NIHR | Translational Research Collaboration

NIHR Infection & Antimicrobial Resistance (AMR) TRC Pump-priming Funding Scheme

A key part of the NIHR Infection & AMR Translational Research Collaboration's strategy (2025 - 2028) will be the delivery of a pump-priming funding scheme to provide important stimulus for nascent projects, build momentum and realise early evidence of productivity.

The scheme will primarily support the TRC's collaborative projects within a critical period in their development, helping them to move beyond incremental gains and increase their likelihood of achieving success. Pump-priming investment will support activities to accelerate the timeline for leveraging external funding and having widespread impact on the clinical care of patients affected by serious infections and antimicrobial resistance.

The TRC operates with financial support from the Department of Health and Social Care (DHSC), administered through the National Institute for Health and Care Research (NIHR), together with annual contributions from member NIHR Biomedical Research Centres (BRCs) and partner Higher Education Institutions and NHS organisations.

Scheme Overview:

- Awards may be funded up to a maximum of £20K per project and for a duration of up to 12 months
- Total funding envelope is £90K, which is expected to fund 4 to 5 projects
- Project aims, a clear vision and key milestones for delivery should be outlined within the application form
- Applications should include appropriate plans for PPIE and research inclusion as a key aspect of the research activity
- Projects are required to involve a minimum of three TRC member centres
- The Scheme is open to researchers and clinicians at all levels. Applications from early career researchers (ECRs) are strongly encouraged.

1. Aims and Scope

- Pump priming support is available exclusively for promoting and facilitating the development of collaborative projects supported by the TRC (i.e. those adopted within the framework of the TRC's three Workstreams: WS1 Vaccinology & Controlled Human Infection Models; WS2 Diagnostics & Precision Medicine; WS3 Novel Therapeutic Strategies).
- It is envisaged that pump priming will be crucial to support projects from the inception stage to a point where they are:
  - Competitive to apply for substantial external, peer-reviewed research funding through the development of high-quality collaborative research proposals.
  - Strongly positioned to present mature collaboration opportunities to industry partners
- The purpose of the scheme is not to provide funding for projects formed across individual centres, particularly those conceived and developed independently of the TRC's collaborative framework.

- Awards may be proposed for a maximum duration of 12 months, but may be for shorter periods, depending on the requirements of the project.
- Pump priming funding should have clear added value addressing new research objectives not already covered by funding from other sources. It should not solely fund workshops or events without the development of a grant proposal or other relevant research-focused output towards leveraging further funds.
- The development and delivery of the project should represent a collective benefit and output for the centres and researchers involved.

2. Eligibility Criteria and Costs

- Projects should have an identified Lead/Co-Leads from a TRC member centre and must include participants from a minimum of three member centres.
- The following are example activities that applications may propose requesting:
  - Generation or analysis of pilot samples or data to support larger-scale applications for external research funding
  - Costs to gain access to data sources, collate/curate cohorts, biological samples or pathogen isolates (including access to BioAID, CandiRes or related TRC-aligned platforms)
  - Salary or sessional time to support a project coordinator
  - Costs to support PPIE activities specific to the needs of a TRC related project (e.g., working with patient groups affected by recurrent or drug-resistant infections to establish PROMs for future validation)
  - Meeting/conference attendance or a related networking activity (e.g. educational events) relevant to the pump-priming project (maximum of £5K) to establish, reinforce and maintain interactions between participating centres or external partners (e.g., industry). Examples: a 2-day workshop for brainstorming new projects, grant applications or research initiatives.

  **Please note that meetings costed in applications must have clearly defined aims and outputs, including an explanation of how they contribute to the delivery of a broader TRC objectives.*
- The scheme permits applications for awards of up to £20K. Financial support requested should be clearly itemised and be specific to the project's needs.
- Salaries, consumables, meeting/travel costs and costs related to patient and public involvement engagement are eligible for funding. Costs for small equipment are capped at £5K and require additional justification. Capital and overhead (indirect) costs are not permitted within the scheme.
- Staff costs cannot include overhead and should only be requested to 'buy out time' of existing staff to provide a specialist function or service required by the project. For example, a research nurse, project coordinator, or data analyst.

3. Application and Review Process

- The TRC Steering Committee will work with Workstream Leads to identify the specific needs for each project and to consider whether pump-priming funding could help to catalyse the progress and delivery of the workplan.
- Applications will initially be reviewed by the TRC Chairs and Collaboration Manager against the scheme's eligibility criteria, and subsequently assigned to at least 3 TRC Steering Committee members with relevant expertise, and without conflict of interest to review and score. In parallel,

lay summary and Future Impact section c will be reviewed by at least 2 PPIE partners, the feedback of which will be incorporated into the final scoring sheet.

- A conflict of interest is considered to exist where a Steering Group member:
  - is directly involved in the work the application proposes to carry out
  - Has a close working relationship that might be perceived as conflict of interest
- Members are asked to notify the TRC Collaboration Manager if they have a conflict of interest or are in any doubt as to whether or not they should review an application.
- Applications will be scored out of a maximum of 6 using a traffic light system. Green (5-6, excellent, with no major concerns), Amber (3-4, good with some concerns), Red (1-2, poor, with serious concerns). For applications scoring 4 or lower, the Steering Group will decide whether there is sufficient scope for the applicants to revise/resubmit the application.
- The award letter is a sub-contract between the TRC Infection & AMR, hosted by Imperial College London in partnership with Imperial College Healthcare NHS Trust, and the University/Trust of the recipient, which includes the Terms & Conditions of the award, and details of how funds will be transferred to awarded institutions.
- Awarded funding will be administered to the lead applicant of the awarded project. It is the responsibility of the lead applicant to allocate the budget to the collaborators. Any underspend at the end of the project is required to be returned to the TRC Host Organisation.

4. Reporting

- Lead applicants that are successful in obtaining pump-prime funding will be expected to provide a progress report 6 months after the start of the project (although this may be shorter depending on the award duration) and subsequently within 2 months of the end of the project. The terms of reporting will be stipulated in the signed agreement.
- The TRC reserves the right to withdraw funding if the award holders fail to start the project within 3 months of receiving the funding.
- Reports will be reviewed by the TRC Collaboration Manager and shared with the Steering Group. Where projects deliver outputs of strategic relevance to the TRC (e.g., grant applications submitted, industry collaborations initiated, multi-centre protocols developed), these will be captured in the TRC's ongoing reporting to the NIHR and reflected in the annual and final TRC reports submitted to the Authority.

Key Dates:

Funding Call Opens	01 October 2026
Application Deadline	01 November 2026
Notification of Outcomes	20 November 2026
Awards will be issued by	15 December 2026
Awards need to be spent by	15 December 2027