NHS Cancer Programme Innovation Open Call

APPLICANT AND PORTAL GUIDANCE

These Guidance Notes complement the Invitation to Tender document, the Challenge Brief, and the Template Application form, and are designed to help you complete your application to the NHS Cancer Programme.

Funding prerequisites

The following funding prerequisites apply to all applications and will be considered by the funding Panel:

1. A commitment to involving members of the public and patients in the design and management of the project.
2. A commitment to actively engage in tackling healthcare inequalities, and in supporting diversity and inclusion, by including communities where the proposed innovation will make the biggest impact.
3. Steps towards contributing to the overall carbon neutral strategy for the NHS.

Guidance for completing your application on the PMO Portal

These notes should be read alongside your application as they are designed to help you provide the information required.

Please keep the use of acronyms to a minimum. Only use acronyms where a term is mentioned frequently throughout the proposal. If you choose to use an acronym, do not assume that the reader knows what it means, and be sure to define it, bearing in mind that individual sections of the application may be read separately during the selection process.

In order for your application to be accepted, you must submit the minimum required information. This information includes all mandatory fields from the application form (as indicated with a red asterisk next to questions). If you do not complete this information, you will not be able to submit your application.

We ask that all participants in the application (Team Members, Sub-Contractors, and Clinical Partners) have approved accounts on the Research Management System so that they can be added to the application form. Please ensure you leave enough time for this.

If you do not have all the answers you need to fully complete the application, you may save your progress using the 'Save and Close' button and return to the application process at a later date.

Guidance on the individual sections of the application form is provided in the following sections.

Section 1: Application Summary

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Information entered into this section provides a summary of your application.

Application Title
Please provide the title for the project. This should be descriptive, concise and contain keywords relevant to the project. Any abbreviations should be spelled out in full.

Host organisation

Please give details of the organization who will be responsible if the project is funded. This should be a single organisation based in the UK or EU from the private, public and third sectors, including companies (large corporates and small and medium enterprises), charities, universities and NHS Foundation Trusts.

Project Start date

Please enter the start date for your project, which is expected to start approximately six weeks after the Interview Panel. The start date is provisional and will be confirmed by the PMO.

Contract duration
Projects can be up to 18 months duration.

Total contract cost
The upper cost limit for the Cancer Programme is £4 million (NET). Please ensure the proposed project deliverables could be reasonably achieved within the proposed contract duration, and all requested costs be justified.

Eligible costs include salary, recruitment, independent evaluation (please see section 4e), consumable, overhead, estate, and contractor costs. Please refer to section 6 for more details.

Costs to support basic research, development of research hypotheses, and experimental designs that have no practical commercial application are not eligible.

Type of Innovation
Please choose the most appropriate description of the innovation using the dropdown list provided. If 'other' is selected, please provide additional information.

Tumour site(s)
Please choose the most appropriate categories using the list provided.

Tumour type
Please indicate the main tumour type targeted by the proposed innovation (e.g., Non-small cell lung cancer, lung adenoma, etc.).

Market segment
Please choose from the dropdown list provided.

Market size

Please provide the expected market size for your proposed technology (max 300 characters). Please consider including details from reputable sources on patient population size, cost of the problem, percentage share of the market that the solution could realistically capture, etc.

AHSN(s) involved in the project
Please select all that apply from the list provided.

AHSN(s) Role
Please describe the role of AHSN(s) in the project (max 200 words).

Cancer Alliance(s) involved in the project
Please select all that apply from the list provided.

Cancer Alliance(s) role
Please describe the role of Cancer Alliance(s) in the project (max 200 words).

Section 2: Organisation Details
Complete details relevant to your organisation. Please choose from the dropdown list where provided.

- Organisation website
- Company registration number (for those in the UK. NHS and HEI may use N/A)
- VAT registration number (VAT registered companies must provide a VAT number. NHS, HEI, and VAT exempt organization may use N/A)
- Region in which the organisation is registered
- Organisation size
- Organisation status
- Type of Organisation
- Main business activity (max 50 characters)
- Annual turnover (not mandatory, for companies only)

Section 3: Plain English Summary (max 300 words)

A plain English summary is a clear explanation of your project. The plain English summary may be used to inform reviewers, including experts who might not have specialist knowledge of your field as well as members of the public of your funding application. If your application for funding is successful, the summary will be used on the SBRI Healthcare website.

Please make sure your summary is free of technical jargon, easy to read, and provides an overview of your proposal.

