

Research Capability Funding (RCF)

Responsive call

Guidance for Applicants



Research and Evidence Team

NIHR Research Capability Funding (RCF)

Responsive Call

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The Responsive call

The Responsive call is now **always open**, with reviews happening 4 times per year.

There are two “types” of Research Capability Funding (RCF) on offer in our Responsive call.

Type 1 RCF can be used to investigate an area, in order to co-develop a specific research question.

Type 2 RCF can be used to develop a specific research question into an NIHR grant application (unfortunately this does not include Fellowships).

The aim of having two types is to:

- Encourage true co-design of research, with academics, practitioners, PPI and commissioners co-developing research plans.
- Reduce the administrative burden on RCF applicants and reviewers.
- Increase our support to RCF recipients.

Type 1 RCF

The expectations on recipients of Type 1 awards will be to meet with relevant people (academics, practitioners, service managers, PPI and commissioners) to **co-develop** their research priorities and plans. It is expected that the plans developed within a Type 1 RCF award will be submitted as Type 2 application at a following RCF call.

Type 1 involves a short form, with applicants asked:

- to explain the area of health they wish to research
- and to **justify why their chosen area is worthy of RCF investment from the CCG**

Successful applicants will be awarded a set amount of £3,000.00.

Type 2 RCF

The expectations on recipients of Type 2 awards will be to write and submit a research grant application to the NIHR. In order to make an idea into a strong and viable grant application, some preliminary work may be required, and we call this “pump-priming”. This may include



small amounts of local NHS data collection, interviews, PPI, stakeholder meetings and workshops with collaborators.

Type 2 RCF has a longer form (but still shorter than our previous RCF forms) with applicants asked to explain:

- their research question(s),
- their proposed methods,
- the intended impact of the research,
- how the method chosen is the best way to achieve the **intended impact of the research**, and
- what “pump-priming” work is required before an application to the NIHR will be viable.

The panel have a limited budget, and so it needs to be made very clear that grant application would not be viable without the pump-priming work. The panel are only able to recommend funding pump-priming activities that are necessary for the grant application.

Review

Our aim is to ensure that NIHR submissions are as good as they can be. We have designed a staged RCF review process to assess applications in order to focus reviewers according to their area of expertise.

The panel consists of members of the Research & Evidence Senior Team, the CCG’s Research Finance Officer, relevant Commissioners, PPI representative, Bristol Health Partners representative, Research Design Service and representatives from the University of Bristol and the University of the West of England (UWE).

Our aim is to accept applications throughout the year and review them on quarterly bases.

Because our review process is staggered, it takes 7 weeks between the deadline and the outcomes.



Eligibility

Applications will be eligible if all criteria below are met:

- the lead applicant must be NHS, Public Health or HEI staff
- the project must be in the area of Primary Care, Public Health, Community Healthcare and/or Integrated Care Systems.
- The plan is to develop ideas into a NIHR grant application (not a fellowship) that will be appropriate for submission through NHS Bristol, North Somerset and South Gloucestershire CCG.

Collaborative applications are encouraged, and in particular those that include University partners, with NHS partners and/or the wider health community including public health, and patients.

Applications should clearly demonstrate the **need** for the research, why **research** is the best means of proceeding at this stage (as opposed to implementation with evaluation), and the potential impact for the NHS. We encourage applications which demonstrate that the patient perspective is a priority.

This scheme is not intended to support the writing of NIHR fellowship applications.

Please contact The Research and Evidence Team directly if you need support for a fellowship application.

Context of RCF

NIHR Research Capability Funding is a research funding stream made available by the National Institute of Health Research (NIHR) to help research-active NHS organisations attract, develop and retain high-quality research, clinical and support staff.

The Bristol North Somerset and South Gloucestershire CCG Research and Evidence Team (R&E Team) manage the competition for funding.

The R&E Team's RCF can be used to free up time to prepare an NIHR Grant Application, or for Pump-Priming work to generate preliminary data which will support an NIHR Grant Application.

This scheme will not fund activities that **will not directly contribute** towards an NIHR grant application.



Constraints on award

Timing

The NIHR RCF is intended to be used within the financial year in which it is issued. Therefore, we can only consider applications for funding to support work which will start within the 2020/21 financial year (i.e. starting prior to 31st March 2020). The work does not need to have concluded within this same financial year.

