Supplementary Material

1 Topic guide questions (prompts and probes not included)

Thinking as a researcher/potential participant/REC member, what are your thoughts about this funding model? How could any concerns, questions or worries be addressed in the protocol, standard operating procedures or by other means? One of the distinctive features of this funding model is that the donor (or their nominee) is guaranteed a place on the trial PROVIDED that they meet the inclusion/exclusion criteria at the time of recruitment. What concerns might this raise from your point of view? As a general rule, no one should be excluded from research participation on economic grounds. To what extent does guaranteeing the donor (or their nominee) a place on a trial disadvantage other potential participants? On occasions, researchers have to go back to funders for additional funding. This can happen, for example, if it takes them longer than expected to recruit sufficient participants or if there are other unanticipated and unavoidable delays. Funders do not always agree to additional funding. In the case of this model of funding, if for whatever reason, the original donor is unable or unwilling to fund an extension, what concerns, if any, might there be about an additional donor being sought on the same terms (i.e. being guaranteed a place on the trial PROVIDED they meet the inclusion/exclusion criteria at the time of recruitment)? The Declaration of Helsinki states that potential participants should be told about the 'sources of funding' for clinical trials. Normally, this means including the name of the funding agency (e.g. Medical Research Council) in the participant information. In the case of the model we are exploring, this could be the actual name of the donor (e.g. Josephine Blogs). Or it could be the name of the matching agency, since they are responsible for the administration of the funding – like Cancer Research UK, which raises funds in a variety of ways and from a variety of sources. What are your thoughts about the information that should be provided to potential participants? Taking all of our discussions into account, to what extent do you think that potential concerns RECs may have about this funding model can be satisfactorily addressed? That's all of our questions, what else should we be considering from your point of view?

2. Statement of PPI involvement

Masters and Nutt are neither clinicians nor academics. They are lay people and in one case also a patient affected by the lack of funding for neglected drugs. They devised the Plutocratic Proposal for donor-funding that lies at the heart of this study. They were full co-applicants on the funding application and have been active co-investigators on the project. They have been remunerated for their contribution on an hourly basis in line with INVOLVE recommendations.

Masters and Nutt helped to design the project and their agenda forged the research questions and limited the scope of the study to REC review. They were involved in the categorisation of the findings and the drafting of this paper, on which they are co-authors.

In addition, PPI group members from a local clinical trials unit assisted with the evaluation of the topic guide and advised on the timing for the PPI focus group (to take account of the burdens of participation in terms of length and the need for regular breaks). They were instrumental in the design of the participant information sheet and we followed their advice about creating a video presentation to explain the Plutocratic Proposal in the context of research funding. One of our focus groups was comprised solely of PPI members. Members from this group were also members of our user panel and reviewed the summary of findings that will be distributed to all those who participated and post on our website, once our findings have been peer reviewed. They were remunerated for this work in line with INVOLVE recommendations.

Masters and Nutt are taking our findings forward in that they are working on ways to realise their aim of establishing a matching agency and using this (and other models of donor-funding) to fund clinical trials.

3. Table with additional quotations ordered as reported

Participants (P) were allocated an identifier according to focus group (REC, PPI and Res=researcher) and then order in which they spoke (P1, P2, P3 etc.).

Good science

1. 'We know that good science is good research, and that's good ethics.' (RECP5)
2. 'I think, you know, we've mentioned the word crackpot schemes a few times over the course of the past 20 minutes and it's clear that, that, that that is where the danger really lies and, and the concept, the idea really that this is gonna be funding areas of research which just shouldn't be funded.' (ResP5)
3. 'I would have grave concerns about creating a system which allowed donor-funded research to fund poor quality research…once you put a system in which doesn't have the safeguards of UKRI type panel, then it is gonna be vulnerable, I think, to having crackpot ideas funded.' (ResP3)

