



All Wales Research Delivery Funding

Technical Guidance v3

Guidance for NHS Organisations & Support & Delivery Centre

1. Purpose

The purpose of this guidance is to provide NHS organisations and the Support & Delivery Centre with the technical description and process used for the distribution, adjustment and ongoing monitoring of the **All Wales Research Delivery Funding**.

This guidance is being evaluated in use and therefore updates will be issued as the process is refined. The current version is published on the Health and Care Research Wales website.

2. Background

- 2.1. A new approach to distributing the All Wales Research Delivery Funding was implemented from April 2020, requiring transition from the previous formula based 'activity-based funding' model.
- 2.2. **The principle of the new funding approach is for Research Delivery Funding to be provided based on the in-year resource needs of the research studies that are to be delivered (including those in follow-up), with funding directed to where and when those resources are needed and to where and when those costs are incurred.**
- 2.3. 2020/21 was a transitional year to ensure smooth implementation of the new research delivery funding approach. A priority in 2020/21 was to maintain stability for existing staff in post and to ensure adequate support for studies that were already underway, whilst allowing time to develop and embed the operational systems and processes to support the new approach.
- 2.4. The intention beyond 2020/21 had been to progress to stage two implementation of the new funding approach (to understand if there is a gap between committed costs versus resources needed for the delivery of studies in year). This would then also determine if the Health and Care Research Wales Research Delivery Funding budget is sufficient overall, and, if there was a significant change in resources that are required nationally or locally using the new approach, a longer transition period may be required for some organisations or overall.
- 2.5. However, implementation was delayed due to COVID-19 and the resulting volatility of the established research portfolio locally, meaning resources required were difficult to predict. By March 2021, the increasing recovery of research that had been paused to recruitment due to COVID-19 enabled the implementation of the research-needs based funding to continue. The ongoing uncertainty in the recovery of research and alignment with UK-wide Recovery, Resilience and Growth plans, will be taken into account when assessing prospective need for resources.

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3. Scope of guidance

3.1. Included in the scope of this guidance is Research Delivery Funding that is made available to meet the costs associated with:

- NHS organisation activities that support the set-up and delivery of research studies
- National roles that support the delivery of research, that are hosted by NHS organisations e.g. Wales Specialty Leads
- Health and Care Research Wales Research Delivery Service
- Support & Delivery (S&D) Centre activities that support study set-up and delivery of research studies
- Support for studies undertaken by independent contractors commissioned to provide health or social care (e.g. general practices, dental practices, care homes etc)

3.2. Out of scope of this guidance (as guidance is provided separately on each of these types of funding) is the process for accessing:

- Funding for Excess Treatment Costs
- Funding for the wider S&D Centre activities that do not support study set-up and delivery - those activities that support the wider Health and Care Research Wales infrastructure e.g. the communications service; or are part of a UK infrastructure e.g. Approvals Service
- Funding for research and wider Health and Care Research Wales infrastructure i.e. the research development infrastructure, programmes and grant schemes
- Funding to support the development of research grants and/or to support chief investigators
- Research cost activities for portfolio studies since these should be funded by grant income and, therefore, claimed from the grant holding organisation
- Funding for R&D Directors/R&D Leads or equivalent leadership roles.

4. Definitions

4.1. 'Research Delivery Funding' refers to funding provided by Welsh Government to NHS organisations and the S&D Centre that is made available to cover the NHS support costs known as 'support costs' associated with the set-up and delivery (or to support the set-up and delivery of) research studies.

4.2. 'Delivery' refers to the local and national activities that facilitate and support the set up and delivery of Health and Care Research Wales Portfolio studies (non-commercial and commercial) in health and social care settings in Wales. This includes the study-specific activities as detailed in the research protocol, and the wider support (local and national) that facilitates or supports the study to be set up and delivered. Therefore, delivery activities include workforce planning, early engagement and study feasibility assessment, site selection, study set-up,

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screening, undertaking the study, participant follow-up and ensuring regulatory requirements are maintained throughout e.g. study oversight and monitoring.

4.3. **‘Research Delivery spending plan’ is the request for funding from the all-Wales Research Delivery budget. It is not an allocation or fixed budget, but is the amount of funding agreed for specific posts/activities.**

4.4. ‘Support costs’ are the additional care costs associated with the research, which would end once the research study in question had stopped, even if the care involved continued to be provided.

4.5. ‘Research Development costs’ are those associated with the development of research funding applications which includes time to write (or support the writing of) applications or undertaking preliminary studies to support a future funding application and/or to support chief investigators. Research Delivery Funding can only be used for activities relating to research delivery and cannot be used to cover research study development costs.

5. Appropriate use of funding

5.1 Examples of the appropriate use of the Research Delivery Funding can be found in the following table. The examples provided within the table are not an exhaustive list.

Category	Suitable for Research Delivery Funding	Examples
Core Infrastructure	Yes	Staff costs in departments that are required to provide supporting services for study set-up and delivery (such as pharmacy, radiology, pathology). Staff costs in delivery teams required to set up and deliver portfolio studies Staff costs to support one Wales approaches (such as one site Wales, 1CC, act AcoRD specialists for Wales, act as National Coordinators for Wales, support the contract advice service for Wales)
Support cost activities as defined by the AcoRD guidance	Yes	Staff costs involved in actively supporting recruitment to Health and Care Research Wales Portfolio studies. This includes the cost of staff time for processing a patient

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		record to identify suitable participants, obtaining Informed Consent and any additional tests/assessments where the results are required by a patient's care team to ensure their safety and feed results back to the clinician.
Operational Delivery leadership	Yes	Staff costs for leads within research delivery team Staff costs for leads within support departments
Posts aligned to UK/Wales priorities	Yes	Staff supporting UK/Wales priorities (for example - RRG programme of work, portfolio recovery work, national priority disease areas, once for Wales initiatives)
Research cost activities (as defined by the AcoRD guidance)	No	Once informed consent received, take bloods – results will be used to ensure the patient fits the research study inclusion/ exclusion criteria Staff time for carrying out data analysis for research study Staff time to randomise for research study Investigations/tests relating to efficacy of an intervention/procedure (activity intended to answer the research question) Investigations/tests where results remain anonymous/unlinked to patient identifier or are not reported back to participants/their clinicians. For the above, provision should be made for this in the research grant – cost recovery required. When there are instances that no funding is available from the sponsor for research cost activities, it is up to the NHS organisation to decide whether to proceed with the study for the benefit of their patients and in line with the organisation's overall R&D strategy.

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Non-commercial studies funded by AMRC charitable funders (Research costs part B as defined by the AcoRD guidance)	Yes	Local trial coordination and management, data collection needed to answer the research question, regulatory preparation and compliance, CI/PI time to explain a study to professional colleagues.
Treatment cost activities (as defined by AcoRD)	No	<p>Delivery of intervention that is currently standard of care for those patients randomised to the standard care arm of the study - Normal NHS commissioning budgets (no action is required in terms of any cost recovery as standard care happens anyway).</p> <p>Delivery of intervention that is not part of current standard care. If intended to form part of future standard care, the difference in cost compared to current standard of care is an Excess Treatment Cost (ETC) and can be funded via the centralised ETC budget for Wales, following the guidance and application information on the Health and Care Research Wales website.</p>
Commercial research activities	No	All costs associated with the set-up and delivery of commercial research should be fully cost recovered from the commercial sponsor

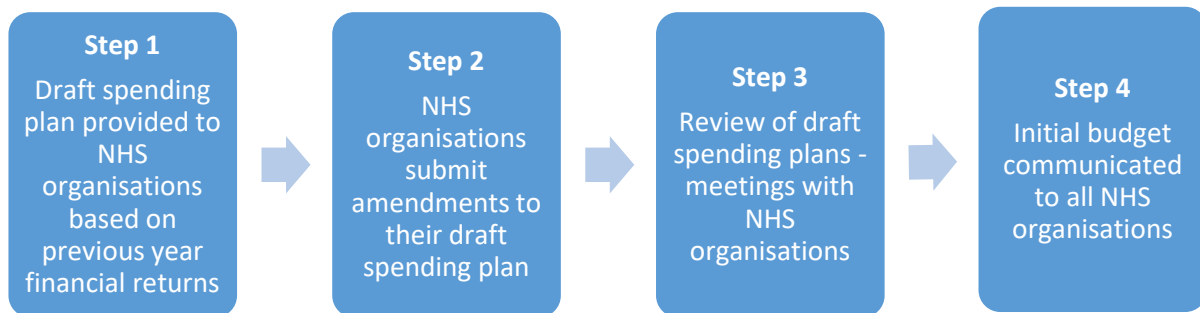
Out of scope/unfunded posts/activities

- 5.2 The following requests will automatically be out of scope of Research Delivery Funding and will not be funded:
- Research development funding
 - Departmental R&D Leads
 - R&D directors and leads
 - Local R&D conference costs
 - Principal Investigator sessional time for medical consultants and Associated Specialists: Protected time for research provided via SPAs and/or patient recruitment in normal clinic time should form part of a consultants' usual clinical sessions
 - Principal Investigator costs for nursing, midwifery, allied health professional (NMAHP) consultants e.g. Consultant Nurse, Consultant Psychologist, posts are not funded unless it is the role is a research role i.e. consultant research nurse. The Agenda for Change national role profiles for NMAHPs include R&D activities as major job requirement to co-ordinate, implement R&D activity, initiate, develop R&D activities, conduct research in specialist area,

