



**INDUSTRIAL
STRATEGY**

UK Research
and Innovation



DIGITAL INNOVATION HUB PROGRAMME PROSPECTUS APPENDIX:

GUIDANCE NOTES FOR APPLICANTS

May 2019

Contents

1.	Introduction	3
2.	Delivery milestones	4
3.	Organisation eligibility	5
4.	Lead organisation	7
5.	Funding available	7
	State Aid	8
6.	Criteria for Selection	8
	Part 1 – Overview	8
	Part 2 – Assessed Section	10
7.	Collaborative approach	13
8.	Application process	13
9.	Selection process and timetable	15
	Interview	15
	Award letter	16
	Application and award timetable	16
10.	Further information	16
	Information for applicants	16
	Data protection and confidentiality	17
	Contacts	17

Purpose of document

This document provides information for organisations wishing to submit an application for funding to establish a Digital Innovation Hub. Funded through the Industrial Strategy Challenge Fund (ISCF) Data to Early Diagnosis and Precision Medicine Challenge (D2EDPM), the competition is being run by MRC on behalf of UK Research and Innovation. Further details about the Digital Innovation Hub (DIH) Programme are available in the DIH Programme Prospectus, available on [MRC website here](#).

1. Introduction

We invite consortia of NHS organisations, academia, industry and /or other partners to become a Digital Innovation Hub (DIH). The DIH Programme will deliver up to five Hubs.

The purpose of the Hubs is to bring together data from “routine” NHS systems (e.g. NHS clinics, laboratories, diagnostics, primary care), and relevant registry or cohort data, and to curate these to provide new high value data resources for research and innovation. The Hubs will create new data assets; specifically, disease focused datasets, and data to enable clinical trial efficiency and/or real world evidence studies. These themes are described in detail in the Prospectus Overview.

The purpose of the Hubs **is not** to perform original research.

Bids for Hubs will concentrate on specific disease areas to curate specialised datasets of both breadth and depth, with the aim of nationwide coverage. These may be in any disease area. However, specific projects in the following areas are of particular interest: cancer, cardiovascular, respiratory, neurodegenerative, dementia, diabetes and inflammation/immunity. We welcome focused bids which propose to curate data in disease sub-types (e.g. nationwide dataset of one type of cancer) which would be of benefit to researchers, industry and innovators.

Each Hub will:

1. **Make datasets accessible.** Make available existing NHS, biomedical research, registry and cohort datasets (that are not currently discoverable for research) discoverable and accessible. There must be evidence that datasets are valuable to, and meet the needs of industry and/or researchers.
2. **Curate¹ new datasets for research.** Improve the quality, breadth and depth of datasets and provide a repeatable curation approach that can be used to enable UK-scale research. The curated data should be made available to researchers and innovators.
3. **Provide services to meet identified industry and other user needs.** Provide expert research services that demonstrate impact and are of high value to industry and/or NHS, charities and academic researchers, innovators and ultimately patients, through these identified themes:
 - a. *Disease focused Hubs:* Provide expert knowledge relating to data on a specific disease to support research. This includes improving the quality of data, annotation and demonstrating a scalable approach to curation towards national coverage, or tools that can be used on other datasets, as well as support on study design and analysis.
 - b. *Clinical trials and real world evidence (RWE) Hubs:* Deliver a novel approach to enabling clinical trials or RWE evaluations using large scale data that will greatly increase the UK’s capability and efficiency. For example, Hubs might enable clinical trial recruitment by providing a real time view of patients fitting the trial criteria, with a link to a clinical team who has a relationship with the patient and can approach the patient for consent.

¹ The term ‘curation’ is used broadly to cover the process of managing data throughout its lifecycle, enhancing its quality and availability. In practice, curation may involve cleaning, linking, enhancing the quality and normalising the data

Relationship with the other components of the Digital Innovation Hub Programme

The UK Health Data Research Alliance was established in February 2019. The purpose of the Alliance is to bring together and facilitate partnership working across NHS organisations and other health data custodians, leading to an ethical, consistent approach to data provision and public engagement. The Alliance will coordinate identification and adoption of standardised tools, techniques, conventions and technologies for the use of healthcare data for research and innovation in a trustworthy way. The members will agree, with public participation, best practice and standards for governance and privacy. The Alliance is working closely with NHSX, NHS Digital and NHS bodies in the devolved nations to support alignment of policy for health data research.

The Data custodian organisations (e.g. NHS Trusts) that contribute to the Hubs will be required to become members of the Alliance, adhering to Alliance principles. In this way, membership of the Alliance will grow, and the new data assets produced by the DIH Programme will be discoverable and accessible through the common UK Health Data Research Innovation Gateway (the ‘Gateway’).

The UK Health Data Research and Innovation Gateway is being established by HDR UK. Its purpose is to provide a common access point for industry, academia and NHS for discovering, accessing, linking and analysing data for research and innovation. This will include national aggregated data (from existing Alliance members) and the new curated data provided by the Hubs and other members of the Alliance. The Gateway will support interoperability, common standards and secure data provision across the DIH Programme. **The Gateway contains no personal identifiable information (PII). All PII is retained within the NHS to ensure General Data Protection Regulation compliance**

The Gateway will be underpinned by a consistent governance framework. It will link with Safe Havens (also known as Trusted Research Environments) which provide secure access to de-identified data for further analysis of sensitive data within the NHS. It will provide opportunities for research and innovation, in a safe and ethical manner, that protects privacy and creates a range of possibilities for linking this data with others to develop even greater insight.

The Gateway development will be delivered by HDR UK, in partnership with NHSX and other NHS partners across the UK. The Gateway does not form part of the Digital Innovation Hub Call, and more information will be given on this at a future stage.

Hubs will be expected to work collaboratively with each other in a single UK-wide network and with other components of the relevant national health data landscape, such as Local Health and Care Record Exemplars (LHCRs), NIHR investments and Centres for Digital Pathology and Imaging.

Throughout this document, the phrase ‘research and innovation’ will be used as shorthand for research, development and innovation taking place across industry, academia and the NHS.

2. Delivery milestones

Hubs will be selected based on their ability to:

- Make datasets available for research, development and innovation across industry, academia and the NHS

- Curate new or existing data for research, development and innovation taking place across industry, academia and the NHS
- Provide services to meet identified needs for research, development and innovation taking place across industry, academia and the NHS
- Deliver against agreed milestones
- Engage with and involve patients and the wider public
- Demonstrate capabilities and partnership
- Enable wider impacts and linkage to the aims of ISCF and the Life Sciences Industry Strategy
- Provide value for money

Further detail on the criteria for selecting Hubs is given in Section 6.

Each Hub will be required to meet delivery milestones and to sign up to the DIH Programme Principles for Participation – this includes the FAIR data principles (Findable, Accessible, Interoperable and Reusable). For further details read Prospectus Appendix: Principles for Participation on the [MRC website here](#).

Milestone 1: Hub established. (within 3 months of becoming a Hub)

- Make datasets available as according to the Principles for Participation and discoverable through the Gateway, provide a description of the number of datasets, and their scale and quality, demonstrate the Hub physical environment is operational, and set out how the Hub will engage with and involve patients and the public on access to, use of and security of patient data.

Milestone 2: Service Delivery. (within 18 months of becoming a Hub)

- Evidence that the quality of the datasets has been improved (curated) and that the curated data is discoverable through the Gateway. Provide publishable enhanced service case studies (e.g. from industry, academia and NHS) that demonstrate impact (and expected impact) and value to researchers and innovators from a range of sectors, and to patients and populations. Provide evidence that the Hub is continuing to engage and involve patients and the public in a meaningful manner.

Milestone 3: Impact, sustainability and scalability. (within 2.5 years of becoming a Hub)

- Evidence enhanced service delivery through additional publishable case studies that demonstrate further impact and value to researchers, innovators, patients and populations. Evidence a sustainable business case to support the future service offering of the Hub. Provide additional evidence that the Hub is engaging and involving patients and the public, and that public involvement is at the centre of its governance processes.

3. Organisation eligibility

The organisations eligible (see below for further information) for funding through this Programme are:

- Any NHS organisation (local or national), for example an NHS trust, or equivalent in the Devolved Administrations
- A Higher Education Institution or other research organisation
- UK based business of any size

- An Academic Health Science Network (AHSN) or Academic Health Science Centre (AHSC)
- UK Public Sector Organisations (not covered by the above)
- UK based charities

A minimum of 2 collaborating organisations from at least 2 of the different categories listed above must apply for grant. Industry partnerships are highly desirable.

In addition to this, you must:

- Carry out your programme work in the UK
- Intend to exploit the results for the benefit of the UK

Organisations which do not fit into the above categories, but would add skills and assets to a consortium may join in a non-funded capacity.

Further Information and Funding Amounts:

For the purpose of this Industrial Strategy Challenge Fund call only, the following sets out additional information on the definition of eligible organisations and funding rate. If applicants are unsure whether or not they are eligible, what eligible costs of their participation may be sought, or what funding rate will be applied to their participation, please contact informatics@mrc.ukri.org to discuss.

NHS organisations (and equivalents in the devolved administrations), Higher Education Institutions (e.g. universities) and **Academic Health Science Networks and Centres** can apply for 80% of the Full Economic Cost (FEC) of their participation.

Other research organisations are defined according to the [Framework for State aid for Research and Development and Innovation](#). They include organisations such as non-profit research and technology organisations, public sector research establishments and research council institutes. These will be funded at 100% of their eligible costs, unless otherwise specifically identified here. They should be non-profit distributing to qualify for this funding rate or otherwise be treated as UK businesses.

UK Based Businesses (i.e. organisations undertaking commercial activities) are eligible to apply for funding. In compliance with State Aid requirements, businesses can have their eligible costs funded at the following rates:

- Micro/Small – 70%
- Medium – 60%
- Large – 50%

UK Public Sector Organisations (unless specifically identified above) and **UK based charities** must not take part in any economic activity or gain economic benefit from funding under this competition. They can apply for 100% of grant funding for their eligible costs under the following conditions:

- they are undertaking research (this may be experimental, theoretical or critical investigation work to gain knowledge, skills or understanding vital to the project)
- they meet requirements for dissemination of their project results
- they include their eligible costs for research purposes in the total research organisation involvement

- they make sure they are not applying for a grant towards costs which are already being paid by the public purse such as labour and overheads

4. Lead organisation

The Lead Organisation must be able to demonstrate clinical leadership, a track record of use of health data for public benefit and the ability to process health data for industrial research and innovation. In addition, the Lead Organisation must have the expertise and resources to manage a partnership to deliver a national, industry-facing service that can be commercially sustainable for the long-term. The Lead Organisation will need to be one of the below:

- An NHS organisation, for example an NHS trust, or equivalent in the Devolved Administrations
- An Academic Health Science Network (AHSN) or Academic Health Science Centre (AHSC)
- A UK Public Sector Organisation
- A University or other research organisation

Applicants will be expected to name members of the leadership team including a Hub Director. CVs should be submitted as additional supporting material for members of the leadership team and key personnel.

5. Funding available

£22m funding is available to deliver up to five Hubs. Up to £5M is available per Hub for the initial investment period (1 October 2019-30 August 2022).

Hubs will support industry and other users' needs by creating new data assets by abstracting, normalising and integrating data from NHS sources. Hubs will also have distinct, deep domain expertise (e.g. clinicians and data managers/technologists who understand best approaches to data curation, data linkage and data analysis) across one or more disease areas. Hubs might also deliver new capabilities across areas such as new clinical trial capabilities (e.g. feasibility/recruitment) and/or real world evidence to support industry studies of safety, effectiveness, and value, to complement existing national capabilities and investments.

