

NIHR Evaluation, Trials and Studies Coordinating Centre

Evaluation Research Programmes Managed by NETSCC

Dr Nicholas Hicks

Director  
NETSCC, HTA programme



Managing evaluation  
research on behalf of  
the National Institute  
for Health Research



## Managing evaluation research programmes on behalf of NIHR

- ▶ **NIHR Evaluation, Trials and Studies (NETS) programmes**
  - ▶ Efficacy and Mechanism Evaluation programme (EME)
  - ▶ NIHR Health Technology Assessment programme (HTA)
  - ▶ NIHR Service Delivery and Organisation programme (SDO)
  - ▶ NIHR Public Health Research programme (PHR)
  - ▶ NIHR Health Services Research programme (HSR)
  
- ▶ **Management of funding for UKCRC registered Clinical Trials Units**
  - ▶ Stable funding to enable CTUs, conducting clinical evaluations and trials for NETS programmes, to support and strengthen research capacity
  - ▶ Intended to produce an increase in the number of high quality research applications submitted to NETS programmes
  - ▶ Eighteen units awarded funding to date with an initial 3 year contract

## Needs-led and science-added approach for NIHR programmes

▶ **We are**

**Needs-led**

because we identify and assess the importance of research questions to the NHS and policy makers.

**Science-added**

because we rigorously check the the scientific quality of all proposals and monitor and support the delivery of quality.

▶ **We provide**

**Value for money**

because assessment of need and scientific support maximises the relevance and benefits achievable in a funding stream.

# Efficacy and Mechanism Evaluation programme

## ► Purpose and Remit

The **EME** programme is aimed at supporting 'science driven' studies with an expectation of substantial health gain.

Proposed research must evaluate the clinical efficacy of an intervention, where proof of concept in humans has been achieved and which may add significantly to our understanding of biological or behavioural mechanisms and processes.

The EME programme is funded by the Medical Research Council and managed by NIHR.

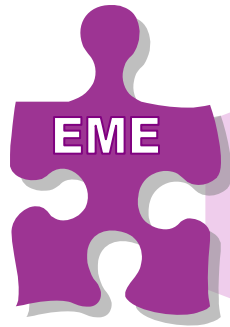
## ► History

The EME programme was launched in April 2008 and has a nominal budget of £15m. pa

## ► For more information

For more information and to apply please visit the EME programme website

# EME programme funding opportunities



Translational pull through

Researcher-led

	Types of Research	Who defines the question?	Frequency Per year
Translational pull through	Primary Research; Clinical efficacy of interventions	EME programme	As required
Researcher-led	Primary Research; Clinical efficacy of interventions	Researcher	Continuous with 3 submission deadlines

- ▶ EME will not support incremental modifications or refinements of existing technologies
- ▶ EME will not support proof of concept or proof of mechanisms studies in humans (i.e. early phase clinical trials)

## EME programme highlights

- ▶ The EME programme works seamlessly with and sits between MRC programmes and the NIHR HTA programme
- ▶ Since launch in April 2008 it has received over 135 applications. The first study commenced on the 1st July 2009.
- ▶ The time taken from initial application to a funding decision is around 8 months
- ▶ A fast-track scheme introduced where reducing the timescale will provide significant benefit, or exploitation of a narrow window of opportunity & can reduce the application process by about 3 months. Applicants will need to convince the EME programme of the benefits of following this route.
- ▶ Six existing MRC funded clinical trials will in future be managed by the EME programme
- ▶ The Board has funded a further 6 studies, subject to changes, at the March 2009 Board meeting.

# NIHR Health Technology Assessment programme

## ▶ Purpose and Remit

To deliver information about the effectiveness, costs and broader impact of healthcare treatments and tests for those who plan, provide or receive care in the NHS.

## ▶ History

Since its inception in 1993 the HTA programme has invested over £280m in more than 800 research projects.

