# Rural and Remote Research Capacity Building Program (RRR-Cap): Research Dissemination Funding Support

The Office of the Chief Allied Health Officer (OCAHO) invites expressions of interest (EOI) from eligible rural and remote Health Practitioners to receive funding to support the dissemination of research findings through either conference presentations or journal publications. This support will provide either travel and accommodation reimbursement (conference) or reimbursement of publication fees (including fees for open access) to successful applicants.

Please read the accompanying Information Sheet. A copy of the information sheet can also be obtained by contacting the OCAHO at HP-Research@health.qld.gov.au, or via <https://www.health.qld.gov.au/hpresearch/rural-and-remote-research-capacity-building-program>

### Submission details

|  |  |
| --- | --- |
| Submit via | HP-Research@health.qld.gov.au (subject line “EOI: Research Dissemination Funding Support”) |
| Instructions | Incomplete EOIs will not be accepted. Complete EOIs have all required signatures (page 5). Please submit:* one signed copy of the EOI in PDF format (.pdf).
* one Microsoft Word copy of the EOI.

Other supporting documentation i.e. CV |

### Applicant details

| Full name including title | [insert] |
| --- | --- |
| Profession | [insert] |
| Position title  | [insert] |
|  [ ]  HP2 [ ]  HP3 [ ]  HP4 [ ]  HP5 [ ]  HP6 [ ]  HP7 [ ]  HP8  |
| Base facility and location | [insert] |
| HHS | [insert] |
|  |  |
| Employment status | [insert if temporary or permanent employment in the position. If temporary, insert the end date of the current employment agreement] |
| Appointment FTE | [insert FTE of individual's appointment e.g. 1FTE] |
| Date of commencement | [insert date of commencement in this position] |
| Office phone number | [insert phone number] |
| Work mobile (if relevant) | [insert phone number] |
| Email address | [insert email address] |

## Funding Support Type

| [ ]  Conference  |
| --- |
| Conference name: | [insert response] |
| Conference dates: | [insert response] |
| Presentation type: | [insert response] |
| Presentation title: | [insert response] |
| Evidence of presentation invitation or offer | [ ]  Evidence of presentation invitation or offer attached  |
| Rationale for conference choice  | [insert response; 150 words max; (i.e. major or national conference, anticipated relevant audience, high impact level dissemination opportunity, experience / opportunity), networking] |
| [ ]  Publication |
| Intended journal for submission | [insert response] |
| Fee type | [insert response] |
| Fee cost | [insert response] |
| Rationale for selection of journal  | [insert response; 150 words max; (i.e. high impact journal, discipline or content relevance, anticipated reader relevance, contribution to research career)] |

## Applicant Support Statement

The nominated employee is to provide a brief supporting statement for this EOI. The supporting statement/s should focus on:

* If Conference:
	+ How conference attendance and presentation will support and develop your research skills and capacity
	+ How will you share your experiences, learnings and presented research findings with your HHS
* If Publication:
	+ How your publication will support and develop your research skills and capacity
	+ How will you share a summary of your publication with your HHS

|  |
| --- |
| Statement 1: Employee[insert statement (up to 350 words)] Statement provided by: [insert name and position] |

### Operational Support Statement

The operational manager is requested to provide a brief supporting statement that includes the support that will be provided for the nominated employee to engage activities associated with this initiative.

|  |
| --- |
| Statement 2: Manager[insert statement (up to 100 words) including operational supports that will be provided to assist the employee as relevant.]Statement provided by: [insert name and position] |

## Conditions of Funding Support

### Funding offer

Following acceptance of an EOI, the OCAHO will provide a written offer of funding to the HHS representative and nominated employee. The offer will outline the funding commitment of the OCAHO for the nominated employee. The HHS delegate, operational manager and nominated employee will sign the offer and return it to the OCAHO by the due date in order to accept the funding support.

### Reporting

The below reporting requirements (also outlined in the Information Sheet) are to be provided to HP-Research@health.qld.gov.au in order for the HHS and nominated employee to have continued eligibility for the funding support. Failure to meet the reporting requirements may lead to withdrawal of the funding support.

If Conference:

* evidence of Conference attendance, presentation and summary report
* relevant inter-entity journal (IEJ) forms
* evidence of staff travel booking confirmation details and relevant tax invoice/receipts.

If Publication:

* evidence of acceptance of publication and the summary report
* relevant IEJ forms
* evidence of acceptance of manuscript and relevant tax invoice/receipts.

### Exception reporting

The HHS will advise the OCAHO within 7 days of the following:

1. The nominated employee:
	* resigns from the position (or other form of position separation). The nominated employee will not have access to the funding support if they leave their position permanently.
	* has a change of employment status e.g. is approved to change from full-time to part-time.
	* is at risk of failing to complete the requirements for the funding support.
2. The nominated employees’ position status (permanent, temporary, FTE) changes to no longer meet the requirements for funding.

## Support for the RRR-Cap

HHSs with nominated employees that have access to the OCAHO funding support will:

* allow relevant staff to participate in reasonable evaluation activities associated with the statewide research capacity building strategy.
* grant reasonable requests for staff to contribute to promotion, profiling and other media opportunities related to their participation in the research capacity building strategy. Formal approvals will be requested from HHS delegates prior to progressing any media activities.

## Certification

| **Nominated Employee** |
| --- |
| I certify that I have read the Information Sheet, the conditions described within this EOI, and that I meet the eligibility criteria. I certify that all details in this application are correct. I understand and agree that if successful, I will be required to meet the terms and conditions of receiving the funding including the provision of a summary report and evidence of travel costs and/or publication fees. |
| Name | [insert name] | Date |  |
| Signature |  |
| **Operational manager**  |
| I certify that I have read the Information Sheet, the conditions described within this EOI, and that I support this application for research dissemination funding support. |
| Name | [insert name] | Date |  |
| Position  | [insert position] | Unit |  |
| Signature |  |
| **HHS delegate (e.g. Director of Allied Health, Executive Director of Rural Services)** |
| I certify that I have read the information Sheet, the conditions described within this EOI, and that I support this application for research dissemination funding support. |
| Name | [insert name] | Date |  |
| Position | [insert position] |
| Signature |  |