Award amount

We do not have an upper limit on the amount of money that can be applied for. This is because different people cost different amounts to do the same amount of work. Our limit is instead on the time applied for. This RCF scheme is not intended to fund a person for more than 12 months, and generally 0.4 FTE (2 days a week) would be deemed an upper limit.

However, the amount of time must be proportionate to the work you intend to undertake. We would generally expect that a day a week for 6 months would be reasonable for writing an application to the RfPB. Larger, more complicated applications may require more time. Pump-priming projects can reasonably be up to 2 days a week for 6–9 months.

If you think you require more time than this, then RCF may not be the appropriate funding stream for what you want to do. However, RCF may be able to support you to bid for larger amounts of money from the NIHR to do the work you are planning.

Transparency

The spending of government funds must be transparent, and we promote and encourage genuine collaboration and sharing of information. In line with this, all RCF applicants agree upon submission that if their application is awarded, their name, job title, place of work and the Plain English Summary section of their application can be published on the BNSSG CCG website in order to demonstrate RCF applications approved by the panel. The intention of this sharing is so that other potential applicants can learn what is within the RCF remit, and so that potential collaborators may see what work is going on locally. If you have special circumstances which would make such a publication difficult, please indicate this clearly when submitting your application.

We will not share the details of unsuccessful applications, but in order to help future applicants, we do publish a list of reasons for rejection provided by the panel.

Please do refer to this list before considering applying for RCF.

<https://bnssgccg.nhs.uk/library/examples-projects-not-suitable-research-capability-funding-rcf/>



Project Reporting and Performance Management

All projects funded through this call will be supported and monitored by the R&E Team. The R&E Team have the right to withdraw or curtail funding if progress is not satisfactory.

A member of the R&E Team will contact each recipient of RCF to agree a plan of progress with, if appropriate, performance indicators which will signify success for their RCF funded work.

At the end of each financial year, a report will be required of each recipient of RCF. This information will contribute to the CCG's report to the DH&SC on all of our RCF spend.

All RCF recipients will also be required to produce a final report at the end of their funding.

All NIHR grant applications resulting from work funded by this scheme **must be submitted with NHS Bristol, North Somerset and South Gloucestershire CCG named as grant "Host"**.

Work funded by CCG RCF should start within 3 months of notification, and if the project has not started within 6 months, funding may be withdrawn.

Applicants must seek input from the Research Design Service, or from a registered Clinical Trials Unit (as appropriate) to support their research design (post award of RCF, not prior to your RCF application).

Recipients of RCF will be contacted regularly to review progress and for the R&E Team to provide you with support. The R&E Team are here to help ensure applications submitted to the NIHR are of the highest possible quality. We collate feedback from the NIHR on previous applications to help improve future submissions, and would also value your feedback on what would be helpful to other recipients in future.

You can contact the R&E Team at any time if you have any queries, or would like some support with any aspect of preparing a grant application. We encourage all RCF recipients to contact us as soon as there is a query or issue. Because we work on so many grant applications, the query or issue is often something we have dealt with several times previously.

Our main aim is to help make your NIHR application as good as it can be.



Sharing expertise and Collaborating

NHS Bristol, North Somerset and South Gloucestershire CCG is committed to the production of research relevant to health and social care.

As part of our ongoing drive to increase collaborations between researchers and healthcare professionals, a condition of acceptance of all RCF awards is that applicants will be willing to spend up to 6 hours over the lifetime of the award, or up to 12 months post-completion of the award, working closely with commissioners.

This may take the form of:

- offering general advice,
- inputting research evidence into business cases,
- delivering presentations, such as a CCG lunchtime seminar,
- meeting with commissioners to discuss their interests, or
- suggesting possible evaluation approaches.

You will be contacted by the R&E Team if commissioners indicate to the R&E Team that your skills and experience would be useful in this way.



Deadlines

Electronic submission of form (email attachment) to bnssg.research@nhs.net will be accepted throughout the year.

We will acknowledge receipt of your email.

