# Early Postdoctoral Fellowship Scheme Guidance



#### Aim

This scheme is designed to build health research capacity in Scotland across a number of areas. As such, it provides the opportunity for both clinical professionals and health researchers to develop their research following successful completion of a PhD.

The scheme will be aiming to support the best candidates from a diverse range of career backgrounds and pathways.

#### Remit

All research funded as part of this award must fall with CSO's overall remit of early translational (experimental medicine), clinical and applied health research, and social care. The proposals must have clear potential for directly benefiting patients/service users, carers and the public in Scotland.

If you are unclear if your proposed project fits within CSO's remit you are welcome to discuss this before you submit. Please contact <a href="mailto:csofellowhsips@gov.scot">csofellowhsips@gov.scot</a> for any queries. Any proposals not within remit will not proceed to assessment.

#### **Eligibility and Requirements**

The scheme invites applications from early career researchers and clinical academics. The applicant must hold a relevant PhD (or MD/Clinical Doctorate) but should have **no more than 2 years** postdoctoral research experience.

This experience should be calculated <u>from</u> the date on the letter/email where the University officially awards the degree <u>to</u> the closing date of applications to this scheme **and** should be calculated on an FTE basis - time away from work on long term leave need not be counted.

If medical candidates have built up more than 2 years post PhD research experience before completing their CCT due to for example, holding a NES/CSO Postdoctoral Clinical Lectureship, please contact CSO for us to advise on eligibility. In most instances you will be able to apply for the first round where you would be able to take up the fellowship in the window 1 Aug – 1 Jan following your completion of training.

Candidates may submit an application before their PhD is completed but they should be expecting to have completed their viva and only have minor changes to be made to the thesis before the interviews for this scheme in June. The current supervisor will be expected to send in a reference to confirm this is the expectation.

We do not expect to receive applications from people who already hold permanent research or lectureship positions in a University. If you are already currently employed by the University where you would like to hold this CSO postdoctoral fellowship you will be required to explain the effect the fellowship would have on your career, how it would be clear that you have changed roles and your status at the end of the Fellowship.

## **Part Time Applications**

If you only wish to work part time, then a part time application is acceptable – you will still be able to use 20% of the Fellowship time for other career development commitments. A part time application made on this basis can run for longer than 3 years, until 3 years FTE has been funded.

If you wish to make a part time application for the Fellowship to fit with another paid role – for example, paid clinical sessions or a paid teaching role, then the Fellowship needs to be the main focus of your working week, and no further time can be taken out of the Fellowship for other activities. A part time application made on this basis can only run for 3 years.

# **Application Summary**

Host Organisation - Must be a Scottish HEI

<u>UK CRC Health Research Classification System</u> - You must code your project with the <u>UK CRC Health Research Classification system</u>.

## General approach to coding

The strategic aim of coding using the Health Research Classification System is to capture the main objective of the research taking place during the lifetime of the award and not the background or future potential downstream applications of the research

Every research project is classified using the two dimensions of the coding system, both Research Activity Codes and Health Categories use the minimum number of codes to reflect the main focus of the research.

#### Start Date

Successful fellowships can start between 1 September and 1 January following interviews in June. Please state your intended start date.

<u>Plain English (Lay) Summary</u> – this should be a clear explanation of your research understandable to someone without a scientific background. Many reviewers will use this summary to inform their view of your research as they will not necessarily be experts in your topic area. If your application is successful, this summary will be placed on the CSO website. You may find it helpful to involve patients or members of the public in developing this summary to ensure it is appropriately written.

## **Applicant Information**

Please state if this is a Clinical Fellowship application – If this is a Clinical application then the 20% time that can be used for other commitments in this fellowship should be used for clinical time

Please list all roles since completing your PhD, including research and non-research, making sure you cover all the time. You need to state how much actual research time you have had from award of the PhD to the closing date of the scheme. This should be in months and worked out WTE non including any non-research time or periods of extended leave.

