

RESEARCH AWARDS

Information for Applicants

2027 Special Fellowship Funding Round

Research-Active Region: Investing in Research Talent in Yorkshire

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Date: September 2026

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Purpose of this document

The purpose of this document is to assist potential applicants to the 2027 Special Fellowship Funding Round. Throughout this document we refer to Yorkshire Cancer Research (the “**Charity**”) and the Charity’s 2027 Special Fellowship Funding Round launched in October 2026 (the “**Funding Round**”).

About Yorkshire Cancer Research

Yorkshire is one of the regions hardest hit by cancer. Sadly, people in the region are more likely to have their lives cut short by cancer than almost anywhere else in England.

Yorkshire Cancer Research is dedicated to changing this.

Our Vision is that people in Yorkshire live longer healthier lives, free of cancer.

Our Mission is to take action today to prevent, diagnose and treat cancer more effectively in Yorkshire.

We believe in **Research Led Innovation** and all our charitable activities focus on delivering solutions and real benefits to the people of Yorkshire.



Strategic aims

Our activity is summarised by our **strategic aims**:

 Action Research Bring clinical research to people in Yorkshire to reduce incidence, cancer deaths and years lost to cancer.	 Research-Backed Services Deliver our own evidence-based services to prevent, diagnose and treat cancer.	 Research-Active Region Work with Yorkshire hospitals and universities to grow cancer research talent and capacity for the benefit of everyone in the region.	 For Everyone Reduce health inequalities so people in Yorkshire receive the best cancer prevention, diagnosis and treatment – whoever they are, wherever they live.	 Shaped by People People affected by cancer shape our work.
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2027 Special Fellowship Funding Round

‘Research-Active Region: Investing in research talent in Yorkshire’

Background

Clinical research plays a vital role in enhancing patient outcomes by developing new treatments, improving existing therapies, and identifying the most effective ways to prevent and manage diseases. Through rigorous testing and evaluation, clinical research leads to evidence-based practices that can be implemented in clinical settings. This ensures that patients receive the most current and effective care available.

Whilst the benefits of health research are well established, there are long-standing and significant regional disparities in the distribution of research funding in the UK. A 2023 report analysed public- and charity-sector funded research. The report found that Yorkshire received 5% of health research funding in 2022.¹ This is despite Yorkshire representing 8.2% of the population. By contrast, London received 32% of health research funding yet represents 13% of the population.

Outside of London, significant research spend is focused in the South East of England around Oxford and Cambridge. There exists a cycle where areas with strong existing levels of academic expertise and research infrastructure attract significant levels of health research funding. For example, the cities of Oxford and Cambridge each receive 10.8% of public and charity health research funding, equivalent to over a fifth of the total UK spend on health research (21.6%) and totalling £602.4 million.¹

Despite the value of research in Yorkshire being proportionately low, the quality of research conducted in Yorkshire is high, partly illustrated by the success rate of Yorkshire-based research applications to UKRI. In 2023/24, 24% of applications were successful compared to 18% in London.² However, the value of Yorkshire-based applications in 2023/24 was £320 million, compared with over £1 billion in London.³ This may be a result of reduced research infrastructure funding, which is key to the delivery of research at scale.

Higher levels of clinical research activity in hospitals are shown to improve the survival outcomes of all patients receiving treatment, not just those participating in clinical trials. Beyond immediate patient benefit, medical research, including cancer research, brings significant benefits to the UK economy.⁴ Research has estimated the return from public and charitable sector research is approximately 10 per cent.

One of the critical challenges in being a research-active region is attrition of the clinical academic workforce, especially in medical, health, and care professions. A 2025 report by the UK-based Medical Schools Council⁵ shows that between 2012 and 2022, the decline in clinical academics was four times greater in Yorkshire than it was nationally. Whilst more recent data shows signs of a small recovery, progress still needs to be made to ensure the long-term sustainability of the workforce. Furthermore, a report from the Medical Research Council that used this data recognised the critical importance of addressing the falling number of clinical researchers to ensure that patients continue to access innovative treatments.⁶

Through previous fellowship schemes at Leeds and Hull, Yorkshire Cancer Research has demonstrated how a targeted fellowship scheme can attract and develop outstanding academic talent who deliver pioneering research across cancer prevention, diagnosis and treatment.

