

0:0:0.0 --> 0:0:3.610

Rachelle PITT

Pat, but otherwise we will kick off.

0:0:7.120 --> 0:0:11.150

Rachelle PITT

Though welcome before we get into the uh bits and pieces.

0:0:11.160 --> 0:0:21.510

Rachelle PITT

I would first like to acknowledge the traditional owners of the land on which we are all meeting today and pay my respects to elders, past, present and emerging Christian.

0:0:21.520 --> 0:0:23.770

Rachelle PITT

I can't seem to change the slides.

0:0:23.780 --> 0:0:24.140

Rachelle PITT

Thank you.

0:0:24.640 --> 0:0:25.980

Rachelle PITT

Umm OK.

0:0:26.590 --> 0:0:33.150

Rachelle PITT

Because we have so many people online, if you're just able to stay on mute, that would be most appreciated.

0:0:33.390 --> 0:0:38.140

Rachelle PITT

At the end of the session, we will have plenty of time for questions.

0:0:38.830 --> 0:0:41.160

Rachelle PITT

We have a number of presenters talking today.

0:0:41.170 --> 0:0:43.440

Rachelle PITT

You can direct your questions to any one of us.

0:0:44.160 --> 0:0:53.730

Rachelle PITT

Umm, umm and we have also received a couple of questions in advance of today that we will make sure the information is covered.

0:0:54.40 --> 0:1:5.280

Rachelle PITT

If you've submitted one of those questions and you feel like we haven't hit the mark with answering that, please again, just pop it in the chat and we'll do our best to provide further clarifying information.

0:1:8.890 --> 0:1:26.890

Rachelle PITT

Now, I haven't been particularly well, so I'm actually gonna hand over to Christian, who is in my team and he's going to run through some information with you about this year's round and then we have a panel member to talk to you and a previous HPRS recipient to go through their experience.

0:1:26.900 --> 0:1:28.810

Rachelle PITT

So I'll hand over to you now, Christian.

0:1:30.710 --> 0:1:33.260

Kristyan Guppy-Coles

Thank you, Rachelle and for those who don't know me.

0:1:33.270 --> 0:1:34.440

Kristyan Guppy-Coles

My name is Christian guppycoles.

0:1:34.450 --> 0:1:37.540

Kristyan Guppy-Coles

I'm the HP research coordinator in the office of the Chief Allied help.

0:1:37.560 --> 0:1:40.180

Kristyan Guppy-Coles

Health officer and thank thank you everyone, for joining today.

0:1:40.190 --> 0:1:46.880

Kristyan Guppy-Coles

As Michelle said, please put your comments in the chat and we'll try to get you to them in the Q&A session towards the end of this session.

0:1:47.110 --> 0:1:54.380

Kristyan Guppy-Coles

So today I'm just going to be spending a bit of time before our panel member and our previous HPRS reviewer present just a bit of information.

0:1:54.390 --> 0:1:57.640

Kristyan Guppy-Coles

The core information about the HPRS 2024 round.

0:2:0.540 --> 0:2:7.80

Kristyan Guppy-Coles

So the minute I I can't have administers the HPRS which runs only has been operating since 2004 in multiple forms.

0:2:8.620 --> 0:2:11.220

Kristyan Guppy-Coles

Sorry, I think Rachelle taking control back.

0:2:11.660 --> 0:2:11.980

Kristyan Guppy-Coles

Umm.

0:2:12.600 --> 0:2:19.30

Kristyan Guppy-Coles

And this game has been very it's funded and we're well over 120 different research projects from new to experienced researchers.

0:2:20.110 --> 0:2:20.440

Jessie Blanch

OK.

0:2:19.40 --> 0:2:33.30

Kristyan Guppy-Coles

Now, this particular round is just looking for the new research scheme and the aims of the HPRS is are to support research that adds to the evidence for health practitioner services, enhancing patient consumer consent, the community outcomes and demonstrates the value of health practitioner workforce.

0:2:33.400 --> 0:2:50.120

Kristyan Guppy-Coles

The aim is also to build the research capacity and capability of the HP workforce in Queensland Health, build and contribute to the multidisciplinary research and health delivery partnerships and collaboration, as well as provide opportunities to help practitioner research across the state to enhance dissemination of research findings and the translation of research into practice.

0:2:51.120 --> 0:3:4.240

Kristyan Guppy-Coles

But today we've got Paul Wilkinson, a member of of our HPRS peer review panel and director of Allied Health, and Bundaberg, Widebay Hoffman Health Service to provide some top tips and advice on what the panel is looking for when assessing applications.

0:3:4.430 --> 0:3:18.120

Kristyan Guppy-Coles

And we also got Annabel Doolan, a previous hedge peers, novice research recipient and dietitian from Queensland Children's Hospital, to provide her experience with HP researcher and how the funding supported her to further her research activities and associated in debits.

0:3:20.300 --> 0:3:41.480

Kristyan Guppy-Coles

So as I mentioned before, the the HPRS funding round is H is a you know open to new researchers in this particular year and this is this funding is provided from the HPDO tool for up to \$400,000 for eligible HTTPS to build research capacity in the workforce and facilitate the implementation of evidence based clinical services and health.

0:3:43.450 --> 0:3:55.660

Kristyan Guppy-Coles

So just to clarify the categories and although we've got 3 categories listed here, we are only focusing on the new researchers, the mid career experience researcher definitions are there to provide a bit of clarity for those who are unsure about where they sit.

0:3:55.990 --> 0:3:59.820

Kristyan Guppy-Coles

So generally, a new researcher has no or minimal experience and undertaking research.

0:4:0.70 --> 0:4:8.320

Kristyan Guppy-Coles

This interview research tasks such as obtaining ethical approval or publishing outcomes of previous research in peer review journals, either as a primary or through a coauthor.