4. 'I have concern around scientific validity. I'd want to be convinced that the donor had no role or influence in the design, the conduct or the reporting of, of the research.' (ResP6
5. 'The potential for the donor to influence the science, which raises concerns and it's the same concern as if there's a pharmaceutical company that's funding. And, there's a conflict of interest there, and I can imagine there being all sorts of pressures.' (ResP1)
6. 'But I would be worried about the conduct and bias, perhaps, in analysis of the results, and do we bend rules for people who want to get into the trial?' (PPIP5)
7. 'It's certainly true in doing research with independent healthcare companies, I've done several studies that if they don't like the results they really come after you in a way. They want you to… there's pressure to, "Well, couldn't you just, sort of soften it down here?" or whatever. Instead of, you know, perhaps always facing what you've actually found out.' (RECP3)

8. '… there's a particular need for anyone involved in this expert review and RECs to be certain about the science and the background literature as it relates to a piece of research through this route.' (RECP4)
9. 'If they're clinical trials, they have to go through the MHRA, erm, in which case that is one independent review.' (RECP7)
10. 'I would have concerns about how you could have the same level of critical independent review in this parallel universe.' (ResP4)
11. '… and there must be PPI everywhere to ensure the views of the public are expressed and acted on at all levels.' (PPIP5)

12. 'if the researchers do know who it is has provided the cash for this then there is going to be, however well intentioned, a tendency to treat that individual differently.' (PPIP1)

Concerns raised by the donor gaining a place on the trial

Disclosing the identity of the donor

13. 'I think if somebody is, is prepared to put the money up for this then it should be known by everybody who's involved in the process.' (PPIP1)
14. 'Clearly this is of some concern to some people, of high concern to others, and of no concern to others, so I think you have to put the information in just morally.' (PPIP7)
15. 'In the documents that I've read, that perhaps CRUK fund this, I don't know how they're gonna write down, you know, "a donor," cos that will immediately raise suspicions in somebody's mind.' (PPIP6)

16. 'I was thinking just now of the ways in which having a named donor might actually influence recruitment. You know, just thinking about, for example, Britney Spears and Kanye West, two people with long term severe mental health problems, and one of whom repeatedly is presented as mad and the other who's presented very sympathetically as, "Oh, poor dear, she's struggling." … Do those sort of images have a knock on effect if you see them on the participant information? You know, 'I'm not going to sign up for something, you know, funded by him, but I might, you know, if it comes from her." … There is an argument for that, that anonymity.' (RECP3)
17. 'That was one of the reasons why the ethics committee was so cross about it [piece of research proposed by a celebrity], because we thought there was someone who is using his celebrity to try and push through a piece of research and, indeed, get a head start on recruitment prior to even getting a review by the ethics committee.' (RECP1)

18. 'I mean, the alternative is you just say it's the matching agency, but I don't think that's being transparent - sufficiently transparent.' (PPIP7)
19. 'To say that…a piece of research is funded by an anonymous donor, from…the very little I know of the Helsinki Agreement, is probably okay.' (PPIP4)
20. 'We don't go into lots of details about where money's come from through…organisations that we generally tend to think are reputable, like Cancer Research. We wouldn't ask who's donated to that, you know, and what proportion of that donation has gone through to this project, but we'd just put "Cancer Research" at the top.' (RECP6)
21. 'There are good reasons not to tell participants who's funding trials in some circumstances, and I have seen the ethics committee swayed by arguments that you shouldn't tell participants who's funding specific trials.' (RECP1)

22. 'I suspect that many potential participants would be more concerned about that [the science] than…they would be about who's funding it.' (RECP6)
23. 'The evidence is that people aren't interested in funding.' (RECP7)
24. 'I mean, my experience of working with participants is that very few of them are concerned about who's funding it, and, you know, as… comparing funding from drug companies, is it vastly different?' (PPIP3)