A portfolio of Hubs will be funded to create valuable data assets across several diseases, as well as clinical trials and real world evidence services, and will aim to achieve a geographical spread of Hub locations across the UK.

The funding available to applicants will be to create “data as infrastructure” that improves access to and quality of data and increases the UK's future research and innovation capability, including delivering economic benefit to the UK. While Hubs will support research and innovation activities through the creation of new data and services they provide, the **funding from this call will not support specific research projects.**

Organisations are encouraged to use existing infrastructure (for example, Safe Havens), however, funding can be used for infrastructure within the Hubs where there is a compelling case that this directly leads to improved outputs for the delivery milestones specified in this document

Initially funded through the ISCF investment to kick-start the approach, it is expected that the funded Hubs will become self-sustaining following the initial grant period. This could be achieved through the development of a sustainable model, based on the commercial principles laid out in the consortium Head of Terms Agreement (see Section 7). Any approach will need to be consistent with wider Government policy on access to health data for research.

Additional Hubs, such as the proposed UK Cardiovascular Data Science Knowledge Hub being developed in partnership by the British Heart Foundation (BHF) and Health Data Research UK, will be encouraged to use the Gateway and adhere to the Principles of Participation.

Successful Hubs should start by 1 October 2019 and funding will finish by 30 August 2022 – subject to approval through ongoing evaluation against agreed milestones. Hubs which do not achieve the delivery milestones will not continue to receive funding.

The application submission must be accompanied by a completed D2EDPM DIH Financial Resource Request, available on the [MRC website here](#).

Applicants cannot apply for costs that are already covered by public or other sources of funding. We will not fund building work or significant capital expenditure.

State Aid

This competition provides state aid funding under article 25, of the [General Block Exemption Regulation](#) (GBER).

Any UK business claiming funding must be eligible to receive state aid at the time that the award of funding is confirmed. The Lead Organisation will be responsible for ensuring that all industrial participants in the consortia meet the State Aid requirements as outline in the State Aid Manual (<https://www.gov.uk/state-aid>). Any companies that do not meet the state aid criteria will be ineligible for direct funding, however they may work with a consortium through a sub-contracting relationship with the lead organisation.

It is the Lead Organisation's responsibility to make sure that any organisation applying for funding is eligible to receive state aid, and whether funding said organisation would be considered an "undertaking in difficulty" within state aid regulations. Legal advice should be accessed if required. For further information see [general guidance](#) on the Innovate UK website.

6. Criteria for Selection

The criteria by which Hub applications will be assessed are given in the below section. Further details on how to apply are given in Section 8.

Part 1 – Overview

This section is not scored, but will be used to decide whether the project fits with the scope of the competition. If it does not, it will be rejected.

1.1 Proposed Titles, Organisations and Key People

Please provide a long form and short form title for your proposal, details of the Lead Organisation and other organisations involved in the application, together with the lead person for each, and suggested key words.

1.2 Hub overview

Briefly describe your proposed Hub, which NHS organisations and other data custodians are involved, the area of focus of the Hub, the data that will be provisioned within the Hub, and the associated research services that you expect it to provide.

1.3 Public description of proposed Hub

Describe your project in a way that is clear and accessible to the public. Do not include any commercially sensitive information. If your application is successful and you are awarded funding, will publish this description.

1.4 Hub scope

Confirm that the proposed Hub meets the scope of the competition. If it is not in scope it will be immediately rejected and will not be sent for assessment. Feedback will be provided with reasons why.