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participation in research steering group developing Health Board / Trust wide research

6. Agreeing initial research delivery spending plans



- 6.1. To help facilitate longer term plans at NHS organisation level and to provide oversight of cost pressures in a national context, NHS organisations are requested to submit an initial spending plan for the following financial year based at a point in time of the current financial year (normally at month 6). A detailed overview of the process can be found in Appendix One.
- 6.2. The provisionally agreed spending plans outline the initial funding for the specific posts/expenditure agreed. Any changes to what has been provisionally agreed will require approval to receive ongoing Research Delivery Funding (see Section 10).
- 6.3. The provisionally 'Agreed Research Delivery funding' consists of:
- **Support & Delivery staff:** Costs for unchanged staff
 - Fixed-term posts for which an extension has been justified and agreed
 - New requests, where appropriate, that fulfil the remit of the decision framework (section 10)
 - **Non-pay costs:** met as submitted (or amended following queries) except local R&D conference costs
 - **Clinical Support:** Pharmacy, Pathology and Radiology costs to deliver a service for delivering research studies
 - **Bank:** pre-booked bank/locum cover only
 - **Principal Investigator costs for Dental Consultants** are funded as the contract differs from the medical consultant and Associate Specialist contracts.
 - Factoring in forecasted cost recovery and deferred commercial income to subsidise the all Wales S&D budget
 - **Specialty Leads/other hosted national posts (separate tab):** These are included in the relevant host NHS organisation plan including sessional time and non-pay allowance
 - **ETCs (separate tab):** These are the studies where ETCs have been approved.

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- 6.4 The Research Delivery spending plans set out the NHS Support Cost resource requirement within each NHS Organisation for delivery of the planned research portfolio in a financial year. Funding of Excess Treatment Cost resource is available in addition to this and can be accessed on a study specific application basis. For more information, please refer to the Excess Treatment Cost funding guidance and application forms for Secondary Care and Non-Secondary Care studies, available on the [Health and Care Research Wales website](#).
- 6.5 The Research Delivery Spending Plan templates include a separate tab for recording and forecasting Excess Treatment Cost expenditure, against each study for which it has been awarded. Funding will be administered via Welsh Government variation to contract in Quarter 4, in line with the rate agreed for all recruitment that has taken place and any agreed upfront costs.

Undecided (TBC) requests

- 6.6 The undecided (TBC) posts identified through Step 3, do not form part of the provisional spending plan. These include:
- New post requests that require additional consideration against national strategies (such as primary care related positions)
 - Unidentified local bank/locum costs
- 6.7 These, and other requests for additional Research Delivery Funding will be reviewed on an all-Wales priority basis, considering the available Research Delivery budget.
- 6.8 NHS organisations are able to submit requests for amendments and/or additional new posts to their provisional Spending Plan and will be reviewed using the same process as outlined section 10

7. Future Forecasting – 2023/24

- 7.1. NHS Organisations and the Support and Delivery Centre will be asked to submit a 2023/24 spending plan forecast as part of the month 3 financial status report, due on 18 July 2022. This is to allow for early planning of the 2023/24 Research Delivery budget, in order to inform NHS organisations as soon as possible of whether fixed term posts can be extended beyond 31st March 2023.

8. Funding for support costs in primary, community and social care settings

- 8.1. Funding of support costs incurred on a study by study basis for primary care locations (general practices, community optometry, community pharmacy and general dental practices) has been undertaken through direct reimbursement since 2015/16. As this is already in line with the principles of the new funding

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model, this arrangement will continue. The reimbursement costs will continue to be agreed during study set up and trigger automatic payments. Where appointed directly by the independent contractor, direct reimbursement for the costs of posts or part funding of research delivery posts that have been pre-agreed will continue to be provided.

8.2. Non-study Specific Activity: Funding will be provided for non-study specific research activity to research active practices to cover:

- Expressions of Interest (Eoi) review (see below) and responses to the S&D Centre
- Monthly LPMS data proforma completion (see below) and return to the S&D Centre
- Backfill time for GCP/ research training attendance
- Attendance at Support and Delivery primary care engagement events
- Any other reasonable non-study specific costs related to research involvement in line with national funding guidance (E.g. undertaking work to develop searches to identify eligible patients on behalf of multiple GP practices).