It is helpful to involve patients / carers / members of the public in developing a plain English summary.

When writing your summary consider including the following information where appropriate:

1. aim(s) of the project
2. background to the project
3. design and methods used
4. patient and public involvement
5. dissemination

The plain English summary is not the same as a scientific abstract, please do not cut and paste this or other sections of your application form to create the plain English summary.

Section 4: Project Plan

4a) Description of unmet need and how the proposed innovation addresses it (max 700 words)

Please provide a narrative description for what the innovation is and how it addresses the competition challenge. The applicants should complete this question in detail, using the descriptions provided in the application form.

The following should be provided:

- The problem being addressed and how it meets the challenge brief?
- A brief description of the proposed solution.
- The entry point and expected outcomes of the project.
- The main mechanism your innovation uses to bring more people into the system.
- How the innovation will facilitate earlier diagnosis (cancer stage 1 and 2).

4b) Impact of the innovation on early diagnosis of cancer (max 500 words)

Please select how the proposed innovation will improve early diagnosis. Select all the options that apply using the list provided. Please provide the following information, where appropriate, for the selections made. If multiple options are selected, ensure that you provide the details listed for each category selected, to allow a quantitative assessment of the innovation's potential impact.

- **Cancer detection in asymptomatic population**
  - What is the target population (i.e., which age bands, sex, other characteristics)
  - Which cancer type does the innovation detect?
  - What proportion of existing cancers will be successfully detected through the innovation, depending on stage of disease progression (i.e., sensitivity by stage)?
  - How many patients will be incorrectly identified as having cancer (false positive rate)?
  - Under the preferred use case, how frequently will the target population be tested?
  - What is the expected level of uptake for this innovation in the target population?
- **Improving screening uptake/adherence**
  - What level of screening uptake can be achieved using the innovation?
  - For which cohort?
  - Do these cohorts have a higher than average risk of having cancer?
  - What is the incidence rate among these cohorts?
- **Proactively target/stratify patients**
  - What risk factors does it target and how many people have this risk factor?

- How many cancers occur (by cancer type, annually, in England) in people with this risk factor?
- What tests will be offered to those patients if identified as at risk?
- If tests are offered to asymptomatic at-risk patients: what is the sensitivity by stage of the tests used, and the frequency at which patients might be tested?
- What is the expected uptake of these tests in asymptomatic at-risk patients?
- If tests are offered to patients once they developed symptoms: what proportion of patients develop symptoms at early rather than late stage?

- **Encourage patients to present earlier**
  - Which patients (cohort, cancer type) are targeted by the innovation?
  - In the target cohort, how many patients currently delay their presentation (either because they do not know their symptoms could be cancer, or because they do not act on them), and by how long?
  - What proportion of targeted patients will present sooner (and by how much) if the innovation was implemented?
- **Increasing referrals**
  - Which patients (cohort, cancer type) are targeted by the innovation?
  - In these cohorts, how many patients are currently not referred for suspected cancer even though they meet referral criteria?
  - What proportion of these will be referred with the innovation in place?
  - Of these additional referrals how many patients will found to have cancer (i.e. conversion rate), and how many will have an early stage cancer?
- **Rule out/in for lower risk patients**
  - Which patients (cohort, cancer type) are targeted by the innovation?
  - How many patients will receive the test who currently are not referred and tested for cancer?
  - How many of these patients do have cancer (true incidence rate), and how many do have cancer at early stage?
  - Of these early-stage cancers, how many will be detected through the test (sensitivity by stage)?
  - How many patients will be incorrectly identified as having cancer (false positive rate)?
- **Other**
  - Which cancer type and patient cohorts would be affected?
  - How does the innovation improve early diagnosis other than through the mechanisms described above?
  - In particular: what is the underlying problem/ root cause of late diagnosis addressed by the innovation?
  - How many cancer diagnoses are affected by this each year? (Out of all cancers in the target cohort / cancer type)
  - What is the impact of the identified problem / root cause: i.e., by how much is diagnosis delayed for those patients affected?
  - How much of this delay do you expect to be averted through the proposed innovation?

