



News

from the NIHR Research Design
Service for the East Midlands

November 2011

Navigating NIHR funding opportunities

The National Institute for Health Research (NIHR) is the major provider of funding for applied health and social care research within the NHS, providing £210M in research grants in 2010 – 2011, and an additional £80M in research support to members of the NIHR faculty. The majority of this funding was allocated via a portfolio of competitive research funding programmes which anyone working in, or alongside, the NHS might apply to. The following questions may help you to navigate this portfolio more effectively, and might help you to identify where best to seek funding for your own research ideas.

- Is personal development your key driver for becoming more research active?
- Is clinical development your key driver for becoming more research active?
- Is clinical/service evaluation the key driver for becoming more research active?

Research for Personal Development

The NIHR Trainees Coordinating Centre (NIHRTCC) administers a number of programmes which support the development of the current and future health services and clinical research community ...

- I am new to research and need to develop my skills and qualifications in research

For those who are new to research further education or training may be the most sensible first step and the NIHRTCC supports Masters level study via a number of mechanisms, Inc. In-Practice Fellowships targeted to doctors and dentists, and dedicated programmes in health economics and medical statistics. For those with some research experience doctoral study might be a more attractive proposition, and funding for doctoral study is provided within the NIHRTCC Fellowship Programme, Clinical Academic Training Programme, and the Healthcare Scientist Programme.

- I am an early career researcher

Post doctoral funding for those at the outset of their research career can have either a more clinical or more academic feel with both NIHR Post-Doctoral Fellowship and NIHR/CNO Clinical Lectureship programmes within the NIHRTCC.

- I am a senior researcher

To complete the NIHRTCC Research Career Pathway awards targeted at more established researchers include: Career Development

Fellowships, Senior Research Fellowships, Senior Academic Clinical Lectureships and Clinician Scientists. NIHR Research Professorships are the most recent addition to this career pathway, and alongside NIHR Senior Investigators these are intended to recognise and reward national and international research leaders.

Research to Support Clinical/Service Development

For research which has the potential to influence the delivery of healthcare to patients within the NHS, the NIHR provides research funding at all stages of clinical/service development – from developing new interventions, to piloting them in clinical settings and evaluating them in operation.

- What is the current evidence base for my proposed clinical/service idea?

The majority of NIHR funding programmes will support evidence synthesis studies, including the Health Technology Assessment (HTA), Service Delivery and Organisation (SDO), Health Services Research (HSR) and Public Health Research (PHR) programmes. It should be noted that such research is often specifically commissioned, rather than researcher led. Evidence synthesis may also be supported within a Programme Development Grant (PDG), although this needs to be linked (eventually if not immediately) to other primary research and will not be funded in isolation.

- Can my idea work? Does my idea work?

Most NIHR research grants are for later-phase research only, i.e. where the basic science has already been established. However, both the Efficacy and Mechanism Evaluation (EME) and Innovation for Invention (i4i) programmes will support research at an earlier stage. EME grants support research to establish the clinical efficacy of a new intervention; i4i Early Stage awards enable research into the feasibility of a new healthcare technology, and potentially lead to a working prototype.

- Can it work in the NHS – acceptable and feasible?

Smaller studies which seek to establish whether an innovation is acceptable and feasible within the NHS, or which pilot a larger proposed research study might be supported within the Research for Patient Benefit (RfPB) programme. Such feasibility or pilot research might also fall within the remit of the HTA programme should the topic be appropriate.

Continued on page 2

- Can it work in the NHS – clinically effective? Is it worth it? Is it both clinically and cost effectively viable within the NHS?

For larger, definitive trials to establish clinical effectiveness the HTA programme is perhaps the most obvious funding stream to consider. This is the NIHR's largest and longest-running funding competition: it emphasises application within the NHS, and cost effectiveness is consequently an important element of any funded study. Smaller, single site studies of clinical effectiveness may be funded within the RfPB programme, although maximum funding of £250K limits what might be proposed within this competition.

Studies of clinical effectiveness might also be incorporated within a larger Programme Grant for Applied Research (PGfAR).

Research to Support Clinical/Service Evaluation

As well as providing research funding to support the development of new ways of working, the NIHR also supports evaluation research to generate evidence about distinctive or innovative practice which is already in operation within the NHS.

- Is my way of working effective?

For many clinicians a key motivator for undertaking research is to demonstrate that how they work is effective, and to generate an evidence base which might support the further adoption of a distinctive or innovative way of working. Whilst routine clinical or service evaluation is not funded by the NIHR, funding programmes such as HSR, PHR and SDO may well support evaluation research of distinctive or innovative clinical practice or service delivery, especially when it falls within a designated priority area.

Such evaluation research may also be incorporated into a PGfAR study.

- Can my way of working be implemented elsewhere?

Whilst the diffusion of research findings into clinical practice is the remit of the NIHR CLARHCs, proposals for the broader implementation of practice are likely to be incorporated into i4i Late Stage applications (where business plans for getting a 'product to market' are integral to the research plan); and may well be incorporated into a PGfAR study where the findings of an early stage study may be implemented in new and different settings.

