In addition to the UKRI standard T&Cs included with this award, the following terms apply:

CALL CONDITIONS – to be added by Calls and schemed team and will pull through to each award.

1. The start date of this Grant must be no later than four weeks of the award notification email date, therefore this award will have a fixed latest start date applied. The standard three months start period rules stipulated in the 'Standard Terms and Condition of Grant RGC 5' are therefore not applicable to this project.

2. As this is a rapid response project, Grant extensions will only be considered under exceptional circumstances (in line with the Equality Act 2010) and will require agreement by Us on a case-by-case basis. The Research Organisation remains responsible for compliance with the terms of the Equality Act 2010 including any subsequent amendments introduced while work is in progress; and for ensuring that the expectations set out in RGC 3.4 are met.

3. UKRI reserves the right to ask projects to become part of wider consortia or join with already existing efforts.

4. In line with RGC 7.4.3, UKRI will require additional updates from each Grant Holder throughout the project period to monitor and evaluate progress of project deliverables. The process and requirements for submitting these updates will be outlined to each Grant Holder by the lead council responsible for overseeing their project.

5. In Addition to RGC 12.4, the Grant Holder should inform the UKRI communications team by e-mail (press@ukri.org) at least 24 hours in advance before publication (either via a peer-reviewed publication, a pre-print or a press announcement) of the results of research funded by this grant.

6. In addition to RCG 12, Grant Holders undertaking work relevant to coronavirus public health emergency are required to share their research data and findings as rapidly and widely as possible, including with public health and research communities and the World Health Organization in accordance with the statement on sharing research relevant to Covid-19 set out here: https://wellcome.ac.uk/coronavirus-covid-19/open-data

    Grant holders should therefore ensure:

    i) research findings are made available via preprint servers such as https://arxiv.org/, https://www.biorxiv.org/, https://psyarxiv.com/, https://www.medrxiv.org/ or https://socopen.org/welcome/, as soon possible and in any event before journal publication, or via platforms that make papers openly accessible before peer review.

ii) research findings that are submitted to journals are made openly available at the time of publication and released under the Creative Commons Attribution license (CCBY), see https://creativecommons.org/licenses/.

iii) all submissions (to platforms, preprint servers and journals) include clear statements regarding the availability of underlying data and/or software/code

iv) interim and final data is shared as rapidly and openly as possible – as soon as it is appropriately quality assured, in line with any ethics requirements, disciplinary good practice and irrespective of the timing of journal publication.

   a. It is acknowledged that not all data can be open and often access needs to be managed, however in all cases the discovery of data is a priority. Data should be discoverable via data catalogues like the https://www.clinicalstudydatarequest.com/ and access conditions clearly laid out.

   b. Examples of suitable data repositories for data sharing and access include, UKRI-funded data services such as the EMBL-EBI at https://www.covid19dataportal.org/submit-data, the UK Essex Data Archive at https://www.ukdataservice.ac.uk/deposit-data/how-to.aspx, the Health Data Research Innovation Gateway at https://healthdatagateway.org/ (for health and care data and which includes annotation tools to generate rich metadata, and support for data access management) or the dedicated Coronavirus repository at OpenAIRE that is hosted at https://zenodo.org/communities/covid-19?page=1&size=20. Other repositories can be found on registries such as https://fairsharing.org/collection/COVID19Resources or the https://www.re3data.org/.

   c. Where appropriate, data controllers may also wish to consider joining and contributing to the development of the UKRI-funded UK Health Data Research Alliance at https://ukhealthdata.org/, an independent coalition of health data custodians from some of the UK's leading health, care and research organisations. Alliance members are required to sign up to Principles for Participation at https://www.hdruk.ac.uk/wp-content/uploads/2020/03/200304-Principles-for-Participationv2pdf.pdf.

v) Software, analysis scripts or modelling codes created as part of the work under this funding are shared as rapidly and openly as possible.

   a. Software, analysis scripts or modelling codes must be made available with a suitable licence via a platform that supports access and versioning. Suitable software platforms include: https://bitbucket.org/, https://circleci.com/integrations/github/ or https://about.gitlab.com/. If possible, an open source licence should be used, suitable licences that are available can be found at https://choosealicense.com/, however where software or scripts have a third-party dependency this must be respected.

   b. To support longer term access software and code should be deposited in a repository that supports persistence, many data repositories, such as those referred to at iv) can provide this function or there are others dedicated to

software such as https://www.softwareheritage.org/. These repositories support persistence more fully than the software platforms listed above.