Please give the details of your PhD, if your PhD has not yet been awarded, please provide expected submission/viva dates.

Please provide details of all relevant qualifications and degrees.

#### **Other Commitments**

Please indicate what other commitments you will have during the fellowship and how these relate to the research being proposed or your career. You may allocate up to 20% of your time to these other commitments. Unless this Fellowship is sitting alongside other paid commitments in which case you need to ensure the focus of your time is on research.

## **Proposed Research Plan**

Please make sure your research plan is within remit.

- must be clinical and applied health research or social care research
- must have clear potential for directly benefiting patients/service users, carers or the public
- no basic research or work involving animals

**Scientific Abstract** – this should be a clear and concise scientific summary of the detailed research plan.

#### **Detailed Research Plan**

This is the main part of the application detailing your proposal and should be uploaded as a word document. Please ensure the information is accurate, succinct and clearly laid out. Please use all the headings with a total word limit of 5000. Please ensure this section includes your plans to involve patients and the public.

<u>Outline</u> – provide a clear explanation of the problem to be addressed and the impact on patients and how this research will fill an evidence gap.

Why the research is important – clearly identify the health need and outline the value this study will provide. Does the existing literature support this proposal?

<u>Research Questions/Aims and Objectives</u> – please summarise the research questions.

<u>Project Plan</u> - Provide an expert description of the project plan of investigation plus any additional points required to support statements made in the previous sections, and include any key references required to justify the points made (e.g. in the use of particular outcome measures or methods of analysis). You should include where applicable; study design, justification of sample size, selection and exclusion criteria, methods of data collection and analysis, and justification for your choice of methodology.

<u>Project Management</u> – outline the processes put in place to ensure the research will be well managed.

<u>Success criteria</u> – Please set out measures of success you intend to use and also the key risks to delivering this research and what contingencies you will put in place to deal with them.

## PPI, Patient Benefit, Dissemination and Impact

## Patient and Public Involvement and Engagement (PPIE)

By public involvement we mean an active partnership between members of the public and researchers in the research process, rather than the use of people as 'subjects' of research. Public involvement means working with patients, carers or family members with lived experience of the topic you are studying. Another way of thinking about this, is working with those who may be affected by the outcomes of your research. Examples of public involvement include: involvement in identifying research priorities; assisting in the design and management of a research project; being a co-applicant on a research grant or a joint grant holder; carrying out specific research activities; being members of a project advisory or steering group; disseminating research findings.

Patient and public involvement should have been included in the detailed research plan. This section provides more detail. You should describe who has been involved and why this is appropriate, what role(s) they have they played and what influence or change has happened as result of their involvement. Answer each section, you can signpost to the detailed research plan to help.

If it is not considered appropriate and meaningful to actively involve patients/service users, carers and the public in your proposed research a space is provided for you to justify this decision.

For help and resources with PPI please see the UK PPI Standards website - <u>UK Standards for Public Involvement - The UK Standards (google.com)</u>

NHS Research Scotland PPI pages - <u>Help Shape Research | NHS Research Scotland | NHS Research Scotland</u>

#### **Dissemination, Outputs and Anticipated Impact**

The purpose of this section is for the applicant to describe what the outputs of the research might be, how these will be disseminated and what impact there might be. Please consider the following questions when completing this section:

- What do you intend to produce from your research?
- How will you inform and engage the public?
- How will your outputs enter our health and care system or society?
- What will be the impact of your research for patients?

## **Section Three – Finance**

The starting grade should be stated.

If the candidate is not clinical then this should be in the range of National Spine point 30 to 33 depending on 0 to 2 years' experience. If this is not the case, then justification needs to be included.

If the candidate is Clinical then the appropriate Clinical Academic Scale should be used.

Funding will be provided at 80% FEC

**Basic Salary only** of the award holder (including superannuation and national insurance), with increments, based on an appropriate point for the individual on a relevant pay scale. Request for salaries should be based on actual costs at the time of application, increases for inflation should not be included. Please note that when making requests for salaries that this is an early postdoctoral scheme, and we expect salaries to be in the lowest appropriate band.

