What’s new

- This round is open to:
  - new researchers with one-year projects (maximum amount awarded - $15,000 per project).
  - mid-career researchers with one-year projects (maximum amount awarded - $35,000 per project).
- The Application Guidelines have been updated to include additional information to assist applicants with their submissions. Please ensure you read the Guidelines carefully and contact the HP Research Scheme Coordinator with any additional questions you may have.

Application checklist

All application details and attachments must be included for your application to be considered. Before you submit your application, please check:

- You are eligible to apply.
- Each section of the application is completed.
- Each section complies with formatting and length requirements.
- The application is signed by ALL appropriate persons. Electronic signatures may be obtained where required, however these must be visible as a signature on the final copy of the application.

Submitting your application

Please submit a PDF copy of your application via email to: HP-Research@health.qld.gov.au by 5pm Wednesday, 9 October 2019. It is the responsibility of the applicant to ensure that it is a true, full copy of the signed application. You will not be advised if it is noted that your application is incomplete.

Late applications will not be considered under any circumstances.

Please direct any enquiries to the HP Research Scheme Coordinator (phone 3328 9304 or email HP-Research@health.qld.gov.au).
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1. Introduction
The Health Practitioner Research Scheme is administered by the Allied Health Professions’ Office of Queensland (AHPOQ), Department of Health. The Health Practitioner Research Advisory Group (HPRAG) is the governing body for the Scheme.

The total amount of funding available through this Scheme is $400,000 per year as per the Health Practitioners and Dental Officers (Queensland Health) Certified Agreement (No.2) 2016.

Applications will be open to new and mid-career researchers in the 2020 funding round.

2. Aims of the Scheme
The aims of the Scheme are to:

- add to evidence which improves the value of Health Practitioner services provided to the clients of Queensland Health;
- add to the research expertise of Health Practitioner personnel in Queensland Health;
- contribute to multidisciplinary partnerships and collaboration;
- promote an equitable distribution of opportunities for research throughout the state, regardless of location; and
- enhance dissemination of research findings.

3. Target area and priorities
Funding is provided to support evaluation of the strategies from the:

- Allied Health Expanded Scope Strategy 2016-2021;
- My health, Queensland’s future: Advancing health 2026 (direction 4 - pursuing innovation); and
- Safe and applicable health care for rural and remote communities.

The target area for this funding round is Health Practitioner service delivery/workforce models that improve patient access to care and health outcomes (i.e. models that enable timely access to care – decreasing patient waiting times or enabling care to be delivered locally through strategies such as the use of telehealth or expanding health practitioner scope of practice at the local site). If the application does not address this target area, it will be deemed ineligible for funding through this round of the Scheme (please see Section 4 for further clarification).

While all applications will be reviewed and ranked based on merit, projects will be viewed favorably if they include one or more of the following:

- rural/regional/remote partnerships;
- partnerships with other Queensland Health sites, universities, and industry professionals;
- collaboration across professions, services, sites and/or external agencies. This includes ‘hub and spoke’ models;
- models which stimulate research in areas or services with lower research capacity, infrastructure and support.
4. Typical research projects and uses of funding

4.1 Examples of research activities that will be considered for funding

To be considered eligible for funding, your research project must:

- evaluate an alternative method for delivering a service (such as telehealth); and/or
- evaluate an alternative workforce model for delivering a service (such as extended or expanded scope of practice, or delegation).

Examples of previous successful projects include:

- the evaluation of a telehealth ‘virtual group’ model for the delivery of persistent pain management for rural and remote patients;
- development, implementation and evaluation of a telepractice model for the clinical assessment of adult dysphagia;
- enhancing access to nutrition via a delegation allied health care model.
- evaluation of the impact of ceasing a low value healthcare practice to free staff time to complete high value practices.

Funding through the Health Practitioner Research Scheme is provided to support the evaluation of service models, NOT the implementation of services or development of resources.

4.2 Examples of research activities that will not be funded

If your project does not meet the target area as stated in Section 3 of this document, it will not be considered eligible to receive funding.

Examples of research projects that will not be funded include:

- Research to evaluate a specific clinical intervention, assessment technique or equipment.
- The development of a research tool or outcome for use in intervention or assessment (e.g. the development of a standardised test or education module).
- Meta-analysis, systematic reviews of a clinical topic or the development of best practice clinical guidelines (e.g. reviewing post-discharge patient data to check the number of missed diagnoses to inform best practice guidelines).
- Projects that compare the efficacy of patient outcomes of one intervention to another (e.g. if the use of one x-ray type is appropriate given the levels of radiation exposure in comparison to other x-ray options)
- Projects that review the appropriateness of an intervention (e.g. use of restrictive practices on patients with mental health issues).
- Data collection or quality improvement activities (e.g. looking at patient characteristics that contribute to self-discharging; development of an intervention tool based on patient involvement in post-surgery activities; factors that impact on engagement in early intervention services).
- Research coordinated by a Health Practitioner position that primarily affects the non-HP workforce (e.g. delegation of tasks to a nurse practitioner).
- Research with multiple aims and objectives where the PRIMARY focus (and therefore majority of the workload / budget) is not on service delivery / workforce design.
4.3 Example uses of HP Research Scheme funding

- As a major aim of the Scheme is to build Health Practitioner research skills and capacity, it is expected that most of the requested funding should be allocated to provide backfill for the Chief Investigator, enabling the Chief Investigator to undertake the research activities.
- Research assistant time to gather data etc.
- Contracting fees for a statistician or other relevant expert needed for the research where one is not available within the Health and Hospital Service or through existing collaborative arrangements with universities or other Hospital and Health Services
- Administrative costs including photocopying, printing, postage, etc.
- Telecommunication costs including phone, video-conferencing etc.
- Travel costs including accommodation, taxis, flights and meal allowances where this is the most appropriate method of collaboration and/or data collection
- Funds from this scheme can be used to leverage other funds. Funds may contribute to a research project that may be matched by alternative funding sources
- Within the scope of the project, funds may be used for the purposes of dissemination or communication of research results. This must be clearly indicated in the budget as a separate line item.

Funds may not be used for:

- Hiring additional FTE to implement the service being researched.
- The purchase of capital expenditure of any kind including computer hardware, office furniture or clinical machinery.
- The use of office space or other location-related expenditure. If these items are necessary for the conduct of the research project, evidence of support from the Hospital and Health Service for the equipment/space is required to support the feasibility of the project.

5. Eligibility of project team

5.1 Chief Investigators

The Chief Investigator is the research project leader. The Chief Investigator must be a Queensland Health employee (prescribed employer HHS, non-prescribed employer HHS or Department of Health) who is employed against a Health Practitioner position (HP1 – HP8) in a profession listed in the *Health Practitioners and Dental Officers (Queensland Health) Certified Agreement (No.2) 2016* - Schedule 1 (see Appendix A).

The Chief Investigator must be employed by Queensland Health for the duration of the research activity and must notify AHPOQ immediately of any changes to employment. If the Chief Investigator ceases to work for Queensland Health or is unable to continue with the research activity, the relevant Head of Department and Director of Allied Health (or equivalent) will be contacted to see if the project can continue with a new Chief Investigator that meets the eligibility requirements of the Scheme.

Should the Chief Investigator plan to take extended leave (more than 4 weeks) during the research project, AHPOQ must be notified in writing before commencement of the leave and details must be provided on the implications for the project’s activities and how the project timelines and outcomes will be met.

5.1.1 Researcher definitions – new vs mid-career vs established

The Chief Investigator’s research experience will define the application as ‘new’, ‘mid-career’ or ‘established’ researcher. The Chief Investigator’s time as a clinician does not influence this categorisation. For example, someone who has been practicing for 15 years but is undertaking their first
A new researcher:
• has not attained, but may be in the process of completing, a higher degree by research (including MPhil, PhD or professional doctorate); and
• has not been named Principal / Chief Investigator of a project that has successfully received funding through any funding scheme.

The new researcher generally:
• has no or minimal experience in obtaining ethical approval or undertaking research tasks; and
• has no or minimal experience in publishing the outcomes of previous research in peer reviewed journals, either as the primary author or a co-author.

A mid-career researcher:
• is less than 6 years out from a relevant postgraduate research qualification (that is, research Masters or PhD) OR has not attained, but may be in the process of completing, a higher degree by research (including MPhil, PhD or professional doctorate); and
• has obtained some competitive research funding (no more than $150,000 funding in total) as a Principal / Chief Investigator.