Building on this success, Yorkshire Cancer Research is pleased to announce the 2027 Special Fellowship Funding Round inviting applications for cohorts of research fellows to help further the strategic aim for Yorkshire to be a ‘Research-Active Region’. Successful applications will also further the Charity’s aims of bringing health related research to people in Yorkshire to reduce incidence, cancer deaths and years lost to cancer and reducing health inequalities so people in Yorkshire receive the best cancer prevention, diagnosis and treatment – whoever they are, wherever they live.

We aim to grant up to £9 million in funding through the Special Fellowship Funding Round

¹ [UK Health Research Analysis 2022 - HRCS Online](#)

² [UKRI investment and outputs 2023 to 2024 – UKRI](#)

³ [What is clinical research and why are we focussing on it? - Health Research Authority](#)

⁴ [Medical research: What’s it worth? - Academy of Medical Sciences](#)

⁵ [Staffing levels of medical clinical academics - Medical Schools Council](#)

⁶ [Clinical researchers in the UK: reversing the decline – UKRI](#)

Key objectives and funding scheme details

Key objectives of the Special Fellowship Funding Round are to:

- Attract, develop and retain outstanding early career researchers (ECRs) in Yorkshire.
- Develop researchers from **Phase 3:** (Early post-doctoral research), to be considered for exceptional candidates, and **Phase 4:** (Late post-doctoral research), the expected stage for most candidates to move them to **Phase 5:** (Independent research).
- Deliver high-quality applied health research in cancer with clear potential to improve outcomes for patients.
- Strengthen long-term research capability and attract further external funding into Yorkshire.

All applications should deliver tangible impact in relation to our [Research Strategy](#) which applicants are encouraged to read in full. A summary of key points is provided below.

Our research aims to:

- Bring clinical research to people in Yorkshire to **reduce incidence, cancer deaths and years lost to cancer**.
- Work with Yorkshire hospitals and universities to grow cancer research talent and capacity for the benefit of everyone in the region.
- Reduce health inequalities so people in Yorkshire receive the best cancer prevention, diagnosis and treatment - whoever they are, wherever they live.
- Ensure people affected by cancer shape our work.

To fulfil our research strategy, fellows must be based within Yorkshire universities and (where applicable) NHS Trusts.

Clinical and non-clinical fellows

- Fellows may be **clinical or non-clinical**, but all must be focused on **interventional health related research**. It is expected that clinical fellows will form a minimum of 50% (i.e. the majority) of the cohort.
- For the purpose of this funding round, clinical fellows are doctors, nurses, midwives, allied health professionals, pharmacists, clinical scientists and other registered healthcare professionals who retain a clinical role alongside research.
- We expect non-clinical fellows to be in applied health related research, such as behavioural or health service improvement sciences.

Cohort requirements

- Each application must propose a **minimum cohort size**, expected to be no fewer than four.
- Cohorts should demonstrate internal coherence, opportunities for collaboration, and shared development activities.

Overall duration

- Programmes may be over five years in duration, but individual fellowships should last no more than **five years**.

Co-funding

Host organisations must demonstrate a strong commitment to the programme through either or both of the following:

- **Direct financial contributions**, e.g. salary support, co-funding additional early career fellows or related PhD students
- **'In kind' contributions** e.g. leadership time, investment in training/mentorship schemes, infrastructure, research support relevant to the fellows etc.

In addition to providing a breakdown and justification of the funding requested from Yorkshire Cancer Research, applicants must clearly describe:

- The nature and value of the host organisation co-funding, including direct and in-kind contributions
- How it supports the delivery, sustainability, and retention of the cohort
- Any institutional commitments (e.g. proleptic appointments, protected time, or career pathways)

Yorkshire Cancer Research recognises that universities and collaborations across Yorkshire vary in size, resources and research intensity and therefore, we are not prescribing a fixed percentage match. Instead, applicants should propose a level of contribution that is proportionate to their means and the scale of the proposed programme, and which demonstrates a clear and credible commitment to the scheme and support for fellows beyond the duration of the award.

The level of commitment demonstrated by the host and partner organisations through these contributions form part of the assessment process, and consideration will be given to the context of the host institution or partnership, to ensure that expectations are fair and do not disadvantage applicants from less research-intensive settings.

Costs covered

- Funding should support salary costs, research expenses, and structured development activities appropriate to ECRs.
- Coordinating posts and senior leadership time will also be considered as part of the application.

