Irish Cancer Society Research

Allied Health Professional Cancer Research Award

Applicant Guidelines 2023

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1. Introduction

1.1. Overview

The Irish Cancer Society wishes to invite research teams led by eligible allied health professionals (AHP) to submit an application for the Allied Health Professional Cancer Research Award 2023.

The aim of this award is to stimulate, develop, and support allied health cancer research in the Republic of Ireland. As such, this award will fund an **AHP-led** partnership-based research project between an allied health professional and an academic researcher. Clinical-academic partnerships encourage research that is of the highest quality and clinical relevance, while expediting the translation of research into practice.

This is intended to be a transformative investment in an AHP who demonstrates great potential in driving and leading clinically relevant and innovative cancer research in Ireland. This research will focus on areas which will impact positively on patient care outcomes and should be aligned to the National Cancer Strategy 2017-2026[1] and the Irish Cancer Society Strategy 2020-2025[2].

1.2. Funding

The maximum total funding available is €75,000 for a project of 12 to 24 months in duration. It is expected that institutional ethical approvals will be received within the first 6 – 12 months of the research grant. Payment may be withheld until ethical approval is obtained in this timeframe.

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[1] https://health.gov.ie/healthy-ireland/national-cancer-strategy-2017-2026/
[2] https://www.cancer.ie/about-us/irish-cancer-society-strategy-2020-2025

1.3. Indicative Timelines

Milestone	Date
Applications open	17th April 2023 (**12:00**)
Application deadline	15th June 2023 (**15:00**)
Review	June – July 2023
Interviews	Early August 2023 (**TBD**)
Award Announcement	August

Please Note: The above dates are provisional subject to change at the discretion of the Irish Cancer Society.

1.4. Partnership Structure

The applicant team should comprise of two joint-lead applicants who will undertake a body of research work over a one- to two-year period. The team must have one AHP working in oncology in a clinical role (*AHP Lead*) and one researcher working in an academic role (*Academic Lead*).

The two project leads should work collaboratively to achieve success in the project and enhance the research capacity and leadership of the AHP Lead. Each partner will bring a different expertise, allowing for learning opportunities that are reciprocal. While each partner may take on certain responsibilities specific to their skill-set, it is expected that both partners will play a role in all aspects of the project.

Role of AHP Lead: The AHP Lead should be the primary driver of the research project. The AHP Lead provides clinical expertise e.g., clinically relevant idea generation, logistics, patient recruitment, advice in navigating the health system. The AHP Lead should be involved in most aspects of the research project and its governance, being the person who actually carries out and manages the project. Their clinical role may be backfilled by this award to allow them protected time to drive this research forward.

In some cases, supervision of dedicated research staff (e.g., Research Assistant) may be allowed where both lead applicants possess:

a) Significant practical research experience

b) Significant research management experience

c) Experience of supervising research staff

If considering this option, please contact grants@irishcancer.ie before applying.

Role of Academic Lead: The Academic Lead provides expertise in terms of good research practice, scientific excellence, research policy and governance, and navigating academic responsibilities (e.g., ethical review process, scientific and financial reporting, data protection).

1.5. Education and Training

The AHP Lead will be entitled to pursue training and education in furtherance of their career in research. This includes postgraduate research-focused degrees. Degrees must be completed within the timeframe of the award. Qualifications that are primarily clinically focused are **not** eligible for funding.

Capacity building training/education may be allowed for other members of the research team. Please contact grants@irishcancer.ie before budgeting training/education for other research team members.

1.6. Research Themes

All proposals must be aligned with the Society's Strategy (2020-2025) and its Research Roadmap. Proposed projects can be in any of the following areas:

a) Translational biomedical research

b) Clinical trials

c) Survivorship

d) Strategic priorities

These areas are described below in greater detail.
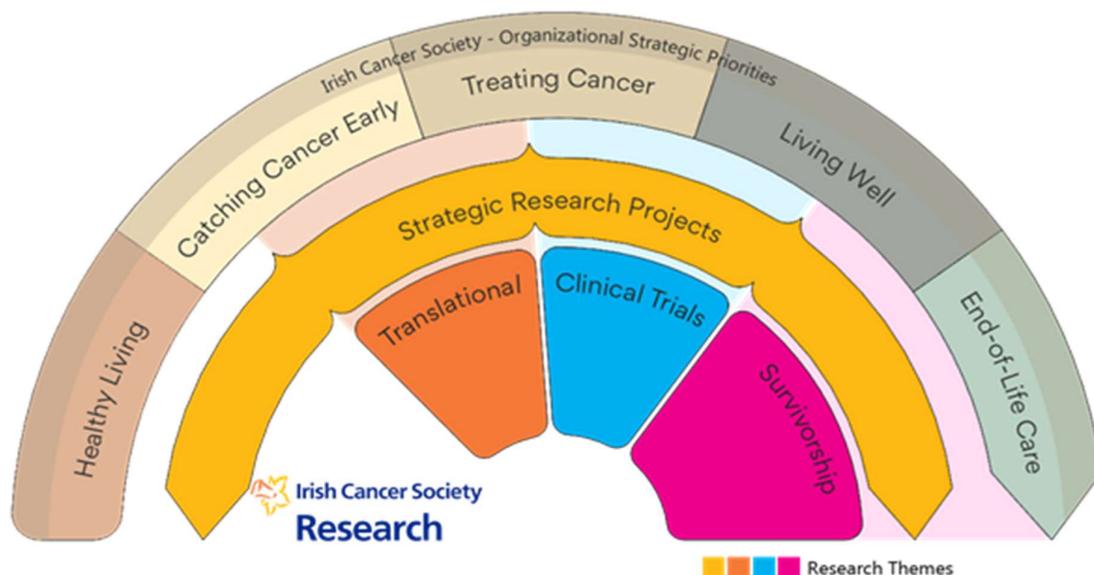
a. **Translational biomedical research** can be defined as 'bench to bedside' or patient-focused biomedical research, the aim of which is to translate existing knowledge about cancer biology into techniques and tools that will accelerate progress towards patient treatment. Research in this area will build upon basic biological discoveries and improves their translational potential through pre-clinical studies. Much of the outputs of translational research naturally merge into trials, the next area of focus.

   Please note, applications in drug design, SAR (structure–activity relationship) analysis, drug screening or basic biomedical research will **not** be considered at this time.

b. **Clinical trials** are organised investigations in people to examine the benefits of new approaches to treatment and care. For example, looking to see if a new medicine can improve survival for a particular form of cancer. As well as funding these drug-based trials (so called IMP trials), the Irish Cancer Society is also interested in funding non-drug based trials (non-IMP trials) in areas such as diagnostics, technology, radiotherapy, surgery, psycho-oncology, exercise, nutrition, and combinations of these.

c. **Survivorship** covers the period from diagnosis to treatment outcome (including palliative and end-of-life care). Survivorship research seeks to improve the care and outcomes experienced by people living with and beyond cancer. it includes: prevention and early detection of recurrent cancer; long term effects of cancer and its treatment; quality and experience of treatment and care; psycho-social effects of cancer and its treatment; self-management; health information and literacy; genetic risk and counselling; physical and practical needs e.g., financial, employment, mobility; etc.

d. **Strategic priorities** is a crosscutting theme, which seeks to specifically foster and grow research into areas of high unmet need in cancer. For example, cancers which have not benefited from the huge strides in outcome seen in some malignancies (metastatic disease, rare cancers and cancers with poor response or outcomes); the unmet needs of children, adolescents, and young adults affected by cancer; tackling misinformation and disinformation in cancer; addressing the needs of under-represented groups of people (e.g., Travelling community, ethnic and language minority communities, migrant communities, communities with socio-economic or mental health challenges, or any other socially excluded group).

2. Eligibility

2.1. Applicant Eligibility

Applications from individuals that do not meet the eligibility criteria will not be assessed. Applications must be made by at least two co-applicant partners, the AHP Lead and the Academic Lead.

AHP Lead

Suitability:

The AHP Lead is an Allied Health Professional working in clinical practice in Ireland who is committed to a career involving research. They may be based in a public hospital, primary care, community services, or any other public setting, during which clinical time is spent working with people affected by cancer. The AHP Lead will be expected to lead the project and provide expert clinical input to the applicant team. Previous experience in research would be expected, exemplified by, for example, recruitment and data collection in research studies, conducting clinical audits, presentation at research meetings or conferences, authoring publications, and completion of research training.

Minimum Eligibility Criteria:

At a minimum, the AHP Lead must meet the following criteria:

- Hold a professional qualification in a relevant profession (this is not an exhaustive list):
    - Dietetics
    - Genetic counselling
    - Occupational Therapy
    - Pharmacy
    - Physiotherapy
    - Podiatry
    - Psychology (e.g. Clinical, Counselling, Neuropsychology)
    - Radiation Therapy or Radiography
    - Social Work
    - Speech and Language Therapy
- Be accredited with CORU or relevant professional body (e.g., Psychological Society of Ireland)
- Currently hold an appointment in their respective professional field in the Republic of Ireland during which clinical time is spent working with people affected by cancer.

