



Guidelines

Clinician Research Leadership Award 2021

Updated: 26.05.21

1. General

1.1 Introduction

A key priority in the new Irish Cancer Society strategy 2020-2025¹ is ensuring that Irish patients benefit from world-class cancer research and expertise. Central to this focus is fostering and cultivating research talent to ensure that Ireland is in a position to attract and retain world-class cancer research leaders whom will drive evidence-based improvements in patient care. In line with this, the Society seeks to work in partnership with the medical community to drive forward fundamental change across the health research landscape as well as creating an environment where pioneering cancer research can take place.

As part of this this commitment, the Irish Cancer Society wishes to invite eligible consultants in oncology-related specialist fields to submit an application for the Clinician Research Leadership Award 2021.

The absence of protected time for healthcare professional's involvement in research is recognised as a significant impediment to the sustained evolution of high quality Irish cancer research.

As called out in the 2017 National Cancer Strategy², the Irish Cancer Society recognises that cancer clinicians who have honed their expertise in leading international research centres and are looking to become the next generation of research leaders in Ireland particularly require support and protected time to be in a position to undertake and drive world-class cancer research in Ireland at a pivotal time in the evolution of their research career.

Therefore, the purpose of the Clinician Research Leadership Award 2021 is to buy out the time of an outstanding individual **who has returned to work in Ireland in the last 5 years**.

The successful applicant of this award will be supported with funding to **enable them to spend two days away from clinical and administrative commitments per week over a**

period of 2 years to focus purely on developing and growing an important aspect of Irish cancer research.

This is intended to be a **transformative investment** for an oncology consultant who has already demonstrated that they are capable of leading active, patient-focussed research but needs the extra support to enable them to accelerate their trajectory to leading and directing research based in Ireland.

1 Irish Cancer Society Strategic Plan- 2020-2025 (<https://www.cancer.ie/about-us/irish-cancer-society-strategy-2020-2025>)

2 National Cancer Strategy 2017-2026 (<https://www.gov.ie/en/publication/a89819-national-cancer-strategy-2017-2026/>)

Important Dates*

Tuesday 13 th July 2021 @ 3 pm	Deadline for online Full Application submission
July/August 2021	Review of applications
Mid-September 2021	Invitation to interview
Late September 2021	Interviews (online)

**Dates are subject to change. Applicants must be available to attend the interview online.*

1.2 Funding

The maximum total funding available is €75,000 per year. The maximum funding period is 24 months (i.e. maximum of €150,000 over 2 years).

Please note that this award will fund protected time for the recipient and is **not** for funding a specific research project or consumables.

2. Eligibility Criteria

2.1 Candidates must:

- Have returned to work in Ireland within the past 5 years (from May 2021) *
- Currently be resident and hold a consultant appointment in a public hospital in the Republic of Ireland.
- Be affiliated with a higher education institution in the Republic of Ireland that is one of the HRB's approved host institutions: <https://www.hrb.ie/funding/funding-schemes/before-you-apply/all-grant-policies/hrb-policy-on-approval-of-host-institutions/>

- Demonstrate a clear and unambiguous high level of support from their host education institution, hospital, department and peers to be able to make use of this award.
- Have a minimum of 3 first or senior authorships in cancer-related, peer-reviewed publications.
- Be a member of Cancer Trials Ireland.
- Have a promising track record in cancer research exemplified by, for example, clinical trials, national/international research partnerships etc.

***Extended Leave**

The Society recognises that applicants may have had to take a period of extended leave from their careers for a number of reasons including carers, maternity, paternity, adoptive, parental and medical leave.

To support those who have taken extended leave there may be an opportunity for applicants to extend their period of eligibility for this award. Please contact grants@irishcancer.ie for more information.

In addition, assessment of applicants will take into consideration any extended leave taken. This in recognition of the fact that activities undertaken during a period of time may be proportionately less due to a period of extended leave during that time period.

In the 'applicant details' section there is an optional question where applicants can detail any extended leave.

2.2 Eligible Oncology-specialist fields include:

- Surgery
- Radiation
- Haematology
- Molecular medicine/Pathology
- Psychiatry/Psycho-oncology
- Paediatrics
- Gynaecology
- Palliative Medicine
- Medical oncology
- Geriatric oncology

Please note: Candidates holding a Senior Clinical Psychologist appointment in the area of psycho-oncology will also be considered. Consultants must hold the requisite qualifications necessary for a consultant-level appointment in their chosen field. Eligible candidates will

only be considered from specialities that spend the vast majority, if not all of their time focussing on cancer care. This is an award aimed at providing the bandwidth for an individual to develop research leadership opportunities, it is not intended to support development of general service approaches in cancer care.

2.3 Cancer Type Eligibility

While cancer outcome has significantly improved in Ireland in the last 30 years with 6 in 10 cancer patients now surviving at least 5 years after their diagnosis, the pace of progress has not been the same for every cancer. Globally and nationally survival has not dramatically increased in some cancer groups such as rare cancers, cancers affecting children and young adults, cancer in older people, as well as hard-to-treat cancers like primary and metastatic forms of lung, pancreatic and oesophageal cancers, and brain tumours. These cancers continue to have unmet needs in terms of a lack of effective treatment options and/or a lack of research capacity within the area, both of which contributes to inferior survival and outcome.

A key strategic priority for the Irish Cancer Society over the next five years is research centred on improving the treatment options for every person in Ireland affected by cancer, and ensuring that the gap in survival between different cancer groups is closed.

For the Clinician Research Leadership Award, applications focused on any type of cancer are welcome and all applications irrespective of cancer-type will be reviewed equally based on merit. However, the Irish Cancer Society would like to encourage applications from specialists working on a cancer with an unmet need (as described above) to consider applying for this award.

2.4 Alignment with the clinical trials landscape in Ireland

The Clinician Research Leadership Award aims to invest in an individual that can greatly grow and leverage on their existing background to tangibly advance a sector of clinical cancer research in Ireland over and above what has already been achieved.

The clinical cancer research landscape in Ireland is underdeveloped and annually only a very small proportion of patients get to take part in clinical trials across the country. The ongoing COVID-19 pandemic has hampered clinical trial accrual even further and this is likely to have long-term ramifications on cancer treatment. Over the course of our new strategy, the Irish Cancer Society is dedicated to broadening our support for cancer clinical trials in Ireland, continuing to support pharmaceutical-based trials involving Investigative Medicinal Products (so called IMP trials), in addition to expanding the reach to non-pharmaceutical-based (non-IMP) clinical trials and interventions (including other investigator led medicinal, radiation and surgical trials, translational and survivorship studies). Such expansion of the clinical trial portfolio will be aimed at improving care and outcome for those affected by cancer, and

maximising the number of individuals affected by cancer with access to a diverse portfolio of clinical trials and studies in Ireland.

As part of this award the Irish Cancer Society will support a Clinician Leader who aims to drive forward these clinical studies in Ireland, and will support activities involving both IMP and/or non-IMP studies.

As the national clinical cancer research organisation, Cancer Trials Ireland is in a pivotal position to provide supportive infrastructure to best leverage from the award and hence as part of this award the Clinician Leader must also demonstrate a clear partnership Cancer Trials Ireland.

3. What does an ideal candidate look like?

This section is to give applicants an idea of what the award is hoping to achieve and the type of candidate that we are seeking.

This award is intended to be a **transformative investment** in an individual who demonstrates great potential in driving and leading innovative new Irish cancer research. This individual will have returned to work in Ireland in the last 5 years.

The ideal candidate is someone who has a demonstrable track record in cancer research commensurate with their career stage and some involvement in clinical trials and studies. As stated in Section 2.3, these trials or studies may be in the form of pharmaceutical trials (IMP) or non-pharmaceutical-based trials or interventions. They will present a persuasive case to a review panel consisting of top international cancer experts and Irish patients that our investment can greatly grow and leverage on their existing background to tangibly advance a sector of cancer research in Ireland over and above what has already been achieved.

Applicants may not have the most extensive research track record but the experience they have will display their passion for research and the potential for them to utilise dedicated time to undertake new research aimed at having a positive impact on patients.

The ideal candidate will have previously demonstrated that they can build successful national (outside their own hospital) and international networks with others in the cancer research space, not only those within their own environment but with people and networks from different disciplines.

Their plans for the award will be strong and have demonstrable potential to be impactful, while also being realistic about what is achievable in the time bought-out from this award. They will also display their passion to achieve these plans and their ambition to lead them forward.

The candidate will enjoy the full support of their peers and institution to permit them to be taken out of front line activities for the two days per week. Their host institution must also make an unambiguous commitment to support their work and be able to undertake the necessary administration (contract sign off, financial reports etc.) associated with the award in a timely manner.

In short, the ideal candidate is someone who is on the cusp of becoming a great leader in cancer research in Ireland, enjoys a fully supportive institutional environment and the buy-out time afforded by this award would present them a unique and transformational opportunity to achieve this.

4. Academic Collaborator

As part of the application, the applicant must identify an academic collaborator. The role of the academic collaborator is to provide guidance and support in terms of the academic aspects of the award such as grant administration, laboratory, technical or other healthcare expertise (nursing, dietetics, physiotherapy etc.) that may be required by the applicant during the award.

The academic collaborator may also assist in establishing further research networks nationally and internationally.

The academic collaborator should be an established senior academic with a proven track record for research, and based in a HRB approved host Institution within Ireland.

A letter of support from the academic collaborator will be required.

5. Mentorship

A cornerstone of many high performing researchers is their integration into an ongoing network of direct and indirect mentorship and supportive counsel. The Society wishes to call out and reinforce the importance of this often undervalued aspect of a leader's career development and evolution.

As part of the application the expert review panel will examine the candidate's articulation of the arrangements that are and will be in place to support them as a mentee. Mentors may include individuals and/or committees who will undertake these roles; individuals of any relevant background who will ensure a rounded evolution of the applicant's further career, will help benchmark, will broaden their expertise base and collaborative network (nationally/internationally) and foster and champion the further development of the candidate.

A mentor should be an established senior academic or clinician with a proven track record for research and mentorship.

Please note if the mentor chosen for this application is a senior academic in a HRB approved host institution in the Republic of Ireland, then the mentor may also fulfil the role of academic collaborator on the grant.

A letter of support from the mentor will be required.

6. Research Impact

In line with the new Irish Cancer Society strategy 2020-2025, the Society will place a greater focus on maximising the impact of the research it funds. Applicants will now be required to complete an impact plan as part of the application process. The Research Impact Framework (RIF) describes the Society's approach to impact and acts as a guide for grant applicants. It is recommended that you familiarise yourself with the RIF (Appendix 2) when completing the impact plan (see Section h).

7. Application Process

How to Apply

Applications must be completed and submitted through the Irish Cancer Society Gateway Grant Tracker online system. In order to submit an online application you are required to register at the following address: <https://grants.cancer.ie>.

7.1 Overview of the Application Process

When you enter your login details you will be directed to the Home page. From here you can:

1. Make a new grant application
2. Access previous grant applications

7.2 Making an application

To make a new grant application click on the 'My Applications' tab on the left hand side of the page, and click the 'New Application' button.

You will then be asked what Grant Type you would like to apply for. Click 'Apply' for the Grant Type detailed as 'Clinician Research Leadership Award 2021'.

Once you have clicked 'Apply' a pop up screen will appear in which the eligibility criteria are detailed. Please read each criteria and indicate if you meet that criteria by placing a tick in the box next to the criteria, leaving the box blank where you do not meet the criteria.

You will not be able to proceed if you cannot confirm that all criteria are met.

8. Application form

Once you have confirmed that you meet all the eligibility criteria you will be directed to the application page.

There are 10 sections in the application form

- a) Introduction
- b) Project Outline
- c) Applicant details
- d) Academic collaborator
- e) Mentor
- f) Plans for the Award
- g) PPI Plan
- h) Sharing of Research Findings Plan
- i) Impact Plan
- j) Buy-Out Time
- k) Organisational Support

a) Introduction

Information on the Clinician Research Leadership Award 2021.

b) Project outline

- Expected grant start date
 - This is an estimate start date. Must be Q4 2021.
- Duration of the grant
 - This is defaulted to 24 months
- Host institute
 - The HRB approved host institute that you are based at. The grant contract will be administered by this host institute.
- Hospital name and address
 - Please identify the hospital that you are employed at and from which the clinical time will be bought out. Please note, to be eligible for this award this must be a public hospital.

- Oncology-specialist field
 - Please indicate which oncology-specialist field you work in. Eligible Oncology-specialist fields are listed in Section 2.2.

- Cancer Type(s)
 - Please indicate your cancer focus, are you advancing research on particular anatomical/biochemically defined forms of cancer or in recognised divisions of cancer (paediatric, geriatric etc.) or certain specialisms (diagnostics, radiotherapy, surgery etc.)?

c) Applicant details

Applicant CV

In this section you are required to upload your CV, completed using the CV template.

To upload your CV click 'Attach' then locate the file to be attached, then click 'Attach'.

Extended leave (optional)

Assessment of applicants will take into consideration any extended leave taken. This in recognition of the fact that activities undertaken during a period of time may be less due to a period of extended leave during that time period.

Please indicate if you have taken extended leave since returning to Ireland. Eligible leave includes- carers, maternity, paternity, adoptive, parental, medical leave.

Please detail the amount of time taken.

d) Academic Collaborator

As part of the application the applicant must identify an academic collaborator. This person must be affiliated with a HRB approved host Institution within Ireland. The role of the academic collaborator is to provide guidance and support in terms of the academic aspects of the research, such as grant administration, laboratory, technical or other healthcare expertise required by the applicant during the award.

Add academic collaborator on system

Please note your academic collaborator will have to confirm participation in the application using the online system.

To add your academic collaborator, you can search for them by entering their email. If the academic collaborator has already created an account, then they will appear on the list. To add them as your academic collaborator or click 'Select'. Please note that on saving, the contact will be added to the application as an academic collaborator and they will receive a notification of this via email

If your academic collaborator does not already have an account, you can click 'Add a New Contact' and enter their name and email address. Please note that on saving, the contact will be added to the Application as an academic collaborator. They will receive a notification of this via email.

The academic collaborator will be directed via the email to log on to the system and confirm their participation.

Information on academic collaborator

Please detail why you have chosen your academic collaborator and how they will support you over the period of the award. **(250 words max)**

Upload academic collaborator CV

In this section you are required to upload the CV of your academic collaborator*, completed using the CV template.

To upload the CV click 'Attach' then locate the file to be attached, then click 'Attach'.

Please note, if your academic collaborator and mentor are the same person, you can upload one CV to cover both sections d & e

Upload academic letter of support

In this section you are required to upload the letter of support of your academic collaborator*, completed using the letter of support template.

To upload the letter of support click 'Attach' then locate the file to be attached, then click 'Attach'.

Please note, if your academic collaborator and mentor are the same person, you can upload one overall letter of support covering both aspects detailed in Sections d & e

e) Mentorship

As part of the application, the applicant must articulate a considered approach to plans for real engagement with individuals or committees who will support and mentor their further evolution as a research leader.

One person must be nominated who will agree to be listed and contribute their support to the application. This person must be an established senior academic or clinician with a proven track record for research and mentorship. **If the mentor is a senior academic within a HRB approved host institution in the Republic of Ireland, they may also fulfil the role of academic collaborator for this grant.**

Add mentor on system

Your nominee will have to confirm participation in the application.

To add them, you can search for them by entering their email. If the mentor has already created an account then they will appear on the list. To add them as your nominee click 'Select'. Please note that on saving, the contact will be added to the application and they will receive a notification of this via email.

If your nominee does not already have an account, you can click 'Add a New Contact' and enter their name and email address. Please note that on saving, the contact will be added to the Application as a mentor/collaborator. They will receive a notification of this via email.

Information on the mentor

Please detail why you have chosen your mentor and how the arrangements they are contributing to will support your growth as a rounded research leader over the period of the award.

Please detail any other individuals or committees that will support and mentor your further evolution as a research leader. (300 words max)

Upload mentor cv

In this section you are required to upload the CV of your mentor*, completed using the CV template.

To upload the CV click 'Attach' then locate the file to be attached, then click 'Attach'.

Please note, if your academic collaborator and mentor are the same person, you can upload one CV to cover both sections d & e

Upload mentor letter of support

In this section you are required to upload the letter of support of your mentor*, completed using the letter of support template.

To upload the letter of support click 'Attach' then locate the file to be attached, then click 'Attach'.

Please note, if your academic collaborator and mentor are the same person, you can upload one overall letter of support covering both aspects detailed in Sections d & e

f) Plans for the award

Research experience:

Please detail your research experience to-date and in an oncology-related specialist field.

Place special emphasis on both nationally and internationally collaborative research success, which may include clinical trials (IMP and/or non- trials), outlining your role in the management and/or coordination of such collaborative research **(500 words max)**.

Planned Research Projects and Collaborations

Please outline current and planned research projects and collaborations both nationally and internationally, and how the time afforded to you by this award will allow you to develop and grow them over and above what would be possible without the buy-out time.

Please include details of what organisations and individuals you will need to engage with and how you will engage with them. **(700 words max)**.

This should include-

- Research projects and collaborations
- Commercial projects and collaborations
- Involvement with cancer clinical trials and planned partnership with Cancer Trials Ireland*

When completing this sections please keep in mind that the award is aimed at investing in an excellent up-and-coming oncology leader who will develop a diverse clinical cancer research portfolio. It is not focused on funding one distinct research project (see Section 1.1 and Section 3). As such the applicant should utilise this section to articulate the diverse range of clinical research activities that they will undertake during the lifetime of this award.

***Please note that a Letter of Support from Cancer Trials Ireland is required as part of this application**

Transforming
Research
Landscape:

Please describe how your research plans described in the above section will ensure change in your field in the next 2 to 5 years as a result of you receiving this award. How does this fit into your vision for cancer research in the area? **(500 words max)**

In particular, this should include how the following will be impacted and enhanced:

- The lives of those affected by cancer
- Research networks in Ireland
- Innovative cancer research in Ireland

Motivation for
applying for the
award:

This award is intended to be a transformative investment in an individual who is on the cusp of becoming a leader in cancer research in Ireland.

Please detail your motivation for applying for this award and how this award could be transformative to you and your career. In this section please also describe why you are the best candidate for the award **(600 words max)**.

g) PPI plan

The Irish Cancer Society is dedicated to putting patients, families, survivors, supporters, and the public at the very heart of what we do. Public and Patient Involvement (PPI) in the research process ensures that research is meaningful and of benefit to those affected by cancer. PPI can be involved at any stage of research, from development and design to interpretation and dissemination.

Along with building research collaborations nationally and internationally it is important that the successful applicant also uses the time bought out to build relevant PPI networks in Ireland. By building these networks it is expected that the applicant will incorporate PPI in their current and future research, for example including PPI applicants as part of future grant applications. ***It is strongly recommended that applicants read Appendix 1 'Public and Patient Involvement (PPI) in Research' Guidelines prior to beginning work this section.***

Please note: The PPI Review Panel will review this section. It should be written in a manner that is accessible to a non-scientific audience.

[PPI plan question](#)

Please detail plans to build on existing or establish new PPI networks in Ireland that are relevant to your research and how you plan to include PPI in your research going forward (300 words max).

h) Sharing of Research Findings Plan

Please provide an outline of a communication plan describing how outcomes from your time as Clinician-Researcher will be shared with-

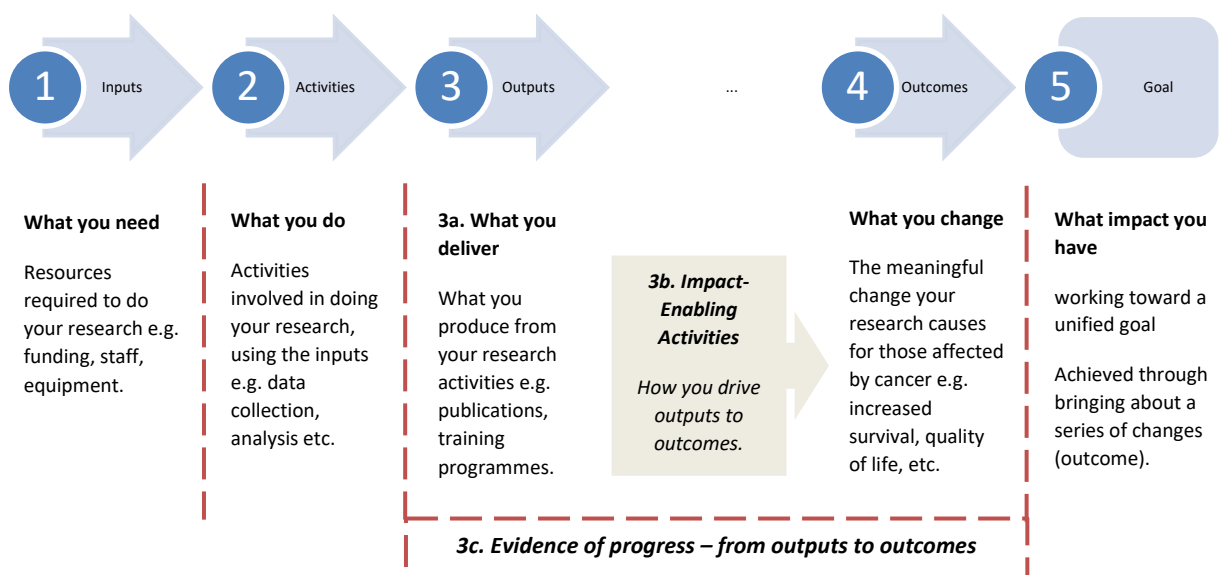
- Scientific, clinical and healthcare communities
- Key patient and public stakeholders

It is strongly recommended that applicants read Appendix 1 ‘Public and Patient Involvement (PPI) in Research’ Guidelines prior to beginning work this section.

Please note: The PPI Review Panel will review this section. It should be written in a manner that is accessible to a non-scientific audience (250 words max)

i) Impact Plan

Please consult the Research Impact Framework (RIF) (Appendix 2) when completing this section. The impact plan details how the input of research funding ultimately results in meaningful impact to people affected by cancer. This is detailed using a sequence of steps, as follows:



It is important to start thinking about the pathway to impact from the start of the project. This will provide a strong foundation when a grant gets underway. As such, plans should be as comprehensive and considered as possible. The recommended approach is to develop the impact plan by working backwards, from goal to inputs.

As such, the impact plan consists of:

5. Goal
4. Outcomes
- 3c. Impact-enabling activities
- 3b. Evidence of progress
- 3a. Outputs
2. Activities
1. Inputs

Please note: Both the PPI and Scientific Review Panels will review this section. **It should be written in a manner that is accessible to both reviewer groups.** Further details on each section follows:

5. Goal	This is the goal of the Irish Cancer Society. It is pre-determined by the Strategy 2020-2025 and cannot be changed. This goal is that <i>‘by 2025, 3 out of 4 Irish cancer patients will survive their diagnosis and everyone affected by the disease will have access to world-class treatment, care and support. In future, no one in Ireland will die from cancer.’</i> This is the goal that all research funded by the Irish Cancer Society should be working towards.
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4. Outcome	To reach the above goal, a number of core changes or ‘outcomes’ must first be accomplished. These outcomes, identified through stakeholder consultation, will drive us toward our goal. You must select at least one outcome from the below list: <ul style="list-style-type: none">— Treatments and diagnostics increase survival.— Treatments and diagnostics increase the quality of life of people affected by cancer.— Increased numbers of patients accessing clinical trials and early access programmes.— Screening increases survival.— Improved care and support increase survival.— Improved care and support increase the quality of life of people affected by cancer.
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— People affected by cancer feel more empowered in their cancer journey.

You may choose 'other' if you feel strongly that none of the other outcomes covers the potential outcome of your research. If other is selected, then more detail will be required on the proposed outcome.

By targeting a strategic outcome, every funded study funded is contributing to the Society's goal.

3a. Outputs Planned outputs for the project e.g. publications, policy document, patents, information leaflets, and training programmes. (150 words max).

These are just examples and are not a comprehensive list. The appropriate outputs will vary for each type of project and what outcome has been selected.

b. Impact-enabling activities

An output is unlikely to achieve a desired outcome on its own. Impact-enabling activities bridge the gap between *outputs* and *outcomes*.

Please details what activities need to occur for the outputs to impact the identified outcome. When will these activities take place? Information can be provided in narrative or bullet point format (300 words max).

For example, the output could be the publication of a paper on a new drug combination evaluated in vitro, and ex vivo on patient samples. The intended outcome would be "Treatments and diagnostics increase survival" and the impact enabling activity could be a workshop with key stakeholders in the field to discuss how best to develop this translational research further.

c. Evidence of progress

Please detail how you will measure the effectiveness of impact-enabling activities? What evidence can be used to show this? Indicators may be qualitative or quantitative (300 words max).

