**IHR Three Schools: Dementia Research Programme**

**Improving the lives of people living with dementia and carers**

**2021-2029**

**Call for Research Proposals 2024**

**Outline Proposal Form**

Please ensure you have read the *Programme of Work* and the *Call for Proposals* documents before completing this form.

**Please submit your completed application at** <https://www.sscr.nihr.ac.uk/internal-proposals/three-schools-dementia/dementia-research-programme-outline-proposal/>.

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| **Lead applicant’s details** | |
| Name |  |
| Current post(s) held |  |
| Organisation |  |
| Contact email |  |

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| **Proposal details** | |
| Research title |  |
| Expected start date |  |
| Duration (months) |  |
| Requested budget |  |

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| **Collaboration details**  *Please give the name, organisation and relevant NIHR School base for each co-applicant* |
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| **Please indicate which NIHR School members are involved in this proposal** | | |
| **NIHR School** | **Member** | **Tick if involved** |
| NIHR School for Primary Care Research | Queen Mary University of London |  |
| University College London |  |
| University of Bristol |  |
| University of Exeter |  |
| University of Keele |  |
| University of Manchester |  |
| University of Nottingham |  |
| University of Oxford |  |
| University of Southampton |  |
| NIHR School for  Public Health Research | Fuse: Universities of Durham, Newcastle, Northumbria, Sunderland and Teesside |  |
| Imperial College London |  |
| LiLaC: The Liverpool and Lancaster Universities Collaboration for Public Health Research |  |
| London School of Hygiene and Tropical Medicine |  |
| University of Bristol |  |
| PHRESH: Public Health RESearch for Health Consortium |  |
| University of Cambridge |  |
| University of Exeter |  |
| University of Sheffield |  |
| NIHR School for  Social Care Research | Leeds Consortium: University of Leeds and Leeds Beckett University |  |
| London School of Economics and Political Science |  |
| University of Birmingham |  |
| University of Bristol |  |
| University of Sheffield |  |
| University of York |  |

**DESCRIPTION OF PROPOSED RESEARCH**

Please do not exceed 4 **pages of A4**, excluding the references section. The font should be Trebuchet, size 11.

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| **Background**  *Please explain the context to the proposed research and why it is important. Please include reference to the current evidence base and how your proposed research will add to this.* |
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| **Research question(s)**  *Please indicate the main questions/aims of the project.* |
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| **Relevance to the Three School’s Dementia Research Programme**  *Please set out how your proposed research supports the Three Schools’ Programme.* |
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| **Methods**  *Please provide a brief description of the overall methodological approach, data collection and analysis, addressing any anticipated challenges/risks for the design and the proposed solutions. This section should also describe key ethical considerations and requirements for related approvals.* |
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| Public **involvement**  *Please provide details of user, carer and practitioner involvement in the planning of the study to date, including in the writing of the proposal, as well as future plans to involve people living with dementia, carers and practitioners in conducting the study.* |
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| **Equality, diversity and inclusion**  *Please set out how you will address EDI considerations in your proposed activities.* |
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| **Plan for pathways to impact and knowledge exchange activities**  *Please provide a brief overview of your plan to support impact from the research.* |
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| **Timescale**  *Please provide a brief summary of the timetable for your research.* |
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| **References cited above** |
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**PART 2: SUMMARY OF RESOURCES**

Please do not exceed 1 **page of A4**. The font should be Trebuchet, size 11.

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| **Total funding requested**  *Please provide a cost for your proposal and briefly set out details of the resources requested.* | |
| Total of salary costs | £ |
| Total of other costs | £ |
| Total overheads (if requested | £ |
| Total budget requested | £ |
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**PART 3: DECLARATIONS**

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| **Declaration and signature** |
| I confirm that the information given on this form is complete and correct, that I shall be actively engaged in the proposal outlined and responsible for its overall management, and that this proposal has the support of all co-applicants and my institution.  Signature:  Name:  Date: |

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| **Administrative Authority/ Finance Office authorised signatory** |
| I confirm that I have read the details of this application and that the host institution is willing to accept this award if funding is approved and will support the applicant’s planned activities.  Signature:  Name:  Position:  Date: |