

Postgraduate Fellowship and Clinical-Academic Postgraduate Fellowship Guidance for Applicants 2023-24

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This document is intended to assist the completion of the Stroke Association Postgraduate Fellowship (PGF) and the Clinical-Academic Postgraduate Fellowship (CPGF) Application Form. The guidance is intended to be used in conjunction with the Conditions of Award.

Guidance for the PGF and CPGF has been differentiated where relevant.

If you have any questions, please email <u>research@stroke.org.uk</u> and we will get back to you as soon as we can.

1. Purpose of the awards:

Postgraduate Fellowship (PGF):

This award is for candidates who do not have a clinical background. The Stroke Association's research strategy aims to increase the UK funding base and capacity for stroke research across the full stroke care pathway. These fellowships are aimed at the stroke research leaders of the future. Postgraduate Fellowships are intended to provide the necessary skills and training for the development of an independent career in stroke research, and to allow candidates the opportunity to obtain a postgraduate qualification (MPhil or PhD).

Clinical-Academic Postgraduate Fellowship (CPGF):

We wish to embed research within clinical stroke care, and this award focusses on supporting capacity for clinical academic roles in stroke. Clinical academic roles provide an opportunity to close the gap between research and practice, whereby a reciprocal relationship can occur to improve the implementation of evidence-based practice, and to use real world clinical issues as a basis for the development of research projects. There is currently a lack of formalised clinical academic career pathways for nurses and Allied Health Professionals (AHPs), and in alignment with the HEE strategy, we wish to demonstrate a commitment to formalising this pathway.

The Postgraduate Clinical-Academic Fellowship (CPGF) is aimed at the future clinical-academic leaders in stroke. CPGFs are intended to provide the necessary skills and training for the development of an independent career in stroke research, whilst remaining

embedded in clinical practice, and to allow candidates the opportunity to obtain a postgraduate qualification (MPhil or PhD).

This award can be managed in two ways:

1. Spending a split of time between research and clinical practice (see section 5 below)

Or

2. Undertaking the PhD only, whilst maintaining engagement and activity within clinical settings which strengthen the links between research and practice (see section 9).

2. Remit of the awards

The Stroke Association supports fellows who plan to conduct stroke research into clinical and applied health, including social care research. This includes research that is conducted to answer specific questions relating to day-to-day practice in health services or community settings, and which has the potential to have an impact on the health or well-being of people affected by stroke. A clear trajectory to patient benefit is essential.

For the CPGF, the Stroke Association wishes to support fellows who have forged a clinical career in stroke, and have developed their own research question(s) from clinical experience.

The Fellow's proposed project should align with the priorities for stroke research, as set by the 2021 James Lind Alliance Priority Setting Partnership for Stroke. Further details can be found here:

https://www.stroke.org.uk/sites/default/files/research/stroke_priority_setting_partnership_full_report.pdf

We welcome applications from <u>Allied Health Professionals</u> and nurses, psychologists, pharmacists, and other applied researchers including but not limited to: implementation scientists, health economists, digital health and computer scientists.

The Stroke Association will not fund basic or pre-clinical research through its wholly-funded Postgraduate and Postdoctoral Fellowship schemes.

This does not apply to our joint Clinical Fellowship programme with the Association of British Neurologists (ABN), which are open to research across the whole pathway.

3. Eligibility requirements

PGF:

 Your proposed project must be based at a University/ NHS trust/ Statutory Social Care Organisation/ Research Institution within Great Britain or Northern Ireland. The Host Organisation must be capable of fulfilling the role of research sponsor. Applicants proposing a health or social care as their Host Organisation must include details of the HEI at which their PhD will be registered as their Partner Organisation. The HEI partner will need to provide confirmation that they will manage and support the PhD.