A mid-career researcher generally:
• has some experience in conducting research including applying for ethical approval, developing and following protocols, and managing small research teams;
• has some experience in publishing the outcomes of previous research in peer reviewed journals either as the primary author or a co-author; and
• has some experience presenting research results to a local, state or national audience.

An established researcher:
• is more than 6 years out from a relevant postgraduate research qualification (that is, research Masters or PhD); or
• has obtained significant levels of competitive research funding (over $150,000 funding in total) as a Principal / Chief Investigator;

An established researcher generally:
• has significant experience in conducting research including applying for ethical approval, developing and managing protocols, and managing budgets and research staff;
• has a substantial publishing history; and
• has a substantial experience presenting research results to a local, state or national audience.

5.2 Mentors
Mentors are required for all new researcher and mid-career researcher funding applications. A mentor is any individual with appropriate experience in designing and implementing research that will be an Associate Investigator in the project. Mentoring responsibilities include:
• share knowledge and skills regarding methods, directions, creative thinking, scientific communication and ethical requirements, etc.;
• provide advice and assistance to the Chief Investigator as required to complete the research activity;
• ensure the Chief Investigator meets all the terms and conditions of receiving the funds, including the provision of all required reports;
• oversee the Chief Investigator’s work.

While it is preferred that the mentor be a Queensland Health employee due to their active role in the project, this is not a requirement. However, the mentor must be from a Health Practitioner profession listed in the Health Practitioners and Dental Officers (Queensland Health) Certified Agreement (No.2) 2016 - Schedule 1 (see Appendix A).

5.3 Associate Investigators

An Associate Investigator is any individual who provides some intellectual and/or practical input into the research and whose participation warrants inclusion of their name on publications. The Chief Investigator must obtain written agreement from all Associate Investigators (in the form of a signature in Section 9 of the application form) to be named on the application.

Associate Investigators may be from a non-Health Practitioner profession and may work externally to Queensland Health.

6. Conditions of the Scheme

Before applying, the Applicant should ensure they are able to meet the following conditions:

1. A high standard of application will be required for funding to be awarded. The research scheme is competitive and applications will be judged according to pre-determined criteria and ranked accordingly.

2. The project is suitably focused and supervised and will enhance the applicant’s research knowledge and skills.

3. The nominated mentor (for new researcher and mid-career researcher projects) plays an active and supporting role in all stages of the project.

4. The research activity must benefit the body of knowledge for a minimum of one of the Health Practitioner professions. Partnerships with other professions (such as nursing or medicine) are desirable however the primary beneficiary must be a Health Practitioner profession.

5. The research activity must be conducted within Queensland Health to be eligible for funding. However, funding may be used to employ research assistants, statisticians or other relevant experts external to Queensland Health as required.

6. There is agreement and approval from the relevant line manager/supervisor in the HHS to progress this work.

7. The project must be supported by line managers whose services may be impacted by the evaluation.

8. Research funded by the Scheme must comply with established ethical guidelines of the relevant Queensland Health unit, government department, non-government organisation and/or university associated with the project. It is the responsibility of the applicant to ensure that the appropriate ethical approval is obtained from the relevant Institutional Ethics Committee prior to commencement of the research project (as applicable). A copy of all ethical approvals must be forwarded to AHPOQ.

9. If there are any proposed changes to how the funding is spent, these must be approved by the appropriate Director of Allied Health. AHPOQ is to be consulted and notified of any decision to reallocate funding.

10. There is an understanding that Chief Investigators who are awarded funding are planning to continue work within Queensland Health for the duration of the research activity. AHPOQ is to be notified immediately of any planned change of employment of the Chief Investigator and may revise allocated funding accordingly.
7. Application process

The following tips may be useful, particularly for new applicants:

- Carefully read this document, paying particular attention to eligibility rules and sign off requirements.
- Note the due date for applications and contact your Head of Department and Director of Allied Health (or equivalent) to advise them of your intention to apply. You will need to discuss with each officer when your application should be submitted to their office to allow plenty of time for sign-off.
- Contact any prospective team members prior to commencing your application to get their approval to participate on the application, check their eligibility and provide the personal information required by each person.

7.1 Application form

The template and closing dates for applications will be published on the Health Practitioner Research Internet site (http://www.health.qld.gov.au/hpresearch/default.asp). Late submissions will not be accepted under any circumstances.

