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Dear Dr Pathan

HTA Project: 16/152/01 - A pilot cluster randomised clinical trial of the use of selective gut decontamination in critically ill children (Paediatric Intensive Care and Infection Control: PICnIC)

Congratulations on your recent success in being awarded funding for the above research project. This letter explains, in brief, the processes from now until your research is complete and your final report published.

My role is to assist the project through start-up and I shall remain your first point of contact until the end of this stage. Shortly before the project's start date I shall hand over to a Research Manager, who will then be your first point of contact for the remainder of the project. You will receive notification when this handover takes place.

Stage 1: Contract

The contract has been raised and sent to your contracts office.

Stage 2: Starting payments

Before we can start payments we will need you to complete the following tasks (unless marked as deferred).

MIS Tasks (see paragraphs below for further details):

- Submit Collaboration or Other Agreement – due by start date 1 May 2018
- Provide Evidence of Ethical Approval – due by 1 July 2018
- Provide Evidence of Clinical Trials Authorisation (MHRA) – deferred until 1 July 2018
- Confirm & Update Website Information – due by 1 April 2018
- Upload Project Management Plan – due by 1 April 2018
- Enter Registration Information – due by 1 July 2018

Ethical Approval:

MIS Task: Provide Evidence of Ethical Approval (Start Up)

Receipt of ethical approval is a key project milestone. Where ethical approval is required for a project we request to see evidence of this approval as part of our monitoring process.

For your project one of the two options below should apply:

1)NHS ethical approval required pre start date - We appreciate that this process can take some time and that delays could affect the start date of the contract, so please keep us updated on progress. Some helpful information about the ethical approvals process (including HRA approvals) is provided in the additional information at the end of this letter.

2)NHS ethical approval required post contract start date - If your study design and timetable suggest that ethical approval is not required from the outset, we will defer the requirement for you to provide written confirmation of ethical approval.

Clinical Trials Authorisation (CTA):

MIS Task: Provide Evidence of Clinical Trials Authorisation (MHRA) (Start Up)

You have indicated on your application form that you require CTA. Please use the MIS to provide us with evidence that you have received this from the MHRA; alternatively, please provide confirmation that CTA is not required.

Information for our Website Project Profile:

MIS Task: Provide Website Info (Start Up)

We will use certain information provided in the final version of your application form to create a project profile for our public website. This will include the abstract and plain English summary for your project, which should be appropriate for public view. Please note that while you are unable to change the application form itself you are able to update this information using the task provided. Please ensure that the information in this task is appropriate for public view.

Please also let us know, at any time during the project lifetime, if the abstract and plain English summary requires updating.

Project Management Plan:

MIS Task: Upload Project Management Plan (Start Up)

We require a detailed project management plan that identifies key milestones, including when you will require the necessary approvals. Please include an overview of your project timeline; this should be submitted as a Gantt chart or Excel spreadsheet and broken down clearly into months.

Registration Information:

MIS Task: Enter Registration Information (Start Up)

In most cases projects are required to register with the relevant database(s). Depending on the nature of the project we are required to gather registration numbers and additional information. Please provide this information via the MIS.

- ISRCTN:

All primary research studies implementing, observing, or evaluating an intervention need to be assigned an International Standard Randomised Controlled Trial Number (ISRCTN). For more information, and to register, please visit the ISRCTN Registry: www.isrctn.com. Non-commercial NIHR partners, with an interventional component, registered with the NIHR Study Support Service (www.nihr.ac.uk/funding-and-support/study-support-service), included on the NIHR Clinical Research Network Portfolio are eligible for free registration. Purely observational studies, and some health services research, may be asked to pay

the registration fee. If your primary research study is not eligible for an ISRCTN, please register elsewhere if possible and add this information to the MIS task.

Collaboration Agreement (by specified date):

MIS Task: Submit Collaboration or Other Agreement (Start Up)

The terms of your contract include the requirement for you to submit draft copies of any collaboration agreements prior to signature by the contractor. You should be aware that we frequently request revisions to these documents so you should allow sufficient time for this iterative process.

We require signed copies of these agreements by INSERT DATE. A task has been created in the online system for you to supply the collaborative documents.

Stage 3: Management of your project

The following sections provide guidance on the monitoring process and, in some cases, request additional information required to successfully monitor your project.

MIS Tasks:

- Provide Project Oversight and Management Groups – due by 1 April 2018
- Update CTU Involvement – due by 1 April 2018
- Submit Protocol – due by 1 July 2018
- Enter Key Progress Targets – due by 1 October 2018

Project Oversight and Management

MIS Task: Provide Project Oversight and Management Groups (Start Up)

If your study falls within the scope of the Research Governance Framework it requires the establishment of a Trial Steering Committee (TSC) or Study Steering Committee (SSC) and, where appropriate, a Data Monitoring (and Ethics) Committee (DM(E)C). The Chair of your TSC/SSC is not required to be a content expert themselves, but suitable expertise should be available to the group as whole. Please read our TSC/SSC/DMEC guidelines: www.nihr.ac.uk/funding-and-support/funding-for-research-studies/manage-my-study/governance-approvals-and-registration.htm.

