

FACT: Foods rich in omega-3 fatty acids have anti-inflammatory, cardiovascular-enhancing and immune-regulating properties. It helps to prevent and control high blood cholesterol, hypertension, heart disease, stroke, cancer, diabetes, depression, inflammatory and anti-immune disorders.

Corporate support services

OFFICE OF THE PRESIDENT

LEGAL SERVICES DIVISION

National Manager: Ms Marissa Damons

The MRC's Legal Services Division has a unique support service structure within the MRC, in that it operates nationally and plays a very strategic role in protecting the interests of the MRC and assists with risk management within the MRC.

The interests of the MRC are two-fold, and encompass not only legal risk or exposure, but also protecting the MRC's outputs.

The MRC's Legal Services Division is located within the office of the President of the MRC and is not aligned to any specific department, unit or group within the MRC. This has a positive impact on the role of Legal Services within the organisation, in terms of credibility and visibility. Legal Services is aligned to the mandate of the MRC and supports both the Board and the Executive Management Committee in fulfilling the mandate. Therefore, our mission is to support the strategic objectives and initiatives of the MRC, and in doing so, we strive to deliver an efficient and excellent legal service to the MRC by means of a dedicated team that is committed to the highest ethical and professional standards that are not compromised.

Highlights

Over the past year, the Division has met the goals set by the Business Plan, and it has also successfully advised both the Acting President and the Executive Management Committee.

In terms of the current year, the Division's work included the following:

- Through the Legal Services Division, the MRC successfully managed to conclude internal litigious matters in the interests of the parties involved, thereby mitigating the risk for the MRC.
- Improving the Division's productivity and continuing to deliver excellent service to the MRC will remain high on the agenda. To this end, various mechanisms to improve delivery, such as a legal helpdesk system, have begun to be implemented.

- The Division relays information about legal risk areas as well as contractual risks faced by the MRC to the MRC Board, through quarterly contract reports.
- The Legal Division successfully assisted with the Public Finance Management Act, procurement presentations and information dissemination to the various regions.

Transformation and capacity development

The development of skills and capacity within the legal arena is a priority within the Division and every staff member is given the opportunity to develop their skills.

All the staff members within the legal office attend regular training in the relevant areas of their work. The Division strives to keep abreast of new changes in the law and attends regular seminars in order to relay this information back to the MRC and accurately advise the Executive Management Committee. Staff are members of the relevant legal institutes, which also helps them to keep up-to-date with new developments within the legal fraternity.

CORPORATE AND PUBLIC AFFAIRS DIRECTORATE

Executive Manager: Ms Sarah Bok

This Directorate resides within the office of the President and, among other duties, is responsible for the public image of the MRC. Its mandate is to manage all communication with the MRC's target audiences, chief of which are government, other research institutions and the general public, through its community work and science communications office.

The Directorate has undergone several changes in an effort to meet the challenges of the MRC. Since April 2010 to date, the directorate has added a scientific writer, Dr Alpa Somaiya, to its ranks. Each year, the Directorate also employs an Intern from the Cape Peninsula University of Technology's Journalism Department.

The Directorate is also responsible for producing various reports including the Key Performance Indicators (KPI) Report, quarterly organisational performance reports to the NDoH, the MRC's Annual Report and the Research Outputs Report, in partnership with the Management Information and Knowledge Systems Division.

The directorate is divided into the following categories:

- Media, Science Communication and Web Content Office

- Research Translation Office
- MRC Multi-media Studio

Outputs produced during the reporting period include newsletters, the *MRC News*, *Cochrane News*, *MRC Grapevine*, Annual Reports, *Sacendu Newsletter* (alcohol and drugs update), pamphlets and conference materials.

MRC Media Office

Over the past 12 months, the MRC has featured nationally and internationally in online and printed media. Researchers over the year have appeared on e-TV, e-news channel, SABC, and on live radio shows on KFM, Radio 702, Jacaranda FM, East Coast Radio, Radio Lotus, AM Live, PM Live and Heart 104,9 FM.

The total value for articles for the past 12 months has been just over R0,5 million. (Please note that the MRC did not pay for this coverage.) The sum total of such coverage amounts to over R29 million.

In terms of our science communication component, we have:

- provided rapporteurs for EMC meetings, R&D meetings, strategic planning and budget discussions, as well as Portfolio Committee meetings
- visited different units during unit reviews
- edited copy for *MRC News*, scientific journals, press releases and other literature
- attended conferences and written articles on relevant and exciting research studies
- compiled and edited the Annual Report
- advised and helped to develop research translation tools
- developed a consistent scientific writing style for the MRC.

Research Translation Office

Eding science festival in Limpopo: In January 2010, the Research Translation Office was mandated to market Prof. Sewram's Oncology Research Unit, and Eding International Science Festival was the perfect platform to fulfil that objective. The MRC participated in three of the five focus areas of the festival: interactive exhibitions, presentations and career guidance in health sciences. The level of exhibitions and presentations by Prof. Sewram and his team outshone all the other organisations that were present at the festival. His level of work raised the bar, elevating the standards that can now be expected in terms of public engagement. The MRC became the centre of attraction to all those that were present, including primary school learners. Prof. Sewram was the guest speaker at the gala dinner, and the audience included members of



The MRC team at the 2010 Eding International Science Festival in Limpopo



Prof. Sewram addressing learners about careers in health science

government from the Limpopo province, learners, educators, SETI exhibitors, presenters and citizens of Limpopo.

The feedback from the coordinators was that the learners would like the MRC to be present in Limpopo for the next event. The MRC photographer, Mr Jeffthas, captured most of the research-related activities at the Polokwane show grounds. The photographs are an indication of some of the activities during the event.

Expo for young scientists: The Cape Town Expo for Young Scientists is an annual event in which learners from Grades 6–12 showcase their investigative projects. The Expo stimulates an interest in Science and Technology in learners. Learners develop problem-solving and critical-thinking approaches when they think and do things scientifically.

The Research Translation Office is involved in the Cape Town Expo for Young Scientists and serves on the Expo Committee. At a suggestion from the MRC, the Expo ran mini workshops for educators and learners, the aim of which was to reach schools not previously involved in the Expo, for example, the Cape Flats and

township schools. These workshops expose educators and learners to the requirements of the Expo, and the learners can discuss ideas for projects. Mini Expos will take place during the second quarter to give learners a feel of an Expo and also as a way to help them improve their projects.

De-worming project: The MRC was approached by Free Range Films to record and feature the De-worming Programme on television. Masupatsela Series II is a documentary series produced by Free Range Films for SABC Education. Masupatsela Series II showcases trail-blazing individuals, communities, organisations and businesses that are taking the initiative, and making a difference to South African lives.

Role players involved in the programme included the MRC coordinator of the programme who was interviewed and filmed in March 2009. The storyline was then featured on SABC2 on 23 August 2010, during the children’s programme Masupatsela. You can view the story at www.freerangefilms.co.za/masupatsela2/.

The MRC Photography and Video Studio forms an integral part of the Research Translation Office as it visually showcases photographic and video images of all 41 MRC research units, as well as research-support staff projects. On request, the Photography and Video Studio also provides its services to the MRC website and to MRC publications (*Grapevine*, *MRC News* and the Annual Report). Portrait shots taken by the Studio included those of the PROMEC Unit, Health Systems Research Unit and the new MRC Board.

