

Information call for potential applicants

Insight Research Programme 2019

May 2019

Introduction

The purpose of this call is to provide you with an overview of the Insight Research Programme and to go through what we are looking for in your applications. We will also try to answer any questions you may have.

After the call, we will follow up with an updated FAQ document and a transcript of this call, which will be posted on the Insight Research Programme webpage next week.

This call is designed to clarify the parameters of the programme and to address some common questions that you may have. Please note that we cannot answer specific questions about your project but can provide general guidance and information.

If, as you complete the remainder of your application, you have any questions, please submit them to us at InsightResearch@health.org.uk

If you experience any issues with the sound during the call please raise this immediately with the moderator, who will let us know.

Overview of the programme

The Health Foundation's Insight Research Programme 2019 (Insight 2019) is a researcher-led open call for proposals to support original research to improve health care quality in the UK.

This call is concerned with research to advance the collection and use of data – specifically within national clinical audits (NCAs) and patient registries – as a mechanism for improving health care quality in the UK.

Clinical audits and registries are some of the UK's most valuable data assets but are yet to realise their full potential in the UK. We have therefore made £1.6 million available to fund research in this programme.

We have identified **three priority areas** for the programme, which are as follows:

1. Patient focused audits and registries

Under this theme we are interested in research that expands the role of the service user in the design and collection of clinical audit data. In particular, we are interested in the collection of structured information on patient reported outcomes or other patient outcomes, potentially from outside of the traditional clinical setting, which can be used to support

clinical decision making and improve self-management. Furthermore, we are interested in projects that actively work with patients to demonstrate the value of data collection and use, and projects that seek to develop audits and registries as something that patients can use themselves.

2. Accelerating the use of linked data to support future challenges and trends in quality and care or to improve the value of health care

In this theme we are interested in supporting research that uses audit and registry data and other datasets within and outside the health care system (such as social care) to support challenges such as multiple morbidity and inequalities. We are also interested in linkage projects that consider holistic care and consider the entire patient pathway and different care settings. This theme will also support research which links data on clinical effectiveness and outcome measures with datasets containing data reporting costs or other measures of efficiency and value.

3. Demonstrating and enhancing the impact of NCAs and registries on practice and policy

This theme explores how NCAs and registries can have more meaningful impact on practice and policy, including developing data visualisation or communication tools and strategies to communicate unwarranted variations in the quality of care identified in audit and registry data to providers, commissioners, patients and the public.

Your application **must** link to one of the three priority areas, although we acknowledge that proposals may overlap more than one area. Please note that as part of the application process you will be asked to state which priority area your research sits under.

We are looking to support four to five innovative and ambitious research projects which have the potential to transform the use of audit and registry data to improve the quality of care.

Projects funded under the programme should have a budget in the range of **£300,000 to £400,000** with a maximum duration of **48 months** (including a start-up phase).

Specifically, applications for grants are expected to be interdisciplinary and we are looking to fund research projects that seek to:

- address an issue of significant importance for the quality of health care in the UK, linked to one of the three priority areas, with the cost in line with the significance of the problem to be investigated
- synergise with the broader efforts to help organisations use data to improve the quality of care and establish an infrastructure that enables improvement in care at greater scale
- conduct research across more than one site and/or location
- have the potential for learning to be applied to other conditions or situations outside the immediate area of research.

We will favour projects that can demonstrate strong collaborative approaches. We are also keen to support projects that collaborate with digitally mature health care providers ideally heading towards integrating audits with other electronic medical records. We are therefore asking all applicants to include in their proposal an indication of the digital maturity of health

care partners on the project. Providers in England should include details of their Digital Maturity Assessment scores. Providers in Scotland, Wales and Northern Ireland should use the most appropriate metric or a narrative summary to provide details of the extent to which their services are supported by the effective use of digital technology.

Finally, we ask that you provide details of the current coverage, reach and reporting of the audit/registry data included in the study. For consistency, we ask that you report against the [inclusion criteria for NHS England's Quality Accounts list for 2019/20](#), even if the audit is not part of the Quality Accounts. If you are unable to provide details, or it is not applicable, please indicate why in your proposal.