Academic Lead

Suitability:

The Academic Lead will act as a scientific and academic advisor to the project and support the AHP Lead for the duration of the award. The Academic Lead should have an established track record in research exemplified by, for example, a history of principal investigator roles, history of grant awards, involvement in clinical trials, research supervision, national or international research partnership development, presentation at national or international conferences, etc. The Academic Lead should demonstrate a commitment to ensuring the highest research standard of the proposed body of work.

Minimum Eligibility Criteria:

At a minimum, the **Academic Lead** must meet the following criteria:

- Currently hold an academic appointment in a higher education institution in the Republic of Ireland for the duration of the award. This higher education institution will act as the host institution for the duration of the award.

- Possess a PhD or equivalent* in an academic field appropriate to the proposed project.

- Have a minimum of five senior authorships (first, joint-first, or last) in peer-reviewed academic publications.

*Note: PhD equivalence is defined as three or more senior (first, joint-first, or last) author publications in peer-reviewed academic journals or 4 years' full-time research experience post-primary degree. In such instances, candidates should contact grants@irishcancer.ie before applying.

Co-Applicants

Each application may include up to 10 co-applicants. A co-applicant is someone who has a well-defined and substantial role in the development or delivery of an application e.g., significant contribution to the direction of the research or who plays a significant role in the conduct of the research or research-related activity. If proposals are co-designed with key stakeholders (e.g., people affected by cancer), they may also be added as a co-applicant. A role description is required for each co-applicant.

Each co-applicant must confirm their participation in an application. Once the lead applicant has added a co-applicant to an application, the co-applicant will be sent an email with instruction on how to confirm their involvement.

Official Collaborators

An official collaborator is any individual or organisation that has a significant, distinct, and clearly definable role into the design or delivery of the research. Superfluous collaborations or collaborations in name only are **not** permitted. Each collaborator must clearly add value integral to the proposal.

2.2. Institution Eligibility

The host institution is the organisation that receives and administers grant funding and is responsible for compliance with all general and specific terms and conditions of awards. In order to be eligible to apply for funding, a proposed host institution must be based in the Republic of Ireland and must be listed as an approved host institution on the Health Research Board's website: https://www.hrb.ie/funding/funding-schemes/before-you-apply/all-grant-policies/hrb-policy-on-approval-of-host-institutions

Applicants conducting research out of non-approved sites (e.g. hospital) must nominate an approved host institute and all finances must be managed by this institution.

2.3. Patient and Stakeholder Involvement

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 a research project, from development and design to interpretation and dissemination.

In line with this commitment, it is expected that all applicants include a detailed PPI plan (and the associated **minimum €3,750 budget allocation**) within their application**.**

It is strongly recommended that applicants read Appendix 1 'Public and Patient Involvement (PPI) in Research' Guidelines prior to beginning work on an application.

2.4. Eligible Research Area

All grants must be aligned with the Society's Strategy (2020-2025) and its Research Roadmap. Proposed projects must meet the requirements set out in Section 1.5.

If considering an intervention development study, the proposed stage of development must be appropriate with all previous development phases complete. Intervention proposals should favour a single development phase rather than attempting to complete the entire development life cycle within a single project. Applicants should not attempt to develop a

novel intervention where a similar intervention already exists, unless there is robust justification of need.

If considering a complex intervention, please refer to the Medical Research Guidelines for Developing and Evaluating Complex Interventions or similar for guidance.

3. Application Procedure

3.1. Application Overview

Prior to applying, applicants must read this document through to completion. **The research project should be designed and jointly written by both lead applicants.** The application must NOT be written by the Academic Lead or the AHP Lead alone. For applications shortlisted for interview, both applicants will be expected to attend and both will be expected to display an in-depth knowledge of the proposed research project.

Either applicant partner may initiate an application. The second lead applicant can be added to the application on the 'Project Outline' page. For instance, the AHP Lead may create the application initially and add the Academic Lead to the application. The Academic Lead will then have access to the form, with editing capabilities.

There are two stages to the application process:

Stage	Description
Stage 1: Full Application	The full application allows applicants to provide a detailed written plan for the award.
	Each application will be evaluated by an independent review panel, made up of scientific experts and experts by experience.
	Applications that are of the highest quality will be shortlisted to the next stage, interviews. Reviewer feedback will be made available to all applicants.
Stage 2: Interviews	Interviews are conducted between shortlisted applicants and the review panel. Feedback from the full application stage should be used to revise and improve the application in advance of the interviews.