Using the example provided in 3.b, the evidence of progress could be the development of a collaboration on a grant application to develop the research further.

2. Activities

Activities that will take place as part of the research project. A high-level breakdown of what will be done over the course of the funding period is sufficient. Bullet points may be used (150 words max).

1. Inputs

Please detail the resources needed for the project. High-level information is sufficient. Bullet points may be used (150 words max).

j) Buy-Out Time

Please detail the plan you will have in place to facilitate your absence from clinical and academic duties at your host institution/s.

The plan should include details on who will cover your academic and clinical activities during the buy-out time and what days of the week you plan on using the buy-out time (**300 words max**).

k) Organisational Support

As the grant will be managed by the host institute but the time-bought out by the award will be time from clinical work in the hospital it is critically important that the applicant has support from both the-

- host institute
- hospital

The terms and conditions of the award will be managed by the **host institute**. The host institute must be aware of the application and be demonstrably able to process and discharge all aspects of the award contract should the applicant be successful. This will likely require grant terms and conditions negotiation, financial reporting etc.

Cancer treatment services are busy and manpower is limited. Therefore, it is very important that the **hospital** is aware of the application and that there is clear evidence that the broader team/institutional environment of the applicant's clinic is fully supporting this application in any and all ways possible and that the award may be leveraged by additional local supports.

It is the responsibility of the host institute to ensure that the applicant has the full support of the hospital.

Failure to follow through in a timely manner on the commitments made, in the acceptance, processing or discharge of this award may invalidate the selection and lead to it being awarded to the secondary candidate.

The organisations may wish to complement this award with other strategic innovations in support of leveraged research activity.

Organisational support question

Please detail the steps, both in the host institute and in the hospital, that will be need to be taken to ensure organisational sign-off for this award (two days a week time bought-out for two years) should you be successful.

If you have academic/teaching/other commitments these must also be considered. **(400 words max).**

Organisational Letters of Support

An unequivocal and strong letter of support is required from both the host institute and the hospital.

The letter of support must make clear that the organisation is aware of the application and fully commit to supporting processing the award should the applicant be successful

It must also be clear in both letters of support that the host institute and hospital have communicated on the application and agree to support the application.

The 'Letter of Support' template must be used (downloadable in this section on the online application form).

Upload organisational letters of support

To upload the letters of support click 'Attach', locate the files to be attached and then click 'Attach'.

9. Submission of the Application

Once it has been verified that all required questions are answered in the correct manner on the application then the application can be submitted.

In the Validation section of the application please click "Save and Close" and then click on the "Submit" button in the right hand side of the Application Summary page.

The application deadline is **3pm Tuesday, 6th July 2021.**

10. Assessment Procedure

Incomplete and ineligible applications and those submitted after the deadline will not be assessed.

Applications will be reviewed by both international academic reviewers and people affected by cancer (PPI representatives). Each reviewer will provide scores and feedback on each application. Sections of the application will be assessed in the following way:

	PPI Reviewer	Scientific Reviewer
Full application	<ul style="list-style-type: none"> • PPI Plan • Sharing of Research Findings • Research Impact Plan 	<ul style="list-style-type: none"> • Applicant details • Academic collaborator • Mentorship • Plans for the Award • Research Impact Plan • Buy-Out Time • Letters of Support

We will endeavour to ensure that the reviewers chosen do not have any conflicts of interest regarding the applications they are assessing.

Please note that the scientific reviewers will not be assessing any of the PPI review sections, and vice versa. As such, it is vital that the sections reviewed by the PPI Panel are written in accessible **plain English**. Failure to do this may result in the PPI representatives not being able to accurately score these sections of your application.

11. Assessment outcome

Reviewer scores will be compiled and evaluated during a review panel shortlisting meeting. Applicants will be informed of the outcome of review by email. Shortlisted applicants will be invited to interview.

12. Next Stage: Interviews

Shortlist applicants will be invited to attend online interviews during the last week in September 2021. The interview panel will be made up of scientific and PPI reviewers, in addition to an Irish Cancer Society representative.

Applicants will be asked to present a summary of their application, including a response to the review panel's comments. This will be followed by a question and answer session.

The final funding decision will be co-decided by the scientific and PPI reviewers.

13.Application Checklist

The following must be completed ONLINE by **3pm Tuesday 6th July 2021**:

1. Completed Application Form
2. Applicant CV
3. Academic collaborator CV
4. Academic collaborator Letter of Support
5. Mentor CV
6. Mentor Letter of Support
7. Cancer Trials Ireland Letter of Support
8. Host Institute Letter of Support
9. Hospital Letter of Support

14.Contact

If you require assistance with the online application system or have any queries about the application, please contact us:

Email: grants@irishcancer.ie

Please note queries relating to the application will only be answered up to XXX.

Questions in relation to any issues with the online system will be taken until close of the award.

Appendix 1: Public and Patient Involvement (PPI) in Research Guidelines

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Appendix 1: Public and Patient Involvement (PPI) in Research Guidelines

1. Background

The Irish Cancer Society is committed to putting patients, families, survivors, carers, supporters and the public at the very heart of what we do. In keeping with this commitment, we are embedding Patient and Public Involvement (PPI) in our research processes. The majority of Irish Cancer Society grant calls will require researchers to detail their plans for including patients in their proposed research. These involvement sections will be reviewed by people affected by cancer (PPI reviewers).

This document is intended as an additional resource on PPI for researchers planning on submitting a grant application to the Irish Cancer Society.

Information specific to individual grant calls can be found in the Guidelines to Applicants document for each call.

2. What is Public and Patient Involvement in research?

Interaction with patients and the public can be contextualised in the many different ways people with cancer can interact with research, specifically by means of *participation*, *engagement*, and *involvement* outlined below.

Participation

A person with cancer may be recruited into, and take part in, a research study e.g. a clinical trial, and provide data of some form.

Engagement

Engagement is when the researcher communicates and disseminates research information, for example, at science festivals, public talks, television programmes, or radio.

Involvement

Involvement is distinct from participation or engagement. Where participation and engagement are conducted ‘to’, ‘about’, and ‘for’ people with cancer, involvement is conducted ‘with’ or ‘by’ people with cancer¹. People with cancer can be involved at any stage of the research process, from conceptualisation to dissemination.

Involvement does not refer to researchers raising awareness of research, sharing knowledge or engaging and creating a dialogue with the public. It does also not refer to the recruitment of patients or members of the public as participants in research. However, these different activities – involvement, engagement and participation – are often linked and, although they are distinct, can complement each other¹.

3. Why is PPI important?

PPI is becoming increasingly important in research. The Irish Cancer Society is committed to expanding the involvement of those affected by cancer in the research that the Society funds, and in the funding decision-making process. This commitment is reinforced by the Irish Governments’ National Cancer Strategy (2017-2026)², which highlighted:

“Patient involvement in cancer research improves the relevance of research questions, the quality, acceptability and feasibility of research conduct and the likelihood of uptake of research outputs.”

PPI creates a partnership between people affected by cancer and researchers. It is more than a tokenistic gesture to comply with policy, but can provide a real and substantial benefit to all key stakeholders. While not without its challenges, PPI can:

- Promote a sense of empowerment and value among patients³
- Enhance patient trust in researchers³
- Improve researchers’ insight into their own research area³
- Help researchers identify barriers and come up with solutions to research³

- Increase trust and acceptability in the patient community of research findings³
- Inform the provision, access, and location of healthcare services⁴
- Improve the dialogue between healthcare professionals and patients⁴

Specific to the cancer setting, PPI may be used by patients as a resource, to make sense of living with a chronic condition⁵. People with cancer report feeling enhanced knowledge and skills from taking part in PPI, as well as feeling they contributed to research by providing a lay perspective (i.e., practical knowledge about being a patient with cancer)⁶.

As such, PPI can be a valuable tool in the research process for both patients and researchers, and the Irish Cancer Society aims to continually to build on its PPI work.

4. PPI is a partnership

PPI is about creating a partnership between researchers and people affected by cancer, whereby all contribute collaboratively in varying degrees towards the research process or the research output. Each voice is of equal importance in PPI.

Involving people affected by cancer as early as possible in your planning process, and ensuring on-going clarity about their activities, roles and goals, is crucial to the success of PPI

Be clear from the outset what will be required from all involved in the patient involvement activities. A good exercise to do is to complete a role description for the role of the patient involved along with a description of what your role (the researcher) is with regards to PPI. This is beneficial as it is clear to both the researcher and the person affected by cancer what exactly is involved from both sides from the outset.

