

# MEDICAL RESEARCH COUNCIL



03

Trade Union Access: in part

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## Minutes of the Council Business meeting, held via zoom videoconference, on 11 December 2020

Attendees		
MRC Council	Management Board	MRC Head Office
Fiona Watt	Rob Buckle	Rachel Benny
John Brown	Hugh Dunlop	Simone Bryan
Kim Graham	Frances Rawle	
Roger Highfield	Susan Simon	<b>Guests</b>
Precious Lunga	Glenn Wells	Kate Aylett
Richard Murley		Sarah Collinge
Jill Pell	<b>Apologies</b>	Geraldine Clement-Stoneham
Munir Pirmohamed	Charlotte watts	Megan Dowie
Eleanor Riley		Toni-Jo Henderson
Graham Spittle		Ian Viney
Irene Tracey		
Pauline Williams		
Louise Wood		

### 1. Welcome and Apologies

The Council business meeting was held via Zoom videoconference.

Mr Richard Murley welcomed everyone to the meeting.

Dr John Brown joined the meeting from item four, Professor Jill Pell joined the meeting from item five onwards and Professor Kim Graham left after item six. Professor Charlotte Watts was unable to attend.

Professor Watt updated members with the announcement of a new appointment to Council. Dr Andy Richards would be joining Council from 1 April 2021. Dr Richards is Chairman of Congenica, Abcodia, Closed Loop Medicine, Arecor and the Babraham Research Campus, and a Director of Ieso Digital Health, Owlstone Medical, and Cancer Research Technology.

## **2. Register of declared interests**

Mr Murley asked members to send any updated declarations to the secretariat.

## **3. Minutes of the Council business meeting held on 13 October 2020**

The minutes of the Council business meeting held on 13 October 2020 were approved as an accurate record of the meeting.

## **4. Finance Report**

Mr Hugh Dunlop, MRC Chief Finance and Operating Officer, updated Council on initial outcome of the Spending Review, Official Development Assistance (ODA) and year-to-date results to end of October 2020. Following the Spending Review announcement on 25 November, a multi-year settlement for R&D had been announced, but BEIS had not yet made its allocation to UKRI. How the funding settlement would subsequently be allocated across UKRI and when the allocations were due to be concluded was still unknown. This had delayed the annual medium-term modelling process which sets the commitment budget for the forthcoming year, but a flat real scenario was considered to be the likely outcome. The reduction of the ODA budget from 0.7% to 0.5% of gross national income was likely to put pressure on MRC's response mode budget, which includes a significant element of ODA funding. Expenditure on core R&D, competitive funds, other programmes (such as the Future Leaders Fellowships), infrastructure and operational expenditure were all lower than forecast mainly due to the impact of COVID-19. New initiatives to use any in-year underspend had been difficult to roll out because of the barriers to starting new research due to the pandemic.

Council noted the update and asked questions about how the reduction to the ODA budget will be applied by the FCDO, and whether the R&D aspect is likely to be disproportionately affected. Members raised concerns that loss of investment in ODA programmes would significantly set back progress made in global health research over the last decade into diseases such as malaria and tuberculosis. It was confirmed that at present it was unknown how cuts would be applied, but discussions were taking place with government to make clear the impact of cuts to overseas R&D on the research and innovation system in the UK. Members highlighted the vital role of ODA funded R&D in addressing global development challenges set out in the United Nations Sustainable Development Goals, and how the UK's world leading research and innovation system had a key role to play in improving the effectiveness of aid in Lower Middle Income Countries. Members agreed there was a case for ODA funding to be absorbed into the baseline budget which would allow the UK to address future global challenges and to bring knowledge and benefits back to the UK. Members highlighted the key role of the research sector in highlighting and celebrating successes of investment in order to make the case for continued investment in ODA-funded research.

