

## Public Health Intervention Development (PHIND) Scheme FAQs

## **Grant policy**

**Q.** Is the £150,000 limit the total amount that can be applied for (100% FEC) or is the £150,000 limit the 80% of FEC that the PHIND grant will fund?

**A.** The £150,000 limit is based on the MRC contribution, so the 80% FEC. There are exceptions, such as costs incurred by overseas applications.

**Q.** Does it count as a resubmission if my application was rejected as out of remit by another funder?

A. No.

**Q.** During the course of a PHIND grant it has become clear that further work is needed to be able to fully develop the intervention. This is follow-on work but would still sit within the PHIND remit and would be too early stage for NIHR. Do the PHIND panel consider follow on PHIND applications which further develop a previous PHIND study?

**A.** Given that the follow-on study you describe still appears to be within scope for the PHIND scheme, then there is no reason that we would not consider an application for this work. I would advise the applicants to utilise the Cover Letter to explain this new study and how it sits alongside the previous grant. This will help the panel to assess its merits and understand why the follow-on study is needed.

## **Application**

**Q.** What is the difference between the communications plan and the impact summary? **A.** The impact summary section of the Je-S form should describe the beneficiaries and potential impacts, and the communications plan section should describe how the research findings will be communicated both within and beyond the academic community.

**Q.** What does the application form mean by "Criteria for progression"?

**A.** This is how you would measure "success" and decide to move onto the next stage of the project. That may be related to uptake of the intervention, its feasibility or scalability, or practicality of delivery/support by those delivering it. You could include figures but this isn't essential - it's more to give the panel an indication of what you're looking for to decide to move on.

Q: If I wish to include a logic model, where should it go in the application?

**A:** The logic model can be included as part of the Case for Support. Please note that, if including a logic model, the page limit must still be adhered to.

## Remit

**Q.** Can we include more than one intervention in our application?

**A.** We can't see why not, would be good value for money **IF** achievable

**Q.** Where is the boundary between development and feasibility?

**A.** We use the NIHR definition of feasibility ("Feasibility studies are pieces of research done before a main study in order to answer the question "Can this study be done?" They are used to estimate important parameters that are needed to design the main study").

A limited amount (approximately 15%) of the overall cost could be allocated to some acceptability and feasibility research, to further develop the intervention, help cement a collaboration or to underpin further work to help the case for a future grant application Standalone feasibility/pilot studies should usually be submitted to the appropriate NIHR funding scheme.

**Q.** Should our proposal include an element of feasibility testing?

**A.** There is no requirement to do a feasibility study as part of the PHIND project. For example, you may wish to do a smaller-scale acceptability test.

**Q.** What is the difference in the remits of PHIND and of the MRC Applied Global Health Research Board?

**A.** Applied research is defined as research seeking practical solutions to health challenges from late stage intervention development onwards. This includes implementation research, scale-up activities, health services research, health economics, health policy research, and research with a predominantly applied focus that does not fit within the remit of other MRC Boards and Panels.

The PHIND scheme seeks to support early stage intervention development and complements funding available from other schemes, such as the Applied Global Health Research Board, NIHR and other sources, for subsequent stages of public health intervention development and evaluation.