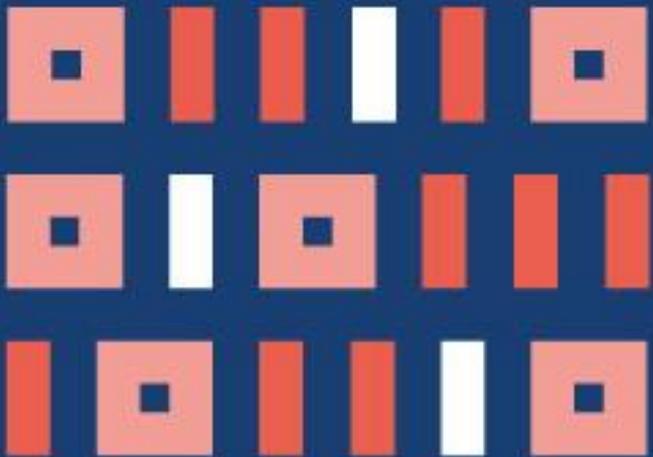




NIHR Research and Innovation for Global Health Transformation (RIGHT)

Call 3 Webinar

22 October 2019



Presenting today

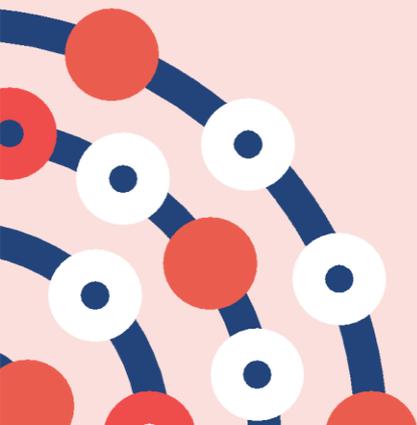
- Laurence Poos, Senior GHR Programme Officer, Department of Health and Social Care
- Dr Mike Rogers- Global Health, NIHR Central Commissioning Facility

Agenda

- Background of NIHR Global Health Research
- The aims and focus of RIGHT Call 3
- Eligibility and scope
- Budget and eligible costs
- Application process
- Selection criteria
- Key dates
- Tips for applying and things to avoid
- Common application queries



UK aid funding and NIHR Global Health Research Programme



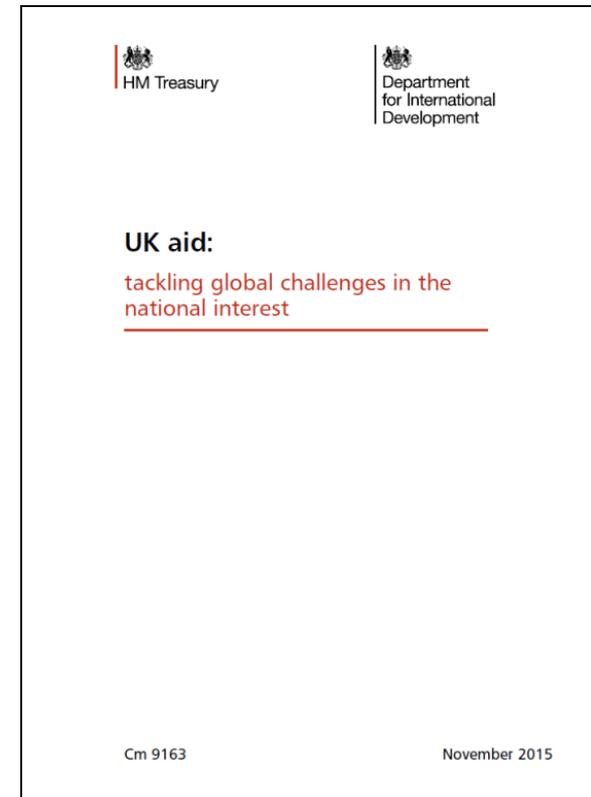
DHSC in the UK aid architecture

2013 - The UK became the only G20 country to achieve the UN target of spending 0.7% of Gross National Income (GNI) as Official Development Assistance (ODA).