## **5. COVID-19 and Business Continuity update**

Dr Robin Buckle, the MRC's Chief Science Officer, updated Council on MRC's **COVID-19 Business Continuity** activity specifically, how MRC was adapting to business needs across its operations and support for staff at Head Office, support for its research community, applicant behaviour and an update on recent activity to gather Higher Education Institutes' perspectives on the impact of the pandemic.

As a result of the new lockdown, all head office staff were required to work from home until at least March 2021. Since the Public Health Emergency of International Concern was declared on 31<sup>st</sup> January 2020 there had been significant and increasing pressures placed on head office staff due to increased workloads to enable the rapid delivery of activities in response to the coronavirus pandemic, working from home requirements and caring responsibilities. Over the autumn 12 additional staff had

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been recruited to help relieve the pressures of rolling out COVID response programmes and to plan for a potential surge in funding demand, due to financial pressures on charities and potential changes to the funding landscape. In response to the combined effects of culture-shifting events such as the pandemic, the Black Lives Matter movement and the continuing adjustment to new structures under UKRI on overall staff morale, MRC's Management Board had recently commissioned consultants to conduct a piece of work with MRC staff to develop a set of values and associated leadership behaviours that are emblematic of the culture, practices and beliefs that are prioritised in the organisation.

Regarding the pressures on the research community, UKRI had provided grant extension allocations for organisations to sustain UKRI grant-funded research and fellowships affected by the COVID-19 pandemic, which would run until spring 2021 (with spend allowed up to September 2021). Organisations had flexibility to target these funds towards research projects that are disrupted to ensure research can be completed. It was noted that extending support for existing studies would impact MRC's ability to fund new studies. UKRI had announced additional funding for PhD students which would enable support for extensions for UKRI-funded doctoral students in the latter stages of their doctorate who are unable to mitigate the delays and impact of COVID-19 on their research project. There had been a mixed response from the research and innovation community to this additional support for students. As UKRI funds around 25% of UK studentships, many students within the wider ecosystem would not have access to this additional support leading to a perception of inequity in the system.

MRC had been monitoring funding demand and the demographic of applicants over the course of the pandemic. The number of applications for funding had risen initially, but were now back to typical levels. It was expected that applications would rise again due to the significant financial pressures faced by medical research charities and the changing funding landscape, the true impact of which was likely to reach into future financial years. It was noted that higher applications numbers would impact award rates in the absence of any budget increases, with a risk that award rates become unacceptably low. While it had been recognised that the pandemic had disproportionately affected female researchers and researchers with caring responsibilities, there had been little change in the gender diversity of applications received to date, with the exception of clinical fellowship applications. Applications for clinical fellowships had decreased overall and proportionally there had been fewer applications from female clinical academics. MRC would continue to monitor funding demand and it was anticipated that there would be changes to the applicant demographic, particularly for female researchers, as the impact of COVID-19 worked its way through the system.

A recent activity to gather Higher Education Institutes (HEI) perspectives on the impact of the pandemic reported that universities were operating at around 25 – 30% research capacity and recruitment and capital projects had been paused. There were concerns about the negative impacts on staff morale, mental wellbeing, and the disproportionate effect of the pandemic on those with caring responsibilities. On the plus side the pandemic had encouraged a new impetus on collaboration and strengthening partnerships and networks and it was noted that the recovery should adopt these positive aspects into new ways of working.

Council noted the update and commented that the additional financial support from UKRI for grant extensions had been very welcome, but that there had been difficulties administering the funds in HEIs at a time when researchers had faced unprecedented challenges and demands on their time due to COVID-19. Council acknowledged the impact on clinical academics and highlighted that many clinical academics had sacrificed academic time to be more clinically active in response to tackling the pandemic. Questions were asked about whether there had been any change in HEIs' commitment to support fellows and salary contributions. It was confirmed that MRC was not aware of any particular issues in this area. Members echoed the concerns raised through the HEI consultation regarding the disproportionate impact of the pandemic on researchers with caring and home schooling responsibilities, and on early career researchers and career paths. Members suggested activities MRC could undertake to support researchers, such as allowing for a personal statement within grant applications that sets out the impact of the pandemic on productivity; issuing guidance to funding board members and peer reviewers on how to account for the impact of the pandemic when assessing

applicants' career trajectory and productivity; and organising regional conferences that will allow researchers to reconnect, improving creativity and communication flow between colleagues, once government guidelines allow. It was agreed an update on the COVID lessons learned would be presented by MRC's Management Board to Council at its next meeting in March.