Relationship building is key for successful PPI. Having an open and respectful relationship is key to successful PPI. A number of different factors are important for a good relationship between the PPI contributor and the researcher(s), these are listed below.

- A good communicator including keeping in touch as needed
- Shows respect, empathy and understanding
- Has time for each other and the PPI activities

It is a good idea to keep in mind this relationship aspect of PPI when designing the Patient Involvement plans.

5. PPI and the funding process

The majority of Irish Cancer Society application forms contain sections relating to patient involvement. These sections will be reviewed by PPI reviewers and in most instances PPI reviewers will contribute to funding decisions along with scientific reviewers. As such, the review of applications is undertaken by scientific and PPI reviewers. In doing this, we ensure that the research we fund is of the highest scientific quality, while being relevant and important to people affected by cancer.

PPI reviewers are people effected by cancer including patients, survivors, family members and carers who have all received appropriate reviewer training.

6. PPI Sections in the Application

The following sections give information on PPI sections in application forms. Please note that not all sections outlined below may be in all application forms.

These sections will be reviewed by PPI reviewers. For some grant calls the PPI reviewers will score the sections and provide feedback and for other grant calls the PPI reviewers will give feedback only. This information will be given in the call guidelines.

6.1. Project Summary

A project summary should provide an overview of the research proposal, written in a format appropriate and understandable to your audience. A good summary should describe what you intend to do, why you intend to do it, and establish context. A clear understanding of the research project

will allow the PPI panel to effectively evaluate other sections, such as the Patient Involvement Plan and Sharing of Research Findings sections.

For some awards, particularly those that include human participants, the PPI panel will review the practicalities and feasibility of the project and its relevance to people affected by cancer. Therefore, it is important to be clear and detailed.

Remember, your audience, who will be people affected by cancer, **may not** have a scientific background. Therefore, ensure the project summary is written in plain English (please see Section 6). However, an important consideration when writing the project summary is to determine the right balance between pitching it to the correct lay audience and oversimplifying it too much. As such, the summary should be written in clear plain English, but also adequately conveys the details on the research question, research plan and what makes that particular research project important. The abstract may still have some “jargon” or scientific names when necessary, once they are clearly defined in understandable terms.

6.2. Patient involvement plan

The patient involvement plan should detail how patients will be involved in the research project.

It should be well thought out and as detailed as possible. Vague plans are to be avoided. The patient involvement plan should be given as much consideration as the scientific sections in the application.

It is strongly recommended that plans include specific details such as how many patients will be involved, how these patients will be recruited, what exactly the patients will be doing etc.

As with any project we acknowledge that patient involvement plans may change over the course of an award but detailed plans are still sought at the application stage.

Please note that activities outlined in the Patient Involvement plan are required to be included in the Gantt chart (when a Gantt chart is required as part of the application).

Information on types of involvement:

Involvement can be incorporated into almost any stage of the research process, which should be planned from the very beginning of study design. Some examples of how patient involvement can be incorporated into research includes (but is not limited to):

- as members of a patient advisory group for the project-
 - advising on the direction of the research; *
 - commenting on and developing patient information leaflets, consent forms, questionnaires or other research materials;
 - commenting on and developing dissemination materials (e.g., conference abstracts, posters, presentations);
- user and/or carer researchers carrying out the research e.g. conducting interviews, co-facilitating focus groups, assisting in the interpretation of results.
- Involvement in organising and running public and patient engagement activities;
- Input into grant applications

**Any post-award significant alterations to study design or protocol suggested by the patient advisory group would need to be approved in advance by the Irish Cancer Society throughout the duration of the research project*

Challenges

- When planning how you will involve people, it is important to think about what might go wrong and how you might handle any challenges that arise.
 - A PPI Ready: Researcher Planning Canvas was developed by MacCarthy et al⁷, which researchers may find useful when considering potential challenges and how to address them.
- In some instances, patients may need additional support (emotional), it is a good idea to identify supports that could be offered to patients should they need it.
- Patients may also need practical supports to be involved. For example not all patients will have easy access to a computer. Offer to post printed copies of information and allow for additional time for people to read information and paperwork. Some people may need to use

the phone as opposed to a computer to join meetings. These practical needs should be assessed at the start.

Additional things to consider-

- A number of universities within the Republic of Ireland already have dedicated individuals, infrastructure, training, or programmes in place dedicated to PPI. We strongly recommend that you engage with these local resources when planning how patient involvement will be integrated into your project.
- Engagement can sometimes be mistaken for involvement (more information on both in section 2). While engagement activities are important and can often lead to involvement opportunities, it is predominantly involvement that should be outlined in this section - *Involvement is conducted 'with' or 'by' people affected by cancer.*
- For translational biomedical laboratory based research it can be difficult to initially envision the practicalities of how patients can be involved in a research project in a meaningful way. However there are a lot of valuable opportunities to involve patients in this type of research. Further guidance on PPI in lab-based research can be found here- <https://sites.google.com/parkinsons.org.uk/ppi-in-lab-based-research/home>

6.3. Sharing of research findings

The Irish Cancer Society is the largest voluntary funder of cancer research in Ireland. Research is conducted primarily for the benefit of patients, therefore, a key priority of the Irish Cancer Society is to ensure that the public (including people affected by cancer) are kept up to date on research that is funded by the Society. In line with this, it is a requirement that all applicants produce a sharing of research findings plan to include communication of their research to **all** relevant audiences including the public and patients. As part of this section of the grant application, researchers are encouraged to carefully consider the different stakeholders that may be interested in their research, and develop a plan for communicating which each of these stakeholder groups.

It is important to note that while peer-reviewed journals are an important means of communicating research findings to academic researchers, members of the public are less likely to access academic journals.

Some examples of research dissemination and knowledge exchange includes but is not limited to:

- Peer-reviewed journals (open-access is encouraged).
- Dissemination at conferences and meetings
- Non-peer reviewed professional periodicals e.g., The Irish Psychologist, World of Irish Nursing;
- Public engagement talks or events e.g., Irish Cancer Society ‘Decoding Cancer’, Pint of Science, Science Week events, public university talks, etc.
- Newspapers/media e.g., The Irish Times, thejournal.ie, Newstalk;
- Blog posts e.g., professional blog, Irish Cancer Society website;
- Newsletters
- Online videos and website content

6.4. Budgeting for PPI

The cost of PPI is dependent on how you plan to embed it into your study i.e., your Patient Involvement Plan. As such, it is difficult to prescribe guidelines on how to budget for PPI. However, at a minimum, it is expected that the out of pocket expenses of PPI members associated with involvement are covered by the research grant

Before beginning to budget we recommend that you check that the host institute has appropriate systems in place for the payment of PPI costs and expenses. The host institute may also have specific guidelines in place around budget costs and allowable expenses, we recommend that you check this with your institute before completing the budget.

The steps to PPI budgeting are described below:

Step	Activity
------	----------

Step 1: Framework selection	Select a framework for mapping involvement costs. This might be the research project cycle (i.e., the step-by-step research process/procedure) or a project timeline (e.g., Gantt chart).
Step 2: Planning your involvement	Make a plan of the involvement activities you intend to incorporate into your research.
Step 3: What are the costs?	For each activity, identify the specific costs for which you will need to budget.
Step 4: How much will it cost?	Estimate the cost or range of costs against each involvement activity. To work out the budget for your study, go to the online cost calculator: https://www.invo.org.uk/resource-centre/payment-and-recognition-for-public-involvement/involvement-cost-calculator/ . Please note the online calculator is in Pound Sterling.
Step 5: Mapping	Map the involvement activities onto your selected project framework so that you know exactly when in the project timeline costs are allocated.
Adapted from the UK National Institute for Health Research, Budgeting for Involvement (2013)	

An online calculator is available on the NIHR Involve website: <https://www.invo.org.uk/resource-centre/payment-and-recognition-for-public-involvement/involvement-cost-calculator/> . Please note the online calculator is in pound sterling (£), euro conversion rates will apply. **The online calculator is a guiding tool, all costs must be appropriate to costing in the Republic of Ireland and all researchers must verify the costs associated with their PPI plan.**

Costings from all categories of the online calculator will be eligible (see below). However, please note that final approval of all costs is at the discretion of the Irish Cancer Society.

Justification must also be given for a costs. Please note this is not an opportunity to elaborate on details of your patient involvement plan or sharing of research findings plan, all relevant information on these plans must be in the relevant sections.

