

Section A: Official Development Assistance (ODA) and GCRF strategy

The strategy

1. Summarise the key aspects of your three year **strategy for development related and GCRF research activity**, including:
 - a. Your institution's strategy and priority objectives for all development related research activity funded through all sources for three years from 2018-19.
 - b. A summary of the key aspects of your three year strategic plan for QR GCRF, in light of the criteria and objectives for the GCRF outlined in the guidance.
 - c. How activity funded through QR GCRF fits into your broader strategy and priorities for all development related research activity.
 - d. How activity funded through QR GCRF relates to the UK strategy for the GCRF.¹
 - e. How your development-related and GCRF strategies relate to your wider institutional strategy for using QR.
 - f. Likely key barriers and enablers to implementing your strategy.
 - g. The key activities by which you will realise your objectives, such as capacity and capability building; mono-disciplinary, interdisciplinary and collaborative research; generating impact from research; meeting the full economic cost of GCRF activity funded through other sources; rapid response to emergencies with an urgent research need; and pump priming.
 - h. The main developing countries, included in the Development Assistance Committee (DAC) list, which you intend to collaborate with.

King's College London has had significant success with GCRF and related funding streams, with over £23M awarded in 2017-18. Our strategy for use of the GCRF QR allocation through 2021 will:

- **strengthen our systems to manage and monitor these awards;**
- **increase our academic capacity to work with existing global partnerships and establish new ones; and**
- **improve our pipeline for further ODA-related funding.**

a. Strategy and priority objectives:

King's College London has an excellent track record of partnership working in development. Through an active programme of research in global health and development, along with specialist units and institutes, King's has particular expertise in

¹ UK Strategy for the Global Challenges Research Fund,
<http://www.rcuk.ac.uk/funding/gcrf/challenges/>

health systems strengthening, conflict and post-conflict settings, and sustainable development. Over the next three years, this strategy seeks to build on this strength through three main priorities:

Maintain and expand research excellence in interdisciplinary development research, combining the expertise of the King's health schools and the depth of activity in the social and natural sciences.

Develop capacity in global research, both within the institution to plan, develop and deliver global development research, as well as within low- and middle-income partner institutions to create and lead research activity.

Support expansion of our work in global health, including the development of the King's Global Health Institute and the King's Centre for Global Health, including reinforcing and expanding existing country partnerships as well as establishing novel ones.

b. Key aspects of strategic plan:

This QR funding will be used to support existing and future institutional initiatives and commitments, including:

Pump priming and partnership building: we will support King's researchers to seek out and establish relationships with new partners in low- and middle income settings, as well as fostering relationships with existing partners, through an internal funding scheme. Additionally, we will build academic research capacity in partner institutions through a short-term placement programme for doctoral and early-career researchers, to establish academic leadership of the future in developing settings.

Support for Global Health partnerships: funding will be used to maintain and broaden our activities with Global Health country partners in Sierra Leone, Somaliland, and our newest centre in the Democratic Republic of Congo. The King's Centre for Global Health has an excellent track record in partnership working, particularly with partner-led research activity and service delivery, and this funding will boost academic capacity to broaden the research base.

Support for skills training and development: Institutional matched funding provided to ODA-compliant large grants from external funders will be coordinated, with the aim of creating doctoral cohorts out of matched studentships and aligning research contributions. Furthermore, by supporting our ongoing commitments to postgraduate research training, the funds will maintain our activity reducing fees and providing some maintenance funds to students from several developing countries to pursue doctoral studies at King's.

Sustainability of existing and future development research at King's: Funds will enable the development and execution of research grants in global health and development, including support for recovery of full economic costs, sustaining infrastructure investment including administrative support, and

supporting institutional match funding for doctoral studentships and academic posts.

c. Broader strategy and priorities:

Activity funded through the GCRF QR will support our broader strategy of research and service, through capacity development, systems strengthening, and sustainable global partnerships. Development research at King's plays a central role in several aspects of the current Vision 2029 institutional strategy:

Educate to inspire and improve: Activities including doctoral training for both UK and overseas students, including fee discount and waiver programmes as well as institutional support for doctoral training within GCRF grants and skills and capacity training for doctoral students and early-career researchers at partner universities. Exposure to King's research also provides unique training opportunities in clinical medicine, to expand research and delivery in global health.

Research to inform and innovate: Excellent research activity in global health and development is focusing on health systems, access, and continuing care, to benefit low-resource and vulnerable populations in several partner countries. The QR funding will support ongoing institutional investment in this activity, enabling academic staff to maintain existing partnerships and create new ones, and to encourage partner-led research activity for which King's is a Northern collaborator.

Serve to shape and transform: Our focus on systems strengthening in partner institutions, both through research collaboration and through skills training and administrative support, is building research and academic capacity in partner institutions and enabling Southern-led knowledge exchange. The QR stream will support this through current and future research activity, as well as seed funding for networking and partnership building.

An international community that serves the world: King's ethos is one of openness and interaction, developing and enabling strong international partnerships and supporting a globalised student and staff body. Support both for research excellence in development and the skills and training provided through the QR stream will support our wider international strategy.

d. Relationship to UK strategy for the GCRF:

King's strategy for the GCRF QR stream fits within the overall strategy for GCRF in several key areas:

Equitable access for sustainable development: King's research seeks to address systems strengthening through improved training and skills development, widening access to the most vulnerable or least addressed populations, and enabling partnership support to create academic and administrative leadership for future research activity. Our work in global health is primarily in **sustainable health and well-being**, with additional work in **inclusive and quality education**, particularly tertiary training in medicine and allied health professions.

Sustainable economies and societies: Over the next three years, we seek to broaden our funded research activity through seed funding and partnership building support, to encourage a broader range of activities in global development research. King's has expertise in climate change and sustainability research, including collaborations in the NERC National Centre for Earth Observation, which along with expertise in global health surrounding acute disease outbreaks, will contribute to research around **resilience and action on short-term environmental shocks and long-term environmental change.**

Human rights, good governance and social justice: King's has considerable strengths in conflict and post-conflict studies, both in terms of war and security studies as well as global health and intervention in forced migration, refugee and conflict settings. Our conflict and health research group, straddling the faculties of Life Sciences and Medicine and Social Science and Public Policy, is at the forefront of studying healthcare burdens, interventions and delivery in fragile states and conflict zones, working to **understand and respond effectively to forced displacement and multiple refugee crises.** We anticipate the Partnership Seed Fund we propose will support knowledge exchange projects designed to support peace education and reconciliation studies in post-conflict settings, aiming to **reduce conflict and promote peace, justice and humanitarian action.**

e. Relationship to institutional use of QR

The main QR funding to King's is used to support research activity throughout the college, where much is divested directly back to the Faculties to support infrastructure and future investment, including full economic cost recovery and institutional support through matched funding to larger grants. Centrally, our QR supports a seed funding programme, King's Together, as well as several matching scholarship programmes for international partners including the USA and Singapore. It is also used to fund academic recruitment and startup funding.

The use of the GCRF QR stream is closely aligned to this, in that the activities planned are similar, and based on known models that have worked well in non-ODA compliant contexts. We will use a portion of the allocation to support current and future GCRF and related grant activity, to support and encourage research excellence through institutional match funding and cost recovery. The Development Partnership Fund is partly modelled on King's Together, which supports seed and strategic grants across King's faculties to support interdisciplinary working. We anticipate that a similar scheme to encourage cross-Faculty interaction to support development research, build new partnerships, and increase research capacity will provide a similar boost to research participation, with an emphasis on ODA-compliant working. Moreover, the use of the GCRF QR to support new academic posts in Global Health, supply funds for scholarship programmes, and support sandwich placements for students in partner universities, will support broader and more international research engagement across King's.

f. Likely key barriers and enablers:

Enabling factors:

King's has a **broad range of academic leadership, skills and expertise in global development research**, including significant programmes of work in global health, social medicine and medical anthropology, global mental health, war and security studies, policy, and law.

King's has an **excellent track record of partner-led global partnerships**, with a research agenda set by the local partners and supported by King's researchers, rather than focused on solely Northern-led ideas and projects.

King's has **institutional support for global development research at the highest level**, including significant support within the Vision 2029 strategy for the university.

Possible barriers:

There is a **need for increased academic leadership capacity in LMIC partners**, including provision for master's and doctoral training, as well as continuing professional development, to support and maintain our partner-led approach to development research. Our strategy aims to mitigate this through increased access to skills training and career development for LMIC partner students, as well as support for doctoral research, alongside increased collaborative research activity.

We also have a **need to join up ODA-related activity around King's**, to streamline administrative processes and procedures, effectively monitor institutional and project risks, and to combine support for doctoral students supported by matched funding on individual grants into a cohesive doctoral training cohort. To mitigate this risk, our strategy includes a coordination and monitoring post, which will support due diligence, reporting, coordination and evaluation of ODA-related grants and projects at King's.

A third underlying risk is the **sustainability of existing and new partnerships**, including local instability as well as lack of capacity or capability to engage with research. To mitigate this, we will be working closely with existing partners to provide enhanced training opportunities and administrative support, and will seek to build new partnerships with a willingness to engage with the partner institution across academic and administrative structures and needs.

g. Key activities: (Indicative funding levels for 2018-19)

Pump priming and partnership building (£180K)

Seed funding (£130K). We propose to create a Development Partnership Fund, allocated £130K a year from 2018/19. This will support academic and research staff with small startup grants, to establish new partnerships in LMIC countries, or with novel

institutional partners in settings where King's already has a research or support presence. Funding can be used for travel, networking, or pilot and feasibility studies. The fund will also be able to consider bids for research-related capacity development, including plans for short-term researcher exchange schemes, career skills training, and faculty site visits. Several potential bids for this are already in development, and we anticipate the fund to be competitive; it will remain a priority into 2019-20 and 20-21, and would be one of the proposals that would be directly scaled up in response to an increase in our indicative allocation in any given year.

Sandwich placements (£50K). This programme will support doctoral students and postdoctoral researchers, registered at or employed by LMIC partner institutions, to spend 2-3 months at King's in an intensive programme of academic career skills development, including project and laboratory management, grant and manuscript preparation, and leadership. The aim of the scheme is to strengthen current and future research activity, increase the pipeline of development for new academic collaborators able to lead future research projects and programmes, and reduce reliance on Northern universities for doctoral and early career skills training. We anticipate being able to reach at least 5 students in the first year, and up to 10 in 19/20 and 20/21.

Support to sustain Global Health partnerships: (£700K)

Support for direct research activity, including two new academic posts (£350K). The King's Centre for Global Health sustains three international partnerships, with Sierra Leone, Somaliland, and Democratic Republic of Congo. All three participate in research activity funded from a range of charitable and government sources, with a pressing need to increase academic capacity to support further research programmes in health systems strengthening and health delivery. This contribution will support two new members of academic staff at King's: a Director of Global Health Partnerships at the associate professor level, and a senior clinical lecturer. In addition, support from the QR stream for direct research activity will contribute to indirect and overhead costs, enabling the Centre's long-term sustainability within King's. This support would continue to 2021.

Support for indirect and applied research, including impact delivery, monitoring, and evaluation (£350K). KCGH frequently collaborates with both country partner institutions and King's researchers, as well as researchers from other UK institutions and UK and international NGOs, on projects related to service delivery, including monitoring and evaluating impact of development interventions and sustainability of partnership activities, including health systems strengthening schemes as well as professional education for improved leadership in partner institutions. This investment from the King's QR stream would ensure this is sustainable over the medium term, contributing to the staff time (academic and administrative effort) needed to pursue and maintain funding streams for this work from DFID, British Council (SPHEIR) and other government and charitable sources, as well as contributing to indirect costs not covered by grants. This support would continue to 2021.

Support to sustain direct investment in global research training (£230K)

Postgraduate research exchange programmes (£230K). King's supports three postgraduate exchange programmes, which provide contributions to fees for doctoral research students to obtain degrees from King's prior to returning to their home countries. The programme supports the development of early career researchers, increasing capacity for research leadership and laying the groundwork for future collaborative activities between programme alumni and King's staff. We will use the funding to sustain contributions to:

- the Commonwealth Developing Countries scholarship scheme (20% contribution to fees, six students a year);
- Mexico (CONACyT) (30% contribution to fees, six students a year);
- Chile (BECAS/CONICYT) (15% contribution to fees, £500 first year allowance, ten students a year);
- Ecuador (Senescyt) (10% contribution to fees, five students a year);
- Turkish Embassy programme (overseas fees, six students a year).

Sustainability of existing and future GCRF and other ODA research (£1.25M)

FEC shortfall and institutional match on major GCRF projects funded in 2017-18 (£665K). King's has recently been awarded three major GCRF projects, two under the Growing Research Capability (RCUK) call and one Global Health Research Unit (NIHR). All three are global health-related, were co-designed with partners in developing-country research institutions, and build on King's expertise in health systems strengthening and care delivery for improved patient outcomes in low-resource or conflict-affected settings. The King's investment in these projects includes significant institutional match, including studentships, academic posts including a new Lecturer in Global Health and Social Medicine, administrative and research support, as well as contributions to the directly allocated staff time on the projects.

