

Postdoctoral Fellowships Guidance for Applicants

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Thank you for considering the Stroke Association for a Fellowship. This guide will help to support you in completing our online Stroke Association Postdoctoral Fellowship application form. Please also read the accompanying Conditions of Award.

If you have any questions, please contact us at research@stroke.org.uk. We will respond as soon as possible.

1. Purpose and remit of the award

The Stroke Association is committed to building capacity in stroke research to accelerate progress in prevention, treatment, recovery and long-term outcomes for people affected by stroke. Our Postdoctoral Fellowship scheme aims to develop the next generation of research leaders by supporting independent stroke research that advances knowledge, is informed by lived experience, and has the potential to improve the delivery of stroke care.

What the award offers:

- Funding in your own name to begin establishing your independence as a researcher.
- The opportunity to lead your own project, supported by experienced supervisors, while developing the skills needed for future funding applications and leadership roles.
- Training and career development, tailored to your research plans and long-term ambitions.

The Stroke Association does not fund basic research that has no clear trajectory towards improving the health and wellbeing of people affected by stroke. All proposals must outline a credible pathway to impact.

Postdoctoral Fellowship (PDF)

This Fellowship:

- Is for researchers who have an interest in stroke research and do not have a clinical background or do not wish to undertake clinical activity during the Fellowship.
- Supports innovative research across the stroke care pathway, aligned with our strategic priorities.
- Focuses on building multidisciplinary research capacity and leadership.

Clinical-Academic Postdoctoral Fellowship (CPDF)

This Fellowship:

- Offers the opportunity for clinicians to combine research with clinical practice.
- Aims to embed research within stroke care, bridging the gap between evidence and practice.
- Supports future clinical-academic leaders who will drive improvements in patient outcomes and service delivery.

We are committed to creating clinical career pathways in stroke research and welcome applications from any clinical professional working in stroke care.

2. Eligibility

Applicants must meet the following criteria for both Postdoctoral (PDF) and Clinical-Academic Postdoctoral (CPDF) Fellowships:

Host Institution:

- Your proposed project must be based at a University, NHS Trust, Statutory Social Care Organisation, or Research Institution within Great Britain or Northern Ireland.

Academic Requirements:

- You must have submitted your PhD thesis before the application deadline.
- Should you be successful after interview, you will need to have been awarded your PhD before beginning the Postdoctoral Fellowship.
- Postdoctoral Fellowships are open to those with up to six years of active research experience post-PhD award (excluding career breaks and other periods of leave such as sickness and maternity).
- You won't be eligible to apply to this scheme if you obtained your PhD and have undertaken more than six years of active research post-PhD. You may wish to consider the Stroke Association Lectureship scheme instead.

Supervision and Mentorship:

- Fellows must have one lead research supervisor with overall responsibility for the training and the research project. Additional supervisors are recommended.
- Applicants should include a named mentor.
- Clinical-Academic Postdoctoral fellows must also have a clinical supervisor.

Research Design Support:

- Applicants should detail any involvement of the [Research Support Service \(RSS\)](#) or Clinical Trials Unit (CTU), where appropriate, in developing the research proposal.

Ethical Approval:

- You will need to obtain ethical approval, where applicable, before any research starts.

Clinical Trials:

Our Fellowship awards are designed to provide the opportunity for the fellow to develop their career in stroke research as well as conduct a research study. Given the split between training and development and research costs within the budget envelope, we anticipate that project proposals featuring clinical trials will:

- Be a feasibility/pilot clinical study where studies are expected to be recruiting in small numbers.
- Or contain methodological development work or supplementary analysis as bolt-on activity to an established or proposed trial, funded by other means.

If your proposal features a fully powered trial, delivered in collaboration with a Clinical Trials Unit (CTU), then you will need to justify what appropriate funds are needed to deliver the study and how training and development of the fellow will be achieved.

