

## NIHR Fellowships 2014

### Chairs' Report

#### *Introduction*

Round 7 of the NIHR Fellowships Programme was launched in October 2013 and closed 28<sup>th</sup> January 2014. Overall the number of applications increased compared to round 6, with increases seen in the number of applications to the Post-Doctoral Fellowship (PDF), Career Development Fellowship (CDF) and Transitional Research Fellowship (TRF) levels. This year the NIHR Fellowships programme also took part in 3 NIHR wide Themed Calls:

- Primary Care Interventions
- Long term conditions in children and young people
- Antimicrobial resistance

In total 7 applications were funded as part of the primary care interventions themed call, 7 as part of the long term conditions in children and young people call and 2 as part of the antimicrobial resistance call.

Details of the total number of applications received and the numbers recommended for funding by the Panels are given below.

Round 7, 2014						
	TRF	DRF	PDF	CDF	SRF	TOTAL
Applied	18	185	99	55	10	<b>367</b>
<b>Recommended for funding</b>	<b>3</b>	<b>34</b>	<b>11</b>	<b>10</b>	<b>0</b>	<b>58</b>

#### *Chairs' feedback and observations*

Overall the number of applications received and total recommended for funding by the Panels saw an increase compared to that in 2013. It was particularly pleasing to see the increase in TRF applications and awards. Despite this increase however there were still a number of applicants who had misinterpreted the scope of a Transitional Research Fellowship. Applicants coming from a basic science or experimental medicine background with little experience of research within the remit of NIHR programmes need to clearly articulate how the award will put them in a strong position to apply for further NIHR funding at the end of the Fellowship (for example a NIHR CDF), and enable them to make a clear transition from the research they currently undertake to that they propose to do at the end of the TRF. The research project included in a TRF application must fit within the remit of NIHR programmes in the same way applications to any other levels of Fellowship must do.

At Doctoral Research Fellowship (DRF) level the Panel saw lots of promising candidates with excellent potential. Unfortunately, many promising candidates were unsuccessful this year because of insufficient supervision in terms of preparation of the application itself and throughout the timescale of the proposed fellowship. Choosing the right supervisors for a fellowship application is a very important factor in the success of a proposal. The supervisory team assembled must be able to provide support for the required expertise for the methods used within the research proposal, the clinical problem being addressed and the training required of the Fellow. Supervisors should also strike the right balance between having enough experience of supervising PhD students through to completion, having experience and recognition in their specialist area and having enough time to input meaningfully to the fellowship.

The Panels saw plenty of high quality applicants coming through to interview across all the levels of the programme. The area in which many were let down was the research proposal itself. No matter how impressive the candidate in terms of their CV and future potential, in order to be recommended for funding the application must be based upon a sound research proposal that is asking relevant research questions backed up by appropriate and robust methodology. There were also applicants who had impressive CVs in terms of research outputs and experience and who were proposing high quality research projects, but who hadn't appreciated the difference between applying for a research grant and applying for a personal fellowship. NIHR Fellowships are not stand alone research projects but a package of elements which includes a high quality research project that will allow the trainee to strengthen their research skills and experience. It is therefore vitally important that every applicant carefully considers the training and development they will undertake as part of a fellowship and the difference this will make to their future career. It was especially noticeable that a number of applicants proposing the inclusion of a clinical trial hadn't always fully developed their training and development programme, with the result that applications often looked more like project grants rather than fellowships. Including a clinical trial as part of a fellowship application has to be carefully thought through, taking into consideration various factors including the scope of a fellowship and what is reasonable to include in an application. For example, including a randomized controlled trial as part of a DRF is unlikely to be achievable, whereas a feasibility study maybe a more appropriate approach to take. Applicants thinking of including a clinical trial should carefully read the guidance and supporting material provided by NIHR in relation to clinical trials before starting an application.

Another common shortfall of applications this year was applicants' lack of understanding of complex interventions, behavioural interventions and outcome measures. Several proposals would have benefited from input and/or training in the area of behavioural interventions. This could have been achieved through the addition of a behavioural scientist on the supervisory or mentorship team so that these factors were appropriately considered as part of the proposed research and also the addition of appropriate training both formal and informal.



## **National Institute for Health Research**

Applicants also need to consider where they are going to take their research upon completion of the fellowship they are applying for. Applicants, especially at more senior levels, will probably be looking to other NIHR programmes, for example the Health Technology Assessment (HTA) programme, upon completion of their fellowship. If this is the intention of an applicant, it is worthwhile understanding the remit and scope of the different NIHR programmes and the nature of the research evidence that each requires as the starting point for a convincing application. TRF applicants need to be particularly mindful of this because the Panel will be looking for clear evidence that a TRF proposal will place the applicant in a strong position to apply for further NIHR funding upon completion.