Applications submitted by	5pm, Friday 17 January 2020
Assessment of Applications	20 January – 21 February 2020
All applicants receive application outcome by	28 February 2020
Applications submitted by	5pm, Friday 17 April 2020
Assessment of Applications	20 April – 22 May 2020
All applicants receive application outcome by	29 May 2020
Applications submitted by	5pm, Friday 17 July 2020
Assessment of Applications	20 July – 24 August 2020
All applicants receive application outcome by	31 August 2020
Applications submitted by	5pm, Friday 16 October 2020
Assessment of Applications	19 October – 27 November 2020
All applicants receive application outcome by	4 December 2020



Contacts

We are always happy to speak through any questions applicants may have. Please phone or email the BNSSG CCG Research & Evidence Team, contacts below:

 Bristol, North Somerset and South Gloucestershire Clinical Commissioning Group	Paul Roy 0117 984 1673 paul.roy@nhs.net
 University of BRISTOL	Paul Roy 0117 984 1673 paul.roy@nhs.net
 UWE Bristol University of the West of England	Alison Diaper 0117 32 83234 alison.diaper@uwe.ac.uk alison.diaper@nhs.net



FAQs

I already know what research question I want to investigate. Can I apply for a Type 2 without having received a Type 1 award?

Yes: Applicants can submit a joint Type 1 and Type 2 submission if they have already identified a specific question to investigate. However, the panel are charged with supporting research which is co-developed with NHS and/or Public Health colleagues and with strong PPI. Applicants who choose to opt out of the co-development period (Type 1) will have to demonstrate strong collaboration between healthcare and academic partners. Both forms will need to be submitted at once.

I have developed several ideas from a Type 1 award. Can I submit more than one Type 2 application from a single Type 1 award?

Yes absolutely: We hope that Type 1 awards will identify several research questions. We will be open to receiving as many as the applicant wishes to submit. If there are a high number of ideas, it would be wise to prioritise with the collaborators as the limiting factor will be the applicants' time available to dedicate to writing NIHR applications. We are happy to help prioritise if you would like our input on this.

Can I defer a Type 2 application from a Type 1 award?

The intention is that each recipient of a Type 1 award will submit at least one Type 2 application at an upcoming RCF call e.g. If a Type 1 application is awarded in Spring, a Type 2 application would be anticipated in that Autumn. However, should several potential research ideas develop from a Type 1 award, we would have an open door policy, and welcome further Type 2 applications at any/all subsequent RCF calls.

Do I need to have completed a fEC at my University before submitting an RCF application?

Ideally yes, although we appreciate that this is not always possible. For Type 1 there will be a set amount awarded (£3,000.00), so an approved fEC is not mandatory for us at submission (though it may be mandatory for your institution) as we know how much money you are seeking. For Type 2 applications, an approved fEC is desirable (again, this may be mandatory for your institution), but a print out/report from a pre-approved fEC will suffice for our needs.

You will have to submit an approved fEC before the University can raise an invoice for your award.

What are the panel looking for in a Type 1 application?

The panel are looking to invest in developing research in **areas of importance to the healthcare system**. All areas of healthcare are important to those affected by the particular condition, as a health commissioning organisation, we need to be convinced that the topic area:



- is of strategic importance i.e. a published priority of Healthier Together (BNSSG Sustainability and Transformation Partnership), NHS England, Bristol, North Somerset and South Gloucestershire CCG and/or Public Health.
- has clear potential to increase health **within** existing budgets, and/or
- has clear potential to reduce spending within the health system without decreasing patient outcomes and/or experience.

What are the panel looking for in a Type 2 application?

The panel are looking to invest in projects which:

- are within the remit of an NIHR funding stream
- have a strong chance of securing NIHR funding (e.g. appropriate Chief Investigator, viable project, will produce useful evidence)
- make a convincing case that they will be feasible
- have genuine **co-development** in a) identifying problems, b) generating potential solutions, and c) planning the research methodology
- will produce results of real value to the users of evidence within the healthcare system. Factors which will be considered include the timing of the delivery of the results (will the issue still be an issue when the final report is published?); balance of robust vs pragmatic approaches; outcomes which are meaningful to the evidence users.

Do I need to submit both a Type 1 and 2 application for a Type 2 submission?

No. This was the case with our first two rounds of our revised RCF format (in 2019) but following feedback we amalgamated questions so that you only need to complete 1 form per submission: either a Type 1 or Type 2 application form.

