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**NIHR Three Research Schools’ Mental Health Programme**

**Improving mental health and wellbeing in underserved populations through collaborative research**

**Follow on funding for Phase 1 award holders**

**APPLICATION FORM**

Please ensure you have read the Research Brief and Guidance notes before completing this form.

Please email your final documents as detailed below to [c.ashmore@keele.ac.uk](mailto:c.ashmore@keele.ac.uk) by 3.30pm on Thursday 28th March 2024.

Please state ‘Follow-on Funding’ in the subject line and your documents as:

* SURNAME\_Follow-on\_Application
* SURNAME\_Follow-on\_Gantt
* SURNAME\_Follow-on\_Costings

The Gantt chart should provide timelines for the completion of work, including the timing of key milestones and deliverables. If there are several projects or work streams within the application, please specify these within the Gantt chart. You are welcome to use any visualisation software or template that works for your project, but it should be submitted as a PDF or Excel document.

If you have any questions, please email Claire Ashmore, Programme Manager, Three NIHR Research Schools’ Mental Health Programme [c.ashmore@keele.ac.uk](mailto:c.ashmore@keele.ac.uk)

**PART 1: APPLICATION SUMMARY**

|  |  |
| --- | --- |
| **Lead applicant’s details** | |
| Name |  |
| Current post(s) held |  |
| Employer Organisation |  |
| Contact email |  |
| ORCID |  |

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| --- | --- | --- | --- |
| **Research Activity Code** | | | |
| Underpinning research | ☐ | Development of treatments and therapeutic intervention | ☐ |
| Aetiology | ☐ | Education of treatments not therapeutic interventions | ☐ |
| Prevention of disease and conditions, and promotion of well-being | ☐ | Management of diseases and conditions | ☐ |
| Detection, screening and diagnosis | ☐ | Health and social care services research | ☐ |

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| **Professional Background** | | | |
| Allied health professional | ☐ | Nurse | ☐ |
| Other registered health or care professional | ☐ | Midwife | ☐ |
| Not a registered health or care professional | ☐ | Dentist | ☐ |
| Medically qualified | ☐ | Social work | ☐ |

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| **Proposal details** | |
| Research title |  |
| Expected start date |  |
| Duration (months) |  |
| Requested budget |  |
| Five key words |  |

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| **Expert Summary**  *Please summarise your research proposal in no more than 450 words.* |
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| **Plain English Summary**  *Please summarise your research proposal for a lay audience in no more than 450 words.* |
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**PART 2: APPLICANT TEAM**

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| **Collaboration details**  *Please provide below details for each co-applicant.* | |
| **Name** |  |
| **Position** |  |
| **Employer Organisation** |  |
| **Contact email** |  |
| **ORCID** |  |
| **NIHR School base (if relevant)** |  |
| **FTE contribution** |  |
| **Roles and responsibilities of team member** |  |

|  |  |
| --- | --- |
| **Name** |  |
| **Position** |  |
| **Employer Organisation** |  |
| **Contact email** |  |
| **ORCID** |  |
| **NIHR School base (if relevant)** |  |
| **FTE contribution** |  |
| **Roles and responsibilities of team member** |  |

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| --- | --- |
| **Name** |  |
| **Position** |  |
| **Employer Organisation** |  |
| **Contact email** |  |
| **ORCID** |  |
| **NIHR School base (if relevant)** |  |
| **FTE contribution** |  |
| **Roles and responsibilities of team member** |  |

Please attach a combined set of CVs. The CV for each named applicant should be of no more than 2 pages and should detail each applicant’s experience as relevant to the proposed study in a way that is most suitable for each individual.

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| **NIHR Research Schools**  *Please provide below details for each School Member that is involved in the research. Must be at* ***least two*** *NIHR Research Schools, one who must be project lead.* | |
|  | **Name of Member School(s) involved** |
| [NIHR School for Primary Care Research](https://www.spcr.nihr.ac.uk/about-us) |  |
| [NIHR School for Public Health Research](https://sphr.nihr.ac.uk/) |  |
| [NIHR School for Social Care Research](https://www.sscr.nihr.ac.uk) |  |

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| **Details of public co-applicant or collaborator**  *Only share e-mail addresses of public co-applicants or collaborators if they have access to a university / professional email account.* |

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| **Name** |  |
| **Email** |  |
| **Professional Background** |  |

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| **Name** |  |
| **Email** |  |
| **Professional Background** |  |

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| **Name** |  |
| **Email** |  |
| **Professional Background** |  |

**PART 3: DESCRIPTION OF PROPOSED RESEARCH**

Please do not exceed 6 **pages of A4 for Part 3 including** references which must be included below as part of the application form, and not submitted separately. Allowance will be made of up to half a page of A4 for space used by the instructions within this form.

