UNIVERSITY OF CAMBRIDGE SCHOOL OF CLINICAL MEDICINE

ANNUAL MEETING OF THE FACULTY – 16 November 2015

CHAIRMAN’S REPORT

1. Awards

Professor Sharon Peacock and Mr Trevor Richards were listed in the Queen’s 2015 New Year’s Honours. Professor Peacock received a CBE for her services to Medical Microbiology and Mr Richards received a British Empire Medal for his services to Biomedical Research and the Welfare of Animals in Research.

Dr John Bradley (Medicine) and Professor Anthony Holland (Psychiatry) were awarded CBES in the Queen’s birthday honours list 2015 for services to Health Research and Psychiatry respectively.

In April, Professor Alastair Compston was awarded the 2015 John Dystel Prize by the American Academy of Neurology and the National Multiple Sclerosis Society of the USA in recognition of ‘his outstanding achievements in multiple sclerosis research’.

Professor David Dunger received the James Spence Medal of the Royal College of Paediatrics and Child Health for outstanding contributions to the advancement or clarification of paediatric knowledge.

In July, Sir Stephen O’Rahilly was awarded the European Association for the Study of Diabetes (EASD) - Novo Nordisk Foundation Diabetes Prize for Excellence. The prize recognizes outstanding research or technology contributions to the understanding of diabetes, its disease mechanisms or its complications.

The 2015 Pilkington Teaching Prizes were awarded to Dr Stephen Barclay (Public Health and Primary Care) and Dr George Follows (Haematology).

Clinical Supervisors Dr Alexander Ross, Dr Catherine Aiken, Dr Ludovica Marando and Dr Daniel Greaves were awarded Annual Clinical Supervisor Awards.

2. 2015 Sackler Distinguished Lecture

The Lecture was delivered on 25 June 2015 by Professor Steve Jackson FRS, Professor of Biology, Head of Cancer Research UK Laboratories at the Gurdon Institute. The title was “Cellular Responses to DNA Damage: Mechanistic Insights and New Cancer Therapies.”

3. Senior Appointments

Professorial appointments between 1 September 2014 and 31 August 2015

Professor Lalita Ramakrishnan (from the University of Washington, USA), Professor of Immunology and Infectious Diseases, Department of Medicine, with effect from 1 September 2014

Professor Giovanna Malluci (from the MRC Toxicology Unit, Leicester), van Geest Professor, Department of Clinical Neurosciences, with effect from 1 October 2014

Professor Richard Gilbertson (from the St Jude Children’s Research Hospital, Memphis), Li Ka Shing Professor of Oncology, Department of Oncology, with effect from 1 August 2015

4. Senior Appointments in progress

Professor Patrick Francis Chinnery (from Newcastle University) has been elected into the Professorship of Neurology, with effect from 1 October 2015.

Dr Michael Coleman (from the The Babraham Institute, Cambridge) has been elected into the van Geest Professorship, with effect from 1 September 2015.
Professor David Rowitch (The University of California, San Francisco) has been elected into the Professorship of Paediatrics, with effect from 1 September 2015.

Mr Grant Stewart, University Lecturer / Honorary Consultant in Urology, Department of Surgery, with effect from 19 October 2015

University Lecturer / Honorary Consultant in Trauma and Orthopaedics (x2), Department of Surgery: Mr Wasim Khan and Mr Stephen McDonnell were appointed in September 2015, with start dates to be confirmed.

Principal Research Associate (Group Leader) in MRC Biostatistics Unit: Dr Chris Wallace was appointed in September 2015, with a start date to be confirmed.

Principal Research Associate (Head of Biology) in the Drug Discovery Unit: an appointment has not yet been made, and the Second Appointing Panel will be held on 2 November 2015.

5. NHS/University Interface

The relationship with our NHS partners continues to be one of major strategic importance for the Clinical School. Through our NHS partners, we continue to benefit from considerable NHS R&D (NIHR) funding.

Cambridge University Health Partners (CUHP) operates as a forum for the co-ordination of strategy between the University and its three principal NHS Foundation Trust partners: Cambridge University Hospitals; Cambridgeshire and Peterborough; and Papworth. CUHP is one of six Academic Health Science Centres in the UK. A key appointment in this year has been Mr Gary Keegan as CUHP Fundraiser, based with the CUDAR team in the University. Mr Keegan’s role is to coordinate and optimize fundraising between the CUHP partners in addition to fundraising directly for certain key projects.

During the year it has become clear that the consortium of CCGs funding the Clinical Academic Reserve (CAR) will not be funding new posts, however collaboration will continue and discussions are ongoing about current commitments.

In a new development for the Department of Public Health and Primary Care, two new clinical trials have been initiated under the joint sponsorship of the University and Cambridge University Hospitals Foundation Trust (CUHFT). Joint sponsorship has enabled the University to become involved in this highly regulated area of research and benefit from the expertise of the Clinical Trials Unit and Trust’s R&D Office. Joint sponsorship is effective and efficient and is a good example of the excellent relationship between the University and Trust.

Under the CUHP umbrella, Cambridge Health Imaging has gained momentum and has been focussed in the past year on implementation of the MRC’s Clinical Research Infrastructures grant which will bring to the Campus a 7T MRI and PET/MR machines, greatly increasing the capacity for leading edge imaging research and supporting the CUH and potentially Papworth Trusts to provide a better and more cost-effective service to patients. The Cambridge Health Imaging Management Committee is keen to attract researchers who have not previously used imaging techniques in their research, to take advantage of the expanded range and capacity and welcomes approaches from clinicians and researchers for new stand-alone and collaborative projects.

CUHFT introduced eHospital in autumn 2014 in a challenging “big bang” implementation. As would be normal for such a large IT implementation project, there have been issues to resolve. However the School views this new system as an opportunity for both teaching and research. Please see section 7c for information about the NHS Data Sharing Project between the Clinical School and the CUHFT Electronic Patient Record system. When completed this will allow a step change in the way in which University researchers can mine and analyse clinical data and may form the basis of some very exciting scientific collaborations.


In the course of the year, the Council of the School has adopted detailed guidance developed by the School itself for: University Officers contemplating options following retirement; an Authorship Policy to facilitate fair attribution of authorship and to safeguard the integrity of publications; and a new procedure for evaluating
applications for promotion to Senior Research Associate. All guidance can be found on the School’s website or by request to the School Office.

As part of the School’s Five Year Plan, Council also approved a Space Strategy for the School, to provide a framework for decisions on space moves, swaps and allocations.


7. School Services developments

(a) Clinical School Workshops

Council accepted the Workshops Committee’s recommendation that the Clinical School workshops should close with effect from 31 July 2015, with the activity and staff moving to the Department of Engineering’s Workshop. A Service Level Agreement is in place with the Department of Engineering to provide mechanical and carpentry services to the Clinical School Departments on the same charging basis and an advantage of the arrangement is that with a section of over 20 staff, there will be better holiday cover and access to a wide range of expertise. The move will also give career progression opportunities to the staff. The School is very appreciative of the long service given by Andrew Last, Dan Boutell and past members of the team and looks forward to their continued association with the School through the new service.

(b) Central Biomedical Services

The University determined that the current School direct management of biological support services should cease, and all such University facilities should be managed as part of a new UAS Directorate. The change took place with effect from 1 October 2015. On a day to day basis little if anything should change for researchers using the services and there will continue to be strong academic leadership of the combined facility. However the new Directorate will provide greater opportunities for staff career development, more effective use of total holding capacity, and a seamless management structure for Bellatrix, when built.

(c) Clinical School Computing Service (CSCS)

The Clinical School Computing Service (CSCS) provides an IT infrastructure, desktop support and IT project and development work to support the aims of the School. Approximately 80% of users across the School are served by CSCS for account support; CIMR and CRUK-CI run their own support systems.

The NHS Data Sharing Project was set up by CSCS to develop a secure method for transferring data from the Cambridge University Hospitals Foundation Trust (CUHFT) Electronic Patient Record system to the CSCS network. The project team is currently working on demonstration of the capability to transfer securely data between the NHS health share system and the CSCS secure data hosting system. This capability demonstration will be presented to the Biomedical Research Council (BRC) Science Advisory Board in mid-October. The next stages are extension to full proof of concept, and finally full deployment next year.