Closing Comments

In the name of brevity this piece has significantly abridged the range, scope and eligibility criteria of the funding programmes supported by the NIHR. Consequently what is presented here should be considered to be a starting point for identifying funding, and not a definitive indicator of the right avenue to pursue. More information about each funding competition can be found via <http://www.nihr.ac.uk/research>

For more details see the website
<http://www.rds-eastmidlands.nihr.ac.uk>

For general enquiries contact:
enquiries-lnr@rds-eastmidlands.org.uk
Tel: 0116 252 3276 for Leicester (covering Leicestershire, Northamptonshire and Rutland)

enquiries-ndl@rds-eastmidlands.org.uk
Tel: 0115 823 0500 for Nottingham (covering Nottinghamshire, Derbyshire and Lincolnshire)

Patient and Public Involvement (PPI) Clinics

new from Oct 2011

Are you developing a bid for applied health research?

If so, you will know that most research funders require that people potentially affected by the conduct of the findings of research have a say in its design and delivery. Achieving this can present challenges and so the Research Design Service for the East Midlands is offering a number of workshops for those who are actively working on a research bid and want to enhance patient and public involvement (PPI).

Workshop description

The PPI workshops are designed to help researchers to plan meaningful and appropriate PPI in their research proposals in order to improve the overall quality of a bid. They will give the researchers an opportunity to consider PPI during bid development and beyond, helping researchers capture this within their applications. The session will include a combination of information-giving and group discussion. Each session will last three hours and will have a maximum attendance of eight people.

Learning objectives

1. To learn how the Research Design Service for the East Midlands can support your bid development
2. To learn about the difficulties associated with demonstrating impact of PPI in your research
3. To explore how to incorporate appropriate and meaningful PPI in designing, doing and disseminating your research
4. To learn about research governance procedures and PPI
5. To relate new knowledge about PPI to the requirements of the funding stream
6. To consider the practicalities and challenges of PPI in your research

Nottingham

18 January 2012, 2pm-5pm

Committee Room C7, Kings Meadow Campus,
University of Nottingham, NG7 2NR
To Book: Contact Karen Taylor
karen.taylor@nottingham.ac.uk

Northampton

TBC April 2012, 2pm-5pm

Venue: TBC
To Book: Contact Lotus De Cort
lfa1@leicester.ac.uk

Derby

TBC July 2012, 2pm-5pm

Venue: TBC
To Book: Contact Karen Taylor
karen.taylor@nottingham.ac.uk



Designing economic evaluation as a part of a feasibility study

This article aims to provide researchers with the information that they will need to consider when designing a feasibility study with a health economic component. The NIHR Evaluation, Trials and Studies Coordinating Centre (NETSCC) defines feasibility studies as “pieces of research done before a main study. They are used to estimate important parameters that are needed to design the main study”. A pilot study is defined as “a version of the main study that is run in miniature to test whether the components of the main study can all work together”. This article will help researchers in designing an economic evaluation for a definitive trial. It is important that a feasibility study tests the methods to be used in a future economic evaluation of a randomised controlled trial.

Why do we need to design economic evaluation in a feasibility study for a later fully fledged randomised controlled trial?

Economic evaluation has become an integral part of the research design for Health Technology Assessment submissions. When designing interventions with several dimensions and a range of possible outcomes, it is important to test the practicality and feasibility of economic evaluation for a future multi-centred trial. At the feasibility stage it is important to clearly identify where the intervention will be delivered. It is important to test the feasibility and validity of the data collection instruments in identifying the resources used in a hospital or community setting. In a complex intervention where cost data is collected outside the ordered environment of the hospital, the advantages of data recorded for administrative and clinical purposes may be lacking. Therefore it becomes more imperative to test the different methods of administering the economic evaluation questionnaires to capture the resources used.

The National Institute of Clinical Excellence (NICE) recommends that the value of health effects should be expressed in terms of quality-adjusted life-years (QALYs). These are measured using a generic validated measure which is based upon reliable UK population preference values elicited using a choice based method. Currently a popular method is EQ-5D, a standardised instrument for use as a measure of health outcome. Sometimes EQ-5D might not be appropriate and health-related quality of life will need to be measured using disease-specific instruments. At the feasibility stage it is necessary to test outcome variables for the main study.

What are the necessary data collection tools to be used in a feasibility study?

It is important to identify the feasibility of collecting the total cost to the patient, the health service sector and society. The cost data collection tool needs to be tested at a feasibility stage to identify the patient burden in completing detailed cost questionnaires, and formulating a cost questionnaire, with the right trade-offs that will identify the resources used. The questionnaires need to be tested for their efficiency, simplicity

and effortlessness to ensure their suitability for future economic evaluation. It is important at the feasibility stage to design a patient cost questionnaire by either modifying the case report form or by using a validated cost questionnaire like Client Service Receipt Inventory (CSRI) / annotated cost questionnaire, with appropriate authorisation.

What costs related to the intervention under study, need to be included?