International Applicants:

- Your proposed project must be hosted by an eligible institution within the UK (e.g. a University, NHS Trust, Statutory Social Care Organisation, or Research Institution).
- You must have formal support from your Host Institution for the duration of the Fellowship.

Please note that the Stroke Association will not cover costs related to visa applications or the Immigration Health Surcharge.

Clinical-Academic Postdoctoral Fellowship (CPDF)

Applicants:

- You must be a graduate professional, holding registration with the relevant regulatory body.
- You will hold a contract of employment with an NHS trust or Statutory Social Care Organisation through which your clinical activity is paid.
- You need to have a clinical supervisor in addition to your research supervisor(s).

Alignment with JLA Priorities

We expect all research proposals to align with the priorities for stroke research, as set by the [2021 James Lind Alliance Priority Setting Partnership for Stroke](#).

Applications in childhood stroke should fall under the priorities of the [Childhood Neurological Disabilities PSP Top 10](#). Any applications addressing one or more of these priorities must have a clear link to stroke prevention, treatment or care.

If you are unsure about your eligibility, please contact the Research Team (research@stroke.org.uk) for guidance.

3. Scope of funding

For both Postdoctoral (PDF) and Clinical-Academic Postdoctoral Fellowships (CPDF):

- The maximum funding amount that you can apply for is £350,000 over a period of three years (full-time) or up to five years (part-time)
- Fellowships may be taken up on a part-time, pro-rata basis but the minimum working hours would be equivalent to 0.6 FTE.
- You cannot apply for the full amount if you want to work part time over a shorter period (e.g. three years). In these cases, we will reduce the award value accordingly.

For Clinical-Academic Postdoctoral Fellowships (CPDF) only:

- The CPDF will fund your research activity, including your time spent on research activity, and research costs.
- The research component of the CPDF must be undertaken at a minimum of 0.6 FTE.
- The length of the CPDF should reflect the split between research and clinical activity, and with the research component equating to three years full-time (e.g. 0.6 FTE over five years).
- Clinical activity is expected to be funded through your NHS or Statutory Social Care Organisation contract of employment.

4. Research involving animals

Projects involving the use of laboratory animals are eligible. Please see the [Stroke Association's Position Statement on Research Involving Animals](#).

If you are planning to include animal research in your application, it is mandatory to:

- Discuss your proposed project with the Stroke Association Research Team in advance of completion of your application form.
- Complete all the questions in the Research Involving Animals section of the online application form.

Where animal work is sub-contracted, these questions must be completed by the organisation conducting the animal studies.

Please note:

- We may need to refer your application to the National Centre for Replacement, Refinement and Reduction of Animals in Research (NC3Rs) for review.
- We will also ask peer reviewers, who will assess your application, if there is appropriate justification for the use and number of animals.

More information and guidance on the responsible and ethical use of animals in research is available from the [National Centre for Replacement, Refinement and Reduction of Animals in Research \(NC3R's\)](#), including an online [experimental design assistant](#) to guide researchers through the design of animal experiments. Applicants should also follow the [ARRIVE](#) guidelines to ensure comprehensive, transparent, and reproducible reporting of animal studies.

5. Guidance for completing the application form

Plain English Summary (Max 450 words):

The Plain English Summary is a vital part of your application. It will be read by people with lived experience of stroke, as well as reviewers who may not have specialist knowledge of your research area. This section should clearly explain your research in a way that is easy to understand, free from jargon, and meaningful to a non-expert audience.

- **Background and context:** briefly and clearly explain the context of your research, the area(s) that your proposal seeks to address and the benefits for people affected by stroke.

- **Aims and outcome:** briefly explain what your research aims to achieve and what outcomes you expect.
- **Project plan:** briefly explain your chosen design and methods.
- **The impact and potential benefit:** briefly explain the measures/patient outcomes you will use and how these have been or will be selected.

You may find the following resources useful when preparing your summary:

- [NIHR Plain English Summaries](#) – guidance and examples of clear research summaries.
- [Plain English Campaign](#) – tips on avoiding jargon and writing clearly.
- [Hemingway Editor](#) – a free tool that helps simplify complex sentences and improve readability.

Scientific Abstract (max 250 words):

The scientific abstract should provide a clear and concise summary of your proposed research written for an expert scientific audience. Your abstract should briefly cover the background, aims, methods, and expected outcomes of the project. You may also include statistical predictions where appropriate (e.g. effect sizes, recruitment estimates, or anticipated variance).

Proposed Research Project

The proposed research project statement on page 5 of the application form should not exceed 2,250 words. References should be provided as a separate PDF, limited to a maximum of one single sided A4 page, using Arial size 12 font and formatted in Harvard style. Additionally, a Gantt chart or project timeline should be included as a separate file upload.

What to include:

Your proposal must address the following elements:

1. Hypotheses, aims and objectives (Max 250 words):
 - Clearly state your research question(s), hypotheses, and specific objectives.
 - Explain how these address unmet needs or advance understanding in stroke research.
2. Background (Max 1,000 words):
 - Outline the context of your research, including the current state of knowledge, gaps in evidence, and why this project is important.
 - Demonstrate alignment with strategic priorities, showing how your proposed work supports the [Stroke Association's Research Strategy](#) and addresses priorities identified through the [James Lind Alliance Stroke Priority Setting Partnership](#).
3. Detailed research plan (Max 1,000 words):

Describe your methodology, including study design, data collection, and work packages. If recruiting participants, include:

- Sample size calculation
- Recruitment strategy
- Details of the site(s) where the research will occur.
- Statistical expertise (which may be costed).

Additional Project Details

Impact & Dissemination Plans

The impact and dissemination section should explain how your research will make a meaningful difference for people affected by stroke and how you plan to share your findings. Your responses must be written in plain, jargon-free language so they can be understood by reviewers without scientific expertise and reviewers with lived experience of stroke. Avoid technical terms wherever possible and spell out or explain any acronyms you use.

Future Impact of Your Research (Max 450 words)

Explain how your project's findings could contribute to improvements in stroke care, policy, services, or understanding. This might include:

- The impact your study is expected to have during the Fellowship and beyond.
- The benefits for people affected by stroke.
- The steps and mechanisms required to move your findings towards real-world use.
- Any follow-on studies or evidence needed before practice can change.
- Likely timescales for impact.
- How this Fellowship will support your development as a future leader in stroke research.

Dissemination Plans

Sharing Results with Scientific and Clinical Audience (Max 300 words). Explain how you intend to disseminate your findings to scientific and clinical audiences. This might include:

- Peer-reviewed publications.
- Presentations at national or international conferences.
- Clinical, academic, or professional networks.

- Engagement with stroke research collaboratives or specialist groups.

Sharing Progress and Findings with People Affected by Stroke (Max 300 words).
Explain how these approaches will ensure the people who may benefit from your research can understand and engage with it. This could include:

- Plain-English summaries hosted on relevant platforms.
- Updates or blogs through the Stroke Association or partner organisations.
- Public engagement events, webinars, or community talks.
- Co-produced materials developed with involvement contributors.
- Visual or accessible formats tailored for non-scientific audiences.

Intellectual Property (Max 500 words)

If applicable:

- Describe how Intellectual Property (IP) will be managed and any partnerships with digital enterprises. Projects involving data or digital technology must adhere to the [Department of Health & Social Care Code of Conduct for data-driven health and care technology](#)

This could include:

- Whether the proposal is likely to produce new IP.
- How the new IP will be managed.
- Whether there is existing IP associated with the proposal.

6. Proposed training and supervision programme

Training and Development

An important part of this award is that fellows are supported to complete a training and development programme. This should include research-specific training required for you to progress in your career and deliver your project successfully.

Career development activities should support your progression as a future leader in stroke research. In addition to your research objectives, you should outline your career development objectives. We want to fund individuals who are keen to support capacity-building in stroke research in addition to developing their own career. You may therefore wish to consider incorporating leadership training and activities that strengthen both you as an individual and the wider stroke research community, appropriate to your career stage.