4c) Description of the innovation's evidence accumulated to date (max 700 words)

The applicants should address the following questions in detail, using the descriptions provided in the application form:

- **At what stage of development is your innovation?**
  - Please describe the level of readiness (e.g., is the innovation in use in the NHS or elsewhere/ commercialization in the UK and abroad/financial support received/further adaptations needed for adoption).
  - What level of regulatory approval does the innovation have? (Please give details where relevant around aspects such as CE marking/class and NICE approval for the indicated use)
- **Could your innovation be used/deployed in different ways?**
  For example, at different points in the pathway for different target populations, for different uses/outcomes. If yes, please explain the different options available, then clearly show which option you are considering when completing this application. Please choose the case with the most evidence. If re-deployed from a different cancer type/disease area/indication, evidence must be provided to support the new clinical pathway.
- **Where does your innovation fit within the care pathway?**
  Please attach a pathway map showing the innovation disrupted pathway against the normal and COVID-19 clinical pathway. Please aim to include all steps in the pathway (including triage/analysis etc.). Where possible, please include statistics or percentages of patients/referrals going down the different routes within the pathway.
- **What is the evidence?**
  - Please provide a brief narrative explaining the evidence base and what has been done so far to demonstrate that this innovation can identify more cancer significantly.
  - Please include any patient outcomes, such as improved stage at diagnosis that can be attributed to the innovation, and reference any trials or evaluation studies/pilots etc. Please include data e.g., where applicable efficacy/effectiveness/sensitivity by stage/specificity, including confidence intervals.
  - Whether PPIE played a role in the development of the innovation and how PPIE contributed to the studies to gather evidence.
- **What is the impact on cancer services?**
  Please provide any preliminary considerations on how the innovation would impact on cancer services and how the system will need to adapt (including people, processes and culture) in order to deliver system-wide benefits (e.g., output of NICE META tool, other).

4d) Project description and breakdown (max 1000 words)

The project plan should provide a clear breakdown of the following:

- The proposed work-packages, including the key measurable deliverables for each work-package and how these will be delivered.
- Upload a project Gantt chart to support the project breakdown.
- Key risks to the project and state how these will be mitigated against.
- How you plan to engage with them in this project. If you are not planning to engage with patients, you must explain why.

4e) Evaluation proposal (max 700 words)

All projects are required to complete an independent (service) evaluation as part of the project (within the duration of the project). You must demonstrate your evaluation is robust and can undergo independent scrutiny. The aim of the evaluation is to understand how your innovation is implemented, what effects it has, for whom, how, and why. You will be required to submit an evaluation strategy and final evaluation report as part of your project. Additional resources are available on the call page to help develop your evaluation strategy.

Please describe the evaluation plan for your project. This should include:

- Your overarching evaluation aims (e.g., health economics, health outcomes, enablers and barriers to implementation and delivery)
- The evaluation methods you propose to carry out (e.g., process, impact, economic)
- A logic model. Applicants are encouraged to attach a schematic to illustrate this.
- Your proposed evaluation partner, or if not known, your approach for appointing an independent evaluation partner.

4f) Milestones

Please list up to 10 key milestones for the project along with timings for completion and appropriate success criteria.
The milestones should be comprehensive and the success criteria able to be assessed objectively (e.g., 'all tests delivered to 99% accuracy' or 'for statistical significance, 2000 samples must be processed') with an emphasis throughout on practicality as this initiative is seeking evidence that the technology is viable in the proposed setting and can be effectively deployed to and adopted by NHS trusts. Appropriate record keeping and reporting are essential, but reports are not in themselves the main goal of the project.

The delivery of the independent evaluation strategy and an evaluation report must be included as milestones.

4g) Patient and Public Involvement and Engagement (PPIE) (max 500 words)

Patient and Public Involvement and Engagement (PPIE) is an accepted and recommended working practice within healthcare research ensuring that solutions are co-produced with patients, meet patient needs, and to ensure there is an acceptability among end-users. Applicants are expected to develop a thorough PPIE strategy as part of their project. Please consider including the following information in this section:

- What are your plans for PPIE?
- How have the relevant patient groups been involved in the design and development of the innovation proposed?

- How will you ensure that the innovation will be acceptable to patients, their families, carers, the wider support network, and healthcare professionals?

4h) Intellectual property (IP) (max 300 words)

The definition of Intellectual Property (IP) includes patents, trademarks, designs, copyright (such as new software, checklists, scales, protocols, questionnaires, toolkits, guidelines or similar), research tools (such as data analysis techniques, assays, cell lines, biomarkers, materials or equipment and devices) and (clinical) data.

Please provide details on the following:

- Any relevant existing background IP that will be utilised during the project and the current ownership arrangements, including patents or patent applications.
- Any foreground IP which will be produced or improved during the project and how this IP will be captured and managed.
- Any Freedom to Operate (FTO) search that have been conducted to date. If no search has been conducted, please explain your rationale.

4i) Key Competitors and Unique Selling Point (max 400 words)

Please provide details of any competitor technologies or market alternatives, which should include the following:

- The advantages of the proposed solution compared to the current standard of care.
- Details of any competing technologies or alternatives in the wider market (either on the market or in development), and describe the advantages and innovativeness of your proposed solution over these (i.e. what is your unique selling point).
- Define the market you plan to address; including size, barriers to entry, cost of the problem.

4j) NHS/Social care implementation strategy and commercialisation plans (max 1000 words)

Please give an overview of your commercialisation and business plan for the product or service you are developing, including market launch and long-term adoption. Please include:

- An overview of your commercialisation and business plans, with consideration to whom will use the solution, how it will be purchased and the likely cost of the solution.
- Your business model for adoption, including implementation costs/implications, workforce requirements, etc.
- Sustainability/ spread: what are the expected timescales for regional/national spread? What are the further steps needed for adoption after the project?
- Plans for long term sustainability of the technology.
- How will you ensure that the innovation is affordable to the NHS and wider system such as Integrated Care Systems (ICSs) both immediately and throughout the life of the product?
- What evidence, both health economics and delivery of true impact will the NHS and wider system require before the technology can be adopted?

4k) Equality, Diversity, Inclusion (max 300 words)

Please provide a description on how the technology will:

- Minimise health inequalities,
- Promote equality of access to underserved ethnic and economic groups, and
- Whether steps will be taken to alleviate the potential negative impacts introduced by the technology.

4l) Net zero policy (max 300 words)

Please provide a description on how the technology will contribute to net-zero emissions by 2040.

Section 5 – Team and Subcontractors

Please note that all project partners should be invited to the application. All participants (Team Members, Subcontractors and Clinical Partners) will need to have approved accounts on the Research Management System so that they can be added to the application form. Accounts are approved by our systems team during office hours. We have included some wording at the end of the document for you to send to your team to help them register. Please ensure you leave enough time for this.

It is recognised that there may be a number of individuals from each organisation that can participate in the project, and it is not essential to list all those that are involved. However, it is expected that there is at least one named individual from each participating organisation. In addition, sufficient detail on team members, clinical partners, subcontractor(s) and advisor(s) should be provided to demonstrate that there is the appropriate expertise to deliver the project.

Please note, Section 5a, 5b, and 5c have a limit to include up to 10 members each.

The forecast cost of team members, advisors and subcontractors should be included.

5a) Project team members

Please only include named individuals from the host organisation. Collaborators outside of the host organisation should be listed in section 5c) Subcontractor(s) and advisor(s). **Please do not include clinical partners or subcontractors in this section.**
Please provide a job title, detailed description of the role performed in the project, relevant experience and skills, time allocated to the project and day rate. This section is auto-populated using information provided in "manage my details" section of the Research Management System account. This should be updated prior to form submission.

Time allocated to the project should ideally be expressed as a Full Time Equivalent (FTE) percentage (the time allocated during the period of the project indicated as a proportion of the working hours for a FTE position).

Relevant expertise of team members should be included.

5b) Clinical partner(s)

Please provide organisation name, a detailed description of the role performed in the project, relevant

expertise/skills, time allocated to the project and cost (excluding VAT).

The use of a clinical/social care partner is not mandatory, but it is strongly recommended.

5c) Subcontractor(s) and advisor(s)

Please provide the details of any subcontractors or advisors involved in your application. Please provide organization name, a detailed description of the role performed in the project, relevant experience and skills, time allocated to the project and cost (excluding VAT) of the subcontractor(s) or advisor(s).

The use of subcontractors is optional; however, where your proposal involves subcontracted individuals or companies, or benefits from the input of named expert advisors, details should be provided.

While quotes for activities can be in the form of forecasts in this application, you will be asked to provide formal quotes as part of the due diligence process if you are successful.

If an advisor provides services at no cost or at a level of expenses incurred only, this detail should be indicated.

5d) Other Posts (max 300 words)

Please provide a detailed description of any other posts that are yet to be confirmed or appointed for the project. Please note, these team members will be expected to start work in around 6 weeks post application acceptance.

Please also provide the job title, a detailed description of the role performed in the project, time allocated to the project and relevant experience and skills that are required for the role.

Section 6 – Budget

6a) Application Finances

Please provide the NET costs in this section, which will be used as the contract amount. If you are successful, you will be awarded a Development Contract, and VAT may be applied in invoices in addition to the scheduled payment, if relevant.