Initial project kick-off meetings between all stakeholders have been successful and the technical deliverables for the proof of capability system have been fully defined. CSCS are currently awaiting completion of the CUHFT/HP tasks to allow the setup of a secure connection between the two systems to be completed and tested. The technical implementation is underpinned by a separate information governance work stream, the foundation of which is a data sharing agreement between CUHFT and the University. The new data sharing system will require Information Governance Toolkit (IGT) level 2 certification. CSCS are also progressing a complementary initiative to have the CSCS Information Security Management System achieve ISO27001 certification.

A separate project (Joint Schools Computing Service) has been scoping requirements with users for a combined service to serve both the Schools of Clinical Medicine and Biological Sciences (SBS). Proposals are expected to be brought forward to both School Councils in the forthcoming academic year. CSCS already supports some SBS Departments on a fee for service basis but the JSCS, if adopted, is envisaged as being a shared strategic solution.
8. Capital/Site Issues

(a) Gemma Project
This building will provide additional space for clinical research and will be located near to the ACCI. Work has progressed to close RIBA Stage 4 (Technical Design) at the end of May 2015 and the construction phase started on 6 July 2015, scheduled to complete on 30 November 2016. The final approved budget was £18.55M, with an outstanding unfunded underwrite by the School of circa £7M. Completion of fundraising is therefore urgent.

(b) Capella Project
This building will house the Stem Cell Institute in collaboration with the School of Biological Sciences, and the School of Clinical Medicine initiatives in Haematopoiesis and the Cambridge Institute of Therapeutic Immunology and Infectious Disease (CITIID) which will combine existing strengths in the Department of Medicine with new recruitment. An addition during the year has been the inclusion of space, enabled by a philanthropic donation, for a Therapeutics Institute led by Professor Kouzarides of the Gurdon Institute. RIBA Stage 3 was nearly complete at the end of the academic year, with Stage 4 (Technical Design) due to finish at the end of January 2016. Some elements of construction, for example enabling works, will commence during autumn 2015 with a projected occupation date of early May 2018. Fundraising for the building still needs to be completed, however a £25M cornerstone grant for CITIID under the Research Partnership Infrastructure Fund (RPIF) scheme is in place. The total project cost is £94M and the School’s outstanding underwrite is £11M.

(c) Bellatrix Project
This new biological support facility for both the Schools of Clinical Medicine and Biological Sciences, will replace CBS which is reaching the end of its lifespan, and other smaller facilities on the Campus, but not including the Xenopus room. The building will provide both rodent and zebrafish capacity (including for School of Biological Sciences researchers moving to the Campus into the Project Capella building) and a preclinical imaging suite. The project is due to complete RIBA Stage 4 (Technical Design) at the end of November 2015 with construction following in January 2016. The programme aims to deliver a functional and Home Office approved facility in early 2018 and the total project cost is circa £105M. The building is funded by the University’s Capital Fund as a necessary strategic development to support biological and biomedical research.

(d) Atria Project
The School has plans to construct, jointly with Papworth Hospital NHS Foundation Trust, a Heart and Lung Research Institute situated alongside the new Hospital. During the past year, RIBA Stage 2 (Concept Design) was completed and work is ongoing to finalize Stage 3 (Developed Design) by the end of October 2015. At that stage the project will pause to enable a fundraising campaign; construction will not start until almost all the funds required for the joint project are in place. A cornerstone funding application was submitted to a major charity at the end of the academic year, but further substantial philanthropic donations will be required. A CUHP dedicated fundraiser for this project is being engaged. If the campaign is successful and construction could start in July 2017 as wished, the new facility would be ready for occupation in July 2019.

(e) CRUK Cambridge Institute
Construction work on the project to fit out the third floor of the CRUK CI building was completed in May 2015. The project included significant extra space for bioinformatics.

(f) Level 5 Department of Medicine major refurbishment
Refurbishment work is due to complete in early autumn 2015; complications arose due to asbestos management, extra fire compartmentalisation works and window repairs. This substantial project, funded by the School, will modernize a large section of the Department of Medicine’s laboratories.

(g) WBIC Radiopharmaceutical Unit
Practical Completion was achieved on 3rd July 2015 for this project to upgrade and extend the WBIC radiopharmaceutical unit, meeting MHRA compliance standards.
(h) Old LMB Cluster

The former Centre for Protein Engineering was refurbished and handed over in July 2015. Professor Rubinsztein occupies Level 3 with an ARUK-funded team (£10M five-year grant for a Drug Discovery Institute) which needed the chemistry facilities on that floor. The remainder of the building is due to be occupied by another major School research group although some additional works may be required to meet its needs.

(i) Conversion of former Clinical School workshops space and WBIC for installation of new scanners

In 2014 the School was awarded a significant amount of money under the MRC’s Clinical Research Infrastructure call (£25M over three themes). The majority of the funds were targeted at the purchase and installation of a PET/MR, a 7T MRI and a Skyrafit MRI upgrade to an existing machine. In order to house these scanners, significant works will be undertaken in the WBIC and the former Clinical School workshops to provide sufficient space, power and operational requirements for the scanners. Work in the past year has focussed on an extensive options appraisal for the best location and requirements to maximize the research and service capability of each machine, to achieve financial sustainability and widest benefit in collaboration with the Trust. A complex series of interlinked projects is designed to deliver all three machines in situ by March 2016, commissioned and operational from June 2016. The project is funded by the MRC grant, with supporting monies from the University.

(j) Clinical School Building Adaptation and Refurbishment

The first cohort of students who will all (subject to satisfactory progress) complete their clinical training at Cambridge rather than transfer to London or Oxford started their preclinical course in Michaelmas 2014. Thus, in September 2017, the number of clinical students will begin to increase by approximately 100 per year over current levels until in September 2019 the full numbers will be achieved. There is therefore some urgency to refurbish the Clinical School building to create more small group teaching rooms (by replacing redundant print journal stock on Level 4 and forming flexible, dividable and modernized space on the ground floor) and a larger student common room. In addition, to provide a better educational experience, an e-learning suite is planned, available for both pathology and non-clinical structural biology teaching. The works are due to start in July 2016 after graduation, with re-occupation in April 2017, prior to the Final MB exam period. The Library, School Offices and teaching spaces will have to decant from the building for this period, and options are being explored on how to achieve this with minimized disruption to teaching and operations. The project will be funded by a loan to the School, to be repaid from the increased fee income to the University due to the larger number of students.

8. Report of the Director of Medical Education

Staff

Dr Paul Siklos retired from his role as Clinical Sub Dean in June 2014. Paul was involved in teaching clinical medical students in Cambridge from the time the Clinical School opened, but will be best remembered for his work in designing, developing and implementing the Cambridge Graduate Course in Medicine (CGC) and for his time as the Director of the course. In May 2015 a large new Clinical Skills centre was opened at West Suffolk Hospital and named the “Siklos Centre for Clinical Skills and Simulation” in Paul’s honour.

Dr John Clark continues as Director of the Cambridge Graduate Course and Dr Siklos’s role as Chair of the CGC Admissions panel has been taken over by Dr Mark Lillicrap, Clinical SubDean for Curriculum.

Student numbers

The second cohort of undergraduate students that will remain in Cambridge throughout the six years was admitted in 2015. The Clinical School is working with the Colleges through the Medical and Veterinary Students Progress Panel to devise a suitable Transfer of Information form and procedure for Fitness to Practise sign-off at the end of Year 3.
**Curriculum issues**

The new clinical teaching programme commenced on 14th September 2015 with the Year 4 intake and is described at [http://www.medschl.cam.ac.uk/education/courses/standard/](http://www.medschl.cam.ac.uk/education/courses/standard/).

The design of the new clinical teaching programme will accommodate the increased student number in 2017 and reflects changes in health care delivery and the needs of doctors in the future. In particular, students will have greater opportunities to pursue their own areas of research interest in an expanded programme of student-selected components, including in clinical and translational areas reflecting the School’s research themes.

**Standard Course**

Full information about the current Standard Course programme and the new teaching programme can be found on the Clinical School Intranet and the VLE, MedEd.