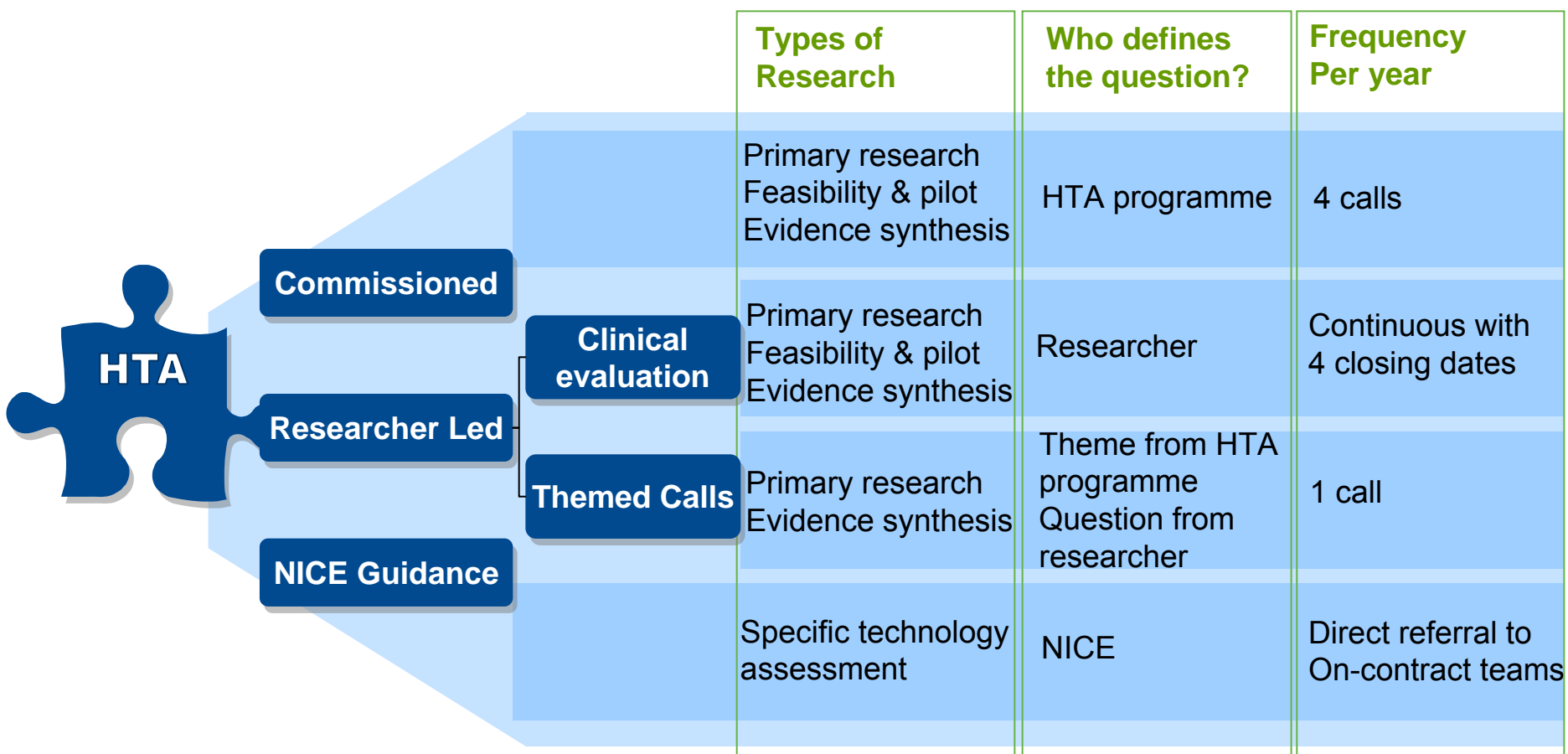
▶ ***Health Technology Assessment.*** 2008 impact factor places it in the top 10% of medical & health related journals

## ▶ Contact HTA

For more information visit [www.hta.ac.uk](http://www.hta.ac.uk)

## HTA funding opportunities

- ▶ The predicted annual budget by 2011/12 is £88m
- ▶ The HTA programme offers 3 funding workstreams:



## HTA programme highlights

- ▶ Seven prioritisation panels deciding the importance to the NHS of research questions
- ▶ Clinical Evaluation and Trials funding stream now makes grants for all types of evaluation studies falling within the HTA remit
- ▶ We have 3 funding boards and 1 editorial board
- ▶ Median size of an HTA randomised control trial = 750
- ▶ NICE : 135 multiple technology appraisals and 39 single technology appraisals have been completed to March 2009
- ▶ Papers published in key journals over the past 5 years:
  - ▶ BMJ – 41
  - ▶ The Lancet – 14
  - New England Journal of Medicine - 3
  - Annals of Internal Medicine - 3

## NIHR Public Health Research programme

### ► Purpose and Remit

The PHR programme evaluates public health interventions, providing new knowledge on the benefits, costs, acceptability and wider impacts of **non-NHS** interventions intended to improve the health of the public and reduce inequalities in health.

The scope of the programme is multi-disciplinary and broad covering a range of public health interventions.

### ► History

The PHR programme was launched in Autumn 2008.

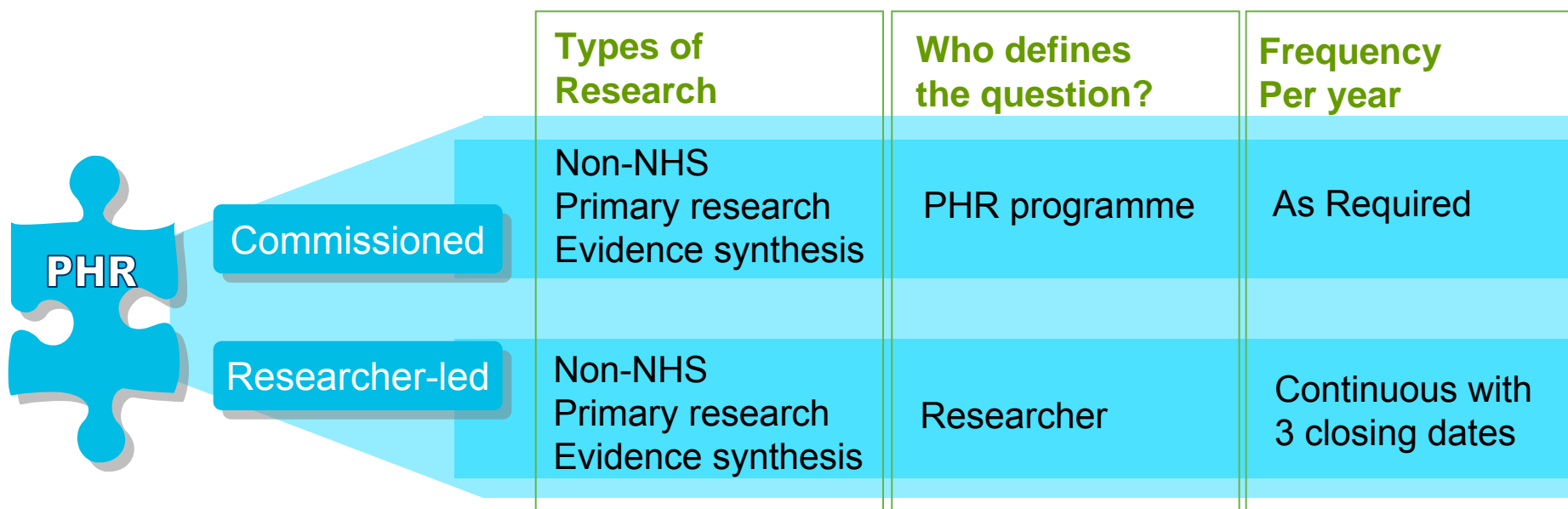
### ► Contact PHR

For more information and to apply for funding visit

[www.phr.nihr.ac.uk](http://www.phr.nihr.ac.uk)

## PHR programme funding opportunities

- ▶ The predicted annual budget is £10m by 2011/12
- ▶ The PHR Programme offers 2 funding streams: Commissioned and Researcher-led