PRECISE (MRC, von Dadelszen, £7.9M, £2.1M to King's, DAC partners Mozambique/Gambia/Kenya): The PRECISE (PREgnancy Care Integrating translational Science, Everywhere) Network: a sub-Saharan network project aims to improve maternal outcomes through improved diagnosis and treatment of placental disorders, including early identification of risk factors and better intervention practices.

R4HC-MENA (ESRC, Sullivan, £5.9M, £2.3M to King's, DAC partners Palestine/Lebanon/Turkey/Jordan): The RESEARCH FOR HEALTH IN CONFLICT (R4HC-MENA): developing capability, partnerships and research in the Middle and Near East (MENA) project seeks to develop new partnerships and knowledge to expand capacity for healthcare research and delivery in conflict-afflicted areas and refugee facilities. The project focuses on support for ongoing and chronic conditions, particularly cancer and mental health care.

ASSET (NIHR GHRU, Prince, £6.9M, £2.9M to King's, DAC partners South Africa/Zimbabwe/Sierra Leone/Ethiopia): The ASSET: heAlth System StrEngThening in sub-Saharan Africa (SSA) project is working to improve patient outcomes by working toward improved strategies for developing evidence-based practice guidelines in continuing primary, maternal, and surgical care. The ASSET platform for ongoing research with King's and partner institutions is also forming the basis for the King's Global Health Institute (KGHI) led by Martin Prince, the principal investigator and the Assistant Principal for Global Health.

Additional ODA-compliant grants including EU and UK sources (£575K). This covers the full economic cost shortfall on major ODA-compliant EU research projects, including DiaDev (simple and portable diagnostic devices in global health), ISOOKO (civic engagement platforms for peace education and reconciliation in post-conflict settings), and MENARA (geopolitical analysis of domestic political transformations, conflict, and regional interactions throughout the Middle East). Additional RCUK ODA grants include an MRC-AMR award, as well as MRC and STFC GCRF Foundation awards.

New post for compliance and recording of ODA research, data collection, and monitoring of outcomes (£50K). To maintain our success in this area, we will create a new post in the research management and innovation directorate, which will combine some of the work in pre-award and awards management that is needed to facilitate the setup and management of ODA-related research grants. This will include maintaining an up to date record of the necessary due diligence and partner assessment documents, a current institutional risk register, a record of ODA-related grant activity and current institutional contributions. Moreover, the postholder will work to coordinate institutional match to medium- and large-scale GCRF and related ODA-compliant grant applications, to ensure these are made in line with this strategy. A particular example would be coordination of matched doctoral studentships, which would provide an opportunity to share training and skills development for development research PGRs. Support would continue from the QR stream through 2021.

h. Partner countries:

Current Global Health Partnerships: Sierra Leone, Somaliland, and Democratic Republic of Congo

Countries with current and planned research and training activity through 2021: Ethiopia, South Africa, Zimbabwe, Gambia, Mozambique, Kenya, Lebanon, Jordan, Palestine, Turkey, India, Nepal, Malawi, Uganda, Rwanda, Brazil, Mexico, Ecuador, Chile, Ghana, Nigeria, Guyana, West Indies

New planned and future partnerships and collaborations during this strategy period: Colombia, Sri Lanka, Thailand

2. Provide details of the main intended **outcomes and impacts** of your strategy.

Working within King's: We will use some of the resources in the GCRF QR stream to provide enabling and underpinning administrative support for ODA research. This will include a new post for compliance and monitoring, which will act as a central coordinating point for ODA-related grant applications and award setup, as well as monitoring and evaluating ongoing projects, compliance with local and partner-based ethical and regulatory requirements, and reporting on lessons learned.

Outcomes:

Coordinated institutional support for medium and large grants, particularly to ensure a joined-up approach to new academic posts and recruitment of students into a common doctoral training cohort.

Maintenance of institutional documentation in a central register, including due diligence returns, possible risks, project evaluations, and lessons learned.

Impacts:

Greater efficiency surrounding award setup process; increased cross-disciplinary working, particularly for student training; improved reporting, particularly surrounding due diligence audits and aid transparency (IATI); more effective intra-university use of matching resources.