Please provide a line-by-line summary of costs for the project. All costs should exclude VAT. The costs quoted must reflect actual costs at a "fair market value" and profit should not be included. Please also provide a breakdown of the following:

- Labour costs for all those contributing to the project
- Material costs (including consumables specific to the project)

- Capital equipment costs
- Subcontract costs (including evaluation costs)
- Travel and subsistence costs
- Indirect costs
- Other costs
- Total NET costs

Applicants will also need to complete and upload the detailed Finance sheet provided before submitting the application.

Project activities and associated costs that applicants are encouraged to consider (as appropriate) are:

- Cost to supply the innovation
- Training costs
- Clinical staff time to administer the innovation
- Management costs for hospital trusts to implement the innovation
- Other implementation costs
- Independent evaluation costs including data collection and analysis, impact on care pathway, clinician and patient acceptability, health economics
- Minor technology development work (e.g. minor adaptations for user acceptability, system integration, etc.)
- General office and basic laboratory consumables
- Library services/learning resources
- Typing/secretarial
- Finance, personnel, public relations and departmental services
- Central and distributed computing
- Cost of capital employed
- NHS indirect costs
- Overheads

6b) Justification (max 500 words)

Please provide a justification of the costs, including daily rates for staff involved and quotes from subcontractors where applicable. If successful, awardees are expected to provide copies of the quotes matching that in the application.

If there is significant use of subcontractors, please explain how these will be used and the costs of each. Please note the Assessors are required to judge the application finances in terms of value for money, evaluating whether the proposed cost for effort and deliverables in a proposal reflect a fair market price.

Section 7 – Supporting information

Please submit the following supporting document with your application form:

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- Supporting documents on the readiness of innovation (e.g., regulatory approvals, trial data, and other forms of certification (must not exceed 5 single sides of A4)
- Care pathway schematic (must not exceed 1 single side of A4 – mandatory)
- Project Gantt chart (must not exceed 1 single side of A4 – mandatory)
- Other support document (e.g., flow diagram illustrating the study design, must not exceed 1 single side of A4)

If required, an additional supporting document can be submitted with your application form (e.g., a flow diagram illustrating the study design and the flow of participants, diagrams, pictures, etc.). If submitting a flow diagram, applicants should also describe complex interventions and controls as accurately and fully as possible within their diagram.

Please note that uploads must be provided as a Word or PDF document.

Any documents exceeding the defined page limit will NOT be reviewed.

Section 8 – Administrative contact details

Please provide contact name, job title, telephone number and email address of an administrative lead as a secondary point of contact for any queries relating to this application.

Section 9 – Validation Summary

Please follow the steps on the screen in order to validate and submit your application.

All mandatory fields should be completed and project partners invited should have validated and approved their participation.

Once submitted, the completed application can be viewed or downloaded from the PMO RMS Portal. However, you will no longer have the ability to edit the application.

Please visit the competition pages for details on the application deadlines. Only those applications received before the competition deadline will be accepted. **PLEASE DO NOT SEND COMPLETED APPLICATIONS BY POST OR BY ANY OTHER MEANS OTHER THAN THROUGH THE PORTAL.**

For more information please see www.sbrihealthcare.co.uk. Questions **on the challenges and scope of this NHS Cancer Programme competition** should be addressed to the Programme Management Office via email to sbri@lgcgroup.com.

Further guidance on using the Research Management System (RMS)

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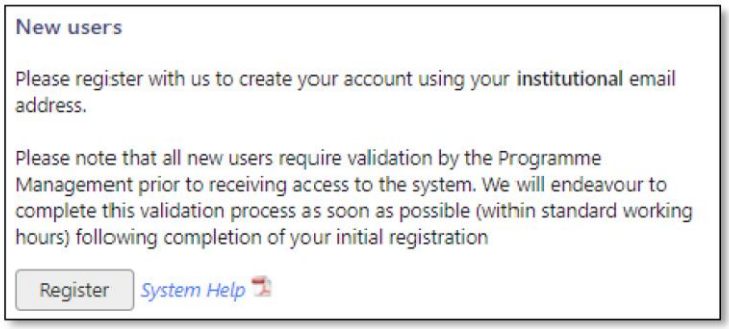
Applications must be made through the RMS online application portal. A template application form may be downloaded from the website, however, please note that this is for demonstration purposes only and may not be used to submit an application.

Register as a new user

Only registered users of the RMS application portal can apply. Applicants new to using the application portal should register as a new user. Once logged into your account the application portal home page is the starting point to create applications, access co-applications and to update contact information and professional details.