3.2. How to Apply

Applications must be completed and submitted through the Irish Cancer Society online grant management system. In order to submit an online application you are required to register at

the following address: https://grants.cancer.ie. When registering, please fill out all the fields on the registration form.

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

1. Update your basic information (please make sure all fields are completed)

2. Make a new grant application and access previous grant applications

3. Manage any active grants

When you have entered your basic details, you will be able to create a new application from the portal home page. Alternatively, select 'New Application' from the 'My Applications' tab.

Next, click 'Apply' for the Grant Type detailed as 'Allied Health Professional Cancer Research Award'

4. Application Form

There are nine sections outlined on the left hand side of the page:

a) Application Outline
b) Lead Applicant Details
c) Co-Applicant and Collaborator Details
d) Scientific Research Programme
e) PPI Summary
f) Impact Plan
g) Organisational Support
h) Budget
i) Validation Summary

Saving your progress regularly is strongly recommended by clicking 'Save' as you go through the application form. Alternatively, the information will be saved when you click 'Save and Close'. By clicking 'Previous' you will be brought to the previous section and by clicking 'Next' you will be brought to the next section.

Mandatory sections are marked with a red circle icon. You will not be able to submit with the application if these sections are incomplete.

Further details on each section of the application form:

a) Application Outline

In this section, you will be asked to provide basic information about your application. Input and save the information as required under the following headings:

- Proposed title
- Proposed start date (must be Q4 2023)
- Duration (up to 24 months)
- AHP Lead details
- Academic Lead details
- Proposed host institution
- Cancer type(s)
- Research type(s)
- Research theme and justification
- Keywords

b) Lead Applicant Details

Lead Applicants' Curriculum Vitae (CVs):

In this section, you will be asked to complete and upload a CV for both lead applicants. The CVs should be completed using the template provided (this template is downloadable in this section on the online system or on the dedicated grant webpage) and be no more than three pages long.

AHP Lead Career Development Plan:

The funding is intended to be a transformative investment in an AHP professional. Please describe the AHP Lead's short- and long-term career goals and how this award will contribute to these goals (400 words max). Please consider the following:

- The AHP Lead's career plans and ambitions.
- How this award would be transformative to the AHP Lead's career and establish them as a leader in research (please be as specific as possible).
- What skills will be obtained by the AHP Lead and how this will contribute to their career plans.
- The next steps following the completion of the proposed research programme, including any funding body/bodies to which a future proposal(s) might be submitted.

Research Partnership:

The partnership between the AHP Lead and the Academic Lead is a core aspect of this award. It is expected that partners will work closely together to ensure the success of this project and

reciprocally learn from each other's expertise. In this section, you should describe the nature of the partnership, including (250 words max):

    – Details on whether the co-lead applicants have previously worked together and the nature of this previous partnership
    – An overview of how the partnership will work practically over the course of the study (including information such as number and format of interactions, etc.)
    – An overview of how responsibilities will be divided amongst the lead applicants
    – Details of the knowledge-sharing that will reciprocally occur between the AHP Lead and the Academic Lead, i.e., what unique knowledge/experience will each partner bring to the table?

Please Note: The successful applicants will be expected to provide evidence of this research partnership throughout the award as part of the reporting process.

c) Co-Applicant and Collaborator Details

In this section, you will be asked to add any co-applicants or collaborators to the application. Please note that this section is not formally assessed and as such, applicants without co-applicants or collaborators will **not** be penalised.

Co-Applicants:

Each application may include up to 10 co-applicants. A role description is required for each co-applicant.

Each co-applicant must confirm their participation in an application.

Collaborators:

You may provide a brief description of any relevant collaborations (500 words max). Official collaborators are not signatories on an application and do not need to approve the application before it is received by the Society.

d) Scientific Research Programme

Please provide an overview of the proposed research programme, covering the basis for research, hypothesis and/or aims, and methods (1,000 words max). You will also be asked to provide a Gantt Chart. More information on each of these sections is provided below. A separate textbox will be provided for references.

Basis for research:

Please describe previously published research, which forms the basis of your research proposal. You may include any initial research carried out by the applicants' research team.

Hypothesis and/or Aims:

Please outline the hypothesis, research questions, and/or aims of your research proposal. Please ensure that the aims are realistic and achievable in the funding period.

Methods of Research:

Please describe and justify the methods, procedures, and experimental design you will use to conduct your research.

For quantitative research, please provide statistical analysis plan for each section of your research proposal, including power calculations, sample sizes, details of control groups, etc. Additionally, discuss the recruitment plan, including feasibility of obtaining/accessing sufficient/required sample sizes of relevant participant groups.

For qualitative research, please describe the planned approach. You may choose to discuss sample size and rationale, data collection methodologies (e.g., interviews, focus groups, and transcription procedures), analytic framework(s), and sources of bias (if appropriate). Additionally, please discuss the methodology and feasibility of recruiting the planned sample size.

Gantt Chart:

You must upload a Gantt chart for the proposed research study, which includes PPI activities. The Gantt chart must be uploaded in PDF format. Gantt charts should be restricted to a single page, where possible.

Research Images:

You may optionally upload up to **five** research images. All uploads must be in PDF format. Please ensure that figures/graphs are legible when uploading. Illegible figures may be difficult for the peer review panel to assess and could detract from your application.

e) PPI Summary

In this section, please provide an accessible summary of the proposed study and your plan for co-developing and integrating clearly identifiable patient involvement. An expert PPI Panel will review this section. As such, please use plain, accessible language and if technical terms

are used, they must be explained. Patient involvement and partnership is a fundamental aspect of the application. Please consult Appendix 1 before completing these sections.

Project Summary:

Please provide a detailed and structured plain-English abstract; detailing the following (300 words max):

- Briefly outline the background of your research proposal, i.e., how and why your proposal came about and the context in which your proposal will take place.

- Describe the specific problem, issue, or question that you are asking in your research proposal and describe how you are addressing it (including the variables being measured and why you have chosen these specific variables).

- Outline who will **participate** in your research, how you intend to recruit them into your study, and what they will be expected to do if they take part.

- Detail how the proposed research is relevant and important to people affected by cancer.

Involvement Plan:

The involvement plan should detail how people affected by cancer and any other relevant stakeholder(s) will be *involved* in the study as partners. It should be well thought out, as detailed as possible, and given as much consideration as the scientific sections in the form. Vague plans are to be avoided. When completing this section, please detail the following (300 words max):

- What is the overall goal of your PPI plan?

- What are the aims and objectives of your PPI plan?

- At what stage of the research programme will patients and other stakeholders be involved, e.g., planning, design, implementation, management, evaluation, dissemination?

- What will be expected of the patients and stakeholders who become involved? What is the burden of involvement and how will people's time and expenses be compensated?

- Please describe any patient or stakeholder involvement that has occurred to date in the development of the proposal.

- How will the planned involvement activities influence the research and how will you ensure that the involvement activities are not tokenistic?

- What key patients and stakeholders will be involved, how many will be recruited, and from where will they be identified?

- Articulate the challenges that might arise from involving patients in your research and how any issues will be prevented or overcome.

- What, if any, supports or training will be available to those involved?

- What PPI supports are available to you locally or national and how will these supports be utilised?

Please note: While patient participation and engagement activities are encouraged as part of an application and can be detailed as part of this plan, the Society will only fund applications that predominately include *involvement* or *partnership* activities. Please see Appendix 1 for further details and examples.

Sharing of Research Findings:

As the largest voluntary funder of cancer research in Ireland, the Irish Cancer Society relies on the generous donations from the public in order to fund cancer research. A key priority is, therefore, 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 dissemination plan to include communication of their research to all relevant audiences, in particular the public and people affected by cancer.

Please describe your plan for sharing your findings. This may include printed or electronic articles, presentations, public engagement events, social media content, etc. (200 words max).

f) Impact Plan

Please consult the Research Impact Framework (RIF, Appendix 2) when completing this section.

Creating impact from the research that we fund has always been of great importance to the Irish Cancer Society. The purpose of including an impact plan at the application stage is to focus all projects on working towards achieving impact from the outset in line with the Irish Cancer Society's strategic objectives 2020-2025.

The impact plan details how the input of research funding ultimately results in meaningful impact for people who are affected by cancer. Therefore, it is the impact of the research beyond academia, i.e., the real life benefit of the research and how this may improve the lives of people who are affected by cancer.

It is important to start thinking about the pathway to impact from the start of the project. We are aware that the impact plan 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.

Figure 2. Visual representation of the Irish Cancer Society Impact Process
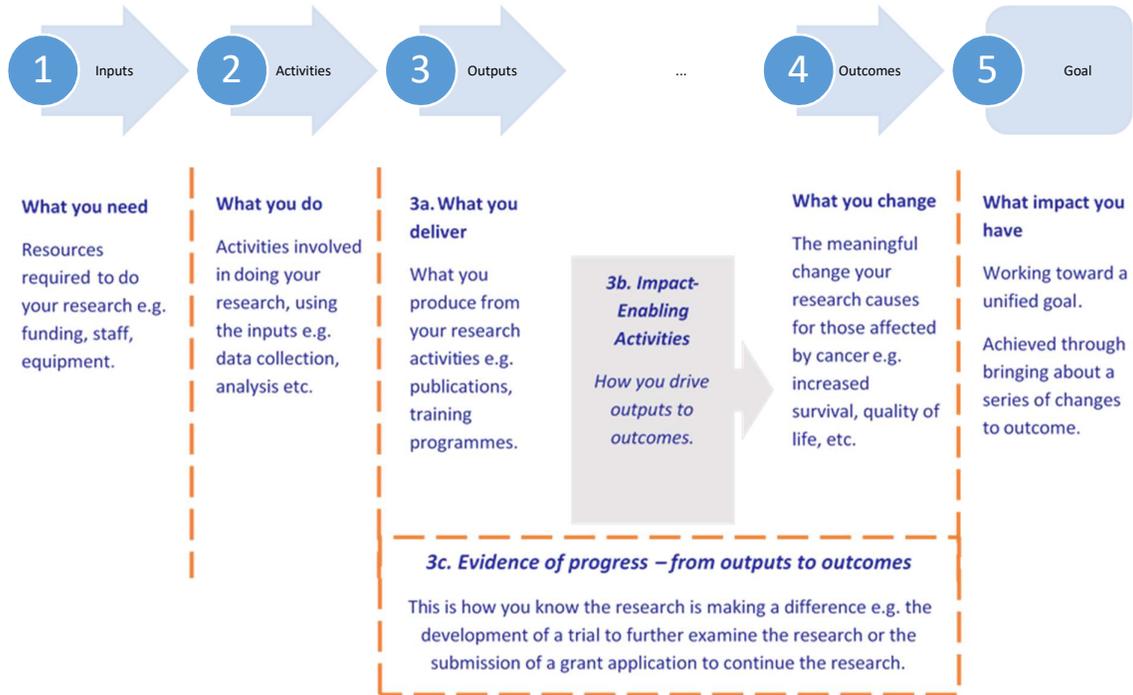
When applying for a grant or planning a research project, you usually have a goal or question that you aim to answer by completing the project. However, it is the Society's duty to ensure that the research we fund makes a difference to the lives of those who are affected by cancer.

Therefore, all research funded by the Irish Cancer Society should aim to have an impact on the lives of those who are affected by cancer and make steps towards a positive change. It is important that you are realistic; there is no need to overstate the impact of your research. Impact can be direct and indirect and it may happen slowly over time. The Irish Cancer Society is aware of this and understands every project in different.

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'.*

Thinking about the tangible impact of your research will provide you with 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.

The impact plan consists of:

5. Goal

4. Outcomes

3*a*. Outputs

3*b*. Impact-enabling activities

3*c*. Evidence of progress

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 is included below:

Section	Description	Worked Example
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 '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.' This is the goal that all research funded by the Irish Cancer Society should be working towards. Please note, you will not be required to add anything additional to this category of the impact section.	This is fixed to the Irish Cancer Society set goal so will always be the same: 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
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: — 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.	The aim of the Underrepresented Communities Scoping Award (an example grant call) is to identify the groups in Ireland who have the poorest cancer outcomes, then having identified these groups, identify the barriers that exist to accessing cancer services in Ireland. Therefore, the 4th and 5th and 6th Irish Cancer Society outcomes would be the most appropriate to use here: Outcome 4: Screening increases survival. Outcome 5: Improved care and support increase survival. Outcome 6: Improved care and support increase the quality of life of people affected by cancer.