Working around King's: Our strategy is designed to address some of the common barriers to entry for ODA-related research. In particular, the use of the Development Partnership Fund will support researchers to work across disciplinary boundaries for development research questions. Moreover, the use of shared/coordinated institutional support will provide strengthened bids as well as shared student supervision or cross-faculty appointments.

Outcomes:

Researchers in faculties across King's will be able to work with and build on existing development research, such as collaborating with existing partnerships on novel questions

Academic posts and students will be shared or coordinated across disciplines and faculties

Increased application rates for GCRF and related grants, given the earmarked support for cost recovery and institutional commitment alongside support for partnership building and pilot studies.

Impacts: Capacity for excellence in development research enhanced; scope of global partnerships, as well as thematic areas and disciplines, widened to include new countries and institutions; better interdisciplinary working.

Working beyond King's: Through direct and indirect support to partner countries, as well as investment to improve academic capacity for research in global health in particular, we will be able to support a broader range of research activity, and directly strengthen existing partnerships as well as forge new ones. With our expertise in systems strengthening in particular, as well as the planned activities in doctoral and skills training, we are well placed to support and encourage Southern-led research and collaboration through partnership working.

Outcomes:

New partnerships, either within existing country partners or with novel ones, can be forged more easily, with networking and pilot studies supported

Skills training for doctoral and early-career researchers will support increased academic capability, capacity and leadership for future research projects

Coordinated cohorts of doctoral students supported by match funding to GCRF grants will create an informal alumni network in development research at King's, for students from the UK as well as partner countries.

Impacts:

Increasingly, grant bids led by Southern partner researchers with King's co-investigators; outputs led by Southern partner authors; increased research capacity and leadership in partner institutions.

Management of GCRF

3. How will your HEI **monitor** and **evaluate** its progress and compliance in ODA and GCRF activity, including assessing geographical distribution of activity, outputs, outcomes and economic and social impacts?

Please describe the policies, procedures and approach you have in place to measure progress, evaluate outcomes, identify lessons learned, and ensure ODA compliance.

King's College has been working to develop effective systems and policies to manage and encourage GCRF and other ODA-related research, reflecting the increase in funding from these sources as well as changing approaches to policy and terms from RCUK and other funders.

At the strategy and bid submission stage, we have implemented robust due diligence procedures for all international partners not already eligible for research council funding. In practice, this has involved significant data collection including a detailed questionnaire

and submission of records. Due diligence returns from partners are assessed by a senior management committee, comprising input from risk, finance, policy and research strategy. This process enables King's professional services to work with the academics and researchers to ensure that projects are designed to be ODA-compliant, and that the budget and project plan are designed with the needs of LMIC co-investigators at the forefront of research activity. On receipt of a successful award, ODA compliance is again assessed at the awards management phase, and subcontracting and payment schedules are determined with the partner to provide the most effective support.

As the major GCRF bids at King's have begun quite recently, we are establishing our procedures for assessing project outcomes and overall effectiveness. Each project has a detailed plan for ODA compliance and planned outcomes and impacts, and dedicated project managers monitoring progress and interacting closely with both King's and partner academics and collaborators. Smaller scale projects benefit from project management expertise in the Faculty receiving the award, and all ODA-related projects can draw on the experience of the King's Centre for Global Health, which has dedicated staff for monitoring and evaluation of both research and programmatic/service delivery projects in their country partnerships.

Oversight of King's development research:

Several structures are in place to review and monitor global development research at King's, and identify areas of strategic alignment. Centrally, a committee has been created to review due diligence returns and identify institutional risks, and the remit of this committee may broaden to wider project management oversight as the main GCRF projects take shape.

In Global Health, the King's Global Health Institute Executive Advisory Board, comprised of senior faculty in global health along with professional services staff in research strategy and project management, is led by Professor Martin Prince, the Institute Director and lead on the ASSET GCRF/NIHR GHRU project. This board advises on strategic direction within King's, including monitoring geographic distribution of activity and advising on new and existing collaborations, as well as identifying cross-disciplinary avenues for collaborative work within King's itself.

A related advisory group is the King's Global Health Partnerships Strategy Delivery Board, which advises and oversees the implementation of a 10-year strategy and business plan for the three Global Health Partnerships, and engages with partners across the King's Health Partners Academic Health Sciences Centre, including partner NHS trusts.

