

Frequently Asked Questions
NIHR Funding Programmes Information Event
Chief Scientist Office (CSO) 24 October 2022

General

1. Will the meeting be recorded?

Unfortunately, we were not able to record the event. However, slides will be made available, and the CSO will try to respond to any questions about the NIHR funding programmes you might have.

2. Will the slides be available?

All the slides have been compiled to a pdf which has been distributed to all of those who registered for the event. If you have not received the slides and would like to receive a copy, please contact louise.campbell@gov.scot

3. The NIHR recently rebranded and became the national institute for health and care research. What is the CSO vision for social care research and how to grow this in Scotland? Noting huge investment in England with School of Social Care Research and other dedicated funding schemes, fellowships and resource.

The UK Policy Framework for Health and Social Care Research (2017) outlines the key principles and responsibilities for the management and conduct of health and social care research. The Scottish Government has shown significant commitment to protecting the people who use social care services with agencies across the sector introducing specific standards, driven by the Public Bodies (Joint Working) (Scotland) Act (2014). The National Care Service (Scotland) Bill (2022) establishes the National Care Service and legislates for the research which is to be carried out within the newly formed care boards jurisdiction. These pillars should direct all governance for social care research in Scotland.

The NRS Central Management Team are currently developing an infrastructure which would allow for a more coherent support to be offered to studies which have a social care element to them. This work includes individual support to study teams at different stages of their work progress (feasibility, signposting, general R&D approval support etc) but also a targeted work with research teams at different stages of their research progress (ethics guidance, PPI support etc). A third strand of this work is currently focused around shaping foundations for a new Social Care REC which in the nearest future would be able to offer tailored support and expertise to social care research projects.

CSO has invested in the ENRICH (Enabling Research in Care Homes) Scotland programme that brings together care home staff, residents and researchers to facilitate the design and delivery of research, to improve the quality of life, treatments and care for all residents. [ENRICH Scotland | NHS Research Scotland | NHS Research Scotland](#)

Capacity

4. Would there be any appetite at CSO to buy into the NIHR Academy scheme to allow access to the range of early/mid/senior fellowship opportunities (akin to Health Care Research Wales)? Of the 5 existing CSO fellowship opportunities, only 1 provides an opportunity for non-clinicians. It would be great to see this reviewed.

There is no 'buy in' option to the NIHR Academy and all successful Scottish applications would need to be directly funded by CSO. This would not allow us to manage the available budget effectively and would restrict the schemes we could offer from Scotland.

UKRI offer PhD studentships to non-clinicians, these are available on a UK wide basis.

5. Is there any funding available for the PIs to devote quality and funded time to participate in these research projects?

The PIs time should be costed into the research proposals. In addition, the CSO fund several fellowships every year which may provide more support towards PIs. Please see [Fellowship Funding – Chief Scientist Office \(scot.nhs.uk\)](https://www.scot.nhs.uk/scotnhs/our-services/clinical-research/fellowship-funding) for more information about the available fellowships.

6. I am aware of the programmes for clinical research nursing (also supported by HEE) - 70@70 and the Associate PI scheme - these have huge relevance for our substantial Clinical Research Nursing/Midwifery workforce in Scotland and it would be really helpful to explore how we can invest to allow our Scottish staff to network and benefit from this leadership development. The outcomes from the 70@70 investment are very impressive.

The Associate PI scheme is available in Scotland ([Associate Principal Investigator \(PI\) Scheme | NIHR](https://www.nihr.ac.uk/about/associate-principal-investigator-scheme)). The majority of the CSO capacity building funding schemes are available to the Nursing/Midwifery workforce. CSO is happy to discuss these schemes with NES and the Chief Nursing Officer directorate.

7. How can we enhance support/opportunities for our clinical academic pipeline which is under threat -especially at a time of increased service demands and when the time between PhD completion and end of clinical training leads to our clinical academic trainees being vulnerable to remaining competitive for future fellowship applications?

The NES/CSO postdoctoral Clinical Lectureships are available to help this stage in the pipeline. Please see [Joint NES/CSO Postdoctoral Clinical Lectureships – Chief Scientist Office \(scot.nhs.uk\)](https://www.scot.nhs.uk/scotnhs/our-services/clinical-research/joint-nes-cso-postdoctoral-clinical-lectureships) for more information about this.

