

## **Primary Care Interventions Call for research proposals specification document**

The National Institute for Health Research (NIHR) will issue a call for research into the evaluation of health care interventions or services delivered in primary care settings in February 2013.

This call is a key component of the NIHR response to recognition of the need for further research based evidence related to the provision of primary care services in the NHS:

- through supporting capacity building across a wide range of primary care disciplines
- increasing the volume of high-quality research on the effectiveness, delivery and organisation of primary care interventions and services.

The following seven NIHR managed research programmes will be participating:

- Efficacy and Mechanism Evaluation (EME)
- Health Services and Delivery Research (HS&DR)
- Health Technology Assessment (HTA)
- Invention for Innovation (i4i)
- Programme Grants for Applied Research (PGfAR)
- Public Health Research programme (PHR)
- Research for Patient Benefit (RfPB)

Research proposals must be within the remit of one of the seven participating programmes and applicants should carefully consider the remit described for each programme. We are particularly interested in applications that address:

- the management of long-term conditions, the management of multiple morbidity or interventions that prevent acute admission to hospital
- the effectiveness of existing or new interventions
- the benefits of new approaches to the delivery of services
- multiple health related behaviours.

The inclusion of patient and public views and experiences are considered important by each participating programme.

In addition:

- Applications to the **EME Programme** must evaluate the efficacy of an intervention and may also include the evaluation of mechanisms to develop our understanding of the intervention or disease. The main clinical study must account for the majority of the costs (usually more than 75%). But applications to this call may also include initial stages, such

<sup>1</sup> The term 'health care intervention' covers a range of methods used to promote health, prevent and treat disease or improve rehabilitation or care. It may include the use of: drugs, devices and tests or physical, psychological or surgical therapies and the settings within which they are delivered.

as the limited steps needed to progress development of an intervention to a stage suitable for use in an accredited clinical service; prospective or retrospective clinical research utilising existing clinical samples/data to inform the main study; or pilot/feasibility studies.

- The **HS&DR Programme** welcomes research on primary care interventions focused on different models of service delivery and patient experience. This might also include new staff roles and substitution issues (nurse-led clinics for chronic conditions), comparative models of care (from practices to polyclinics to medical homes), patient-centred care (including case management interventions to promote continuity), changes in health systems (impact of disinvestments in hospital services and alternative primary/intermediate care services) to a range of organisational studies on improvements to general practice and community services.
- The **HTA Programme** is particularly interested in applications for evaluations of the clinical and cost effectiveness of interventions for the diagnosis, management, monitoring, treatment or rehabilitation of patients delivered by healthcare professionals or practitioners in primary care or community settings. Proposals may use any study design normally accepted by the HTA programme.
- For applications to the **i4i Programme**, the scientific evidence upon which the proposed project is based must have progressed beyond basic research. The proposed project must also be focused on a specific application, with the specific qualities or characteristics of the proposed technology defined. Proof of the scientific principle must have already been achieved. In exceptional cases and where technology from a sector other than health is being investigated, proposed projects may look to obtain technical feasibility. Project teams should have the demonstrable experience to carry out all aspects of developing the proposed technology, scientifically, clinically and commercially. Where there are known gaps, applicants should explain how they plan to address these.
- Applications to **PGfAR Programme** are likely to describe substantial programmes of research involving a number of discrete but inter-related components or activities, which together have potential for benefits to patients and the NHS within 3 – 5 years of the end of the grant.
- The **PHR Programme** evaluates non-NHS public health interventions intended to improve the health of the public and reduce inequalities in health. The programme would be pleased to consider applications looking at the role of primary care practitioners in health promotion or health protection work outside health service settings.
- Applications to **RfPB Programme** should arise from daily practice in the NHS and must demonstrate a trajectory to patient benefit in the short to medium term. The programme supports applications, which are regionally derived, and applications for feasibility and pilot studies are welcome.

For further information on the participating programmes, please visit the [NIHR website](http://www.nihr.ac.uk/research/Pages/PrimaryCare.aspx) (www.nihr.ac.uk/research/Pages/PrimaryCare.aspx)

Application forms will be available from **28 February 2013**. Completed forms must be submitted by **22 May 2013**. Funding decisions will be made around March 2014.

Please note that the **NIHR Fellowships Programme** is also participating in this call, welcoming applications for research on the evaluation of health care interventions or services delivered in primary care settings. The deadline for submission of applications to round 6 of the programme is 16 January 2013, however round 7, which opens in Autumn 2013 will be participating in the call.