#### Final Report Form

Officer: Fluent Support

Mrs. Leah Pippard

### Section 1 - Background information & main outcomes

#### Original aims and objectives (as given in application)

No Response

#### Have your aims and objectives changed? If so, explain in what way and why

No Response

#### **Summary of your findings (outcomes)**

No Response

#### **Lay Summary**

Please also provide a brief summary of the outcomes in lay/simple language.

No Response

### How will these outcomes contribute to the fight against cardiovascular disease?

No Response

# Do you envisage that additional important outcomes resulting from this grant will appear in the months ahead?

O Yes

O No

## Section 2 - Publications & other outputs

### Publications resulting <u>directly</u> from work of this grant

<u>Do not</u> include publications that are unrelated to the research funded through this grant. We expect all primary research articles reported to comply with our Open Access policy. **The grant reference number should have been acknowledged in all research articles.** 

#### Number of <u>published</u> or <u>in press</u> papers

No Response

#### List of <u>published</u> or <u>in press</u> papers resulting <u>directly</u> from the work of this grant

Please list your publications in the following format - Lead author(s), publication title, journal name, year published, DOI/PMID. Please specify whether each paper is published or in press.

No Response

#### Number of papers in preparation or submitted

No Response

#### List of papers in preparation or submitted resulting directly from the work of this grant

Please list your publications in the following format - Lead author(s), publication title, journal name. Please specify whether each paper is submitted or in preparation. **A reminder - the grant reference number should be acknowledged in all research articles.** 

No Response

#### Other outputs resulting directly from work of this grant

For example, contributions to guidelines or policies, or technologies, tools, databases or other resources created.

No Response

#### Other publications/outputs that have been facilitated or supported by this grant

Please list any other publications or outputs that have been indirectly supported by this grant, indicating for publications whether they are in preparation, submitted, in press or published.

No Response

#### **Dissemination of results**

List where and by whom your findings have been disseminated. This may include conferences and workshops, but may also include other engagement events, for example related to patient & public involvement.

No Response

### Section 3 - Intellectual property

Did your application indicate that protectable intellectual property and/or commercially exploitable
technology would arise directly from the research funded by this grant?

O Yes

O No

Regardless of your answer above, please complete the sections below.

If protectable intellectual property and commercialisation activity has resulted directly from the research funded by this grant, please provide details (e.g. patents filed, licenses, other commercial activity).

No Response

If no protectable intellectual property and commercialisation activity has resulted directly from the research funded by this grant, please tell us why.

No Response

### Section 4 - Staff contributions & next steps

#### Details of staff with start and end dates and what they have contributed

No Response

#### **Next steps for Fellows/students**

- For named Fellows (independent grant holders) please tell us what your next steps and intended career pathway will be.
- For PhD studentships/Clinical Research Training Fellowships, please tell us what the student's next steps and intended career pathway will be. Please also indicate what stage of the PhD the student is currently at (e.g. writing up, submitted, awaiting viva) and provide the expected date of thesis submission and viva, where known.

No Response

### Section 5 - Signatures

#### Please download this attachment and then either:

- Print and sign the document as appropriate, scan the document back onto your computer and upload it in the file upload box below, or,
- Paste your electronic signature as an image into the document, save it and upload it in the file upload box.

#### Please note - final reports must be countersigned by the Head of Department.

No Response

Please note – in addition to completing this report, it is a condition of most grants that you will also need to continue to report on outcomes through Researchfish for five years from the end of the grant. Where appropriate, we will ask you to submit BHF-related grant outputs and impact data once a year, during a defined submission period.

#### Name of BHF staff member who has read and approved the report

No Response

#### Date report was approved by BHF staff member

No Response

#### Additional IP review needed?

Click **Yes** to flag that this application requires an IP review by the BHF Translational team.

O Yes