2015 UK aid strategy announced a new cross-government approach to aid and 0.7% target enshrined in law

2016-21 Spending review saw redistribution of aid spend across Government Departments:

- Previously 86% of aid spending through the Department for International Development (DFID)
- By 2020 more than 25% of UK aid will be spent outside DFID
- ODA spending by other departments will scale up rapidly over coming years from £1.7b to projected £4b in 2020
- DHSC and BEIS (budgets significantly increased, primarily for development research activities)



DHSC within UK ODA Funding Landscape

DFID

Research and Evidence Division - Health Research Team

UK legally committed to spend 0.7% of UK GNI on international aid (Official Development Assistance, ODA)
DFID is the government department responsible for administering overseas aid and the ODA budget
DFID Research Budget ~£1.86bn – with health research funding total budget £536m

DHSC

NIHR Global Health Research £429.5m

Applied global health research commissioned through the NIHR to improve health in developing countries

- Programmes
- Partnerships
- People

Global Health Security £477m

Programme addressing global threats to public health, such as infectious diseases and drug resistant infections

- Fleming Fund
- Health Regulation Implementation
- Vaccines and Biopreparedness
- Global AMR innovation Fund
- Rapid Support Team

Tobacco Control £15m

Contribution to the FCTC 2030 Project to support tobacco control in developing countries to reduce the burden of death and disease, and make better use of health systems resources

• BEIS

Global Challenges Research Fund

£1.5bn

Challenge-led disciplinary and interdisciplinary research and strengthening research capacity

Delivery partners:

- UK Research Councils / UK Higher Education Funding bodies / National Academies and UK Space Agency

Newton Fund £735m

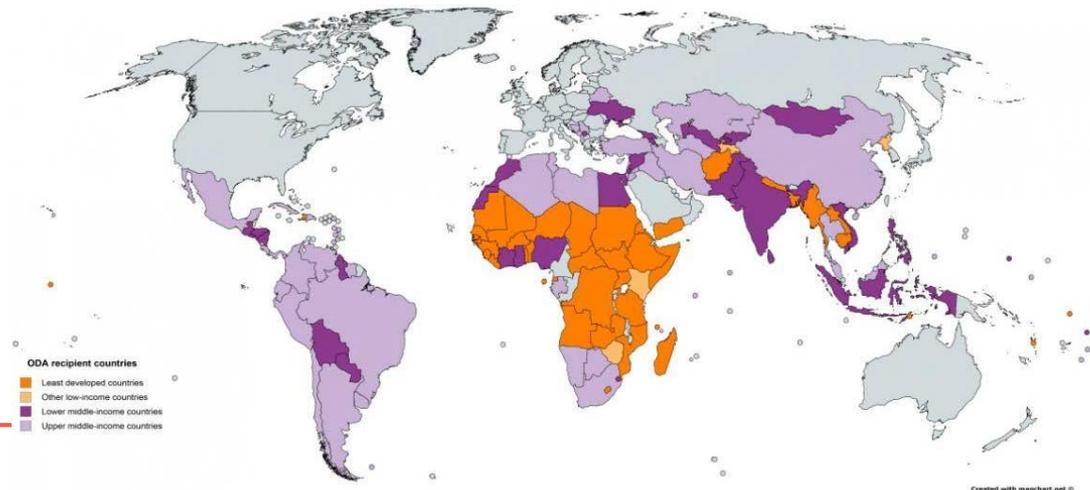
Science and innovation partnerships between UK and 17 mainly middle-income partner countries

Delivery partners:

- UK Research Councils and Innovate UK
- UK Higher Education Funding bodies
- National Academies, Met Office and British Council

Official Development Assistance (ODA) compliance and eligibility:

- Research with direct and primary relevance to improving the health of those in Low and Middle Income Countries (LMICs) as listed on the OECD DAC list
- Must benefit the poorest people within countries on the DAC list (60% of the world's poor live in middle-income countries)
- No disadvantages relating to areas of diversity, such as gender or disability (*according to the International Development Act 2014*)