Over the past financial year, new images and footage were collected at SciFest Africa, Eding International Science Festival, MRC Research Day and the 5th PHASA Conference. Workshops were covered for various MRC research units, as well as support directorates, including the TB Epidemiology Research Unit, SA Cochrane Centre, Indigenous Knowledge Systems, Web and Media Technology Platform, MRC induction and presidential speeches, amongst others.

EXECUTIVE RESEARCH DIRECTORATE

Vice-President: Research: Prof. Ali Dhansay

The Research Directorate is tasked with executing the core business of the MRC, viz. the conduct of research and promoting research (agency function).

The following fall under the Research Directorate:

- Research Capacity Development

- Research Administration and Management
- Strategic Research Initiatives
- Management information and knowledge systems

Research Capacity Development

Dr Thabi Maitin

Grants: The Research Capacity Development (RCD) Unit continues to manage and review the grant values of the 14 funding categories that are being administered by the Sub-directorate. The latest review was of the Premier Career Development Award, which was altered from R230 000 p.a to R250 000 p.a. Efforts to review grant values will continue to be strengthened in order to retain excellent research skills within the MRC research community, and to avoid losing skills to competing funders or institutions, especially at PhD and Postdoctoral levels.

PhD support: Twenty-four PhD candidates are currently in training through the MRC internship programme. At least six young scientists completed their degrees (four MSc and two PhD students) within this reporting period. A highlight is that one PhD graduate has secured a Postdoctoral position at the NIH in the USA, and so will gain international exposure in her field of expertise.

Budget: Barring discrepancies resulting from financial year and academic year overlaps, the budget allocated to the Sub-directorate was almost completely spent. This is an indication that the Sub-directorate budget allocation needs to be increased.

Outreach: At least six historically disadvantaged institutions (HDIs) were visited by RCD staff and yielded successful applicants for grants. We have also supported scientists within MRC units in terms of technical grants, conference attendance, and so on.

Research capacity development events: The most important of the RCD events is the MRC Research Day. This important event continues to grow in stature, attracting more than 120 abstracts from young scientists in October 2010. The level of excellence of the research presented is one that the MRC can be proud of. The 2011 conference, the plans for which are already underway, will take place on 19 and 20 October 2010.

Research Administration and Management

Senior Research Manager: Dr Sandile Williams

The Research Administration and Management Division (RAMD) is a

Sub-directorate of the Executive Research Directorate, and plays a key role in the achievement of the MRC's strategic objectives. The Sub-directorate consists of two divisions, namely Research Administration and Research Management.

The Research Administration Division (RAD) is responsible for providing professional support to MRC researchers, as well as to the external health research community. We do this by providing administrative processes and systems that enable researchers to access resources for their research.

The Research Management Division (RMD) is responsible for the quality assurance and peer review processes on which the research grants management system is based, to enable the MRC to support and promote high-quality research.

Self-initiated research (SIR) grants: Through the SIR grants, the MRC provides open competitive support for health research. These grants are predominantly accessed by researchers at HDIs, and to some extent, by other research institutions such as the National Health Laboratory Services (NHLS), National Institute for Communicable Diseases (NICD) and National Institute for Occupational Health (NIOH).

For the 2010/2011 financial year, 139 researchers were supported in this category. This represents a slight increase from the numbers in the 2009/2010 financial year. This year, R16,9 million was allocated for these grants, compared to R14,6 million in 2009/2010.

Support for MRC research entities: The MRC research units are reviewed every five years to determine whether funding support should be continued. During this reporting period, eight of these units were reviewed by expert panels consisting of eminent international and national reviewers. In addition, support for the units is provided on the basis of an annual submission that details its research, operational progress and budget requests.

Currently, the MRC supports 23 extramural (R19 854 292) and 19 intramural (R12 645 262) research units. The average allocation per extramural unit was R863 230, compared to R665 540 per intramural unit, which reflects the MRC's strategic intention to balance resource allocation in favour of external research units.

Research support for pathology research: The National Health Laboratory Service Research Trust (NHLSRT) makes research grants available to staff members and postgraduate students at academic pathology departments across the higher education and health research sphere. In terms of a formal service level agreement between the NHLSRT and MRC, the RAMD acts as administrators for applications to the Trust.

In this reporting period, the two Divisions processed and managed

the peer review of 73 applications for pathology development grants and 12 applications for pathology research awards. An amount of R5 131 645 was allocated to 62 applicants in the pathology development grant category, and an amount of R2 433 500 was awarded to seven applicants for pathology research awards. The process for the next reporting period has already started with a call for proposals and the receipt of 124 applications.

The RAMD has had a very busy and productive 2010, with the pre- and post-award administration, and peer-review of applications in various grant categories, including research capacity development grants and bursary applications. Additionally, the Divisions assisted the MRC in complying with various Acts of Parliament and regulations set out by the Treasury and the Auditor-General.

Strategic Research Initiatives

Executive Manager: Dr Niresh Bhagwandin

The focus of the Strategic Research Initiatives (SRI) Division is on initiating and developing collaboration-based research programmes, sourcing funding, developing international collaborations, and foresight and scenario planning. The highlights of the reporting period include the following:

- The Centers for Disease Control and Prevention (CDC) awarded the MRC US\$10 842 801 and an additional US\$4 861 614 (subject to availability of funds) for the period 1 August 2010 to 31 July 2011 under the cooperative agreement between the MRC and CDC: 'Cooperative agreement to the Medical Research Council (MRC) of South Africa for TB control and HIV prevention, care, and treatment activities under PEPFAR'. The proposed projects are being undertaken by various MRC units, including the TB Epidemiology and Intervention Research Unit, Health Systems Research Unit, Alcohol and Drug Abuse Research Unit, and Gender and Health Research Unit.
- SRI successfully tendered for a UNICEF call: Bid number 7/2010 HR (Landscape Analysis) 'System Strengthening: Landscape Analysis (LA) on Egypt's readiness to accelerate action in nutrition'. This project is a partnership between the National Research Centre (NRC), Egypt and the MRC's Nutrition Intervention and Health Systems Research Units. The project commenced in December 2010.
- Dr Bhagwandin was invited to serve on the Steering Committee

of the DST Synthetic Biology, Systems Biology, Structural Biology and Functional Genomics Initiative.

- Dr Bhagwandin was nominated by the MRC to serve on the Nuclear Technologies in Medicine and Biology Initiative (NTeMBI) hosted by the South African Nuclear Energy Corporation (Necsa). He was elected as first Chair of the NTeMBI Steering Committee.
- Dr Bhagwandin arranged and chaired a meeting of key MRC and other researchers in chronic diseases in response to a request by DST and the Technology Innovation Agency (TIA), to establish a chronic diseases research initiative in South Africa.
- SRI sponsored and arranged a capacity-building conference of investigators of the management of pericarditis (IMPI) in Africa. The IMPI trial is in its third year and is coordinated by the Department of Medicine at UCT. It involves 20 centres in sub-Saharan Africa, 12 of which are outside South Africa and are in Mozambique, Malawi, Kenya, Uganda, Sierra Leone, Nigeria and Zimbabwe. The conference was attended by 58 delegates, 22 of whom were from sub-Saharan countries, 15 from other locations in South Africa and 21 from Cape Town.

Management Information and Knowledge Systems Division

Division Manager: Mr Zizi Mlonyeni

The Management Information and Knowledge Systems (MIKS) Division facilitates the development of various in-house information systems to support the MRC's administrative processes in order to reduce its dependence on external consultants. The Division plays a key role in sourcing systems for the MRC units/directorates and support departments. The MIKS Division actively participates, on behalf of the MRC at a national level, in successfully implementing the Department of Science and Technology (DST) Research Information Management System (RIMS). The Division is now actively edging closer to fully implementing a researcher-centred Management Information System (MIS) through the RIMS implementation, which has now expanded with two more modules being piloted within the MRC. The roll out of this system within the MRC is well on course, as the second module, Research Output, is being finalised.