9. Funding for support costs in WAST and Public Health Wales

9.1. Funding of support costs incurred on a study by study basis for WAST and PHW has been undertaken through direct reimbursement since 2015/16. As this is already in line with the principles of the new funding model, this arrangement will continue. The reimbursement costs will continue to be agreed during study set up, monitored and reported via the monthly Research Delivery financial reports and paid via Welsh Government variation to contract at quarter 4 each year.

10. Process – New requests for Research Delivery Funding

10.1. Where new posts (or expenditure) are required to meet additional unplanned needs to support a study, or where new studies arise through the year which were unknown at the start of the year, this can be requested. Requests can be made by completing the New Resource Request Proforma within Appendix 4 and submitted by email to the Research Funding Team within the S&D Centre (research-fundingsupport@wales.nhs.uk). The request will be reviewed by the Director of Support & Delivery and Head of Delivery with support from the Senior Research Funding, Finance and Contracts Manager. The request will be assessed against the Research Delivery Funding Decision Framework (section 10.3) and the remaining available budget on an all Wales basis. Requests will be reviewed within the context of agreed spending plans **and** research portfolio data, and a response provided (either a decision or further clarification required) within 5 working days (most decisions will be made more quickly). Alternatively, requests can be discussed at the monthly finance meetings.

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10.2. On agreement of additional posts being covered by the Research Delivery budget, organisations are required to use the national research delivery job descriptions without amendment (currently Research Nurse Bands 5 and 6, Clinical Research Officer Bands 5 and 6) for new appointments which are to be funded, or part funded by Research Delivery funding. NHS organisations should continue to ensure all existing staff that are to continue to be funded by Research Delivery funding (in part or full) are moved to the All-Wales job descriptions. The national research delivery job descriptions have been reviewed and approved by the All-Wales banding panel. Work is underway to expand the list of national research related job descriptions.

10.3. The prioritisation/ decision-making process is outlined below in the Research Delivery Funding Decision Framework. The Framework is used to assess the context of capacity and capability within an organisation and whether a request meets the required funding criteria as outlined (assuming it also meets the guidance regarding appropriate use of Research Delivery Funding – see Section 5).



Research Delivery Funding Decision Framework



STEP 1: Does the funding request meet at least one of the criteria?

Note: Where limited budget available requests will be prioritised in this order and/or maybe time-limited

1

Is the request core delivery infrastructure (e.g. pharmacy, radiology, pathology, research nurses, coordinators, officers and assistants, posts which support One Wales approaches)?

2

Is the request for an operational delivery leadership role (e.g. research team leads, leadership in support departments, the role includes operational delivery)?

3

Is the request aligned to UK/Wales research strategy/priorities (e.g. initiatives such as managed recovery (RRG policy), UPH and/or national priorities in disease/population specific areas, and/or One Wales approaches such as supporting ICC & study set-up service)?

4

Is the request aligned to NHS organisation strategy/priorities (e.g. to support population needs, areas of strength & expertise)?

5

Is the request linked to an established study portfolio & pipeline?

6

Is it a specific request for new portfolio area with engaged PI available?

STEP 2: What is the context of capacity?

PRIORITY A: No existing support in the location/area for this need AND/OR a gap in the service?

PRIORITY B: Some existing support/infrastructure in the location/area AND expanded need or service change/improvement

STEP 3: What is context of capability?

Track record: recruitment to time/target previously - NHS organisation level; and within specialty in location, by specific principal investigator

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Requests for funding to support pump-priming capacity

- 10.4. Pump-priming capacity is defined as being where costs cannot be expected to be initially justified by the research studies undertaken but where initial investment in capacity is required to enable a pipeline of studies to be expanded or established.
- 10.5. NHS organisations are expected to utilise the capacity building income from commercial activity to support pump-priming capacity in the first instance.
- 10.6. The priority for Research Delivery Funding will be to ensure research studies already set-up in Wales can successfully deliver. However, subject to the total Research Delivery Funding required as a result of initial budget setting not exceeding the total Research Delivery Funding available, funding may also be available to support the pump-priming of research capacity in new or expanding teams.
- 10.7. Request for pump priming are submitted in the same process described above.
- 10.8. Each approved funding request would be time-limited and performance actively managed in order to demonstrate a case for more sustained funding as part of the routine spending plans.