Both old and new curricula are integrated by a set of curriculum themes which reflect the recommendations of the GMC for graduate outcomes in Tomorrow’s Doctors and which have relevance in all aspects of medical practice, grouped together as *Doctor as Scholar and Scientist, Doctor as Practitioner and Doctor as Professional*.

**Cambridge Graduate Course in Medicine**

Full information about the CGC programme can be found on the Clinical School Intranet and the VLE, MedEd. Applications to the programme have remained high, with around 10 applicants per place. Student selection to this course is by a Multiple Mini Interview format and we continue to monitor the outcomes of that process. Integration between the CGC and MBPhD programmes for Stage 2 / 3 is popular with students and staff and will be maintained in the new teaching programme. The School is once again hosting the annual National Symposium of Graduate Entry Medical at Hughes Hall on 13 November 2014.

**MBPhD programme**

Full information about the MBPhD programme can be found on the Clinical School Intranet and the VLE, MedEd. The programme has continued to attract students of high calibre who gain a place in the Clinical School and then go on to undertake research in a range of disciplines in laboratories across Cambridge. Students have clinical supervisions and seminars throughout the research period, maintaining basic clinical skills throughout.

**Clinical Supervisor Programme**

The Clinical Supervisor programme has continued to develop and has remained popular with very high levels of student satisfaction. The accredited staff development programme for the junior doctors working as clinical supervisors has been merged into the IFME programme (see below).

**Student Welfare**

Dr Richard Davies, the Clinical Sub Dean for Student Welfare, has made major progress in developing the Welfare support for clinical students. Recent developments include a “fast-track” referral system, jointly with CPFT, to a consultant psychiatrist with dedicated time for seeing students (Dr Rebecca Jacobs, CPFT), the introduction of flexible discretionary leave and temporary absence cards.

**Student Feedback:**

New “What we do with your feedback” and “Issues Log” sites on the front page of MedEd have been improving the students’ engagement with educational feedback.
National Student Survey

The response rate to the NSS was 73% for the standard course. Overall student satisfaction increased from 82% (2014) to 89%. Overall satisfaction on the CGC rose to 78%, an improvement from 64% in 2014.

Staff Development: Post-graduate Certificate in Medical Education

The Postgraduate Certificate in Medical Education has remained heavily over-subscribed and has just started its fourth year under the Direction of Dr Jeremy Webb. The intake has been increased from 25 to 40 students in recognition of the increased demand. The Clinical School has been working with CUHP to develop a medical education module within the proposed PG Certificate / Masters in Clinical Medicine.

The Medical Schools Council Assessment Alliance (MSC-AA)

MSC-AA continues to pursue three main workstreams related to:

1. The SJT, as part of the UK Foundation Programme Application, as above
2. The Prescribing Safety Assessment, jointly with the British Pharmacological Society
3. The development of a shared national question bank for Final MB examinations, the “Common Content” programme.

The Clinical Dean was re-elected to the MSC-AA Board for a second term of office and the Clinical SubDean for Assessment, Dr Mark Gurnell, chairs the national question-setting groups and has recently been elected to the Board also.
# Clinical Student Awards and Prizes: October 2014 – June 2015

## UNIVERSITY AND CLINICAL SCHOOL PRIZES

<table>
<thead>
<tr>
<th>PRIZE</th>
<th>SUBJECT</th>
<th>WINNER(S)</th>
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<tr>
<td>ARC Rheumatology</td>
<td>Rheumatology</td>
<td>TBC</td>
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<tr>
<td>Butterfield Studentship</td>
<td>Diabetes research</td>
<td>David Church</td>
<td>Emmanuel</td>
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<tr>
<td>Clinical School Prize</td>
<td>Obs &amp; Gynae exam – Second</td>
<td>Sophie Amelia Lovick</td>
<td>Gonville and Caius</td>
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<td>Cow &amp; Gate</td>
<td>Paediatrics</td>
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<tr>
<td>Clinical School Deanery Prize</td>
<td>Teamwork Portfolio</td>
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<tr>
<td>Clinical School Prize</td>
<td>Paediatrics exam – Second</td>
<td>Angharad Joanna Tyrynis Evereden</td>
<td>Jesus</td>
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<td>Cuthbert Prize</td>
<td>Humanities in Medicine</td>
<td>Joint first Frances Kirkham Join first Stephen Joseph</td>
<td>Hughes Hall Jesus</td>
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<td>Denis Dooley Prize</td>
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<td>Desmond Hawkins</td>
<td>Elective</td>
<td>Max Bacon Catherine Bell Webb Jess Blackaby Charlotte Cardus Alexandra Caulfield Jill Christy James Duffell Nathan Hudson-Peacock Charlotte Ingham David Johnston Quentin Otto Alex Taylor</td>
<td>Girton St Catharine’s Trinity Hall Emmanuel Wolfson St Catharine’s Wolfson Christ’s Girton Queens’ Magdalene Magdalene</td>
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<td>Duncan Roland Prize</td>
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<td>Clare Ellen Thakker</td>
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<td>Eliot Slater Prize</td>
<td>Psychiatry</td>
<td>Katarzyna Wasilewska</td>
<td>Newnham</td>
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<td>Glennie Prize</td>
<td>Child Psychiatry</td>
<td>Katarzyna Wasilewska</td>
<td>Newnham</td>
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<td>George Peter Baker Prize</td>
<td>Part III Final MB - First</td>
<td>Clare Ellen Thakker</td>
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<tr>
<td>Gresham Prize</td>
<td>Pathology – Part I Final MB</td>
<td>1st Madhu Ravi Chetan 2nd Kathryn Biddle</td>
<td>Jesus Clare</td>
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<td>Pathology</td>
<td>Nina Fuller-Shavel</td>
<td>Lucy Cavendish</td>
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<td>Ipsen Prize</td>
<td>Paediatrics</td>
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<td>John &amp; Margaret Henderson Memorial Prize</td>
<td>Geriatrics</td>
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<td>James Knott Family Trust</td>
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<td>Bettie Knott Prize</td>
<td>Stage 1 Palliative Care</td>
<td>Jennifer Anne Elias Ledibabari Mildred Ngaage Andreana Panayi Catherine Peutherer Wei Yu Ye</td>
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<td>Dorothy Knott Prize</td>
<td>Community Palliative Care</td>
<td>Alana Livesey Zofia Esme Karasinka-Stanley Faye Begeti Kate Wallwork Sarah Jane Grabowski Claire Palmer Nicholas John Sebastian Chilvers Christopher Michael Ramsden Clare Ellen Thakker Rebecca Hulbert</td>
<td>Churchill Hughes Hall Jesus Lucy Cavendish Wolfson Wolfson Emmanuel Pembroke Clare St Catharine’s</td>
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| James Knott Family Trust (continued): | Hospital Palliative Care | Rachel Atherton | Clare’s Christ’
| Jim Knott Prize | | Clare Atherton | 
| | | Alex Azizi | 
| | | Jack Scannell | 
| | | Emma Bailey | 
| | | Anne Boulton | 
| | | Rahul Challopadhyay | 
| | | Jessie Ke | 
| | | Alan Livesey | 
| | | Eleanor Richards | 
| | | | 
| John Fawcett Prize | Best Communicator Part III | Joel Edward Davis | Hughes Hall
| Kermode Essay Prize | Best performance in Clinical Obstetrics Examination | Sarah Josephine Case | St Catharine’s
| Lewin Prize | Part III Final MB - Second | Katherine Alexandra Horder | Hughes Hall
| Peter Brook Award | Psychiatry | Aamina Valji Bharmal | Newnham
| Roger Morris Prize | Pt III Final MB | 1st Peter Andrew Crook | Jesus
| | | Joint 2nd Clare Ellen Thakker | 
| | | Joint 2nd Eva Bongards | 
| Surgery Prize | Surgery | Not yet announced | 
| William Harvey Prize (SE administrates) | Performance in Stage 1 OSCE and Assessment | Not yet announced | 
| William Harvey Prize | Paediatrics exam - First | Jill Chantal Christy | St Catharine’s
| Cambridge Medical Graduates’ Club Fund | MB/PhD & CGC Student | Not yet announced | 
| Werner Jacobson Halley Steward Award | MB/PhD Students | Not yet announced | 
| Elective Report Competition | Joint 1st Prize | Guled Jama | St Catharine’s
| | | Nicola Jecks | Lucy Cavendish
| | | Nisha Nesaratnam | St Catharine’s
| | | Anna Street | Sidney Sussex
| Elective Photography Prize | Joint 1st Prize | David Bishop | Peterhouse
| | | Wojciech Cymes | Churchill
| | | | 