0:4:9.820 --> 0:4:18.140

Kristyan Guppy-Coles

For comparison and mid career researcher have some experience in conducting research and managing small research teams as well as publishing or presenting the outcomes of research.

0:4:18.210 --> 0:4:21.690

Kristyan Guppy-Coles

And obviously, an experienced researcher is the next level up for that.

0:4:21.730 --> 0:4:24.640

Kristyan Guppy-Coles

And as I mentioned before, it's just the new research into this particular round.

0:4:24.650 --> 0:4:29.440

Kristyan Guppy-Coles

So we're very pleased to say that we had some stakeholder workshops at done earlier in the year.

0:4:29.530 --> 0:4:36.260

Kristyan Guppy-Coles

We conducted the help guide, the updating of the HPRS application and guidelines, and there's several new changes to the application.

0:4:36.270 --> 0:4:39.50

Kristyan Guppy-Coles

So I just got a list a few of the major ones.

0:4:39.60 --> 0:4:46.250

Kristyan Guppy-Coles

We've now got a synopsis field which allows some applicants to put in a high level summary for a layperson for media presentations.

0:4:46.620 --> 0:4:53.480

Kristyan Guppy-Coles

Obviously that's could be done probably last when you write your application and that sort of just summarizes simply about what you're intending to do.

0:4:54.300 --> 0:5:4.690

Kristyan Guppy-Coles

Now another change is we've expanded embedded the guiding statements in certain field boxes now previously these were added in to the fields that will remove when you started to write your application.

0:5:4.700 --> 0:5:10.90

Kristyan Guppy-Coles

Now this has been embedded to help guide your process of the construction of your application.

0:5:10.100 --> 0:5:15.180

Kristyan Guppy-Coles

Just to keep you, you know, aligned with what we're kind of looking for in these applications.

0:5:15.730 --> 0:5:18.830

Kristyan Guppy-Coles

We've also now got project outputs as well as outcomes and impacts.

0:5:18.840 --> 0:5:39.640

Kristyan Guppy-Coles

Obviously, project outputs from focus more on what are the products that have developed at the end of the activity, so those could be inferential meanings, project logic, models, policies or procedures, privacy impact assessments, clinical protocols, guidelines and obviously things like research publications, business cases and future grant proposals.

0:5:39.900 --> 0:5:55.720

Kristyan Guppy-Coles

Now, in comparison, outcomes and impacts is another area that we're looking for where we're looking to see what the outcomes of the project where including how the project findings actually addressed the need described in the background section of the application and how the findings would be implemented in Queensland health.

0:5:56.90 --> 0:6:4.990

Kristyan Guppy-Coles

Now, in addition to that impacts is sort of where applicants have the opportunity to articulate about how these findings would have an impact in things and health and potentially where applicable.

0:6:5.420 --> 0:6:13.910

Kristyan Guppy-Coles

I want the potential pathways are to actually engage that, not that we expect those researchers that the applicant teams to actually engage that beyond the hedge peers project in question.

0:6:14.300 --> 0:6:17.850

Kristyan Guppy-Coles

Now we're also having an increased level of emphasis on consumers.

0:6:18.440 --> 0:6:42.300

Kristyan Guppy-Coles

Now, we've always been a very large advocate of consumer engagement and involvement in research, but we've reflected that a bit more specifically in the application in this HPRS 2024 app and that includes the consideration of consumers not only for engagement for some of the use of like surveys for example, but also in the development and delivery of the project.

0:6:42.310 --> 0:7:0.340

Kristyan Guppy-Coles

So to include a consumer as appropriate as an AI, something that we'd highly encourage because consumers, not just the patient populations but also the workforce is can assist in identifying what a suitable research proposal or methodology might comprise of umm and in in that section as well.

0:7:0.350 --> 0:7:8.410

Kristyan Guppy-Coles

We also talking about in benefit beneficiaries or your end users as well, which are often those work consumer workforces at the same time.

0:7:8.740 --> 0:7:12.350

Kristyan Guppy-Coles

In addition, we've got a data management consideration as part of one of the fields.

0:7:12.360 --> 0:7:19.230

Kristyan Guppy-Coles

And that's just because with the new movement of the digital transformation to the paradigm within Queensland health, more research projects are involving.

0:7:20.30 --> 0:7:30.880

Kristyan Guppy-Coles

And with more digital and data activities and for project teams without articulate exactly how they're going to be mobile, accessing and mobilising and utilizing that data is quite important to demonstrate feasibility to project.

0:7:30.890 --> 0:7:37.560

Kristyan Guppy-Coles

There are a lot of complex processes that need to be navigated depending on the kind of project within the Queensland Health Service.

0:7:38.270 --> 0:7:44.580

Kristyan Guppy-Coles

The last major change has been section where we're requesting information about the support.

0:7:44.590 --> 0:8:5.520

Kristyan Guppy-Coles

You may be able to identify or have confirmed beyond just the project team, and that includes support from your facility or local environment, but also anything else such as health economists engaged with the university contracting professional services where required or statistical support for example, and just and that obviously reflects not just across the board, but it's specific to the project in question.

0:8:5.530 --> 0:8:15.660

Kristyan Guppy-Coles

So just the balance, the identification of what you're intending to do with the appropriate subject matter expertise and experience, not only to the team but also the local environment, anything similar.

0:8:16.30 --> 0:8:19.510

Kristyan Guppy-Coles

So a target areas and priorities for this particular round have not changed.

0:8:19.570 --> 0:8:22.380

Kristyan Guppy-Coles

So we do have three major target areas as we have previously.

0:8:22.390 --> 0:8:33.550

Kristyan Guppy-Coles

So that includes the evaluation, all of innovative models of care and service delivery models led by

the health practitioner workforce, digital transformation led by end or primarily impacting the health practitioner workforce.