[PPI budgeting costs:](#)

Costing category	Related costs
Payments and rewards	<ul style="list-style-type: none"> Fees to individuals Vouchers/tokens for individuals Prize draw awards Fee/donation to a group Funding for additional training and learning Honorary appointment e.g., lay fellow or research partner
Expenses	<ul style="list-style-type: none"> Travel Subsistence Childcare Carer costs Personal assistants Overnight accommodation Home office costs
Involvement activity	<ul style="list-style-type: none"> Finding people/advertising Training and learning costs Venues and catering Equipment and books Access to university facilities Conference fees
Involvement staffing	<ul style="list-style-type: none"> Administrative support Involvement coordinator Independent facilitator Peer researchers/interviewers
Other costs	<ul style="list-style-type: none"> Disclosure and barring service Language translation and interpretation costs Support for people with impairments

Adapted from the UK National Institute for Health Research, Involvement Cost Calculator

Working examples

Please see the worked costing examples below for guidance on creating and budgeting for the PPI plan.

Worked costing example for virtual advisory group:

A researcher wishes to set up a patient advisory group to advise on dissemination of the research results and assist with writing lay summaries for grant applications.

The researcher is looking for three patient representatives to form the advisory group. The group will meet for 3 half day virtual workshops over 2 years.

The estimated costs associated with the advisory group are as follows:

Category	Detail	Quantity	Cost	Total
Virtual Meetings	Online meeting platform used by institution for example Zoom. No cost as institute pays for the licence.	1	€0	€0
Advisory group honorarium	Honorarium for attending virtual advisory group/workshops	3 x 3= 9 (3 representatives x 3 meetings)	€100	€900
TOTAL COST (€1000 from PPI budget)				€ 900

All costs were calculated in the Republic of Ireland as of January 2021.

Worked costing example for in-person advisory group:

A researcher wishes to set up a patient advisory group to advise on dissemination of the research results and assist with writing lay summaries for grant applications.

The researcher is looking for three patient representatives to form the advisory group. The group will meet for 2 half day in-person meetings and 1 virtual meeting over 2 years.

The estimated costs associated with the advisory group are as follows:

Category	Detail	Quantity	UnitCost	Total
Travel	Local travel in Dublin (1 representative x 2 meetings)	1 x 2= 2	€8	€16
	Travel from outside of Dublin	2 x 2= 4 (2 representatives x 2 meetings)	€30	€120
Advisory group payment x 2	Honorarium for attending advisory group meetings)	3 x 3= 9 (3 representatives X 3 meetings)	€100	€900
Virtual Meetings	Online meeting platform used by institution for example Zoom. No costs as institute pays for licence.	1	€0	€0
Venue costs	University meeting room cost No cost as at host institute.	1	€0	€0
Catering costs	Lunch for attendees (€10 per person/per meal	3 x 2= 6 (3 representatives x 2 meetings)	€10	€60
TOTAL COST (€1000 from PPI budget and €96 from consumables budget)				€1,096

All costs were calculated using estimated costs for train tickets, hotels, and so on in the Republic of Ireland as of January 2021.

Please note- This budget is for specific costs associated with involvement only. If part of your PPI plan is that patients will organise an event or dissemination materials, the budget for these must be incorporated into the dissemination category of the main grant budget.

7. Writing in plain English

As outlined in Section 6 the project summary should be written in plain English. There are many online resources available to guide you in writing an effective plain English summary. Some of these resources are listed in Section 9 of this document.

Here are some general notes on how to write in plain English:

- People affected by cancer are not scientists (usually) and knowledge should not be assumed. Avoid using technical language or scientific terminology. Use everyday words to communicate your point and explain the science.
- While language should be understandable, it should not be dumbed down - It may be necessary to use scientific words and jargon in order to convey why your research is special, but be sure to explain it thoroughly and be consistent in its use.
- Use short clear sentences.
- Use paragraphs
- Make sure grammar, punctuation, and spelling are accurate.
- Bullet points (like these ones) can make it easy to digest a lot of information

8. Contact

If you have any questions relating to PPI please contact grants@irishcancer.ie.

9. Additional Resources

General resources

- INVOLVE – UK National Institute of Health Research (NIHR) initiative to support PPI.
<http://www.invo.org.uk>
- National Standards for Public Involvement.

<https://www.invo.org.uk/posttypepublication/national-standards-for-public-involvement/>

- NALA (National Adult Literacy Agency)
<https://www.nala.ie>
- Access to Understanding: Promoting public understanding of biomedical and health research
<http://www.access2understanding.org>
- Versus Arthritis: Patient & Public Involvement, A researcher's guide
<https://www.versusarthritis.org/media/1373/patient-and-public-involvement-booklet.pdf>

Writing a Lay Summary

- Duke, M. (2012). How to write a lay summary.
<http://www.dcc.ac.uk/sites/default/files/documents/publications/HowToLaySummariesDec2012.pdf>

Communicating to patients

- NHS England. Language Matters: Language and Diabetes.
<https://www.england.nhs.uk/wp-content/uploads/2018/06/language-matters.pdf>

Writing in plain English

- NALA (National Adult Literacy Agency). *Writing and Design Tips*.
<https://www.nala.ie/wp-content/uploads/2019/08/Writing-and-design-tips.pdf>

Budgeting for PPI

- INVOLVE PPI Involvement Cost Calculator
<https://www.invo.org.uk/resource-centre/payment-and-recognition-for-public-involvement/involvement-cost-calculator/>

10. References

- 1) INVOLVE. (2018). *What is public involvement in research?* Retrieved from <http://www.invo.org.uk/find-out-more/what-is-public-involvement-in-research-2/>. Accessed 07/01/21.
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- 7) MacCarthy, J., Guerin, S., Wilson, A and Dorris, E. (2019). Facilitating public and patient involvement in basic and preclinical health research. *PLoS One*, 12(5).



Appendix 2: Research Impact Framework (RIF)

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1. Introduction

1.1. Purpose

The Research Impact Framework (RIF) is a guide on impact for those applying for funding from the Irish Cancer Society and for grant holders who are successful in securing a grant.

Its purpose is to **help maximise the impact of the research that the Irish Cancer Society funds through our grant schemes.**

Creating impact from the research that we fund has always been of great importance to the Irish Cancer Society. This RIF pulls together previous information and guidance on impact into a single document.

The RIF is the central Irish Cancer Society guidance document on research impact.

It is intended to support researchers to understand, plan for, deliver, and demonstrate research impact and to enable the Irish Cancer Society to facilitate, understand, and communicate on that impact.

It should act as an important reference point for grant applicants, grant holders, and the Irish Cancer Society to ensure that impact remains a focus before, during, and after a funded research project is completed.

Please note that each successful award will have terms and conditions (T&Cs) specific to that award. These T&Cs will cover many of the same areas as this document but the specific terms may be slightly different. Precedence is given to the T&Cs specific to each award.

1.2. What is research impact?

Broadly speaking, research impact is the demonstrable contribution that research makes to society.

For the Irish Cancer Society, research impact is defined as ‘research being **used to bring about a positive change to the lives of people affected by cancer.**’

We recognise that the impact is specific to each project and can be varied; impact can occur over different timescales, from the short- to the long-term. However, all forms of impact are important to the Irish Cancer Society and we must work in partnership with researchers to not only achieve impact, but also to measure, and communicate it.

1.3. Why is impact important?

The Irish Cancer Society receives the vast majority of its income from donations. **People donate to us because they want to make a difference to the lives of those affected by cancer.**

Therefore, it is our duty to our donors to ensure that the research we fund does just that - makes a difference.

It is very important that the research we fund is always working towards making an impact on the lives of those affected by cancer. It is equally important that we can communicate this impact to our donors to let them know how their donations have made a difference.

The Irish Cancer Society's vision or goal is:

'By 2025, 3 out of 4 Irish cancer patients will survive their diagnosis and everyone affected by the disease will have access to world-class treatment, care and support. In future, no one in Ireland will die from cancer.'

To achieve this goal, we must strongly focus on maximising the impact of our funded research, in particular putting an emphasis on achieving outcomes that will ultimately contribute to realising this goal.

