

HTA Clinical Evaluation and Trials program – Topic Focus on Palliative and Supportive Care

Notes from telecon with HTA office (13th November 2009)

- HTA office was represented by Dr Paula Barrett (senior program manager) and Vaughan Thomas (clinical lead). I was asked to advise on promotion of the call to the clinical and research community; the call opens in January 2010 and deadline for outline proposals is April 13th 2010.
- The Clinical Evaluation and Trials program funds clinical trials that are of importance to patients and the NHS and offer value for money. I've attached outlines of the detailed remit and guidance on successful applications.
- The HTA were advised by the DoH that End of Life Care Strategy revealed deficiencies in the evidence base for end of life care, especially for those with conditions other than cancer. For this HTA topic focus on Palliative and Supportive Care applications are welcomed which consider any disease area and, in particular, interventions for symptom relief, promotion of general well-being, and psychological comfort for the person approaching the end of life and their carers. In response to my question, the call was not apparently prompted by the withdrawal of funding by CRUK in this area of research.
- In HTA-speak, this call is part of a 'strategic uplift' in funding. This means that outline proposals will be virtually guaranteed to proceed to the second round (i.e. invitation for full proposals). Timelines following deadline in April are for board to meet in July, decision by October and then full proposals invited by December approximately.
- Budget – there is no specified budget for this call. All funding will come from HTA central budget. As an indicator, projects can receive funding from £250k for an evidence synthesis up to their largest award of £14m for a large clinical trial.
- I asked about overlap with EME (Efficacy and Mechanisms Evaluation program) and was told that there should be very little. Although feasibility studies are welcomed by HTA, there needs to be some evidence of efficacy of the intervention within palliative and supportive care or another context.
- As in all large scale studies, successful bids will look strong in terms of scientific design and clinical focus, have good underpinning preparatory work, and originate from multidisciplinary teams and environments with good track records.
- Finally, it was clear that if the HTA receive a large number of outline proposals, then this will encourage future funding calls. In addition, HTA plan to draw up a list of priority research areas within Palliative and Supportive Care on which to commission research – this will be in parallel to investigator led bids.

- Further information on the HTA Clinical Evaluation and Trials funding stream can be found here: <http://www.hta.ac.uk/funding/clinicaltrials/index.shtml>

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