0:8:33.780 --> 0:8:41.530

Kristyan Guppy-Coles

Services, processes and model of care and then also clinical education and training initiatives led by and will primarily impacting our practitioner workforce.

0:8:43.460 --> 0:8:47.390

Kristyan Guppy-Coles

Now the bad the priorities that we have in HPRS have also not changed.

0:8:47.400 --> 0:9:7.270

Kristyan Guppy-Coles

That's consumer involvement, development delivery, the research project, as I mentioned before, we've got a heavy emphasis on that consumer engagement, rural, regional and remote partnerships of chief investigators or CIS research projects led by CIS from non tertiary sites and also club relations across professions, services sites and or external agencies.

0:9:7.960 --> 0:9:18.230

Kristyan Guppy-Coles

In terms of changes to the current criteria for this particular round, umm, the waiting, the waiting and the for the target area along and priorities are unchanged.

0:9:18.460 --> 0:9:26.290

Kristyan Guppy-Coles

Also noting again that not every targeted priority are in needs to be addressed in the application, it has to be a minimum of 1 and you can adhere to more than one as well.

0:9:26.460 --> 0:9:30.690

Kristyan Guppy-Coles

But don't go to the ends of the Earth to try and justify alignment with every single one of them.

0:9:30.880 --> 0:9:31.810

Kristyan Guppy-Coles

It's not applicable.

0:9:32.690 --> 0:9:43.440

Kristyan Guppy-Coles

Uh feasibility of the project and its output is now a standalone criteria and so with that we're looking for, you know, the realistic outcomes of the outputs of this of the project that's being proposed.

0:9:43.450 --> 0:9:48.800

Kristyan Guppy-Coles

And as I mentioned before, we're looking to see that you've got a matched to what you're intending to engage in.

0:9:48.930 --> 0:9:59.790

Kristyan Guppy-Coles

You've got a match, project, team Environment and other support as identified or confirmed, and more details of this are provided in HPRS guidelines, which will also put in the chat as well.

0:10:1.300 --> 0:10:11.830

Kristyan Guppy-Coles

So what activities will be funded predominantly back for the project team members to undertake the research activity and that also includes research assistance, statisticians and other research experts time as well.

0:10:12.80 --> 0:10:17.850

Kristyan Guppy-Coles

This can also include administrative intercommunication, costs, travel costs and costs associated with the dissemination of research results.

0:10:18.200 --> 0:10:23.670

Kristyan Guppy-Coles

We'll we cannot support funding for it is engagement of clinicians to undertake clinical activity.

0:10:23.780 --> 0:10:34.890

Kristyan Guppy-Coles

If additional funding is required, undertake clinical activities suspected that your budget will actually demonstrate to the review panel that you've got financial support from your HHS or another funding source to ensure that your project is indeed feasible.

0:10:34.980 --> 0:10:44.90

Kristyan Guppy-Coles

We also don't support the procurement of capital expenditure under these projects, including hardware and clinical machinery or office space or other location related expenditure.

0:10:45.390 --> 0:10:54.590

Kristyan Guppy-Coles

Uh, we also do note as well that the use of leakage assistance statisticians and other consultants in terms of you know allocation of the budget should be reasonable and limited web possible.

0:10:56.820 --> 0:11:5.70

Kristyan Guppy-Coles

If you're still not sure for the examples of activities and resources that can or can or will or will not be funded can be found in Section 5 of the application guidelines.

0:11:5.820 --> 0:11:7.190

Kristyan Guppy-Coles

So what makes a good application?

0:11:7.450 --> 0:11:13.930

Kristyan Guppy-Coles

Paul will speak to that very, very soon, but just as a sort of brief recap, we wanna see a good justification for the need of the process.

0:11:14.640 --> 0:11:16.150

Kristyan Guppy-Coles

That's clearly outlined and supported.

0:11:16.580 --> 0:11:21.150

Kristyan Guppy-Coles

Clearly linked, the aims and hypothesis and strongly aligned into the Tigers and priority areas.



0:11:21.620 --> 0:11:25.790

Kristyan Guppy-Coles

We wanna see outcomes that match the aims and speak to the need for the project.

0:11:25.880 --> 0:11:27.740

Kristyan Guppy-Coles

We would like to see thoughtful design.

0:11:28.330 --> 0:11:36.680

Kristyan Guppy-Coles

We said projects, including apart from methodology and data analysis with detailed sample size justifications where possible, we again back to consumers.

0:11:36.690 --> 0:11:40.520

Kristyan Guppy-Coles

Again, we want to see meaningful consumer involvement and engagement where applicable as well.

0:11:40.530 --> 0:11:57.850

Kristyan Guppy-Coles

We do know some projects can have a bit more of a limited to consumer involvement or engagement and so we do identify that as well at the end of the day, a feasible realistic project and a timeline to match that is very important with an accurate and justified budget and go and just request the Max amount of funding justify why you need that use of that funding.

0:11:59.590 --> 0:12:0.920

Kristyan Guppy-Coles

I want my school project team.

0:12:1.470 --> 0:12:12.620

Kristyan Guppy-Coles

You need diversity in the team, but skills and experience required, as I said before, to match the proposed reaching activity and all the duties required in there with clearly defined roles and there's opportunity for you to articulate that within the application.

0:12:13.150 --> 0:12:32.210

Kristyan Guppy-Coles

Please ensure that the CI that AI is and the mentors will meet the eligibility criteria and that's outlined in the guidelines and the key or another top tip is early and frequent engaged with your team members as early as possible and as frequently as required will really ensure a high quality application and also if feasible, project if awarded again.

0:12:32.220 --> 0:12:37.880

Kristyan Guppy-Coles

As I said before, if you got any questions, please put it in the chat function and we'll try and answer that during the Q&A session as well.

0:12:38.250 --> 0:12:41.150

Kristyan Guppy-Coles

And this again being recorded will be available in the.