The MIKS Division continues to provide critical strategic information support for the EMC's decision making through its quarterly and annual research output reports. These reports present the performance of the MRC in relation to its core business (medical

and health research). The Division also received additional requests for Scientometric Analyses Reports for the evaluation of MRC research units and ad hoc requests from other academics within the medical and health research field.

The MIKS Division has finalised the MRC's first Records Management Policy and the guidelines will be made available for comment to the MRC community at large. The MIKS Division is in the process of putting together a records management implementation strategy for the MRC.

While the Division's external client base for electronic document conversion services has increased significantly, it continues to facilitate the full-text retrieval of various peer-reviewed journal articles, both nationally and internationally.

DIABETES RESEARCH GROUP

Manager: Dr Abram Madiehe

Mandate

The UWC/MRC Diabetes Research Group (DRG) is hosted within the Department of Biotechnology at the University of the Western Cape.

There is no single cause of human obesity. It is caused by a complex interplay between factors such as physiological, environmental, genetic, socio-cultural, socio-economic and behavioural. This therefore makes obesity a difficult disease to investigate and manage. However, a better understanding of how environmental factors and genetic susceptibility interact to cause obesity may lead to targeted strategies for disease prevention and treatment. Therefore, the Group focuses on investigating obesity and its related metabolic disorders at the molecular level, in order to generate new knowledge that will be critical for the roll out of these prevention and treatment strategies.

The Group's research mandate is to:

- perform basic molecular biology research to generate new knowledge to help understand the interaction of environmental factors and genetics in the development of obesity
- develop research-based prevention and treatment solutions for obesity.

The Group carries out this mandate by:

- pursuing research into obesity and its associated chronic diseases at the molecular and cellular levels, in order to find the triggers of chronic disease development using proteomics
- developing research capacity by training postgraduate students
- developing reagents for diagnosing and treating obesity that have intellectual property potential

- educating the public about obesity and its associated morbidities.

In this reporting period, the DRG is involved in a number of projects, all aimed at diagnosing, preventing and treating obesity and its associated chronic diseases, especially diabetes. These projects include the following:

- The effects of pro-apoptotic recombinant proteins on adipose tissue development
- Identifying biomarkers associated with obesity using a proteomics approach
- Using nanotechnology in the early detection of type II diabetes
- Developing a drug-delivery system for imaging and treating obesity

Research highlights

The Group presented three posters at the MRC and the University of the Western Cape (UWC) Research Open Days.

The Group is currently working with Mintek to develop a diagnostic kit for diabetes.

The Group hosts the annual World Diabetes Day, where MRC and UWC employees, and the general public are made aware of the debilitating effects of diabetes. The Group also participated in the Diabetes Global Run/Walk. Dr Madiehe presented a breakfast seminar titled 'Why former athletes develop diabetes after retirement from sports' at the Tygerberg Sports Trust. This was well received, and follow-up talks with smaller groups were organised.

The Group, in collaboration with the MRC IKS Research Unit, PROMEC Unit and an international partner in Indonesia, are working on an Aloe project. The DRG is responsible for sample analysis during and after the clinical trial.

Capacity development

During this reporting period, the DRG had three BSc (Hons) students, all of whom have successfully completed their studies and graduated in March 2011; three Masters students, one of whom graduated in September 2010; and three PhD students.

Students in the Group attended several workshops:

- Laboratory and chemical safety to learn the necessary precautions required in a laboratory when working with laboratory equipment and chemicals
- Mentoring and evaluation, hosted by the MRC RCD for personal skills development
- ICP-MS seminar and Bio-Rad proteomics for laboratory and analytical skills training

Members of the Group also participated in a number of conferences,

including the UWC Research Open Day, the MRC Research Day and the Nanotechnology National Conference, to present their work and network with various researchers from different institutions to hopefully start collaborations.

Science communication and research translation

Dr Madiehe participated in two workshops in 2010 to develop a Masters level Nanotechnology curriculum coordinated by the Nanoscience Centre at the University of the Western Cape (UWC).

The Group is currently working in collaboration with Mintek to develop a diagnostic kit for diabetes, intended for commercialisation.

Dr Madiehe offered a special topics module in Obesity and Diabetes for BSc (Hons) students in the Department of Biotechnology at UWC. This course highlights the prevalence of these diseases, and educates the students on their epidemiology, causative factors and management. Dr Madiehe also teaches and coordinates the Ethics in Biotechnology module in the Department of Biotechnology at UWC.

OFFICE OF INTERNATIONAL AFFAIRS

Division Manager: Ms Carole Roberts

The Office of International Affairs (OIA) arranged visiting programmes for the following groups and individuals:

- **The Ministry of Health of Zambia, on behalf of the National Department of Health:** The delegation (the Director of Human Resources and Administration (delegation leader), the Director of Health Service Management, the Chief Planner of Development Cooperation (Economist), the Deputy Director, and the Principal Planner (Economist for Development and Cooperation)) was in South Africa to learn about our health system, to share best practices on equitable and affordable health care, and to develop an implementation plan for the Memorandum of Understanding between the two countries on cooperation in health.
- **A delegation from Tunisia, on behalf of the Department of Science and Technology:** The delegation (Directors-General of Higher Education and International Cooperation, the Director-General of Pasteur Institute of Tunis, and the Ambassador the Republic of Tunisia) was in South Africa to sign a new bilateral cooperation agreement in science and technology. The purpose of their MRC visit was to find out more about the MRC's work on vaccines, health innovation, biotechnology and indigenous knowledge systems.

- **United States Consul General (Cape Town):** The Consul-General visited the MRC for a briefing on MRC research and collaborations with the United States.
- **The Swiss Embassy:** The Science and Technology Counsellor and Attaché visited the MRC to explore the potential for research collaboration and agreements between the MRC and Swiss institutions.
- **The Initiative to Strengthen Health Research Capacity in Africa (ISHReCA) Steering Committee site visit:** Two members of the ISHReCA steering committee visited the MRC to evaluate it as a host for the ISHReCA Secretariat.

TECHNOLOGY AND INNOVATION DIRECTORATE

Acting Executive Director: Mr Bulelani Mahlangu

The mission of the Technology and Innovation Directorate is to translate MRC research into products that will make a difference to the health of the people of South Africa and beyond. The Directorate also recognises the urgent need to develop innovative but relevant interventions to address the growing health problems in the country.

With the passing of the Intellectual Property Rights (IPR) for Public Funded Research and Development Act, new MRC procedures have been developed to ensure that the Innovation Centre (IC) can review all new contracts in terms of the intellectual property (IP) clauses. The MRC's IP policy is also in the process of significant revision and internal consultation to ensure compliance with the Act, and it is due to be submitted to the National IP Management Office (NIPMO) on 1 August 2011.

Collaborations on research with parties within and outside the country are ongoing, and as a result of these, there have been student exchange programmes.

Members of the Directorate continue to represent the MRC in various critical organisations in South Africa.

