



Implementing Research Evidence into Practice Grants

INFORMATION FOR APPLICANTS

2020



Australian Government

NHMRC National Institute for Dementia Research

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List of Abbreviations:

DCRC: Dementia Centre Research Collaboration

NNIDR: NHMRC National Institute for Dementia Research

CI: Chief Investigator

KT: Knowledge Translation

1. BEFORE YOU BEGIN

This document contains important information for applicants regarding the process of applying for, and the eligibility conditions of, the **Dementia Centre for Research Collaboration (DCRC), Implementing Research Evidence into Practice Grants 2020**.

Applicants should read all the information included in this document and liaise with their host institution's research office before contacting the DCRC with any queries regarding the application process or eligibility conditions.

Key dates

Applications open: Wednesday 10th June 2020 (9.00 am AEST)

Applications close: Wednesday 22nd July 2020 (5.00 pm AEST)

LATE APPLICATIONS WILL NOT BE ACCEPTED

Outcomes announced: Before the end of August 2020

Funding commences: September 2020 or by arrangement

2. INTRODUCTION

The Dementia Centre for Research Collaboration (DCRC)

Funded by the Australian Government, the DCRC operates within the broad remit of the NHMRC National Institute for Dementia Research (NNIDR) to advance the *Strategic Roadmap for Dementia Research and Translation*. The DCRC's primary research foci within the broader topic of dementia research are prevention, assessment and diagnosis, intervention and treatment, care and living with dementia. The DCRC's primary goals are to increase knowledge, implement research findings and to address the five NNIDR priorities:

<https://www.nnidr.gov.au/about-institute/strategic-roadmap-dementia-research-and-translation>

Purpose

The primary purpose of the *DCRC Implementing Research Evidence into Practice* grant scheme is to support the implementation into practice of an existing knowledge product or program that has previously been developed and piloted. Applications that aim to adapt/modify a resource/program, or to explore barriers/facilitators to successful implementation of an evidence-based knowledge product or program will only be considered if a strong implementation plan is included. Implementation is defined as the use of strategies to adopt and integrate evidence-based interventions and change practice within specific settings. Dissemination which is defined as the purposive distribution of information and intervention materials to a specific audience with the intention of spreading information, precedes implementation (US National Institutes of Health, 2017).

Stakeholders and potential knowledge users outside the research community should be engaged in the implementation process and projects should be directed at supporting solutions to problems or gaps identified by the stakeholders/knowledge users. Applicants are advised to review the key

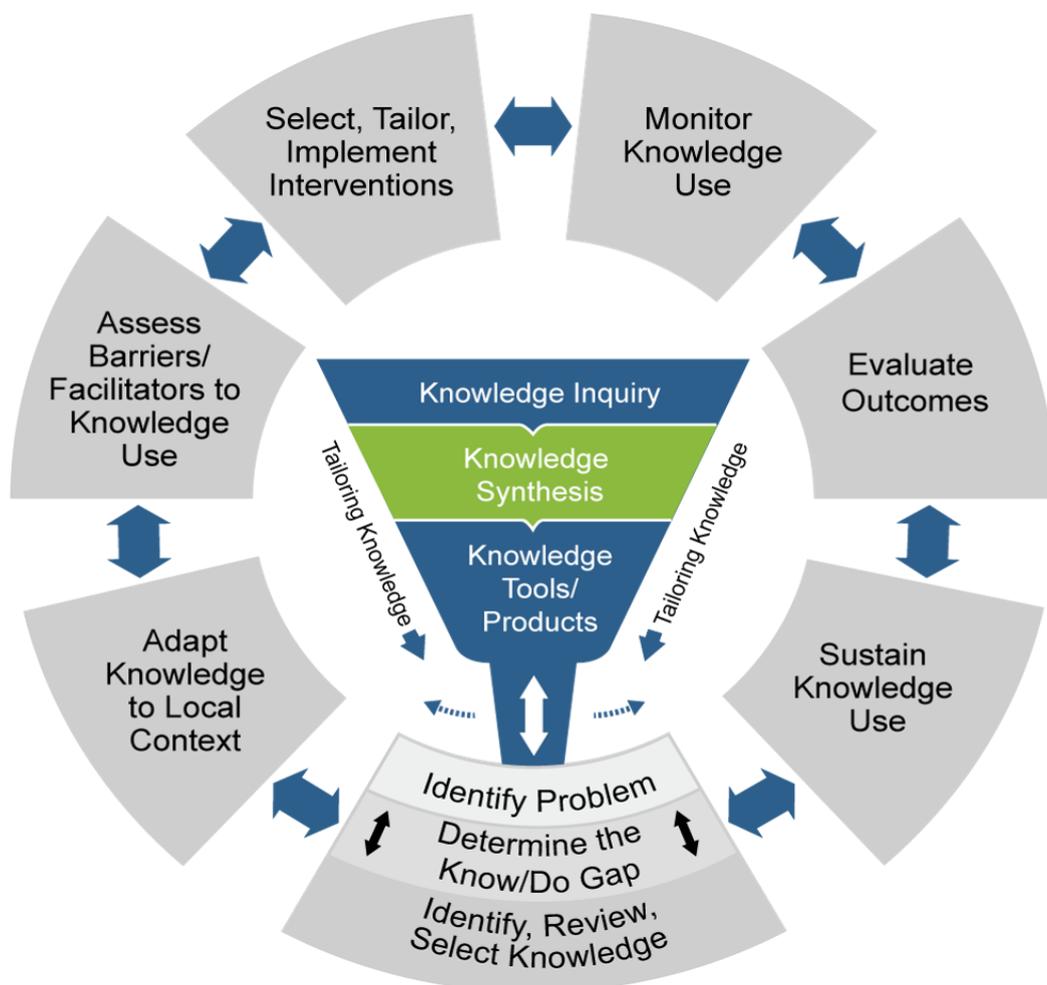
elements to include in an implementation grant proposal (Proctor, Powell, Baumann, Hamilton and Santens, 2012).