0:12:42.750 --> 0:12:52.120

Kristyan Guppy-Coles

HP Research website so I might move in in just a second to Paul Wilkinson, who can present his top tips about how to write a good application and what the peer review panel are looking for.

0:12:52.130 --> 0:12:53.320

Kristyan Guppy-Coles

And then a bill will follow after that.

0:12:54.240 --> 0:12:56.270

Kristyan Guppy-Coles

Umm you know application forms.

0:12:56.280 --> 0:12:58.650

Kristyan Guppy-Coles

If there's a last note, the applications are now open.

0:12:58.840 --> 0:13:11.740

Kristyan Guppy-Coles

Please ensure that when your applications are completed submitted then include all of the signatures they're submitted as a PDF and outcomes are final and it's advised in in December this year with the funding commencing in July 1st, 2024.

0:13:14.890 --> 0:13:15.430

Kristyan Guppy-Coles

Right.

0:13:15.490 --> 0:13:18.20

Kristyan Guppy-Coles

I might hand over now to Paul.

0:13:18.90 --> 0:13:19.200

Kristyan Guppy-Coles

Paul, you available there?

0:13:20.550 --> 0:13:22.430

Paul Wilkinson

I Yep, I certainly am.

0:13:22.440 --> 0:13:23.380

Paul Wilkinson

I'll yeah.

0:13:23.430 --> 0:13:26.330

Paul Wilkinson

You need to stop sharing your screen before I share mine.

0:13:29.220 --> 0:13:30.250

Paul Wilkinson

That's just you, Rachelle.

0:13:30.260 --> 0:13:31.910

Paul Wilkinson

Now just gotta look at you for a minute.

0:13:31.920 --> 0:13:32.250

Paul Wilkinson  
Hang on.

0:13:32.340 --> 0:13:32.960

Paul Wilkinson  
No, no.

0:13:35.150 --> 0:13:35.660

Paul Wilkinson  
Alright.

0:13:39.40 --> 0:13:39.320

Paul Wilkinson  
Like that.

0:13:46.330 --> 0:13:47.260

Paul Wilkinson  
Can I confirm?

0:13:47.270 --> 0:13:48.220

Paul Wilkinson  
Can any everyone see that?

0:13:49.830 --> 0:13:50.10

Laura Rainey  
Yep.

0:13:50.760 --> 0:13:51.230

Paul Wilkinson  
Awesome.

0:13:51.290 --> 0:13:52.340

Paul Wilkinson  
Alright, thank you.

0:13:53.80 --> 0:13:55.590

Paul Wilkinson  
But hi everyone, so I'm Paul.

0:13:55.600 --> 0:14:0.690

Paul Wilkinson  
I've been on a reviewer on this panel for for quite some time.

0:14:0.900 --> 0:14:5.50

Paul Wilkinson  
This year will be my fifth year, so I've been looking at a lot of these.

0:14:5.300 --> 0:14:12.460

Paul Wilkinson  
So a lot of these Christians already covered, but I'm just trying to distill it down into some, some, some key pointers.

0:14:13.850 --> 0:14:23.410

Paul Wilkinson

So first up, I'm just I'm sure you're aware and even that 75 of you in this meeting, it is consistently competitive.

0:14:23.420 --> 0:14:26.830

Paul Wilkinson

So there are lots of applications, but don't let that put you off.

0:14:27.60 --> 0:14:41.140

Paul Wilkinson

This is novice category, so give it your best shot and and some of what I'll talk about briefly is about refining that so that you really do submit something that has a greater chance of success.

0:14:43.700 --> 0:14:44.830

Paul Wilkinson

I can't stress this one enough.

0:14:44.840 --> 0:14:45.130

Paul Wilkinson

Get a.

0:14:45.140 --> 0:14:45.870

Paul Wilkinson

Get a mentor.

0:14:45.880 --> 0:14:48.780

Paul Wilkinson

Someone with past research experiences is is gold.

0:14:49.0 --> 0:14:50.940

Paul Wilkinson

Umm, but there are.

0:14:50.950 --> 0:15:3.940

Paul Wilkinson

There's really a specific ways that these need to be written in most cases, and if you've never done it before, that can be particularly challenging and that's I'm not just talking about the application, but also thinking about your research question.

0:15:3.950 --> 0:15:5.520

Paul Wilkinson

How are you gonna formulate that?

0:15:5.730 --> 0:15:18.170

Paul Wilkinson

What your outputs and your outcomes are going to be having someone that's done that before and understands how it works and how review panels like I sit on work is, is really, really important.

0:15:20.660 --> 0:15:21.540

Paul Wilkinson

Jack, the literature.

0:15:21.600 --> 0:15:30.400

Paul Wilkinson

So as a reviewer, I've seen a lot of submissions where this has already been done and the person submitting this particular.

0:15:31.600 --> 0:15:37.360

Paul Wilkinson

Application has probably not done due diligence and looked to see whether this is already in the literature.

0:15:37.370 --> 0:15:40.710

Paul Wilkinson

Who was being done in some form or another somewhere else?

0:15:41.340 --> 0:15:50.770

Paul Wilkinson

If you're not sure, talk to your mentor because someone may have done something somewhere else, but actually you're doing something very slightly different that might actually, I'm pose a different question.

0:15:51.730 --> 0:15:59.300

Paul Wilkinson

The other thing is, you know, reach out to your networks, reach out to to other people around you to see if this is currently being done somewhere else.

0:15:59.310 --> 0:16:16.620

Paul Wilkinson

So it might not have hit the literature yet, might not be published, but someone might be doing it occasionally we see an application for something that looks very, very similar or almost identical to an application that came the year before, which is currently underway.