INNOVATION CENTRE

Director: Prof. Tony Bunn

The passing of the IPR Act in August 2010 has required the Innovation Centre (IC) to rethink its policies, procedures and strategies to ensure compliance. In terms of the IPR Act, all publicly funded institutions in South Africa now have a legal obligation to effectively manage and exploit IP developed using public funds for the good of all South

Africans. However, the Act distinguishes between institutions that distribute public funds (funding agencies) and those that utilise public funds for research (recipients). Thus, contrary to previous practices (and the MRC Act), the MRC may now only claim ownership of IP developed by its internal units and by MRC-salaried employees in external units. This is expected to impact significantly on the number of new invention disclosures received by the IC and the size of the IC's future technology portfolio. However, the Act does not exclude the MRC from participating in benefit sharing or commercialising IP from external units.

Other requirements of the IPR Act are that the IC takes responsibility for ensuring that all contracts comply with the Act, and that IP is identified and protected as early as possible. Thus, new procedures have been developed, together with the Contracts and Budget Management Office, Legal Services Division, and the Research Administration Division, to ensure that the IC can review all new contracts, all newly funded project proposals and progress reports, and all annual unit reports in terms of the IP clauses. All MRC staff members have been informed of the IPR Act and its implications for them. The MRC's IP policy is also in the process of significant revision and internal consultation to ensure that it complies with the Act.

The primary impact of the IPR Act on the MRC will be a refocusing of the IP management and commercialisation efforts of the IC towards internal MRC units and other strategic initiatives, such as the Medical Device Innovation Platform. The IC will also continue to participate in and contribute to the broader national innovation imperatives, including capacity building in IP management, technology transfer and entrepreneurship.

Highlights

The IC continues to make progress in identifying, evaluating, protecting and commercialising IP developed using MRC funds. During 2010/2011, a number of projects were progressed to the start of negotiating commercialisation agreements.

The MRC/UCT Exercise and Sports Medicine Research Unit has made significant progress in integrating a novel genetic test for identifying the risk of tendon injury with associated biochemical and lifestyle information into the Gknowmix online platform. This will provide a holistic and integrated risk-management profile for athletes, managers, coaches and health professionals. The patent on the genetic test will enter the national phase in 2011, and significant progress has been made on negotiating the agreements for IP ownership and commercialisation rights between the relevant parties.

The IC continues to manage the IP portfolio of SAAVI, including

prosecuting SAAVI patents and negotiating IP clauses in agreements with third parties. The SAAVI HIV gene sequence patents have now been granted in South Africa, Namibia, the African Regional Intellectual Property Organisation (ARIPO), India, Europe and the USA. Due to changes in the focus of SAAVI's vaccine research, the responsibility for managing three of the other SAAVI patents has been transferred to the University of Cape Town.

The IC is participating in a European Commission Framework Programme 7 project on access to pharmaceuticals (the ATP project). The project aims to identify the barriers to the access of medicines, especially in developing countries, and to make recommendations on policy and legislation in order to promote such access. The project is being carried out by a consortium comprising St George's University, London (UK); the International Vaccine Institute (South Korea); Fiocruz (Brazil); the University of Neuchatel (Switzerland); and the MRC.

IC staff members, together with two other collaborators, have prepared a paper entitled 'Socially responsible licensing of health technologies: Policy and practice in South Africa', which has been accepted for publication in *Les Nouvelles* (an international journal of the Licensing Executives Society International).

The IC has established a collaboration with the University of Sherbrooke in Canada, regarding involving the University's Masters students in the ATP project. As a result, the IC has hosted and will continue to host these Canadian students for 3–4 months every year to work on the ATP project.

Recently, the IC has successfully held a workshop on socially responsible licensing strategies and the relevant clauses in the IPR Act, which was attended by various IP, legal and technology transfer professionals in the Western Cape.

A business plan was drafted by the IC for a new innovation platform, namely the Medical Device Innovation Platform (MDIP), which was approved by the MRC Board in June 2010. MDIP now has eight universities and the CSIR (as a special member) as hubs in the platform. Two international universities (University of Oxford in the UK and Northwestern University in Chicago) are interested in becoming involved in the MDIP as collaborators on projects that relate to appropriate technologies in low-resource settings. A number of projects have been approved for funding, subject to the clinical-need market-opportunity university collaboration criteria. The MDIP has already secured a novel invention disclosure and has the opportunity to spin out a new venture in 2011.

In December 2010, the IC organised an IP policy workshop with colleagues from other technology transfer offices around the country, in order to seek consensus on some of the IP policy issues affected

by the new IPR Act. The results of the workshop have been used to make extensive revisions to the MRC's IP policy to conform to the IPR Act. The revised IP policy is now ready for consultation with other relevant internal departments at the MRC.

Capacity development

While the IC's primary responsibility is to MRC researchers, as the leading centre for health innovation in SA, the IC is extensively involved in building capacity and educating MRC researchers and other research organisations in IP management and technology transfer, through workshops and other forms of information sharing. In the past year, members of the IC have been involved in the following such activities:

- The IC co-organised (with the support of the Southern African Research and Innovation Management Association (SARIMA), and with funding from the UK IPO) and participated in an expert intervention for the commercialisation of South African technologies.
- The IC was invited to be on the teaching faculty of the international course for developing country candidates, namely 'Entrepreneurship for scientists and engineers'. This intensive, week-long course is organised by the Institute of Physics (UK) and events took place in Trieste and Buenos Aires in 2010.

As part of the IC's continued drive towards transformation and internal capacity development, the Centre has employed an Intern on a two-year contract. The Intern has gained significant hands-on experience in patent searching, market research and commercialisation of technologies, and was awarded a scholarship by the Association of University Technology Managers (AUTM) to attend their annual conference in Las Vegas in February 2011.

eHEALTH RESEARCH AND INFORMATION PLATFORM

Diabetes Discovery Platform

Director: Dr Johan Louw

Mandate

The mandate of the Diabetes Discovery Platform (DDP) is to:

- pursue research into diabetes with special attention to the South African perspective
- apply research results to developing methods of prevention, early

detection and alternative treatments.

The primary outcome of the DDP's activities is focused on products defined in IP terms.

Research highlights

Drug discovery: The DDP and Danish collaborators have identified and characterised novel treatments for diabetes. Data demonstrate efficacy of the novel compound in lowering blood glucose concentrations in several animal models. The compound compares favourably with current diabetes agents, and promising data is still being generated. In addition to the novel compound, 38 analogues were synthesised from the compound and have been tested in vitro for bioactivity. The next phase of experiments is underway for clinical trials, which will pave the way for the launch of two complementary products into the global market.

Developmental programming: Programming refers to events during critical developmental phases that induce durable changes in offspring development and health. We have established a nutritional programming model and demonstrated programming effects in the brain with altered expression of factors involved in glucose transport and the feeding response. Hepatic physiology and plasma fatty acid profiles are being investigated.

Obesity: Obesity increases the risk of developing cancer, cardiovascular disease and diabetes. *Cyclopia maculata* induces lipolysis (fat breakdown) and inhibits lipogenesis (fat formation) in mouse 3T3-L1 adipocytes (fat cells). We are investigating the mechanism of action by quantifying the expression of proteins involved in lipolysis and lipogenesis in the liver and adipose tissue. Demonstrating that *Cyclopia maculata* has anti-obesity or health-promoting properties has major financial implications for the impoverished Genadendal community.

Capacity development

Unit staff have attended a number of training courses, including Opportunities for Organisational Training in the Virtual world, Second Life; and the EASD Scientists Training Course in Heidelberg, Germany, which took place from 3–9 October 2010.

Science communication and research translation

The Diabetes Discovery Platform researchers review grants and research proposals, and serve as external examiners (for theses), editors and reviewers (for journals). Members of the Unit have also

submitted abstracts for presentation at the Indigenous Plant Use Forum and International Organisation for Chemical Sciences in Development (IOCD) Symposium. They have also delivered presentations at the MRC Research Day.