Research focus of fellowships

All applications must propose research themes against which the fellows will be appointed.

All proposed research themes must be in line with **Yorkshire Cancer Research's Vision and Mission**, with a clear pathway to impact and the overall aim to **save or extend lives and/or reduce cancer inequalities**.

Research programmes must focus on **interventional applied health research in cancer**, expected to fall within one or more of the following areas:

- **Clinical research**
 - **Prevention**
 - **Early diagnosis and screening**, including:
 - Risk stratification tools
 - Implementation of new diagnostics
 - Screening uptake and effectiveness
 - **Treatment**
 - **Health services and systems research**, including:
 - Cancer pathways
 - Waiting times
 - Referral optimisation
- **Implementation science**, including:
 - Adoption and scaling up of evidence-based best practice
 - Implementation of proven interventions in real-world settings
- **Real-world evidence and data science**, to support the interventional work above, including:
 - Use of routine NHS data
 - Cancer registries and electronic health records (EHRs)
 - Analysis of health inequalities

Other areas of research can be considered if justified and in keeping with 'interventional applied health research in cancer'.

We encourage academics who have received funding from previous Yorkshire Cancer Research fellowship schemes to be involved in mentoring or overseeing the new fellows where appropriate. Therefore, early phase or translational research may be in scope if there is a clear path to patient benefit in line with our [Research Strategy](#) and where the research builds on the work of fellows who have previously received fellowship funding from the Charity.

Note that research with the primary aim of improving palliative or supportive care without potential to gain life years is out of scope.

Patient and Public Involvement and Engagement (PPIE)

Involvement of people affected by cancer is core to all work across the Charity and is also a vital component of high-quality clinical research. PPIE helps ensure that research is shaped by the experiences and priorities of those affected by cancer in Yorkshire, making studies more relevant, inclusive, and impactful.

PPIE means working in collaboration or partnership with patients, carers, service users, families, people with lived experience, or the public, in planning, designing, managing, conducting, and dissemination and translation of research. Researchers are expected to include PPIE in project design and delivery, and dissemination of findings. Studies should have strong elements of co-design and engagement with patients and/or the public.

Applicants must describe how patients and the public will be involved and how fellows will be supported to develop their knowledge and expertise in this area.

More information is available on the UK Standards for Public Involvement [website](#).

Inclusive research

In keeping with the recommendations from the [All-Party Parliamentary Group \(APPG\) on Medical Research](#) (now superseded by the APPG for Life Sciences), the Charity expects research to be inclusive and for study populations to be representative of the relevant patient population in Yorkshire.

Applications should describe how fellows will be supported to develop their knowledge and expertise in this area.

Further guidance on providing better healthcare through more inclusive research can be found in the [NIHR-INCLUDE](#) guidance.

Expectations of host organisations

Host organisations are expected to demonstrate a strong, credible commitment to both the **individual fellows** and the **cohort as a whole**, as well as to the longer-term sustainability of cancer research capacity in Yorkshire. Within our region we already have established areas of excellence and we are keen to see this expertise expanded across the whole of our region so more communities can benefit.

We encourage host organisations to consider how they can build on these existing networks and importantly how they can expand them to cover more geographic areas within the region and support more research in areas that are underserved geographically. As such, we encourage partnership working across multiple organisations, for example NHS Trusts within Yorkshire.

Support for individual fellows

Applications must clearly describe:

- High-quality academic and/or clinical **supervision and mentorship** arrangements.
- Access to appropriate research infrastructure, facilities, data, and methodological expertise.
- Protected time for **research and career development**. Clinical fellows need agreed clinic/rota protection.
- Tailored training and development plans, including leadership, grant writing, and methodological skills.

Support for the cohort

Host organisations must demonstrate:

- A clear plan for **cohort-based working**, including opportunities for collaboration, peer support, and shared learning.
- **Structured cohort activities** (e.g. seminars, workshops, networking with clinicians, patients and policy-makers).
- **Integration of the cohort** within wider institutional and regional research networks.

Long-term sustainability, retention and growth

Applications must set out how the host organisation will:

- Support **retention of fellows in Yorkshire** beyond the lifetime of the scheme.
- Enable fellows to progress to **independent research careers**.
- Actively support fellows to secure **further external research funding** (e.g. NIHR, charities, research councils).
- Contribute to the longer-term growth of applied cancer **research capacity in Yorkshire**.