<table>
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<tr>
<th>Final MB Part:</th>
<th>No. of candidates</th>
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<th>No. Successful</th>
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<th>No. of Distinctions</th>
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<th>No. of Failures</th>
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<td>Total</td>
<td>Standard Course</td>
<td>MB/ PhD</td>
<td>CGC</td>
<td>Total</td>
<td>Standard Course</td>
<td>MB/ PhD</td>
<td>CGC</td>
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<td>135</td>
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<tr>
<td>III Clinical</td>
<td>174</td>
<td>144</td>
<td>7</td>
<td>23</td>
<td>172</td>
<td>143</td>
<td>7</td>
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June 2015
9. Graduate Education and Clinical Academic Training

Administrative structures

Following a review of the Graduate School of Life Sciences by the School, in conjunction with the School of the Biological Sciences, it was felt that a joint high-level oversight of graduate education was needed for the life sciences. Both Schools recognised the need for serious consideration of graduate matters and the Graduate School of Life Sciences (GSLS) Strategic Committee was formed in October 2014 reporting to and advising the two School Councils and their associated Faculty Boards.

This Committee has the responsibility:-

a) To ensure that the GSLS has a strong academic identity and focus, through the offering of a coherent set of graduate programmes and programmes of study that are attractive and stimulating to students and beneficial to the scientific needs and developments within the two Schools;

b) Resourcing of the GSLS and its activities including development of a fundraising strategy; as agreed by the School Councils, to co-ordinate applications for funding and allocation of funds;

c) To raise the profile of the GSLS internally and externally, promoting a high visibility nationally and internationally ensuring the GSLS is competitive and attracts the best graduate potential; oversight of the GSLS website and other promotional activity;

d) To promote a culture of quality within the GSLS, from admission to graduation, ensuring students and supervisors are appropriately trained and supported, enhancing the reputation of the GSLS.

Membership originally comprised 3 members from each School with the two Heads of School as ex-officio members, but was soon expanded to include one member to represent the University Partner Institutions and one member to represent the Graduate Student and Postdoc (GRASP) Forum. Towards the end of the academic year, a further member from each School was appointed to ensure each meeting reached quorate (at least two members from each School).

Members of the Committee throughout 14/15 were:-

Professor John Sinclair (Chair), Dr Emma Cahill (GRASP), Professor Edwin Chilvers, Professor Gerard Evan, Professor Gillian Giffiths, Professor Ottoline Leyser, Professor Patrick Maxwell, Professor Stephen O’Rahilly, Professor Ole Paulsen, Professor Steve Russell, and Meg Staff as GSLS Administrator.

The Committee has been looking at establishing research themes for the Life Sciences, establishing processes to help with the co-ordination of future PhD programme applications, updating the GSLS website, review of MPhil opportunities, establishing policy for the new University fee for graduate students in life sciences, as well as a review of researcher development training provided by the GSLS.

NIH Program

The administration of the NIH-Cambridge program is conducted through the Clinical Academic Training Office (CATO). In the academic year 2014-15, 6 new PhD scholars joined the NIH program. Of the 6 new scholars, 2 are in Clinical Neurosciences, 1 in Chemistry, 1 in Engineering, 1 in Surgery, and 1 in Medical Science at the MRC Laboratory of Molecular Biology.

There are 36 registered PhD students currently on the NIH-OxCam program. Of the 2009 intake, the 2 who intermitted have submitted their theses and 8 have completed. Of the 2010 intake, 4 have completed and 3 have submitted. Of the 2011 intake, 3 have submitted and 3 are writing up.

This year, the large International Colloquium was organised and hosted by Cambridge from 22-24 June at Downing College and was attended by over 170 people. The event was organised by the Clinical Academic Training Office (CATO), and Directors from Cambridge, NIH and Oxford, as well as PIs from Oxford, NIH, Aberdeen, Imperial, York, Dublin, and Liverpool attended.

Over 80 students from the NIH OxCam and WT-NIH programmes attended, and over the three-day event students gave oral and poster presentations on their research ranging from bioengineering to stem cells, to immunology to
public health. There were themed workshops around Publishing Science, Grant Writing, Big Data and Genes to Phenotype presented by colleagues from *Science*, the EBI and university departments. The event was a rousing success and was complimented upon by students, directors and PIs. There is a strong commitment to continuing these events by the NIH, the BioMedical Alliance (who provide substantial financial support) and the students.

The students also had an opportunity to relax and explore Cambridge and get to know each other informally by participating in a Cambridge Treasure Hunt held in the evening. During the week, CATO also organised the annual student visit week for prospective applicants for 2015, with strong expressions of interest from students who wished to work in Psychiatry, Chemical Engineering, Clinical Neurosciences, Pharmacology, Biological Sciences, and the Sanger and MRC. These students have been awarded a range of funding from COT, Marshall, Gates and Wellcome Trust – as well as the NIH OxCam scholarship.

The NIH scholars website (part of the CATO website) continues to keep students informed, and the student representative group and the CATO-organised events continue to provide opportunities for students to integrate with Cambridge University life, to network and to develop positive working relationships with peers and mentors.

10. **MD (Doctor of Medicine) statistics, 1 September 2014 – 31 August 2015**

Arrangements for admission, progression and the award of the MD degree are administered through the Higher Degrees Office, acting on behalf of the MD Committee and/or the Degree Committee. The MD Committee met on 6 occasions during the year, with 4 meetings being held over owing to insufficient business.

Following the changes to the MD regulations in April 2012, there are currently three paths leading to the MD degree:

(i) candidates continuing under the Old Regulations (i.e. who started prior to April 2012);

(ii) those holding appropriate contracts with Cambridge University Health Partners (CUHP) who started post-April 2012 and who are registered graduate students of the University; and

(iii) those holding a Cambridge degree and working on research dissertations outside Cambridge (the MD by Special Regulations).

In addition, there is a prestigious higher doctorate, the Doctor of Medical Science (MedScD), equivalent to the ScD, which is by publications only and requires applicants to already hold a Cambridge degree.

Under the new regulations, examination and recommendation/approval for the MD degree have passed to the Degree Committee/Board of Graduate Studies, whereas candidates completing under the old regulations have their degrees approved by the MD Committee alone.

### Number of candidates working towards the MD degree, as of 31 August 2015

<table>
<thead>
<tr>
<th>Category</th>
<th>Number</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>MD -- Old Regulations</strong> (pre-April 2012 entrants)</td>
<td>17</td>
</tr>
<tr>
<td><strong>MD</strong> (CUHP candidates, admitted since April 2012)</td>
<td>27</td>
</tr>
<tr>
<td><strong>MD by Special Regulations</strong> (candidates who started post-April 2012, holding Cambridge degrees but working outside Cambridge)</td>
<td>15</td>
</tr>
<tr>
<td><strong>Total number of MD candidates</strong></td>
<td>59</td>
</tr>
</tbody>
</table>
Applications, 2014–15

<table>
<thead>
<tr>
<th>Degree Type</th>
<th>Number of Applications</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. MD – (clinicians working within CUHP)</td>
<td>4</td>
</tr>
<tr>
<td>2. MD by Special Regulations – (Cambridge degree holders only, working outside Cambridge)</td>
<td>6</td>
</tr>
<tr>
<td>3. MedScD (higher doctorate)</td>
<td>0</td>
</tr>
<tr>
<td><strong>Total applications</strong></td>
<td><strong>10</strong></td>
</tr>
</tbody>
</table>

Degrees approved/recommended, 2014–15

<table>
<thead>
<tr>
<th>Degree Type</th>
<th>Number of Degrees Approved/Recommended</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. MD – (Old Regulations – degrees approved)</td>
<td>5</td>
</tr>
<tr>
<td>2. MD – (New Regulations – approval recommended by Degree Committee)</td>
<td>1</td>
</tr>
<tr>
<td>3. MD by Special Regulations – (New regs – approval recommended by Degree Committee)</td>
<td>0</td>
</tr>
<tr>
<td><strong>Total degrees approved/recommended</strong></td>
<td><strong>6</strong></td>
</tr>
</tbody>
</table>

Prizes

The MD Committee awarded two prizes for dissertations approved for the MD Degree in the previous academic year (2013–14).

