# National Institute for Health and Care Research

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<<Title Contracting Lead Applicant Full Name>>

<<Organisation>>

<<Address1>>

<<Address2>>

<<Address3>>

<<City>>

<<Postcode>>

FAO: <<Signatory Name>>

<<Date>>

Dear <<Title>> <<Contracting Lead Applicant Surname>>,

**Proposal & Partnership Development Award - <<Reference>>**

**Research & Innovation for Global Health Transformation (“RIGHT”) Call X**

I am pleased to inform you that the Secretary of State for Health and Social Care, acting through the National Institute for Health and Care Research, (“the Authority”) has approved your application to the Proposal & Partnership Development fund (“PPD”). The Authority is prepared to pay **<<Organisation>>** (“you”) no more than £10,000(“the Award”) on the terms recorded in this letter.

1. **Award Details**
	1. If accepted, the Award will start on the date of this letter and finish on <<Day Month Year >> meaning expenses may only be claimed for this period.
	2. Payments will be made in arrears upon receipt of your claimed expenses to NIHR Commissioning Centre no later than <<Day Month Year -6 month after the contract end date>> evidenced by the original receipts or signed copies of them by an authorised officer of the Contractor, relevant oversea partner(s), collaborator(s) and/or service provider(s) as appropriate. For the avoidance of doubt, any expenses claimed after [insert date] will not be reimbursed.
	3. Payments will be made to you and it is your responsibility to pass the appropriate amounts to local and/or oversea partners, collaborators or service providers.
	4. Please note that no payments will be made until you have accepted the Award by returning your signed copy of this letter to the NIHR Coordinating Centre Global Health Team as outlined below.
2. **Award Conditions**
	1. If accepted, the Award will be paid on the following conditions:
		1. The Award may only be used in accordance with the plans outlined in your application to the PPD fund in order to pay for: (i) reasonable travel and subsistence expenses; and/or (ii) reasonable partnership formation and development costs to support the production of memorandum(s) of understanding and/or draft governance policies between you and the relevant oversea partner(s), collaborator(s) and/or service provider(s); both for the purposes of supporting your funding application to the NIHR RIGHT Call X.
		2. No variation to the plans outlined in your application to the PPD fund is permitted without the prior written consent of the NIHR;
		3. In the event that VAT or any other tax or duty is payable in respect of the Award or the use of the Award, such VAT, tax or duty shall be payable by you;
		4. In using the Award and before making any payment to a local partner, collaborator or service provider, you must complete appropriate due diligence and take all steps reasonably necessary to ensure that both you and your local partners, collaborators and/or service providers comply with all directly applicable legislation including (but not limited to), anti-bribery and corruption, the “NIHR Policy on Preventing Harm in Research” and “NIHR Safeguarding Guidance”;
		5. You must provide updates on how you have spent and/or plan to spend the Award as required by the Authority;
		6. In the event that any part of the Award is not applied as outlined in your application, you will repay the relevant amount to the Authority at the Authority’s request; and
		7. You will provide verbal or written reports as required by the Authority on any aspect of the use of the Award.
3. **General**
	1. The Authority is entitled to terminate this Award and to require repayment of any amounts already paid to you if:
		1. The Authority has reasonable grounds to believe that you are in breach of any of the conditions outlined in this letter;
		2. The Authority has reasonable ground to believe that any cause beyond your reasonable control prevents the use of the Award as outlined in your application;
		3. You are unable or unwilling for any reason to continue with the development of the proposals and partnerships as outlined in your application for the NIHR RIGHT Call X; or
		4. In the reasonable opinion of the Authority, you consistently fail to achieve an acceptable standard in relation to the performance of the Award.
	2. The Authority accepts no responsibility, financial or otherwise, for liabilities arising out of expenditure from this award or for liabilities arising out of the activities funded by this Award.
	3. No person who is not a party to this letter agreement has the right to enforce any terms of it which confer a benefit on them.
	4. This letter agreement and any non-contractual obligations arising out of or in connection with it shall be considered as a contract made in England and be construed in accordance with the laws of England and Wales and the parties irrevocably submit to the exclusive jurisdiction of the courts of England.

**Acceptance**

If this offer is acceptable, please confirm your acceptance by signing and returning this letter agreement using the Authority’s DocuSign eSignature facility.

This letter agreement is not effective unless and until it has been accepted by you (as above) and countersigned by the Authority.

 Please note that it is your responsibility to obtain the agreement from the lead of any partner organisations confirming their participation in the activities described in the application to this fund.

Please do not hesitate to contact the NIHR Coordinating Centre Global Health team if you have any queries.

Yours sincerely

Name: Christine Holmes

Position within the Organisation: Contracts Manager, Science, Research and Evidence

Directorate of the Department of Health and Social Care

Signature: ………………………

Date: ……………………………

**On behalf of <<Organisation>>, I agree to the terms set out in this letter.**

Name:

Position within the Organisation:

Signature:

Date: