Screening Research Innovation and Development Advisory Committee (RIDAC)

Application Form for **research involving the National Screening Programmes**

**Use this form if you are making a new application to the RIDAC**

Please ensure you submit all the relevant documents that you want RIDAC to consider when assessing your application.

**Application forms must be submitted 6 weeks prior to the RIDAC meeting**

**Applications received less than 6 weeks prior to the RIDAC meeting will not be included in the meeting.**

**Incomplete application forms will not be processed.**

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| **Date of submission:** |
| 1. **Title of project:**   Proposed start date: Finish date:  Project duration (months): |
| 1. **Name of Applicant(s) and Affiliation**   **Principal Applicant**:  Name.  Institution:  **Co-applicant(s):**  Name.  Institution.  **Collaborators:**  Name.  Institution. |
| 1. **Description of Project:**   (Please use plain English suitable for a lay audience. Approved studies will be published on the GOV.UK website)  Is your project  Research  Audit  Service Evaluation:  Background:  Research/audit questions the project is designed to answer:  Aims and Objectives.  Methods/Protocols:  Please provide the protocol submitted to the ethical committee/funding body if available, (please include the Logical data flow diagram). |
| * 1. **Prior engagement with NHSE RIDAC**   Do you have any contacts in NHSE RIDAC with whom you have discussed the value or feasibility of this project? If so, provide details. |
| 1. **Support Requested**    1. **Data or screening programme**   Screening data release  Biological samples (e.g., residual bloodspots)  Physiological data such as waveforms X ray images  Permission to approach screening programmes for data  Permission to approach patients identified through the screening programmethrough the screening programme for the purposes of research activity.  If yes to any of the above, please provide a specification of the data required.  Describe the samples required and/or the number of patients involved as appropriate.  If your project involves the use of personally identifiable information on screened patients:  Please provide details of why, what information will be sought, and how it will be used.  If available, please provide rationale submitted to the Ethics Committee or funding body to answer the questions.   * 1. **Endorsement or collaboration**   Endorsement of research topic e.g. before being submitted elsewhere.  Collaborative project (where applicable provide details) |
| 1. **Expected Benefits or Impact.**   Which screening programmewill the proposed research involve?  Please insert the name and role of any contacts already made within that programme.  Abdominal Aortic aneurysm (AAA)  Bowel cancer screening (BCSP)  Breast cancer screening (BCSP)  Cervical cancer screening (CSP)  Diabetic eye screening (DESP)  Antenatal and Newborn screening (ANNB)  Fetal anomaly screening  Infectious diseases in pregnancy screening  Newborn and infant physical examination screening  National newborn blood spot screening  Newborn hearing screening  Sickle cell and thalassaemia screening  How will your research involve the screening programme and what would the anticipated impact be?  What are the anticipated public health benefits of your project? |
| 1. **Funding and Sponsorship.**   Funding for the retrieval of samples and data must be included.  Has funding been: Obtained  Being sought  **Awarding Body**  Name:  Address:  References assigned by awarding body  (If you have multiple references, please separate them with a comma) |
| 1. **Ethics Approval**   Has ethics approval been  Obtained  Being sought  Not applied for    REC committee name:  REC committee reference(s):  Is consent required and if so, how is it being sought.  Please provide current versions of consent forms and information sheets where appropriate/available.  Are you applying for section 251 approval?  Yes  No |
| 1. **Has the project been peer reviewed?**   If yes, provide references. |
| 1. **Has any public engagement or consultation been carried out in relation to this study?**   if yes, please provide details. |
| 1. **Address for correspondence.**   Name:  Email:  Telephone: |
| 1. **Declaration**   I to the best to my knowledge confirms that the information provided is correct.  **Signature Date**  **Print Name** |
| 1. **Submitting your application:**   **Applications received less than 6 weeks prior to the RIDAC meeting will not be included in the meeting.**  Prior to submitting your application, the Research Innovation and Development Advisory Committee (RIDAC) encourages you to discuss your application with our RIDAC team, to ensure you fully understand the requirements specific to your project.  Familiarise yourself with the Approval Standards. NHSE RIDAC will be working in line with the approval standards from UK Health Security Agency (UKHSA), these standards can be found using this link: <https://www.gov.uk/government/publications/accessing-ukhsa-protected-data/approval-standards>  This is an opportunity for you to engage with the RIDAC team prior to formal application submission to identify, understand and seek to resolve any issues associated with the proposed project as early as possible, so you can set up your project for success.  If you would like to speak to a member of the RIDAC team prior to submitting your application, please let us know and we will be happy to book in an appointment to discuss your application.  Your application will not be complete unless all the relevant supporting evidence are submitted together.  Please complete all relevant fields in the application form and provide all required supporting evidence.  Valid applications must be submitted electronically to [england.screening.research@nhs.net](mailto:england.screening.research@nhs.net) |
| **Supporting Documents:**  CV of main applicant  Copies of approvals obtained e.g. Ethics Committee/funding organisation.  Peer reviews  Patient consent forms where applicable  Data specification  Logical data flow diagram |

**Appendix 1**

**Research Application Flowchart**

**It is recommended that contact is made for advice on the feasibility of the request as early as possible and preferably before funding or ethics approvals are sought**

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Contact via generic email: [england.screening.research@nhs.net](mailto:england.screening.research@nhs.net)

RIDAC team triage your request via phone call or to email to discuss your query

Explain to RIDAC your reason for making contact. Tell us which Programme/data request

**Initial Contact:**

**Stage 1: -----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------Pre- submission to RIDAC meeting**

Email the RIDAC team with your queries regarding the application form.

**RIDAC team does not help applicants with writing protocol**

**\*RIDAC Team is not responsible for approving internal data release**

RIDAC team send you the application form to complete and link to the standards.

You will be assigned a RIDAC reference number

RIDAC team will wait for applicant to submit form 6 weeks prior to the RIDAC meeting

RIDAC team will review and assess application form, continuously offering advice and guidance (via email or meeting)

**Stage 2:-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------Submission to RIDAC (including Amendments)**

Applications will receive a response within 4 weeks of the RIDAC meeting

Applications will receive Favourable or unfavourable outcome from the RIDAC, this may include action orientated conditions and next steps

Applications will be reviewed

at the RIDAC meetings which

are held quarterly

If you receive an unfavourable outcome, you will need to resubmit to the RIDAC team for review and assessment

**Stage 3:---------------------------------------------------------------------------------------------------------------------------------------------------------------------------- Submission to the RIDAC team - Full application submission for data release after receiving a Favourable outcome with all conditions met**

RIDAC team will offer ongoing advice and guidance during the application process. by emailing [england.screening.research@nhs.net](mailto:england.screening.research@nhs.net)

Contact letter sent to applicant via [england.screening.research@nhs.net](mailto:england.screening.research@nhs.net)

Application pack is sent to applicant via [england.screening.research@nhs.net](mailto:england.screening.research@nhs.net)

**Time required to complete**

**the process is dependent on size and**

**complexity of the project.**

**Data release in exceptional circumstances:**

**Patient Identifiable Data,**

**Data releases for AI-based research, Data leaving the UK,**

**Data release requests for over 12 months**

**The request for data in these circumstances, will take longer in the data release process. Applicants must allow sufficient time if data is requested for any of the above circumstances**

RIDAC team will draw up Data Sharing agreement to request signatures and liaise with the Data manager to negotiate release date

RIDAC team will review and assess applications and notify applicant of the outcome or any further actions

Applicant to confirm receipt of data

**Stage 4:---------------------------------------------------------------------------------------------------------------------------------------------------------------------------- Project Completion**

**Applicants are expected to submit a written annual progress report to RIDAC and Data deletion certificate (if appropriate)**

**Notes:**

**Internal Data Release:**

**The RIDAC Team is not responsible for approving internal data release (i.e. screening or outcome data released within NHSE for analysis by NHSE)**

**Appendix 2**

**HRA**

[HRA tool](https://gbr01.safelinks.protection.outlook.com/?url=https%3A%2F%2Fwww.hra-decisiontools.org.uk%2Fresearch%2F&data=05%7C01%7Ccarlene.parchment%40nhs.net%7Cf919accb32e249cf3ca008dae354d6a5%7C37c354b285b047f5b22207b48d774ee3%7C0%7C0%7C638072250751941863%7CUnknown%7CTWFpbGZsb3d8eyJWIjoiMC4wLjAwMDAiLCJQIjoiV2luMzIiLCJBTiI6Ik1haWwiLCJXVCI6Mn0%3D%7C3000%7C%7C%7C&sdata=clBdBn%2Ff9ZTuBk2jQtk0J7dML1qurjU1XdoLzW9fx8E%3D&reserved=0)

[Is my study research? (hra-decisiontools.org.uk)](https://www.hra-decisiontools.org.uk/research/redirect.html)

[Clinical Audit](https://www.hra-decisiontools.org.uk/research/glossary.html#C) and [Service Evaluation or Service Improvement / Development](https://www.hra-decisiontools.org.uk/research/glossary.html#S)

* examine how standard care is delivered or measure improvements in standard care, and by definition all decisions around what treatment regime, care or services to follow and administer are made jointly by the care professional and patient/service user.

**Clinical Audit**

is a quality improvement process that seeks to improve patient care and outcomes through systematic review of care against explicit criteria and the implementation of change.

Aspects of the structure, processes, and outcomes of care are selected and systematically evaluated against explicit criteria. Where indicated, changes are implemented at an individual, team, or service level and further monitoring is used to confirm improvement in healthcare delivery.

**Service evaluation**

is designed and conducted solely to define or judge current care and should answer the question: "What standard does this service achieve?"

It should measure current service without reference to a standard and involve an intervention in use only. (The choice of treatment is that of the clinician and patient according to guidance, professional standards and/or patient preference and this should happen before service evaluation). There should be no randomisation.

Service evaluation usually involves analysis of existing data but may include administration of interview or questionnaire.

Service development or improvement seeks to find out what improvement can be achieved within that service only.

It may involve a new intervention or service, or one that is new to that context, but there should be no randomisation and the choice of treatment, care or services is that of the care professional and patient/service user according to guidance, professional standards and/or patient/ service user preference.

Service evaluation / improvement / development work does not require NHS REC review.

**Additional information**

[Checklist - Standards, codes, and approvals - Health Research Authority (hra.nhs.uk)](https://www.hra.nhs.uk/planning-and-improving-research/research-planning/how-were-supporting-data-driven-technology/overview-legal-requirements-using-health-and-care-data-development-and-deployment-data-driven-technologies/4-checklist-standards-codes-and-approvals/)

Processing [personal data](https://www.hra.nhs.uk/planning-and-improving-research/research-planning/how-were-supporting-data-driven-technology/overview-legal-requirements-using-health-and-care-data-development-and-deployment-data-driven-technologies/5-definitions-alphabetical/#Personaldata) for research purposes

[UK Policy Framework for Health and Social Care Research](https://www.hra.nhs.uk/planning-and-improving-research/policies-standards-legislation/uk-policy-framework-health-social-care-research/)

[data protection legislation](https://www.hra.nhs.uk/planning-and-improving-research/research-planning/how-were-supporting-data-driven-technology/overview-legal-requirements-using-health-and-care-data-development-and-deployment-data-driven-technologies/5-definitions-alphabetical/#Dataprotection)

[National Health Service Act 2006 (legislation.gov.uk)](https://www.legislation.gov.uk/ukpga/2006/41/section/251) – 251, Control of patient information

[Confidentiality Advisory Group approvals - Health Research Authority (hra.nhs.uk)](https://www.hra.nhs.uk/approvals-amendments/what-approvals-do-i-need/confidentiality-advisory-group/)