NSW Cardiovascular Disease (CVD) Clinician Scientist Grants

EXPRESSION OF INTEREST
Closing Date 14th November 2018



NSW Ministry of Health Locked Mail Bag 961 North Sydney NSW 2059

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SHPN (OHMR) 180638 ISBN 978-1-76000-964-9

Further copies of this document can be downloaded from the NSW Health and Medical Research website www.medicalresearch.nsw.gov.au/clinician-scientist

September 2018



INSTRUCTIONS FOR COMPLETING AND SUBMITTING EXPRESSIONS OF INTEREST (EOI) FOR THE CARDIOVASCULAR DISEASE (CVD) CLINICIAN SCIENTIST GRANTS

Please refer to the NSW Health CVD Clinician-Scientist Grants Application Guidelines at www.medicalresearch.nsw.gov.au/clinician-scientist for Selection and Eligibility Criteria.

The EOI must be submitted by email to MOH-OHMRGrants@health.nsw.gov.au by 5pm, 14th November 2018.

List of References could be attached with the EOI. This will not be included in the word limit.				
APPLICANT DETAILS				
1. Full Name including title				
2. Phone Number	Email address			
3. Identify your CVD research theme. The research themes may include: Genomics, metabolomics, preventative cardiology, cardiovascular-metabolic clinical areas, clinical trials, population health research/big data analysis. You can also nominate a specific priority focus area that has not been mentioned.				
4. What is the total amount you are applying for?		\$		
5. Project Title Research project or program.				
6. Are you an Australian Citizen/Permanent Res	sident?	Yes	No	
Non-Australian Citizens/Non-Permanent Residents are required to provide evidence of residency status and the right to remain in Australia for the duration of the funding period, see Guidelines for more detail.				
For information purposes only:				
7. Is your research primarily:				
A: Biomedical/Basic		A	В	С
B: Clinical or Clinical Trial				
C: Public/Population Health or Health Service	e Research			
8. Do you have a PhD?		Yes	No	
9. How many years post-PhD?		Early (0-5)	Mid (5-10)	Senior (10+)
10. What is your gender?		Female	Male	Other
11. Do you identify as Aboriginal or Torres Strait	Islander?	Yes	No	

HOST ORGANISATION DET	AILS (NSW Pub	lic Health Organisation)
Organisation Name		
Organisation Address		
Administrative contact	Name	
	Phone	
	Email	
RESEARCH ORGANISATION	N DETAILS (whe	ere research project/program will be undertaken if separate to Host Organisation)
Organisation Name		
Organisation Address		
Administrative contact	Name	
	Phone	
	Email	
DECEARCH PROPOSAL		
co-design partnerships (who he specific research design eleme and issues. (1,000 words maxir	ave you consulte nts that will be e	research focus, rationale (what is the justification for building evidence in this area?), individually defined to reflect appropriate consideration of priority population health needs references).
TRACK RECORD		
highlights. Please evidence the	quality of your r	ns, research experience and track record including funding and publication research output and your contribution to the capacity building/the research mentoring. (500 words maximum).

RESOURCE REQUIREMENTS

Workforce, including core team members and non-research personnel. Consideration should be given towards building of Aboriginal researcher capacity.

Туре	FTE/ Quantity	Expertise/ Function	Available/ To be sourced	State/Country in which team member resides

PROPOSED RESEARCH BUDGET AND CONTRIBUTIONS

Please provide an estimated research project budget. Consumables can be described as Laboratory supplies, computer sundries and small equipment, test costs, licences, fees, project specific stationary, project specific specialist journals.

Туре	Year 1	Year 2	Year 3	Total
Salaries	\$	\$	\$	\$
Consumables	\$	\$	\$	\$
Subtotal	\$	\$	\$	\$
Total amount requested from the CVD Grants	\$	\$	\$	\$

Please indicate how the Host Organisation will provide support of your proposed project. For example infrastructure support through research room availability; on-call clinical support.

Host Organisation contributions	\$	\$	\$	\$
Other contributions	\$	\$	\$	\$
Subtotal	\$	\$	\$	\$

How will your proposed research have an impact on knowledge or translate into better patient outcomes?

Describe how you would like your research findings to be utilised and what steps you will take to ensure this. Include, if your project has a biomedical discovery focus, how your research could impact on future diagnosis, prevention or management of cardiovascular disease, or if your research has a clinical, health service or population/public health focus, the clinical relevance, clinical impact, health system impact (including changes to models of care) and the patient population that will benefit from translation of research findings to health practice and or policy.

Describe also how your proposed research will consider and respond to the differential health needs of Aboriginal people and other priority population groups, and how it will contribute towards the bridging of gaps in equity of access and patient outcomes within existing health systems Identify relevant partners from these priority population groups. (400 words maximum).

SKILL DEVELOPMENT PLAN

Using the below **GROW** template, please determine what your career goal is and identify the course of action you propose will help you achieve this goal. Specifically focus on what you will do throughout the course of this grant to achieve this goal.

GOAL:

What would you like to achieve? (150 words)

In responding please consider:

- · What do you want to achieve in both your research and clinical career?
- Why do you want to do research? What do you hope to gain/achieve through undertaking research?
- What skills would you need to develop in order to achieve your goals?
- What impact will your work have on current knowledge of CVD/the health system/health of the population?
- What national grants and fellowships will you apply for after this grant?
- What contribution will this grant make to CVD research capacity building in NSW?
- How specific, measurable and realistic are your goals?

REALITY

What is happening now? (150 words)

In responding please consider:

- How has your experience so far helped contribute to working towards your goals?
- · What has worked well, and what has worked not so well in the past? Is there anything you would do differently?
- · How do you know your perceptions of this current research area are accurate?

OPTIONS What could you do? (150 words) In responding please consider: • What options do you have to reach your goal? Are there any you haven't considered? • Of the options you've shared, which option do you think would work best and why? • What impact would being the recipient of this grant have on these options and why? WAY FORWARD What are your next steps? (150 words) In responding please consider: • Thinking specifically about the skills wish to develop, how are you going to approach this throughout the course of the grant? Include a proposed timeline for skill development activities. · What support is required to develop these skills? Include those people who you intend to engage with for development and mentoring opportunities. • What potential barriers exist and how do you propose to overcome them throughout the course of this grant?

CERTIFICATIONS As the Grant Applicant, I certify that: 1. The details provided in the application form are true and correct 2. All investigators (core team members) named have read this application in full and have given their consent to be included Name: Signature: Date: As the Host Organisation, I certify that: 1. The details provided in the application form are true and correct 2. The host organisation eligibility criteria is met 3. Each of the host organisation commitments outlined in the guidelines are acknowledged 4. If research is conducted at the host organisation, Infrastructure support for this project will be provided if the grant is received 5. The application is authorised to be submitted to the NSW Ministry of Health Name: Position: Signature: Date: As the Research Organisation, I certify that: (if separate from the Host Organisation) 1. The details provided in the application form are true and correct 2. The research organisation eligibility criteria is met 3. Each of the research organisation commitments outlined in the guidelines are acknowledged 4. Infrastructure support for this project will be provided if the grant is received 5. The application is authorised to be submitted to the NSW Ministry of Health Name: Position: Signature: Date: