

NIHR COCHRANE COLLABORATION PROGRAMME GRANT SCHEME

GUIDELINES FOR APPLICANTS

The NIHR Cochrane Collaboration Programme Grant Scheme was established to provide high quality systematic reviews that will be of direct benefit to users of the NHS in England. **Applications are now invited for a new round of the scheme.**

Grants will be between £140,000 and £420,000 spread over three years (ie up to £140,000 maximum per year), and about 10 grants are likely to be awarded to institutions in England. Grants will be awarded to support a substantial and coherent programme of work that includes both new Cochrane reviews and updating of existing reviews. Applications seeking less than the maximum grant value for smaller programmes of work will be welcome.

Criteria for selection will include scientific quality, NHS relevance and value for money; bids in collaboration with NHS institutions will be favorably regarded.

As well as meeting the costs of research staff and other direct research costs, it will be allowable for up to 20% of any grant to be used as a contribution towards the costs of the editorial base activities of a Cochrane Review Group where these arise in an institution in England.

There will be two deadlines for applications to the new scheme, the first in March 2010 and the second in November 2010 (see 'Deadlines for applications', below).

These notes contain the following sections:

1. Introduction
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1. Introduction

This paper sets out arrangements for a further round of the NIHR Cochrane Collaboration Programme Grant Scheme. The scheme further advances the NHS R&D strategy, *Best Research for Best Health*, and reflects the ongoing support of the NIHR to the work of Cochrane entities in England.

The programme grant scheme will operate in parallel with current arrangements through which the NIHR makes a contribution to the 'infrastructure costs' of NHS organisations and Universities that host the editorial bases of Cochrane Review Groups and the UK Cochrane Centre.

2. Background

NIHR Cochrane Collaboration Programme Grants will provide funding to support the production and updating of Cochrane reviews in areas of priority or need for the NHS. The grants will build on existing Cochrane Collaboration infrastructure, *supplementing* rather than replacing current funding, activities and outputs of The Cochrane Collaboration.

Grants will be up to a maximum of £420,000 over three years (ie up to £140,000 per annum) including full economic costs at 80%. Grants will be awarded to support a coherent programme of work that includes both new Cochrane reviews and updating of existing reviews. Although it is understood that the size and complexity of reviews varies greatly, as an indication, a reasonable work programme (for the maximum level of grant award) might be expected to deliver 20 new reviews¹ and 20 major updates over three years, or their equivalent. Applications seeking less than the maximum level of award to support a smaller programme of work will receive equal consideration.

In order to ensure that the Cochrane reviews undertaken are relevant, with practical application in the NHS, and have the maximum chance of uptake, one of the co-applicants on the grant application is expected to be an NHS clinician or manager with responsibility for clinical service planning or delivery².

In order to ensure that the work of the programme has a strong link to existing Cochrane infrastructure, another co-applicant on the grant application is expected to be a Coordinating Editor of a Cochrane Review Group (CRG) or, where the Coordinating Editor is outside of England, an active England-based Editor of the relevant CRG. Where appropriate, applications could involve more than one CRG or Coordinating Editor/Editor of a CRG.

The programme also provides an opportunity to link those involved in the production of Cochrane reviews with NHS arrangements for promoting clinically and cost effective services. Proposals should indicate how such links would be developed around the programme of work.

3. Review priorities and needs

Whilst Co-ordinating Editors of CRGs, in close liaison with their NHS clinician/manager co-applicant(s), are expected to propose the theme of the programme and selection of reviews, justifying this choice in terms of NHS priorities and needs will be an essential criterion against which applications will be judged. Prioritisation of reviews on the strength of 'gaps in research' alone will not be sufficient. The James Lind Alliance (<http://www.lindalliance.org/>) is structured to assist with prioritisation of topics and you may find it helpful to consult their website.

¹ Some of these reviews could be work already in progress at the time of the award. However, proposals would need to demonstrate the intention to produce a substantial output of reviews as a *direct result of the award*, ie outputs that would not otherwise have been achieved.

² This person could be based, for example, in an NHS provider, a Primary Care Trust, SHA or or national group responsible for developing guidelines or policy.

4. Eligibility to apply

All NHS organisations and Universities in England are eligible to propose programmes, in collaboration with an appropriate Cochrane Co-ordinating Editor or Editor based in England. Where appropriate, bids may be submitted by consortia³ including more than one NHS organisation and/or more than one academic institution that hosts the editorial base of a CRG⁴. No CRG editorial base would be eligible to be party to more than one application.

5. Funding available

Around 10 awards are likely to be funded. Individual awards will be for a maximum of £420,000 over a period of three years (ie a maximum of £140,000 per annum), including full economic costs at 80%.

Eligible costs to which the grant may be applied include:

- a. Research staff.
- b. Other direct research costs essential to delivering the programme.
- c. A contribution to the costs of relevant CRG editorial base(s), where these are in England, up to a maximum of 20% of the total grant⁵.

NHS Service and Treatment Costs and NHS Institutional overheads will not be covered by this scheme.

In all cases, the value for money of the proposal will be an important selection criterion.

The funding requested in the proposal should include relevant salary costs of all researchers to be employed in pursuit of the intended programme of work. Names and relevant details about these researchers should, where possible, be provided.

Funding awarded through the NIHR Cochrane Programme Grant Scheme will be separate from any other NIHR R&D funding received by the NHS organisation⁶.

6. Deadlines for applications

There will be two submission dates for applications, corresponding to two planned award start dates for successful applicants. The first submission date will be 26 March 2010, with awards commencing around 1 August, and the second submission date will be 5 November with awards commencing by 1 April 2011.

³ Where there is a successful bid from a consortium, a lead organisation with whom the NIHR could contract will need to be nominated. Where there is a joint application from the NHS and a University, funding will normally be awarded to the NHS partner. A case should be made if there is a requirement to the contrary.

⁴ It is expected that NHS organisations with well-established links with The Cochrane Collaboration will be best placed to bid for these awards.

⁵ Where the CRG editorial base is outside of England, consideration will be given to requests for such a contribution being made to the department of an England-based active editor of the CRG who is playing a role in the programme of work.

⁶ Applicants for awards will be required to declare any proposed work that has been included in an application for other NIHR Programme Grants or any other grant application.

The reason for providing two application dates is that some of those groups already in receipt of grants from the first round of the programme are not expected to complete their current programmes of work until the end of 2010 or Spring 2011. These groups are advised to consider applying using the second deadline in November 2010 because this will provide the best opportunity for them to demonstrate their full achievements from the first programme grant. All other groups are advised to consider applying using the first deadline in March 2010.

7. Procedures and timetable

NIHR Cochrane Collaboration Programme Grants will be awarded by **open competition**.

The timetable for applications is:

- 28 January 2010: Call opens and guidance issued.
- 26 March 2010: First deadline for receipt of applications
- 1 May 2010: First awards confirmed and commence around 1 August 2010
- 12 November: Second deadline for receipt of applications
- 4 January 2011: Second funding round awards confirmed and commence by 1 April 2011

Any queries relating to this invitation for applications should be directed to Sally Bailey, Senior Programme Manager, NETSCC, at S.E.Bailey@soton.ac.uk.

7. Criteria for funding

The selection criteria against which applications will be assessed are:

- Evidence of **track record** of the applicants and the relevant CRGs in producing and updating high quality Cochrane reviews⁷.
- Evidence of the **relevance** of the proposed Cochrane reviews to the priorities and needs of the NHS in England.
- The **likelihood of significant benefit** to the NHS and patients.
- The **quality** of the proposal.
- Evidence of close **collaboration** with NHS organisations and, where appropriate, other CRGs.
- The **value for money** provided by the proposal.

8. Information to be provided in the application form

Interested NHS organisations or Universities working with relevant Cochrane Coordinating Editors or, where the Coordinating Editor is not based in England, relevant CRG Editor(s) within England, should complete the application form available from NETSCC (please email Sally Bailey - S.E.Bailey@soton.ac.uk).

Information to be provided in the application form will be as follows:

⁷ Groups already in receipt of a programme grant will need to demonstrate clearly what has been achieved and how this corresponds with their original grant proposal.

- Programme title
- Name of the NHS organisation or University making the application (which would administer any award)
- Name and details of CRG(s) relevant to application
- Details of all applicants
- Proposed duration of the programme (in most cases expected to be three years)
- Proposed cost of programme (including overheads or full economic costs at 80%) (**see section 5**)
- Details of the proposed Programme, covering the following areas:
 1. The background to the proposed programme of reviews.
 2. The theme/scope of the programme and proposed reviews.
 3. The importance of the proposed reviews and their relevance to the priorities and needs of the NHS (including a statement of the significance of the research area, eg burden of disease)
 4. A programme plan and explanation of how the award would be used (eg the number of researchers/reviewers to be employed).
 5. The support that would be provided to the programme by the relevant CRG editorial base(s), demonstrating efficient use of existing infrastructure.
 6. The importance of the proposed programme of reviews to the needs and priorities of the NHS.
 7. The way in which the programme would contribute to NHS arrangements for promoting clinically and cost effective services.
 8. How the programme will ensure public involvement.
 9. Arrangements for programme management.
 10. How the programme represents good value for money.
- Evidence of track record in producing and updating high quality Cochrane reviews.

9. The R&D contract and management

Successful applicants will be given a contract by the Department of Health. The contract will be between the Department of Health and the host institution.

Professor Tom Walley, the Director of NIHR Evaluation, Trials and Studies, will direct the Programme. He will be assisted by a scientific panel in assessing proposals and making recommendations to the Department of Health, and in monitoring the progress and performance of awards.

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