



## Advice to Applicants

### Caboolture and Kilcoy Hospitals and Woodford Corrections (CKW) and University of Sunshine Coast (USC) Collaborative Grant Round 2024

This document provides information about the application process, eligibility, and conditions to apply for a CKW-USC Collaborative Grant through The Common Good (TCG), an initiative of The Prince Charles Hospital Foundation.

Further information can be obtained by emailing Dr Megan Grace, Research Manager ([Megan.Grace@tpchfoundation.org.au](mailto:Megan.Grace@tpchfoundation.org.au)), or on The Common Good [Researcher Hub](#).

#### Program Objectives

The CKW-USC Collaborative Grants will enable research projects that address a clinical need at Caboolture Hospital, Kilcoy Hospital and /or Woodford Corrections Health.

Applications that address one of the three priority areas will be highly regarded, however those that focus on other topics are also eligible to apply:

- Multicultural Research
- First Nations
- Healthy Ageing

#### Grant Details

- Collaborative Grants have been designed to encourage research collaboration across CKW and USC. Projects are expected to comprise a standalone study that can seed future competitive grant applications.
- Collaborative Grants will be awarded based on the quality, feasibility, significance and local impact of the research, track record of the Chief Investigators, and quality of the collaboration.
- Applications that also include research capacity building for CKW staff will be prioritised.
- The maximum amount that can be requested for a Collaborative Grant is \$40,000. Budgets will be assessed for appropriateness.
- Funding may be used for any research expense, such as salary costs (including on-costs), consumables or other reasonable research requirements. Equipment must be specific to, and of a nature essential for the needs of, the research activity. The Administering Institution must meet all service and repair costs for the equipment funded.
- The grant cannot be used to fund equipment for personal use, or institutional overheads.

- At least one Chief Investigator from each of CKW and USC must be named. *A maximum of 4 Chief Investigators and 2 Associate Investigators may be named on an application.*
- The Grant Amount will not be distributed until such time as the Project receives Human Research Ethics Committee (HREC) approval and Site-authorisation, as well as any necessary UniSC HREC ratification. Where the Project does not involve human research, requisite approval from the relevant institutional ethical review board or committee is required.

#### First Nations focussed research

For the project to qualify as First Nations health research, at least 20% of the research effort and/or capacity building must relate to Aboriginal and Torres Strait Islander health. Qualifying applications must address the NHMRC Indigenous Research Excellence Criteria as follows:

- **Community engagement** - the proposal demonstrates how the research and potential outcomes are a priority for Aboriginal and Torres Strait Islander communities with relevant community engagement by individuals, communities and/or organisations in conceptualisation, development and approval, data collection and management, analysis, report writing and dissemination of results.
- **Benefit** - the potential health benefit of the project is demonstrated by addressing an important public health issue for Aboriginal and Torres Strait Islander people. This benefit can have a single focus or affect several areas, such as knowledge, finance and policy or quality of life. The benefit may be direct and immediate, or it can be indirect, gradual and considered.
- **Sustainability and transferability** - the proposal demonstrates how the results of the project have the potential to lead to achievable and effective contributions to health gain for Aboriginal and Torres Strait Islander people, beyond the life of the project. This may be through sustainability in the project setting and/or transferability to other settings such as evidence-based practice and/or policy. In considering this issue, the proposal should address the relationship between costs and benefits.
- **Building capability** - the proposal demonstrates how Aboriginal and Torres Strait Islander people, communities and researchers will develop relevant capabilities through partnerships and participation in the project.

#### **Eligibility**

1. Applications will only be considered if the work is being undertaken at CKW, or in significant association with the local community, for the direct benefit CKW patients, staff and/or the community, and should be aligned with the Metro North Research Strategy 2023-2027.
2. Applications addressing one or more of the priority areas of Multicultural Research, First Nations, or Healthy Ageing will be highly regarded. However, high-quality applications addressing other health issues relevant to CKW will also be considered for funding.
3. Chief Investigators who have outstanding TCG progress reports are ineligible to apply - their applications will be ineligible and not assessed further.
4. Chief Investigators must have a current appointment of at least 0.3FTE at CKW or USC and remain within or associated with their institute for the duration of the project. Any changes to circumstances must be discussed with the Research Development Unit, Caboolture Hospital, who

will subsequently provide advice to TCG. TCG reserves the right to review the grant, and to terminate it if deemed appropriate.