Maximising reach across Yorkshire

Host organisations are encouraged to **engage with NHS organisations** across the region including less research-active Trusts.

Other considerations

- The Charity will be part of the interview review panel for fellows and will expect to have a veto over all appointments.
- The Charity will have the right to reduce the total funds awarded by the amount of any funds not allocated to a specific fellow within a predefined time frame.

Financial information

Costs covered

- Individual fellowships are for a maximum of five years, however, overall programmes may run for longer to allow multiple or phased cohorts.
- Allowable costs include salary costs for the fellows, related research costs, non-staff costs including consumables, costs associated with training and development (including travel and conference attendance), PPIE costs and publications fees.
- For clinical fellows, NHS time is expected to be covered by the relevant NHS Trust and a letter of support from the relevant organisation will need to be provided with the application.
- Reasonable costs relating to administration of the programme.
- The Charity will only cover the direct costs of research (e.g. staff salaries, consumables, travel) and indirect costs must not be included in the application.
- Examples of indirect costs that are not covered include estates, overheads, shared IT and administration, university HR, computers for general use, depreciation and insurance.
- Costings should take account of any anticipated increases (e.g. cost of living, maintenance, and inflationary increases).
- It is the responsibility of the Principal Applicant(s) and host finance department to estimate any cost increases that may occur during the Award and to manage the project within those costs.

As noted in 'Co-funding' section (pages 5 to 6), applicants must clearly describe and justify both the costs requested from Yorkshire Cancer Research and the proposed level of co-funding, including both direct and in-kind contributions.

Award holders are expected to provide regular updates to the Charity on the financial situation of the Award and explain any unexpected variances.

Any underspend that occurs or is likely to occur will be discussed with Award holders and may be deducted from the Award at the absolute discretion of the Charity.

Privacy and use of personal data

Personal data in the applications will be used by Yorkshire Cancer Research for the purposes of processing and assessing applications for funding. Application information will be shared with external reviewers, panel members, and any observers that are invited to the review meetings (some or all of these individuals may be located outside the United Kingdom). Any information shared during the review process will be subject to a confidentiality agreement between the Charity and the recipient. Named individuals will only be contacted in relation to their role on the application unless they have opted for additional contact from Yorkshire Cancer Research.

Email addresses and phone numbers will be used for contacting Principal Applicant(s) and Co-Applicants about their submitted application. Contact details for the Head of Department and Financial Authority will be kept and used to administer the Award and to ensure compliance with the Award terms, should the application be funded. Contact details for the lay representative will only be used to verify their input in the application process. In the full application, the applicants' preferred and excluded reviewers will be considered when selecting external reviewers, but the Charity does not guarantee that the preferred reviewers will be used.

In some circumstances, applications may be shared with the following organisations:

- 1) Another funding body if we are considering co-funding the project or where projects may overlap.
- 2) Cancer Alliances and Research Delivery Networks to discuss coordination of cancer research activities regionally, resourcing/support issues for conducting the work and publicising studies within the network.
- 3) [AMRC](#) and [Europe PMC](#) for annual reporting (these partner organisations may share anonymised, amalgamated or publicly available information with third parties who may be based outside the UK).

For successful applications, we will retain records of the applications in accordance with our internal policies that may be updated from time to time. These records are necessary for assessing the impact of funded Awards, financial review, and protection of our intellectual property interests.

For unsuccessful applications, we will retain records of the applications in order to assess any related applications in the future that might either be a resubmission of an application and/or be related to a previous application.

Furthermore, we will continue to hold data relating to applicants because we may need to approach them in the future to request help with reviewing grant applications.

Please click [here](#) to read our Privacy Policy.

Use of generative artificial intelligence (AI) tools

Used responsibly, generative AI could provide a range of benefits for researchers and the wider research community. However, we want to protect against potential ethical, legal and integrity issues in the use of generative AI tools, to maintain the high standards of research we fund.

If using generative AI, applicants must apply caution and do so in accordance with relevant legal and ethical standards, and it is still their responsibility to ensure their application is original, accurate and abides by funder guidelines or policies. Applicants must disclose the use of generative AI tools in funding applications and this information will be used to monitor the impact of AI on application quality and our research portfolio.

Maintaining confidentiality is essential for safeguarding the exchange of scientific opinions and assessments. Given concerns regarding confidentiality and intellectual property in the sharing, viewing and use of data inputted into generative AI tools, reviewers must not input content from confidential funding applications into such tools, nor use them to develop review reports.