0:16:16.630 --> 0:16:32.730

Paul Wilkinson

So as not being being published, the other the other component to that is if it's being done elsewhere, maybe you could join with them and and create a stronger a research question or methodology or broader scope that might increase your chances.

0:16:35.400 --> 0:16:39.780

Paul Wilkinson

Christians already referred to this, but check the funding eligibility and requirements.

0:16:40.520 --> 0:16:42.650

Paul Wilkinson

I think it was your second to last.

0:16:42.660 --> 0:16:49.370

Paul Wilkinson

Slide I thought he's looked at, so make sure that you're asking to fund or research the right things.

0:16:50.140 --> 0:17:0.280

Paul Wilkinson

So, for example, Christian did talk about, you know, what you can ask the money for and not ask funds for, but also this needs to impact health practitioners.

0:17:0.290 --> 0:17:10.210

Paul Wilkinson

So we've seen research applications that might impact nursing or medicine out of that and that's beyond the scope of this particular funding.

0:17:12.680 --> 0:17:12.840

Paul Wilkinson

Uh.

0:17:12.980 --> 0:17:14.150

Paul Wilkinson

Christian talked about this as well.

0:17:14.160 --> 0:17:19.650

Paul Wilkinson

Consumer engagement this this has been really strengthened this year and I can't emphasize this enough.

0:17:19.660 --> 0:17:21.110

Paul Wilkinson

It needs to be meaningful.

0:17:21.250 --> 0:17:25.190

Paul Wilkinson

We need to understand how you're doing it and it can't be taken Mystic.

0:17:25.240 --> 0:17:30.870

Paul Wilkinson

So consumer engagement is not a consumer survey at the end of your piece of research.

0:17:30.960 --> 0:17:38.670

Paul Wilkinson

This is meaningful engagement with consumer or consumers, if appropriate, in the actual development of your research methodology.

0:17:38.740 --> 0:17:41.820

Paul Wilkinson

So we're gonna be really looking hard for that.

0:17:42.650 --> 0:17:52.340

Paul Wilkinson

And also in in terms of meaningful engagement, rural and regional engagement as well and I'm particularly passionate about that coming from regional Queensland.

0:17:52.590 --> 0:18:11.120

Paul Wilkinson

So you know, we want to see meaningful engagement involvement in in the survey in, in the, in the research design and methodology, not just a kind of a model that just employs aims to data gather at sites because they're regional.

0:18:11.230 --> 0:18:14.860

Paul Wilkinson

So there is a subtle difference, and it's important that you articulate now.

0:18:15.180 --> 0:18:18.430

Paul Wilkinson

Those individuals are incorporated in your in your plan.

0:18:20.690 --> 0:18:25.460

Paul Wilkinson

Do you think this one is obvious, but make your aims and objectives clear?

0:18:26.330 --> 0:18:34.420

Paul Wilkinson

Really very experienced researchers can write beautiful pros, and there's a reviewer you can completely understand what their aims and objectives are.

0:18:35.130 --> 0:18:39.960

Paul Wilkinson

But if you're new to research, sometimes that's that's harder, but it doesn't have to be beautiful praise.

0:18:39.970 --> 0:18:41.860

Paul Wilkinson

Sometimes dot points are better.

0:18:42.530 --> 0:18:43.660

Paul Wilkinson

What are your aims?

0:18:43.790 --> 0:18:45.280

Paul Wilkinson

What are your objectives?

0:18:46.110 --> 0:18:58.60

Paul Wilkinson

If I'm looking at that as as a reviewer, and that's really clear to me, that really helps when I'm looking at the other sections as as part of your application and as a follow on from that, make sure your outcomes are clear too.

0:18:58.100 --> 0:19:1.850

Paul Wilkinson

So they need to align with your aims and objectives.

0:19:3.450 --> 0:19:5.400

Paul Wilkinson

I'm feasibility.

0:19:6.170 --> 0:19:7.740

Paul Wilkinson

This is really important as well.

0:19:7.750 --> 0:19:11.300

Paul Wilkinson

So, uh, you could be able to do so.

0:19:11.310 --> 0:19:14.130

Paul Wilkinson

This is outputs, not outcomes.

0:19:14.170 --> 0:19:18.580

Paul Wilkinson

Are you gonna be able to do what you say you are with the resources and budgets requested?

0:19:19.730 --> 0:19:33.100

Paul Wilkinson

So to give an extreme example, are you asking for a full time research assistant who is going to do 10 interventions in a year, or are you asking for .1 of a research assistant who's gonna do 2000?

0:19:34.40 --> 0:19:44.630

Paul Wilkinson

You know, is it, is it realistic and as are we as a panel and and and other members of the panel going to believe that you're gonna be able to achieve what you can with what you've asked for.

0:19:46.290 --> 0:19:48.100

Paul Wilkinson

I'm can anyone read that?

0:19:48.470 --> 0:19:49.440

Paul Wilkinson

No, nor can I.

0:19:50.10 --> 0:19:53.500

Paul Wilkinson

Font size don't change it.

0:19:53.560 --> 0:19:55.0

Paul Wilkinson

We do notice.

0:19:55.50 --> 0:19:58.510

Paul Wilkinson

So there is criteria and.

0:19:59.770 --> 0:20:3.920

Paul Wilkinson

I don't change the font type, don't change the font size, don't change.

0:20:3.970 --> 0:20:5.130

Paul Wilkinson

Change the line spacing.

0:20:5.140 --> 0:20:6.390

Paul Wilkinson

Don't change the margins.



0:20:6.400 --> 0:20:15.510

Paul Wilkinson

It's not fair when a majority of people stick to that requirement, and then you try and squeeze a little bit more in I I can't emphasize that enough.

0:20:15.720 --> 0:20:18.350

Paul Wilkinson

Sometimes it's almost been in ineligible.

0:20:18.360 --> 0:20:22.140

Paul Wilkinson

I didn't know there was an 8 font, so I'm please don't do that.

