



Irish Cancer Society Research

Appendix 2: Research Impact Framework (RIF) (February 2025 Update)

Contents

1. Introduction	2
1.1 Purpose	2
1.2 What is research impact?	2
1.3 Why is impact important?	3
2. Research Impact Framework	3
2.1 Framework overview	3
2.2 Framework principles.....	4
3. Theory of Change	5
4. Impact Plan.....	7
4.1 Key factors to consider	7
5. Goal	8
4. Outcomes	8
3a. Outputs	9
3b. Impact-Enabling Activities	9
3c. Evidence of progress – from outputs to outcomes.....	10
2. Activities.....	11
1. Inputs.....	11
4.2 Format of Impact plan at application stage	11
5. Reporting to the Irish Cancer Society on Impact	12
5.1 Progress on the path to impact	13
5.2 Plans for next reporting period.....	13
5.3 Format of Impact Reporting for funded project.....	13
5.4 Working with the Irish Cancer Society to communicate impact	14

5.5 Impact Census.....	14
6. Worked Examples.....	16
6.1 Translational Research.....	16
6.2 Survivorship.....	19
6.3 Clinical Trials.....	22
6.4 Strategic.....	25
7. More information.....	28

1. Introduction

1.1 Purpose

The Research Impact Framework (RIF) is a guide on research impact for those applying for funding from the Irish Cancer Society and for grant holders who currently hold an ICS funded award.

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

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 the impact of Irish Cancer Society funded research.

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; the real-life impact that research can have on people affected by cancer.

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 and measure impact, but also 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 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.'

In working towards this vision, 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. This is a set of principles that 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' (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

The research impact principles frame the relationship that the Irish Cancer Society want 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
1. 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 benefit of research to people affected by cancer.
2. 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 how to include PPI in grant applications and projects.
3. 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 special Terms and Conditions of their contract. 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.
4. Dissemination and engagement	Grant holders will inform the Irish Cancer Society of any dissemination or engagement activities planned as soon as possible. The Irish Cancer Society's Research and Communication Departments will support grant holders to communicate their research in an accessible way, especially for people affected by cancer, donors, and the general public. Grant holders will work closely with the Irish Cancer Society (e.g. Communications and Fundraising) to plan and undertake communication activities and attend engagement events run by the Irish Cancer Society to raise awareness of their research and its

	findings. It is expected that grant holders will engage with, and participate in, Irish Cancer Society engagement, dissemination and awareness activities relating to outputs funded by the Society throughout the lifetime of their grant and following the cessation of the grant. Grant holders must accurately represent the Irish Cancer Society and their research outputs. In order to facilitate this arrangement, grant holders contact details may be shared with the communications team within the Irish Cancer Society.
5. Open access	Open access to research outputs are an important way of maximising the impact of research. Grant holders are strongly encouraged to share their research outputs (not just publications, but also datasets and other outputs) with the wider research community, the public, and other audiences as appropriate. The Irish Cancer Society will support open access publication costs where requested for in a grant's budget
6. 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. Each year, all grant holders must complete a mandatory Impact Census to help researchers take stock of their achievements and to allow The Society to monitor research impact. Grant holders are encouraged to maintain longer-term contact with the Society through its research community.

3. Theory of Change

A Theory of Change, in simple terms, is a method of showing how activities create outcomes (or change), often in diagram form. This is the methodology that the Irish Cancer Society will use to measure impact.

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

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

The goal and outcomes for all impact plans submitted to the Irish Cancer Society will remain the same. These are detailed in **Figure 1** and are explained in more detail in Section 4.

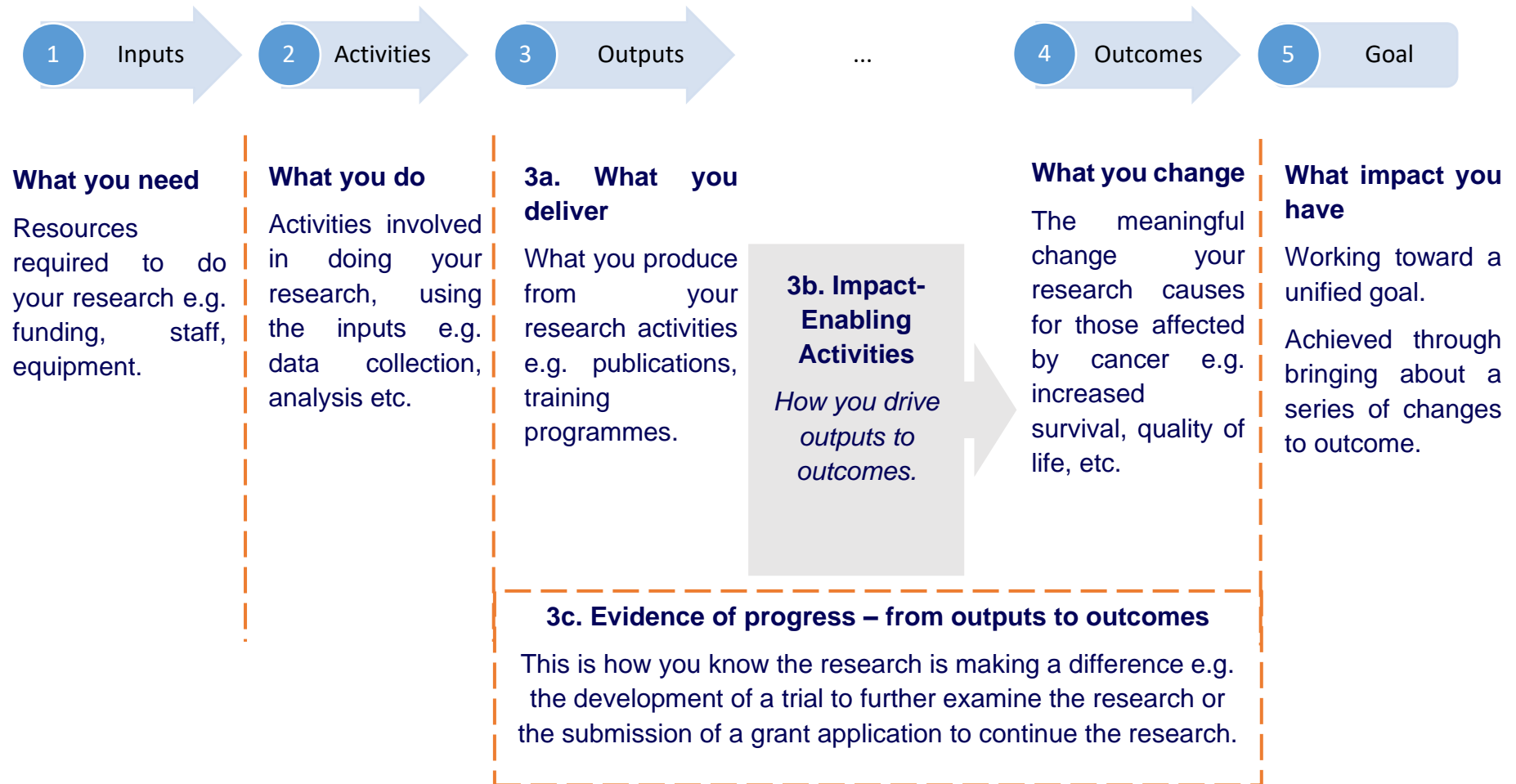


Figure 1. Theory of Change shown in diagrammatic form. The examples of each key factor are only for illustrative purposes and are not comprehensive.

4. Impact Plan

As mentioned in Section 3, 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.

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 information provided in the impact plan by researchers at the application stage may be somewhat limited, as the project has not yet started; 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 steps 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 research 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 4.1).

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

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 5).

4.1 Key factors to consider

The impact plan must consider the following key factors:

Please note, 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
- 3a. Outputs
- 3b. Impact-enabling activities
- 3c. Evidence of progress
2. Activities
1. Inputs

5. 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 the Irish Cancer Society, investing in research is a way of contributing to achieving this goal. Therefore, all Irish Cancer Society grant holders should be working towards achieving this goal.

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

'Everyone affected by cancer will have access to world-class treatment, care and support. In future, no one in Ireland will die from cancer.'

4. 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 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 working 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).

Irish patients benefit from world class cancer research

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

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.

3a. Outputs

Outputs are quantitative results which are achieved after implementing an activity. Examples of outputs include papers, publications, 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 in section 4 the plan for driving outputs to outcomes is more important in terms of achieving impact from a research project.

3b. 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. 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.

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 to 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'.

3c. Evidence of progress – from outputs to outcomes

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

Evidence of progress means that the impact-enabling activities are progressing the research on the impact pathway towards contributing to an outcome i.e. having a tangible benefit outside the lab or academia.

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 of 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 researchers 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.

2. Activities

These are the activities that will be undertaken by the researcher as part of 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 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 paper on the results of the research.

Examples of activities in a social 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 of a report.

1. 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.

4.2 Format of Impact Plan at application stage

Key Factor	Additional guidance
5. Goal	This is pre-determined and will be standard for all the research that we fund.
4. Outcome	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. You can select more than one outcome if relevant.
3a. Outputs	Planned outputs for the project.

3b. Impact-Enabling Activities	Impact-enabling activities are activities that drive outputs to outcomes- i.e. progress the research along the impact pathway. 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.
3c. 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 of evidence may be qualitative or quantitative.
2. 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.
1. Inputs	Resources needed for the project- high level information is adequate and can be in bullet points.

Please note, you can find worked examples in section 6.

5. Reporting to the Irish Cancer Society on Impact

An impact plan has been required as part of the application process for the majority of the Irish Cancer Society 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 the impact plans.

Therefore, grant holders will be required to give an update on the progress of their impact plan in their **reports** to the Irish Cancer Society and complete an annual **Impact Census**. 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.

Progress in the first report will be monitored according to the original impact plan submitted as part of the original application. Progress in the second report will be monitored according to the progress in the first report and so on.

More detailed information will be required as the project progresses. The impact plan may 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 the path to impact**

- **Plans for next reporting period**

5.1 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 impact-enabling activities have contributed to an outcome.

This evidence will have been gathered throughout 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.

5.2 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.

It is important to take stock of the research that has already been carried out and think about where the research is headed. Research plans can change overtime and it's vital that these changes are reflected in the plans for the next reporting period. Maximising the impact of research should be at the forefront of all future research in order to ensure that research funded by the Irish Cancer Society has as much impact on the lives of those who are affected by cancer as possible.

5.3 Format of Impact Reporting for funded project

Below is an example of impact reporting in a funded project. Please note this example is for indicative purposes only.

Additional guidance	
Title	Project title
Goal	Is set and cannot be changed
Outcome	Set at application stage.

Outputs	Update on outputs for the project planned activities and any new or changed activities. If outputs have changed or new outputs added an explanation must be given.
Impact-enabling activities	Update on activities. Information will be required on status of planned activities and any new or changed activities. If activities have changed or new activities added an explanation must be given.
Evidence of progress	Has the research progressed on the path to being impactful? What evidence can you provide to illustrate this? Has the impact-enabling activities contributed to achieving the outcome directly or indirectly?
Plans for next reporting period	Impact-enabling activities for the upcoming reporting period.
Activities	Can remain the same from application stage. Details will be required if the activities have changed and these changes affect the impact plan.
Inputs	Can remain the same from application stage. Details will be required if the inputs have changed and these changes affect the impact plan.

5.4 Working with the Irish Cancer Society to communicate impact

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 throughout 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.

5.5 Impact Census

Research impact and output monitoring is an important strategic priority¹ for the Society. 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 the Society's duty to our donors and to all

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

people affected by cancer in Ireland to ensure that the research we fund does just that- makes a difference.

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’.

It is crucial that the research we fund is always working towards making a positive impact on the lives of those who are affected by cancer. It is equally important that we can communicate this impact to the all of our stakeholder to let them know that the research we fund has made a difference.

In order for us to capture the impact of our funded research projects, in 2020 the Society launched an annual Research Census for all of our currently funded researchers. The aim of this annual Census is to capture the key performance indicators and case studies of impact across all research projects, within our translational, trials, survivorship and specialised areas research themes.

Therefore, this census will ask for information on both outputs and research impact from the Irish Cancer Society funded project or programme. It is envisaged that the results from the census will be used to demonstrate the impact that our research investment is having to both internal and external stakeholders such as our donors, the general public, the medical community, our partners, and those who are affected by cancer in Ireland.

It is compulsory that all researchers funded by the Irish Cancer Society complete the census. For researchers who hold more than one funding award with the Irish Cancer Society, one census for each grant should be completed and clearly marked with each grant code.

