second study had now finished and the published results delivered the first UK estimate of economic spill-overs from public and charity supported health research. The research found that public sector research encouraged investment by industry; for every £1 of public money invested in medical research, an almost equivalent additional 99p of research and development was supported by the private sector in the UK. These results could be expressed as a real annual rate of return for the economy of 17 per cent, equivalent to the UK receiving 17p interest each and every year on £1 spent by government on medical research.

Dr Viney presented an evaluation of major investments which plotted citation impact versus the cost of the research. This analysis had been used to set a baseline for future assessment of progress with research at the Crick Institute. Council discussed how this kind of evaluation could be used to help HEIs identify if their research was getting value for money although it was noted that this would dependent on the nature of the research. Members suggested slicing the data by themes for comparison.

Members turned to the criteria for official development assistance (ODA) noting that the primary intent for such funding was poverty alleviation in a list of prescribed countries. For MRC research, the award letter would state what the primary intent was and researchfish® could be used to identify the output as well as subsequent outcomes.

Finally, members commended Dr Viney for the impressive progress that had been made over the year.

11. **Programme for October open Council meeting**

Council considered the programme for the (5-6) October open Council meeting which would take place in Oxford.

12. **Any other business**

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1 Quantifying the economic impact of government and charity funding of medical research on private research and development funding in the United Kingdom

Dr McKernan informed members that, after a period of uncertainty following the spending review, the joint £10m Biomedical Catalyst 2016 competition between Innovate UK, the Medical Research Council and Scottish Enterprise had been launched.