**Raymond Horton-Smith Prize**

Nicole Keong, MPhil, St Catharine’s
The characterization of white matter injury patterns in normal pressure hydrocephalus using magnetic resonance imaging

**Ralph Noble (Clinical) Prize**

Fakhar Khan, BA, MB BChir, Fitzwilliam College
Prospective left ventricular lead targeting in cardiac resynchronisation therapy

**11. MChir (Master of Surgery) statistics, 1 September 2014 – 31 August 2015**

Arrangements for admission, progression and the award of the MChir degree are administered through the Higher Degrees Office, acting on behalf of the MChir Committee. As of August 2015 there were two MChir candidates working towards the degree. The MChir Committee has three scheduled meetings per year (one per term) but in 2014–15 no formal meetings were required, with information being circulated as necessary by email. The MChir degree, unlike the MD, remains a secondary degree (i.e. open only to Cambridge degree-holders).

<table>
<thead>
<tr>
<th>Category</th>
<th>Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>New applications received</td>
<td>0</td>
</tr>
<tr>
<td>Applications approved</td>
<td>0</td>
</tr>
<tr>
<td>Viva voce examinations held</td>
<td>0</td>
</tr>
<tr>
<td>Degrees awarded</td>
<td>0</td>
</tr>
</tbody>
</table>

**Prizes:** No prizes were awarded in 2014–2015.
12. **Degree Committee for the Faculties of Clinical Medicine and Veterinary Medicine Statistics, 1 September 2014 – 31 August 2015**

The Degree Committee met on eight occasions during the 2014–15 academic year.

**Numbers of graduate students working towards degrees in Faculty of Clinical Medicine, August 2015**

<table>
<thead>
<tr>
<th></th>
<th>PhD</th>
<th>MD</th>
<th>MSc</th>
<th>Research MPhil (Med Sci)</th>
<th>MPhils with taught elements</th>
<th>MRes (part of 1+3 programmes)</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>542</td>
<td>24</td>
<td>1</td>
<td>20</td>
<td>74</td>
<td>24</td>
<td>685</td>
</tr>
</tbody>
</table>

**Degrees approved, 2014–15**

In the period covered by this review, the DC approved 74 Masters degrees (both research and taught) and recommended for approval 119 doctorates (PhD, MD), and 3 higher doctorates (ScD) giving a total of 196 degrees.

(a) **Research degrees**

<table>
<thead>
<tr>
<th></th>
<th>PhD</th>
<th>PhD by Special Regents</th>
<th>MD</th>
<th>VetMD</th>
<th>ScD</th>
<th>MSc</th>
<th>MPhil in Medical Science</th>
<th>MPhil in Veterinary Science</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>114</td>
<td>4</td>
<td>1</td>
<td>0</td>
<td>3</td>
<td>0</td>
<td>17</td>
<td>1</td>
<td>140</td>
</tr>
</tbody>
</table>

(b) **Courses with taught elements***

<table>
<thead>
<tr>
<th></th>
<th>MRes (five separate 1+3 progs)</th>
<th>MPhil in Epidemiology</th>
<th>MPhil in Public Health</th>
<th>MPhil in Clinical Science (TMAT)</th>
<th>MPhil in Clinical Science (Primary Care)</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>18</td>
<td>7</td>
<td>11</td>
<td>18</td>
<td>2</td>
<td>56</td>
</tr>
</tbody>
</table>

*The taught MRes and MPhil degrees were approved at the special meeting on 23 September 2014 and so statistics relate to the previous year’s courses.

**Admissions, 2014–15**

The Higher Degrees Office processed **278** applications for graduate admission (excluding readmissions and continuations) during the year:

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>PhD</td>
<td>162</td>
</tr>
<tr>
<td>MD</td>
<td>3</td>
</tr>
<tr>
<td>MRes*</td>
<td>14</td>
</tr>
<tr>
<td>MPhil (research)</td>
<td>36 (34 in Medical Science; 2 in Veterinary Science)</td>
</tr>
<tr>
<td>MPhil (taught elements)</td>
<td>63 (15 in Epidemiology; 21 in Public Health; 27 in Clinical Science)</td>
</tr>
</tbody>
</table>

* All MRes students are on 1+3 PhD programmes

The total for the previous year was 258.
13. School Finances 2014/15 and Estimates 2015/16

The RAM for 2015-16 has been prepared and circulated by the Planning and Resource Allocation Office (Old Schools). The School of Clinical Medicine remains in deficit at £984k (2013-14 actuals £2,858k deficit). This represents a shortfall of allocated Chest income over apportioned central costs and estimated direct expenditure. The reduction in the deficit forecast for 2015-16 is largely due to the recent agreement of the University’s RAM/TRAC Group that the impact from the transfers into the School of the CRUK Cambridge Institute, the MRC Epidemiology Unit and the MRC Cancer Unit should be removed from the RAM. Under the previous RAM methodology, central costs were apportioned to Schools based on a range of criteria e.g. research expenditure, total expenditure. As the School’s volume of such activity had increased significantly as a consequence of these transfers, then the School received an increased cost apportionment, even in circumstances where the transfers had had no impact on the central cost (either in amount or how it is used) being recovered. The change in methodology will improve the School’s RAM position, although it is unlikely to result in a surplus which would deliver an increase in the School’s future budget / allocation.

The size of the RAM deficit, and the fact that some other Schools now operate with a surplus, means that without new initiatives the School can no longer expect to receive any real-terms increase in its University funding in future years i.e. through the RAM Distribution Model (RDM) - the RDM provides a mechanism for redistributing chest allocations between Schools to more accurately reflect income generation, and for providing incentives to increase and / or reduce costs.

The School has received approval in principle to increase the number of students who remain in Cambridge for the clinical stage of the medicine course. Previously HEFCE restricted the number of students remaining in Cambridge to 130; in recent years the School increased this to 160 students and has now received approval to retain all 260-270 students per year from October 2017. The exact financial impact of that change is currently being modelled.

The School Chest budget for 2015-16 is £18,059k; this represents a 4.5% increase on 2014-15. From that increase, budgets totalling £576k have been provided to the MRC Epidemiology Unit and the MRC Cancer Unit under the terms of their transfer into the University.

The School’s financial plan submitted in December 2014 forecasts Chest expenditure increasing by an average of 3.8% per annum over the next three financial years largely as a result of new commitments to academic posts. Some of these commitments are the result of senior staff positions (currently being funded through short-term donations / endowments and personal awards from Medical Charities, Research Councils and the NHS) becoming a charge on the Chest during that period. The School’s plan anticipates this increase being covered by new allocations associated with the student numbers initiative, reductions in support costs, a School-wide retention of overhead income received by departments and the short term use of reserve funds. This plan is reviewed on an annual basis as part of the University’s strategic planning process.

(a) Estimates of UEF expenditure include the following headline figures:

<table>
<thead>
<tr>
<th></th>
<th>2015-16</th>
<th>2014-15</th>
</tr>
</thead>
<tbody>
<tr>
<td>UEF expenditure</td>
<td>19,874</td>
<td>18,684</td>
</tr>
<tr>
<td>Other expenditure</td>
<td>51,258</td>
<td>50,183</td>
</tr>
</tbody>
</table>

The increase is anticipated due to inflation and new academic posts.

(b) Research Grant Income and Expenditure 2014-15: (Appendix 1)

During 2014-15 there were 1,424 Research Grants and Contracts in operation and the sum of £155.3m was expended. This reflects an increase of 12% on expenditure in the prior year (2013-14: £138.9m expended). Some of this increase was due to the transfer into the University of the MRC Cancer Unit, together with the commencement of a significant infrastructure award from the MRC, although the underlying departmental
increase was also above average.

429 new grants were activated in 2014-15 with a total value of £176.4m. This compared with 360 new grants in 2013-14 with a total value of £123.1m (see Appendix 1 at the end of the report).