8. Is there a Pre-Clinical Academic Fellowship (PCAF) route open to Scottish NMAPS?

The CSO ran a capacity symposium earlier this year. During the symposium it was highlighted that this is an area where more resource would be welcome. It is something that we are keen to develop to help encourage more applications into our CAF scheme. Any such development is subject to budget being available.

Available funding

9. Do we have any examples of non-pharma related studies funded by CSO to support health/social care improvements? Particularly ones that went on to attract larger funding in the NIHR schemes

Many examples of projects funded through the Health Improvement, Protection and Services Committee can be found here: [Health Improvement, Protection and Services – Chief Scientist Office \(scot.nhs.uk\)](https://www.scot.nhs.uk/health-improvement-protection-and-services/)

10. There is a gap in funding for high quality applied non-clinical research on challenges in health & social care in remote, rural and island areas of Scotland. Evidence on what works in these contexts is sparse. Could be opportunities for CSO co-funding with international partners with similar populations & challenges/contexts for mutual benefit?

International collaborators are welcome on CSO grants - however given our remit it's unlikely that we would fund fieldwork in other countries.

11. Where does health data science fit into this funding framework? For example, using routinely collected data to improve health.

Applications incorporating health data science approaches and using routinely collected data are considered by the NETSCC funding programmes provided this is appropriate methodology to apply to the research questions being addressed.

12. Can you please expand on where you see the Translational Research Collaborations (TRCs) intersecting with these calls and how.

The TRCs bring together experts from across the country within a particular field e.g. respiratory. Members of a TRC can apply to NETSCC calls – both researcher-led and commissioned. If TRCs want to be involved in developing future commissioned calls for HTA, individual TRCs should get in contact with Lisa Douet (lisa.douet@nihr.ac.uk).

Eligibility

13. Is Scotland eligible as PI and Co-I for research led and commissioned for HTA?

Researchers based in Scotland are eligible to apply for HTA, both research led and commissioned calls, as PI or Co-Investigators.

14. Can applicants based in Scotland apply as co-applicant to PGfAR?

Applicants based in Scotland can apply as a co-applicant to PGfAR if they can demonstrate a contribution unavailable elsewhere.

15. Does EME fund non-drug interventions - e.g. physiotherapy/allied health professions interventions?

Yes, non-drug interventions lie within the remit of EME. The EME secretariat (eme@nihr.ac.uk) is happy to answer any specific queries regarding this scheme. The EME programme will support the evaluation of a broad range of interventions that have the potential to maintain health, treat disease or improve recovery.

16. Are the 'methods' (qual/quant) so definitely fixed in each of these strands as described?

These are not fixed but it is advisable to contact the NIHR secretariat for further advice relating to specific potential applications. [About us | NIHR Evaluation, Trials and Studies Coordinating Centre | University of Southampton](#)

17. Can Scottish researchers be PIs on these programmes but have collaborators from England?

HTA/EME/HS&DR/PHR can be led/CI from Scotland (with co-apps/PIs from anywhere across UK and outside UK in some specific cases) - the one exception is the commissioned scheme for HS&DR where Scotland-based researchers can be co-apps but not CI. More information on eligibility for the different funding programmes can be found on the NETSCC website [About us | NIHR Evaluation, Trials and Studies Coordinating Centre | University of Southampton](#)

18. Does a HS&DR project that involves data collection need to have sites across the UK, or would focusing on Scottish sites be eligible?

Any study which wants to show relevance across the UK would need to have sites across the UK. This would reflect regional differences and ensure deliverability across different systems. If the study is only investigating something that is relevant to Scotland, then only including Scottish sites might be acceptable.

19. Would PHR support healthcare public health in primary care (therefore not NHS?) (The panel make up suggests this is not the main focus?)

Correct, that is unlikely to be within PHR remit. Primary care is still usually NHS (unless private provision), but PHR is also explicitly not about healthcare. Of course, there may be specific interventions which might be worth contacting the secretariat about. However, I would expect it should fall into remit for one of the other NIHR panels – they intend for most things to have a home somewhere.

Research Design Service

20. Is there a RDS service available for Scottish applicants? or is it just called something different?

Clinical trial units (CTUs) in Scotland can help with Research Design. CTUs will in general be happy to have pre-award discussions, irrespective of funder, around the statistics, methodology, design, budget preparation, data management etc. Ideally, the CTU can then be included in the application to provide post award support, costed from the budget. All depends on what is needed and the budget available.