1. As a new user, on the right-hand side of the homepage, select "Register"



2. Enter your organisation email address and confirm. Your email address will become your sign-in username. Please use your organisational (NOT personal) email address for this. Select "Next"
3. Enter your details in all fields and select '**Next**'. Note: * denotes a mandatory field which must be completed.

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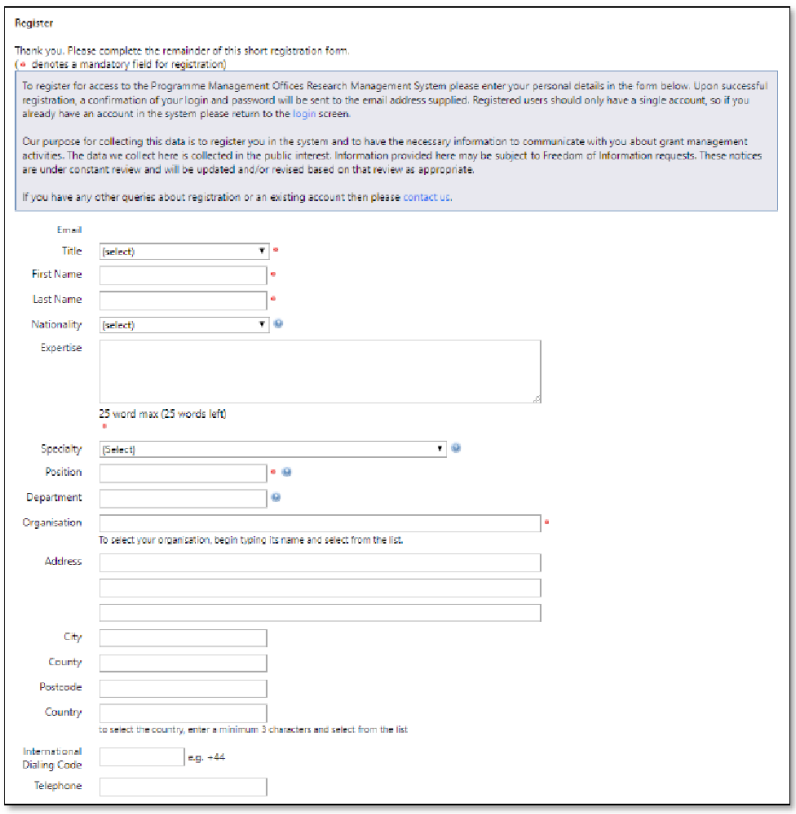
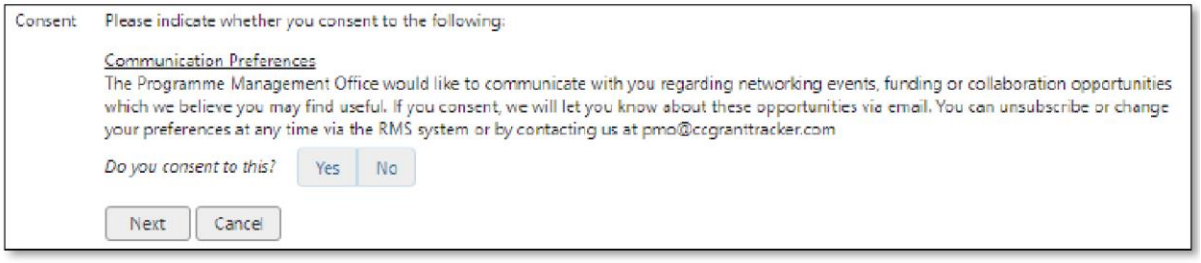


4. Ensure the Consent question entitled “Communication Preferences” at the bottom of the page is answered.



5. Select the “Terms and Conditions” and, once read, tick the confirmation box.

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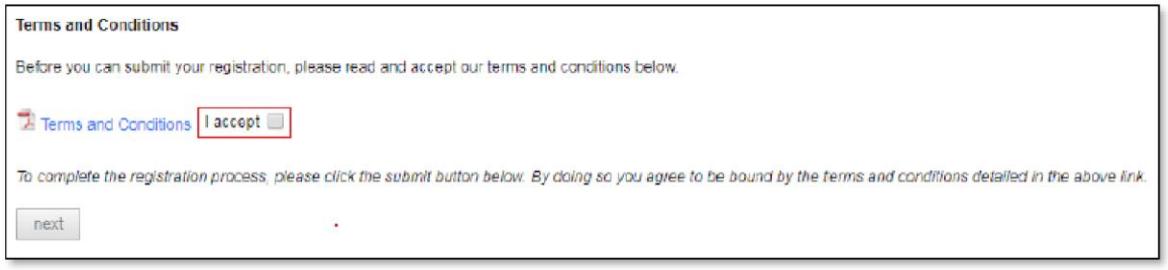