Growth is predominantly within the Research Council, UK Government and Medical Charities sectors.

14. Athena SWAN

The School's Equality and Diversity (E/D) work has expanded beyond the initial focus on Athena SWAN and successful acquisition of a Silver Award two years ago. Professor Fiona Karet continues as the Academic Lead and the coordinator is Vicky Smallbone. Professor Gordon Smith and Professor Karet have been designated as the University’s School Gender Equality Champions.

The School Council, Heads of Department and Faculty Board committees all consider E/D items as standing business. All departments have been asked to highlight E/D at their away-days/retreats and staff meetings. I am pleased to report that as of a July 2015 dataset, our Equality and Diversity Training Completion rate has risen to 90% of academics and over 75% of all School staff.

Communications across the School have benefitted from the continuing fortnightly School electronic newsletter, which reports items of note or celebration across the Biomedical campus. In addition, a new post-doctoral researchers committee has been convened by some of our post-docs and co-chaired by Drs Helen Brown and Claire Dawson. They organised a very successful inaugural half-day postdoc symposium on 2 September. A new network of Intermediate Fellows has been created, with initial academic leadership from Professor Margaret Ashcroft.

As part of a ‘Wellbeing at Work’ initiative, the School's Mental Health Awareness project is being led by Ms Caroline Newman (HR). Training and bite-size talks on various topics have been well attended.

In-role support for all our staff this year has included:

- launching and evaluation of annual appraisal (staff review and development)
- the Regius’ Quarterly Welcome Receptions for new starters
- confidence-building and career development courses/events
- on-site monthly Careers Service 1:1 surgeries
- equalisation of funding for eligible parental leave-takers whose funders do not provide cover/grant extensions.

Embedding good E/D and Athena SWAN practices is a priority for the School, to ensure our ability to at least renew Silver status in 2016. To this end, we will be repeating the full Staff Survey in October 2015, and introducing Unconscious Bias Training and a Mentoring pilot programme at the end of the calendar year 2015.

Thanks are due to Professor Fiona Karet and Ms Vicky Smallbone, to the School’s HR team and Departmental Administrators, the Athena SWAN Governance Group and various department/institute/unit Equality Champions, and to Dr Vivien Gruar of the UAS Equality and Diversity division.

15. Other Appointments - 1 September 2014 to 31 August 2015

University Lecturer and Clinical Lecturer appointments since 1 September 2014

Dr Kristian Mortensen, Clinical Lecturer, Department of Radiology, with effect from 1 October 2014
Mr Thomas Mitchell, Clinical Lecturer, Department of Surgery, with effect from 1 October 2014
Dr Emily Staples, Clinical Lecturer, Department of Medicine, with effect from 5 September 2014
Dr Michele Petruzzelli, Clinical Lecturer, Department of Medicine, with effect from 1 October 2014
Dr Sian Alexander, Clinical Lecturer, Department of Clinical Neurosciences, with effect from 1 October 2014
Mr Alec Barnett, Clinical Lecturer, Department of Surgery, with effect from 31 March 2015
Dr Jennifer Dickens, Clinical Lecturer, Department of Medicine, with effect from 1 April 2015
Dr Dirk Paul, University Lecturer, Department of Public Health and Primary Care, with effect from 29 June 2015
Reader since 1 September 2014

Dr Simon Mendez-Ferrer, Reader in Transfusion Medicine, Department of Haematology, with effect from 2 February 2015

Senior Research Fellow since 1 September 2014

Dr Yorgo Modis, Wellcome Trust Senior Research Fellow in Basic Biomedical Science, Department of Medicine, with effect from 1 November 2014.

Director of Research, Principal Research Associate appointments since 1 September 2014

Professor Douglas Fearon, Director of Research, Cancer Research UK, Cambridge Institute, with effect from 1 September 2014
Dr Martin White, Director of Research, MRC Epidemiology Unit, with effect from 13 October 2014

Appointment of Senior Research Associates or equivalent since 1 September 2014

Dr Elisa Laurenti, Department of Haematology, with effect from 1 September 2014
Dr Jean Adams, MRC Epidemiology Unit, with effect from 1 October 2014
Dr Hervé Besson, MRC Epidemiology Unit, with effect from 1 October 2014
Dr Benjamin Hall, MRC Cancer Unit, with effect from 1 October 2014
Dr James Nathan, Department of Medicine, with effect from 1 October 2014
Dr Ingo Rinshausen, Department of Haematology, with effect from 1 October 2014
Dr Shamith Samarajiwa, MRC Cancer Unit, with effect from 1 October 2014
Dr Eoin McKinney, CIMR and Department of Medicine, with effect from 1 November 2014
Dr Ewan Harrison, Department of Medicine, with effect from 1 December 2014
Dr Kevin Moreau, Department of Clinical Biochemistry, with effect from 1 December 2014
Dr Francisco Roca, Department of Medicine, with effect from 1 December 2014
Dr Charles Massie, CRUK – CI, with effect from 15 December 2014
Dr Anita Chandra, Department of Medicine, with effect from 1 January 2015
Dr Andrew Holding, Cancer Research UK Cambridge Institute, with effect from 1 January 2015
Dr Nicola Wilson, Cambridge Institute for Medical Research, with effect from 1 January 2015
Dr Dirk Christensen, MRC Epidemiology Unit, with effect from 5 January 2015
Dr Martin Miller, CRUK-CI, with effect from 13 January 2015
Dr Joanne Jones, Department of Clinical Neurosciences, with effect from 1 February 2015
Dr Jenni Burt, Department of Public Health and Primary Care, with effect from 1 March 2015
Dr Sarah Hosgood, Department of Surgery, with effect from 1 March 2015
Dr Hana Lango Allen, Department of Haematology, with effect from 2 March 2015
Dr Louise Harewood, CRUK-CI, with effect from 9 March 2015
Dr Jean Abraham, Department of Oncology, with effect from 1 April 2015
Dr Daniel Hodson, Department of Haematology, with effect from 1 April 2015
Dr Michelle Johnson, Department of Obstetrics and Gynaecology, with effect from 1 April 2015
Dr Charlotte Summers, Department of Medicine, with effect from 1 April 2015
Dr Bristi Basu, Department of Oncology, with effect from 1 June 2015
Dr Betania Mahler-Araujo, Department of Clinical Biochemistry, with effect from 1 June 2015.
Dr Oscar Rueda, CRUK-CI, with effect from 1 June 2015
Dr Oshaani Abeyakoon, Department of Radiology, with effect from 15 June 2015.
Dr David Kent, Department of Haematology, with effect from 1 August 2015.

Honorary Senior Visiting Fellow/Visitor’s Contract

Dr Anne Bertolotti, Department of Clinical Neurosciences and Neurology, for three years from 1 September 2014.
Dr Jane Melia, Department of Public Health and Primary Care, for three years from 1 September 2014.
Dr Richard M Siegel, Department of Medicine, for three years from 1 September 2014.
Dr John W Powles, Department of Public Health and Primary Care, for three years from 1 October 2014.
Dr Simon Thomas, Department of Oncology, for three years from 3 November 2014.
Dr Lorenzo Bello, Department of Clinical Neurosciences, for three years from 1 January 2015.
Prof Abdullah Majumder, Department of Public Health and Primary Care, for three years from 1 January 2015.
Dr Emma Pitchforth, Department of Public Health and Primary Care, for two years from 1 February 2015.
Dr Mercedes Jimenez-Linan, Department of Oncology, for three years from 2 March 2015.
Dr Laura Johnson, Department of Public Health and Primary Care, for two years from 1 April 2015.
Professor Paul-Peter Tak, Department of Medicine, for three years from 1 May 2015.
Dr Gillian Murphy, Department of Oncology, for two years from 12 May 2015.
Dr David Greenberg, Department of Public Health and Primary Care, for three years from 13 May 2015.
Dr Alison Condliffe, Department of Medicine, for three years from 15 June 2015.
Prof Hill Gaston, Department of Medicine, for three years from 1 July 2015.

