

Research evaluation



Infection, Antimicrobials, Modelling, Evolution (IAME)

UNDER THE SUPERVISION OF THE FOLLOWING INSTITUTIONS AND RESEARCH BODIES:

Université Paris Diderot Institut National de la Santé et de la Recherche Médicale - INSERM Université Paris 13 Centre National pour la Recherche Scientifique - CNRS

EVALUATION CAMPAIGN 2017-2018GROUP D



In the name of Hcéres¹:

Michel Cosnard, President

In the name of the expert committee²:

Edward Feil, Chairman of the committee

Under the decree No.2014-1365 dated 14 November 2014,

¹ The president of Hcéres "countersigns the evaluation reports set up by the expert committees and signed by their chairman." (Article 8, paragraph 5);

² The evaluation reports "are signed by the chairman of the expert committee". (Article 11, paragraph 2).



This report is the sole result of the unit's evaluation by the expert committee, the composition of which is specified below. The assessments contained herein are the expression of an independent and collegial reviewing by the committee.

UNIT PRESENTATION

Unit name: Infection, Antimicrobials, Modelling, Evolution

Unit acronym: IAME

Requested label:

Application type: Renewal

Current number:

Head of the unit

(2017-2018):

Mr Erick DENAMUR

Project leader

(2019-2023):

Mr Erick DENAMUR

Number of teams or themes: 5

COMMITTEE MEMBERS

Chair: Mr Edward Fell, University of Bath, UK

Experts: Mr Ahmadou Alioum, Université de Bordeaux

Ms Sandrine Chabas, Université de Bordeaux-Inserm (supporting personnel)

Mr Alain Doglio, CHU de Nice-Hôpital Pasteur (representative of INSERM

CSSI

Mr Bruno Lacarelle, CHU Marseille Timone

Mr Pascal Poignard, CHU de Grenoble (representative of CNU)

Mr Fabrice VAVRE, Université de Lyon (representative of CNRS)

HCERES scientific officer:

Mr Théophile Ohlmann

Representatives of supervising institutions and bodies:

Ms Corinne ALBERTI, INSERM

Mr François Cremieux, Hôpital Bichat

Mr Jean-Luc Dumas, Université Paris 13



Mr Pierre Gressens, Université Paris Diderot

Martine Hossaert, CNRS

Laurence LOMME, INSERM

Anne PELLÉ, Université Paris 13

Matthieu Resche-Rigon, Université Paris Diderot

Philippe Ruszniewski, Université Paris Diderot



INTRODUCTION

HISTORY AND GEOGRAPHICAL LOCATION OF THE UNIT

The IAME unit was formed in 2014 from a merger of two INSERM units. It is affiliated to two universities, Paris Diderot and Paris 13 and is located in the Bichat campus in the north of Paris.

MANAGEMENT TEAM

The director is Mr Erick Denamur, and the deputy director is Ms France Mentre.

HCERES NOMENCLATURE

SVE3

SCIENTIFIC DOMAIN

The focus of IAME is the epidemiology and evolution of bacterial and viral pathogens, with a strong focus on antimicrobial resistance.

UNIT WORKFORCE

Unit workforce	Number 30/06/2017	Number 01/01/2019	
Permanent staff			
Full professors and similar positions	22	22	
Assistant professors and similar positions	15	17	
Full time research directors (Directeurs de recherche) and similar positions	1	1	
Full time research associates (Chargés de recherche) and similar positions	4	6	
Other scientists ("Conservateurs, cadres scientifiques des EPIC, fondations, industries, etc.")	0	0	
High school teachers	0	0	
Supporting personnel (ITAs, BIATSSs and others, notably of EPICs)	29(11 ITAs, 18 clinical support)	29	
TOTAL permanent staff	71	75	
Non-permanent staff			
Non-permanent professors and associate professors, including emeritus	15		



Non-permanent full time scientists, including emeritus, post-docs	5	
Non-permanent supporting personnel	21	
PhD Students	32	
TOTAL non-permanent staff	73	
TOTAL unit	144	

GLOBAL ASSESSMENT OF THE UNIT

The greatest strength of the IAME unit is the outstanding quality of the scientific output. All five teams are headed by experts of high international repute, and there is no doubt this standard of excellence is reflected in all team members, including the young researchers. The unit therefore represents a highly valuable incubator in producing the next generation of world class scientists in the critically important field of infectious disease management, intersecting with basic evolutionary science.

The output of the unit has strong real-world impact, and there is clear evidence of close collaboration with industry and policy makers. The organisation of the teams and unit as a whole is also generally excellent, and there is a very positive atmosphere and team spirit. There is an effective management structure and regular meetings at all levels. There is clear evidence of training and support for PhD students. The organisation of this unit provides a unique opportunity for synergy between disparate disciplines. There are numerous examples of successful long-standing collaborations, and a synthetic approach is evident in the future strategies of the unit. Each team will clearly continue to be successful in developing their own fields of expertise, and continued cross-hybridisation of ideas and perspectives will help the unit to consolidate a coherent identity in the future.

There are few areas with potential room for improvement. Perhaps a greater emphasis should be made on PhD recruitment, particularly from fundamental sciences rather than clinical fields. Greater internationalisation and global visibility should also be a priority. There is a recognised need for more core or permanent staff in the unit particularly with respect to basic sciences, which would facilitate a more solid foundation for the overall growth of the unit in future years.

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