Biomedical Informatics Research Division

Division Manager: Dr Chris Seebregts

Research highlights

The eHealth Research and Innovation Platform (eHRIP) was established to coordinate and facilitate activities within the MRC that are related to eHealth. In terms of the WHO definition, eHealth refers to the use of information and communication technologies (ICTs) for health. The activities of web and media technologies (WMT), health informatics R&D coordination (HIRD) and eHealth strategy and policy (ESP) are coordinated within the framework of eHRIP through the respective division managers: Ms Hendra van Zyl, Dr Lyn Hanmer and Dr Rosemary Foster.

Based on the 10-point plan of the NDoH and the national service delivery agreement (NSDA) of the Minister of Health, it is expected that the essential role of effective health information systems, including multiple eHealth systems and services, will be increasingly recognised. eHealth activities at the MRC mainly relate to health sector outputs – strengthening health system effectiveness – but also to other outputs by applying areas of eHRIP projects, including HIV and AIDS, and maternal and child health. This role was highlighted by the Minister of Health in his opening speech to the international Medinfo conference held in Cape Town in September 2010, in which he noted that:

All the four outputs require a functional patient and health management information system that is capable of providing real time information at all levels of health systems. Strengthening information systems is thus one of the sub-outputs that will contribute towards Output Four: Strengthening Health System Effectiveness.'

Capacity development

See reports of WMT, HIRD and ESP.

Science communication and research translation

Doctors Foster and Hanmer represent the MRC on the NHIS/SA committee, which is responsible for planning and coordinating health information system activities in the public health-care sector. They

also represent the MRC on the Private Health Information Standards Committee (PHISC), which develops and coordinates the implementation of health information standards, focusing on the private sector, but also taking national health system requirements into account.

WMT conducts an extensive range of research translation and health promotion activities, as indicated in the WMT report, and all the divisions (WMT, HIRD and ESP) work with an extensive range of internal and external stakeholders to support national eHealth and related activities.

Health Informatics Research and Development Coordination Division

Division Manager: Dr Lyn Hanmer

Research highlights

HIRD is an organisational unit in eHRIP that focuses on projects and activities related to health information systems evaluation, and developing and implementing health information content standards.

Medinfo, September 2010: Dr Hanmer chaired the Local Organising Committee for Medinfo 2010, the 13th World Congress on Medical and Health Informatics, which was held in Cape Town. This was the first time that this flagship activity of the International Medical Informatics Association (IMIA) had been held in Africa. It was hosted by the South African Health Informatics Association (SAHIA) on behalf of the IMIA. The conference was formally opened by the South African Minister of Health, and included nearly 1 000 participants from a wide range of international and national organisations, including the NDoH and all but one of the Provincial Departments of Health.

The WHO family of international classifications (WHO-FIC) collaborating centre: eHRIP will host the WHO-FIC collaborating centre at the MRC, which is currently under designation. The MRC will be hosting the 2011 Annual Meeting of the International Network of WHO-FIC Collaborating Centres in Cape Town from 29 October to 4 November 2011. Planning is currently under way with a local Steering Committee of MRC and other stakeholders, in coordination with the meeting planning group of the international WHO-FIC network. New projects to support the work of the collaborating centre are planned in HIRD.

Capacity development

Dr Hanmer continues to manage and mentor an NRF Intern at PhD level who is based in HIRD and is a co-supervisor for one Masters

thesis. She also provides ad hoc support to a Masters-level health informatics project planning at the Cape Peninsula University of Technology (CPUT) through the Information Development for Health in Africa (INDEHELA), which is a North-South-South research network that is funded through the Finnish Academy of Sciences.

Science communication and research translation

Dr Hanmer has been appointed as a member of the Ministerial Advisory Committee on Health Technology to the Minister of Health. She was invited to participate in an experts' meeting on ehealth and telemedicine harmonisation convened by the African Union (AU) Commission and is also participating in preparing a briefing document on this topic, which is to be presented at the next meeting of African Ministers of Health convened by the AU during 2011.

Through the WHO-FIC collaborating centre currently under designation, a network of South African, southern African and African stakeholders involved in health coding and classification is being developed, and will be maintained and coordinated through the collaborating centre at the MRC.

Dr Hanmer is currently the International Medical Informatics Association (IMIA) secretary and therefore a member of the IMIA Board. A primary role of the IMIA is to promote the effective development and use of health information and health information systems internationally. The HIRD division manager is also a council member of the South African Health Informatics Association (SAHIA), which is the national IMIA affiliate.

Telemedicine

Division Manager: Ms Jill Fortuin

In this reporting period, the Telemedicine Division has responded to the health-care needs of the nation by researching and providing innovative technologies that address these needs.

The MTN SA Foundation has a vision to connect communities for self reliance. Telemedicine is a pivotal part of this ongoing project. Health-care service delivery is inhibited by a lack of health professionals, availability of specialist health-care services and geographic positioning of specialised services to communities. The telemedicine workstation is an innovative and enabling tool, which has been identified by the MTN SA Foundation as the leveraging tool to aid their vision of connecting communities for self reliance. The telemedicine workstation, which is designed by Ms Fortuin and

owned by the MRC, will be deployed to 100 public health facilities. This SA flagship project will be assessed independently to determine scalability, and if the results are positive, it will potentially form part of a larger initiative: National Health Insurance.

In September 2010, the MRC and the University of Stellenbosch collaborated to host the first SA Telemedicine Conference, which was attended by the Minister of Health and Deputy Minister of Science and Technology. The message from the Minister of Health, Dr Aaron Motsoaledi, highlighted that telemedicine will not answer all South Africa's health-care challenges, but it will enable and improve the delivery of health care in the public sector. This conference was well supported.

The first South African mHealth meeting was hosted by the MRC in September 2010. mHealth is a growing industry in emerging countries, due to the exponential growth of global mobile phone usage. mHealth is the use of mobile communications for health services and information. As a result of the conference, the MRC was asked to lead mHealth in South Africa.

The 'Introduction to Telemedicine course' is the first short course in telemedicine in South Africa and was initiated by Ms Fortuin. The course is facilitated by Ms Van Dyk at the University of Stellenbosch. The course ensures that synergy and awareness is created amongst key role players in the telemedicine and eHealth environment. The MTN SA Foundation and the DST have sponsored participants from all nine provincial departments of health to attend. By the end of February 2011, approximately 30 people had successfully completed the course.

Capacity building within the Telemedicine Division is important in order to ensure sustainability and growth. Within the Division there is one PhD student, who aims to graduate in 2012, and one student who is hoping to complete the postgraduate diploma in telemedicine in 2012. The Division also provides support, mentoring and supervision to external students at Stellenbosch University.

Web and Media Technologies Division

Division Manager: Ms Hendra van Zyl

Highlights

The Web and Media Technologies Division (WMT) resides within the eHealth Research and Innovation Platform, and its mission is to conduct appropriate public health research. This research is carried out by developing and using a convergence of technologies in eHealth

to enhance and translate research into innovative knowledge products, contributing to a strengthened health system in South Africa.

Based on knowledge-management principles for packaging content, WMT uses consumer health informatics (CHI) to analyse the information needs of consumer groups and model their preferences in information systems. This information is then used to develop methods of making health information accessible to these groups. The WMT is uniquely positioned to utilise eHealth for research translation, thereby positively impacting the public's understanding of MRC research.