11. Process – monthly financial reports and ongoing adjustments to the Research Delivery spending plan

- 11.1. Each organisation in receipt of Research Delivery funding is required to submit a monthly financial report, the purpose of which is to:
- Report on how Research Delivery Funding has been spent in the previous month (actual expenditure compared to planned)
 - Report on how the NHS organisation/S&D Centre have utilised other sources of funding in the previous month (actual cost recovery / funding from other sources – actual income compared to planned)
 - Identify local changes made to the spending plan that maintain research delivery as forecasted and have been agreed between reports
 - Identify changes to the spending plan that present a risk to research delivery as forecasted and require review and action
 - Reprofile forecasts, highlighting changes to the full year forecast each month.
 - Report expenditure against Excess Treatment Cost funding awarded for relevant Secondary Care studies
- 11.2. The Research Delivery spending plan template consists of five worksheets:
- Summary
 - Delivery (agreed)
 - TBC

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- Hosted posts
- ETCs

- 11.3. More detailed information regarding each worksheet and what is recorded in each column can be found in Appendix 1. Monthly submission dates for the monthly financial reports can be found in Appendix 2.
- 11.4. Monthly meetings will take place between the Director of S&D, Head of Delivery and Senior Research Funding, Finance and Contracts Manager and each NHS organisation/ and S&D Centre, to discuss any reprofiling and help identify any cost/resource pressures.
- 11.5. Where new posts (or expenditure) is no longer required as planned, it cannot be repurposed without discussion – this may result in underspends/slippage to the agreed plan. The NHS organisation/S&D Centre will notify the Research Funding team through the monthly reporting arrangements, and the quarterly schedule of payments to the NHS organisation will be adjusted. This may be due to changes in the study delivery, timescale, target or performance expected, or where changes across a wider team result in efficiencies in skill-mix required. It may also be due to the number of tests or scans undertaken (if this was used to justify need initially) being different from expected or for slippage or changes in requirements for use of non-pay.
- 11.6. NHS Organisations will receive a variation to contract in quarter 4, based on the year-end forecast position provided as part of the month 10 report, submitted by mid-February. The subsequent month 11 and 12 reports are required to be submitted for confirmation of the final year-end position, however no further funding adjustments can be made following submission of the month 10 report and confirmation of the variation to contract received from Welsh Government.
- 11.7. NHS Organisations' R&D Departments are responsible for management of the Research Delivery Spending Plans and monitoring of the financial position throughout the financial year. This includes the variation to contract required at Quarter 4, and each organisations' central finance team must be kept informed of the income amendment due at Quarter 4.

12. Ongoing implementation of the research delivery needs-based approach - review of ongoing delivery needs versus committed spend

- 12.1. The second phase of implementation of the All Wales Research Delivery Funding Model is to determine if the spend/posts that are currently committed locally meets the actual support needed to deliver the studies active during the forthcoming year. This will support both the approval of new requests for funding, but also identify if the total Research Delivery budget is sufficient.

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- 12.2. The Department of Health and Social Care in England are currently carrying out a review of the portfolio for England-led studies with the aim to take firm action on studies that are struggling to deliver and build back a thriving, sustainable and diverse R&D portfolio within the NHS which remains open to new studies. This may result in early closure of some studies open in Wales. Since more than 80% of the studies open in Wales are England-led, the outcome of the portfolio review in England could have a significant impact on the Welsh portfolio and hence the resource requirement across Wales to deliver the portfolio in the future. Therefore, the ongoing implementation of the needs-based approach will need to respond to that context.
- 12.3. The Research Delivery Operational Group (RDOG) play a key role in supporting discussions and informing how and where funding can be used for greatest impact from an all Wales perspective.
- 12.4. Where there is a significant gap between what funding is committed (via the agreed spending plan process) and the funding required (either way) discussion will include identification of a plan to rebalance resources against future needs. Uncertainty relating to COVID-19 and future portfolio status and new studies will be taken into account, in addition to the normal fluctuations in activity. Final assessment of in-year need will continue to be reviewed according to the process already established i.e. reviewed by Welsh Government, Director of Support & Delivery and Head of Research Delivery, supported by the Research Funding Team and queries raised with NHS organisations/S&D Centre.

13. Managing Research Delivery Funding

- 13.1. Consistent with the locally implemented NHS R&D Finance Policy, and the NHS Research and Development Finance Policy Welsh Health Circular, Research Delivery Funding is to be managed via ring-fenced Research Accounts on each NHS organisation's central ledger, subject to the usual accounting rules and NHS financial standing orders.
- 13.2. The Research Delivery Funding plans/returns should be used by NHS organisations/S&D Centre as the local day-to-day financial management tool for recording Research Delivery income and expenditure, allowing for straightforward monthly financial status reports to be submitted to the Research Funding team.
- 13.3. Once work to understand whether committed resource matches required resource based on study delivery needs in year has progressed, it is likely that NHS organisations will agree a plan for in year increases/decreases in expenditure, increasing local autonomy to make decisions aligned to that plan. It may be more efficient/a reduced risk for NHS organisations with small research delivery funding

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needs to operate on a reimbursement model as described in Sections 8 and 9 (already in place for WAST/PHW/Primary Care).