— 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, newsletters, a website policy document, patents, information leaflets, reports, and training programmes etc. (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.	For example, the output could be the development of a report, which aims to identify which groups have especially poor cancer outcomes and what barriers exist to accessing cancer services amongst these groups. The report would inform the needs of these groups to the Irish Cancer Society and other stakeholders. The intended outcome would be "Improved care and support increase survival."
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 detail 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).	The impact enabling activity could be a workshop or presentation with key stakeholders (doctors, social workers, organisations etc.) in the field to discuss how best to disseminate and/or implement the information outlined in the report.
c. Evidence of progress	Please detail how you will measure the effectiveness of impact-enabling activities? i.e. how do you know your activity made a difference? What evidence can be used to show this? Indicators may be qualitative	Using the example provided in 3.b, the evidence of progress could be how many key stakeholders from change-making

	(descriptive or non-numerical) or quantitative (numerical) (300 words max).	organisations attended the meeting and what feedback was given.
2. Activities	Please outline the activities that will take place as part of the research project. As a lot of this has been provided in detail as part of the methodology section of your application, a high-level summary of what will be done over the course of the funding period is sufficient. Bullet points may be used (150 words max).	This may be looking at hospital records to find information on the demographics of people diagnosed with cancer, the development of a survey designed to assess the needs of people affected by cancer etc.
1. Inputs	Please detail the resources needed for the project. As a lot of this has been provided in detail as part of your application, a high-level summary is sufficient. Bullet points may be used (150 words max).	This possibly could be transcribing services to transcribe interviews with people affected by cancer or personnel costs for a researcher to facilitate the study.

g) Organisational Support

Organisational support is very important for this award, for both the AHP Lead and the Academic Lead. Indeed, assessment of applications will favour those with the strongest letters of support.

Each application requires an unequivocal and strong organisational letter of support (in PDF format) from both the organisation of the AHP Lead and the higher education institute of the Academic Lead. Letters of support should be completed using the template provided, downloadable from the application form and from the dedicated grant webpage on the Society's website.

i. The AHP Lead's organisational letter of support should be from the applicant's line manager, or similar. The letter must acknowledge that the individual, and the organisation more generally, is aware of and supports the application, and will enable the applicant to fulfil research obligations. This support includes the appointment of new staff, or staff to cover the AHP Lead's buy-out time (as appropriate). The letter should describe how this support will be accomplished in the context of providing a clinical service. In addition, the clinical site must agree to provide indemnity cover that may be required by any staff carrying out research at the clinical site.

ii. The Academic Lead's organisational letter of support should be completed by the head of department at the host institution. It must include acknowledgement that the organisation is aware of the application and will act as host institution should the applicant team be successful. This letter should also include acknowledgement that they will provide the staff of the award with research space, access to resources, and the appropriate insurance cover.

h) Budget

All applications should include a detailed budget. Indirect costs/overheads are not eligible costs for Irish Cancer Society awards. Please consult the Irish Cancer Society budget spending and expenses guidelines when developing your grant budget (see Appendix 3).

Approval of all budget items is at the discretion of the Irish Cancer Society. Any budgeted costs that do not adhere to spending guidelines risk rejection.

Direct costs that can be requested for the following budget categories:

Budget Item	Details
Personnel costs	All salary costs and staff should be detailed and robustly justified, with costs calculated using the appropriate HSE or IUA scales and inclusive of employer PRSI and appropriate pension contributions.
	Backfill for the AHP Lead's time may be budgeted. Salary costs for the Academic Lead cannot be budgeted.
	The hiring of junior research/support staff is allowable where the AHP Lead is not in a position to carry out the research themselves but possesses **significant** experience leading research programmes. Research staff will be supervised jointly by the AHP Lead and the Academic Lead. If research staff are to be hired, both partners should be able to demonstrate that they possess the necessary skills and experience to act in a supervisory capacity.
	Scales: https://www.hse.ie/eng/staff/benefitsservices/pay https://www.iua.ie/research-innovation/researcher-salary-scales/
Running costs	Running costs are costs associated with conducting the principal research activities e.g. materials and consumables, survey costs, travel for participants, transcription costs, etc.
Equipment	The Irish Cancer Society will allow researchers to purchase small equipment items up to a maximum value of €3,000. A strong justification must be provided for each equipment item, and a rationale must be given as to why this item is not already available to the researcher at their host institution. Only equipment items that are specific to the research project will be allowed. All costs must be inclusive of VAT, where applicable.
	Requests for large pieces of equipment will not be funded. Where appropriately justified, computer equipment up to the value of €1,500 may be purchased.
Training & education costs	Education and training for members of the research team may be budgeted. This may include attending courses, workshops, professional development training, etc. Include any training-related travel and accommodation costs here.
Travel and Dissemination costs	Costs associated with research dissemination may be budgeted e.g. poster printing, open-access publication costs, engagement events,

	conference attendance, etc. Include any dissemination-related travel and accommodation costs here.
PPI costs	Costs associated with involvement activities should be budgeted (a minimum of €3,750 should be budgeted for involvement activities). Research participation costs (e.g., participant travel) should not be included here. Please see Public and Patient Involvement (PPI) in Research Guidelines on developing a PPI budget.

i) Validation Summary

The validation summary page will notify you of any incomplete required. You will not be able to submit the application until all required fields are complete.