6. Worked Examples

In this section, you will find some worked examples across the four Irish Cancer Society research themes: translational, survivorship, clinical trials and strategic areas. These are to help guide you in creating your own research impact plan.

6.1 Translational Research

Section	Description & Information given to applicant	Worked Example
5. Goal	<p>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 “Everyone affected by cancer will have access to world-class treatment, care and support. In future, no one in Ireland will die from cancer.”</p> <p>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.</p>	<p>This is fixed to the Irish Cancer Society set goal so will always be the same:</p> <p>‘Everyone affected by cancer will have access to world-class treatment, care and support. In future, no one in Ireland will die from cancer.’</p>
4. Outcome	<p>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.</p> <p>You must select at least one outcome from the below list:</p> <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. 	<p>This PhD project involves examining new treatments to overcome drug resistance in bowel cancer. Therefore, the first Irish Cancer Society outcome would be the most appropriate to use here:</p> <p>Outcome 1: Treatments and diagnostics increase survival.</p>

- Screening increases survival.
- Improved care and support increase survival.
- 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.

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 publication of a paper on a new drug combination tested in the lab using patient tumour samples.

Using the above output as an example, the impact enabling activity could be a workshop with key stakeholders (scientists, clinicians, people affected by cancer) in the field to discuss the findings from the publication and make a plan on how best to develop this translational

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 (descriptive or non-numerical) or quantitative (numerical) (300 words max).	<p>research further in order to build more scientific evidence.</p> <p>Using the example provided in 3.b, the evidence of progress could be the development of a grant application in collaboration with key stakeholders to develop the research further (this would be an example of qualitative evidence), or it could be details on how additional funding was obtained to develop the research further (this would be an example of qualitative evidence).</p>
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).	An experiment to test 2 new drug combinations using patient samples.
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).	<p>Funding to pay for the research project to be undertaken.</p> <p>Supplies to undertake their experiments.</p> <p>A piece of equipment which helps them test their drug combinations in the lab.</p>

6.2 Survivorship

Section	Description & Information given to applicant	Worked Example
5. Goal	<p>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 “Everyone affected by cancer will have access to world-class treatment, care and support. In future, no one in Ireland will die from cancer.”</p> <p>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.</p>	<p>This is fixed to the Irish Cancer Society set goal so will always be the same:</p> <p>‘Everyone affected by cancer will have access to world-class treatment, care and support. In future, no one in Ireland will die from cancer.’</p>
4. Outcome	<p>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.</p> <p>You must select at least one outcome from the below list:</p> <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. 	<p>This project is about developing a new intervention to reduce levels of anxiety in people with cancer.</p> <p>Therefore, the first Irish Cancer Society outcome would be the most appropriate to use here:</p> <p>Outcome 6: Improved care and support increase the quality of life of people affected by cancer</p>

	<ul style="list-style-type: none"> — Improved care and support increase survival. — 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. <p>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.</p> <p>By targeting a strategic outcome, every funded study funded is contributing to the Society’s goal.</p>	
<p>3a. Outputs</p>	<p>Planned outputs for the project e.g. publications, newsletters, a website policy document, patents, information leaflets, reports, and training programmes etc. (150 words max).</p> <p>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.</p>	<p>The publication of a peer reviewed paper on how effective the intervention was in reducing levels of anxiety.</p>
<p>b. Impact-enabling activities</p>	<p>An output is unlikely to achieve a desired outcome on its own. Impact-enabling activities bridge the gap between outputs and outcomes.</p> <p>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).</p>	<p>Using the above output as an example, the publication alone cannot be impactful if it is not shared with people who make decisions about that service. The impact enabling activity could be a workshop with key stakeholders (clinical psychologists, people affected by cancer) to</p>

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 (descriptive or non-numerical) or quantitative (numerical) (300 words max).	<p>discuss the findings and how to implement them. Another activity would be the provision of a training course for the new intervention.</p> <p>Using the example provided in 3.b, the evidence of progress could be the development of a grant application in collaboration with key stakeholders to implement the intervention into clinical practice (this would be an example of qualitative evidence). It could also be the number of new clinical sites piloting the intervention (this would be an example of quantitative evidence).</p>
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).	A Randomised Controlled Trial (RCT) to compare the effectiveness of the new intervention to routine care.
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).	<ul style="list-style-type: none"> • Funding to pay for the research project • Materials to undertake the experiments