## **6. Annual report - Monitoring of science operations and outputs**

Mr Murley welcome Dr Ian Viney, MRC Director of Strategic Evaluation and Impact, to the meeting. Dr Viney presented Council with summary information relating to applications and award rates, peer review, research portfolio and research outputs in 2019/20. At its meeting in October 2019 Council agreed that information relating to the monitoring of science operations and outputs should be presented to Council on an annual basis. The purpose was to provide reassurance to Council that the MRC has robust processes for Council to monitor how well the MRC had performed in its grant giving operations. The performance information presented was appropriate for Council to consider annually, although shifts in the funded portfolio often occurred on a longer timescale. Dr Viney drew Council's attention to the following areas that were particularly noteworthy; across a range of indicators the MRC has a diverse, clinically relevant and high-quality portfolio of work, MRC researchers are collaborating internationally, and engaging with industry to a greater extent than UK medical researchers overall, and new businesses founded in part on the basis of MRC research, since 2006, were now employing nearly 5,000 highly skilled workers, turning over £440m per annum and had attracted £2.5 billion investment. Specific points in the data were identified that warranted further investigation, and Dr Viney committed to bringing further analyses to Council at a future meeting that would elaborate on this. These points included observations that; award rates were lower for applicants from ethnic minority backgrounds than white applicants; award rates for new investigators were lower than award rates for more established researchers; the peer review response rate remained low but may be stabilising; and there had been a steady rise in in the proportion of research based in clinical -settings.

Council asked questions about response rates for peer review, and how these could be improved.. Members commented that there should be an expectation that MRC funded researchers undertake some peer review for MRC funded calls. It was confirmed that all researchers supported by the MRC are formally expected to participate in peer review and MRC provides information to HEIs on the performance of their employees in peer review and how this compares to other HEIs, an approach Council supported. It was now possible for researchers to obtain statistics on the number of acceptable reviews they had provided for UKRI and to share this validated information via their ORCID profiles. Making this information accessible may support employers and funders in recognising specific researchers for their peer review activity. Council members asked whether using a college of experts (a panel of experts committed to providing a certain level of peer review work), would improve response rates. MRC still uses colleges of experts on occasion where appropriate, for example on non-standard calls or where a high volume of applications are anticipated. Historically MRC has seen low response rates with long standing peer review colleges, with the bulk of the peer review disproportionately falling on certain individuals, leading to reviewer fatigue. As such, the MRC has moved away from routinely using colleges of experts and instead mainly uses 'external selectors' to identify peer reviewers with the relevant expertise. The most common reason for declining an invitation to peer review was lack of time available, with 'outside area of expertise' cited much less frequently as the reason for decline, demonstrating that external selectors were choosing the right reviewers, but that time pressures were contributing to the low response rate. Quality peer review was essential to MRC's funding decisions; while reviews were graded as acceptable or not, there is no workable approach beyond this to measure the quality of reviews.

Members noted the data on diversity of applicants and asked whether data on socioeconomic background of applicants was available as well as protected characteristics. It was confirmed that information on socioeconomic status was not collected, although MRC does plan to explore in collaboration with Universities, whether this information may be available for PhD students it funds. It is unlikely to be feasible to obtain information on the socioeconomic background for established researchers. Members highlighted a concern that the pandemic had disproportionately impacted

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some sectors of the researcher population more than others, that there had been significant changes to working patterns, and that the pandemic had exposed and exacerbated existing inequalities within the research and innovation system, and questioned whether UKRI would need to consider structural change to its grant support to reflect some of these challenges presented by COVID. Evidence from other sources (pre-print publication and application rates) suggested that the research productivity of female researchers may have been impacted to a greater extent than male researchers. Dr Viney explained that his team was in the process of analysing data on awards post September 2020, and as applications took roughly six months to move from being submitted to being assessed and awarded, this data would begin to reflect the impact of the first lockdown in March 2020.