- That the Hub data and services will be nationally available to users for research, development and innovation taking place across industry, academia and the NHS [Y/N]
- That you will provide an existing physical environment of cross-sector collaboration, with strong relationships between NHS, industry and academic consortium members to support research, development and innovation taking place across industry, academia and the NHS. [Y/N]
- That the proposed Hub will become a member of the UK Health Data Research Alliance, and adhere to the Principles for Participation on the [MRC website here](#). [Y/N]
- That you have access to distinct health data that you can make discoverable through the UK Health Data Research Innovation Gateway to complement existing national datasets and investments. At least one member of the partnership must be a data custodian with the ability to make the data accessible for research, development and innovation taking place across industry, academia and the NHS. The Hub must adhere to all of the existing terms of access for the data. [Y/N]
- That you will curate data to improve the quality of existing health data for research and innovation. [Y/N]
- That the Hub will be resourced to provide the expert services relating to the specific Hub theme(s) and meet the delivery milestones [Y/N]
- That you will demonstrate supporting contributions, or funding in kind, to at least 50% of the funding requested over the lifetime of the award [Y/N]

1.5 Letter of Support from Lead Organisation

Provide a letter of support from the individual in the Lead Organisation (e.g. Research Office, Financial Director, Chief Executive) authorised to confirm that they have read this application, have approved the costs submitted, have checked that the application is State Aid compliant, confirm the supporting funding commitments, and are willing and able to host and manage the Hub and the funding should this application be successful.

Part 2 – Assessed Section

A series of questions framed around the criteria for assessing the application. Please take a new page for each point. Details on the relative weighting and maximum length for each point are given in Section 8.

2.1 Making datasets available securely for research, development and innovation taking place across industry, academia and the NHS

Your response should describe:

- The datasets that you will be bringing to the Alliance (immediately and over the course of the award) in terms of: data custodians (e.g. NHS Trusts) the datasets or diseases covered, modes of data included, the size of the dataset (number of records, population covered), and the current quality of the data (coverage, completeness, validity, timeliness and accuracy). The dataset description may be submitted as single page appendix
- Explain where and why these are particularly valuable for near term research and development work in industry and / or not-for-profit research.
- The environment these datasets are currently stored within the terms, process and turnaround times for access; describe the governance and resources to enable data access for research and innovation;
- The technical infrastructure, including demonstrating that the level of security and “safe haven” capability that you host/have access is appropriate for the data and services that the hub will be providing.
- How these datasets will be immediately ready to become part of the Alliance and discoverable through the Gateway, including the associated metadata to support discoverability

2.2 Curating data for research, development and innovation taking place across industry, academia and the NHS

Your response should explain:

- The curation approach that you will be using to improve the quality of the dataset
- The improvements in quality that you will achieve through the curation process, how and when this will be measured, and what new research and innovation uses will be created by this improvement in quality, supported by evidence for the demand
- How the curation process might be scaled up to other datasets, and what other datasets this curation process will apply to

2.3 Providing services to meet identified industrial research and development, academic research and NHS innovation needs

Your response should explain:

- The expert services that you will be providing in the Hub and the distinct value that the Hub will provide to industry, NHS and academic researchers, based on the selected Hub theme and specific area(s) of focus within the theme
- The unmet demand from researchers and innovators across industry, academia and NHS for the curated data and services that your Hub will provide (e.g. number and type of companies with this need, companies and researchers that have committed to fund data that the DIH will produce or make available)
- How your business model will be commercially sustainable by the end of the initial investment period, while continuing to adhere to the Principles for Participation and a commitment to open access of methodologies, code and findings

2.4 Delivery feasibility and risk management

Your response should explain:

- How you will meet each of the Delivery Milestones laid out in Section 2. This answer should be supported by an overall project plan (e.g. Gantt) and risk register (with mitigating actions), each with sections relating to each milestone. Describe the project management process that will provide assurance that the Delivery Milestones and goals will be achieved
- How the Lead Organisation will govern and manage the partnership and how the partnership will deliver to meet user timescale expectations

2.5 Public Trust

Your response should explain:

- The partnership's track record in engaging and involving the public in expert health data services for research and innovation users, building public confidence and trust
- The systems, processes and organisational behaviours in place to provide assurance that data will be secure and that all access will be appropriate, proportionate and subject to robust governance in line with National Data Guardian and Information Commissioner's Office recommendations
- The plans for engaging patients and members of the public on how their data is used and in involving them in the decision-making and governance processes in the Hub

2.6 Capabilities and Partnership

Your response should describe:

- The leadership team and key roles, including a named Hub Director and a named Chief Data Officer. Each will be expected to have a track record of working with and across organisations and sectors to deliver common goals and objectives, and of building deep collaborative partnerships. Demonstrate the leadership team's expertise and track record in governance, management systems and achieving commercial outcomes at pace in clinical digital research and innovation. This answer should be supported by CVs of key individuals.
- How clinical leadership and research and development vision will be central to the Hub delivery model and how clinicians will contribute to the leadership and governance to ensure decisions on

data and services are benefiting patients, the NHS and public. Explain how clinical domain expertise will contribute to data curation, and how the Hubs will link with national expertise. Provide names for the clinical leader(s)

- For the area selected in 2.3, the world-leading research and technical expertise the partnership has within the Hub and how this will be used to deliver expert research services to support users
- The physical environment the partnership will provide as a Hub base to support collaboration and innovations across a range of users (e.g. data scientists, clinicians) from industry, NHS and academia
- How the Hub will harness the partnership capabilities to deliver outcomes that could not be achieved by a single organisation
- How the Hub will work in partnership with other Hubs to deliver a national offer and other components of the national data infrastructure (such as LHCREs, NIHR investments and equivalent in devolved nations, and Digital Pathology and Imaging Centres), in line with the Principles for Participation

2.7. Wider impacts and linkage to the aims of ISCF and the Life Sciences Industry Strategy

Your response should explain:

- How the services provided by the Hub are uniquely valuable, meet a currently unmet need and provide additional capability over and above the existing components of the national data landscape
- How the Hub will support companies, established and emerging, both through direct engagement and more broadly across the supply chain
- How the Hub will benefit broader industry and the UK economy, through for example, productivity increases and import substitution
- The impact on regional development
- How the Hub will increase the UK's international competitiveness (e.g. how distinctive will this service be compared with other international services)
- How the activities of the hub will enhance cross sector partnerships and collaboration between UK academia, NHS and industry
- As part of a network across the UK, how the Hub will improve efficiency in the NHS
- Any expected environmental or social impacts, either positive or negative

2.8 Leverage and Value for Money

Your response should explain:

- How the project achieves value for public money, including the tangible outputs and the wider benefits you expect to deliver to the public and the NHS, compared to current practice or other alternative methods
- The additional sources of contributions, or funding in kind, to at least 50% of the funding requested and how this would enhance the initial investment.
 - Each organisation's required contribution to bridge from the percentage Full Economic Cost (FEC) UKRI Request to the 100% Full Economic Cost of participation under the eligibility and funding rules will be considered a contribution towards meeting this requirement.

The accompanying completed D2EDPM DIH Financial Resource Request will support the evaluation of this part of the response.

7. Collaborative approach

Successful applicants will be required to enter into a legally binding Consortium Agreement with all partners in advance of the Hub commencing work.

Organisations taking part in the DIH Programme will be required to adhere to the Principles for Participation, available on the [MRC website here](#). These include reference to other key principles, including the guiding principles outlined in the Life Sciences Sector Deal.²

Applicants will be required to submit finalised and signed consortium Heads of Terms as part of their application with the view that this is developed into the Consortium Agreement if funded. This is not legally binding, but should be substantially similar to the Consortium Agreement that would be signed if the project were funded. The Heads of Terms should adhere to the Principles for Participation and should include:

- Key tasks and responsibilities of partners
- Governance arrangements and decision-making
- Project management arrangements
- Finance/resource contributions
- IP management and distribution arrangements, which includes a commitment to open source
- Data management, governance and data sharing agreements
- Publications and announcements
- Terms and costs for users accessing hub services
- Termination/Withdrawal
- Agreement to comply with the terms of the ISCF HDR UK award letter to the Lead Organisation. In addition to standard Terms and Conditions of Award³, such requirements will include:
 - Communication and Branding
 - Reporting (expected quarterly) to enable monitoring by ISCF of the awarded Hubs
 - Participation in any evaluation of the ISCF D2EDPM Challenge (including the DIH Programme) as distinct from the evaluation of the Hubs progress against the Hub milestones identified under Section 2

This document should be no longer than 6 pages and be signed by someone with authority within each organisation to ratify the legal and financial commitment.

8. Application process

The selection of Hubs will be via an open competition, with an independent expert panel administered in partnership between HDR UK and the Medical Research Council (MRC) on behalf of the UKRI ISCF

² Government is currently consulting on these guiding principles and will publish a revised version in due course.

³ Further details available: <https://www.ukri.org/funding/information-for-award-holders/grant-terms-and-conditions/>

Programme. The independent expert panel will assess the applications and advise the UKRI ISCF Programme and HDR UK.

The application (Part 1 and Part 2) must be submitted as a single PDF in accordance with the headings laid out in Section 6. Bookmarks must be used to link to each section. This PDF must include the following Accompanying Materials: CVs, Dataset Description, Project Plan, and Heads of Terms.

The text in the PDF document should be no smaller than Calibri 11-point font, with standard character spacing, margins no smaller than 2cm, and minimum single line spacing.

The D2EDPM DIH Financial Resource Request must be submitted as an appendix, as an Excel file. No further appendices will be accepted. Applications exceeding the limits given for each section will not be accepted.

A checklist ahead of submission is given below.

In order to be considered, the application must be submitted electronically, by email to informatics@mrc.ukri.org and received by 17:00 BST on 2 July 2019. Applications meeting these submission requirements will be considered the final versions to be used for assessment; no further revisions will be allowed after 17.00 on 2 July 2019. Applications sent to other email addresses or which are received after the deadline passes will not be considered. Submission of an application indicates the Lead Organisation's formal acceptance of the proposal.

A copy of the completed submission should also be sent to Paul.Colville-Nash@mrc.ukri.org and to dihengagement@hdruk.ac.uk for information only.

Application Checklist and Response Limits:

Section	Part	Limit – do not exceed	Points Available
Part 1 – Overview	1.1 Proposed Titles, Organisations and Key People	Long form title: 15 words/120 characters including spaces; Short form title: 30 characters including spaces Up to ten keywords	N/A
	1.2 Hub overview	400 words / 3500 characters including spaces	N/A
	1.3 Public description of proposed Hub	200 words / 1500 characters including spaces	N/A
	1.4 Scope of proposed Hub	800 words / 7000 characters including spaces	N/A
	1.5 Letter of Support from Lead Organisation	1 page	N/A
Part 2 – Assessed Section	2.1 Making Datasets Available	600 words / 4500 characters including spaces	15 points
	2.2 Curating Data for Research	600 words / 4500 characters including spaces	15 points
	2.3 Providing Services to Meet Identified User Needs	800 words / 7000 characters including spaces	30 points

	2.4 Delivery Feasibility and Risk Management	800 words / 7000 characters including spaces	30 points
	2.5 Public Trust	800 words / 7000 characters including spaces	30 points
	2.6 Capabilities and Partnership	800 words / 7000 characters including spaces	20 points
	2.7 Wider Impacts	600 words / 4500 characters including spaces	20 points
	2.8 Leverage and Value for Money	400 words / 3500 characters including spaces	20 points
Accompanying Material	CVs	2 pages.	N/A
	D2EDPM DIH Financial Resource Request	Excel Workbook in template format given	N/A
	Dataset Description	1 page. Dataset description does not count towards word limit for section 2.1	N/A
	Project Plan (eg Gantt chart)	1 page. Project Plan does not count towards the word limit for section 2.4	N/A
	Heads of Terms	6 pages	N/A

