

How we judge your application.

Applications are scored against four criteria:

1. Scientific quality
2. Benefit to people living with CHS conditions (or wider population)
3. Benefit to NICHHS (the charity)
4. Value for money

Criterion 2: Benefit to People Living with CHS (and/or the wider public)

Key question:

Does the research matter to people, and is the pathway to benefit believable? Who benefits, how, and when?

Reviewers look for:

- Realistic benefits
- Clear timelines and proportional claims
- Meaningful or justified PPI

- Who is likely to benefit from this research,
- how might they benefit, and
- when are those benefits likely to happen?
- Does this matter to the community?

What your application should show

- Who is likely to benefit from the research, for example people living with CHS, carers, services or the wider public
- What the likely benefits are, described in clear and practical terms
- How those benefits could arise from the study findings, outputs or next steps
- When benefits are likely to happen, using realistic short-, medium- or longer-term timeframes where relevant
- How people with lived experience have informed the study, or why a limited level of involvement is appropriate

Benefits may be direct, indirect or preparatory. Early-stage studies can still score well if they clearly support learning, decisions or readiness that matter to people living with CHS, carers, services or the wider public.

Proportionality

Benefit to people is assessed proportionately. Not every study will lead to immediate change in care or outcomes. Smaller, earlier-stage or exploratory studies can still score highly if they show a credible pathway to useful learning, better decisions, improved services or future impact. You do not need to promise immediate impact, guaranteed outcomes or large-scale system change. What matters is a realistic and meaningful account of who may benefit, in what way, and over what timeframe.



Applications are assessed proportionately, taking account of scale, stage and purpose of the study.

Plain English matters. Your application is read by researchers, non-specialists and people with lived experience. Use clear, respectful language. If a non-specialist cannot understand who the study matters to and why, this is likely to reduce the score.

What reviewers do not necessarily expect

- Immediate impact from exploratory or early-stage studies
- Overstated claims about what the study will achieve
- Direct clinical benefit where the study is only expected to contribute indirectly or over a longer period
- Extensive PPI where a more limited approach is reasonable and clearly justified



All criteria are scored on 11 point scale. This guide is prescriptive and is shared with reviewers. It is intended to show you the range of judgement applied. Reviewers use their own knowledge, experience and expertise to assess the whole application.

Indicative score	Descriptor	Description (illustrative / what this usually reflects)
9–10	Excellent	<ul style="list-style-type: none"> • Compelling, well-grounded benefit for people or communities • Benefits are clear, realistic and meaningful. • Strong link from study outputs to real-world relevance • PPI meaningfully shapes decisions and, relevant involvement throughout • Timelines are highly realistic. • Compelling, well-grounded benefit for people or communities • Benefits are clear, realistic and meaningful.
7–8	Strong	<ul style="list-style-type: none"> • Clear, tangible benefits described. Clear sense of who benefits and when. • Realistic timelines and expectations • Meaningful involvement of people with lived experience or clearly justified limits
5–6	Adequate	<ul style="list-style-type: none"> • Clear sense of who may benefit • Benefits plausible but under-developed or generic • Timelines broadly realistic • PPI or engagement minimal but acceptable, or limited but not fully justified.
3–4	weak	<ul style="list-style-type: none"> • Intended beneficiaries identified, but benefits unclear or unconvincing. • Outcomes poorly described or unrealistic • Little to no evidence of PPI or engagement. • Timelines implausible
0–2	Unsound	<ul style="list-style-type: none"> • Beneficiaries are unclear or absent • Claims of benefit are vague or implausible • No meaningful pathway to benefit identified • Jargon-heavy and disconnected from the needs of the NI public or carers.

High-scoring applications typically:

- clearly identify who is affected,
- use plain, respectful language,
- explain both direct and indirect benefits,
- set realistic timeframes,
- show how lived experience informed decisions (where relevant).



Early-stage studies can score well if they clearly support learning or decision-making that matters to people.