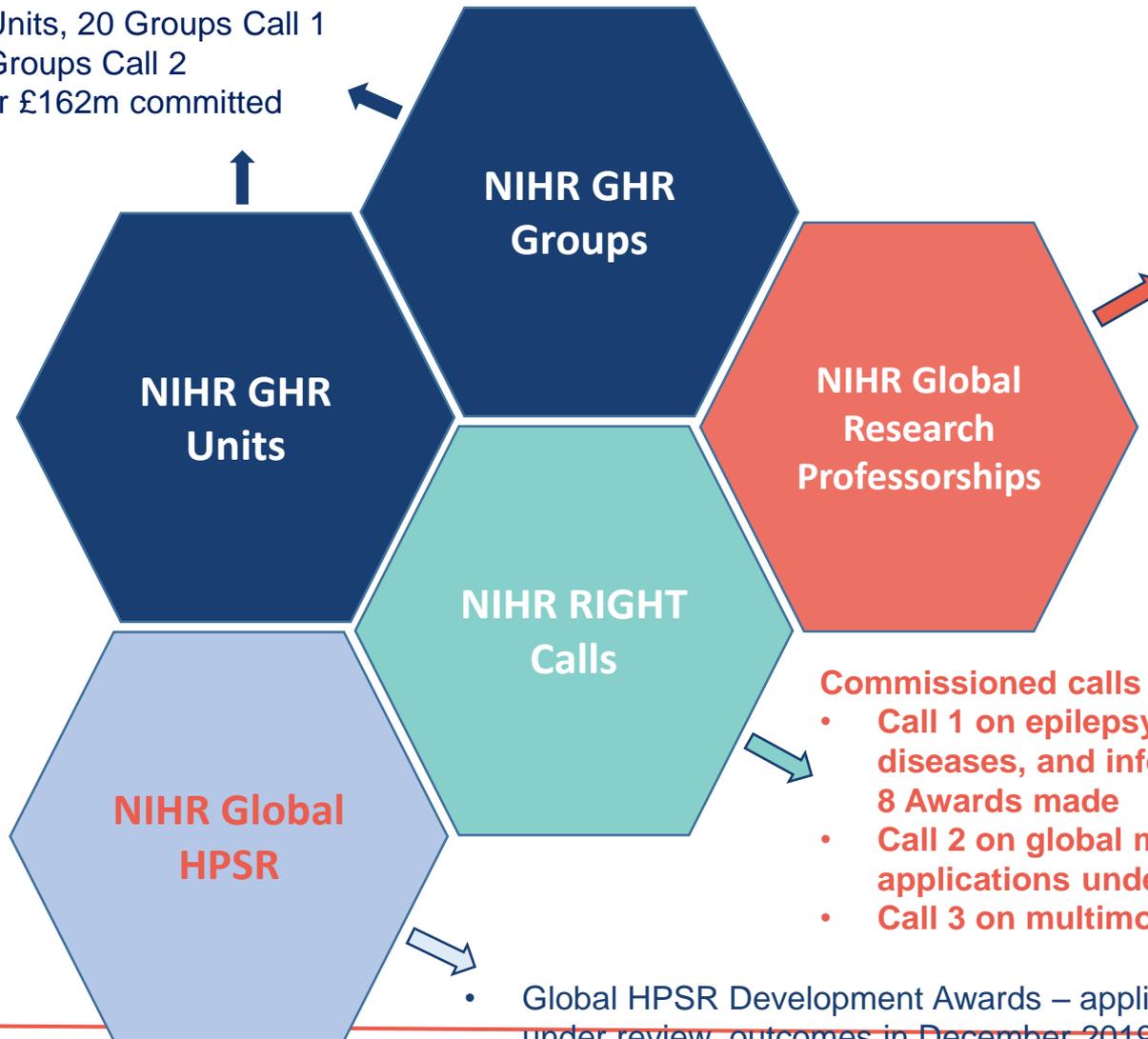


NIHR Global Health Research Portfolio



NIHR Global Health Research (GHR) Programmes

- 13 Units, 20 Groups Call 1
- 20 Groups Call 2
- Over £162m committed



- 3 NIHR Global Research Professorships awarded (through 2 Rounds).
- Round 3 closes 20 November 2020, requires institutional nominations