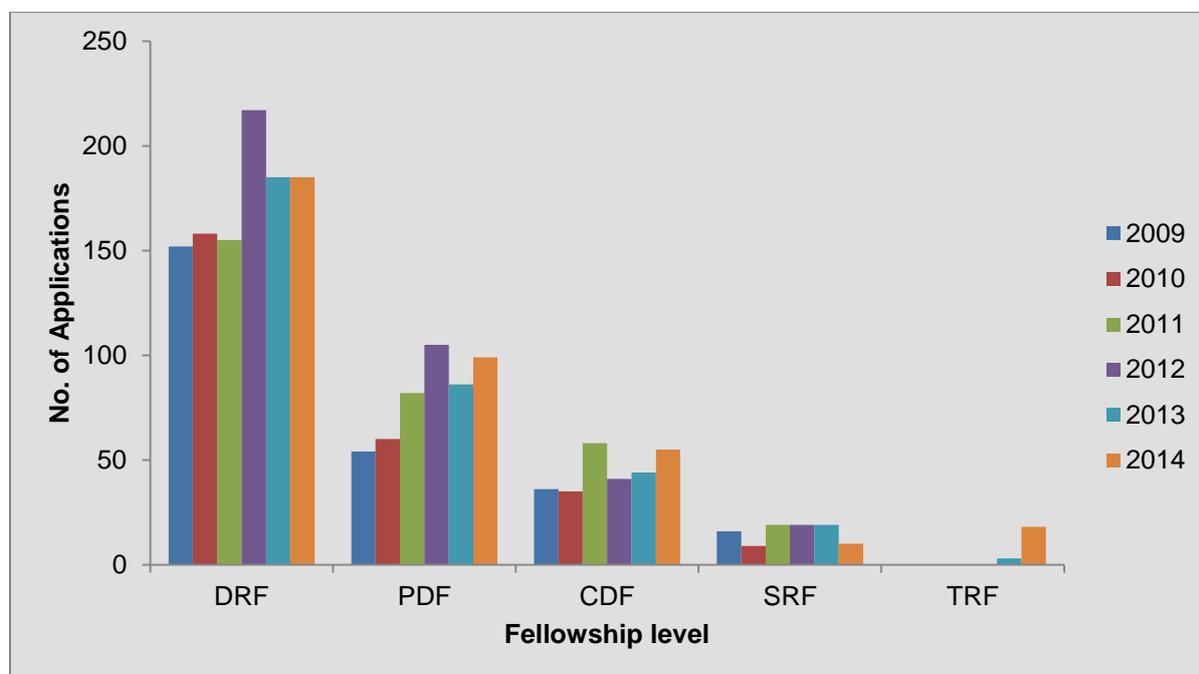
Applicants who have been unsuccessful in a previous round can re-apply in the future and some are encouraged to do so. If an unsuccessful applicant does choose to re-apply in a future round, the Panel would like to see it explicitly stated what has changed within the application. The Panel will want to see how an applicant has responded to feedback they have received previously.

The Panel members are assessing the abilities, existing experience, commitment and ambition of the applicant, the standards of the research training environment, and the plans for clear training in research methods as well as the quality of the research proposal. Therefore, it is important to address all of these elements when putting together a NIHR Fellowship application. A successful application should hang together as a whole, with a strong training and development section complementing and integrating with both the proposed research project and the applicant's existing skills and experience.

