**2024-2025 CABRINI FOUNDATION CLINICAL RESEARCH & QUALITY IMPROVEMENT GRANT ROUND**

**APPLICATION FORM**

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| 1. PROJECT
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| a | Project Title 30 words |
| b | Project Summary (Summarise the central elements of the project to include background, research questions and method) 200 words |
| c | Chief Investigator Name |
| d | Chief investigator’s main function at Cabrini (Provide a brief description of the applicant's main area of operations.) 200 words |
| e | Which grant are you applying for?[ ]  AURIC Innovation Fund[ ]  General Research/Quality Improvement Grant[ ]  Oncology Research Grant[ ]  Peter Meese Nursing Research Grant |
| f | Which amount are you applying for? (The amount you indicate cannot exceed that allocated to the grant you are applying for.) |
| g | Conflict of Interest (Detail any perceived or actual conflict(s) of interest that may occur from submitting this application and how you expect to manage it.) 200 words  |
| 1. PROJECT TEAM
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| a | List the names and roles of the Chief Investigators (CI): (If this application is joint with an external partner, the CI-A must be a Cabrini researcher.) Indicate Name, Position Title, Primary Cabrini Location, Project Role, Level of expertise to undertake the proposed research and evidence of participation confirmation. |
| b | List the names and roles of any Associate Investigators. Indicate Name, Position Title, Primary Cabrini Location, Project Role, Level of expertise to undertake the proposed research and evidence of participation confirmation.**Include the names of any Health Consumers who have been OR will be involved in the project and outline their role.** |
| 1. PROTOCOL