- Applicants should have research experience and training that prepares them to undertake a PGF
- Fellows must have at least two supervisors: one lead supervisor who bears overall responsibility for the training and the research project, and a second supervisor who may be less active in supervision and support. Additional supervisors are not mandatory but are permitted.
- You will be asked to give details of whether you have involved your local Research
 Design Service (RDS) or Clinical Trials Unit (CTU) in the development of the research
 proposal, including details of any discussions you have had with the RDS/CTU,
 improvements to the proposal as a result of the advice offered and their ongoing
 involvement in the project.
- Please note: involvement of a CTU is **mandatory** for clinical trial applications.
- For clinical trial applications, you will need to outline your lead supervisor's track record in running clinical studies and the expected role of your supervisor in ensuring the study will recruit to target and stay on track within your expected timescales.
- Physicians and similar medical professionals are not eligible to apply for a
 Postgraduate Fellowship and should apply for a Clinical Research Training
 Fellowship, which will be awarded jointly by the Stroke Association and ABN. Please
 see the ABN website or email the Research team for further details of this.
- Please contact the Research Team if you are unsure of, or have any queries regarding, your eligibility for this award.

N.B If applicable, we must have a copy of your ethical approval before you can take up the award.

CPGF:

- Graduate professionals, holding registration with the relevant regulatory body as a Nurse or an AHP.
- Have at least two years' experience of professional, post-graduation practice at the point of application
- All fellows on the CPGF programme will need to be hosted by a provider of health and/or social care services, and an HEI. One organisation must be identified as the employing organisation that will host the CPGF. The other organisation will be the partner organisation, and will need to provide a confirmation that they will support the fellow in this role within the supporting letter within the application.
- The Host Organisation must agree to provide the fellow with a contract of employment for the hours and duration of the award in its entirety, and be capable of fulfilling the role of research sponsor. Applicants proposing a health or social care

as their Host Organisation must include the HEI at which their PhD will be registered as their Partner Organisation. The HEI partner will need to provide confirmation that they will manage and support the PhD.

- Applicants should have research experience and training that prepares them to undertake a CPGF
- Successful applicants must register for a PhD (research doctorate) at a recognised HEI in the UK
- Fellows must have at least two research supervisors: one lead supervisor who bears
 overall responsibility for the training and the research project and a second
 supervisor who may be less active in supervision and support. The fellow must also
 have a clinical supervisor, who will support the fellow to meet their clinical-academic
 objectives for the duration of the award
- You will be asked to give details of whether you have involved your local Research Design Service (RDS) or Clinical Trials Unit (CTU) in the development of the research proposal, including details of any discussions you have had with the RDS/CTU, improvements to the proposal as a result of the advice offered and their ongoing involvement in the project.
- Please note: involvement of a CTU is mandatory for clinical trial applications.
- For clinical trial applications, you will need to outline your lead supervisor's track record in running clinical studies and the expected role of your supervisor in ensuring the study will recruit to target and stay on track within your expected timescales.
- Physicians and similar medical professionals are not eligible to apply for a CPGF, and should apply for a Clinical Research Training Fellowship, which will be awarded jointly by the Stroke Association and Association of British Neurologists (ABN). Please see the ABN website or email the Research team for further details of this.

Please contact the Research Team if you are unsure of, or have any queries regarding, your eligibility for this award.

N.B If applicable, we must have a copy of your ethical approval before you can take up the award.

4. Joint Funding

We welcome applications where funding from other sources has been secured to part-fund a Fellowship, such as from research charities, universities or government bodies. We would expect that the Fellowship award from the Stroke Association constitutes at least 50% of the funding towards the Fellowship. Please get in touch with the Stroke Association research team in the first instance, and before submitting your application, to discuss eligibility, the most appropriate way to budget for the Fellowship costs and how to acknowledge the funding that is already secured.

5. Award amount and duration

PGF:

The stipend funding available is in table 1.0 below, subject to the fellow making satisfactory progress. Awards will be made for two years initially, with a discretionary extension for the third year. This funding is for the candidate's stipend, and an additional total of £18,000 per year spread accordingly over the duration of the PhD will be awarded to cover research costs, tuition fees, and travel.

If your university only allows 4 year PhDs you are permitted to apply for this funding scheme. You can either apply before you begin the 4 year PhD or when you are in the first year of your PhD, applying for funding for the last 3 years of funding. The funding limits remain the same in each case.