For more information, see [Policy on the Use of Generative Artificial Intelligence \(AI\)](#)

Applying for funding

To apply, applicants must register or log in to our online [Flexi-Grant Application Portal](#)

This is a **single stage application process** involving submission of a structured application form and detailed programme description submitted via the Flexi-Grant application portal.

Eligibility

The Charity will only accept applications from Principal Applicants whose contract of employment with the relevant organisation provides for the applicant's continuous employment in a substantive post up to or beyond the proposed end date of the Award applied for.

All Fellows must be based at Yorkshire universities and if applicable Yorkshire NHS Trusts.

Key dates for the Funding Round

2027 Special Fellowship Funding Round launches	8 October 2026
Applications deadline	12 noon, 17 December 2026
In-depth review	Jan-Feb 2027
Panel meeting (including applicant presentations)	10 March 2027
Board of Trustees approval	March 2027
Outcomes to applicants	April 2027

In-depth review

Applications will undergo in-depth review by scientific expert members of a specially convened Research Advisory Panel and the outcomes will be used to shortlist applications to progress to the next review stage. To support the panel review, applications may also be reviewed by independent, external reviewers.

In-depth review will focus on:

- Relevance to applied cancer research and alignment with Yorkshire Cancer Research's Vision and Mission.
- Merit of the research themes, proposed methods, and use of data.
- Track record and suitability of supervisors
- Strength of the wider research environment and support offered.
- Inclusivity of the research.
- Strength of PPIE.
- Potential for patient benefit and impact, including saving or extending lives.
- Whether the financial support committed and requested is justified.

Shortlisted applicants will be invited to attend the Research Advisory Meeting and will receive the in-depth reviews in advance.

Research Advisory Meeting

The Research Advisory Meeting (RAM) will be attended by a minimum of five scientific expert and stakeholder expert members of the specially convened Research Advisory Panel. The meeting aims to identify which applications are of sufficient quality to be deemed fundable.

Shortlisted applicants will be invited to attend in person at a pre-specified time to present to the panel, outlining the proposed cohort and programme, incorporating feedback from the in-depth review and answering any further questions from the panel.

Following presentation and discussion of each application, panel members individually score the applications. The combined scores will be used to provide average overall scores to rank the applications.

RAM panel assessment will consider:

- Overall quality and coherence of the proposed research themes and fellowship cohort.
- Level of commitment from the host institution and partner organisations.
- Quality of plans for ECR development, mentorship and progression.
- Commitment to collaboration, inclusivity and cohort working.
- Likelihood of retaining talent in Yorkshire and attracting future funded research.
- Responses to in-depth review and ability to address panel questions clearly and convincingly.

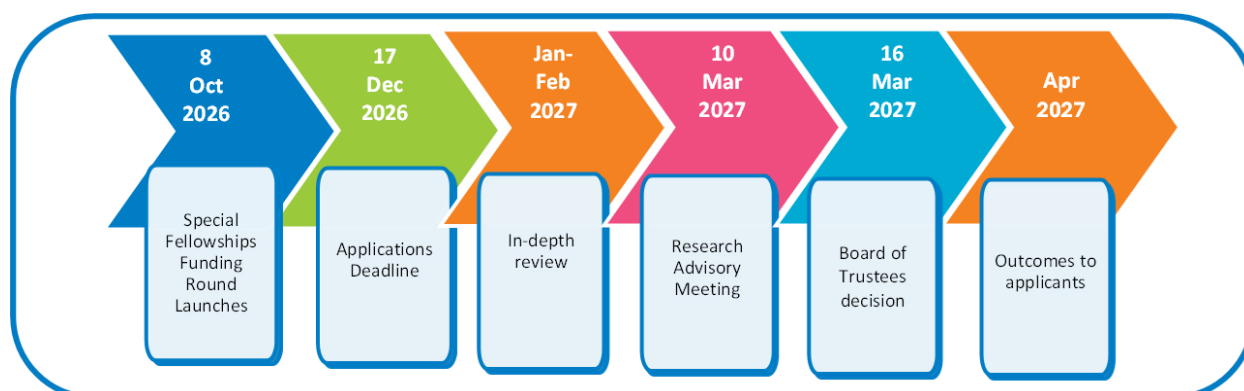
Executive Proposals

All relevant information and outputs from the Research Advisory Meeting are collated and reviewed by the Executive of the Charity. Having scrutinised the scoring and feedback from the Panel and the Research Advisory Meeting discussions, the Executive will present recommendations to the Board of Trustees.