Application forms will be reviewed by the Peer Review Panel on the following selection criteria:

- The research activity meets the aims and priorities of the Health Practitioner Research Scheme (as per sections 2 and 3 of this document)
- The research question and project aims are clear, and the hypotheses are sound.
- There is strong support for the proposed research (e.g. local, professional, evidence base).
- The study design and methodology achieves the research aims.
- Associate Investigator and mentor relationships with the Chief Investigator are feasible and suitable.
- Impact of the research activity is clear (e.g. clinical impact, organisational impact).
- The expected outcomes of the research activity are outlined.
- The research outline meets the formatting and length criteria (does not exceed three pages, is written in a minimum of 10pt font, single line spaced, with no modifications to the table column width). Any application that does not meet these criteria will be deemed ineligible.

New and mid-career researcher funding

Applications will be assessed on merit by the Peer Review Panel. A member of the Peer Review Panel may contact the Chief Investigator and/or mentor to clarify any queries or request additional information regarding the application.

Established research funding

Applications will be assessed on merit by the Peer Review Panel. Applicants who are successful in the shortlisting process will be invited to an interview.

7.1.1 Research outline content

It is expected that the outline of the proposed research will provide the following information:

Introduction
- Background of the issue.
- Justification for the project including the expected impact of the project.

Primary aims and hypotheses
- Provide the project aims and hypotheses, linking the project to the target area of the Scheme.

Methodology
- Research design.
- Research setting.
• Proposed participants or clinical data sets / sources (as relevant).
• Sample size justification to allow the feasibility and potential impact of the study to be assessed.
• Proposed interventions (if applicable).
• Equipment, materials and procedures (as relevant).
• Outcome measures.
• Proposed data management & analysis.
• Project time line.
• Highlight what contributions each project team member will make to the project.

Ethical considerations
• How you intend to manage any ethical issues identified in your actual or proposed ethics submission to a Human Research and Ethics Committee (e.g. targeted engagement with Aboriginal or Torres Strait Islander patients, managing informed consent and confidentiality of patient information).

Expected outcomes
• Dissemination strategy.
• How the expected practice / intervention change will be implemented within Qld Health (and elsewhere if applicable) post-project completion.

7.2 Certification
A full, signed copy of the application form must be submitted for the application to be eligible for consideration. It is understood that the project team may be located in a variety of facilities. As such, signatures across multiple pages will be accepted.

Emails advising of endorsement of the application will only be accepted in extenuating circumstances (i.e. the person must not be able to access a computer/printer to provide a signature within the requested timeframe due to being on personal/professional leave) and will only be accepted for members of the project team. You must obtain permission by the Health Practitioner Research Scheme Coordinator before providing an email of endorsement.

Please note: the Director of Allied Health is a position title and does not refer to your local Director of the relevant allied health profession. If you are unsure of the Director of Allied Health within your Hospital and Health Service, please contact the Health Practitioner Research Scheme Coordinator.

If all the required signatures are not provided, the application will be deemed ineligible and will not be processed further.

7.3 Outcomes
The outcomes of the application review and funding allocation processes are final and cannot be negotiated.

The results from the Peer Review Panel process will be sent to the Health Practitioner Research Advisory Group (HPRAG) for endorsement. HPRAG has discretion in determining the final amounts awarded to successful applicants based on the merit of applications. Applications considered by the panel to be of insufficient quality will not be awarded funds purely in order to ensure the total amount of available funds are allocated. A transparent procedure will be used to award funding, and HPRAG’s decision will be final.

The list of successful applicants will be published on the Health Practitioner Research QHEPS page. Unsuccessful applicants will be notified in writing, and individual feedback will be provided to those applicants who request it.
7.4 Funding

AHPOQ has no capacity to roll funds over across financial years. The Chief Investigator is responsible for providing the Allied Health Professions’ Office of Queensland with an invoice for the relevant amount in July of the funding year.

Funds will be allocated in July 2020 on the understanding that they will be expended by the Hospital and Health Service by 30 June 2021.

7.5 Reporting

Reports must be endorsed by the Chief Investigator, mentor, Head of Department (or equivalent) and Director of Allied Health.

It is a condition of funding that these reports be completed on time. Reminders will be distributed by AHPOQ when these reports are due.