				Research	Year 1	Year 2	Year 3
	24/25	25/26	26/27	costs	total	total	total
23/24 PGFs	£19,478.97	£20,452.92	£21,475.56	£18,000	£37,479	£38,453	£39,476
In London	£21,683.97	£22,768.17	£23,906.58	£18,000	£39,684	£40,768	£41,907

Table 1.0 stipend rates

The postgraduate fellowship is a full-time studentship if it is undertaken at 1.0FTE. Fellowships may be taken up on a part-time, pro-rata basis but the minimum working hours would be equivalent to 0.6 WTE. Applications from candidates seeking less than the full 3 years of funding will be considered in exceptional circumstances. However, the Stroke Association will need a letter from the Postgraduate Office of the host institution confirming the candidate will be able to obtain a PhD during the period of the Stroke Association funding.

CPGF:

The time split between research and clinical practice should be stated within the application form and maintained for the duration of the award. The CPGF is a personal award and will fund the salary costs of the fellow for their research activity, their PhD tuition fees, and the costs of research training and development. The salary costs for time spent on research activities will be paid to the fellow's host institution, and it is expected that the host institution will continue to pay the salary for any of the remaining time spent on clinical activity. In addition to salary and salary costs, a total of £18,000 per year spread accordingly over the PhD will be awarded to cover research costs, tuition fees, and travel.

Funding for research time will be matched to a clinical salary (plus salary costs) up to the top of Band 7 <u>AFC pay scale</u> if employed by the NHS, or equivalent limit in other organisations. Evidence of the Fellow's existing salary will be required to confirm the salary costs.

It is expected that the research component of the CPGF will be undertaken at a minimum of 0.6 FTE. The length of the CPGF should be calculated accordingly, see table 1.1. If the applicant is choosing to undertake the research activity at FTE 1.0, it is still expected that engagement and activity within clinical settings which strengthen the links between research and practice are maintained throughout (see section 9)

Time spent on research	Time spent on clinical	Length of CPGF
activity	activity	
0.6	0.4	5 years
0.8	0.2	4 years
1.0	0.0	3 years

Table 1.1 FTE components of CPGF

6. Patient and Public Involvement

We expect that all applicants will have involved people affected by stroke in the planning and development stages of their funding application and will continue to do so should their application be successful.

We follow the <u>NIHR</u> definition of <u>Involvement</u> as an "active partnership between patients, carers and members of the public with researchers that influences and shapes research". This is **not** the same as participation in research trials. We encourage applicants to consider NIHR's <u>UK Standards for Involvement</u>.

Plans for involvement should be meaningful and explain the anticipated impact on your work and research. Planning should be fully resourced and costed. There is no defined maximum budget for involvement provided there is clear justification. We would expect costs to be requested in all applications and all costs must still fit within the overall budget for the award.

You can request advice for involvement by contacting our Research Involvement Lead, Dan Taylor (daniel.taylor@stroke.org.uk). Requests to involve people affected by stroke through our networks may be possible but are subject to demand and require at least six weeks prior to the application deadline.

You can find out more about how we can help you to involve people affected by stroke in your work <u>here</u>.

7. Resubmission policy

Our resubmission policy permits you to resubmit previously unsuccessful applications to this call once. Should you choose to resubmit your unsuccessful application, we would ask that

you take on board the comments of the reviewers and incorporate any suggestions accordingly.

If you are unsure whether you can resubmit an application, please contact the Research team at <u>research@stroke.org.uk</u> with the month and year you applied and the reference number of your application which can be found on your rejection letter.

8. Proposed research project

The proposed research project statement on page 5 of the application form should not exceed 2500 words. Please provide your references separately. Please include a Gantt chart/timeline as a file upload.

Your proposal statement should incorporate all of the following points, although not necessarily in the order listed below:

- Hypotheses, aims and objectives where appropriate please consider the <u>NIHR</u>
 definitions for feasibility and pilot studies when describing your proposed project
- Background to the project
- Detailed plan of investigation, including proposed methodology
- If recruiting participants: a sample size calculation, recruitment plan, statistical expertise (which may be costed)
- Potential problems and contingency plans
- Dissemination plans
- Value of this programme to stroke research
- Please include details on the input the proposed fellow has had in the development
 of the project and the application. The adjudication committee will give added
 preference to an application where the candidate has been involved in the design of
 the study.