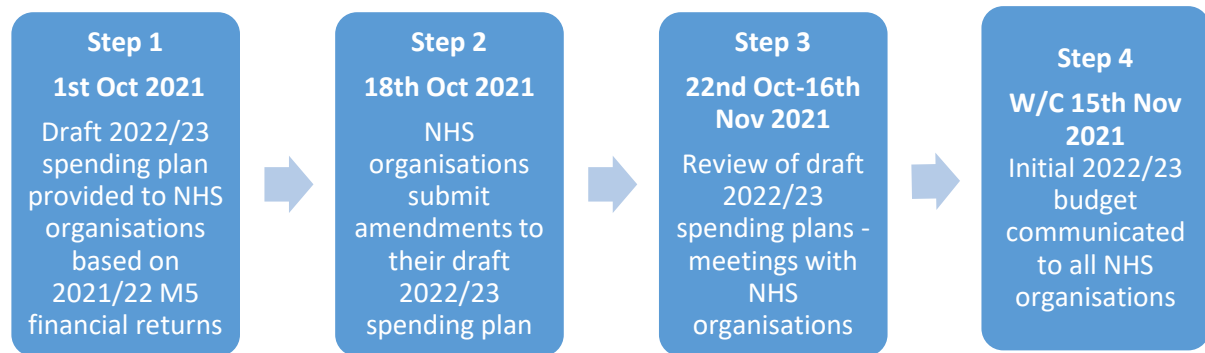
14. Managing commercial trial income and funding from other sources

- 14.1. Most NHS organisations have an annual spending plan that relies on cost recovery from commercial trial income and, to a lesser degree, income from other sources. For some NHS organisations, commercial trial income covers a significant amount of the committed spend.
- 14.2. NHS organisations are encouraged to report all R&D spend on the plan, including for posts that are funded entirely from other sources, so that the context in which the Research Delivery Funding is being utilised is visible. This will aid discussions relating to new requests for Research Delivery Funding.
- 14.3. Staff time involved to set-up and deliver commercial research must be cost recovered by the commercial study income and demonstrated appropriately against that post within the spending plan.
- 14.4. As part of good financial management, all forecasted commercial income needs to be reported and reprofiled appropriately throughout the financial year via the monthly return process to allow the all-Wales Research Delivery spending plan to be adjusted accordingly.
- 14.5. Any reduction or loss of commercial income against the original spending plan agreed must be met by the NHS organisation unless there is prior agreement to increase the funding from the Research Delivery budget.
- 14.6. When the Research Delivery budget has to be used to subsidise the cost of Health and Research Wales staff carrying out commercial research due to the commercial income not being received until the next financial year, organisations must carry the appropriate cost recovery and report the amount on the spending plan for the same financial year.
- 14.7. The all Wales Finance Group will be providing more specific guidance on the management of commercial income which will be incorporated in an updated version of the NHS R&D finance policy.

15. Monitoring and review of this guidance

- 15.1. This guidance is being evaluated in use and as processes are further defined, this guidance will be updated as required.

Appendix One - Provisionally agreed 2022/23 initial research delivery budgets



To help facilitate a longer term plan at NHS organisation level and to provide oversight of cost pressures in a national context, NHS organisations were requested to submit an initial 2022/23 spending plan based at quarter two

Process - **Step 1**: 2022/23 spending plan template provided to NHS organisations (1 October 2021)

A draft 2022/23 spending plan template was created by the Research Funding Team for each NHS organisation, based on the actual expenditure detailed within the 2021/22 month 5 financial returns. Posts/expenditure included in the draft plan provided a building block for the NHS organisations to adjust from in order to determine the initial funding commitment by Welsh Government.

Step 2: Amendments submitted by the NHS organisation (by 18 October 2021)

Organisations were asked to categorise all posts and provide brief justification where appropriate as follows:

- Request to fund fix-term posts beyond 31 March 2022
- New posts/expenditure that were not previously funded in 2021/22
- Direct replacement posts (like for like job description/WTE)
- Unchanged posts
- Known/booked bank staff costs
- Cost recovery expected against specific posts (based on predicted income in 2021/22 from commercial trials or from other sources)
- Carryover of capacity building covered by other funding sources during 2021/22
- Carryover of additional commercial income to support the delivery of studies during 2022/23

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Step 3: Spending plans reviewed (between 22 October – 16 November 2021)

The adjusted 2022/23 spending plan templates submitted by the NHS organisations were reviewed by the Funding Team, Head of Research Delivery and Director of Support and Research