- A piece of software to conduct the data analysis

6.3 Clinical Trials

Section	Description & Information given to applicant	Worked Example
5. Goal	<p>This is the goal of the Irish Cancer Society. It is pre-determined by the <u>Strategy 2020-2025</u> and cannot be changed. This goal is that ‘Everyone affected by cancer will have access to world-class treatment, care and support. In future, no one in Ireland will die from cancer.’</p> <p>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.</p>	<p>This is fixed to the Irish Cancer Society set goal so will always be the same:</p> <p>‘Everyone affected by cancer will have access to world-class treatment, care and support. In future, no one in Ireland will die from cancer.’</p>
4. Outcome	<p>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.</p> <p>You must select at least one outcome from the below list:</p> <ul style="list-style-type: none"> — Treatments and diagnostics increase survival. — Treatments and diagnostics increase the quality of life of people affected by cancer. 	<p>This trial involves examining a new treatment for bowel cancer. Therefore, the first Irish Cancer Society outcome would be the most appropriate to use here:</p> <p>Outcome 1: Treatments and diagnostics increase survival.</p> <p>Outcome 2: Treatments and diagnostics increase the</p>

	<p>identified outcome. When will these activities take place? Information can be provided in narrative or bullet point format (300 words max).</p>	<p>discuss the findings from the publication and make a plan on how best to build more scientific evidence or bring the evidence into the clinic.</p>
<p>c. Evidence of progress</p>	<p>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 (descriptive or non-numerical) or quantitative (numerical) (300 words max).</p>	<p>Using the example provided in 3.b, the evidence of progress could be the development of a grant application in collaboration with key stakeholders to complete another more extensive clinical trial (this would be an example of qualitative evidence). It could also be details on how additional funding was obtained to develop the research further (this would be an example of qualitative evidence).</p>
<p>2. Activities</p>	<p>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).</p>	<p>Accrual of patients on to the trial.</p>
<p>1. Inputs</p>	<p>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</p>	<ul style="list-style-type: none"> • Funding to pay for the research project to be undertaken. • Protected time for the lead clinician.

summary is sufficient. Bullet points may be used (150 words max).

6.4 Strategic

Section	Description & Information given to applicant	Worked Example
5. Goal	<p>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 ‘Everyone affected by cancer will have access to world-class treatment, care and support. In future, no one in Ireland will die from cancer.’</p> <p>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.</p>	<p>This is fixed to the Irish Cancer Society set goal so will always be the same:</p> <p>‘Everyone affected by cancer will have access to world-class treatment, care and support. In future, no one in Ireland will die from cancer.’</p>
4. Outcome	<p>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.</p> <p>You must select at least one outcome from the below list:</p> <ul style="list-style-type: none"> — Treatments and diagnostics increase survival. — Treatments and diagnostics increase the quality of life of people affected by cancer. 	<p>The aim of the Underrepresented Communities Scoping Award 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:</p>

<ul style="list-style-type: none"> — 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. — People affected by cancer feel more empowered in their cancer journey. <p>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.</p> <p>By targeting a strategic outcome, every funded study funded is contributing to the Society’s goal.</p>	<p>Outcome 4: Screening increases survival.</p> <p>Outcome 5: Improved care and support increase survival.</p> <p>Outcome 6: Improved care and support increase the quality of life of people affected by cancer.</p>
<p>3a. Outputs</p> <p>Planned outputs for the project e.g. publications, newsletters, a website policy document, patents, information leaflets, reports, and training programmes etc. (150 words max).</p> <p>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.</p>	<p>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.”</p>

b. Impact-enabling activities	<p>An output is unlikely to achieve a desired outcome on its own. Impact-enabling activities bridge the gap between outputs and outcomes.</p> <p>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).</p>	<p>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.</p>
c. Evidence of progress	<p>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 (descriptive or non-numerical) or quantitative (numerical) (300 words max).</p>	<p>Using the example provided in 3.b, the evidence of progress could be how many key stakeholders from change-making organisations attended the meeting and what feedback was given.</p>
2. Activities	<p>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).</p>	<p>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.</p>
1. Inputs	<p>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</p>	<p>This possibly could be transcribing services to transcribe interviews with people affected by cancer or personnel costs for a</p>

summary is sufficient. Bullet points may be used (150 words max).

researcher to facilitate the study.

7. 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.