It was also noted that over recent years there was an increasing number of grants classified as 'uncodeable' using the Health Research Classification System (HRCS), in part this was due to a few more awards with short or less easily categorised abstracts (including large infrastructure and devolved awards). This was not necessarily an indicator of an increase in inter-disciplinary research, although many of these awards are inter-disciplinary. Members asked for clarification regarding the data relating to spin outs and the stage of development, and it was agreed that the number of companies that were "exited" or "acquired" should be shown separately as this would be viewed as a positive outcome. .

### 7. Science Commitment Budget

Mr Murley welcomed Dr Sarah Collinge, Head of MRC Funding Operations, to the meeting. Dr Collinge provided Council an overview of the planning and the latest information on the 2021/22 science commitment budget. The commitment budget largely represented MRC's 'business as usual' funding distributed through our regular and repeating funding schemes, though also contributed ~10% of units and Institute budgets at points of renewal as well as funding for new strategic activities. The planning cycle afforded Council three opportunities to provide oversight and advice on the levels and priorities within the commitment budget.

In his Autumn settlement the Chancellor provided BEIS with an outline settlement. The Spending Review analysis was continuing and there was still considerable uncertainty in planning for 2021/22 budgets, including how the funding settlement would be allocated across UKRI, but particularly the impact of the reduction in ODA, the impact of COVID-19 on the existing research portfolio and on the charity sector, and future UK access to EU funding schemes. The reduction in ODA could have a significant negative impact on budget total, which relies in part on Global Challenges Research Fund (GCRF) income. A multi-year settlement would mean MRC could plan for higher commitments in certain years and lower in others and there was a range of possible outcomes for 2021/22 commitment budget, but the assumption was that it would be between £320-£350m, as for previous years. In the commitment plan for the current year Council had prioritised investment in Training and Translation, and Council was asked whether these should remain priorities.

Council noted the update and raised concerns that budget cuts would lead to a risk that award rates become unacceptably low. Members recognised the difficulty in agreeing budget priorities due to the number of uncertainties; however it was agreed that training should be a priority given the impact of COVID-19 on early career researchers and the continuing demand for MRC fellowship support, notwithstanding the support offered through the UKRI-wide Future Fellowship Leaders scheme. Members highlighted that consideration needed to be given to the value for money of MRC's large investments when compared with investments made through response mode mechanisms, and that the balance of investment between MRC Institutes/Units and other forms of research support may need to be revisited.

It was noted that wind down packages for closing units resulted in a long tail of investment at the expense of funding new research and that the new unit/centre investment model being drawn up as an outcome of the Centre and Unit portfolio review (discussed at the preceding joint Council and Strategy Board meeting) offered opportunities for an accelerated cycle of closing and repurposing. However, it was important to note that this new investment has been predicated on a positive Spending Review outcome.

Modelling demand to inform budget setting was extremely difficult at the current time given the number of uncertainties, some of which, for example the financial pressures on charities, could impact demand on Research Boards differently. Members agreed that it could be useful to call an extraordinary meeting of Council in the new year to advise on budget priorities, once more information on allocations was known, and that the final Council sign-off for commitment budget plans might be deferred from March to May to accommodate slippage in timelines. It was noted that there would be opportunities to regularly review budgets throughout the year and there was flexibility in how budgets could be deployed.

## **8. Sustainability Plan**

Dr Susan Simon, MRC Director of Estates, presented Council with an update on the MRC Sustainability Action Plan 2020-2025 which had been developed in collaboration with external experts and the MRC institutes. The MRC was committed to the target set out in the UKRI Environmental Sustainability Strategy of being carbon-neutral by 2040 for the entire organisation. The MRC's Estates team engaged an external consultant to establish baselines and to support the development of a realistic approach to a wide range of areas relevant to MRC carbon emissions, but also wider aspects of sustainable working practices. The approach and direction of these measures were aligned with other Councils and of the UKRI central team. Best practice and industry benchmarking had been used to inform targets and activities. The Action Plan focused on the following key areas: decision making and engagement, reduction of carbon emissions, efficient use of resources, fostering a healthy living environment, and considering climate change in continuity planning. Despite the significant challenges that the COVID crisis presented, there were opportunities that could be exploited in progressing the Action Plan, mainly associated with reducing emissions related to travel.

Council welcomed the plan. Members asked questions about how decisions would be made for the shift to home working in view of what had been learned from the COVID crisis, specifically reduction of commuting and business travel, and increased use of virtual meetings and collaborations. It was recognised that working from home was not suitable for all staff, and that while this may reduce carbon emissions related to commuting, there was an environmental cost of heating homes. There were instances where in person meetings were preferable to virtual, for example, scientific conferences, research placements, workshops and some aspects of collaborative work required travel and there may be reluctance to reduce travel for these purposes. It would be important to work with staff to understand individual requirements and more work was needed to better assess the environmental benefits of reduced travel and commuting. Factors such as travel of international students also needed to be taken into account, as this was a significant contributing factor to Universities' carbon footprints. Dr Simon highlighted that undertaking further analysis, and managing the progression of the agreed actions in many other aspects of the action plan, would require additional resource and expertise not currently available within MRC.

Members highlighted that it would be important for MRC and UKRI to consider how it could best influence HEIs to support its ambitions, for example through its grant giving leverage. It was noted that many PhD students and early career researchers were already participating in sustainability initiatives. There were examples of many 'bottom-up' initiatives, such as LEAF, and members commented that these should be promoted and celebrated as a way of catalysing this activity. For MRC to make the required progress against the Action Plan, it would be important to support this activity, however, it was also critical for senior leaders to embed environmental awareness and focus on taking actions for the reduction of detrimental activities, and lead by example if cultural change was to be achieved. It was agreed that Council would be presented with an update on progress against the plan at a future meeting.

## **9. MRC Cancer Unit Quinquennial Review Outcome**

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Mr Murley welcomed Dr Megan Dowie, MRC Head of Molecular and Cellular Medicine, to the meeting. Dr Dowie introduced this item and reminded members that the previous MRC Cancer Unit Director, Professor Ashok Venkitaraman, had stood down as Director shortly before the quinquennial review (QQR) assessment had taken place, with previous Deputy Director Professor Rebecca Fitzgerald stepping in as Interim Unit Director and supporting the Unit through the QQR process from December 2019.

The QQR Subcommittee was strongly supportive of two research programmes (from a total of seven) which were recognised as being internationally competitive. All other programmes, whilst having areas of interest or potential, did not present sufficiently well developed or focused proposals to be considered within the competitive fundable range. The Subcommittee agreed that whilst the refreshed vision submitted for the Unit aimed to align it more closely to its original early carcinogenesis mission, it was not clear that it would be transformative. With only two programmes clearly supportable, the Subcommittee agreed that a case for continued Unit-level support had not been made. The Subcommittee recommended that the Unit close and that transitional support should be provided to allow for Unit activities to wind down and group leaders to transition to new positions. The Subcommittee's recommendation to close the Unit had been considered by the Molecular and Cellular Medicine Board and MRC's Management Board. Management Board agreed that, given the limited number of competitive programmes and the lack of support for the future vision presented, the Unit should close with a 1-year transition period ending in March 2022, in line with the existing Strategic Alliance Agreement with the University of Cambridge. However, Management Board noted the transition budget request put forward by the Unit/University was not adequately justified, including the lack of a plan to scale down activities over the closure period.