Commissioned calls in areas of unmet need

- Call 1 on epilepsy, severe stigmatising skin diseases, and infection-related cancers; 8 Awards made
- Call 2 on global mental health, Stage 2 applications under review
- Call 3 on multimorbidity, closes 15 January 2020

- Global HPSR Development Awards – applications under review, outcomes in December 2019
- Global HPSR Commissioned Awards – Call currently open, closes 11 December 2019
- Global HPSR Researcher-led Awards – Call due to open Autumn 2020

RIGHT Call 3 – Aims

- Deliver applied health research for the direct and primary benefit to the health and wealth of people living in **ODA-eligible countries**; through development and evaluation of interventions to improve outcomes for those affected by **multimorbidity**
- Strengthen capacity for research and knowledge exchange through equitable partnerships between researchers in the ODA-eligible countries and the UK
- Promote interdisciplinary approaches to working with expertise and activities associated with a broad range of health-science disciplines

RIGHT Call 3 – Focus

RIGHT Call 3 focuses on **interdisciplinary applied health research in multimorbidity** in the following areas:

- Development and evaluation of interventions and strategies for improved management of multimorbidity, including but not limited to:
 - interventions to prevent stepwise progression of multimorbidity
 - interventions to improve treatment, management and care of patients with infections prevalent in LMICs that have a known association with development or exacerbation of NCD
 - interventions for the treatment and prevention of the development of multimorbidity in children and young adults driven by malnutrition, multiple chronic infections and poverty
 - scalable treatment and care approaches that integrate the management of multimorbidity associated with infection(s) and/or NCD(s)
 - new treatment packages, or new models of care and community-based interventions
- Healthcare systems strengthening in ODA-eligible countries for improved treatments, management and care for multimorbidity

RIGHT Call 3 – Eligibility

For RIGHT funded research

- The research must be focused on improving the health and welfare for the direct and primary benefit of people in ODA-eligible countries
- Must demonstrate how applications meet ODA compliance criteria and outline:
 - Which country or countries on the DAC list will directly benefit?
 - How the application is directly and primarily relevant to the development challenges of those countries?
 - How the outcomes will promote the health and welfare of a country or countries on the DAC list?
- Must have two Joint Lead Applicants, one at an LMIC institution and one at a UK institution.

RIGHT Call 3 – Remit (1)

Key criteria for RIGHT Call 3 funding:

- Research plans build on partnerships between two Joint Lead Applicants and Co-applicants who will form a research team able to support knowledge generation and exchange, strengthen relevant capacity and capability development
- Research plans are based on a review of the local context
- Research draws on an LMIC-led needs analysis
- Clear plans for developing institutional and individual research capacity and capability
- A clear and implementable strategy for pathways to impact

RIGHT Call 3 – Remit (2)

RIGHT **will** support :

- Applications that demonstrate they address the key criteria (previous slide)
- Applied health research of primary and direct benefit to people and patients in ODA-eligible countries
- Interdisciplinary applied research teams with demonstrable expertise and a track-record of ensuring clinical research is transferred into benefits for patients
- Proposals that incorporate research questions around gender, age, social barriers to health, economic impact and equity that demonstrate strong partnerships with ODA-eligible countries
- Applications that demonstrate joint leadership between the LMIC and UK research partners and have clear plans to engage with other relevant partners
- Applications that include relevant engagement with policy makers, patients, the public, civil society organisations, communities and charities
- Applications that include PhD and master's students based in LMICs

RIGHT Call 3 – Remit (3)

RIGHT will **not** support:

- Applications not clearly relevant to multimorbidity in an LMIC setting/context and are not based on research priorities identified in LMIC partner countries
- Applications not including two Joint Lead Applicants (one LMIC-based and one UK-based)
- Applications with a focus on basic/discovery research or experimental medicine
- Costs to establish and maintain new biobanks and bio-sample collections
- Applications consisting solely of epidemiological studies
- Applications consisting solely of evaluations of existing services, where the programme of work does not include evidence-based development and improvement of these services
- Applications solely comprising a single Randomised Controlled Trial (RCT)
- Applications that solely replicate research already undertaken in High-Income Countries – research proposals should be clearly relevant to the ODA-eligible country
- Applications that primarily focus on observational research, secondary research or health policy implementation