Decision by the Board of Trustees

The Trustees will consider the funding recommendations and make the funding decision. The Trustees' decision is final and there is no appeal process.

An overview of the stages involved in the grants selection process is shown below:



Association of Medical Research Charities (AMRC)

As a member of the [AMRC](#), our grants selection process complies with the [AMRC's principles of expert review](#).

If you have any questions about applying for funding, please email research@ycr.org.uk

Frequently Asked Questions

Are applicants based outside Yorkshire eligible to apply for Yorkshire Cancer Research funding?

Yes, host organisations across the UK are eligible to apply for funding from Yorkshire Cancer Research. However, fellows must be based within Yorkshire organisations and applications must demonstrate direct benefit to patients and/or the public in Yorkshire. Where applicable, recruitment of participants or use of existing datasets within the research must prioritise or focus on Yorkshire.

How do I apply for an Award?

[Flexi-Grant](#) is the online grants management system that we use for the submission of grant applications and post-award management. Applicants must register to access the secure site to [apply for funding](#).

Are there any limits with regards to the amount of funding or duration?

Individual fellowships are a maximum of five years, however, the overall programme may be longer to allow for staggered starts. There is no limit, however it should be noted the maximum funding available for the funding round is £9 million.

What do you mean by 'co-funding'?

To demonstrate institutional commitment to the development and long-term retention of research talent, host organisations are expected to contribute direct and/or 'in-kind' funding to support the programme.

For more information, see 'Co-funding' section (pages 5 to 6).

Can I copy and paste into the online application forms?

You can copy and paste into the online forms from other sources. A blank Word version of the form is available if you wish to use this during the development of your application. However, please be aware of the maximum word counts in the application form, as only text up to these limits can be pasted into the online form.

My application is ready by the deadline, but my Head of Department/Finance Authority has yet to confirm the declaration, can I still submit the application?

No, you need to allow enough time before the deadline for your application to receive the necessary approvals by your institution. If necessary, you can resend the invite to the Head of Department/Finance Authority to prompt them to approve the application. The 'submit' button will only appear once all declarations have been confirmed.

Can I amend my application after it has been submitted?

In some circumstances, we may 'roll back' the application to allow you to edit it, but only if it is resubmitted before the deadline. However, you will need to arrange for your institution to approve the application again and the declarations must be confirmed before you can resubmit the application. If you need to amend your application, please email research@ycr.org.uk

What if I need to revise the application after the submission deadline? Who do I contact if I have any queries?

Revisions are not usually allowed after the submission deadline, but applicants may email research@ycr.org.uk to discuss it with us.

When will I find out if my proposal has been funded?

You will be notified in April 2027 whether your application has been successful or not.

Who reviews the applications?

Independent, external reviewers provide written reviews of applications. The Research Advisory Meeting will involve a specially convened panel to review applications and feedback from written reviews. Panel members will comprise both scientific expert and stakeholder (lay) expert members, therefore, it is important that certain sections are written in a style appropriate for a lay audience.

What is Patient and Public Involvement and Engagement (PPIE)?

PPIE refers to the inclusion of patients and/or the public in the design and delivery of the research project, and dissemination of the findings.

What do you mean by 'inclusive research'?

The Charity is committed to supporting research that reflects the diversity of the population it serves. Inclusion in research means ensuring that people of all backgrounds, regardless of age, ethnicity, gender, disability, socioeconomic status, or geographic location, have equitable opportunities to participate in and benefit from research. Applicants should describe how their study will proactively address barriers to participation and ensure that underrepresented groups are considered in the design, recruitment, and delivery of their project. This helps improve the relevance, reach, and impact of cancer research across Yorkshire.

What costs can I include?

As a member of the Association of Medical Research Charities (AMRC), we only pay for the direct costs of research.

For applications from Higher Education Institutions (HEIs), overheads, estates and indirect costs will not be covered. Some of the indirect costs of research are supported in partnership with Government through the [Charity Research Support Fund \(CRSF\)](#). Click [here](#) for more information on charity funding and universities.

Non-HEI applications should only include direct costs related to the project. Click [here](#) for further information on charity funding and the NHS.