0:20:23.920 --> 0:20:28.580

Paul Wilkinson

The time frames as well be be realistic with your key milestones.

0:20:28.590 --> 0:20:35.230

Paul Wilkinson

You want to ensure that when we're looking at that, that what you say you're gonna achieve is is realistic.

0:20:35.760 --> 0:20:37.340

Paul Wilkinson

Again, I can use some extremes.

0:20:38.450 --> 0:20:55.560

Paul Wilkinson

You know something that we feel could be achieved within a three month time frame, yet you're asking for a budget for a year or conversely the other way around, so that there might there my top tips from spending quite a lot of time looking at these.

0:20:56.170 --> 0:20:58.70

Paul Wilkinson

So yeah, thank you.

0:21:5.430 --> 0:21:5.950

Kristyan Guppy-Coles

Thank you, Paul.

0:21:7.100 --> 0:21:12.80

Kristyan Guppy-Coles

Really appreciate that I might move on to Annabel now if Annabel's ready to present as well.

0:21:40.820 --> 0:21:45.590

Rachelle PITT

Annabel, weekend, see your presentation, but we can't hear you just yet.

0:21:59.120 --> 0:22:3.310

Annabel Doolan

We now excellent thuggee, had said.

0:22:3.320 --> 0:22:4.470

Annabel Doolan

Sorry about that everyone.

0:22:5.380 --> 0:22:20.90

Annabel Doolan

So start again my I I was the clinician administering this research grant at our site and as a novice researcher, the two most frequent questions that I found myself asking were who do I need to speak to about that and who can help me with that.

0:22:20.580 --> 0:22:26.170

Annabel Doolan

And for people who are considering an application, I think you should have those questions in the forefront of your mind.

0:22:28.510 --> 0:22:42.230

Annabel Doolan

So this is our project timeline and for anyone who has any experience in research, what you'll see is that it doesn't look linear that we were successful in the 2000 and 2021 funding round.

0:22:44.320 --> 0:22:50.170

Annabel Doolan

Our project timeline took a little hit like everybody did that here with with COVID, our ethics are now.

0:22:50.180 --> 0:22:57.610

Annabel Doolan

Governance was cleared in January of 2021 in our actual project and evaluation didn't get underway until March.

0:22:57.620 --> 0:23:10.350

Annabel Doolan

In that time we had some changes to our study team which was supported by the the Allied Health Office and we completed our pilot and evaluation between March and July to a point that.

0:23:11.100 --> 0:23:16.290

Annabel Doolan

Today, what we now have our project was investigating delegation in the pediatric setting.

0:23:16.360 --> 0:23:20.910

Annabel Doolan

We have an embedded delegation workforce model in our department.

0:23:21.40 --> 0:23:37.690

Annabel Doolan

We now have other sites around the state who have shown interest in our model, people who've been on our PEP and Logan placements in our department have taken elements of our model back to their sites and we really quite proud of of the model that we have.

0:23:37.700 --> 0:23:46.680

Annabel Doolan

But some of the learnings that I have now, I wish I've had way back in the beginning because it certainly would inform our project next time round.

0:23:47.640 --> 0:23:59.470

Annabel Doolan

So our project was looking to evaluate the feasibility of the delegation model in the pediatric setting and we clearly identified our patient outcomes and our service delivery outcomes.

0:23:59.910 --> 0:24:3.330

Annabel Doolan

And this speaks to the value of the research team.

0:24:3.340 --> 0:24:42.760

Annabel Doolan

Our first learning of our project was that whilst some of our outcomes that we've articulated that we were going to be able to measure and evaluate were easy to do, some of the ones that related specifically to service delivery, I'm outcomes we found that we weren't on that we weren't able to do that once we hit the pilot phase and and so that speaks to who we needed in our team in the planning phase who can help me with that, the health economist to help with our evaluation a business while somebody from the BI team to help us with what we could pull out of IMR and looking at our digital workflows that we were going to do that with.

0:24:42.810 --> 0:25:4.320

Annabel Doolan

So that the data that we would pull from the image would be valid and be able to actually demonstrate what we were hoping to do when we came to evaluating our project, what we could look at was a patient demographics, the occasions of delegated services and the types and we could really look at the behaviour change and how that model was had become embedded in our department.

0:25:5.100 --> 0:25:5.480

Annabel Doolan

Umm.

0:25:5.720 --> 0:25:6.650

Annabel Doolan

And so that suffers.

0:25:6.660 --> 0:25:8.570

Annabel Doolan

Learning your research team is key.

0:25:8.580 --> 0:25:26.710

Annabel Doolan

From early on, the research grant did support us hugely and being able to apply a really solid research framework to this project and what we did really well was engage our consumers from the very get go in the planning phase, we created a research team.

0:25:26.720 --> 0:25:40.50

Annabel Doolan

We asked dietitians in the department who would like to be champions and we set up regular

communication points in our staff meetings and in our daily huddles, asking for input and advice on what were the best digital workflows.

0:25:40.60 --> 0:25:41.140

Annabel Doolan

What was the best process?

0:25:41.290 --> 0:25:52.870

Annabel Doolan

They conducted a survey with our workforce who we had identified as our consumers here and ask them to identify which clinical tasks would be appropriate for delegation.

0:25:52.880 --> 0:25:55.870

Annabel Doolan

And we developed our clinical task instructions based on that.

0:25:56.160 --> 0:25:59.590

Annabel Doolan

Our dietitians were involved in the training of our nutrition assistant.

0:26:0.80 --> 0:26:5.210

Annabel Doolan

They were also surveyed prior to what they would be comfortable to delegate have delegated to them.

0:26:5.920 --> 0:26:27.310

Annabel Doolan

A dietitians were involved in the training of our and the validation of our Nas to deliver this this work and also the validations of the digital workflows that we've identified and in that in that planning phase we had a clear opportunity for feedback to be provided so that we could get those right before we hit the pilot phase in the pilot phase.