The WMT developed a comprehensive eHealth promotion approach that addressed inequities in HIV prevention and education within three disadvantaged school communities in Mitchell's Plain.

A convergence of appropriate information and communication technologies (ICTs) were applied through different interventions, including an in-depth research study, to compare the difference between classroom learning and eLearning in the uptake of HIV knowledge among primary school learners. Various approaches addressed the needs of learners and built up their self-esteem in order to empower them to make healthy sexual behaviour choices. A capacity-building HIV peer educator course, focusing on educators, was developed and NQF-aligned. Presented during the complete project phase, 96 participants successfully completed the course. A research report was produced as evidence of successfully enabling horizontal HIV knowledge transfer between peers, and vertical HIV knowledge transfer in an adult-child relationship, thus contributing to public health efforts in HIV prevention.

Capacity development

Of the current eight staff members, one is enrolled for an MPH (University of Liverpool, UK) and one is enrolled in an MA in information science at UNISA. Also, one Intern is enrolled in an MTech course at CPUT. These courses are already adding much value to the WMT's work in public health and supporting the knowledge management and informatics approaches.

Monthly journal club meetings add value to our staff's capacity development, with successful abstract acceptance for conference participation. One oral presentation was given in May 2010 at the international IST-Africa Conference, two oral presentations were presented during September 2010 at the 13th MedInfo World Congress on Health and Medical Informatics, and one oral presentation was delivered in October 2010 at the International Conference on Intellectual Leadership Development for Africa's Advancement.

Ms van Zyl was elected as the Deputy President of the SA

Knowledge Management Professional Association (SAKMPA) in May 2010 and serves on a conference scientific committee. Staff attended various courses to enhance their research skills.

From April 2010 to March 2011, the WMT hosted an NRF intern, who received in-depth training on science writing, focusing on research translation for different audiences. The Intern was successful in an abstract submitted to the MRC's Research Day in October 2010, where his presentation and poster addressed research translation. We acquired a second Intern in September 2010 who is currently undergoing capacity development in eHealth.

Science communication and research translation

The WMT manages and participates in an editorial board, consisting of experts, to review articles published on AfroAIDSinfo, an AIDS information portal. These articles and an eNewsletter are written for five different audiences, namely scientists, health professionals, policy makers, educators and the public, on a monthly basis. An online consumer health informatics study was conducted during this reporting period among these audiences to determine whether their information needs are addressed, and to identify changed needs and possible gaps. A special eNewsletter gave feedback to the members and following monthly articles addressed newly identified topics.

Towards the end of an innovative three-year eHealth promotion study, a community feedback meeting was held in November 2010, during which the community participated in the discussion of the final results.

Ongoing technology investigations take place to support and enhance eHealth, which have led to the introduction of various eForums that are appropriate to the needs of an eLearning group, social networking platforms that address the educational needs of adolescents in a community informatics project, and online management of audio and video material. These technologies are linked to methodologies such as Web2Public, Radio2Public, Peer2Peer, and Expert2Student knowledge transfer models, to effectively translate research outputs into knowledge products.

- **Web2Public:** This methodology investigates the information needs of health consumers to produce a web presence, designed and modeled according to their preferences. Examples of its application are the WMT audio production studio website (<http://radio.mrc.ac.za>), trials of excellence in southern Africa (www.tesafrica.org) and five conference websites, in addition to various updates and modifications to existing project websites. The methodology has also been presented at international

conferences, the MRC Research Day and IST-AFRICA 2010.

- **Radio2Public:** This model guided an investigation to determine the information needs of community radio presenters. While still under refinement, the model was implemented in two large studies of the WMT to support research translation. Twenty podcasts with accompanying articles were produced and embedded into websites during the past year. Additionally, 30 audio documentaries were edited based on research seminars and an oral presentation at the MedInfo World Congress on Health and Medical Informatics in September 2010.
- **Peer2Peer:** This is a mature methodology that has been implemented over the past five years in eHealth community outreach projects in Khayelitsha and Mitchell's Plain. This occurred after it was initially piloted in two rural universities. The main focus of the methodology is to leverage technologies to improved public health and address inequalities and inequities experienced by rural and disadvantaged communities. It was presented at the International Conference on Intellectual Leadership Development for Africa's Advancement in October 2010.
- **Expert2Student:** Using technologies such as audio podcasts, community radio broadcasts and social media, this methodology mobilises experts to encourage students to study natural sciences. Its unique approach has been presented at various conferences and has appeared in publications.

FINANCE AND CONTRACTS DIRECTORATE

Executive Director: Mr Bulelani Mahlangu

The MRC has adopted the 'procure to pay' model, and in this regard, the Board approved the upgrade of the JDE finance system. The system is due to go live in December 2011.

Several audits were conducted, over and above the statutory audit by the Auditor-General of South Africa and several financial reports were submitted to the funders.

A risk-maturity assessment was conducted in September 2010, and it indicated a significant improvement in risk-management processes compared to December 2009.

The CFO acted as the Chief Risk Officer of the MRC. A decision has been taken to formally establish a risk-management function, and a position for a Risk Manager has been advertised.

The Finance Directorate has managed to submit its annual financial

statements (AFS) on time, which is a significant improvement from last year, given the number of transactions processed after year end.

The MRC has maximised its return on cash reserves by investing with CPD, and in limited cases, by investing in fixed-term call deposits with the big four banks.

OPERATIONS DIRECTORATE

Executive Director: Mr Zukile Vokwana

INFORMATION TECHNOLOGY

National Manager: Mr Patrick Charls

The IT infrastructure underwent a major hardware upgrade this year. The last significant hardware upgrade took place in the late 1990s, when Durban and Pretoria were linked to Cape Town for the first time. The ageing servers in these regions were replaced in order to support a virtualised server environment using VMware. This reduced physical from approximately 100 in 2006 to less than 20 in 2010. By moving to a virtualised environment, we are able to offer a much higher level of availability.

The new servers have also been attached to storage area networks. The storage requirement of the MRC increases by 30%–40% each year. We currently have approximately 45 terra bytes of storage spread throughout the country.

We are introducing the South African National Research Network, which is a high-speed network dedicated to research traffic, and conducting research into research networking and broadband infrastructures. The network is being rolled out in a phased manner and will connect to 204 sites across the country with research networks. This has enabled us to increase the internet bandwidth significantly, without increasing the running costs.

A full disaster-recovery data centre has been established in Cape Town, so that we can failover all critical servers to this site in the event of a disaster. This site is linked to the primary data centre via a high-speed fibre-optic link.

Upgrading the infrastructure has put us in a much better position to meet the needs of the MRC's researchers. More and more of the research projects involve collaboration with external organisations, which requires the exchange of data, video conferencing, and so on.

HUMAN CAPITAL MANAGEMENT AND DEVELOPMENT

Executive Director: Dr Nonhlanhla Madela-Mntla

Human Capital Management and Development (HCMD) is the centre-stage of support for any organisation.

1. Transformation and development:

This year, the MRC has exceeded the latest South African Employment Equity targets as compiled by the Department of Labour. This is due to

the total commitment of the management to the transformation agenda of both the MRC and the South African government.

The Employment Equity profile of the organisation continues to improve due the effective use of the recruitment policy, which is being used as an affirmative action tool. This is reflected in both the race and gender of the new employees recruited during this review period. Percentages were 50% Africans, 19% coloureds, 16% Indians and 15% white. Of these, 68% were female and 32% were male.