Where required, queries were raised directly with each NHS organisation by the research funding team

The review identified:

- Permanent/committed filled posts – agreed to be funded
- Funding requests for extension of fix-term posts – decisions made based on the Research Delivery Funding Decision Framework and the funding available
- New funding requests - decisions made based on the Research Delivery Funding Decision Framework and the funding available
- Forecasted cost recovery
- Non-pay costs
- Bank staff costs – no yearly block payments to be provided, actuals included by each organisations within monthly returns
- Forecasted 2022/23 commercial income and deferred 2021/22 commercial income

Step 4: Provisional 2022/23 research delivery budget

Provisionally agreed funding is for the specific posts/expenditure agreed. As a result, any changes to what has been provisionally agreed will require approval to receive ongoing Research Delivery Funding (see Section 10).

Appendix Two –Spending Plan Worksheets

Worksheet 1: Summary

This worksheet summarises all of the financial information within the spreadsheet and all of the columns self-populate.

A monthly and quarterly summary has been added to capture the revised forecast expenditure and revisions to the Research Delivery funding. At the beginning of the financial year the monthly breakdown is shown as equal twelfths of the annual total. Prior to submission of the month 2 financial status report, NHS Organisations should amend this breakdown to reflect a more accurate monthly forecast of all costs in each worksheet.

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The annual total of the initially agreed Research Delivery funded costs is shown in cell D27. Any deviations from this plan on a monthly basis throughout the year will be reflected in the monthly totals and annual forecast/expenditure.

Funding will be administered to NHS Organisations by Welsh Government quarterly in arrears, after the final monthly spending plans for each quarter have been signed off, based on the quarterly totals reported in row 27.

When making amendments to the costs reported within each worksheet throughout the year, any resulting variance from the initial Research Delivery budget will be displayed in column R and discussed as part of the monthly meetings with the Director of Support and Delivery, Head of Delivery with support from the Senior Research Funding and Portfolio Manager.

Worksheets 2 and 2a: Delivery (agreed funding) and Delivery (TBC funding)

These worksheets display planned Research Delivery (agreed funding) and Delivery TBC funding expenditure. These worksheets display the information provided back to NHS Organisations' when the initial spending plans were agreed, with the addition of further columns to display the following information against each row of expenditure:

- **Monthly breakdown of expenditure**

For each row of expenditure, the annual total has been divided into equal twelfths for reporting the monthly forecast. If necessary, please amend the monthly breakdown to report a more accurate profile.

- **Forecast full year expenditure**

This column **automatically calculates** the full year amount based on the figures entered in the monthly expenditure/forecast columns. Please do not delete the contents of this column as the formulae will not work.

- **Variance (from initial Spending Plan)**

This column **automatically calculates** the variance of the revised full year forecast, compared to the initial Spending Plan. Please do not delete the contents of this column as the formulae will not work.

Please note that a positive figure **depicts an overspend** and a negative figure **depicts an underspend**. NHS Organisations' should use the comments column to explain variances, see guidance below.

- **Monthly breakdown of Cost Recovery**

NHS Organisations' should enter the full amount (£) of monthly actual/forecast costs recovered. Please provide details of the source and an explanation of any changes throughout the year, using the comments column.

- **Forecast total cost recovery**

This column **automatically calculates** the full year forecast cost recovery based on the figures entered in the monthly actual/forecast cost recovery columns. If the contents of this column are deleted the formulae will not work.

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- **Monthly breakdown of expenditure funded from another source**
NHS Organisations' should enter the full amount (£) of actual or forecast expenditure funded from other sources, for each month.
- **Forecast total expenditure funded from another source**
This column **automatically calculates** the full year amount to be funded from other sources, based on the figures entered in the monthly expenditure/forecast columns. If the contents of this column are deleted, the formulae will not work.
- **NHS Organisation Comments**
Where there is a variance from the original spending plan (over or underspend), **NHS Organisations' should provide comments** to explain the reasons against each relevant line.