5. Associate Investigators are not required to be employed by Metro North Hospital and Health Service but need to be involved in the project.
6. Applications must involve considerable collaboration that leverages diverse, complimentary expertise between CKW and USC
7. An investigator may submit more than one application as a Chief Investigator, however only the highest ranked application that meets the eligibility criteria will be considered for funding. This should be taken into consideration by all investigators prior to application.
8. Funding may be used for any research expense, such as salary costs (including on-costs), consumables or other reasonable research requirements. It cannot be used to fund basic computer equipment, such as personal laptops, or institutional overheads.
9. Applications will only be accepted online through <https://tpchfoundation.smartygrants.com.au/> and must be submitted by 1pm on the due date. Late applications will not be accepted.
10. Signatures must be obtained from all Chief Investigators, and the Heads of Department for each collaborating department.
11. Applicants are required to nominate an administering institution. Any relevant departmental or institutional approvals must be obtained prior to lodging the application.

## **Assessment**

Collaborative Grants will be assessed by an independent research panel convened by TCG. TCG will review applications for eligibility, completeness, and alignment to the grant objectives. TCG reserves the right not to put forward for assessment applications that it deems do not meet these requirements.

Each stream will be assessed based on the following criteria:

1. Quality & Feasibility (20%)
  - Clear aims with a matching hypothesis(es) to be tested (if appropriate to methodology)
  - Clearly articulated and robust methodology, designed to test the hypothesis(es)
  - Adequate infrastructure and resources to complete research within the described timelines, including a fully justified budget request
  - Appropriate and relevant expertise, skills and experience of the investigative team and research environment to undertake the research (CI and all AIs are included)
2. Significance (20%)
  - Potential outcomes will result in significant advances in knowledge with potential for developing and/or advancing new knowledge and advancing practice or policy
  - Addresses a fundamental clinical need, or issue of great importance to CKW patients and the community with demonstrated potential for health, social, economic and/or academic impact
  - Capacity to lead to a complete external funding application to develop the work further or scale up the project.
3. Local Impact (20%)
  - Evidence of capacity building in research for staff at CKW
  - Evidence that the project addresses a clinical need at CKW

- A translation plan towards tangible benefits for patients, health service and the community
4. Track Record (15%)
    - Academic publications
    - Research impact (contribution of new knowledge to the discipline area, research field, influence on policy and practice or clinical guidelines, commercialisable outputs or intellectual property)
    - Research leadership and contribution to the research community
    - Associate Investigators will not be included when considering the investigator team track record, but their experience will be considered in evaluation of the quality and feasibility criteria.
  5. Collaboration (20%)
    - The quality and extent of the investigative team's collaborative potential
    - Evidence of research capacity building and workforce development potential through the collaborative partnership
  6. Appropriate and well justified budget (5%)

### **Obligations of awardees**

Grant recipients are expected to disseminate their results within the CKW Directorate and via the usual academic channels. The support of TCG and USC must be acknowledged in any publication, media or presentation arising from the research. It is a condition of accepting the grant that recipients will include TCG and USC in any publicity surrounding the research. In addition, grant recipients will be expected to provide regular research updates and may be called upon to participate in promotional activities.

### **Progress Reports**

Grant recipients will be required to submit six-monthly progress reports, due in April and October each year. It is the responsibility of the grant holders to submit these in a timely manner. Failure to submit a progress report will result in all CIs being ineligible for future funding from TCG.

### **Key Dates**

Applications open	11 December 2023
Applications close	8 March 2024
Applicants notified of outcome	May/June 2024