	<b>Types of Research</b>	<b>Who defines the question?</b>	<b>Frequency Per year</b>
<b>Commissioned</b>	Non-NHS Primary research Evidence synthesis	PHR programme	As Required
<b>Researcher-led</b>	Non-NHS Primary research Evidence synthesis	Researcher	Continuous with 3 closing dates



## PHR programme highlights

### Researcher-led:

- ▶ First call closed in January 2009 with 35 proposals  
Research Funding Board met in May to assess scientific quality, feasibility and value for money: 3 full proposals recommended for funding with changes, 5 outline proposals shortlisted.
- ▶ Second call June 2009 – 26 outline proposals received, 18 in remit.  
Public health importance to be assessed by Programme Advisory Board on 10 July 2009.

### Commissioned:

- ▶ Launching in July 2009. Programme Advisory Board to select research topics for advertisement.
- ▶ Online research suggestions facility launched: [www.phr.nihr.ac.uk/suggest](http://www.phr.nihr.ac.uk/suggest)
- ▶ Obesity joint themed call with HTA programme launching November 2009.

## NIHR Service Delivery and Organisation Programme

### ► **Purpose and Remit**

It aims to improve health outcomes for people by commissioning research evidence that improves practice in relation to the organisation and delivery of healthcare.

### ► **History**

The SDO programme joined NETSCC in April 2009 having previously been managed from the London School of Hygiene & Tropical Medicine since 1999.

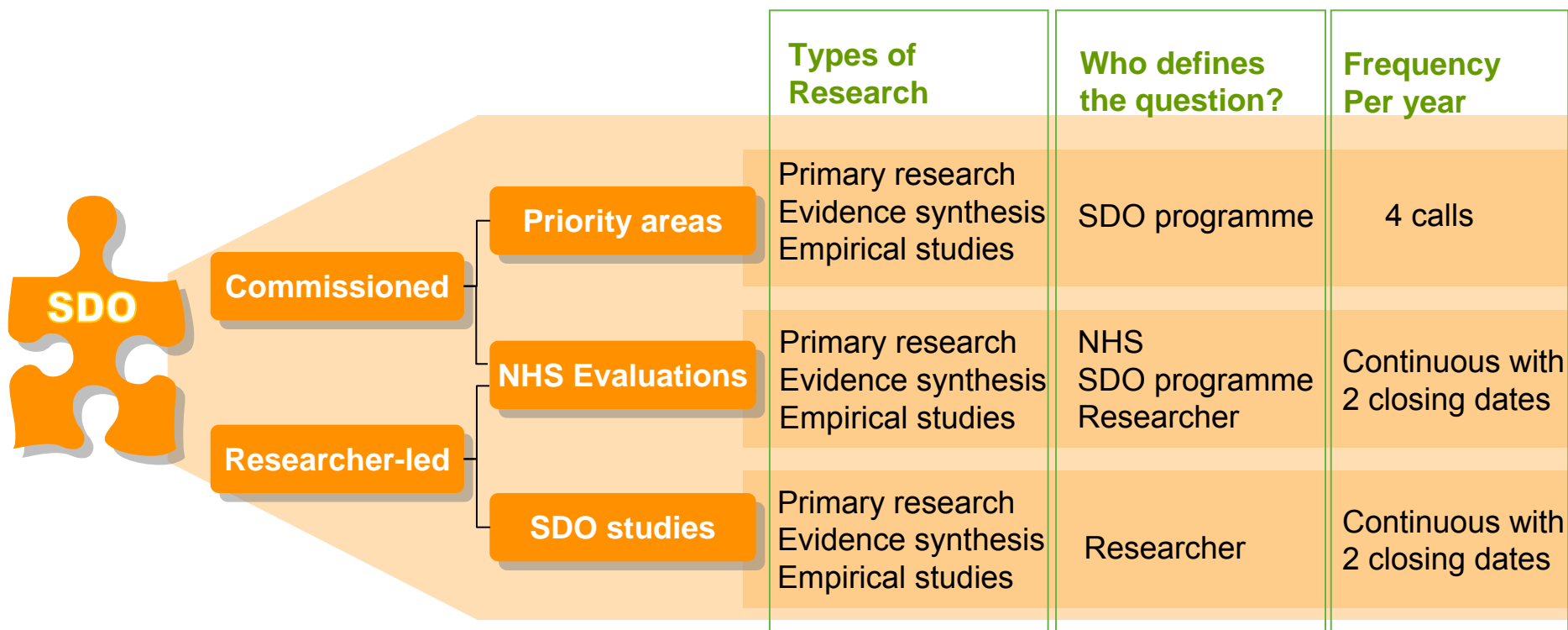
### ► **Contact SDO**

For more information and to apply for funding visit

[www.sdo.nihr.ac.uk](http://www.sdo.nihr.ac.uk)

## SDO programme funding opportunities

- ▶ The predicted annual budget is £12m by 2011/12
- ▶ The SDO programme has commissioned and researcher-led funding streams through the Priority Areas, Evaluations, and SDO Studies panels.



## SDO programme highlights

### ▶ **SDO Portfolio**

- ▶ The current portfolio includes 130 active and 110 completed projects
- ▶ Three panels have been established:
  - ▶ The Priority Areas panel
  - ▶ The SDO Studies panel
  - ▶ Evaluations panel

### ▶ **Calls: both calls opened on 25<sup>th</sup> June and close on 20<sup>th</sup> August**

- ▶ First SDO Studies Panel
- ▶ Priority Areas Panel call on Knowledge Mobilisation and Capacity Building

### ▶ **Award winning publications and outputs**

- ▶ Baxter award (2006) from the European Health Management Association for 'Diffusion of Innovations in Health Service Organisations' (Greenhalgh)
- ▶ British Academy of Management Book of the Year (2005) for "Organisational Change" (Iles and Sutherland)

# NIHR Health Services Research programme

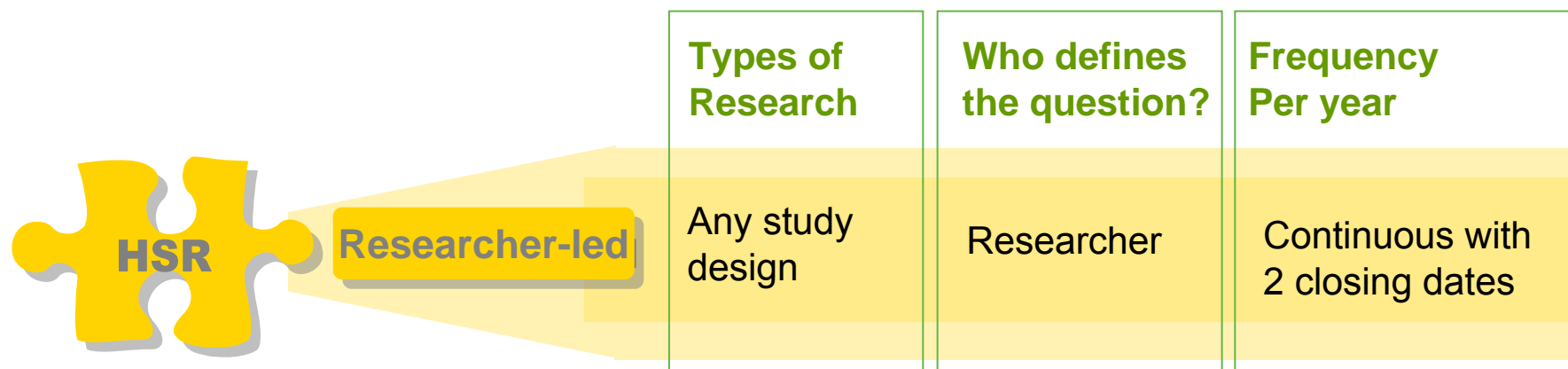
## ► Purpose and Remit

- Launched in October 2008 the HSR programme provides funding across a broader range of health services research than is already run by the NIHR.
  - Researchers will be invited, on an ongoing basis, to submit proposals for both primary research and evidence syntheses.
  - The HSR programme will fund areas that are not currently funded, either due to remit or cost, by existing NIHR, DH and MRC programmes.
  - The programme will fund multiple small studies or a single large study of national or international importance beyond the capacity of other funders.
- First call for expressions of interest in January 2009
- **Contact HSR**  
For more information and to apply for funding visit