Budgets and eligible costs

- Awards, typical range £1-5 million (max. £5M) over 3-4 years for ODA-eligible research, starting between January 2021 and April 2021.
- Eligible costs for NIHR RIGHT Call 3 include:
 - Research staff engaged in relevant research
 - Research support staff supporting relevant research
 - Travel, subsistence, meetings, conferences
 - Equipment
 - Consumables
 - Community engagement and involvement
 - Dissemination, including open access publication costs
 - Risk management and assurance
 - External intervention costs
 - Non-pay research costs
 - Other legitimate and reasonable indirect costs (e.g. HR, finance)

Ineligible costs

- Ineligible costs for NIHR RIGHT Call 3 include:
 - any costs that cannot be categorised as ODA
 - lobbying, government or political activity; attempting to influence legislative or regulatory action
 - First and Business-class travel and Per diem costs for travel and subsistence
 - entertaining (i.e. anything that would be a taxable benefit to the person being entertained, according to current UK tax regulations)
 - costs of basic/discovery research; work not predominantly and directly relevant to the needs of LMICs
 - routine clinical treatment and support costs ('Treatment and Support Cost')
 - NHS Equipment costs
 - costs to establish and maintain new biobanks and bio-sample
 - Indirect Costs for HIC-based international organisations
 - Contingency, including inflation or foreign exchange rate contingency
 - Liabilities incurred before the issue of the funding agreement unless agreed by DHSC

ODA Compliance

Applications must demonstrate how the proposal meets key ODA funding requirements. They should address the following questions:

- which country(ies) on the Organisation for Economic Cooperation and Development's (OECD) Development Assistance Committee (DAC) list of ODA-eligible countries will directly benefit;
- how the application is directly and primarily relevant to the development challenges of those countries;

and

- how the outcomes will promote the health and welfare of people in the country or countries on the DAC list.

Ensuring ODA Compliance

- Robust governance and oversight
- Effective programme management
- Robust financial and risk management
- Effective due diligence and audit processes
- Quarterly financial reporting of actual spend and distribution across DAC countries
- It is a UK aid strategy requirement that “*all departments spending ODA are required to put in place a clear plan to ensure their programme design, quality, assurance, approval, contracting and procurement, monitoring, reporting and evaluation processes represent international best practice*”.

RIGHT Call 3 Application Process

- Two-stage application process:
 - Stage 1: Outline application
 - Stage 2: Full application
- Applicants for RIGHT Call 3 must submit an online **mandatory Intent to Submit form**.
- All eligible applications will be subject to independent peer and public review and considered by an independent International Funding Committee
- The Funding Committee will make shortlisting (Stage 1) and funding recommendations to DHSC (Stage 2)

Intent to Submit

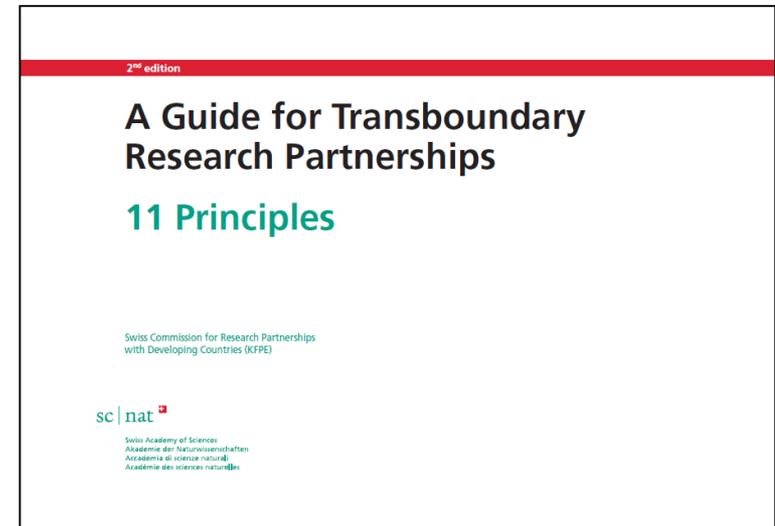
- Applicants for RIGHT Call 3 must submit an online mandatory Intent to Submit form **by 29 November 2019 at 13:00 UK time**.
- After submitting your Intent to Submit form, applicants should not wait for a response from NIHR and should continue to submit their RIGHT Call 3 Stage 1 application via the NIHR-CCF Research Management System.
- The Intent to Submit form is to aid the review process of the RIGHT Call 3 Stage 1 applications. No feedback will be provided on the Intent to Submit form and no applications are rejected at this stage.