Application and assessment process

The programme is an open award programme, available to suitably qualified and experienced research teams based in the UK (although team members, but not the principal investigator, may be based abroad). We anticipate the lead applicant will be a university or similar group with suitable research expertise, but we would encourage applications from multidisciplinary teams including audit providers and, where appropriate, the providers, managers and commissioners of health care services.

The application is a **two-stage** application process.

Applicants must initially submit an **outline** proposal application form using the Word template provided. We would also ask that you familiarise yourself with the outline proposal application form guidance. Outline proposal applications must be submitted to us by **12.00 on Thursday 16 May 2019**. Outline applications should be sent to InsightResearch@health.org.uk.

When outline proposal applications are received by the Health Foundation, they will be assessed internally against the following criteria:

- alignment with the programme aims
- appropriateness of the proposed research methods, and
- value for money of the proposal.

Outline proposals rated most highly against the above criteria will go through to the next stage of assessment, and applicants will be invited to submit a full proposal (stage 2).

The **stage 2 full proposals** to Insight 2019 must be submitted through our online application portal, AIMS. We encourage all applicants to familiarise themselves with the full application form (available on the [funding call page](#)) as early as possible following selection for the full proposal stage.

Applicants will be informed by email as to whether they have been invited to submit a full proposal during the week commencing 24 June 2019.

Applicants invited to submit a full proposal will be sent a link to our online application portal AIMS.health.org.uk and the AIMS user manual which explains how to register with AIMS and navigate the application form.

The deadline for full applications (stage 2) is 12:00 on Monday 22 July 2019.

Each full proposal will be externally peer reviewed to assess the proposal against our full selection criteria as outlined in the Notes for applicants.

Peer reviewers' comments will be anonymised and fed back to applicants, who will be asked to provide a written response to the comments. Applicants will have approximately one week to provide a written response to comments. This will probably be around the second or third week of September.

Full proposals will then undergo an assessment by a panel comprising experts in the field. The panel will review the application in conjunction with the peer reviewers' comments and develop a ranked list of applications.

Applications deemed of sufficient quality and value for money will be invited to the Health Foundation for an interview; these are being held on 23–24 October. Following the interviews, the panel will produce a final ranked list of applications and make recommendations for funding to the Health Foundation.

The ranked list will consider the technical merit of the proposal but also the fit with the strategic aims of the programme. A final decision to commit funds should be made by early November 2019.

Best practice for completing your application

Finally, before we open up for questions, I'm going to run through some best practice for developing and completing proposal applications and pick up on some of the frequently asked questions we have already received. Much of this may sound obvious but there are some key elements that are often omitted from applications.

1. It's important that you identify the priority area on your application form

- Your application must address one of the priority areas outlined in the Notes for applicants: patient focused audits and registries; accelerating the use of linked data to support future challenges and trends in quality and care or to improve the value of health care; or demonstrating and enhancing the impact of NCAs and registries on practice and policy. You are asked to select a lead theme for your application.
- If you have more than one research idea, you are more than welcome to submit more than one application; however it is important that you demonstrate in each proposal sufficient capacity to undertake the different projects. We would also expect to see a coherent rationale for multiple applications and a justification for each separate project.
- We anticipate projects will have a budget between £300,000 and £400,000 with a maximum duration of 48 months, which includes a set-up phase to allow for staff recruitment, data access (including seeking ethics approval) and data linkage.

2. Ensure your proposal seeks to address a clearly defined gap in the knowledge

- You need to convincingly describe the problem you are trying to address, including attempts to understand the root cause. You will need to refer to

evidence in order to convince the assessors; that might be data such as numbers of patients who would benefit from the research, information on current costs and levels of waste in the system, or an assessment of the current data used to support decision making.

3. Have you allowed enough time to access the data required for your project and do you have the required data governance in place?

- We are aware that accessing the data required for research projects – particularly large-scale data linkage studies – can be a lengthy and involved process. This year we have increased the maximum duration of projects to 48 months, to enable a set-up phase to be incorporated in project plans to allow for staff recruitment, data access (including seeking ethics approval) and data linkage.
- You will need to demonstrate in your application that you have a thorough understanding of data requirements for the project (particularly where datasets are required from a third party or data linkage is required). You should also demonstrate a proactive approach to implementing appropriate information governance and data security arrangements.
- As mentioned, you are asked to also provide details on the current coverage, reach and reporting of the audit/registry data included in the study.
- If you have any questions or concerns about the data required for your project, please contact us at InsightResearch@health.org.uk.