Consumable costs up to £30k over three years (i.e. up to £10k per annum for three years or pro-rata for part-time awards) to cover the costs of the research. This budget is intended to cover any laboratory costs, fieldwork expenses, PPI expenses, minor equipment costs (e.g., computer software), printing, postage, travel and stationery. Please note that computers (desktops or laptops) are not allowable. If appropriate, these costs can include training courses required to complete your research effectively. Please do not include any open access publication costs, these can be applied for separately on all CSO awards. Please do not include conference costs as successful fellows will be eligible to apply for additional funding towards Conference attendance where work from the Fellowship is being presented.

## These costs must be fully itemised and justified.

NHS Service Support Costs will also need to be estimated separately and stated within the application.

Please note that The CSO financial year runs from 1 April to 31 March and required costs must be split by financial year.

Please fill in all relevant boxes in this section and ensure it is signed by the finance officer.

# **Section Four - Support**

**Supervisor** – All named supervisors must complete the form and sign to show they have agreed to take on this role. It should be clearly shown than supervisor support addresses all areas of the proposed work.

**Head of Department** – of the prospective host institution must compete the form and sign to indicate their formal approval of the application, their willingness to offer an

appointment to the individual (if successful) for the tenure of the award subject to their normal employment practices, their approval of the salaries sought, and the acceptance of the terms and conditions associated with a CSO postdoctoral fellowship

## **Section Five – Declarations**

This must be completed to show ethical considerations have been taken into account and all the relevant approvals have been sought. No payments can be made for research projects until all ethical approvals are in place.

What approvals and decisions do I need? - Health Research Authority (hra.nhs.uk)

The form must be signed by the applicant, Grantholder and Sponsor and if appropriate the NHS organisation.

Contact information for administration of a successful award must be given.

By signing the form, applicants are confirming that CSO may hold and process, by computer or otherwise, all personal information supplied with the application.

## Reviewers

Each application must contain reviewer suggestions for people to approach to obtain a peer review on your application. They should be people that can appropriately review either the clinical area of your research or the proposed methodology. Suggested reviewers should not be employed at the institution you are intending to do your research, nor should they be current collaborators of you or any of your supervisors.

#### ASSESSMENT OF APPLICATIONS

All applications are assessed by a process of peer review and assessment by a Panel assembled by the Chief Scientist Office for this purpose. Comments from the expert referees from the peer review process assist the Panel in reaching a decision in the shortlisting process. Candidates who are short-listed will be invited to an interview held by the Panel.

#### **Outcome of the Assessment**

Applicants will be informed as soon as a final decision has been taken on their application. Candidates who are interviewed will usually be notified of the decision as soon as possible after funding arrangements have been confirmed. The decision of the Panel is final, and no appeals will be considered.

The selection panel will use the following assessment criteria when reviewing your application:

## The Applicant

The Panel will look for evidence of commitment to a research career. Supporting evidence will include productivity, e.g. any publications from previous research and proof of skill e.g. prizes. The Panel will also look for evidence that the applicant has the potential to become a leader in their field and to lead a research team.

# The Project

The Panel will wish to fund high quality applications both in terms of the individual and the project. The Panel will seek to judge the scientific merit of the research taking into account its originality and importance and judging the extent to which it will increase knowledge relevant to improving health. The factors they will be considering include:

- Has the candidate been the major force in the writing and design of the project?
- Has PPI been used in the development of the project and is it a continued thread throughout the project?
- Is the methodology appropriate?
- Is the work achievable, feasible and deliverable within the timeframe?
- How will the research benefit patients?

## **Supervision and Research Centre**

The panel will look for confirmation that the supervision for the candidate and the research is of high quality and is able to cover all aspects of the supervisory requirements of the individual. They will also judge the standing of the proposed research centre in the field.