Honorary Visiting Fellow

Dr Jenny Newbould, Department of Public Health and Primary Care, for two years from 1 September 2014.
Dr Nora Pashayan, Department of Public Health and Primary Care, for three years from 1 September 2014.
Dr Roman Romero-Ortuno, Public Health and Primary Care, for three years from 11 September 2014.
Dr Victoria Keevil, Public Health and Primary Care, for two years from 30 September 2014.
Dr Andrew Bateman, Department of Clinical Neurosciences, for three years from 1 October 2014.
Dr Lianna Ishihara, Cambridge Institute of Public Health, with effect from 1 October 2014.
Dr Jennifer Barnett, Department of Psychiatry, for three years from 1 November 2014.
Dr Frances Cheng, Department of Psychiatry, for two years from 1 November 2014.
Dr Nicole Keong, Department of Clinical Neurosciences, for three years from 1 November 2014.
Dr Mark Troll, Department of Medicine, for three years from 10 November 2014.
Dr Peter Willeit, Department of Public Health and Primary Care, for two years from 15 January 2015.
Dr Peter Hodkinson, Department of Medicine, for three years from 1 February 2015.
Dr Ronan O’Leary, Department of Medicine, for three years from 1 February 2015.
Dr Danish Saleheen, Department of Public Health and Primary Care, for three years from 9 February 2015.
Professor Alan Cuthbert, Department of Medicine, for three years from 17 March 2015.
Dr Meng-Chuan Lai, Department of Psychiatry, for three years from 1 May 2015.
Dr Peter Young, Department of Medicine, with effect from 20 August 2015 for three years.

Affiliated Lectureships

Dr John Howard, Department of Public Health and Primary Care, with effect from 1 September 2014
Dr Oscar Pasqua, Department of Medicine, with effect from 1 October 2014
Dr Mark Reacher, Department of Public Health and Primary Care and Eastern Field Epidemiology Unit, Cambridge Institute of Public Health, with effect from 1 October 2014
Dr Ayla Humphrey, Department of Psychiatry, with effect from 1 January 2015
Dr Andrew Bateman, Department of Psychiatry, with effect from 1 February 2015
Dr Isabel Clare, Department of Psychiatry, with effect from 1 March 2015
Mr Barry Smith, Clinical Skills Unit, with effect from 1 March 2015
Dr Kenneth Ong, Department of Paediatrics, with effect from 1 April 2015
Dr Pradeep Nathan, Department of Psychiatry, with effect from 1 May 2015

Associate Lecturers

New appointments with effect from 1 October 2014 for one year:
Mr Andrew Carrothers, Consultant Trauma and Orthopaedics, Cambridge University Hospitals NHS Foundation Trust
Mr Christopher Gooding, Consultant Trauma and Orthopaedic Surgeon, Cambridge University Hospitals NHS Foundation Trust
Mr Niel Kang, Orthopaedics, Cambridge University Hospitals NHS Foundation Trust
Mr Joel Melton, Consultant Orthopaedic Surgeon, Cambridge University Hospitals NHS Foundation Trust
New appointments with effect from 1 October 2014 for five years:

Mr Sami Al Hayek, Consultant Urological Surgeon, Cambridge University Hospitals NHS Foundation Trust
Mr Adil Aslam, Consultant Paediatric Surgeon, Cambridge University Hospitals NHS Foundation Trust
Dr Elizabeth C Astall, Consultant Histopathology, Peterborough City Hospital
Dr Charlotte Brierley, Neurology Consultant, West Suffolk NHS Foundation Trust and Cambridge University Hospitals NHS Foundation Trust
Mr Pedro Catarino, Consultant Cardiothoracic and Transplant Surgeon, Papworth Hospital NHS Foundation Trust
Mr Patrick Coughlin, Vascular Surgery Consultant, Cambridge University Hospitals NHS Foundation Trust
Dr Francesca Crawley, Consultant Neurologist, West Suffolk NHS Foundation Trust and Cambridge University Hospitals NHS Foundation Trust
Dr Michael Davies, Respiratory Medicine, Papworth Hospital NHS Foundation Trust
Miss Elisabeth Drye, Consultant in Colorectal and General Surgery, Peterborough City Hospital
Dr Paul Flynn, Acute and Metabolic Medicine Consultant, Cambridge University Hospitals NHS Foundation Trust
Mr Paro Forouhi, Consultant Breast Surgeon, Cambridge University Hospitals NHS Foundation Trust
Dr Zoe Fritz, Acute Medicine, Cambridge University Hospitals NHS Foundation Trust
Dr Deepa Gopalan, Consultant Cardiovascular Radiologist, Cambridge University Hospitals NHS Foundation Trust
Dr Joanna Hampton, Consultant in Geriatric Medicine, Cambridge University Hospitals NHS Foundation Trust
Dr Deepak Jain, Consultant Physician, General and Geriatric Medicine, QEIi Hospital, Welwyn Garden City
Dr Paul Jennings, Clinical Radiology, Ipswich Hospital NHS Trust
Dr Nicola Jones, Consultant in Cardiothoracic Anaesthesia and Anaesthesia and Critical Care, Papworth Hospital NHS Foundation Trust
Dr Kayvan Khadjooi, Consultant in Stroke Medicine, Cambridge University Hospitals NHS Foundation Trust
Dr Zilley Humah Khan, Clinical Trainer, Papworth Hospital NHS Foundation Trust
Dr Richard Lloyd, Anaesthesia and Intensive Care Medicine, Ipswich Hospital NHS Trust
Dr Colin Mason, Medicine for the Elderly, Cambridge University Hospitals NHS Foundation Trust
Dr Rajaratam Mathialagan, Consultant Physician, Gastroenterologist, Queen Elizabeth Hospital, King’s Lynn
Dr Mary Ninkovic, Hepatology and General Medicine, Peterborough City Hospital
Dr Sanjay Ojha, Consultant Physician and Nephrologist, Cambridge University Hospitals NHS Foundation Trust
Dr Jasvir Parmar, Consultant Transplant Respiratory Medicine Physician, Papworth Hospital NHS Foundation Trust
Dr Timothy Quinell, Respiratory Medicine, Papworth Hospital NHS Foundation Trust
Dr Gerry Rayman, Consultant Physician, Diabetes and Endocrinology, Ipswich Hospital NHS Trust
Dr Clare Sander, Consultant Respiratory Physician, Cambridge University Hospitals NHS Foundation Trust
Dr Nick Screaton, Radiology, Papworth Hospital NHS Foundation Trust and Cambridge University Hospitals NHS Foundation Trust
Dr Mark Slade, Consultant Respiratory Physician, Papworth Hospital NHS Foundation Trust
Dr Sian Stinchcombe, Consultant in Respiratory Medicine, Cambridge University Hospitals NHS Foundation Trust
Dr Stephen Wallis, Geriatric and General Medicine, Cambridge University Hospitals NHS Foundation Trust
Dr Kirsteen Watson, Consultant in Public Health Medicine, Cambridgeshire County Council; Cambridgeshire and Peterborough Clinical Commissioning Group
Dr Lisa Willcocks, Consultant in Nephrology and Vasculitis, Cambridge University Hospitals NHS Foundation Trust
Dr K Jane Wilson, Medicine for the Elderly, Cambridge University Hospitals NHS Foundation Trust

Re-Appointments

Mr Roger Gray, Consultant Surgeon, Cambridge University Hospitals NHS Foundation Trust, for a period of five years from 1 September 2014
Mr Neville Jamieson, Consultant Surgeon, Cambridge University Hospitals NHS Foundation Trust, for a period of five years from 1 September 2014
Mr Robert Macfarlane, Consultant Neurosurgeon, Cambridge University Hospitals NHS Foundation Trust, for a period of five years from 1 November 2014
Dr Rajini Ramana, Psychiatrist, Cambridge and Peterborough NHS Foundation Trust, for a period of five years from 1 November 2014
Dr Ashley Shaw, Consultant Radiologist, Cambridge University Hospitals NHS Foundation Trust, for a period of five years from 1 June 2014
Dr Christopher Sonnex, Genito-Urinary Medicine, Cambridge University Hospitals NHS Foundation Trust, for a period of five years from 1 September 2014

**Transfers and Promotions since 1 September 2014**

Dr Giles Yeo, from the Department of Clinical Biochemistry, Senior Research Associate, to the Department of Clinical Biochemistry, Principal Research Associate, with effect from 1 October 2014