2. Research Impact Framework

2.1. Framework overview

The RIF describes how the Irish Cancer Society approaches research impact in four sections:

- **Framework Principles** - How the Irish Cancer Society and researchers will work together: a set of principles which underpin how the charity will work in partnership with grant holders to maximise research impact.
- **Theory of Change** - What the Irish Cancer Society is aiming to achieve: the Goal, and the Outcomes (or changes that need to happen in order for that goal to be achieved), to which all research projects funded through the grants scheme should aim to make a contribution; this is articulated in the 'Theory of Change'.
- **Impact Plan** - How impact should be planned by researchers at the application stage.
- **Impact Reporting** - How the progress of achieving impact will be monitored by the Irish Cancer Society.

2.2. Framework principles

These research impact principles frame the relationship the Irish Cancer Society wants to have with all of its grant holders.

By having these principles, it allows us all to work from the same page from the very start. They are designed to ensure the best levels of support, partnership and mutual understanding, with the ultimate aim of maximising research impact.

Principle	Principle in practice
Working in partnership	Partnership is the best way to ensure maximum impact and this is a two-way relationship. The Irish Cancer Society will contribute internal expertise and networks to support and promote the research. Grant holders will work with the Irish Cancer Society to maximise the potential of the research to benefit people affected by cancer.
Involving the public and people affected by cancer	Grant holders will need to carefully consider how the public and people affected by cancer can be meaningfully involved in their research. The Irish Cancer Society requires that public and patient involvement (PPI) is included in the research projects that we fund. The Irish Cancer Society can provide guidance and training on including PPI in grant applications and projects.
Regular communication	Grant holders will maintain an ongoing dialogue with the Irish Cancer Society through regular reporting. Reporting schedules will be determined for each grant and will be detailed in the T&Cs. Outside of these reports we encourage regular communication with our grant holders. The Irish Cancer Society will provide a named contact for each grant and will respond promptly to queries, issues or updates.
Dissemination and engagement	Grant holders will inform the Irish Cancer Society of any dissemination or engagement activities planned as soon as they can. The Irish Cancer Society Research and Communication teams will support grant holders to deliver communications in accessible ways, especially for people affected by cancer, donors and the general public. Grant holders will work closely with the Irish Cancer Society teams (including Communications and Fundraising) to plan and undertake communications and attend engagement events run by the Irish Cancer Society to raise awareness of their research and its findings.
Open access	Open access to research outputs is an important way of maximising the impact of research. Grant holders are encouraged to share their research outputs (not just publications, but also datasets and other outputs) with the wider research community, and with the public and other audiences as appropriate. The Irish Cancer Society will support open access publication costs.

Long-term impact monitoring

Impact can take a long time to emerge, often beyond the timescales of a research project. The Irish Cancer Society will want to work with grant holders to monitor impact both during and beyond the grant funding period. Grant holders are encouraged to maintain longer term contact with the Society through its research community.

2.3. Theory of Change

A Theory of Change, in simple terms, is an illustrated diagram showing how activities create outcomes (or change).

The Theory of Change provides a clear structure for the progression of research towards achieving impact (or goal). It defines long-term goals and then maps backward to identify necessary outcomes, outcome-enabling activities, outputs, activities and inputs.

Applicants to the Irish Cancer Society grant schemes will be required to provide an impact plan at application stage. The key factors to be considered in the impact plan are mapped off the structure of the Theory of Change.

The Theory of Change is set out in diagrammatic form in Figure 1.

The goal and outcomes for all impact plans submitted to the Irish Cancer Society are pre-determined based on the Irish Cancer Society strategy. These are detailed in Figure 1 and explained in more detail in Section 2.4.

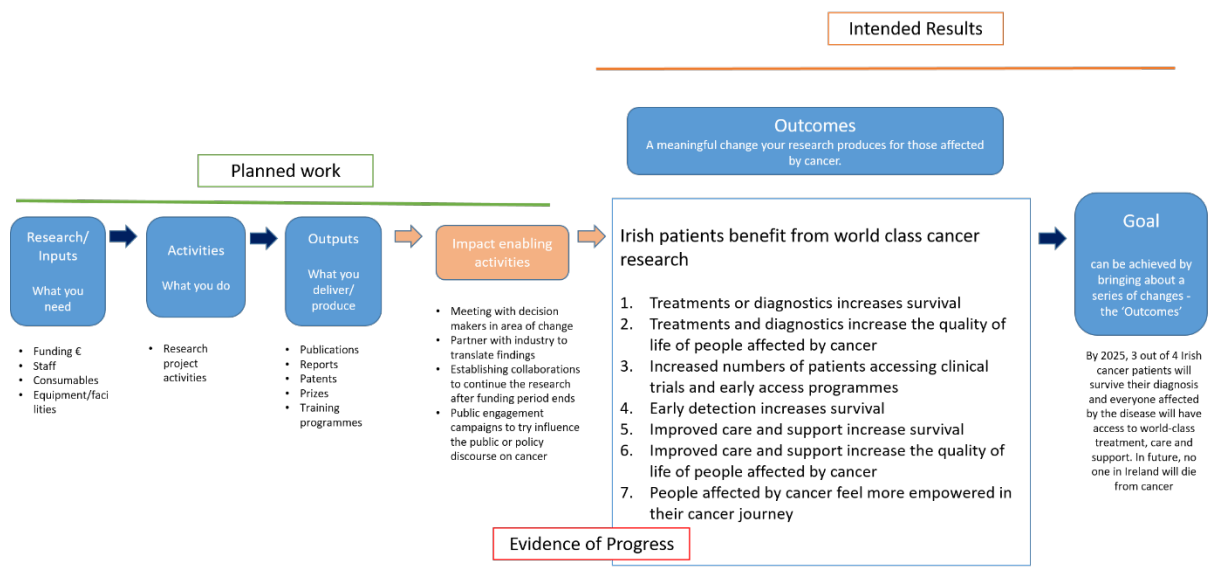


Figure 1. Theory of Change shown in diagrammatic form. The examples of each key factor are only for illustrative purposes and are not comprehensive.

2.4. Impact plan

As mentioned in Section 4, at the application stage for the majority of the Irish Cancer Society awards, applicants will be required to complete an impact plan based on the Theory of Change model outlined in Section 4.

The purpose of including an impact plan at the application stage is to focus all projects on working towards achieving impact from the outset.

The impact plan information provided by researchers at the application stage may be somewhat limited as the project has not yet started and it can be difficult to predict research results or how a research landscape may change over time.

However, it is still important to start thinking about the key factors on the pathway to achieving long-term impact from the start of the project as it will provide a strong foundation for maximising progress towards impact when a grant gets underway.

There are a number of key factors to consider when developing an impact plan, these are illustrated in Figure 1 and explained in more detail below (Section 5.1).

Of particular importance in the impact plan at the application stage are the 'Outcomes', 'Impact enabling activities', 'Evidence of progress', and 'Outputs', sections.

For the 'Inputs', and 'Activities', sections of the impact plan, high level information is adequate as information on these sections will be detailed in other sections of the application such as aims and objectives and budget sections.

Please note for funded projects, the level of information required as part of the impact plan will become more detailed as the project progresses (for more information see Section 6).

The impact plan must consider the following key factors:

- ↓ Goal
- ↓ Outcomes
- ↓ Impact enabling activities
- ↓ Evidence of progress
- ↓ Outputs
- ↓ Activities
- ↓ Inputs

Each of these sections are described in more detail over the next few pages:

↓ **Goal**

A goal is an idea of the future or desired result that a group of people or organisation envision. It is the ultimate impact that an organisation wants to achieve.

For impact plans required by the Irish Cancer Society the goal is the Society's vision-

'By 2025, 3 out of 4 Irish cancer patients will survive their diagnosis and everyone affected by the disease will have access to world-class treatment, care and support. In future, no one in Ireland will die from cancer.'

For the Irish Cancer Society investing in research and *ensuring the Irish patients benefit from world class research* is a way of contributing to achieving this goal. Therefore, all Irish Cancer Society grant holders should be working towards achieving the predetermined goal of the Society.

↓ **Outcomes**

Achieving impact or a goal can be complex, take time and involve change in a number of different factors. **Outcomes are factors that need to change in order for that goal to be achieved.**

Demonstrating that impact has been achieved can be difficult and it is often inferred by looking at changes in outcomes.

There are **7** key outcomes that the Irish Cancer Society work towards in order to ensure that Irish patients benefit from world class research.

These outcomes tie into the Irish Cancer Society strategy and are outcomes that we have identified that will help us achieve our ultimate goal. Like the goal these outcomes are pre-determined for all applicants. Applicants should select one or more of these specific outcomes for their research project.