6. Click “Submit”
7. An email containing a link to create your password to subsequently gain access to the system will be sent to the previously entered email address once your registration details have been approved by a grant administrator. Please allow two working days for the registration to be completed.
8. Please add mailto:pmo@ccggranttracker.com to your trusted senders as these emails are prone to Spam or Junk folders.

In order to register successfully, please comply with the following:

- *We insist on institutional emails if available – This is a double check that the contact is who they say they are and represent the organisation registered with (anyone can create a Gmail/Hotmail account and claim to be someone).*
- *We do not accept generic / group emails – The RMS is used for conflict checks and will flag these. If numerous people are using one email conflicts aren’t picked up and we will not know who is using the system.*
- *We do not accept multiple accounts – Again to ensure conflict checking is effective.*
- *Registered Organisations – The UK associated organisation must be registered / available on Companies house, Charity Commissions, UK Register of Learning Providers or Organisations Data Service. Funding will only be given to organisations which are suitably credit checked using these.*
- *Sole Traders – The PMO does not fund sole traders as they will not pass financial checks.*

Access the RMS

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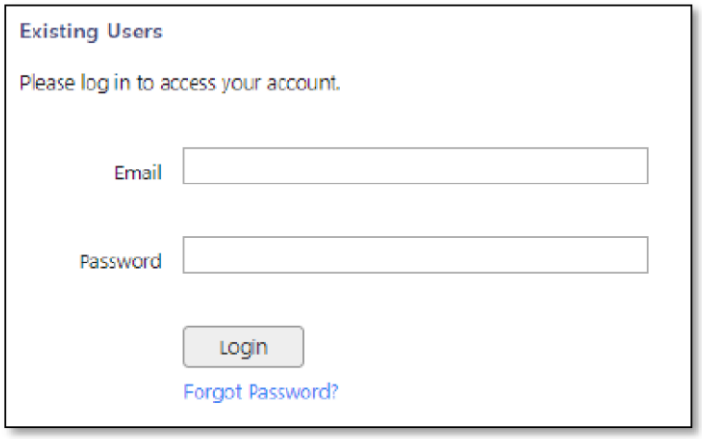

1. Enter your email address and password and click “log in”. If you are accessing the system for the first time, the Basic Information page will display. Once the relevant fields have been completed, press Save button
2. The account home page will now display indicating access to the system.

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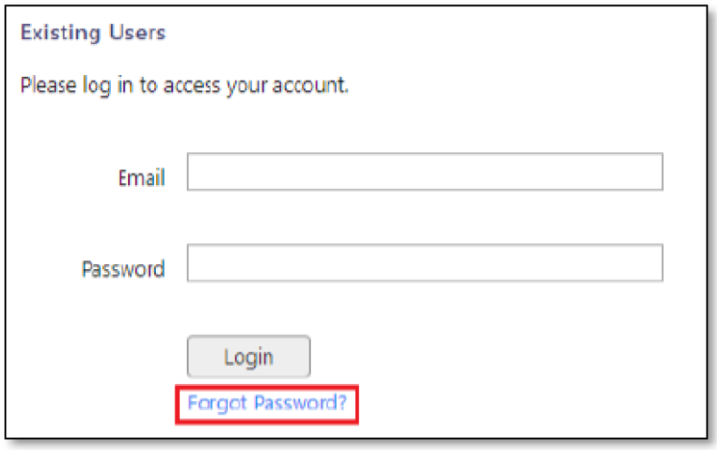
Forgotten password



1. From the PMO home page click the “Forgotten Password?” hyperlink.
2. Enter the email address with which you registered and click submit
3. An email containing instructions for resetting your password will be sent to the registered email address.

Please note, persistent use (>3 attempts) of an incorrect password will lock your account; this is to protect you from attempts to access your data by a third party. If this happens, you can request a new password via the forgotten password function.