The bulk of current ODA related research, and the three major grants awarded in 2017-18, are within the remit of the Global Health advisory structures. We will monitor how these are able to advise on project design and collect and disseminate information on impacts achieved and lessons learned. Depending on the shape our ODA-related research portfolio takes from 2019, we will revisit the composition and design of the due diligence committee, and review whether strategic oversight for global research activity beyond global health is needed.

This strategy for the GCRF QR stream will contribute to the creation of a new post within the Research Management and Innovation Directorate, which will be centrally responsible for oversight of ODA-related research activity. This role will:

Provide a single point of contact for ODA-related research activity during award setup, including collecting due diligence returns and supporting their timely assessment;

Create a central institutional risk register for ODA-related projects, including non-financial risks to project completion and effectiveness;

Monitor progress on GCRF and related projects, by working closely with project managers, awards management, and academic staff to monitor progress and prepare regular reports, and ensuring project activity continues to be ODA-compliant;

Ensure that projects are within all necessary ethical and regulatory compliance, including local assessment from King's institutional committees as well as any requirements in LMIC partner settings;

Prepare interim and final reports for senior management, research strategy and development, and awards management teams, particularly to highlight any lessons learned from GCRF projects and to identify any internal processes that need to be streamlined or updated for more effective working.

Administer the proposed Development Partnership Fund, including secretarial support to a senior academic committee.

Measures of success:

The King's Global Health Partnerships have created several key performance indicators for ODA-related research activity, which can be applied more broadly to support the goals of GCRF and related grants. These include:

Partner impact:

People are empowered through support to maximise their capabilities and opportunities.

KPI examples: 10 doctors receiving ward-based mentoring; 14 faculty completing a Health Professions Education diploma

Organisations are strengthened by enabling their development of more effective strategies, processes and accountability.

KPI examples: Revised undergraduate curriculum approved and implemented with KCGH support

Systems are enhanced through integration with better networks, policies and information.

KPI examples: National Medical Education Committee established; National Surgical and Anaesthetic plan drafted and approved

Critical mass of partnerships is established to enable South-South learning and overall impact.

King's impact:

Co-development: projects are designed with King's and LMIC input, and provide tangible mutual benefit through education and training and staff skills development.

KPI examples: enhanced options for electives and placements; support for doctoral students and early-career researchers to gain experience in development research

Engagement: Opportunities are available for a wide range of people to engage in partnership working, as volunteers or participants, including academics, managers, alumni and the community.

KPI examples: project management and professional services staff encouraged to visit partner sites and country teams, to provide capacity development and skills training

Section B: Use of QR GCRF 2018-19 allocation and future QR GCRF priorities

4. Please complete the table in Annex A2 detailing the expected spending and activities for QR GCRF in the academic year 2018-19. Note that the total QR GCRF spending must equal the indicative allocation (available in Annex C), and all activities must be ODA-compliant for strategies to be assessed as ODA-compliant overall.
5. Please add here any explanatory notes on how you have completed the table in Annex A2 that will help inform assessment of ODA compliance.

Much of the research activity supported by the GCRF QR stream reported in Annex A2 is funded by GCRF or related schemes, and have been assessed as ODA-compliant at the point of application and award. Grants that are not supported by funding streams which require ODA compliance, including the ODA-compliant EU awards, have been assessed for ODA based on their primary research beneficiaries. These projects have their primary impacts in developing country contexts, and have been designed and conducted with local research partners to ensure the research outcomes benefit these contexts.

Activities supported by the QR stream that are not linked to specific projects have been designed to primarily benefit DAC list country partners, either directly through research infrastructure investment and training and exchange programmes, or indirectly through increased capacity for ODA research in the UK. The Global Health Partnerships in particular provide direct and indirect support in their partner countries, and their activity is ODA-compliant. The use of the QR stream to support internal King's structures, including a central administrative post and a seed funding scheme, will provide direct benefit to developing country partners through increased activity and ability to support travel, training, and project development.

6. How would your **priorities and activities** for 2018-19 QR GCRF change if the funding level differs from that outlined in indicative allocations? Please include detail of how priorities will change with increases and decreases to QR GCRF funding, and details of how each priority meets ODA criteria.

