

2020 Health Services Research Grant Application Form

Form Preview

Research team

* indicates a required field

Investigator Details

To be eligible for a 2020 Health Services Research Grant, a Clinical Investigator (CI) and a Research Investigator (RI) must be listed on the application. **A single person cannot act as both the CI and RI.** One of the applicants (CI or RI) must be a Healthcare Professional from a Qld Hospital and Health Service (HHS) delivering services for children and the other must be a researcher, preferably based at an NHMRC Administering Institution.

Primary Applicant *

Title	First Name	Last Name
<input type="text"/>	<input type="text"/>	<input type="text"/>

As the primary applicant, are you acting as the Clinical Investigator (employed by a Qld HHS serving children) or the researcher (preferably affiliated with a NHMRC Administering Institution)? *

- Clinical Investigator
- Research Investigator

Primary Phone Number *

Primary Email *

Organisation *

Organisation Name

Office Address *

Address

Suburb State Postcode

<input type="text"/>	<input type="text"/>	<input type="text"/>
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Educational Qualifications

Year Awarded	Qualification	Institution
<input type="text"/>	<input type="text"/>	<input type="text"/>

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	Include thesis for post-graduate studies	Include location
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Current Employment / Appointments

Start Year	Role	Institution / Organisation

Publications

Include up to 5 publications from peer-reviewed journals that are most relevant to your current grant application. Provide:

- Full reference
- Impact Factor of journal
- Total number of citations to date.

Reference	Journal Impact Factor	Citations to Date

Research Metrics

Please note: The Children's Hospital Foundation collects Research Metrics as part of its standard processes. In this grant round, less emphasis is placed on track record and more emphasis is placed on a good idea.

Metric	Response
Total Number of Publications	
Total Number of Citations	
Current h-index	
Current i10 index	
Total Number of Clinical Guidelines / Policy Briefs etc	
Number of Active Patents	
Number of Grants Awarded (as first-named Chief Investigator / CI-A only)	
Total Funding of Grants Awarded (as first-named Chief Investigator / CI-A only)	

What is your broad area of research?

Provide details on your current research program / interests:

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Word count:
Must be no more than 150 words.

Provide details on your research team:

Name	Institution	Position	Role within Research Project

Secondary Applicant

Secondary Applicant *

Title	First Name	Last Name
<input type="text"/>	<input type="text"/>	<input type="text"/>

As the secondary applicant, are you acting as the Clinical Investigator (employed by a Qld HHS serving children) or the researcher (preferably affiliated with a NHMRC Administering Institution)? *

- Clinical Investigator
 Research Investigator

Phone Number

Must be an Australian phone number.

Primary Email *

Must be an email address.

Organisation

Office Address *

Address

Suburb State Postcode

<input type="text"/>	<input type="text"/>	<input type="text"/>
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Must be an Australian postcode.

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Educational Qualifications

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- Full reference
- Impact Factor of journal
- Total number of citations to date.

Reference	Journal Impact Factor	Citations to Date

What is your broad area of research?

Provide details on your current research program / interests:

Word count:

Must be no more than 150 words.

Supporting Documents

Letter of Support

As per the guidelines, to apply for a 2020 Health Services Research Stimulus Grant you must be able to confirm eligibility by providing a letter of support from your

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Administering Organisation. Please use the template available [here](#).

Letter of support - Primary Applicant

Attach a file:

Letter of support - Secondary Applicant

Attach a file:

Grant Details

* indicates a required field

Project Title

Project Title *

Key Research Areas

Please indicate the research area(s) addressed by the proposed research project.

Select key research areas *

- | | |
|---|--|
| <input type="checkbox"/> Obesity and Diabetes | <input type="checkbox"/> Injury and Trauma |
| <input type="checkbox"/> Infant Mortality | <input type="checkbox"/> Neuro-development and Disability |
| <input type="checkbox"/> Cancer | <input type="checkbox"/> Psychiatric and Behavioural Disorders |
| <input type="checkbox"/> Respiratory Disease | <input type="checkbox"/> Other |
| <input type="checkbox"/> Infectious Disease | |

If 'Other' is selected please indicate the main area(s) of research addressed by the proposed research project.

Project Details

In the 2020 Health Services Research Stimulus Grant Round, the Foundation will be funding **up to 5 Stimulus Project Grants** and is calling for ideas at all maturity levels in the health services research (HSR) field.

All proposals should describe how the research will improve the way health care is delivered and maximise value for patients by ensuring systems and processes are effective and efficient. **The measure for success is improved value for patients** with value defined as **health outcomes achieved versus the cost of achieving these**.

All applications are to have a strong focus on **translational research outcomes** including metrics for

- outcomes that matter most to patients and their families
- economic justification
- implementation process measures to help evaluate the acceptability and sustainability of the new/changed process.

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Researchers must demonstrate their progress towards impacting behaviours or health care practice as a result of their research. Both quantitative and qualitative tools are expected to be used to demonstrate the value of translational work and may include the following performance indicators:

- engagement towards policy change
- improvements in health care practices and behaviours
- increase in public understanding of science
- improvement in outcomes and / or quality of life for patients
- potential to attract further research income
- likelihood of commercialisation e.g. patents, product development
- new collaborations developed

Impact Statement - Clearly articulate WHAT population of Queensland children will benefit from this grant and HOW they will benefit. *

Must be no more than 50 words.

Lay Synopsis - In lay terms, describe your research project and its impact on patients *

Word count:

Must be no more than 200 words.

Please do not include any proprietary knowledge in this statement as it may be used for public release.

Hypothesis

Clearly define your hypothesis / hypotheses for the project. (click 'add more' as required).

Hypothesis *

Click 'add more' as required.

Key Objectives

Key Objective 1 *

Key Objective 2 *

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Key Objective 3 *

Key Milestones

Key Milestone 1 *

Expected Completion Date of Key Milestone 1 *

Must be a date.

Key Milestone 2 *

Expected Completion Date of Key Milestone 2 *

Must be a date.

Key Milestone 3 *

Expected Completion Date of Key Milestone 3 *

Must be a date.

Grant Details (cont.)

* indicates a required field

Grant Application

In 2000 words or less, please provide an overview of your research application. Shortlisted candidates will be interviewed as part of the overall review process and may be asked to provide further detail. Please address the following:

- 1.The **evidence-base** to support your objectives / hypothesis (including your own contribution to the area and / or the contribution of the research collaborator listed on the application).
- 2.The project hypothesis.
- 3.How the research proposal aligns with the translational research pathway, and contributes to patient outcomes. The **translational plan** of your proposed research project should outline how improved patient outcomes can be achieved including the economic impact and thus increase **value** for patients and must also demonstrate a clear **impact** on healthcare delivery.
- 4.The **access** you have to research participants, facilities and equipment (as applicable) to conduct the proposed research.
- 5.The **suitability** of the Clinical Investigator and Research Investigator undertaking the research, taking into account that a collaborative effort with research peers in similar fields can produce efficiencies or better outcomes. Please describe your **collaborative plan** and include the activities of any individual(s) who are currently or will in the future play a role in conducting the proposed research.
- 6.Although not mandatory, applicants may choose to adhere to the following structure and include time / budget-driven milestones:

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- - Background / evidence base;
 - Methods;
 - Expected results / outcomes based on objectives and milestones;
 - Expected impact (value add i.e. outcomes vs cost).

Research Proposal *

Word count:

Must be no more than 2000 words.

Reference List

Attach a file:

Please attach reference list to support your proposal if applicable.

Health Services Research Support

Applicants are required to nominate health services research expertise that will be utilised to support the research project (e.g. health economics, implementation science, biostatistics, etc.) using the maximum \$20,000 funding offered as part of the grant. Applicants can choose to work with health services research experts with whom they have an existing relationship or may choose to form new collaborations with specialist support services such as:

- [Australian Centre for Health Services Innovation](#) (QUT)
- [Centre for Health Services Research](#) (UQ)
- [Centre for the Business and Economics of Health](#) (UQ)
- [Centre for Applied Health Economics](#) (Griffith University)

In 300 words or less, please describe in detail the health services research expertise (e.g. health economics, implementation science, epidemiology) you propose to utilise to support your research. Please nominate who will provide this expertise. The proposed health services research expertise should be reflected in the Budget to be provided on Page 5.

Word count:

Must be no more than 300 words.

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Budget

* indicates a required field

As per the Application Guidelines, Stimulus Project Grants are awarded as a one-off grant to a maximum of \$80,000 over one year plus a maximum of \$20,000 to go towards health services research support. Please provide a detailed budget reflective of the proposed research activity and proposed health services research support services. Budget items excluded from grants are: capital works, infrastructure, indirect costs. Travel, telephone and computer costs cannot be funded unless justified to be directly related to the project.

Total Amount Requested for the duration of the award

\$

Must be a dollar amount.

What is the total budgeted cost (dollars) of your project?

Attach Project Budget: *

Attach a file:

Please note that the budget should cover the \$80,000 awarded as part of the grant AND the \$20,000 which will go towards health services research support. A budget template is not available so please use your own.

Declaration

* indicates a required field

Declarations and privacy statement

I certify that all details supplied in this application and in any attached documents are true and correct to the best of my knowledge, and that the application has been submitted with the full knowledge and agreement of the management of my organisation.

I have read the accompanying applicant guidelines provided with this application form process, confirm that this application complies with the guidelines in full, and agree that the terms of the guidelines are expressly incorporated into this application.

I agree that the Research Program complies with the '[National Statement on Ethical Conduct in Human Research 2007 \(Updated May 2015\)](#)'.

I agree that the Research Program will take responsibility to maintain all relevant compliance and safety approvals.

As a condition of this application, I certify and warrant that the terms and conditions of the contract relating to the award of a grant (the Contract) have been reviewed by my Administering Institution and that:

- 1.If awarded a grant, my Institute agrees to execute the Contract without amendment; or alternatively;
- 2.I have submitted all requested amendments to the Contract (along with justification and reasoning as to why amendments are being sought) to grants@childrens.org.au prior to the closing date for applications. I acknowledge and agree that any such requested

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amendments form a part of the application and will be considered in the context of the grant submission.

I agree that I will contact the Children's Hospital Foundation immediately if any information provided in this application changes or is incorrect.

Your Personal Information is being or has been collected by the Children's Hospital Foundation to facilitate provision of services related to research and grant opportunities to you and / or to keep you informed about Children's Hospital Foundation related activities. We respect your privacy and embrace the principles contained in the Privacy Act. We may contact you in the future for the promotion of Children's Hospital Foundation's messages and programs, research, fundraising purposes and invitations to events. If you attend our events you may be photographed or filmed and images &/or audio may be used in various mediums to promote the Children's Hospital Foundation. Please tell event staff if you do not wish to be photographed or filmed. Personal details may be provided to third parties where required by law or for the purpose of facilitating services contracted by us, in so doing your personal information may be disclosed to overseas recipients. Further information is available in our Privacy Policy or on request. Communications from us may include mail, email, social media, SMS or telephone contact and may also include messages on behalf of event sponsors and other third parties. By providing your information to us you agree that you have provided your indefinite consent to this contact. You may withdraw consent at any time though in doing so we may not be able to provide you with services requested. The Children's Hospital Foundation will not disclose your information to any third party for their marketing purposes.

If you do not want to receive further communication from us (other than information that relates to this service) or if you have any questions about privacy please contact our Privacy Officer via PO Box 8009 Woolloongabba, QLD 4102, privacy@childrens.org.au or by calling 1300 7425 5437. Our Privacy Policy sets out and details how you may complain about privacy issues and how we would deal with that complaint. It also explains how you can access, correct or update information we hold about you. A copy of our Privacy Policy is available at www.childrens.org.au or on request.

I understand that the information above will be used in accordance with relevant legislation and declare that this information is correct to the best of my knowledge.

I am authorised to complete this application and have read and understood the declaration and privacy statement. *

Yes

Name *

First Name

Last Name

Position *

Date of Declaration *

Must be a date