 ***\*\* Please attach a standard research protocol with version control to your application \*\**** |
| Part 1 | a | Background/Rationale (Specify the reason for conducting the research with reference to available literature. Provide a logical flow to address why the research is important and what is the evidence-based gap this project aims to fill. Supporting documents can be uploaded.) 600 words |
| b | State your research question, aim(s) and hypothesis(es). 250 words |
| Part 2 | c | Methods - Describe the method for each research aim. Use methods and sub-headings specific to your study design. Include a data management plan if relevant (Contact Cabrini Research for advice if you have queries regarding appropriate study design checklist and subheadings.) 400 words |
| Part 3 | di | Budget – Itemise project costs (indicating the project item, expense detail, expense schedule, unit cost and total cost – nett of GST) and state the cost centre to which the project expenses will be coded. * Itemise all project costs e.g. external HREC fees, salaries plus on-costs, travel related to data collection at multiple sites, patient resources essential to the research project, software development, survey subscriptions, organisational data (e.g. business intelligence and clinical governance units), printing, expert consultations (e.g. biostatistician, economic evaluations), pathology, transcription of data, journal publishing, registration and travel for conference attendance and other items (subject to approval) that will support the level of funding being sought for the project;
* Provide an explanation in 'Expense Detail' to justify the estimate for each project item; and
* Any funding provided by Cabrini must be spent on achieving activity outcomes (as specified in the project protocol) and not on seeking further grant monies or other non-specified activities. Equipment and alcohol will not be covered under grant funding.
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| dii | Project Cost Centre - State the Cabrini department cost centre (name and 4-digit number) where your project costs will be coded. (Applicants must obtain approval in writing from the department head concerned to use the Cabrini cost centre for project expense coding during the grant period.) |
| e | Provide details of any in-kind contributions such as salaries, use of existing equipment or facilities and materials, etc. |
| Part 4 | f | Timeline (Provide a feasible timeline of key project delivery dates e.g. ethics submission, recruitment, data collection, analysis, publications etc. **Applicants are encouraged to use and attach Gantt charts** or other such project management tools**.)** |
| g | Ethics/Research Governance considerations and timeframes (Identify the issues likely to raise ethical concerns. Detail the process for obtaining informed consent from the participant. Indicate the ethics approval status or at what stage of ethics submission the project currently sits. Ensure appropriate timeframes for submission and approval are factored into the project schedule.) 250 words |
| h | Feasibility (Has adequate detail been provided for each expense item? Will the budget cover the entire cost of the project? How will any shortfall be covered? Is this an application for seed funding and does this pilot study have the potential to attract larger future funding? Is there a clear project management plan (including GANTT charts and other PM tools) ensuring that all resources and manpower are deployed in the most effective way to deliver high quality research in the projected timeframe? Does the timeline include ethics submission / approval and knowledge dissemination? Does this project align with the one or more of the research themes established to assist in the delivery of Cabrini’s organisational strategic plan? (Strategic plan and research priorities will be provided to grant review panellists.) Does this project address any of the National Safety and Quality Health Services Standards administered by the Australian Commission on Safety and Quality in Health Care? (National standards will be provided to grant review panellists.) 300 words |
| Part 5 | i | Problems anticipated (Identify any anticipated difficulties or problems that investigators may face and proposed solutions for completing the project successfully.) 200 words |
| j | Dissemination of results (How will the results of this project be shared with participants, Cabrini staff, researchers, the health care community, and policy makers?) 200 words |
| k | Expected outcomes - innovation/translation Is the research project ambitious, creative, and innovative? Will it break new ground? Where does it sit in the context of the current state of knowledge and other projects currently underway in this field? Does it complement other research in this area? Is the research transformative and will it result in a significant advancement in knowledge that will have a major impact on this research area?Will it advocate for its area of health? Is it relevant to Australian healthcare practice, policy and/or health outcomes? Will it influence policy makers? Is the research project sustainable beyond the lifetime of the grant?Have the pathways to impact and knowledge dissemination been adequately identified? 500 words |
| Part 6 | l | Literature References (Literature references must be uploaded as an attachment and not exceed 3 pages or 50 references.) |
| 1. PREVIOUS CABRINI FUNDING
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| a | Provide detail of any previous Cabrini Foundation or Cabrini Institute funding received for research, quality improvement OR education within the last five (5) years. |
| 1. ADDITIONAL FUNDING SOURCE
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| a | Provide details of all additional funding sources sought (other than the budget submitted here) OR received by the applicant OR any potential collaborative partner that relate to activities that are the subject of this application. Document any potential conflicts of interest and how they will be managed. |
| b | How would this project be impacted by a funding shortfall? What measures would be taken to address this shortfall? |
| 1. CABRINI OUTCOMES AND COLLABORATION
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| a | In what way does this project align with one or more of the research themes established to assist in the delivery of Cabrini’s organisational strategic plan? 300 words  |
| b | How does your project align with Cabrini’s mission, vision, and values? Explain how the project will assist and enhance patient and family care service delivery. 200 words |
| c | How will you work with other departments and/or disciplines within Cabrini to maximise the outcomes of this project? 200 words |
| d | If the project is in collaboration with an external partner, what is Cabrini’s role? 200 words |
| e | i | What is the benefit of Cabrini participating in this multicentre project? N/A? |
| ii | What is the nature of Cabrini’s Intellectual Property in this multicentre project? N/A? |
| iii | How will Cabrini be represented in the final data? N/A? |
| 1. CONTACTS
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| Provide contact details for the primary and alternate authorised contacts for this project.  |
| 1. CABRINI SUPPORT
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| Applicants must obtain project support from their respective Academic Heads of Department or Research Centre (AHOD – Cabrini’s research leader for each discipline) and/or Group Director (GD) prior to submission. Support needs to be requested before the submission deadline (noon, Thursday 9 May 2024) and needs to cover off the following:**HEAD OF CENTRE/DEPARTMENT/GROUP DIRECTOR APPROVAL**a. I have read this project application.b. I have discussed this project and the resource implications for my area with the Principal Investigator.c. I undertake to be the contact point for escalation of any issues, e.g., ethical concerns, complaints, auditfindings, that cannot be resolved with the Principal Investigator and will oversee the resolution of such issues.d. This project can be conducted under the auspices of my area using the resources outlined by this form and the attached research protocol.***I declare my support for this application and certify that I will meet the obligations outlined above as the Head of Department.*** Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_Review the **2023 – 2024 Cabrini Foundation Clinical Research & Quality Improvement Grant Application Guidelines** for more information. |
| 1. APPLICANT ACKNOWLEDGEMENT & CONSENT
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| **CHIEF INVESTIGATOR DECLARATION:**a. If successful, I acknowledge and agree that the project title, description, the amount of the funding, myname and that of partnering organisations may be:• included in the Cabrini Foundation and Cabrini Research’s reporting on the Internet and within the relevant annual report;• used by Cabrini Health in media releases and other publications; AND/OR• used to compile a consolidated report.b. If successful, I agree that Cabrini Health will be acknowledged as a funding source in any future publications AND/OR presentations arising from this project. c. If successful, I agree to present the project’s findings at Cabrini Research Week following the conclusion and acquittal of this grant.d. I have sought and received permission from each project contributor prior to including their name in this application. I am able to provide evidence of communication regarding this. ***I declare that this proposal will deliver activities in support of Cabrini’s strategic plan. I certify that the information given in this application is complete and correct.*** Any application not providing all required information OR containing false OR misleading information will be excluded from consideration.Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_ |