4. Are you involving the right people?

- When you decide who needs to be part of your project, be clear about the rationale for who you involve in the project team and why.
- We are keen to support multidisciplinary research. Project teams will need to demonstrate that they have strong research and analytical skills relevant to the project; adequate systems of information and/or research governance; and experience in project management and delivery. Teams will also need to demonstrate strong clinical engagement.
- At the Health Foundation we champion patient involvement and we would fully expect you to involve patients/service users throughout the planning and implementation of your research, where applicable. We would also like applicants to consider how they can foster connections with patients and clinicians within formal and informal networks.
- As mentioned, where relevant to the project, we are also keen that projects are based in sites with strong digital maturity and it is important you include this information in your application.

5. Think beyond the project

- This is an important area that you will be asked about in some detail if you are invited to interview, as well in your application.

- You should begin thinking early about the impact of your research on the collection and use of NCA and patient registry data as a mechanism for improving health care quality in the UK.
- We expect research funded through the programme to be widely disseminated and to consider innovative methods of dissemination where appropriate. We will also encourage successful research teams to communicate the progress of their work from an early stage.
- It is important that you also demonstrate and evidence in your application a clear and achievable strategy for extracting benefit from the knowledge generated by the research beyond the end of the project.

Questions and answers

Please note that we can't go into detail on your individual projects today. If we feel that further information is needed to clarify specifics on your project we can do this outside of the call.

Q. Are you only interested in national audit and register data, or can we use local audit and register data?

A. The Insight 2019 call is concerned with research to advance the collection and use of data within NCAs and patient/disease registries. Your datasets would need to include either of these to be eligible.

We define a patient registry as a database detailing the care provided for specific client groups, the incidence and outcome of specific conditions and procedures, and organisational responses and treatments provided *for specific conditions*. Please email InsightReserach@health.org.uk if you have questions about the eligibility of the data or patient registry.

Q. Is this research call only for linkage of retrospective data (or already collected) data, or can we include prospective data collection to make linkages with retrospective data?

A. We do not have any restrictions regarding the use of prospective data. The research proposal would need to clearly identify what the prospective data is, how the data will be collected and assurances that enough data could be collected within the timescale of the study to ensure meaningful results.

Q. In the outline proposal, would you like one overall figure, or a breakdown?

A. For the outline proposal (stage 1), we are expecting an indicative figure. Indicative costs should be as accurate and realistic as possible. We will only require full details of costing at the full proposal stage (stage 2).

Q. What proportion of the funds that we ask for can be kept for staffing costs?

A. We do not stipulate how much you have to spend on any one portion of the grant. However, we expect that the majority of funding will be spent on the direct costs covering academic and/or research time spent on project. As a charity, we will only fund directly incurred and directly allocated costs of the research. We do not fund overheads.

Q. We are not a university; would we be accepted as the lead applicant?

A. The Insight Research Programme is an open award programme. Any organisation that can demonstrate the necessary skills and experience to carry out high quality research within the remit of the programme can submit a proposal. This includes non-universities, such as research charities.

However, we will only fund the directly incurred and directly allocated costs of the research. We do not fund overheads.

Q. Would the Clinical Practice Research Datalink (CPRD) or similar datasets be considered eligible for use for this programme call?

A. Since the Insight Research Programme is focused on NCAs and patient disease registries, your datasets would also need to use one of these if it is to be eligible (which could then be linked with other datasets).

Q. Is it possible to request funding for the salary of certain team members (academic staff) who would be taking part in the project team?

A. We expect that the majority of funding will be spent on the direct costs of research such as covering academic and/or researcher time spent on projects, which can include staff who are already employed at the institution or new staff (directly allocated cost and directly incurred cost). However, we will not provide funding for academic backfill or teaching replacement time in addition to the direct cost.

Q. How about non-academic staff such as information governance specialists; can they be included in staff costs?

A. You should include what you expect to be the items of direct expenditure required to carry out your research, which might include non-academic staff such as an information governance specialist.

Q. Would you support the collection of further data, such as Patient Reported Outcome Measures (PROMs), to enhance existing NCAs?