0:26:27.440 --> 0:26:33.710

Annabel Doolan

We continue to have our champions and also I was available in that daily huddles to support people.

0:26:33.800 --> 0:26:34.550

Annabel Doolan

What do you need?

0:26:34.680 --> 0:26:35.990

Annabel Doolan

How how's it going?

0:26:36.0 --> 0:26:37.260

Annabel Doolan

Can that patient be delegated?

0:26:38.550 --> 0:27:2.20

Annabel Doolan

And also in the evaluation stage, we followed up again with our consumers asking what went well and we could clearly demonstrate that we had increased confidence to delegate and in fact in our

final evaluation, we can clearly see that 70% of our of our workforce had delegated and were confident to delegate using this model.

0:27:2.320 --> 0:27:10.30

Annabel Doolan

So we could clearly demonstrate that consumer engagement was OK to the success of this pilot.

0:27:10.460 --> 0:27:21.900

Annabel Doolan

However, on reflection, there were two consumers to this group and we could have engaged our patient cohort and parents and carers as well to to give incremental value to this study.

0:27:24.710 --> 0:27:32.80

Annabel Doolan

So what's next for delegation in our in our workforce, as I've said, we have delegation firmly embedded.

0:27:32.90 --> 0:27:34.960

Annabel Doolan

We in our daily huddle, we discussed delegation.

0:27:34.970 --> 0:27:38.220

Annabel Doolan

We delegate our patients to our Nutrition Assistance.

0:27:38.470 --> 0:27:49.80

Annabel Doolan

We have a training matrix for our Nutrition Assistance and it's also included in any onboarding that happens to our dietitians and Nutrition Assistance, and any students coming into the department.

0:27:50.490 --> 0:27:56.740

Annabel Doolan

The grand allowed me to become a resource in our department in terms of research.

0:27:56.750 --> 0:28:10.610

Annabel Doolan

As an early researcher, but also gave opportunity for other dietitians to join the research team and to gain experience and to actually increase the capacity and abilities within our team to to undertake research.

0:28:12.320 --> 0:28:23.180

Annabel Doolan

Delegation is now so embedded that at our last planning date it was identified as a key area that people wanted to continue to develop and continue to have involvement in refining and reviewing processes.

0:28:23.190 --> 0:28:52.710

Annabel Doolan

And we now have a working group dedicated to delegation that dietitians have actually volunteered to be part of, and that's maintaining the engagement in this and the next step now is really looking to expand our delegation model and maybe give opportunity to some early career as researchers in

our department to go for another grant to look at a statewide model focusing on outpatients, multi stuff, multi sites including metro and regional.

0:28:54.870 --> 0:29:2.20

Annabel Doolan

So my advice to those people considering to apply Paul's covered off on this and as has Christian your research team is key identify.

0:29:2.30 --> 0:29:4.180

Annabel Doolan

Ask yourself who can help me with that?

0:29:4.270 --> 0:29:5.780

Annabel Doolan

Who do I need to speak to?

0:29:5.910 --> 0:29:11.560

Annabel Doolan

Should there be on my research team, it may be clinicians, but it may also be your consumers.

0:29:11.660 --> 0:29:14.450

Annabel Doolan

It may also be your health economists.

0:29:15.270 --> 0:29:20.660

Annabel Doolan

A lot of people that we knew at the end of our study, we we would put on our research team the next time around.

0:29:21.70 --> 0:29:22.900

Annabel Doolan

Find your mentor and use them.

0:29:23.100 --> 0:29:28.380

Annabel Doolan

They're going to help you navigate the the governance and ethics process, and they're gonna have.

0:29:28.720 --> 0:29:33.670

Annabel Doolan

They're gonna be an invaluable support in terms of progressing your study and maintaining your study timelines.

0:29:34.280 --> 0:29:35.940

Annabel Doolan

As Paul said, evidence is key.

0:29:35.950 --> 0:29:46.970

Annabel Doolan

You need to be able to demonstrate the feasibility of your study and so no, use your mentor again in your research team to know your study population.

0:29:46.980 --> 0:29:48.790

Annabel Doolan

Identify the gaps in the literature.

0:29:48.920 --> 0:29:50.190

Annabel Doolan

Gather the evidence early.

0:29:50.200 --> 0:29:58.350

Annabel Doolan

Know what's happening in that space and be able to demonstrate that really clearly in your application and the final thing is support all of these things.

0:29:58.790 --> 0:30:3.350

Annabel Doolan

Umm, all of these people will be an invaluable support to you and us, the novice researcher.

0:30:3.360 --> 0:30:4.730

Annabel Doolan

You shouldn't be left alone.

0:30:4.810 --> 0:30:9.510

Annabel Doolan

Ask yourself who can help me with that and make sure you have those people in your team to support you along the way.

0:30:9.560 --> 0:30:13.430

Annabel Doolan

OK, so finally this is our research team.

0:30:13.480 --> 0:30:15.210

Annabel Doolan

It's fairly varied.

0:30:15.260 --> 0:30:18.350

Annabel Doolan

I'd like to make special mention to Doctor Lee Kent Chai.

0:30:18.360 --> 0:30:21.510

Annabel Doolan

Who was the original recipient of this grant and also to nutrition?

0:30:21.660 --> 0:30:29.490

Annabel Doolan

Felicity Meyer, who was our nutrition assistant who helped to change the way that our department delivered kit to our patients.

0:30:29.880 --> 0:30:30.280

Annabel Doolan

Thank you.

0:30:36.430 --> 0:30:37.780

Rachelle PITT

Thank you so much, Annabel.

0:30:37.790 --> 0:30:39.100

Rachelle PITT

That was really helpful.