Partnership and Proposal Development Awards (PPDA)

- Applicants successful at Stage 1 are eligible for funding of up to £10,000 to support proposal and partnership development and preparation of the Stage 2 application, subject to satisfactory submission of a PPDA application
- PPDA are to:
 - Support applicants to work collaboratively with all partners to develop Stage 2 application
 - Enhance partnerships
 - Initiate preparation of study governance documentation
- **IMPORTANT** Please note that applicants must apply for the PPDA funding at the **SAME** time as submitting a Stage 1 application
- Costs to be pre-financed by Host Organisation if successfully awarded and reimbursed on invoice and evidence of actual spend.
- Applicants should not start spending until their PPDA has been approved by NIHR

Equitable Research Partnerships

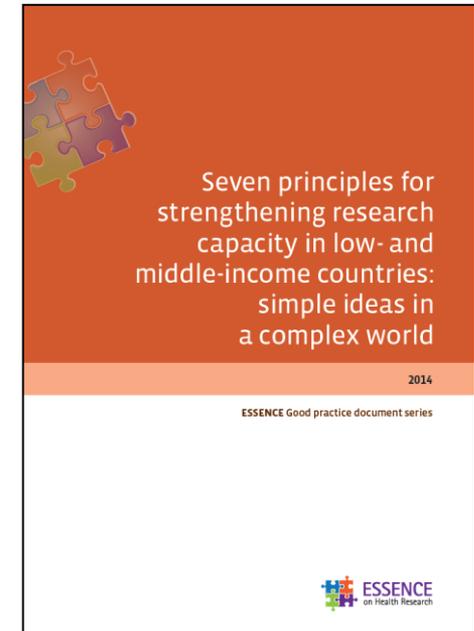
1. Set the agenda together
2. Interact with stakeholders
3. Clarify responsibilities
4. Account to beneficiaries
5. Promote mutual learning
6. Enhance capacities
7. Share data and networks
8. Disseminate results
9. Pool profits and merits
10. Apply results
11. Secure outcomes



A Guide For Transboundary Research Partnerships
Swiss Commission for Research Partnerships with
Developing countries (KFPE) 2012 / 2nd edition 2014

Capacity Strengthening

1. Network collaborate and share ideas
2. Understand local context and evaluate existing research capacity
3. Ensure local ownership and active support
4. Build in monitoring and evaluation from the start
5. Establish robust research governance and support structures and promote effective leadership
6. Embed strong support, supervision and mentorship structures
7. Think long-term, be flexible and plan for continuity



7 principles for strengthening research capacity in LMICs:
simple ideas in a complex world
ESSENCE 2014

Selection Criteria (1)

- ODA eligibility
- Relevance of the proposed research to the call remit
- Quality of the research design and work plan (i.e. clear research questions/ objectives, sound design and detailed methodology to address the questions/meet the objectives; clear milestones, identification of possible risks and factoring in of ethical considerations)
- Strength of the research team (i.e. depth and breadth of relevant expertise and track record of applicants in a related area)
- Impact of the proposed work (i.e. likelihood of significant contribution to the evidence base in the relevant area) and plans for engagement with policy makers, communities and the public at an early stage

Selection Criteria (2)

- **Value for money** provided by the application
- **Community and public involvement**
- **Equity of partnerships and approach to capacity building** (i.e. the research team's ability and approach to creating sustainable and equitable partnerships; and the potential/feasibility of the proposed research to generate sustainable advances in capacity and capability building in the LMICs)