The RMS Home Page

Managing my details

Select “Manage My Details” from the left-hand menu

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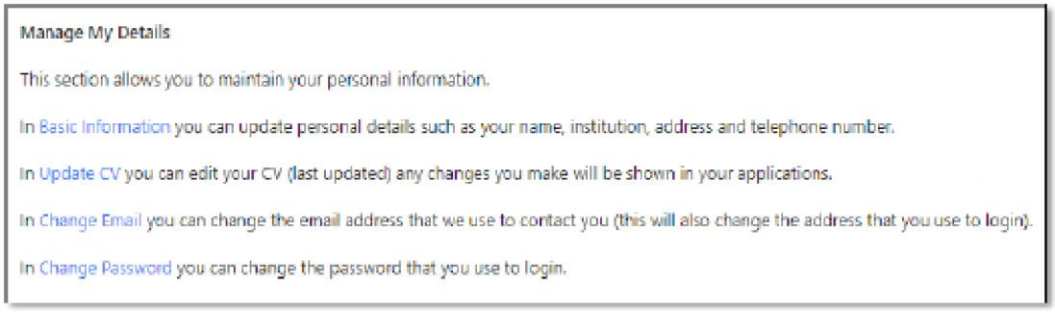
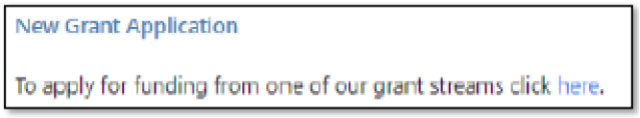


Lead applicants and project partners (team members, clinical partners or subcontractors) can manage their basic contact information and curriculum vitae (CV) through the 'Manage my Details' link on their application portal home page. Lead applicant and project partners' contact information is integrated by the application portal into the relevant fields during the application process.

Creating and completing an online application

The lead applicant must initially create the new application.

1. Select "My Applications" from the left-hand menu and click the "New Application" button



2. A list of open funding rounds will display along with further information about the competition. Please select the NHS Cancer Programme Competition 2.

3. Selecting "Apply" will open an application form for completion Denotes a mandatory field

From the application summary page, the application can be edited by clicking on the 'Edit' button. The different sections of the application form can then be accessed via the list of hyperlinked buttons on the left-hand side of the application portal webpage. You can move from page to page either by using the 'Previous' and 'Next' buttons, or using the list on the left-hand side of the web page.

Most questions are associated with contextual help buttons and clicking on them will open up pop-up windows containing brief guidance notes that supplement the published guidance for applicants. It is strongly advised that applicants refer to the published guidance first and then use contextual help as they complete and review each question, as contextual help is not designed to replace it. Mandatory questions are flagged with a red dot.

The research team can collaborate with the lead applicant to edit the content in the application by being invited to be a team member or a clinical partner through the Team section (section 5) of the application form.

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The lead applicant can use the search tool to find project partners and then to invite them to join the application. The application portal will automatically dispatch an email inviting the project partners to confirm their participation in the application. The invited project partners can then decide whether to accept the invitation and consent to the application being submitted jointly in their name. They will need to log into the application portal and follow the links to 'Confirm' their involvement on the co-application summary page. Once confirmed, the project partner will be granted access to edit the online application form.

All project partners must not only 'Confirm' but also 'Approve' their invitation to participate in the application electronically on the co-application summary page in advance of the submission deadline.

The system will prevent your project partners accessing your application at the same time as you. This stops applicants and co-applicants inadvertently making changes to the same part of the application at the same time and overwriting each other's work.

Remember to save your work

You will be prompted to save your work if you leave the browser in application editing mode. We recommend you save your work regularly to minimise the risk posed by any local computer or internet problems. You can save and return to the application form as often as you like prior to submission.

Exiting and returning to work on your form

Should you wish to exit your form, you can return at any time; simply log in using your username and password and select 'My Applications' from the menu. You will then be presented with a list of all the applications you are currently involved with as well as providing details as to their stage in the submission process.

Validation and submission of the form

The lead applicant can review the progress of their application at any time by selecting the 'View/Print' option on the application summary page to generate the application as a PDF File.

When the application form is complete, it must be validated prior to submission. The validation step is a check run by the application portal to assess whether all the mandatory questions contain information. It will provide a list of links to any parts of the form where corrections or additional content are needed.

Once the application has been validated successfully and no further corrections are needed, the lead applicant can submit the application by clicking on the 'Submit' button on the lower right-hand side of the application summary page.

Following submission

A programme specific reference number will be assigned to the application once it has been submitted. After the relevant competition round closes, the application will automatically enter the process of being considered for funding.

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If you have any questions regarding your application, please email sbri@lgcgroup.com

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