Council acknowledged the challenges for Unit and MRC Head Office staff and for the Subcommittee in running a QQR assessment process virtually during the covid-19 pandemic, and the additional burden this had placed on all those involved. Council further noted that issues relating to those identified through the current QQR had been identified at the Cancer Unit previously, including at a mid-term review. Council approved the outcome of the QQR, and endorsed the Subcommittee's recommendation to close the Cancer Unit. Council also endorsed the proposed wind-down package as recommended by Management Board; however, members considered the package to be generous in relation to sector norms, despite Management Board's pruning, which led to a general discussion about MRC's level of transitional support for closing units.

### **10. MRC Millennium Medal - Endorsement of awardee**

Mr Murley welcomed Kate Aylett, Head of MRC Strategic Engagement, to the meeting. Ms Aylett updated members on the process for awarding the MRC's Millennium Medal. The MRC Millennium Medal 2020 was successfully launched on the 24 August 2020 as an open competition. Higher Education Institutions (HEIs) and Independent Research Organisations (IROs) were invited to submit nominations to recognise exceptional MRC-funded researchers that demonstrate scientific excellence and impact. The scheme was open for six weeks and widely promoted through MRC communication channels and circulated directly to HEIs and IROs. There was a good response to the scheme, but Strategy Board members highlighted concern around the lack of diversity in the nominations received. Following assessment of applications by MRC's Strategy Board, members recommended Professor Sir Rory Collins as the winner of the Millennium Medal 2020, due to his transformative national and international contributions to cardiovascular disease and UK Biobank, and improvement of the research environment.

Members noted the prestige in which the Millennium Medal was held as evidenced by the quality of nominations received, but agreed that there was a lack of gender and ethnic diversity and also noted that the nominations were all for very senior researchers who had already been well recognised. Members highlighted a desire to recognise and reward researchers at different stages of their careers

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and not just those at the most senior level. However, comparing those at different stages within this one competition would not be a fair comparison. It was proposed that a new award should be established to recognise the achievements of MRC-funded researchers in a mid-career stage who show considerable promise to become future research leaders. The scheme would run concurrently with the Millennium Medal to be awarded annually.

Council endorsed the recommended winner of **MRC's Millennium Medal** and approved the launch of a new award for mid-level career researchers. Plans for the new mid-level career award would be presented to Council at its next meeting.

Professor Irene Tracey and Dr Graham Spittle held current positions linked to the University of Oxford and these were recorded as a general declaration of interest, but were not considered conflicts as the Millennium Medal was a personal award. Sir Professor Munir Pirmohamed and Professor Kim Graham were absent for discussion of this item due to conflicts of interest.

### 11. Update on Open Access and preprints

Mr Murley welcome Geraldine Clement-Stoneham, MRC Head of Knowledge Management and Scholarly Communication, to the meeting. Ms Clement-Stoneham presented Council with its annual update on Open Access (OA) and preprints. The MRC introduced its first OA policy in 2006 which requires funded researchers to ensure that copies of their peer-reviewed articles are archived in Europe PMC within six months of publication and compliance with the policy is a requirement listed in MRC's terms and conditions for awards. The original MRC policy was replaced in 2012 by the RCUK policy; a review is ongoing to establish a joint UKRI policy, which had been delayed due to the coronavirus, but an announcement was expected in spring 2021. In addition to the OA mandate for peer reviewed publications, the MRC also strongly supports the dissemination of research results via preprints, which have become an essential means of sharing discoveries in a timely manner throughout 2020. The report on compliance with the policy for the last five years indicates that the percentage of articles which are freely available to read in Europe PMC has hovered around the 75% mark, with 63% available under a licence allowing re-use.