We consider it good practice for most project types to set up a project oversight group to manage and/or oversee the work (e.g. Project Management Committee, Project Advisory Group, etc.). We ask that you identify the arrangements to be put in place for your particular study, including the contact details of the members of such committees.

We recommend that you employ a study/trial manager to undertake the day-to-day running of the project. If this is the case and you wish us to routinely correspond with this individual, please provide their contact details. The study/trial manager should also create an account on the MIS.

CTU Involvement

MIS Task: Update CTU Involvement (Start Up)

A task has been created for you to review the information on CTU involvement supplied in your application form and notify us of any changes.

Electronic copy of your Approved Protocol	MIS Task: Submit Protocol (Start Up) To enable successful monitoring of your project, and in order for any published report to be correctly interpreted, we ask that you supply us with an electronic copy of your approved protocol with a section included to track the amendment history. If you have not yet finalised your protocol it may be worth reviewing the guidance available on the 'research approvals' section of our website: www.nihr.ac.uk/funding-and-support/funding-for-research-studies/manage-my-study. Any changes made after the Board has approved the project must be clearly stated within the comments section of the MIS task, and if the changes are significant we would expect a summary and justification to be sent via email. The protocol will be made available via your project profile on the website, and we therefore need you to confirm that the content is up-to-date, suitable for publishing to a public website and that there is no confidential information contained within the document that would breach any legislation or duty of confidentiality. Please log on to the MIS to provide this information. Please note that, if you plan to make changes to your protocol at any point before the project's start date, you must contact me prior to making those changes by completing the 'Update Protocol' MIS task. Once your project has started, you must contact your Research Manager prior to any changes being made, again using the 'Update Protocol' MIS task. This is important because you are not permitted to begin working to a protocol that has not been approved.
Key Progress Figures	MIS Task: Enter Key Progress Targets Your Research Manager will create key progress tables based on your protocol and project management plan, if appropriate. These will be used throughout the life of your project for the collection of target and actual recruitment/data collection figures relating to your project. You will be asked in due course to complete the tables with your target figures for each month.
Collaboration Agreement (when docs available)	MIS Task: Submit Collaboration or Other Agreement (Start Up) The terms of your contract include the requirement for you to submit draft copies of any collaboration agreements prior to signature by the contractor. You should be aware that we frequently request revisions to these documents so you should allow sufficient time for this iterative process. We require signed copies of these agreements when they are available. A task has been created in the online system for you to supply the collaborative documents.
Welcome Webinar:	Research teams will be invited to attend a welcome webinar. All relevant team members may join if they wish, but we recommend that the Chief Investigator and study/trial manager in particular attend. Further details will be sent to you nearer the time.

NIHR CRN Portfolio:

Registering your study with the NIHR CRN portfolio allows access to infrastructure support. This support covers study promotion, set up, recruitment and follow up by Clinical Research Network staff. It is the responsibility of all eligible studies to register via the Integrated Research Application System (IRAS).

Further information on how to get your study into the NIHR CRN Portfolio can be found on the CRN Portfolio webpage.

Reporting:

Progress reports: The contract requires you to submit regular progress reports. Advice on the scheduled dates for these reports will be provided in due course.

Draft final report: Your draft final report will be due two weeks after the end of your contract. We will contact you at least three months before this time with more specific advice. Further guidance on writing your draft final report can be found on the Information for Authors webpage. This guidance is regularly updated and will change during the lifespan of your project. Please make sure you are using the most up to date guidance when drafting your report.

The process from receipt of your draft final report to its final publication typically takes around a year, during which time the report will be subjected to external review and editorial scrutiny. We advise you to make the appropriate plans and/or arrangements for this period, particularly in the light of the fact that a substantial part of your funding award is withheld pending final publication.

Frequent causes of delays for publications are from delivery of incomplete reports resulting in additional revisions, delays in acquiring permissions for reproduced work or errors within the referencing. For further information or guidance regarding the report please contact the NIHR Journals Library team at journals.library@nihr.ac.uk

Overdue reports: You should note that contractual penalties may be applied for any report that becomes overdue.

Project Outputs:

We support and encourage all projects to publish widely throughout the duration of their work and beyond. We advise you that your contract with the Department of Health will require you to do the following:

1) Notify us of all outputs. The term output is an umbrella term which includes but is not limited to: the final report; journal article; press release; media interview; conference abstract or presentation; dissemination event for research participants, newsletters or participant materials.

2) Send us a copy of the output and any information pertaining to it, at the time of submission or **at least 28 days** before the date intended for publication, or it being placed in the public domain, whichever is earlier.

3) Include an acknowledgement of programme funding (i.e. Programme, NIHR, and project number) and a disclaimer in all outputs. Suggested wording is provided on our Branding and Study Outputs page.

Please inform us of outputs by logging on to our online system and using the functionality available on your public project file. General guidance on outputs can be found on our Branding and Study Outputs page, with more specific information relating to different types of output available in the NIHR Identity Guidelines PDF, along with the NIHR's branding guidelines pertaining to use of the NIHR logo.

Access to the MIS project file:

The Management Information System (MIS), allows you to delegate access to the NETSCC MIS project file to other project staff who would then have the same access to the project file on the 'My projects' tab as you. This will allow them to view key project details and documents and generate and complete the following tasks in the dropdown list in the 'Grantee Requests/Actions' section:

- *Update CTU involvement in the project*
- *Update key progress figures*
- *Update output notification*
- *Update project oversight management information (i.e. upload TSC/DMC minutes)*
- *Update protocol*
- *Update website information*
- *Upload updated project management plan*

To enable another person to be given access to your project file the additional person needs to be a registered user of the NETSCC MIS. You should request that they be given access in an e-mail to me providing the following details; title, first name, surname and the email address they use to log into the MIS.

Please note that anyone that is given delegate permission to access the project file as outlined above will not automatically have access to tasks.

Reallocation of MIS tasks:

The MIS also allows NETSCC staff to allocate some project tasks (e.g. submitting start up information and progress reports) to another person associated with the project rather than the CI. This task reassignment will need to be arranged with me or your Research Manager by email. Project staff do not need to have access to the full project file in order to be allocated tasks. Please note that submission of the Draft Final Report cannot be reassigned.

In Summary

We require the items in stages 2 and 3 are due by the dates listed.

Please contact me if you require further information or clarification on any of the above. We wish you every success with this important study and look forward to receiving the requested information.

Yours sincerely

Hazel Church
Assistant Research Manager - HTA Programme

ADDITIONAL INFORMATION

Please note that not all of this will apply to all projects

Ethics and Governance:

HRA Approval is the process for the NHS in England that brings together the assessment of governance and legal compliance, undertaken by dedicated HRA staff, with the independent REC opinion provided through the UK Health Departments' research ethics service. (http://www.hra.nhs.uk/research-community/applying-for-approvals/hra-approval/) It replaces the need for local checks of legal compliance and related matters by each participating organisation in England. This allows participating organisations to focus their resources on assessing, arranging and confirming their capacity and capability to deliver the study.

For studies where your lead NHS R&D office is in England, you are expected to prepare your application for HRA Approval in the Integrated Research Application System (IRAS).

Sponsor:

Department of Health definition of a sponsor: An individual, organisation or group taking on responsibility for securing the arrangements to initiate, manage and finance a study. A group of individuals and/or organisations may take on sponsorship responsibilities and distribute them, by agreement, amongst the members of the group, provided that, collectively, they make arrangements to allocate all the responsibilities that are relevant to the study.

Summary of Sponsor Responsibilities:

- taking responsibility for putting and keeping in place arrangements to initiate, manage and fund the study
- confirming that everything is ready for the research to begin
- satisfying itself the research protocol, research team and research environment have met the appropriate scientific quality assurance standards
- satisfying itself the study has ethical approval before relevant activity begins
- allocating responsibilities for the management, monitoring and reporting of the research
- ensuring that appropriate arrangements are in place to approve any modifications to the design, obtaining any regulatory authority required, implementing such modifications and making them known
- seeking clinical trial authorisation and making the appropriate arrangements regarding the investigational medicinal products (for clinical trials involving medicines)
- satisfying itself that arrangements are kept in place for good practice in conducting the study and for monitoring and reporting, including prompt reporting of suspected unexpected serious adverse events or reactions.

For full details of sponsor definitions and responsibilities please refer to the Department of Health's Governance Framework for Health & Social Care (2nd Edition 2005).

Information relating to your draft final report:

A group of scientists and editors have formed the STARD (Standards for Reporting of Diagnostic Accuracy) Initiative, to provide a method for improving reporting quality and accuracy of diagnostic studies. Information on this initiative and the documents involved can be down loaded from the STARD website. We request that you include the checklist (available from this website) as a separate appendix to your final report.

The National Screening Committee (NSC) is enthusiastic to discuss your report when it is published. The committee has requested that we should ask you (and all other authors of reports initiated by the Population Screening Panel) to address a number of key criteria/questions. Information regarding the criteria/questions which we would like you to respond to and then include as an appendix to your final report can be found at http://www.screening.nhs.uk/criteria