The Clinical-Academic Postdoctoral fellows' (CPDF) training plan must also include objectives aimed at strengthening links between clinical practice and research, supporting workforce development and evidence-based practice. This may include activities that promote integration of research into clinical settings to promote evidence-based service improvement.

[The Vitae Researcher Development Framework - Vitae](#) and [Research capabilities framework](#) offer useful guidance on planning development activities. However, it is not mandatory to use this exclusively and components should only be chosen where relevant to your career pathway.

Supervision and Support

In your application, you will need to provide details of supervision arrangements. For the CPDF, research and clinical supervisors must commit joint, cohesive support, work collaboratively and flexibly for you, agreeing to communicate and to help you balance research and clinical commitment. It is essential that collaboration between the clinical and research supervisors is effective in providing joint support.

7. Patient and Public Involvement (PPI)

We expect you will have involved people affected by stroke in the planning and development stages of your funding application and will continue to do so should your application be successful. Your proposal should include a plan for patient and public involvement (PPI) with as much detail as possible so that the reviewers can accurately score your application.

PPI is where research is carried out 'with' or 'by' members of the public such as patients, people with lived experience, carers or advocates - rather than 'to', 'about' or 'for' them. These individuals work in partnership with researchers, shaping what research takes place, how it is carried out, and how the results are shared and applied in practice. You can find advice and support in the [NIHR Guide to Public Involvement in Funding Applications](#). We encourage applicants to consider the [UK Standards for Involvement](#).

PPI is important and possible in all research, from laboratories to communities, and research into health and social care. To support applicants carrying out lab-based research, we encourage the use of [Parkinson's UK Patient and Public Involvement in Lab-Based Research Toolkit](#), which provides practical guidance and case studies tailored to laboratory research.

PPI is an essential part of research and has been shown to improve its quality, impact, and outcome for patients. It is important to people affected by stroke as well as funders and Research Ethics Committees. Research that includes people with lived

experience is more relevant, acceptable, and better communicated. Excellent involvement is inclusive, values all contributions, and ensures people have a meaningful influence.

PPI is not the same as:

- Engagement: by engagement, we mean where research and people connect, breaking down barriers and sharing information, for example, through open days or sharing a blog on social media.
- Participation: where people take part in a study as participants, for example, completing a survey or being part of a clinical trial.

Plans for involvement should be meaningful and explain the anticipated impact on your work and research. Planning should be fully resourced and costed. There is no defined maximum budget for involvement provided there is clear justification. We would expect costs to be requested in all applications, and all costs must still fit within the overall budget for the award.

We have developed an Involvement Toolkit to support planning and delivery of your involvement work. You can access it [here](#). You can also request advice for involvement by contacting us at researchinvolvement@stroke.org.uk. Requests to involve people affected by stroke through our networks may be possible but are subject to demand and need at least six weeks' notice prior to the application deadline. You can find out more about how we can help you to involve people affected by stroke in your research [here](#).

Equality, Diversity and Inclusion (Max 500 words)

Proposals must demonstrate careful consideration of how equality, diversity and inclusion (EDI) principles will be embedded throughout the research. Please consider the following:

- Describe the practical steps you will take to ensure your research is inclusive.
- Describe the data or evidence you will collect to assess and demonstrate the success of your work.
- Describe any EDI expertise within your proposed team and/or steering/advisory group.
- Describe how sex and gender characteristics have been considered in the design of your proposed research. You may find the [MESSAGE project toolkit](#) helpful.

In responding to this section, we encourage you to go beyond organisational policies and instead explain how EDI considerations will be embedded within the proposed research and approach. You may include relevant and justified EDI-

related costs within the budget. Where appropriate, this may include EDI training. If this is the case, please describe and clearly explain this in the proposed programme of training for research and development section of the application form.

8. Budget submission and justification

You must provide a complete and accurate budget within the main budget table of the application form, detailing all funding that you are requesting from the Stroke Association.

We fund direct research costs, that are specifically incurred because of the proposed research. We do not pay institutional overheads or salary costs of tenured academic staff for our Postdoctoral Fellowship awards. All costs must be fully justified, clearly linked to the research activities, and represent value for money.

- Costs should be proportionate, justified, and represent excellent value for money.
- Provide detailed breakdown of all items, costed individually over the duration of the award.
- Costings should be calculated using the institution's standard processes but must adhere to Stroke Association eligibility rules.
- Please account for inflation in the costings in the application form (including salary).
- Please ensure your calculations are correct before submission, as the award amount will reflect the figure requested and cannot be increased after the award is offered and accepted.
- If your project benefits from additional financial support from other sources, clearly disclose the nature, amount and duration of this support in the justification text box beneath the budget table.
- We reserve the right to query, adjust, or decline costs that do not meet this guidance.

The following types of costs are eligible. Full details can be found in the research costs guidance in appendix 1.

- **Staff costs**
 - Salary of the fellow: Basic salary plus employer oncosts (e.g. National Insurance and pension) in line with the host institution's policy.
 - Salary of staff employed on fixed term contracts to work specifically on the project.
 - Specialist service staff proportionate to time commitment.

- **Running research costs including**
 - NHS-based clinical research costs in line with [AcoRD guidance](#).
 - Imaging costs
 - Consumables
 - Laboratory materials
- **Equipment**
 - Purchase and maintenance
 - Facility access charges
- **Animal research costs**
- **Travel and Subsistence**
- **Training and Development**
- **Dissemination costs:** fellows are expected to attend the UK Stroke Forum every year.
- **Patient and Public Involvement (PPI):** you should use [NIHR payment guidance](#) and [INVOLVE's involvement cost calculator](#) to help develop an appropriate PPI budget.
- **Other direct costs**

Additional cost information

NHS Costs

You should use the [Schedule of Events Cost Attribution Tool \(SoECAT\)](#) to ensure costs are attributed correctly in line with the AcoRD framework, distinguishing between research costs (eligible for funding) and then NHS support costs and NHS treatment costs (not eligible for funding).

Where the study takes place within the NHS, you need to outline any eligible NHS-based clinical research costs in the main budget table and then associated NHS costs (not funded by the Stroke Association) into the SoECAT form.

Research sponsors have a responsibility to make sure the study is appropriately costed and attributed in line with the Department of Health and Social Care [AcoRD guidance](#). Attribution support is available for investigators, study teams and their R&D offices through AcoRD specialists. Find out more via the [NIHR Research Delivery Networks](#).

If your project involves the recruitment of participants, your application must include the Funder Export from the online SoECAT, obtainable via the [NIHR Central Portfolio Management System \(CPMS\)](#).

To create a SoECAT, you will need to register and activate an account in Guidance and support are available through:

- [CPMS user guide.](#)
- [NIHR Online SoECAT Guidance](#)
- [Online SoECAT Guidance Module](#) (which includes video tutorials and linked resources (an NIHR Learn account is required to access and enrol onto the module))
- [Online SoECAT Top Tips](#)

Please note: Completion of the SoECAT may not be necessary when applying for funding to support overarching programmes with no specific research study protocol, infrastructure, Fellowships, anything where the grant is to be used for direct employment of a member of staff or purchase of an asset, and data or diagnostic reviews where recruitment data is not collected. In such cases, provide supporting documentation explaining why a SoECAT was not submitted.

Joint Funding

We welcome applications where additional funding has been secured from other sources, such as from research charities, universities, or government bodies to part-fund a Fellowship. The Stroke Association Fellowship award must constitute to at least 50% of the total funding for the Fellowship.

Research Sponsorship

You will need a research sponsor for your project. You do not need a sponsor formally approved at the application stage; however, if your Fellowship is awarded you will need to have a research sponsor in place before the project starts.

A research sponsor is typically the employer of the Chief Investigator, the educational institution (for example, for student-led research), or the care organisation where the research is taking place. You should discuss sponsorship early with your supervisor(s) and your institution's Research Office, who can advise who should take on this role. For further detail on sponsor responsibilities, see the Health Research Authority's guidance on [Sponsor responsibilities](#).

Please email research@stroke.org.uk if you would like more guidance.

9. Resubmission policy

Applicants may resubmit a previously unsuccessful application to this call. Should you choose to resubmit, we ask that you must adapt the application in accordance with the feedback provided by reviewers. You will need to briefly summarise this in your application (maximum 300 words). If you are unsure whether your application is eligible for resubmission, please contact the Research Team at research@stroke.org.uk.

10. Application checklist

- ☐ I have read the Guidance for Applicants and Terms and Conditions.
- ☐ I have completed all sections of the online application form via flexigrant (<https://strokeassociation.flexigrant.com>).
- ☐ I have obtained online signatures via flexigrant from my lead supervisor, Head of Department, and Finance Officer.
- ☐ I have provided a letter of support from my lead supervisor.
- ☐ For CPDF applicants, I have also included a letter of support from my clinical supervisor.
- ☐ I have provided a narrative CV for myself and all supervisors (including clinical supervisor). Please use our template which can be found on our [webpage](#).
- ☐ I have checked that all included costs are eligible, the totals are correct, and salary costs have been calculated and adjusted for inflation.
- ☐ I have completed the Schedule of Events Cost Attribution Tool (SoECAT) for NHS-based studies and have included the Funder Export, if applicable (<https://www.nihr.ac.uk/online-soecat-guidance>).
- ☐ I have uploaded a Gantt chart/timeline.

11. How is your application assessed?

Your application will be assessed by a panel made up of scientific experts and lived experience experts from the [Stroke Voices in Research](#) involvement network.

Your application will be assessed and scored based on the following criteria:

- The person – your background, career aspirations and potential to become a stroke research leader in the future.
- The proposed training and development programme you would undertake if awarded the Fellowship.
- The supervision that you will receive and the environment of the host institution(s).
- The project that will be carried out during the Fellowship.

Your proposed research project must be directly related to stroke. Details of the proposed research project, patient and public involvement, future plans and aspirations for further research and funding will be assessed. The panel will also consider how the research could ultimately be translated into clinical practice and, therefore, provide benefit to people affected by stroke.

Review scores are used to rank applications and shortlist for interview with agreement from the Chair of the Panel. If your application is shortlisted, you will be invited to attend an interview.

The interview usually lasts for around 30 minutes. You will be interviewed by the panel to explore your career aspirations and experience, the research proposal, PPI, and the benefits of the Fellowship to yourself, research, and stroke care.

If you are successful, we will let you know via email. Upon accepting the award, we will ask you to provide an accurate start date. We prefer you to begin the award within six months of receiving our offer, but the start can be delayed if needed at our discretion.

If you are unsuccessful, we will email you and provide feedback.

12. Deadlines for applications

Call opens: **11:00am, 2 March 2026**

Closing date for applications: **1:00pm, 25 May 2026**

Interview date: **21 October 2026**

Our Research Team will send out invitation letters for interview. Please hold the interview dates in your diary from now on until we confirm if you have been shortlisted. You will receive a letter confirming this approximately two weeks before the interview date. Interviews will be held online.

Awards will be made in **November 2026**.

Appendix 1: Research Cost Guidance

In general, we will fund costs that arise directly from the research, can be directly attributed to the research, and would not be incurred otherwise. All requested costs in an application for funding need to be fully justified and must be agreed by the Stroke Association in the context of the research proposal. This cost guidance is in line with the Association of Medical Research Charities recommendations.

Cost type	Costs the Stroke Association will meet	Costs the Stroke Association will not meet
People working on the grant	Salary, employer contributions (for National Insurance and pension costs) for staff employed to work specifically on the funded project. Stipend and fees for PhD students who either hold PhD Studentships or are project-dedicated (if eligible). Contributions to the salary costs, proportionate to time commitment, for specialist service staff (e.g. technicians, project managers, CTU staff) who have a role working on the project but may also work on multiple other projects and whose salaries are supported from core institutional funds. These costs are only allowed if there is an auditable record (i.e. timesheets) of the time spent working on the project.	The salary of: - Co-applicants who hold a permanent, open-ended or rolling contract with their salary met from core institutional funds. - Other staff (e.g. departmental technicians and administrators, professional services staff) who don't have a specific role on the project and whose time is shared across multiple projects and whose salaries are supported from core institutional funds. - Apprenticeship Levy costs For staff working on the grant, the following costs will not be met: - Redundancy costs. - Recruitment expenses. - Global talent visa application fees, visa renewal and associated

		Immigration Health Surcharge (IHS) costs. • Parental and sick leave • Visa and IHS fees for dependents.
Running costs	Eligible NHS-based clinical research costs, in line with DHSC AcoRD guidance. Clinical, epidemiological and qualitative research costs. Participation costs. Laboratory materials and consumables. Imaging costs. General office printing and postage costs directly associated with the project. Associated charges for shipping, delivery and freight.	Ineligible NHS-based clinical research costs, in line with DHSC AcoRD guidance.
Equipment	Purchase of project-dedicated: • New items of research equipment.	Standard per-unit IT charges and generic office software costs. Maintenance of equipment items funded on the grant, for the remaining duration of the grant

	• Upgrades to existing items of research equipment. • Research-specific specialised computing software and hardware (e.g. for bioinformatics). • Personal computing equipment if required for project purposes (maximum £1,000). Maintenance of equipment not funded on the grant but used on and essential for the project. Access charges that incorporate: • Materials and consumables. • Maintenance and service contracts. • Staff time costs for dedicated staff employed to operate the equipment or facility.	once any warranties have expired. Access charges that incorporate: • Estates and utilities • Equipment and building depreciation • Insurance
Animal research costs	Project-specific animal purchase and transportation, maintenance and experimentation costs. Project-specific Home Office project licences and personal animal licences. Animal house facility usage charges that incorporate facility staff costs, materials	Animal house facility usage charges that incorporate: • Estates and utilities. • Cage, equipment & building depreciation. • Insurance, safety.

	and consumables, and maintenance and service contracts.	
Travel and subsistence costs	Travel and subsistence costs for people working on the grant to undertake research specific 'project delivery' activity (e.g. visiting collaborators and facilities, meeting study participants, sample and data collection, conducting fieldwork). Travel and subsistence costs for people working on the grant to attend conferences and events for personal development or to disseminate findings.	First or business class travel (unless it is required as a reasonable adjustment). Attendance to conferences and events not related to the research project.
Training and Development	Project-specific training for people working on the grant. Careers-based training and development for people working on the grant.	General HR or IT training costs.
Dissemination	Conference attendance (including UK Stroke Forum registration fees) related to the research project. Open access and publication charges. Running workshops with clinicians or people affected by stroke.	Attendance to a conference and events not related to the research project.

Patient and Public Involvement	Travel expenses and honoraria for public involvement representatives. This may include contributor payments (refer to NIHR payment guidance), reimbursement of expenses such as travel, training or support, accessibility requirements (e.g. interpreters, accessible materials), independent facilitation, refreshments and materials. Applicants may use INVOLVE's involvement cost calculator to help develop an appropriate PPI budget.	
Other project-related costs	Data access fees, management and sharing (e.g. archiving, repository fees, data storage costs and data management services).	General estates costs (e.g. building and premises, utilities, cleaning waste and other disposal costs). General office furniture, stationery, printing and postage costs not associated with the project. Shared catering. Health and safety (e.g. radiation protection costs, first aid kits and signage).

		Clothing to meet standard health and safety measures. Indemnity and/or organisation insurance.
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