0:30:39.510 --> 0:30:41.820

Rachelle PITT

And I think a lot of really useful advice.

0:30:42.480 --> 0:30:43.50

Rachelle PITT

Umm.

0:30:43.480 --> 0:30:48.30

Rachelle PITT

And and indicates that these applications really do take time.

0:30:48.580 --> 0:30:54.690

Rachelle PITT

So we have got the scheme open until the end of October, so use that time.

0:30:54.700 --> 0:31:14.780

Rachelle PITT

I would start thinking about your applications, thinking about engaging with your mentors, engaging with your research team, looking at the literature as soon as possible, because that time will go quickly and you really want to make sure that the application is up to scratch and really thoughtfully considered in alignment with the guidelines.

0:31:14.790 --> 0:31:15.980

Rachelle PITT

So thank you.

0:31:15.990 --> 0:31:17.830

Rachelle PITT

Thank you, Paul as well for your advice.

0:31:17.840 --> 0:31:19.340

Rachelle PITT

As a panel member.

0:31:20.520 --> 0:31:28.80

Rachelle PITT

Particularly around font size, I think that's really helpful to know that we do know when we're looking at the applications.

0:31:29.640 --> 0:31:35.540

Rachelle PITT

We've had a few questions in the chat already and we've kind of answered them as we've gone along.



0:31:37.160 --> 0:31:46.830

Rachelle PITT

There was a question in there that I just wanna talk to a little bit and that is a query around whether different types of projects are viewed more favorably than others.

0:31:47.240 --> 0:32:1.240

Rachelle PITT

And I would say to that, not necessarily in the context of all of the projects, all of the applications are assessed against the same criteria and the same target areas and priorities.

0:32:1.710 --> 0:32:9.940

Rachelle PITT

What stands out, though, is how well each individual application has articulated how it aligns with those priorities.

0:32:11.150 --> 0:32:20.860

Rachelle PITT

So when you're thinking about your research project, really think about how you can demonstrate that that project meets one of those target areas.

0:32:21.170 --> 0:32:30.340

Rachelle PITT

Have a look at the words that are used in those target areas and aims and use those same words and address those same words in your application.

0:32:30.670 --> 0:32:46.770

Rachelle PITT

It might also be helpful to have a look at the overarching Allied health strategies and health queue 32 strategies that we refer to in the guidelines and start to position your research project to address one of those strategies.

0:32:47.380 --> 0:32:56.810

Rachelle PITT

If you're able to do that, that is really what the panel is looking for and really trying to understand how the outcomes will address.

0:32:56.820 --> 0:32:58.460

Rachelle PITT

One of those strategy documents.

0:33:1.30 --> 0:33:3.650

Rachelle PITT

Are there any other queries from?

0:33:5.460 --> 0:33:6.0

Rachelle PITT

From the group.

0:33:12.470 --> 0:33:13.930

Rachelle PITT

Anyone want to put their hand up?

0:33:20.390 --> 0:33:26.120

Rachelle PITT

No, that uh yes, we've got someone, Karen, go ahead.

0:33:26.630 --> 0:33:27.70

Karen De Nooyer

Yeah, that's.

0:33:27.150 --> 0:33:27.600

Karen De Nooyer

I'm hi.

0:33:27.610 --> 0:33:30.380

Karen De Nooyer

I just wanted to a very basic dumb question.

0:33:30.550 --> 0:33:32.670

Karen De Nooyer

Where do we find all of this on QHEPS?

0:33:34.880 --> 0:33:35.910

Rachelle PITT

Ah, good question.

0:33:36.360 --> 0:33:44.110

Rachelle PITT

We will put the link in the chat, but if you if you Google or you go into quips and you look up HPRS, all of this should come up.

0:33:44.120 --> 0:33:54.980

Rachelle PITT

So the application form the information guidelines as well as previous round outcomes and this presentation will all be there, but we'll pop that in the chat.

0:33:58.70 --> 0:34:3.780

Rachelle PITT

Thanks Christian Pesty if asked, can there be more than one see eye listed on the application.

0:34:3.790 --> 0:34:8.910

Rachelle PITT

We would expect usually just one, but you can beef out the rest of your research team for sure.

0:34:16.230 --> 0:34:18.980

Rachelle PITT

It looked like we have any other questions.

0:34:20.870 --> 0:34:28.800

Rachelle PITT

I would just like to say that we are really happy to help provide advice around eligibility for your, Umm project as well.

0:34:28.990 --> 0:34:54.650

Rachelle PITT

So although our team can't help scope, develop or write the HP research scheme applications, if you're not sure about whether the project is aligned with the target areas or is eligible for funding, please reach out to us and we can either have a chat with you via email or set up a teams meeting just to understand what your project times are and whether that really does meet the scheme priorities.

0:34:54.660 --> 0:34:56.950

Rachelle PITT

So don't hesitate to have a chat to us.

0:34:57.300 --> 0:35:18.200

Rachelle PITT

I'd also suggest having a chat to your local research experts, so a number of HHS have HP health practitioner Research fellows or other research support stuff that might be able to provide you some advice and assistance in terms of who to talk to in our team.

0:35:18.210 --> 0:35:27.440

Rachelle PITT

If you just email our HP research email address, Christian will pop that in the chat as well, and I believe it's on our guideline and application documents.

0:35:27.870 --> 0:35:30.740

Rachelle PITT

One of our research team will get back in touch with you.

0:35:36.130 --> 0:35:36.980

Rachelle PITT

So I think we might.

0:35:38.150 --> 0:35:40.100

Rachelle PITT

Wrap it up there, guys.

0:35:40.180 --> 0:35:47.560

Rachelle PITT

Thank you for making some time out of your day to come and hear about the HPRS and all the best with your applications.

0:35:52.700 --> 0:35:53.140

Michelle Fuery

Thank you.