A. Patient focused audits and registries is one of our three priority areas for this grant programme. Research in this area may include data collection of PROMs to enhance existing audit and registry data (see the Notes for Applicants).

Q. Would you be happy to pay for the salary of a project manager?

A. Yes; as long as they are working on the specific research project, they would be seen as a direct expenditure required to carry out your research.

Q. Would any of the audits collected that are on the Quality Accounts, but not on the NCAs list (ie HQIP), be acceptable for use?

A. Yes. They would be eligible. Where applicable, we ask that you also provide details of the current coverage, reach and reporting of the audit/registry data included in the study. For consistency, we ask that you report against the inclusion criteria for NHS England's Quality

Accounts list for 2019/20, even if the audit is not part of the Quality Accounts. If you are unable to provide details, or it is not applicable, please indicate why in your proposal.

Q. What if the audit does not appear in the NCAs or Quality Accounts? For example, we have a partner who have their own commercial data registries. Would these be considered?

A. Since the Insight Research Programme is focused on NCAs and patient/disease registries, your datasets would also need to use one of these if it is to be eligible.

Where applicable, we ask that you also provide details of the current coverage, reach and reporting of the audit/registry data included in the study. For consistency, we ask that you report against the inclusion criteria for NHS England's Quality Accounts list for 2019/20, even if the audit is not part of the Quality Accounts.

If you have a question about the eligibility of a particular dataset/registry please email InsightResearch@health.org.uk.

Q. How important is it to link an application with the NHS Long-Term Plan?

A. We are keen for our programmes to impact on policy and practice; however, it is not an absolute must to relate project proposals to the Long-Term Plan. If a 'condition' does not feature in the NHS Long-Term plan then this does not exclude your proposal from consideration.

Q. We have a number of longitudinal surveys (or other survey data) and would be looking to link those with PROMS and audit data. Would that be acceptable, or do you just want audit and registry data?

A. We're happy to have multiple datasets as long as your project does include either an NCA and/or disease/patient registry data.

Q. My proposal fits in more than one of your strategies. Does it make a difference which strategic priority my proposal falls into?

A. For the outline proposals, we ask for applicants to select one priority area which your research proposal predominantly relates to. We recognise that, although the three priority areas are distinct, they are also intrinsically linked, and we acknowledge that research proposals may seek to address more than one area. Whichever priority area you select will not make a difference to how your outline proposal is assessed. (For further details on how your application will be assessed, please see the Notes for applicants.)

Q. What is the difference between the Insight Research Programme this year, and the previous Insight Research Programme in 2017?

A. There are similar elements between this round and the previous. However, for this 2019 Programme, there are different priority areas and we will also be trialling a new two-stage application process.

The previous round asked for both smaller-scale and larger-scale projects, while this year we are looking to fund four to five larger-scale projects with budgets in the range of £300,000 to £400,000 with a maximum duration of four years (including start-up phase).

Q. We would like to use and link the audit data to measure its impact on quality of care via a trial. Would the inclusion of a randomised controlled trial (RCT) looking at impact be out of the scope of the call?

A. We do not generally support clinical or drug efficacy research, including clinical trials. However, if the RCT links to NCAs or patient registries please email InsightResearch@health.org.uk to check eligibility.

Q. We have access to very large patient linked datasets, but they're from a specific commissioning area. We would be using that data to hopefully inform decision making at a national level. Would this be eligible for funding under the Insight Research Programme?

A. Since the Insight Research Programme is focused on NCAs and patient disease registries, your datasets would also need to use one of these if it is to be eligible. If you have a question about the eligibility of a particular dataset please email InsightResearch@health.org.uk.

Q. We're thinking about extending a local audit or registry so that it becomes national. Would this be in scope for Insight 2019?

A. The programme aims to advance the use of existing or recently commissioned NCAs and patient/disease registries. As such, we expect projects to utilise the infrastructure and networks that surround existing national audits or registries. We will, however, support the development of specific aspects of an audit/registry, as long as you can demonstrate it is in clear support of the research study and produces outputs of practical use. We will not fund the commission and set-up of NCAs or registries not already in existence.

Wrap up

If you have any further questions, please feel free to email us on the usual email address InsightResearch@health.org.uk. We are looking forward to receiving your applications by 16 May 2019. Thank you.