5. Submission of the Application

The application is ready for submission once the form has been validated on the validation summary page. This will also highlight any co-applicant who have yet to confirm their participation. Once the application has been validated, it may be submitted by the <u>lead applicant who initiated the application</u>.

The application will then be routed to the lead applicant who did not initiate the application for sign-off. For example, is the AHP Lead creates the application form and submits it, the form will be routed to the Academic Lead for sign-off. The application will not be received by the Society until both lead applicants have approved it, which must take place before the application deadline. It is the responsibility of the submitting applicant to ensure that signatory is given sufficient time to approve the application before the deadline.

Applications must be received by the Society prior to the deadline. Late or incomplete applications will not be accepted.

Application Checklist:

- ☐ Completed application form
- ☐ AHP Lead CV
- ☐ Academic Lead CV
- ☐ Host institution letter of support
- ☐ Clinical employer letter of support

6. Application Assessment

The Irish Cancer S

ociety bases its funding decisions on the recommendations of an external review panel. However, the Society withholds the right to reject any funding application at its own discretion.

Incomplete, ineligible, or late applications will be rejected by the Society and may not proceed to external review.

6.1. Conflicts of Interest

The Society endeavours to ensure that external reviewers are free of any conflicts of interest that might unduly bias the decision making process.

6.2. Assessment Procedure

Applications are reviewed by a panel of international academic/clinical experts (scientific panel) **AND** a panel of experts by experience (PPI panel). The scientific panel will consist of experts in the areas of social science, nursing, and allied health. The PPI panel will be made up of individuals with a lived experience of cancer. Sections of the application will be assessed in the following way:

	PPI Panel	Scientific Panel
Full Application	– PPI Summary – Gantt Chart – Impact Plan – Organisational Support	– Lead Applicant Details – Co-Applicant and Collaborator Details – Scientific Research Programme – Impact Plan – Organisational Support
Interviews	Present	Present

It is vital that the sections to be reviewed by the PPI panel are written in **plain accessible English**. Failure to do this may result in the PPI representatives being unable to accurately score and provide feedback on these sections of your application.

The review panel will be asked to provide feedback on the budget, which the Society will take into consideration. The approval of all grant budget items is at the discretion of the Irish Cancer Society.

The Scientific Panel will score applications based on:

— The strength and relevance of the applicant team's academic and clinical experience.
— The applicants' commitment to cancer research.
— The demonstrable benefit of the proposal to the research skills, capacity, and career development of the AHP Lead.
— The scientific merit of the proposed research, including feasibility of timelines.
— The strength and clarity of the impact plan to translate research funding into meaningful impact, aligned with the goal and outcomes of the Irish Cancer Society.
— The strength of endorsement from the applicants' organisation and the support structures available to both lead applicants.

The PPI Panel will score each application based on:

— Rationale for research and its relative importance to people affected by cancer.
— Feasibility of the proposed interactions with participants i.e. will the research work in practice.
— Clarity and feasibility of the PPI plan e.g. use of local resources, tokenism of plan, inclusion of all relevant stakeholders, timelines etc.
— A clear understanding by the researcher of the value of involving patients in their research project.
— Whether the PPI activities constitute true involvement and not participation/engagement.
— Whether the applicant's dissemination plan is feasible and includes all relevant stakeholders.
— The strength and clarity of the impact plan to translate research funding into meaningful impact, aligned with the goal and outcomes of the Irish Cancer Society.

6.3. Assessment Outcome

Review scores and comments will be collated and all applications will be discussed at a review panel meeting. The review panel will select which applications should proceed to interview. Applicants will be informed of the outcome by email. Reviewer feedback will be available to all applicants.

7. Next Stage: Interviews

Shortlisted applicants will be invited to attend a virtual interview early August 2023 (date to be confirmed). 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 project, including a response to the review panel's comments. This will be followed by a question and answer session. Both lead applicants will be expected to demonstrate a detailed and critical understanding of their proposed project. The final funding decision will be co-decided by the scientific and PPI reviewers.

8. Contact

If you require assistance with the online grant management system or have any questions about the grant call, please contact the Irish Cancer Society Research Department:

Email: grants@irishcancer.ie