Worksheet breakdown for Delivery (agreed funding) and Delivery (TBC funding) tabs

- **Column A: Name:** Post holder's full name.
- **Column B: Support Department:** Support department the resources relate to e.g. pathology, radiology, cardiology, respiratory, ophthalmology, etc.
- **Column C:** Any additional detail regarding the support department the resources relate to.
- **Column D: Post Type/ NHS Support Costs for investigations or procedures (drop down; please indicate):** Drop down menu to identify whether the resource is a Delivery, Management or Administration post, or whether the costs are to cover NHS Support Costs for investigations and procedures associated with non-commercial portfolio studies (e.g. Biochemistry or other lab costs).
- **Column E: Post Title:** The post title or a brief description of the resource
- **Column F: Detailed Description:** Detailed description of the resource, including what activities the post will be undertaking. *Please note that this column will flag cells in green if activities that may require cost recovery are entered.*
- **Column G: Managing Specialty (Select all that apply):** Drop down menu to select the managing specialty of the portfolio that each member of staff is working within. *If required, more than one can be selected by re-clicking on the drop down button and selecting additional specialties.*
- **Column H: Managing Specialty Comments:** Optional free text field for providing supporting information regarding the managing specialty selected in the previous column. This must be filled in if 'Other' has been selected as the Managing Specialty.
- **Column I: 'Is the post holder undertaking any of the following activities as a significant part of their role (over 10%)?: Data collection, CRF completion, commercial study activities, screening to check eligibility criteria, analysis or reporting?'** Yes/ No selected from the drop-down menu. This is intended to flag that cost recovery may be required (particularly if no detailed description is provided in Column F)
- **Column J: Band:** if the resources relate to a specific post, the banding of this post can be selected from the drop down menu, using the NHS Agenda for Change Banding. If a banding from a different pay scale applies, please select 'other' and specify this information in the comments or detailed description columns

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- **Column K: WTE (if applicable):** if the resources relate to a specific post, the Whole Time Equivalent is entered in this column.
Please note that WTE refers to the recurring weekly hours worked by a member of staff, so should not be used for one off payments (these can be included, but no WTE is required – the comments column can be used to confirm that no WTE is applicable).
- **Column L: Gross Spending Plan:** The forecasted cost of each resource, between 01 April 2022 and 31 March 2023.
- **Column M: Equivalent Expenditure using 2017/18 Payscale (**COMPLETED FOR PAY COSTS ONLY**):** current year pay costs that would be incurred if staff continued to progress on the old Agenda for Change Payscale (2017/18)
- **Column N: Cost of Uplift (to year 3 of NHS Pay Award):** Auto populates the cost of the uplift, calculating the difference between costs entered in columns L and M.
- **Column O: Planned cost recovery:** The forecasted amount that will be recovered against the post/ cost listed.
- **Column P: Net Spending Plan:** Auto populates the net expenditure to be funded by Research Delivery funding, deducting cost recovery and pay uplift costs, if applicable.
- **Column Q: If funded from another source, planned expenditure:** Costs that will be funded from sources other than Research Delivery Funding.
- **Column R: If funded from another source, enter source of funding:** The funding source or details of where the funding will come from, e.g. commercial research income; charitable funds, etc (free text)
- **Column S: NHS Organisation Comments:** Information that will provide more detail against each entry as required.
- **Column T: S&DC Comments:** Comments/Queries that were provided by the S&D Centre R&D Funding Team to prompt NHS Organisations to include/amend costs in the draft spending plan.

Appendix Three - Monthly Financial Status Report submission dates 2022/23

Reporting Period	Submission Deadline
April 2022	N/A
May 2022	20 June 2022
June 2022	18 July 2022
July 2022	16 August 2022
August 2022	16 September 2022
September 2022	18 October 2022
October 2022	16 November 2022

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November 2022	16 December 2022
December 2022	18 January 2023
January 2023	16 February 2023
February 2023	16 March 2023
March 2023	20 April 2023

Appendix Four – New Resource Request Proforma

Research Delivery Funding Request Proforma			
Post details/request	Organisation	Date submitted	Net funding requested
Reviewers			

Category of support and delivery	Does support and delivery category apply?	Comments: provide any relevant information to support the request e.g portfolio and activity information, workforce planning, planned cost recovery, support from NHS organisation	Reviewer Comments
Core delivery infrastructure e.g. service support departments, delivery posts, posts to support one Wales approaches.			
Operational delivery leadership role e.g. in support department or delivery team, includes research delivery			
Supports UK/Wales research strategy/priorities e.g managed recovery, Urgent Public Health (UPH), One Wales approaches			
Supports organisational strategy/priorities e.g. population needs/areas of strength/expertise			

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Supports established study portfolio and pipeline			
Specific request for new portfolio area with engaged PI available			

Assessing impact

Please indicate what could be used to review the impact of this request	Please indicate when the first impact review should take place and why	Further comments

Outcome of funding application review	Date of review	Date confirmed to NHS organisation

Support Available

The Research Funding Team are available to support organisations to answer queries, and can also help make changes to the spending plan and/or monthly financial status reports if required:

- Helen Hodgson, Senior Research Funding, Finance and Contracts Manager
- Michael Holloway, Research Funding Manager
- Research-FundingSupport@wales.nhs.uk