If the QR allocation is decreased for 2018-19, King's would first prioritise support for existing research activity, particularly the institutional commitments made to our major GCRF-related grants, and the central post for ODA monitoring and compliance. The commitment for institutional match funding for studentships and academic posts for these

large programmatic activities would take precedence, followed by the recovery of the full economic costs of the research, to underpin our ability to complete these projects successfully. Each project is ODA-compliant as assessed at the time of award, with the bulk of the funding going to LMIC settings and partners, and with the outcomes likely to benefit the most vulnerable populations in low-resource settings. Each also supports capacity and capability development in the partner institutions, and contributes to long-term, sustainable interventions in a range of global health fields.

The second major priority in case of a decreased allocation would be to support and reinforce our Global Health Partnerships. The funding proposed in this strategy is both to underpin existing activity (£530K) and create two new academic posts to build research capacity (£170K); if the allocation was reduced, we would prioritise support for existing activity. This work is ODA compliant, as it contains significant infrastructure and investment of staff time and resources into three low-resource settings, contributing to development of both research capacity and service delivery in health systems strengthening and healthcare access for vulnerable populations and low-resource, politically fragile settings.

In the event of an increased allocation for 2018-19, we would expand our proposed new initiatives for the QR stream. First, the Development Partnership Fund would be increased to £500K per year, to support more strategic pilot initiatives, seed more new partnerships, and otherwise build up our research capacity for further ODA research. Projects submitted to this fund will be assessed for ODA compliance at the time of application; we anticipate that the minimum requirements would be co-design with an LMIC partner for work based on the needs and capacity of the partner, in an ethos similar to the partner-led working in the Global Health Partnerships.

If further allocation was available after this increase, we would support initiatives proposed by King's staff as part of a wider consultation in the preparation of this strategy. These would likely be invited to participate in the Development Partnership Fund if no further funds were available. An increased allocation would potentially support:

- A doctoral training cohort in global health, as part of the King's Global Health Institute: one UK and one partner university student recruited per year, for a cost of £60K in 2018-19 (Sierra Leone/Ethiopia);

- Curriculum development for continuing professional education in the Global Health partnerships, to provide academic skills capacity development in partner institutions (Somaliland/Sierra Leone/Congo/Ethiopia);

- Knowledge exchange projects and short visiting fellowships to study peace and reconciliation as well as institution building (Colombia/South Africa).

All three proposals are considered ODA-compliant, as the main beneficiaries are based in LMIC countries, and have been designed with LMIC development and welfare as the primary goal.

7. Based on indicative funding allocations, what are your **priorities** for QR GCRF activity in 2019-20? Please include detail of how priorities will change with increases and decreases to QR GCRF funding, and details of how each priority meets ODA criteria.

For 2019-20, if the indicative funding was to remain at a similar level, the QR stream would be used to support and maintain our portfolio of ODA-related research and to further expand our activity in GCRF and related calls. The aim of the Development Partnership Fund beginning in 2018-19 is to develop and improve our pipeline of partnerships and seed research activities, to create projects and novel research groups which can leverage larger project and programme funding. Based on this planned activity, along with our existing track record for winning ODA-related grant funding, we would anticipate that our need for institutional match and cost recovery for these grants would remain a priority in 2019-20.

The post for central monitoring and coordination of ODA-related research grants would also continue to be a priority to support in Year 2, particularly as new applications and awards would both require risk analysis and due diligence, and also would provide an opportunity to coordinate studentships and other institutional commitments, to create a doctoral cohort in development research across faculties at King's.

Similarly, the Global Health Partnerships represent a long-term commitment for King's, and we would anticipate maintaining a similar level of funding to carry through into 2019-20. In particular, the two new academic posts from the first year would need continued support, and depending on the additional grant funding this increased capacity was able to attract, these posts would also attract additional support for impact monitoring and evaluation, as well as overhead costs in the country offices, in addition to the proposed funds for this in 2018-19.

We would also prioritise continuation of the Development Partnership Fund, and if the cost recovery and match on new grants was lower in 2019-20, we would prioritise moving funds to this, to encourage more pilot funding and partnership development to improve our competitiveness and access to larger awards. A further priority would be to continue the sandwich student placements across all years, although the programme would be reviewed for effectiveness and any lessons learned would be implemented in a redesign before renewal in 2019.