Although satisfactory in relation to the South African employment equity statistics, improvement is required in both race and gender at senior management level

MRC EE profile as at 23 March 2011

		Black (%)				Female (%)					
		1997	2010	2009 SA EE statistics	2013 targets	1997	2010	Current SA EE statistics	2013 targets		
Executive management	Level 1	25,0	100	22	80	Executive management	Level 1	12,5	0	21	20
Senior management	Level 1	13,0	36	27	52	Senior management	Level 1	22,0	48	27	38
Middle management	Level 2	15,0	71	37	55	Middle management	Level 2	53,8	71	36	57
Junior management	Level 3	42,4	89	58	66	Junior management	Level 3	74,3	74	36	76
Semi-skilled	Level 4	55,5	99	83	79	Semi-skilled	Level 4	79,4	74	33	69
Unskilled	Level 5	95,2	98	90	99	Unskilled	Level 5	47,6	39	29	54

Disabled employees as at 23 March 2011 for the period 1 April 2010 to 31 March 2011

Occupational Levels	Male				Female				Total
	African	Coloured	Indian	White	African	Coloured	Indian	White	
Top Management	-	-	-	-	-	-	-	-	-
Senior Management	-	-	-	-	-	-	-	1	2
Professionally qualified and Specialists	-	-	-	-	-	-	-	1	1
Skilled Technical and Academically Qualified	1	-	-	-	-	-	-	-	1
Semi-skilled and Discretionary decision making	-	-	-	-	-	-	-	-	-
Unskilled and Defined Decision Making	-	-	-	-	-	-	-	-	1
Total	1	-	-	1	-	1	-	2	5

Recruitment: Due to the MRC's financial structure in which more than 50% of its funding comes from contract funding, the recruitment office is kept busy with appointments and renewals of contracts.

During this review period, 122 job adverts were placed, 4 967 CVs were captured and 208 new appointments/contracts were made. Furthermore, 179 existing contracts were renewed.

Recruitment as at 23 March 2011 for the period 1 April 2010 to 31 March 2011

Occupational Levels	Male				Female				Total
	African	Coloured	Indian	White	African	Coloured	Indian	White	
Top Management	-	-	-	-	-	-	-	-	-
Senior Management	1	-	-	-	-	-	-	1	2
Professionally qualified and Specialists	1	1	-	-	3	3	8	2	18
Skilled Technical and Academically Qualified	16	1	2	1	32	6	16	2	76
Semi-skilled and Discretionary decision making	16	-	4	-	69	1	9	-	99
Unskilled and Defined Decision Making	7	-	2	-	3	1	-	-	13
Total	41	2	8	1	107	11	33	5	208

*There were no disabled employees recruited

Terminations as at 23 March 2011 for the period 1 April 2010 to 31 March 2011

Occupational Levels	Male				Female				Total
	African	Coloured	Indian	White	African	Coloured	Indian	White	
Top Management	-	-	-	-	-	-	-	1	1
Senior Management	-	-	1	-	1	-	1	2	5
Professionally qualified and Specialists	-	-	2	2	7	1	5	3	20
Skilled Technical and Academically Qualified	9	3	2	2	38	10	7	5	76
Semi-skilled and Discretionary decision making	19	2	1	-	23	8	5	1	59
Unskilled and Defined Decision Making	1	2	-	-	3	3	-	-	9
Total	29	7	6	4	72	22	18	12	170

*There were no disabled employees terminated

Promotions as at 23 March 2011 for the period 1 April 2010 to 31 March 2011

Occupational Levels	Male				Female				Total
	African	Coloured	Indian	White	African	Coloured	Indian	White	
Top Management	-	-	-	-	-	-	-	-	
Senior Management	-	-	-	-	-	-	-	1	1
Professionally qualified and Specialists	2	1	1	-	3	2	1	7	17
Skilled Technical and Academically Qualified	-	3	-	-	3	2	1	3	12
Semi-skilled and Discretionary decision making	1	1	-	-	2	1	1	-	6
Unskilled and Defined Decision Making	-	-	-	-	1	-	-	-	1
Total	3	5	1	1	9	5	3	11	37

Accelerated development programme (ADP): The ADP was originally established in line with the national need to grow and develop the skills base of previously disadvantaged individuals (PDIs). In the MRC, this programme has been used mainly to develop management skills of scientific employees who are identified as candidates for management skills development, either for career advancement or for the benefit of units and other entities.

Since 2008/2009, this programme has also been extended to include the development of non-scientific staff based in the Corporate Support Directorates. This was again the case this reporting period, with both researchers and support staff being given the opportunity for development. During this time, several employees attended various courses at the University of Stellenbosch Business School. Two people attended the senior management development course (SMDP), five registered for the management development course (MDP) and eight registered for the new management development course (NMDP). Furthermore, eight people were trained in change management by the Prosci and Change Management Learning Centre.

Study support and study leave for career advancement: The MRC has a study support and study leave policy. Permanent and contract staff receive 100% financial support up to a maximum of R10 000 per annum for the advancement of their careers.

For undergraduate studies, staff are allowed two days annually for every exam, up to a maximum of 16 days where operationally possible. Similarly, Masters students are allowed 15 days for writing

their thesis, while PhD students are allowed 20 days.

During this review period, financial study support amounted to R349 353, excluding study leave. Support was given to 10 PhD, 10 Masters, six Honours, 14 Undergraduate, 11 Diploma and two Certificate students.

2. Employment relations and conditions

It has now been one year since the revised conditions of service were introduced on 1 January 2010, and no problems have been recorded. However, alignment with best practises remains an ongoing process. Mismanagement and unfair labour practices pose a potential risk to the MRC in the short and medium term. Through ongoing interaction, coaching and mentorship, we have managed to keep formal disputes at a low level. Referrals to the CCMA do happen, with no case losses thus far. Special attention is given to the management of financial misconduct and adherence to protocols. The MRC's disciplinary code has been revised in terms of best practises. On approval by the Executive Management Committee subsequent training will soon be offered to all managers and supervisors. There has been a decline in both formal disciplinary actions and operational requirement processes resulting in retrenchments. Grievances are addressed and facilitated at the lowest possible level.

The following table shows information on disciplinary actions taken during this reporting period.

Disciplinary actions as at 23 March 2011 for the period 01 April to 31 March 2011

Date	Gender	Race	Misconduct/charges	Penalty/outcome
June 2010	M	B	Incapacity – poor performance	Services terminated
July 2010	M	W	Misconduct	Final warning and EAP
August 2010	M	C	Incapacity poor performance	Final warning – demotion as per agreement plus EAP
September 2010	M	B	Incapacity ill health	Services terminated on basis of incapacity
November 2010	M	B	Misconduct	Services terminated
December 2010	M	B	Incapacity – poor performance	Services terminated
December 2010	F	B	Incapacity – poor performance	Services terminated
February 2011	M	B	Incapacity – poor performance	Services terminated
February 2011	M	B	Incapacity – poor performance	Services terminated

Due to nature of MRC business and funding structures, more than 50% of employees are appointed on fixed-term contracts. Special attention is now given to mechanisms on how to ensure a balance between the best possible employment contracts and practices, and not putting the MRC at risk in creating reasonable expectations and still retaining core and specially trained skills.