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| **Details of proposed research**  *Your description should include:*   * *The* ***background*** *and context to the proposed research and why it is important, including a brief overview of relevant known literature and how your proposed research adds to the evidence base* * *The main* ***questions/aims*** *of the project* * *A description of the* ***design*** *and methodological approach for your proposal, data collection and analysis, including a justification for sampling and anticipated challenges/risks for the design and the proposed solutions, including consideration of equality, diversity and inclusion.* * *Expected* ***outcomes*** *from the research* * *Key* ***ethical*** *considerations and requirements for related approvals* * *The* ***timetable*** *and milestones for the project, including dissemination strategy.* |
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| **Equality, diversity and inclusion**  *Please set out how you will address EDI considerations in your proposed activities.*  [*Word limit for this section: 450 words*](https://www.nihr.ac.uk/about-us/our-key-priorities/equality-diversity-and-inclusion/) |
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| **Plan for pathways to impact and knowledge exchange activities**  *Please set out your plan to support impact from the research.* |
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| **Outcomes**  *Please set out how you expect the planned activities to lead to the development and submission of a research proposal following your Phase 1 award* |
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**PART 4 - PUBLIC INVOLVEMENT**

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| **Public involvement**  *Describe the involvement of patients/public/practitioners/people with lived experience/carers in developing this application.* |
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| **How will patients/public/practitioners/people with lived experience/carers be involved in your research?**  *Please describe who (i.e. particular demographics, how many, what relationships will be created etc) you would like to involve, why them and at which stages of your research you are expecting to involve them.* |
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**PART 5: RELEVANCE OF PROPOSED RESEARCH**

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| **Relevance of proposed research** (Please do not exceed 1 page of A4)  *How your proposed research is relevant to, and supports, the Three Schools’ Mental Health Research Programme.* |
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| **Will this project link to other parts of the NIHR, e.g. ARCs, Incubators? If yes, please describe.** |
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| **Will this project be eligible for adoption to the NIHR Clinical Research Network (CRN) portfolio?**  *If relevant, explain how you will work with the* [*CRN*](https://www.nihr.ac.uk/explore-nihr/support/clinical-research-network.htm) *to support the recruitment to your research.* |
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| **What are the likely impacts on policy and/or practice from this project** (we appreciate that these will evolve over time)? |
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| **UKCRC Health Research Classification System (**[Mental health - HRCS Online](https://hrcsonline.net/health-categories/mental-health/))  Please detail all that are relevant |
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**PART 6: RESOURCES**

Please complete the accompanying financial resources form and include a summary below.

The total requested should be appropriate to the research design and reflect good value for money.

You should describe any financial contributions to be made through host institutions, project partners or others to support the research for which funds under this programme are sought.

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| **Total funding requested** | |
| Salary costs |  |
| Non-staff costs |  |
| Overheads |  |
| **Total** |  |
| **Justification**  *Please provide a justification for the resources requested which should include how each item was calculated with full justification provided. Please set out how the proposed research offers value for money* | |
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**PART 7: DECLARATIONS**

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| **Lead applicant**  *I confirm that the information given on this form is complete and correct, that all co-applicants on this form have seen a copy of this application, and that I shall be actively engaged in the work of this project and responsible for its overall management.* |
| Signature:  Name:  Date: |
| **Head of Department/Institutional signatory**  *I confirm that I have read this application and that, if funded, the work will be accommodated and administered in this institution/organisation and that the applicants for whom we are responsible will undertake this work. All necessary facilities will be made available for the purposes of this research.* |
| Signature:  Name:  Date: |
| **Finance authority**  *I confirm that I have checked the financial details of this application, and that this institution is prepared to carry out the work outlined at the stated costs and to administer the award if successful. I confirm that the staff gradings and salaries quoted in this application are in accordance with the practice and scales applying in this Institution/Organisation.* |
| Signature:  Name:  Date: |