The importance of open access and preprints in rapidly disseminating research results during the pandemic was acknowledged. Council raised questions about how journal processing charges would be met. It was confirmed that UKRI has commissioned an economic analysis but the model for how processing charges would be supported in future hadn't yet been decided. The preprint policy was introduced in 2017 and initially included a restriction which meant that preprints could only be referenced in funding applications when they were less than five years old at the time the application was submitted. This restriction had been introduced to avoid "salami slicing" and because it was anticipated that most preprints would eventually be published in a peer reviewed journal. The MRC had committed to keep this restriction under review, and the policy was revisited in May this year. MRC's Management Board agreed to lift this restriction due to increasing numbers of preprints not being submitted to a journal at a later date, especially for research that evolves very quickly, or where there were open peer review processes. Therefore the restriction was viewed as unnecessary and the process of checking against the restriction was additional administrative burden on peer reviews.

### 12. Triennial Pensions Evaluation

Mr Hugh Dunlop, MRC's Chief Operating and Finance Officer presented Council with the Triennial Pensions Evaluation update. The MRC operated a funded pension scheme which was divided into two sections; the main section and the university section. The latter was set up as part of the transfer of staff to university units, allowing the management of potential Section 75 Debt, as a result of the Fair Deal Agreement that allowed employees in units which transfer to a university, to remain in the MRC Pension Scheme, for as long as they stay on the MRC terms and conditions of employment. The Scheme continued to be in surplus, with assets exceeding liabilities. The surplus in the Scheme



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was supporting a lower employer contribution than the net cost of accrual. The funding objective was to increase the employer's contribution rate gradually to the net cost of accrual over a suitable period. Council noted the update and acknowledged how well the pension scheme had been managed.

There was a secondary recommendation at item 6.c. to make additional ad hoc payments into the university section when affordable over the next 3 years (in light of the deficit under the buy-out basis). Members asked a number of questions about the process for making ad-hoc payments into the Scheme and the governance of decision making of how payments to the Scheme would be prioritised relative to other activities within MRC. It was confirmed that ad-hoc payments would be made from underspend and would not be prioritised above science spend. Members were supportive of the intent behind the proposal but did not agree it at this time requesting further information be brought to the next Council meeting in March, and if necessary, Council could take a decision through an extra ordinary meeting(s).

Members approved the recommended increase in Employer's pension contribution as requested at item 6.b of the paper.

### **13. MRC Corporate Risk Review**

Mr Murley welcome Toni-Jo Henderson, MRC Risk Business Partner, to the meeting. Ms Henderson updated Council on changes to the MRC corporate risk register as part of its bi-annual Risk Review. Three risks had been closed, two new risks on COVID-19 operational and COVID-19 strategic and research delivery had been added and three risks had reduced in risk score.

Council noted the update and questions were asked about how decisions were made as to which risks sat within the MRC corporate risk register or the UKRI risk register. It was confirmed that overarching risks that applied across all parts of UKRI, for example Brexit related risks and cyber security would sit within the UKRI corporate risk register. Following discussion it was agreed that members would provide the secretariat with 1-5 risks they considered key for MRC and these would be considered by MRC's Management Board at their next meeting.

### **14. Board Chair Appointment – Molecular and Cellular Medicine Board**

Dr Rob Buckle introduced this item and explained that the MRC was seeking to appoint a new Research Board Chair from 1 April 2020 to replace Professor Anne Ferguson Smith, current Chair of the Molecular and Cellular Medicine Board. Following panel interviews, chaired by Professor Patrick Chinnery, MRC Clinical Director, an offer was made to Professor Maddy Parsons, Professor of Cell Biology, at King's College London. Council endorsed the appointment of the new Molecular and Cellular Medicine Board Chair.

MRC's Executive Chair, Professor Watt is Director of the Centre for Stem Cells and Regenerative Medicine at King's College London and did not participate in discussion of this item.

### **15. Any Other Business**

No items were raised.

### **16. Council Private Business**

Following the meeting members held a private business meeting.

***Items for Information***

**17. Updates from the Executive**

Council noted the update from the Executive and the Chief Science Officer highlighted a number of new Director appointments to be made.