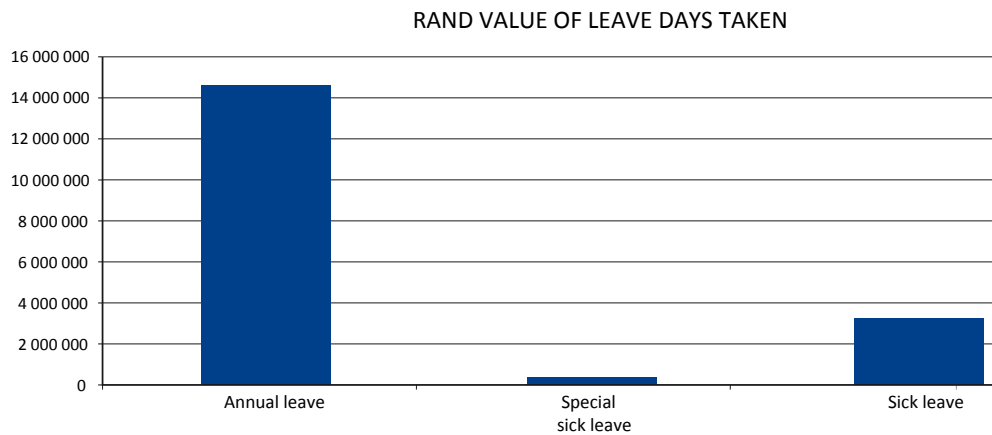
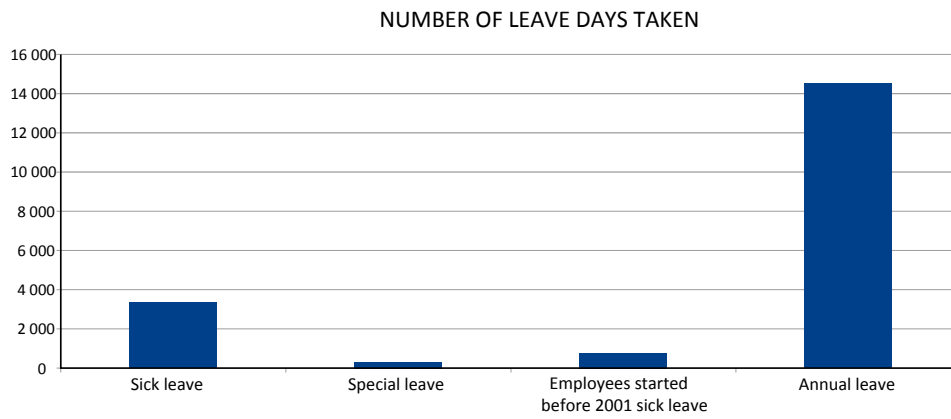
In view of the proposed amendments to labour legislation, HCMD is monitoring its progress, which could have an impact on some of the MRC's policies and practices, for example, contract employment. Finally, the MRC anticipates that employees may wish to join a union, ultimately negotiating a recognition agreement with management. A trained task team (including EMC members) is ready to deal with this challenge.

Job evaluation, benchmarking and remuneration: Most jobs in the MRC now have a formal job description, and the majority have been properly evaluated and benchmarked via the MRC's newly introduced job-evaluation system. Managers are now given feedback on the results, with an opportunity to revisit results if dissatisfied. Once all the results are validated, they will be used for salary benchmarking

and career advancement. In addition, HCMD is in the final stage of standardising job criteria per job category and level, which will be used as a further guide for career development and growth. This process included the participation of all relevant stakeholders.

From a remuneration point of view, the MRC still experiences problems in remaining competitive with the external environment, and preventing employees being poached. Clinicians, clinical trial nurses and biostatisticians are some of the examples. The MRC's remuneration structure is currently under review, and a revised proposal will be submitted to the Board, based on market comparison information. The revised structure will allow for a flexible approach regarding remuneration in order to cater for scarcity and strategically important positions.

Leave management: HCMD is well prepared for the final roll out of the electronic employee leave self-service system to all staff. This will occur once the consultants have confirmed that the HR system is compatible with the new system software. It is anticipated that all staff will be using the new system by the end of 2011.



3. Performance management system

In 2010/2011, as well as coordinating and driving the performance management system of the MRC, the Performance Management Office has driven a number of projects aimed at changing how the MRC conducts its business. Some of these changes have been quite challenging for the staff. As expected, if change is not well managed, it could lead to unintended consequences. It is for this reason that the Performance Management Office took charge of the change management and worked closely with the various project teams that introduced these changes, in order to alleviate the challenges experienced during the transition process and ensure improved performance. The Executive team went through change management

training, after which, a group of agents who were to drive change management within MRC was also sent on training.

Adding change management to the Performance Management Office will help strengthen performance within the MRC, as some of the interventions are not only intended to transform the way it conducts business but also enhance performance. Some of these interventions have been the introduction of supply chain management, JDE upgrade, measuring outcomes as well as outputs in performance management, and setting directorate performance targets versus only focusing on individual targets. These projects are just some of the highlights that were facilitated and coordinated by the Performance Management Office.

MRC CONFERENCE CENTRE AND EVENT MANAGEMENT OFFICE

Division Manager: Ms Mandy Salamo

The vision of the MRC Conference Centre and Event Management Office is to provide a one-stop health event management service to MRC researchers, health managers, community groups and the health industry in support of the MRC strategy through the following actions:

- Better management and utilisation of the MRC conference centre
- Planning and managing conferences, seminars, workshops and exhibitions
- Planning and managing corporate and staff events
- Managing catering for all events
- Managing a business centre for use by visitors and delegates

With only two permanent staff and seven contract staff, the Centre continues to successfully promote and maintain the MRC's branding while at the same time promoting the MRC to its stakeholders by hosting world-class events. Examples of events held during the reporting period include the:

- first SA Telemedicine Conference
- Annual MRC Research Day
- SA Dental Association Conference and AGM
- SA Radiography Association Seminar.

Although faced with several challenges, the Centre managed to raise sufficient funds to upgrade and maintain its facilities. It is envisaged that the Centre will soon boast a lapa, which will allow the facility to compete with big event brands within the country in terms of delegate numbers. Once completed, the facility will be able to host and manage events on site comprising in excess of 500 delegates per event. Events of this nature are currently outsourced to external facilities due to space constraints. This addition will contribute towards the Centre becoming a facility of choice due to its services, size and expertise.

The Centre is a registered member of the South African Accredited Conference Industry (SAACI) and is a member of Trade World. The venues are also advertised on www.sa.venue.com.

The Event Management Office is responsible for managing conferences, seminars, workshops, training and functions for external clients, MRC research units and MRC corporate divisions. The Centre manages national events for all the MRC regions, ranging from small workshops and functions consisting of less than ten people, to very large international conferences that comprise in excess of 1 000 delegates.

The Event Office has been awarded the contract of Secretariat for the Public Health Association of South Africa (PHASA), after facilitating five PHASA conferences to date. We have also facilitated four research days and will be continuing with the fifth for 2011. In addition, we successfully hosted the ISCB Africa ASBCB Conference on Bioinformatics and the 2011 Joint AfSHG and SASHG Conference. Going forward, the Conference and Event Office will become more proactive in event management business development. The following actions are proposed:

- Initiate a high-level interaction with the DoH and DST to offer the Centre as a preferred Western Cape conference and meeting venue for these two key stakeholders of the MRC
- Re-establish links with the universities
- Establish the MRC membership of the Western Cape Business Chamber
- Develop appropriate marketing material

SAFETY, HEALTH AND ENVIRONMENT

Ms Aragea Holland-Fredericks

The MRC strives to comply with all Safety, Health and Environment (SHE) related statutory and funder requirements. In this reporting period, SHE management was included as part of Enterprise Risk Management. Policies and procedures were implemented and continuous improvements were made to ensure that employees work in a safe and healthy environment for facilitation of optimal wellbeing and performance