The therapeutic misconception

25. 'People think that if you throw enough money at something then in 18 months you might have a cure for any disease when in actuality that almost certainly is never likely to be true again.' (ResP5)
26. 'People [researchers] are convinced about their treatment, they will take money from many sources for it, and if somebody is charismatic and persuasive about their treatment, I'm not convinced that the donor is gonna be in a position to make an informed decision that that's the treatment that they want to put their money into.' (ResP1)
27. 'These people, one assumes, are very desperate, you know, they are really going to just want it for their own end initially.' (PPIP6)
28. 'There's quite a difficulty, I think, isn't there, in how donor money is going to be used properly to fund good research without it becoming a 'looking around for something that might help me. And those would have to be very clear to the people who are intending to give the money, the people who're in the matching agency, and the people doing the research.' (RECP4)
29. 'If at the end of the, of that consent process the patient says, "thanks, I'm delighted to go in as long as it's going to help me," at that point, that patient's consent is not valid and therefore in a sense there is something implicit about this whole transactional relationship which is problematic.' (ResP4)

30. 'If I have an illness and I agree to participate in a trial, then I generally believe that that trial is happening because there's been good review that it's an appropriate thing to do, that the intervention is going to be likely to be successful, that, you know, it has been fully peer reviewed…they're not gonna do it unless it's likely to be successful, whether it's got a good chance, or whether it's by charity or government funding.' (ResP1)

Donor benefit

31. 'I have concerns around the fairness of participant selection. It should really be based on scientifically valid criteria not ability to pay and, and research risk and benefits should be fairly distributed, I think, in society.' (ResP6)
32. 'Are other participants going to know that it's being funded for one particular person, with that person in mind, or that problem in mind? So, you know, other participants might feel aggrieved, if you like, that it's funded for this particular one person.' (PPIP3)

33. 'I haven't heard anything that says they need to be included in the analysis.' (PPIP2)
34. 'This is my lay suggestion, why do they have to actually be part of the analysis? Be part of the, the research…there's a donor who's… For which they get the treatment and that's fine, that's done, and nobody actually knows who they are. But when it comes to the analysis there's some flag put into some system somewhere that says, "Don't include this person." And as I say, I'm not very sure about the ethics of what I've just said but it seems to me pragmatic.' (PPIP3)
35. 'Well, my first reaction is that that [excluding donor from analysis] sounds a very good idea, as you say it means nobody's losing their place. I haven't thought, at the moment, of any disadvantage of that.' (PPIP4)

36. 'I would agree with RECP1's point, you know, you know, my dear father, when I sat on his knee, said to me, "Life's not fair," and I haven't forgotten that one.' (RECP7)
37. 'It's the same thing as why can that person buy a Rolls Royce yet I can't? It's those sort of things, why can people have first class train fare or flight, when I can't?' (PPIP7)

38. 'If you try to argue that it's not fair that that happens and, therefore, this shouldn't be a way of funding research you're then depriving all the other ten of being involved in a piece of research that may well be of benefit. So, you know, I think somebody using a lot of money, erm, to benefit others, and it also benefits them, seems entirely reasonable.' (RECP4)

Further funding from additional donors

39. 'Again, er, the fact that 100 people fund and it's 100 participants who are the funders, I've no issue… its benefit that's what's, are what's important here, for the common good.' (PPIP7)
40. 'It seems to be that there should be a limit, but I can't… choosing a number it would be entirely arbitrary, in the way I'm thinking about it.' (RECP6)
41. 'I don't think this is a problem that is specific to this particular type of trial, I think it's something that would, would apply right across the board for any sorts of trials, and it's just part of good trial management that you make sure that the thing doesn't run out… that sort of stuff shouldn't happen no matter what type of trial it is.' (RECP1)

Donors of bad character

and how ethical do we know the donor is, and, er, sort of, what, sort of, lifestyle do they lead, et cetera? (PPIP6) That's a good point, would you want to be associated, now, with, er, [named individual convicted of sex trafficking] and, er, [their] friends? (PPIP5)

I don't have a problem with many people, but if they're offshoring money… Pharmacy and insurers have to make a profit, everybody has to make a profit to be able to live, if those are excessive then, perhaps, they're immoral, if they're offshored they're definitely immoral, if they don't pay their taxes they're immoral because the rest of us ordinary people suffer because of that, and some people are suffering more. And, I'm sorry, I really do think we should stick to basic principles because once they start eroding they go very quickly. (PPIP5)

[named individual convicted of sex trafficking] was a very generous contributor to science, … perhaps a background check would be useful, do they pay their taxes, do they, er, offshore their, er, profits? … the source of this cash may be very dubious indeed. (PPIP1)

Disrupting the research agenda/infrastructure

Picking up though on this issue of individual donors being able to skew the research landscape which another, er, er, group member, sort of, mentioned, I think that is really important. (ResP1)

'you're not using the research resources most effectively but on the other hand you are adding to them.' (ResP3)

You know, clinical research is an ecosystem, right? And it's, in some ways it's a closed ecosystem. Funding or taking part in some research means that resources and people and academics are deployed in something and it cannot be deployed somewhere else. (ResP7)

I think NIHR, [identifying information removed], would say the same, we'd set up an infrastructure, there's no point doing stuff in the BRCs if you don't have a mechanism to translate it and put it through. I mean, any, er, responsible research, national fund… funding a whole system, just different from charities, er, but even charities have to think if they produce something, what's that route? There's no point producing research that just stops. (ResP3)

There will always be some who are opposed to this 'new' model because either it represents a change and/or it deviates from the 'accepted' funding systems/pathways. Or it may be seen as a way of trying to circumvent established systems. (ResP6 - follow up email)

Matching agency governance and processes

I just wanted to perhaps think about…a little bit about how this matching agency is actually going to work…. how does the matching agency function with regard to tapping wealthy people for money? What sort of advertising is it going to have to do? How is it going to engage with people who are fantastically wealthy to promote itself? I think there are possibly issues around that, about how it actually… How the money actually comes to the agency, how the agency engages with donors, what it's putting forward as, 'this is what's in it for you,' and how it does that. (RECP3)

[The matching agency has] a big role to play which I don't really fully understand at the moment, but I think it's got to be, you know, all seeing, all doing, and, erm, I'm not quite sure how that all fits in with, sort of, legal things and statutory things, other research aspects, it all seems still a tad confusing to me (PPIP6)

and I think this firewall [between donor and researcher] and the integrity of this matching agency is where the success or failure of this initiative is really likely to lie. (ResP5)

All things considered opinions

42. 'I can't see any fundamental issue that would make me want to say, "No. Can't even consider it." I think there are lots of things to thrash out, but I think it's something that needs to be on the table.' (RECP6)
43. 'So I have no major objections to this model because it's already happening that the rich are accessing novel and experimental treatments. If we allow it to have donor-funded research, it may lead to some breakthroughs that will eventually be available to the public. And at the moment many things are being crowd funded, video games, et cetera, films, so I have no serious objections.' (PPIP8)
44. 'It would be something I'd be quite happy to sign up to so long as we are able to maintain that scientific integrity and we do have these balances and checks in place.' (ResP5)

45. 'I think it's an interesting subject, and it can be a novel way of funding research as well, because researchers who are applying for grant applications, what you mentioned, it's, kind of, becoming more and more difficult to get studies funded.' (RECP5)

46. 'I think having a separate committee to review these, these sort of studies, unless we actually demonstrate a need for it it surely just reinforces that this is a special case when, actually, erm, if it's going, if it's going to work at all it's got to be come normalised. I can see the argument for special committees that deal with defence or, er, defence projects, or, erm, certain other factors, but why should this be a separate category? If it's going to work it's just another funding stream.' (RECP3)
47. 'You know, an area that's not normally funded cos there's nothing in it for the pharma companies and I don't see anything different in principle, really, between a pharma company funding research to a private individual, what's the difference?' (PPIP7)
48. 'So many of these things are so study dependent, and it just depends upon the context of the study as to exactly what, what you come down to.' (RECP1)
49. 'There are specific considerations that come up, and what's needed, and might come from this sort of work is a, a framework of questions and considerations where… Of the particular issues in this type of trial.' (RECP7)

50. 'I've listened with interest and I think people have made some excellent points but I'm afraid they haven't really moved me from my initial position, that this is a bad thing, erm, and it may or may not have good results but, erm, in the lap of the gods. I suspect it's going to happen regardless of, er, of my personal feelings, as many other things happen. I don't like it.' (PPIP1)