You will also be asked to provide:

- An outline of the trajectory of your research into clinical practice, following the conclusion of the fellowship
- Details of qualifications to be achieved and how progress will be monitored
- Annual milestones which will be used to monitor progress of the award
- Background information about the institution where the fellow will be based
- Proposed programme of training and supervision- see below

Please see page 5 of the application form for more guidance.

We also ask you to outline details of managing **Intellectual Property** if any arise during the project, and your intention to partner with digital enterprises if your project involves the development or evaluation of **digital technology** that is intended for commercial/routine clinical use. We strongly recommend that any project using data adheres to the principles set out in the <u>Department of Health & Social Care conduct for data-driven health and care technology</u> code of conduct.

9. Proposed training and supervision programme

9.1 Training and Development

As part of the award, Fellows will complete a training and development programme. This should include the training required to complete your research programme and the training / activities required to develop your career as a leader in stroke research.

In addition to the research objectives, applicants are required to outline their career development objectives. The Stroke Association wishes to fund individuals who are keen to support capacity-building in stroke research more widely in addition to developing their own career. Applicants may therefore wish to consider what leadership training or activities they can undertake which will support our stroke research community (appropriate for their career stage). The CAHPR research practitioner framework (Harris, Cooke, and Grafton 2021) provides some useful guidance, but it is not expected that this is used exclusively and components should only be chosen where relevant to the individual's career pathway.

9.1a CPGF Training

For the CPGF, Fellows are also required to design and complete a set of objectives specifically aimed at strengthening links between clinical practice and research-both in terms of workforce development and evidence based practice. Table 2.0 below provides guidance for the types of activities/ objectives that could be included at each award stage. All award stages have been included for context, and have been based upon the CAHPR research practitioner framework.

Award	Clinical-Academic Competencies	Examples
	Communicates relevance of research findings and best practice to colleagues, advocacy groups and wider community	Develop and lead Journal clubs Participates in service evaluation / audit to ensure these are benchmarking against best evidence
	Promotes evidence-based practice to improve service user outcome, patient experience and organisation culture	Develop and deliver research talks at departmental level, and develops opportunities for others to present also.
Clinical- Academic	Engages with knowledge mobilisation practices For example in service training, Communities of Practice: service	Engages with and actively participates within professional networks

Establishes networks across boundaries e.g. health and social care systems and Higher Education Institutes Engages in peer support, mentorship and supervision of less-experienced researchers, to nurture talent and promote empowerment and autonomy Contributes to and promotes the professional development of the workforce in relation to research Showcases and uses data/findings from research consultancy/ service development projects undertaken by staff, students or collaborators Supports students and practitioners through to publication and dissemination Persuades and influences a range of stakeholders to engage with research activity and evidence-based change & development within the profession or service & beyond Creates working groups with researchers and clinicians across organisations to pepts approblems Develops/supports processes across the organisation to engage clinicians interested in research Supports team members to include research skills within job descriptions and personal development plans Develops/supports team members to include research skills within job descriptions and personal development plans Supports team members to include research skills within job descriptions and personal development and flowelopment teams in developing skills in QI and research, and knowledge mobilisation. Supports the embedding of Public and Patient Involvement and Engagement into local systems and processes for research and staff development Mentors and supports others to write grant and funding applications Supports teams to develop plans to implement change (new evidence), and leads services in QI / change management and effective data collection to support change processes.	Postgraduate Fellowship (CPGF)	improvement methodologies (e.g. 'plan: do: study: act'; micro systems) Supports and organises local research and teaching events e.g. conferences, journal clubs, study days Educates colleagues in audit skills, service development and evidence-based practice Critiques / evaluates local practice using a range of techniques including standardised tools / measures and innovative methodologies Provides students and practitioners with opportunities and experience of undertaking research	Translates best practice principles for Public and Patient Involvement and Engagement to ensure co-production is embedded across all clinical service evaluation / improvement projects Leads development of research cafes to upskill teams Supports delivery of student placements into research setting Active engagement with local research networks (e.g. CAHPR, NIHR CRN)
	Academic Post- Doctoral Fellowship	health and social care systems and Higher Education Institutes Engages in peer support, mentorship and supervision of less-experienced researchers, to nurture talent and promote empowerment and autonomy Contributes to and promotes the professional development of the workforce in relation to research Showcases and uses data/findings from research consultancy/ service development projects undertaken by staff, students or collaborators Supports students and practitioners through to publication and dissemination Persuades and influences a range of stakeholders to engage with research activity and evidence-based practice. Acts as a role model and makes an identifiable contribution to evidence-based change & development within the	clinicians across organisations / depts to address specific service / clinical problems Develops/supports processes across the organisation to engage clinicians interested in research Supports team members to include research skills within job descriptions and personal development plans Develops formal and informal training sessions to support teams in developing skills in QI and research, and knowledge mobilisation. Supports the embedding of Public and Patient Involvement and Engagement into local systems and processes for research and staff development Mentors and supports others to write grant and funding applications Supports teams to develop plans to implement change (new evidence), and leads services in QI / change management and effective data collection