In the event of a decrease in QR allocation for 2019-20, we would again prioritise supporting existing grant activity as well as any further GCRF and related awards arising. Furthermore, ongoing support for the Global Health Partnerships would be the next major priority for investment, including maintenance of increased academic capacity for research. Funds remaining after these cost-recovery and maintenance investments would be earmarked to support the central ODA administration post, and the Development Partnership Fund. In the event that our cost recovery and institutional match were lower due to fewer grants awarded, we would conduct an internal review of

our administrative systems, including monitoring and evaluating past projects, and the Fund to determine whether success rates can be improved with targeted intervention.

In the event of an increase in QR allocation, we would work to support initiatives that were proposed for 2018-19 that remained unsupported, or that came in through the Development Partnership Fund. This could include increased doctoral training, with the aim to create a Doctoral Training Centre in development research that could support an annual intake of 2-5 students a year, from UK and LMIC countries. We would also work to support our doctoral alumni from past projects as well as 2018-19 sandwich placement students, doctoral and early-career researchers in LMIC partner universities, to develop their academic careers to become the principal investigators on new Southern-led and designed research activities. The Development Partnership Fund, if the allocation increased significantly, could then be used to support projects with LMIC investigator leads, to support feasibility and pilot research within partnerships.

Throughout 2019-20, we would maintain our focus for the QR funding on developing capacity within King's to participate in ODA-compliant research activity, as well as creating and fostering increased capacity within the partnerships, both existing and new, to lead or participate equally in this activity. As with our current GCRF activity, ODA compliance would be determined at the point of application, with the ongoing cost recovery investment enabling us to send as much research funding and activity as possible to the LMIC partner institutions. This is a strategy we have followed in our current GCRF bids and we would seek to use the QR stream in this way.

Our training and investment in the Global Health Partnerships are also contributing directly to the welfare and development of LMIC partner countries, and the primary beneficiaries of our work in health systems strengthening, sustainability, and post-conflict reconciliation are some of the most vulnerable populations in low-resource settings. We are thus confident that our QR stream activities would continue to be ODA compliant, and we would maintain our ability to monitor and evaluate this work centrally to ensure this.

8. Based on indicative funding allocations, what are your **priorities** for QR GCRF activity in 2020-21? Please include detail of how priorities will change with increases and decreases to QR GCRF funding, and details of how each priority meets ODA criteria.

Moving forward into 2020-21, we would continue to place an emphasis for the QR stream on cost recovery and institutional match, central administrative support for ODA research, and support for the Global Health Partnerships. If activity in ODA research continues for three years on its current trajectory at King's, we would anticipate that these core investments from the QR stream would be needed to sustain this activity and maximise the amount of research funding available to LMIC partner organisations.

With added research capacity in the Global Health Partnerships in place for two years, as well as two years' worth of alumni from our sandwich placements and a maturing initial

doctoral cohort, we would anticipate that the Development Partnership Fund would continue to be a significant priority for generating new partnerships, strengthening existing ones, and building pilot and feasibility studies toward larger project and programme funding. We would, however, expect that its eligibility requirements would shift at this point, with outreach to LMIC partners that, through ongoing affiliation with King's and increased capability and capacity development for academic leadership resulting from the previous two years of QR investment. The Fund would broaden out to welcome proposals from King's partner academics housed in LMIC organisations and institutions, to support development of independent and Southern-led research activities.

In the event of a decrease in QR allocation in 2020-21, we would again focus our support on institutional contributions to grant funding, and core and extended support for the Global Health Partnerships, as priorities over other uses. Core administrative support for ODA research and the Partnership Fund would continue to be priorities. In the event that cost recovery was lower from grant activity due to lower success rates, we would then use the savings to increase the Partnership Development Fund to seed activity with the aim of improving success rates, following a review of current activity and examination of procedures, processes and lessons learned from previous GCRF grants.

In the event of an increase in QR allocation, we would begin to support expansion of the Global Health Partnerships. First, this would take the form of an enhanced footprint in existing partner countries where needed, while maintaining the ethos of partner-led working that has contributed to their success thus far. If there is room and need for expansion of research capacity and activity with Partnership country institutions, we would plan to support this. Second, we anticipate that there will be demand to branch out into countries where partnerships are not currently established. For example, if the plan for knowledge exchange in post-conflict reconciliation in Colombia, proposed above for support in 2019-20 or through the Development Partnership Fund, this could support the creation of a new Global Partnership, following the Global Health model but with a wider academic remit in the social sciences as well as health and related fields. This would increase capacity for ODA-related research in both King's and the partner setting.