9. Selection process and timetable

All applications received will be reviewed to ensure that they are compliant with the scope of the DIH Programme, as outlined in Section 6, 1.4 Hub Scope. All eligible applications will be assessed by a specifically convened, independent, multidisciplinary panel to enable fair, open and transparent peer review and assessment against the assessment criteria laid out in Section 6 above. The panel will include representatives from a range of fields and will be independently chaired. The panel will review all the applications received, which are within the scope of the DIH Programme. The panel will review applications in light of the criteria above and invite to interview those which would contribute to a portfolio of themes and services to meet user needs for research and innovation. For each application invited to interview, the panel will identify key areas to test, and provide feedback to applicants.

Interview

If you are invited to attend an interview, you will be required to give a presentation. Your presentation must:

- use Microsoft PowerPoint with no more than 10 slides
- be no longer than 20 minutes
- not include any video or embedded web links

You must submit your final presentation slides via email to Health Data Research UK (dihengagement@hdruk.ac.uk) by the date stated in the email inviting you to interview. Late submissions will not be accepted.

Up to five people representing your application can attend the interview, ensuring coverage across multiple partners. Agree with your consortium who will attend and send us their names by the date stated in the invitation email. Make sure they will be available on both published interview dates. We are unable to reschedule slots once allocated.

After the interview there will be 20 minutes of questions, which will be based on your application form, the panel feedback from the written stage and your presentation.

It is anticipated that no more than 9 tendering consortia will be invited to progress to the interview stage.

Award letter

Applicants will be notified of the Panel’s recommendations within two weeks of the interviews, although it should be noted that final awards are subject to ratification through the ISCF governance arrangements. The Lead Organisation will be issued an award letter to confirm the value and duration of the award and the terms and conditions by which the funding will be administered. The Lead Organisation will be required to sign and submit an award acceptance letter within 10 working days of receipt of the award letter to confirm their acceptance of the funding and responsibility for the project. Funding will not be released until the fully executed Consortium Agreement (which complies with the submitted Heads of Terms) is received.

Continued funding of the Hub will be subject to delivery against agreed milestones.

Application and award timetable

Activity	Date
Competition Launch	7 May 2019
Competition Call Deadline	2 July 2019
Notification of Invite to Interview (following sift and panel short list)	19 July 2019
Panel Interview	1 and 2 August 2019
Notification of Panel Recommendations	12 August 2019
Announcement of Successful Hubs	12 September 2019
Hubs Go Live (Expected)	1 October 2019
Milestone 1 Delivery	31 December 2019
Milestone 2 Delivery	31 March 2021
Milestone 3 Delivery	31 March 2022

10. Further information

Information for applicants

HDR UK will host the following opportunities to discuss the DIH Application Process. These are currently scheduled for:

- 16 May 2019, 10am (webinar)
- 21 May 2019, 3pm (event)
- 20 June 2019, 11am (webinar)

A Frequently Asked Questions document will be released on a regular basis, during the period of the call. This document will be available on the [HDR UK website](#).

Data protection and confidentiality

In accordance with the General Data Protection Regulation 2018, the personal information that you provide within the application will specifically be used for administering this call only. This and other information within your application (and other related correspondence) will be viewed by HDR UK and UKRI staff and shared with selection panel members as need. Your information will not be used for any other purpose without your specific consent. Submitted material will be treated as confidential, and all independent panel members will be required to sign a confidentiality agreement to protect the confidentiality of the application material.

Contacts

For further information about the call, visit the [MRC website here](#), or email informatics@mrc.ukri.org or Paul.Colville-Nash@mrc.ukri.org. More information about the DIH Programme, and other work undertaken by HDR UK, is available on the [HDR UK website](#).