Can I cost in my time, as a Principal Applicant or Co-applicant, on the project?

Salary costs for applicants or additional staff may only be included if they are a directly incurred cost. Applicants or staff whose salary is already paid from other sources (e.g. by the University, NHS Trust or another grant) must not be included.

Why do you ask if I will be employed beyond the proposed end date of the Award?

We need to know that staff will be in post for the duration of the Award to ensure completion of the project. Should personnel changes be anticipated within the timeframe of the Award, we need to know who will be taking over responsibility for the project.

I have asked my co-applicants to participate but they cannot access the system

If you have invited a colleague to collaborate on the project using the participation tab but the link is not working, you may need to revoke their invitation and reinvite them. They must click on the link to participate within 14 days of receiving the invitation email or it will expire. If the issue continues, please try an alternative email address after revoking the initial invitation. Ensure that you allow enough time for co-applicants to complete their contributions, as you will not be able to submit the application unless all invited co-applicants have clicked the 'Finish contribution' button.

Appendix 1: Cancer type ranked by life years lost

	Life Years Lost (2024) ^{1, 2}		Incidence (2022) ³		Mortality (2024) ¹		Percentage attributed to preventable factors ⁴	Percentage diagnosed at early stage (2022) ⁵	1-year survival (to 2023) ⁶	5-year survival (to 2023) ⁶
	Rank by number of life years lost	Estimated number of life years lost	Rank by number of cases	Number of cases	Rank by number of deaths	Number of deaths				
Lung	1	39,841	2	4,916	1	2,994	78.8%	35.8%	46.9%	21.9%
Bowel	2	19,850	4	3,865	2	1,481	54.1%	47.2%	79.6%	60.3%
Breast	3	16,531	3	4,771	4	988	22.9%	86.1%	96.0%	85.6%
Pancreas	4	12,139	10	1,022	5	891	31.2%	28.8%	28.2%	9%*
Oesophagus	5	9,829	13	830	6	705	58.7%	16.9%	46.9%	18.3%
Liver	6	9,478	14	818	7	704	2.5%	n/a	40.1%	15%*
Prostate	7	9,225	1	5,380	3	1,054	n/a	45.7%	97.0%	89.0%
Brain	8	8,754	6	1,670	9	450	48.3%	n/a	44.5%	16%*
Head and neck	9	6,111	8	1,217	11	431	n/a	44.2%	n/a	n/a
Ovary	10	5,949	16	784	13	372	48.6%	38.0%	67.3%	32.2%
Leukaemia	11	5,684	12	917	10	441	53.1%	n/a	n/a	n/a
Non-Hodgkin lymphoma	12	5,345	11	1,014	12	430	12.0%	n/a	n/a	n/a
Bladder	13	5,116	5	1,931	8	515	33.5%	68.0%	71.3%	53%*
Kidney	14	4,712	9	1,151	14	334	3.4%	60.4%	83.2%	69.1%
Stomach	15	4,238	18	468	15	313	11.1%	n/a	50.4%	30%*
Malignant melanoma	16	3,226	7	1,649	17	221	34.4%	n/a	97.8%	92.0%
Multiple myeloma	17	2,971	17	508	16	260	86.8%	n/a	83.3%	56.6%
Uterus	18	2,918	15	807	18	198	13.6%	77.8%	88.6%	75%*

* England data as Yorkshire data unavailable

¹ [Mortality statistics - underlying cause, sex and age, Nomis](#) (Yorkshire data)

² [National life tables – life expectancy in the UK: 2022 to 2024, ONS](#) (UK data)

³ [Cancer registration statistics, NDRS](#) (Yorkshire data)

⁴ Brown, K.F., et.al., 2018. The fraction of cancer attributable to modifiable risk factors in England, Wales, Scotland, Northern Ireland, and the United Kingdom in 2015. British journal of cancer, 118(8), p.1130. <http://www.nature.com/articles/s41416-018-0029-6> (England data).

⁵ [Case-mix Adjusted Percentage of Cancers Diagnosed at Stages 1 and 2 in England, NHS England](#) (Yorkshire data)

⁶ [Cancer Survival in England, cancers diagnosed 2018 to 2022, followed up to 2023](#) (Yorkshire data where possible, * indicates that England data has been used where Yorkshire data is unavailable, n/a indicates that this cancer grouping or time period is not available)