

**British Society for Paediatric**

**Endocrinology & Diabetes**

**RESEARCH and INNOVATION AWARDS 2024**

**APPLICATION FORM**

Each year the BSPED offers a limited number of small project grants. This year, these grants are intended to:

1. Promote and support academic research by its members by providing funding to:

* Obtain preliminary data which will support an external funding application
* Conduct a small project
* Purchase equipment

2. Promote and support surveys of rare diseases

3. Promote and support surveys of clinical innovations

4. Promote and support educational projects

Applications under the remit of 2, 3 or 4 above must have the potential to change practice in paediatric endocrinology and diabetes. This work may benefit patients and families, other health care professionals, schools or other groups. Successful applications are likely to include evidence of input from patients and the public and plans to evaluate the impact of the tool. Proposals that encompass a national survey should clearly demonstrate the clinical question or the problem to be addressed.

This year there will be **two BSPED Research and Innovation Awards granted up to a maximum of £15,000 each**. The total amount for each grant can be allocated to one recipient or split between 2 or more projects.

**Conditions of the Grant**

* Applications will only be considered if they are submitted by an individual who has been a BSPED member for at least one year by the submission deadline date.
* Other scientists and clinicians who are in-training may apply if they hold a minimum of six months' membership or if their research team or clinical supervisor includes a member of at least 1 year standing.
* The BSPED strongly encourages any BSPED member to submit a proposal including nurses, research fellows, early career researchers, specialist trainees, DGH consultants, allied health professionals and Clinical Networks.
* Only applications submitted by a recognised Higher Education Research Institute and/or Medical Institution will be considered.
* Applications from District General Hospitals are strongly encouraged.
* Only one application will be considered by an applicant in each round of grant awarding. This also applies to the applicant’s supervisor.
* Winners of BSPED research awards in the previous two rounds are ineligible to apply. This includes the grant holder and their supervisor.
* The Grants Panel will not accept resubmissions of the same project in the following round of applications.
* Audits will not be considered.
* Incomplete applications will not be considered.
* Applications must include detailed breakdown of the proposed project costs.
* Applications must include an outline of timelines and deliverables.
* The BSPED will require a written report from the award winner demonstrating how the grant benefited the applicant, the home institution and how the funding has enabled advances in endocrinology/science/medicine as a whole. The report (max 1000 words) must be submitted to the BSPED no later than 24 months after receipt of the grant. The report should include details of any publications resulting from the funding and will be published on the BSPED website.
* A 500-word interim update is required, to be submitted to the BSPED, after 1 year as a condition of the award.
* 80% of the award funding will be paid at the time the award is made. The final 20% will be made following receipt of the interim report at one year.
* The BSPED reserves the right to publish details of the successful applicant's project on its website. This is usually the 'lay summary' section of the application.
* The award must be acknowledged in any publication that arises from the funding as: the 'BSPED Research & Innovation Award'. Any publication should also include the following disclaimer: ‘The views expressed are those of the authors and not necessarily those of the BSPED’.
* The award holder or member of their group will be expected to present their work at a special session of the BSPED meeting two years after the award is made.
* It is expected that approvals etc. will be in place to allow the research project to commence immediately and will be completed within 24 months following receipt of the grant. Grant extensions will only be considered by the awards committee in very exceptional circumstances.
* The BSPED will reserve the right to request return of the award if the study has not been commenced within 1 year of receipt of the award.
* The award must only be used for the project which is proposed in the successful application.
* The grant is awarded to the applicant(s) named on the application form and as such, it is not transferrable to other member(s) of the clinical or research team.

**Deadline: Monday 8th July 2024 5pm**

# Outcome:

The successful application/s shall be announced at the BSPED Conference.

# NB: Incomplete applications will not be considered. Please use type.

**Details of the Applicant:**

|  |  |
| --- | --- |
| **Name of applicant**: |  |
| **Name of supervisor:** |  |
| **BSPED Membership number:** |  |
| **Name of Department:** |  |
| **Name of Institution:** |  |
| **Work address:** |  |
| **Email address** (work): |  |
| **Telephone number** (work): |  |
| **Position held** (start and end date): |  |
| **Do you have any other funding relating to this initiative?** (Yes/No): |  |
| **If yes to above, please provide details:** |  |

**Details of the project:**

|  |  |
| --- | --- |
| **Title and outline rationale for initiative** (no more than 500 words): |  |
| **Lay summary of project** (no more than 100 words, shall be posted on BSPED website): |  |
| **Relevant citations or publications in the last 3 years** (applicant, supervisor or research group): |  |
| **All grants received in the past 3 years** (including amount and title of project): |  |
| **Breakdown of costs:** |  |
| **Total costs required:** |  |
| **Outline of proposed timeline and deliverables** (including dates and details of approvals already sought / needed): |  |
| **Does this project require Ethics Approval and Home Office Licence?** (Yes/No):  If yes, please give details and timelines |  |
| **Justification for funding** (max 500 words) using the following headings: | |
| Benefit to applicant: |  |
| Benefit to department/ institution: |  |
| Benefit to endocrinology: |  |
| **Acceptance of and adherence to grant conditions specified above (delete as appropriate):** | |
| Yes / No | |

# Details required from the Head of Department:

|  |  |
| --- | --- |
| Confirmation that this application data is correct and has my approval on behalf of the university/  institution and university/institution acceptance of Society conditions: | |
| **Name of applicant:** |  |
| **Head of Department:** |  |
| **Head of Department signature:** |  |
| Head of Department contact details: | |
| **Name of Department:** |  |
| **Name of Institution:** |  |
| **Work address:** |  |
| **Email address (work):** |  |
| **Telephone number (work):** |  |

# Payment details for successful grants:

|  |  |
| --- | --- |
| Please provide the bank account details of your institution. This will help to fast-track the payment of your award if successful. | |
| **Institutional account name to which payment should be made:** |  |
| **Name of Bank:** |  |
| **Account Number:** |  |
| **Sort Code:** |  |

**Please submit this application to bsped@endocrinology.org and await a confirmatory email reply.**

**Office use only:**

|  |  |  |  |
| --- | --- | --- | --- |
| Date received: | Form complete (yes/no) | Subs paid (year): | Member from (mm/yy): |
|  |  |  |  |
| BSPED Research & Innovation Award |  |  | HOD Yes/No |
|  |  |  |  |