The use of health care resources will be measured using service use questions, patient self report cost, travel cost and any out of pocket expenses. Patients' self reports on health care resource use need to focus on the frequency of visits to GPs, outpatient departments, inpatient stays, accident & emergency visits and any other visits to health professionals. Patient travel time can be recorded as the mode of travel, miles of travel, parking charges and any fares related to travel by public transport. Other out of pocket expenditure includes payment for child care, productivity loss due to time off work and the costs of any over the counter medication.

To conclude, the feasibility study will test the response rates achieved, compliance, perceived effectiveness and levels of missing data associated with the quality of life questionnaire and the patient cost and service use questionnaire.

Ruth Pulikottil Jacob
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NIHR Annual Report

The National Institute for Health Research (NIHR) Annual Report 2010/11 provides an overview of the NIHR's activities and key achievements over the year.

<http://www.nihr.ac.uk/Pages/default.aspx>

Designing Applied Health Research: from Idea to Bid Proposal

This popular event is designed to help in the preparation of bids for funds and will take place in Leicester 25th and 26th January and 22nd February 2012. It will be especially helpful for researchers and clinicians who have some experience of research but have not previously been principal investigators in this type of study. Participants will be expected to submit a research idea prior to the event, and during the first 2 days they will work in small groups to build the sections of a proposal. These workshops will be interspersed with presentations and general discussion of all aspects of applied health research. The third day will provide an opportunity for participants to outline the proposal they have been working on to an invited audience for feedback and further development.

This event will be free of charge to NHS, social care and voluntary sector researchers and their academic partners.

Deadline for applications November 25th. Further details available on the RDS EM website: www.rds-eastmidlands.org.uk/ or contact Claire Burchnall on 0116 252 3276 or email cb269@le.ac.uk



NOTICEBOARD

– NIHR Portfolio Funding Opportunities

National Institute for Health Research Evaluation, Trials and Studies Coordinating Centre (NETSCC) NIHR Public Health Research Programme

Now Tips for success in applying to the PHR programme are available on the website <http://www.phr.nihr.ac.uk/fundingopportunities/>

National Institute for Health Research Evaluation, Trials and Studies Coordinating Centre (NETSCC) Efficacy and Mechanism Evaluation Programme

Although there is no limit to the amount of money you can ask for on one proposal, applicants should be aware that they will be competing for limited funds. There are no fixed limits on the duration of projects or funding, and proposals should be tailored to fully address the problem. However, applicants should balance the pressing need for the information with the need to follow participants up for long enough to measure important outcomes.

Amount of funding available: unspecified

Duration: unspecified

Closing date: 15 November 2011

<http://www.rdfunding.org.uk/queries/ListGrantDetails.asp?GrantID=12453>

NIHR Service Delivery and Organisation programme

11/1024: Innovations in secondary mental health services

The subject for this call is services for people with severe acute and chronic mental health problems who require inpatient or equivalent care. The call focuses on innovations in service delivery in secondary care settings such as hospitals or alternative specialist mental health residential services provided or commissioned by the NHS.

Deadline: 15 December 2011

http://www.sdo.nihr.ac.uk/call101024.html?src=alert_1011

11/1025: Improving clinical productivity

This call is designed to support managers in their pressing task of meeting efficiency targets. There should be a focus on cost-effectiveness studies and, where appropriate, identifying scope for cash-releasing

initiatives in the NHS. Only proposals with a focus on understanding and improving clinical productivity will be considered for this call.

Deadline: 15 December 2011

http://www.sdo.nihr.ac.uk/call111025.html?src=alert_1011

11/1026: Rapid evidence syntheses on efficiencies

This call for evidence syntheses covers a range of topics with a common focus on realising efficiencies in healthcare including three topics with a particular focus on acute care:

- bed management (and improved discharge planning)
- initiatives to reduce length of stay
- efficiencies in outpatient services

Deadline: 15 December 2011

http://www.sdo.nihr.ac.uk/call111026.html?src=alert_1011

NIHR Research for Patient Benefit – competition 17

RfPB does not specify topics for research and encourages proposals for projects covering a wide range of health service issues and challenges. Projects are selected for funding on the basis of the quality of the research proposal and its likely transition into patient benefit locally and for the wider NHS.

The programme supports:

- Studies of the provision and use of NHS services.
- Evaluations of the effectiveness and cost effectiveness of interventions.
- Examination of the resource utilisation of alternative means for healthcare delivery.
- The scrutinising of innovations and developments.
- Pilots or feasibility projects to help reach the next step of a definitive trial.

RfPB particularly welcomes proposals that have benefited from interaction with patients and the public, which relate to patient and service user experience and/or have been drawn up in association with a relevant group of service users.

Amount of funding available: Projects supported will normally have a total maximum cost of £250,000

Duration: up to 36 months

Closing date: 20 January 2012

<http://www.ccf.nihr.ac.uk/RfPB/Pages/home.aspx>

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We are currently updating our database and would appreciate it if you would take the time to enter just your name and email address into our website to indicate whether you wish to continue receiving the newsletter or would prefer to unsubscribe. So log on now at <http://www.rds-eastmidlands.nihr.ac.uk/> – you can enter your name and email address on the left hand side of the home page – it takes seconds and ensures that you will be kept up to date with research support and research activity in the region!

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