Key Dates

- Call launched on - 9 October 2019
- Deadline for mandatory Intent to Submit Form submission – 29 Nov 2019
- Deadline for remit enquires – 9 January 2020
- Deadline for Stage 1 and PPDA applications submission – 15 January 2020
- Funding Committee review applications – March 2020
- Applicants notified of outcome of Stage 1 and PPDA – April 2020
- Stage 2 opens – 8 April 2020
- Deadline for receipt of Stage 2 applications – 17 June 2020
- Funding Committee review applications – October 2020
- Applicants notified of outcome of Stage 2 – November 2020

Tips for applying

Vision and global health need

- Is your programme of research within the RIGHT Call 3 Remit and what knowledge gap will be filled?
- Clear health endpoints and patient benefit in LMICs

Governance and project management

- What support your Host Organisation will provide?
- % of lead applicant's time and wider resourcing for effective project and financial management of the research collaboration

Partnerships and collaborations

- How will you engage with potential partners and communities and develop research plans?
- What is the track record and strength of your interdisciplinary team?

Things to avoid

- Being too ambitious - the Funding Committee need to be convinced the programme can be delivered within the timeframe and budget
- Missing a key part of the remit of the call, for example don't forget to include strong plans for capacity building and ensuring sustainability beyond the end of the funding
- Having more partners than you need - this could make your programme more difficult to manage.
- Presenting a programme that is difficult to follow or overly-complex
- A high percentage of the funds remaining in the UK, unless this is justified because of the nature of the research
- A Plain English Summary that is not in Plain English

Submitting the application

- Submit online via the CCF Research Management System <https://ccfrms.nihr.ac.uk/>
- Supporting documents to provide:
 - Stage 1 Financial Summary Form
 - List of references
- Guidance notes available on NIHR website (<https://www.nihr.ac.uk/funding/research-and-innovation-for-global-health-transformation-call-3/22260>):
 - Call Guidance
 - Financial Guidance
 - FAQs
- CCF RMS User Guidance is available on <https://ccfrms.nihr.ac.uk/>

Common application queries

Remit

Are all countries on the DAC-list, including Upper Middle Income Countries within remit?

Yes, all countries on the DAC list of ODA-eligible countries are appropriate targets for RIGHT Call 3. All applications should provide clear details of how the research will improve the health and welfare of people living in ODA-eligible countries affected by multimorbidity.

Would a proposal that is specifically palliative care focused albeit for those with multi-morbidity be appropriate for RIGHT Call 3?

A proposal on palliative care for those with multimorbidity would be in remit.

Common application queries

Working with LMICs

Can organisations in LMICs be host organisation?

For RIGHT Call 3, applications must have two Joint Lead Applicants, one at an LMIC institution and one at a UK institution. However, DHSC can only issue contracts to UK based institutions.

Can funding be disbursed to LMIC institutions?

Yes. NIHR encourages equitable funds distributions within the partnership. Please note that onward disbursements are made through the UK administrative Joint Lead. Appropriate due diligence and assurance should be undertaken and Collaboration Agreements drafted with partners before payments are made.

Common application queries

Funding

How many projects are you expecting to fund?

There is no fixed target for the number of projects we wish to fund. Up to £30m will be allocated according to the quality of applications and the Funding Committee recommendations.

Can research teams that were unsuccessful in other NIHR Global Health calls re-apply?

Yes, provided the proposed research is within remit for RIGHT Call 3.

Can current NIHR GHR award holders apply to RIGHT Calls?

Yes, provided justification is given on how a new research project could be effectively supported.

Common application queries

Funding

Can you clarify eligible costs for PhD students for RIGHT?

- LMIC-based PhD studentships are strongly encouraged as part of RIGHT applications. NIHR will fund full PhD costs (tuition fees and stipends) for LMIC students based in LMICs.
- NIHR will also fund PhD student fees and stipends for LMIC students based in LMICs but registered at an institution in a High Income Country (HIC).
- In cases where the application includes LMIC PhD student's fees at a HIC it is expected that Joint Lead Applicants will negotiate with the HIC institution for reduced fees for the LMIC candidate.
- English language training in the context of PhD registration is an eligible cost, provided clear justification and a strong value for money argument are given

Please note: HIC PhD fees are eligible only for LMIC students. PhD fees for a HIC student registered at an HIC institution would not be eligible, regardless of the programme of study.