Grants will not be awarded to fund projects that aim to develop or pilot a new knowledge product or program. Applicants must have existing data to support the effectiveness of their knowledge product or program. The *Knowledge to Action Framework* (Straus, Tetroe & Graham, 2009) will underpin the criteria for reviewing applications.

Up to \$250,000 will potentially be awarded in this grant round. Grants of **up to \$50,000 each** will be available for projects with an implementation focus. Knowledge translation (KT) seeding grants of **\$5,000 - \$10,000 each** will be available to adapt/modify an existing resource/program, e.g. language translation as a means of progressing a program of research further along the *Knowledge to Action Framework*.

Overview of the Knowledge to Action Framework

According to the Canadian Institute for Health Research, KT is defined as ‘a dynamic and iterative process that includes the synthesis, dissemination, exchange and ethically sound application of knowledge to improve health, provide more effective health services and products, and strengthen the health care system’ (Straus, Tetroe & Graham, 2009, p165). *The Knowledge to Action Framework* is outlined below:



Expected outcomes

The aim of the *DCRC Implementing Research Evidence into Practice* grants is to assist in the implementation of an effective knowledge product or program into practice. Only applications that consider one or more of the following aspects of knowledge implementation will be eligible:

- adapting or customizing knowledge to the local context
- assessing the barriers or facilitators to knowledge use
- selecting, tailoring, implementing and monitoring interventions related to knowledge translation
- evaluating outcomes or impacts of using knowledge
- determining strategies for ensuring sustained use of knowledge

Applications that address more than one of these areas will be considered favourably. Applications for projects with a focus on exploratory research, the generation of new knowledge or wet bench research will not be considered in the current funding round.

Grant money cannot be used for:

- major capital expenditure
- covering retrospective costs
- costs incurred in the preparation of a grant application or related documentation
- subsidy of general ongoing administration of an organisation, e.g. electricity, phone or rent
- major construction/capital works
- acquisition of major equipment, e.g. motor vehicles
- gifts, subscriptions or memberships to clubs or groups (participant incentives excepted)
- overseas travel or travel to conferences
- publishing costs

3. FUNDING

- Grants will be awarded for up to \$50,000 AUD from the commencement of funding.
- Funds will be administered through the lead applicant's institution.
- You must notify the DCRC of any project and/or reporting delays as soon as you become aware of them.
- A final report will be required at the end of the grant documenting outcomes and justification of expenditure against the awarded amount.
- Funding must be spent before end of December 2021. Any unspent funds must be returned.

Eligibility requirements

1. At the time of acceptance and for the duration of a grant, the Applicant (Chief Investigator (CI)) must be an Australian or New Zealand citizen, a permanent resident of Australia, or have an appropriate work visa in place at the time of acceptance and for the duration of the project. All applicants must provide evidence to their host institution to support this criterion. Host institutions are responsible for certifying and ensuring that these requirements are met. The CI must be based in Australia for at least 80% of the funding period.
2. The CI must hold an academic position at or below level C seniority (i.e. Associate Professor level) or equivalent if not employed within the university system.
3. The research must be conducted in Australia.
4. The application must indicate how the research will address the topic and scope of the funding round.

5. Applicants are welcome to submit more than one application. However, successful applicants can only be awarded one grant from the 2020 DCRC *Implementing Research Evidence into Practice* grant round as CI.
6. Appropriate language and terminology must be used throughout the application. For example many people with dementia prefer not to be referred to directly or indirectly as a 'dementia sufferer'. A guide to dementia-friendly language is available via: <https://www.dementia.org.au/files/resources/dementia-language-guidelines.pdf>
7. Applicants must demonstrate that people living with dementia, their carers and families or the wider public (if appropriate) have been or are involved beyond a participant role. This may be achieved in many ways across the project including:
 - Consultation on the research proposal to ensure identified areas of priority for end users are addressed.
 - Inclusion as joint grant holders or co-applicants on your research proposal.
 - Membership of a steering committee or advisory group.
 - Undertake a 'research buddy' role for the researcher.
 - Provide comment on and/or develop patient information leaflets or other research materials.
 - Involvement in the dissemination of research outcomes and the development of plain language project summaries.