NOTE: The Chief Investigator and mentor will be unable to apply for funding in future rounds of the Health Practitioner Research Scheme until all outstanding reports have been submitted.

The table below outlines the report due dates for this round:

<table>
<thead>
<tr>
<th>Project length</th>
<th>6-month progress report (1 July - 31 Dec 2020)</th>
<th>12-month progress report (1 Jan - 30 June 2021)</th>
<th>Final report</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 year</td>
<td>February 2021</td>
<td>August 2021</td>
<td>On project completion</td>
</tr>
</tbody>
</table>

* If the project is completed when the 12-month progress reports are due, Chief Investigators should submit a final report instead.

7.6 Ethics and SSA approvals

Applicants will be notified of their success in March 2020 on the understanding that they will begin their ethics and SSA applications immediately to allow time for the project to run as per the proposed timeline and for the funds to be expended by 30 June 2021.

If ethics and SSA approval has not been obtained prior to the submission of the Expression of Interest, the Chief Investigator must notify AHPOQ of the submission of their ethics and SSA applications and provide a copy of the approval letters for their files. If ethics and SSA approval has not been received by August 2020, AHPOQ in consultation with the appropriate Director of Allied Health may request that the funds are used for another research purpose.

7.7 Confidentiality

All information provided during the application process is received and accepted by the Department of Health in confidence, subject to any applicable statutory exception.

AHPOQ, the Peer Review Panel, HPRAG and other persons involved in the selection process will not disclose any personal confidential information to which they become privy as a result of exercising their responsibilities in the administration of the Health Practitioner Research Scheme.

Information including the names of successful applicants, their administering health facility, the title and summary of the research project and the funding amount will be made available publicly and for regular reporting and evaluation purposes.

Details of unsuccessful applicants will remain confidential.

Documents held by the Queensland Government are subject to the Right to Information Act 2009 and will be retained as required under the Public Records Act 2002.

8. Further information

Further information regarding the Health Practitioner Research Scheme may be obtained by contacting:
Health Practitioner Research Scheme Coordinator
Allied Health Professions’ Office of Queensland
Email: HP-Research@health.qld.gov.au
Phone: 3328 9304
9. Appendices

Appendix A - Health Practitioner / Dental Officer professions

The list of eligible disciplines and professions:

(a) Anaesthetic Technicians;
(b) Art Therapists;
(c) Audiologists;
(d) Biomedical Engineers and Technicians;
(e) Breast Imaging Radiographers;
(f) Cardiac Perfusionists;
(g) Chemists and/or Radio-Chemists;
(h) Child Guidance Therapists;
(i) Child Therapists;
(j) Clinical Measurement Scientists and Technicians;
(k) Dental Officers
(l) Dental Prosthetists;
(m) Dental Technicians;
(n) Dental Therapists;
(o) Dietitians/Nutritionists;
(p) Environmental Health Officers;
(q) Epidemiologists;
(r) Exercise Physiologists;
(s) Forensic Scientists and Technicians;
(t) Genetic Counsellors;
(u) Health Promotion Officers;
(v) Leisure Therapists;
(w) Medical Illustrators;
(x) Medical Laboratory Scientists and Technicians;
(y) Music Therapists;
(z) Neuropsychologists;
(aa) Neuropsychologists;
(bb) Nuclear Medicine Technologists;
(cc) Nutritionists;
(dd) Occupational Therapists;
(ee) Oral Health Therapists;
(ff) Orthoptists;
(gg) Orthotists, Prosthetists and Technicians;
(hh) Patient Safety Officers;
(ii) Pharmacists and Technicians;
(jj) Physicists, including Radiation Oncology Medical Physicists, Nuclear Medical Physicists, Radiology Medical Physicists, and Health Physicists;
(kk) Physiotherapists;
(ll) Podiatrists;
(mm) Psychologists including Clinical and Neuropsychologists;
(mm) Public Health Officers;
(oo) Radiation Therapists;
(pp) Radiographers/Medical Imaging Technologists;
(qq) Rehabilitation Engineers and Technicians;
(rr) Researchers, Clinical Trial Coordinators and Data Collection Officers; Scientists – Environmental Health;
(ss) Social Work Associates;
(tt) Social Workers;
(uu) Sonographers;
(vv) Speech Pathologists; and
(ww) Welfare Officers.