It is important to start thinking about the pathway to impact from the start of the project. This will provide a strong foundation when a grant gets underway. As such, plans should be as comprehensive and considered as possible. The recommended approach is to develop the impact plan by work backwards, from goal to inputs

While the direction of the research may change over time, or may not succeed in its original objectives, linking the research to (at least) one of the framework's outcomes sets the direction of the research in the context of what is important to the Irish Cancer Society.

The outcomes as identified by the Irish Cancer Society are listed in Table 1. There is no particular hierarchy to the order of these outcomes, all of them contribute to the goal.

Applicants will also be asked to detail why they have selected the outcome(s).

7 Key Outcomes: “Irish patients benefit from world class cancer research”

1. Treatments and diagnostics increase survival

2. Treatments and diagnostics increase the quality of life of people affected by cancer

3. Increased numbers of patients accessing clinical trials and early access programmes

4. Screening increases survival

5. Improved care and support increase survival

6. Improved care and support increase the quality of life of people affected by cancer

7. People affected by cancer feel more empowered in their cancer journey

Other

‘Other’ should only be selected by the researcher if they feel strongly that none of the other outcomes covers the potential outcome of the research. If other is selected, then more detail will be required on the proposed outcome.

↓ **Impact enabling activities**

Impact enabling activities are activities that drive outputs to outcomes. These impact enabling activities are very important as they support the progression of the research along the pathway to impact.

Outputs are quantitative results which are achieved after implementing an activity. Many times an output alone will not contribute to achieving an outcome. What is important is what is done with that output.

For example, if a report is published detailing how a service can be improved, the report alone cannot be impactful if it is not shared with the people who make decisions on that service.

Therefore, an activity to drive the report (output) to potentially contribute to achieving an outcome would be to organise a meeting with the decision makers to discuss the report.

Other examples of impact enabling activities include:

- Partnering with industry to translate findings
- Establishing collaborations to continue the research after funding period ends
- Public engagement campaigns to try contribute and influence the public or policy discourse on cancer

These are just examples and are not a comprehensive list. The appropriate activities will vary for each type of project and what outcome has been selected.

For many projects the impact-enabling activities will not directly contribute towards achieving the outcome. But may be a step on the pathway to achieving the outcome.

This does not mean that the impact plan should not be ambitious but constraints of the project should be kept in mind. A well-thought out, ambitious but achievable impact plan is recommended.

Please note the difference between 'Impact enabling activities and 'Activities' (Section 5.2).

↓ **Evidence of progress**

An impact enabling activity can occur but what is important is what is achieved through the activity.

Evidence of progress is evidence that the impact enabling activities are progressing the research on the impact pathway towards contributing to an outcome.

The type of evidence a grant holder will collect will depend on the impact enabling activities and the outcome that has been selected.

Progress evidence can be both quantitative and qualitative. However, quantitative evidence can be difficult to show when it comes to progress towards impact, therefore, in the majority of cases the evidence will be qualitative.

For example, an impact enabling activity may be organising a meeting with other groups to discuss collaboration to bring the research further. The evidence that the meeting (the impact enabling activity) progressing the research on the impact pathway would be that the meeting went positively and the groups agreed to collaborate on funding applications to bring the research forward.

This is an example of short-term qualitative evidence- the meeting went positively and the groups agreed to collaborate. An example of longer-term quantitative evidence would be that a grant application was applied for.

Applicants will be asked to consider both short-term and medium-term evidence. Medium-term evidence may only occur after the grant end date.

It can be difficult to envisage what evidence will be needed at the start of a project as plans may change over the course of the project for a number of different reasons. The reason for asking for this information at the application stage is for researcher to identify and plan the appropriate methods for gathering evidence so that relevant evidence is gathered in real-time and that no evidence is lost.

For some projects evidence gathering may start earlier in a project or it may start later, either way it is important to be prepared.

↓ **Outputs**

Outputs are quantitative results which are achieved after implementing an activity. Examples of outputs include papers, publications, blog posts, newsletters, patents, information leaflets and training programmes.

These are just examples and are not a comprehensive list. The appropriate outputs will vary for each type of project and what outcome has been selected.

The Society recognises that outputs are important for a researcher's career and are encouraged. However, as outlined above, the plan for driving outputs to outcomes is more important in terms of achieving impact from a research project.

↓ **Activities**

These are the activities that will be undertaken by the researcher as part of doing the research project. These activities will generate an output.

For the impact plan the information on the activities can be high level and in most cases articulating the project objectives with a breakdown of what will be done under each objective will be adequate.

Examples of activities in a translational research project include- completing in-vitro and in-vivo testing of a drug compound in a cancer model. The output of these activities could be a publication on the results of the research.

Examples of activities in a social, nursing and allied health project would be trialling an intervention to increase treatment compliance in cancer patients. The output of these activities could be the publication in a scientific journal or a report.

↓ **Inputs**

The inputs of research include the funding needed and resources required to deliver the research. Resources can include personnel, equipment, consumables etc. The inputs allow the activities to take place.

2.5. Format of Impact plan at application stage

Key Factor	Additional guidance
Goal	This is pre-determined and will be standard for all the research that we fund.
Outcome	<p>There are 7 pre-determined outcomes based on our strategy. It is recommended that you start the impact plan by selecting one of the seven outcomes most relevant to your research. Once this has been selected you can then work backwards from this to complete the other sections.</p> <p>You can select more than one outcome if relevant.</p>
Impact enabling activities	<p>Impact enabling activities are activities that drive outputs to outcomes- i.e. progress the research along the impact pathway.</p> <p>What activities need to happen to drive outputs to outcomes? When will these activities take place? The information provided can be a mixture of bullet point and narrative in style.</p>
Evidence of progress	How will you know that the impact enabling activities have progressed the research on the path to impact? What evidence can be used to show this? Indicators may be qualitative or quantitative.
Outputs	Planned outputs for the project.
Activities	Activities that will take place as part of the research project. A high-level breakdown of what will be done under each objective will be adequate. Bullet points can be used.

Inputs	Resources needed for the project- high level information is adequate and can be in bullet points.
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3. Reporting to the ICS on Impact

An impact plan will be required as part of the application for the majority of the Irish Cancer Society funding awards from early 2021 onwards.

It is important both for the Irish Cancer Society and for grant holders to be able to demonstrate evidence of progress in their impact plans.

Therefore, grant holders funded by the Society from 2021 onwards will be required to provide an update on the progress of their impact plan in their reports to the Irish Cancer Society. The schedule of reporting will be determined by the T&Cs of the award. Generally, reports are required annually, for shorter awards a 6-month report may also be requested.

More detailed information may be required as the project progresses and the impact of research projects become clearer. The impact plan may therefore change during the grant period in response to both the research findings and changes in the wider research landscape. Any changes in the impact plan must be detailed and explained in the progress reports.

Two additional sections will be part of impact reporting in the progress reports:

- Progress on path to impact
- Plans for next reporting period

Progress on the path to impact

Grant holders will be asked to update on the progress of the research on the path to impact.

Grant holders must update on the contribution that the enabling activities have had to an outcome. This will be done by detailing the evidence that the outcome enabling activities have contributed to an outcome.

This evidence will have been gathered through-out the project. The method and type of evidence gathered will be identified in the impact plan at application stage. Both quantitative and qualitative evidence may be given. However, as it is often difficult to quantify 'contribution' it is more likely that the evidence will be qualitative and the information in this section will be narrative in style.

In addition, impact enabling activities may not have directly contributed to an outcome. In these cases, what we are looking for in this section is evidence that the research is progressing towards contributing to an outcome.

Plans for next reporting period

Grant holders will be asked to detail the impact enabling activities for the next reporting period and how evidence of progress will be gathered.

As detailed in the Framework Principles (Section 2.2) it is encouraged that grant holders work in partnership with the Irish Cancer Society to maximise the potential of the research to benefit people affected by cancer. Therefore, a member of the research team will be available to work with you on your impact plans through-out the duration of your project. Regular communication is strongly encouraged.

Impact can take a long time to emerge, often beyond the timescales of a research project. The Irish Cancer Society will also want to work with grant holders to monitor impact both beyond the grant funding period. Grant holders are encouraged to maintain longer term contact with the Society through its research community.

4. More Information

This RIF should act as a guide for researchers making applications to the Irish Cancer Society awards and also to grant holders. However, impact is a broad and varied topic and therefore not all aspects of impact may be covered in the RIF.

All queries and questions should be sent to grants@irishcancer.ie.