	Establishes networks across boundaries e.g. health and social care systems and Higher	Creates working groups with researchers and clinicians across organisations / nationally
	Education Institutes	curricians across organisations / flationally
		Sit on Research Ethics Committee
	Attends and reports at a senior level (e.g. boards, executive committees) regarding	Sit on organisation research planning / strategic
Clinical Lectureship	research-related governance, policy and	planning committees
Ecctor comp	service development	Leads formal training sessions for team members
		/ organisation to build capability and capacity for
	Contributes to and promotes the professional development of the workforce	research, and supports these with mentoring, networking or other mechanisms to build
	in relation to research	communities of practice.
		Is a member of professional network executive
	Acts as strategic link between practice,	committees, engages with professional bodies
	professional bodies, research institutes and academia to develop and influence research	(consults on projects, expert reference groups)
	education provision.	Embeds Public and Patient Involvement and
	Provides students and practitioners with	Engagement in associated research projects and the necessary time, training and resource for
	opportunities and experience of undertaking research	members of the team to upskill in this area.
		Sets up opportunities for undergraduate students
	Supports students and practitioners through to publication and dissemination	to take up research placements, develops opportunities for junior staff to have rotations in
	to positication and dissernination	research settings
	Influences and leads less experienced	
	researchers and builds capability, creating a	
	culture of creativity and enquiry. Creates ideas, recognises good ideas and	
	opportunities and acknowledges the	
	contribution of others	
	Persuades and influences a range of	
	stakeholders to engage with research activity and evidence-based practice.	

Table 2.0: Example activities/objectives for Stroke Association clinical-academic awards.

9.2 Supervision and Support

Details of supervision and support for the fellow should be provided. For the CPGF, the academic and clinical supervisors will agree to provide cohesive and joint support for the Fellow, agreeing to communicate and work collaboratively and flexibly to support the Fellow in fulfilling their research and clinical commitment. It is essential that collaboration between the clinical and research supervisors is effective in providing joint support.

10. Details of support requested

In the main budget table of the application form we would like you to include all the funding you are requesting from the Stroke Association, with a full justification of all the costs.

Please note that if your application is successful, the funding provided will be the figure that you have requested (unless this is queried by the panel). After the Award Acceptance form is

signed, the amount awarded will not be increased if there are errors in your calculations so please ensure that the total amount requested is correct.

If you have financial support from other sources, the nature and tenure of the support should be disclosed in either the project proposal section of the application form, or in the justification textbox underneath the budget table.

Support may be sought for the following items:

- Stipend (or for CPGF, salary costs) and tuition fee of the fellow, in line with the host institution's policy. Please account for inflation in the costings in the application form. (Payment of the candidate's stipend and tuition fees must be prioritised over other research expenses if this is not supported using alternative funds.)
- <u>UK Stroke Forum</u> (UKSF) registration, travel and accommodation fees. We expect all fellows to attend the UKSF each year.
- Dissemination costs: Open Access publishing costs, conference attendance fees.
- Research costs: consumables, travel expenses
- Patient and Public Involvement: e.g. contributor fees (<u>NIHR rates here</u>), accessibility
 and travel expenses, independent facilitators, creating materials and outputs. We
 recommend using <u>INVOLVE's involvement cost calculator</u> to help put together an
 appropriate budget for PPI.
- There is no maximum limit for imaging costs. However you will have to justify your request and ensure that costings are in line with institutional and national practices.

Where the study takes places within the NHS, we ask you to outline any associated NHS costs in the supplementary spreadsheet on the budget page and <u>not</u> in the main budget table:

Researchers are required to complete the <u>Schedule of Events Cost Attribution Tool</u> (<u>SoECAT</u>) at the point of submission of their application. This is designed to capture the different costs associated with clinical research and attribute them according to whether they are research costs, service support costs, treatment costs, and excess treatment costs/treatment cost savings.

Please be aware that if your planned project includes the recruitment of participants, your application should be accompanied with the Funder Export from the online SoECAT, obtainable via the NIHR *Central Portfolio Management System (CPMS)*.

In order to create a SoECAT, you will need to create an account in CPMS. After creating the account, you will need to login to CPMS to activate this account. If any assistance is required in creating the account, please refer to our *user guide*. Once your account has been created and is active, you can proceed.

Guidance for the completion of the SoECAT by the applicant is present in the online tool to assist at each page and stage of the application process and further details can be found on the *Online SoECAT Guidance page*. There is also an *Online SoECAT Guidance Module* which includes video tutorials and linked resources (an NIHR Learn account is required to access and enrol onto the module) and a helpful *Study Representative - Online SoECAT Top Tips*

infographic.

Please note that completion of the *SoECAT may not be necessary* when applying for funding to support: overarching programmes with no specific research study protocol, infrastructure, fellowships, anything where the grant is to be used for direct employment of a member of staff or purchase of an asset, and data or diagnostic reviews where recruitment data is not collected. Such applications should be submitted with supporting documentation to explain why a SoECAT was not submitted in this instance.

Non-commercial research sponsors have a responsibility to ensure the study is appropriately costed and attributed

Attribution support is available for investigators, study teams and their R&D offices through AcoRD specialists in the NIHR Local Clinical Research Network. Find out more about how to access this support via the <u>Study Support Service</u>.

Under the new arrangements, sign off via the tool is required to confirm the study attribution complies with the Department of Health and Social Care AcoRD guidance. This will underpin ETC sign off and be required for studies to be eligible for the NIHR portfolio. This early attribution support will underpin the excess treatment cost management process by providing formal sign off, supporting the role of the research sponsor and lead R&D office or Clinical Trial Unit. Completion of the Schedule of Events Cost Attribution Template will be required for studies eligible for the NIHR portfolio and the support this provides, which will include access to excess treatment cost payments under the new arrangements. This ETC value, alongside recruitment activity in the NIHR Central Portfolio Management System, will then be utilised to inform the payments to NHS providers.

11. Application checklist

- Fellows must have at least two supervisors: one lead supervisor who bears overall responsibility for the training and the research project and a second supervisor who may be less active in supervision and support. Additional supervisors are not mandatory but are permitted. For the CPGF, a clinical supervisor is also required.
- You are required to submit your application online, via our award management system, before the deadline (30th January 2024): https://strokeassociation.flexigrant.com
- We will <u>not</u> accept paper/Word/PDF copies of the application form.
- Online signatures: The Primary Supervisor, the Secondary Supervisor, the Head of Department and the Finance/Research Administration Officer from the host organisation must provide their approval of your application in order to allow you to

submit the application. Signatories are completed by inviting them into your application form via the 'Participants' tab in the system and them typing their details into the corresponding declaration page. This acts as their signature. For the CPGF, a supporting letter from your second host will also be required.