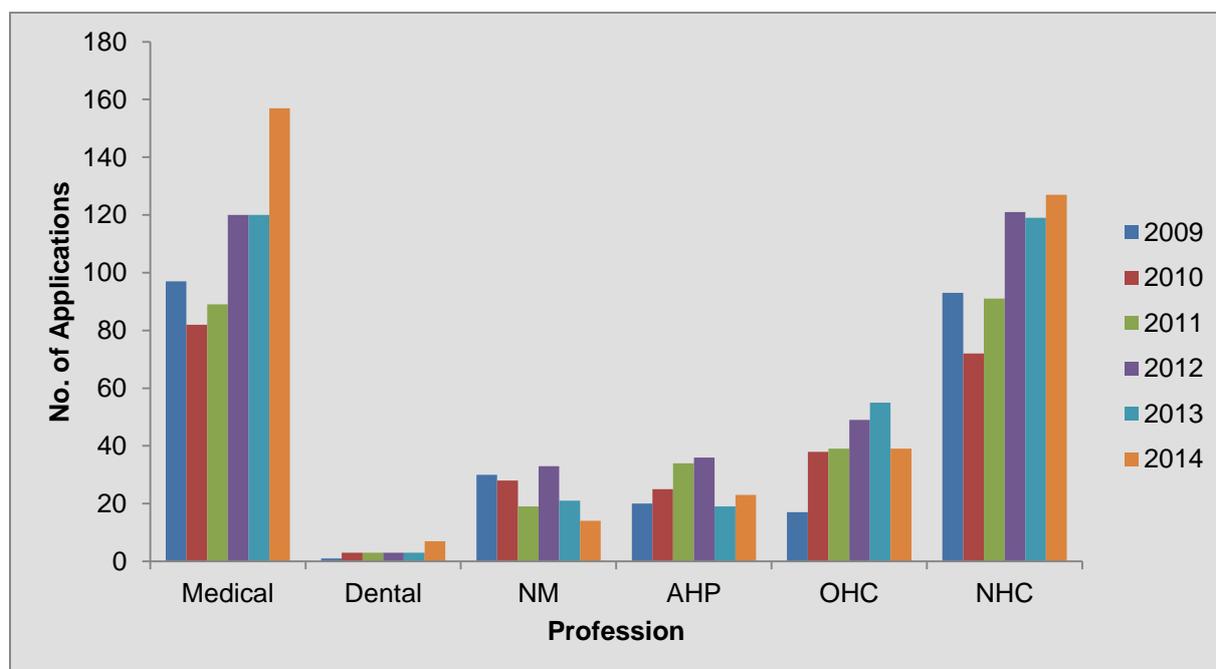
We hope that the advice above is helpful to potential applicants for round 8. Please don't hesitate to contact the NIHR TCC with any queries.

Data on Round 7

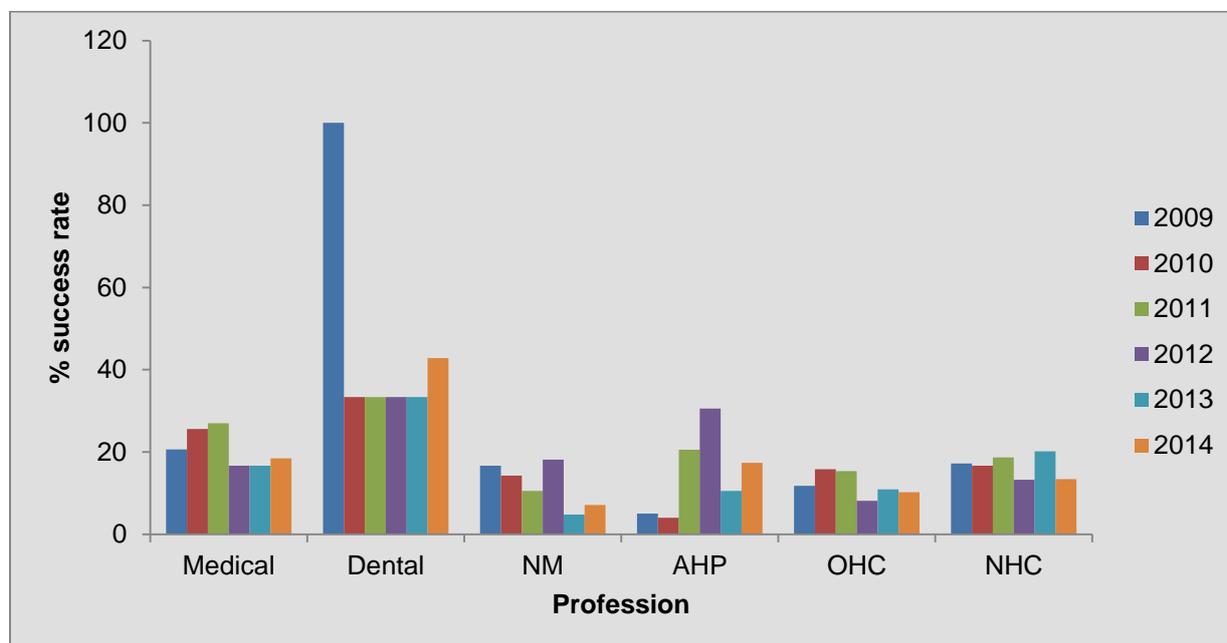
1. Applications to the NIHR Fellowships Programme from 2009-14\*



2. Applications to the NIHR Fellowships Programme by Profession from 2009-14.



### 3. % Success rate of applicants by professional background\*\*.



\*Please note NIHR TRFs were launched for the first time in 2013.

\*\*Please note this chart (1) should be considered alongside chart 2 which shows application numbers, due to the small number of applications from certain backgrounds.

#### Key

DRF	Doctoral Research Fellowship
PDF	Post-Doctoral Fellowship
CDF	Career Development Fellowship
SRF	Senior Research Fellowship
NM	Nurses and Midwives
AHP	Allied Health Professionals
OHC	Other Healthcare Professionals
NHC	Non Healthcare Professionals