Further information on involving members of the public in research is available via:

<https://www.nhmrc.gov.au/guidelines-publications/s01>

<https://www.nnidr.gov.au/get-involved/consumer-involvement-action-plan>

https://www.nnidr.gov.au/sites/default/files/files/Communique_Involving%20consumers%20in%20research.PDF

Notification of additional funding

Applicants must notify the DCRC if they receive funding from another source for a project that is the subject of a grant application through this grant round.

Acknowledgement of support

Successful applicants must acknowledge the support of the DCRC, in all publications, presentations, summary findings and media announcements relating to the research. Grantees must also be prepared to assist the DCRC, if required, by presenting webinars, speaking at functions, attending specified conferences, reviewing grants or being featured in media articles/releases.

4. APPLICATION AND ASSESSMENT

Using the application form provided, applications must be submitted via email to DCRCgrants@unsw.edu.au by 5pm (AEDT), Monday 20th July 2020.

Supporting documents and required attachments

Applicants must provide the following supporting documents with the completed application form. Applications that do not include the required documentation will be considered ineligible and may not be assessed.

- Academic CV of CI (maximum 10 pages). Include publications, grants (funding body, amount and investigator status), awards, conference presentations and service to the academic community.

- Evidence of Australian or New Zealand citizenship, permanent residency of Australia, or an appropriate work visa.
- Ethics Approval. Evidence of approval of the proposed project by an authorised Human Research Ethics Committee, if available.
- Endorsement Form/s signed by:
 - i. Each investigator named in the application, confirming their contribution to the project as described in the application.
 - ii. The head of administering institution (or nominee) which will host the research.

All sections of the application form, supporting documents and required attachments are to be combined into a single pdf and labelled in the following naming convention:

CI Surname_Broad area of research_Date

Include 'DCRC implementing research evidence into practice grant application' in the subject line of your submission email.

Eligibility check

Applications will be checked after the closing date for compliance with eligibility criteria. It is the applicant's responsibility to ensure that they meet all eligibility criteria. Any application that does not include proof of eligibility may be excluded without further assessment.

Assessment process

- Applications will initially be screened by the DCRC Managers for administrative compliance against eligibility requirements 1, 2 and 3. Applications that meet these eligibility criteria will undergo review by a panel of independent reviewers with relevant expertise, including a consumer representative.
- Members of the Review Panel will screen all eligible applications to identify those which are highly unlikely to receive funding due to weakness in one or more of the assessment criteria or lack of feasibility. Panel members will consider and rank all remaining applications according to the assessment criteria below.
- The Panel will make decisions with regard to approaching further expert reviewers for selected comment and/or rating against the assessment criteria if required.
- Grants will be allocated to successful applicants in order of ranking, according to the decisions of the Panel.
- Applicants whose projects are considered fundable but are not allocated an available grant will be placed on a reserve list. These applicants may be offered funding in the event that an applicant with a higher ranked project is unable to accept the grant.
- All decisions made by the Expert Review Panel are final and there is no mechanism for appeal.
- Unsuccessful applicants will be provided with individual feedback on request. Feedback will be provided for the purpose of assisting applicants to improve the quality of subsequent applications.

Assessment criteria

Applications will be assessed according to the following criteria:

1. Evidence (10% weight)

The strength of the supporting evidence will be determined by the quality and consistency of the evidence reported.

2. Scientific merit/quality (20% weight)

Scientific merit will be assessed on the clarity of the research aim/s and objectives as well as the suitability of the research methodology and research plan to achieve the proposed implementation outcomes.

3. Impact/significance (20% weight)

The potential impact of the proposed project on person-centred outcomes and consistency with, or change in, current practice will be assessed. The potential of the project to lead to improved health, improved quality of life, more effective health services and products will also be considered.

4. Feasibility/research team (10% weight)

Feasibility will be determined by the support for effective implementation, generalisability, adaptability, acceptability and ease of achieving/maintaining fidelity to the intervention. Investigators should demonstrate links and potential for engagement with stakeholders, end users and/or people living with dementia and their carers to accomplish the project aims. The reported experience, appropriateness, track record and training of the research team will also be assessed.

5. Implementation approaches/originality (20% weight)

Proposed projects should include potential implementation issues, relevance of approaches and strategies to settings and end users, potential to complement/improve and not duplicate other interventions, potential for collaborative implementation and comprehensiveness of strategies as well as the range of proposed implementation activities. The capacity of the project to challenge and shift current prevention/care practices with novel approaches, methodologies and/or interventions will also be considered.

6. Evaluation (20% weight)

The capacity of the proposed evaluation plan to measure change in practice and health/quality of life or care outcomes will be determined. The potential for projects to contribute to the knowledge of effective implementation will also be assessed.

Conflicts of interest

You are required to declare, as part of your application, any perceived or existing conflicts of interest or that, to the best of your knowledge, there are no conflicts of interest.

Further information

For enquiries regarding applications please email DCRCgrants@unsw.edu.au. Include 'DCRC implementing research evidence into practice grant query' in the subject line of your enquiry email.