[www.hsr.nihr.ac.uk](http://www.hsr.nihr.ac.uk)

## HSR programme Funding opportunities

- ▶ The HSR programme has an predicted annual budget of £5m by 2011/12
- ▶ The HSR programme will initially offer a researcher-led funding stream with the possibility of a commissioned workstream later.





## HSR programme highlights

- ▶ First call for expression of interest in January 2009 remains open until further notice (see [www.hsr.nihr.ac.uk](http://www.hsr.nihr.ac.uk))
- ▶ Will be recruiting members to the Commissioning Board over summer 2009
- ▶ It is anticipated that the first projects will be funded in early 2010
- ▶ Professor Ray Fitzpatrick, University of Oxford, appointed as programme Director in April 2009.

## NETS Programmes : - Full and appropriate funding

- ▶ We provide **Full and appropriate funding** because we place no upper limit on the amount of funding granted for a project
- ▶ If the question is important enough and the science requires it, we will fund it.
- ▶ University based projects: we fund up to 80% of the Full Economic Cost
- ▶ NHS Trust based projects: we fund 100% of the direct costs
- ▶ Other organisations are also welcome to apply



## Further Information

- ▶ For general information on NETSCC and our work
  - ▶ email [info@netscc.ac.uk](mailto:info@netscc.ac.uk) or visit [www.netscc.ac.uk](http://www.netscc.ac.uk)
  
- ▶ EME - Efficacy and Mechanism Evaluation programme
  - ▶ Email [info@eme.ac.uk](mailto:info@eme.ac.uk) or visit [www.eme.ac.uk](http://www.eme.ac.uk)
  
- ▶ HSR - NIHR Health Services Research programme
  - ▶ email [hsr@soton.ac.uk](mailto:hsr@soton.ac.uk) or visit [www.hsr.nihr.ac.uk](http://www.hsr.nihr.ac.uk)
  
- ▶ HTA - NIHR Health Technology Assessment programme
  - ▶ email [hta@hta.ac.uk](mailto:hta@hta.ac.uk) or visit [www.hta.ac.uk](http://www.hta.ac.uk)
  
- ▶ PHR - NIHR Public Health Research programme
  - ▶ email [info@phr.ac.uk](mailto:info@phr.ac.uk) or visit [www.phr.nihr.ac.uk](http://www.phr.nihr.ac.uk)
  
- ▶ SDO - NIHR Service Delivery and Organisation programme
  - ▶ email [sdo@soton.ac.uk](mailto:sdo@soton.ac.uk) or visit [www.sdo.nihr.ac.uk](http://www.sdo.nihr.ac.uk)

■ ■ ■ ■ ■ ■  
**NIHR Evaluation, Trials and Studies Coordinating Centre**

**Thank you**



UNIVERSITY OF  
**Southampton**



## Feasibility and pilot studies

- ▶ **Other definitions are used, but to help applicants.**
- ▶ **Feasibility study**
  - ▶ Pieces of research done before a main trial
  - ▶ Used to estimate important parameters that are needed to design the main study.
  - ▶ Feasibility studies for randomised controlled trials may not themselves be randomised.
  - ▶ They do not evaluate the outcome of interest; that is left to the main trial
- ▶ **Pilot study**
  - ▶ Pilot studies are a small scale versions of the main study that run to test whether the components of the main study can all work together.
  - ▶ Focused on the processes of the main trial, for example recruitment, randomisation, treatment, and follow-up assessments.
  - ▶ An **internal pilot** is a pilot that may be the first phase of the substantive trial and data from the pilot phase may contribute to the final analysis
  - ▶ An **external pilot** is one where the data may be analysed but set aside in respect of the substantive trial.