• At the time of application, you do not require approval from the **Research Sponsor**, however if you are successful, their signature will be required.

Awards that we fund require a Research Sponsor if the research is linked to the NHS. To identify who would be suitable to act as the Research Sponsor, we advise you talk to your supervisor(s) and your institution's Research Office. The Research Office will know whether or not you need a sponsor (and are often the sponsor in many cases). For more information about this, please take a look at: http://www.hra.nhs.uk/resources/before-you-apply/roles-and-

responsibilties/sponsor/

It is suggested that the Research Sponsor could be 'the employer of the chief investigator, the educational institution (e.g. for student research), or the care organisation where the research is to take place'. Please email research@stroke.org.uk if you require further guidance.

You are not required to have the necessary ethical approval at the time of application.
If successful, ethical approval for your study will have to be gained before you can
begin your award. You are required to send us a copy of the ethical approval when it
is gained.

12. Adjudication

During the adjudication of PGF and CPGF applications and the selection of fellows, reviewers and panellists will score the application based on:

- The PERSON the background, career aspirations and potential of the candidate to become a stroke research leader in the future (40%)
- The SUPERVISION that the candidate will receive (15%)
- The INSTITUTION(S) the candidate will be based at (15%)
- The proposed TRAINING and DEVELOPMENT programme the candidate would undertake if awarded the Fellowship (15%)
- The PROJECT including: (15%)
 - The purpose of the proposed research project must be directly related to stroke. It must be clear how the research could ultimately be translated into clinical practice and, therefore, provide benefit to stroke patients.

Fellowships are awarded on the recommendation of a panel made up of expert members of the Stroke Association's Research Awards Pool and lived experience panellists with personal experience of stroke, using the system of peer review followed by a candidate interview.

Fellowships are awarded annually. Applications are invited by means of advertisements in the medical press and the Stroke Association website (www.stroke.org.uk).

13. What happens to your application?

Your application will be reviewed by external expert peer reviewers and reviewers with lived experience of stroke, then adjudicated by an adjudication panel made up of members of the Stroke Association's Research Awards Pool and <u>Stroke Voices in Research</u> involvement network.

Peer review scores are used to rank applications and shortlist for interview with agreement from the Chair of the Adjudication Panel. If an application is shortlisted, the proposed candidate is invited to attend an interview. The Research Department will send out invitation letters for interview. Please hold the interview date in your diary from now on until we confirm if you have been shortlisted. You will receive a letter confirming this approximately two weeks before the interview date. If you have not been shortlisted for interview, you will be informed.

The interview usually lasts for around 30 minutes. The candidate will be invited to give a short (8 minute) presentation to the panel outlining their proposed research project, including the research question, a brief background to the research, an outline of the methods and outcome measures, how they propose to analyse the data, and how their research could improve care for patients with stroke. The candidate will then be interviewed by a panel made up of up to four members of the Research Awards Pool, two members of the Stroke Voices in Research involvement network and invited experts (if applicable) and members of the Research Team from the Stroke Association. The panel will explore the proposed research project, and the training programme. They will ask questions on any part of the application or detail of the proposed project, and how a Stroke Association Fellowship would help further their career aspirations in stroke. Presentation skills of the applicant will also be assessed.

Following the interview, the panel will discuss the merits of each of the candidates, and will make a recommendation to the Stroke Association Council of Trustees on the applicant(s) who should receive a Fellowship. Successful fellows will be informed in writing. Unsuccessful applicants will also receive a letter containing feedback from their interview and anonymised external peer reviewer comments.

Successful applicants will be required to provide an accurate start date upon accepting the award. We advise candidates to begin the award within 6 months of receiving the offer letter, but the start can be delayed if requested at the discretion of the Stroke Association.

14. Deadlines for applications:

Call opens: 6th November 2023

Closing date for applications: 30th January 2024

Interview date: 27th June 2024

The Research Department will send out invitation letters for interview. Please hold the interview dates in your diary from now on until we confirm if you have been shortlisted. You will receive a letter confirming this approximately two weeks before the interview date.

Awards will be made in July 2024.