Dr Frank Reimann, from C.I.M.R. Clinical Biochemistry, Wellcome Trust Senior Research Fellow in Basic Biomedical Science, to the Department of Clinical Biochemistry, University Lecturer, with effect from 1 October 2014

Professor Rebecca Fitzgerald, from the MRC Cancer Unit, Programme Leader, to the Department of Oncology, Professor of Cancer Prevention, with effect from 1 October 2014

Dr Karen Ersche, from Department of Psychiatry, Senior Research Associate to the Department of Psychiatry, University Lecturer, with effect from 1 November 2014

Dr Chong Tan, from the Department of Medicine, Research Associate, to the Department of Medicine, Clinical Lecturer, with effect from 1 December 2014

Professor Alasdair Coles, from the Department of Clinical Neurosciences, University Lecturer, to the Department of Clinical Neurosciences, Genzyme Professor of Neuroimmunology, with effect from 1 December 2014

Professor Andres Floto, C.I.M.R. Medicine Wellcome Trust, Senior Research Fellow in Clinical Science, to the Department of Medicine, Professor of Respiratory Biology, with effect from 1 December 2014

Professor Susan Ozanne, from the Department of Clinical Biochemistry, British Heart Foundation Senior Basic Science, Research Fellow and Reader in Developmental Endocrinology, to the Department of Clinical Biochemistry, Professor of Developmental Endocrinology, with effect from 1 January 2014

Dr Kevin O’Shaughnessy, Department of Medicine, University Senior Lecturer, Department of Medicine, Reader in Clinical Pharmacology, with effect from 1 January 2014

Dr Matthew Hoare, from Cancer Research UK Cambridge Institute, Translational Research Fellow, to the Department of Medicine, Unestablished Clinical Lecturer [Locum], with effect from 1 April 2015

Dr Fiona Walter, from the Department of Public Health and Primary Care, The Primary Care Unit, NIHR Clinician Scientist Fellow, to the Department of Public Health and Primary Care, The Primary Care Unit, Clinical Principal Research Associate, with effect from 20 April 2015

Dr Alexandra Davidson, from the Department of Public Health and Primary Care, General Practice Teaching Coordinator to the Department of Public Health and Primary Care, Assistant Director of Studies in General Practice, with effective 25 May 2015

Professor Gregory Hannon, from Cancer Research UK Cambridge Institute, Director of Research, to the Department of Oncology, Royal Society Research Professor of Molecular Cancer Biology with effect from 1 June 2015

Dr John Skidmore, from the Department of Chemistry, Principal Research Associate to C.I.M.R, Principal Research Associate, with effect from 20 July 2015

Dr Adam Brown, from the Department of Medicine, Clinical Research Fellow, to the Department of Medicine, Clinical Lecturer, with effect from 1 August 2015

16.  **Retirements/resignations – Since 1 September 2014**

**Resignations**

Dr Stephen Bentley, Senior Research Associate, Department of Medicine, with effect from 31 October 2014

Dr Barbara Lorber, Senior Research Associate, John van Geest Centre for Brain Repair, with effect from 31 December 2014

Dr Pieter Voshol, Senior Research Associate, Department of Clinical Biochemistry, with effect from 12 January 2015

Dr Sachi Mukherjee, Principal Research Associate, Cancer Research UK Cambridge Institute, with effect from 9 February 2015

Dr Pedro Perez-Mancera, Senior Research Associate, Cancer Research UK Cambridge Institute, with effect from 28 February 2015

Dr Lars Dolken, University Lecturer, Department of Medicine, with effect from 28 February 2015
Dr Thomas Alderson, Assistant Director of Studies in General Practice, Department of Public Health and Primary Care, with effect from 1 March 2015
Dr Elli Papaemmanouil, Senior Research Associate, Department of Haematology, with effect from 17 March 2015
Mr Stephen Price, NIHR Clinician Scientist Fellow, Division of Neurosurgery, with effect from 31 March 2015
Dr Sarah Finer, Clinical Lecturer, Department of Clinical Biochemistry, with effect from 23 April 2015
Dr Stephen Connolly, Clinical Senior Research Associate, Department of Surgery, with effect from 8 May 2015
Dr Alison Condliffe, University Lecturer, Department of Medicine, with effect from 15 June 2015
Miss Maxine Tran, Clinical Lecturer, Department of Surgery, with effect from 19 July 2015
Dr Helen Murphy, Clinical Senior Research Associate, Department of Clinical Biochemistry, with effect from 31 July 2015
Dr Robert Wardale, Senior Research Associate, Department of Surgery, with effect from 28 August 2015
Dr Stephen Bevan, Principal Research Associate, Department of Clinical Neurosciences, with effect from 31 August 2015
Professor Sharon Peacock, Professor of Clinical Microbiology, Department of Medicine, with effect from 31 August 2015

Retirements

Professor John Luzio, Professor of Molecular Membrane Biology, Department of Clinical Biochemistry, with effect from 30 September 2014
Professor Kenneth Siddle, Professor of Molecular Endocrinology, Department of Clinical Biochemistry, with effect from 30 September 2014
Professor Roger Pedersen, Director of Research in Regenerative Medicine, Department of Surgery, with effect from 30 September 2014
Dr Laurence Berman, University Lecturer, Department of Radiology, with effect from 31 December 2014
Professor Hill Gaston, Professor of Rheumatology, Department of Medicine, with effect from 30 June 2015

Clinical School
November 2015
APPENDIX 1

UEF BUDGET AND GRANT EXPENDITURE

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</thead>
<tbody>
<tr>
<td>Number of Grants (Active)</td>
<td>778</td>
<td>762</td>
<td>822</td>
<td>870</td>
<td>752</td>
<td>977</td>
<td>1,018</td>
<td>1,122</td>
<td>1,154</td>
<td>1,272</td>
<td>1,352</td>
<td>1,424</td>
</tr>
<tr>
<td>(i) Grant Expenditure (£’000)</td>
<td>£43,939</td>
<td>£46,569</td>
<td>£49,491</td>
<td>£53,027</td>
<td>£60,501</td>
<td>£70,503</td>
<td>£77,311</td>
<td>£86,277</td>
<td>£92,200</td>
<td>£109,830</td>
<td>£138,856</td>
<td>£155,272</td>
</tr>
<tr>
<td>(ii) UEF expenditure (£’000)</td>
<td>£8,009</td>
<td>£9,138</td>
<td>£9,956</td>
<td>£10,914</td>
<td>£12,098</td>
<td>£13,043</td>
<td>£13,857</td>
<td>£14,184</td>
<td>£14,893</td>
<td>£15,773</td>
<td>£16,621</td>
<td>£17,172</td>
</tr>
<tr>
<td>Ratio of (i) to (ii)</td>
<td>5.5</td>
<td>5.1</td>
<td>5.0</td>
<td>4.9</td>
<td>5.0</td>
<td>5.4</td>
<td>5.6</td>
<td>6.1</td>
<td>6.2</td>
<td>7.0</td>
<td>8.4</td>
<td>9.0</td>
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GRANTS ACTIVATED IN EACH FINANCIAL YEAR (New Method)

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<tbody>
<tr>
<td>Number of new grants</td>
<td>218</td>
<td>253</td>
<td>248</td>
<td>282</td>
<td>259</td>
<td>315</td>
<td>312</td>
<td>385</td>
<td>429</td>
</tr>
<tr>
<td>Value of grants awarded</td>
<td>£57.1</td>
<td>£59.8m</td>
<td>£93.2m</td>
<td>£82.3m</td>
<td>£81.1m</td>
<td>£89.1m</td>
<td>£132.1m</td>
<td>£122.3m</td>
<td>£176.4m</td>
</tr>
</tbody>
</table>

The new method was introduced to more accurately reflect the research performance of the School in the future. The new method records all grants activated in a given financial year, even if they commence expenditure at a future date. The previous method only included grants started in the current financial year and excluded grants which were less than one year in duration. The significant increase in 2011-12 represents the renewal of the Biomedical Research Centre award from NIHR; 2012-13 includes the transfer of the CRUK Cambridge Institute and the MRC Epidemiology Unit; 2013-14 includes the transfer of the MRC Cancer Unit.