




# Grants & Awards



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## Types


- NHMRC project grants
- Clinical grants
- Scholarships & Fellowships

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## Project grants

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## NHRMC project grants

- Allocation of each application to a Grant Review Panel and to appropriate spokespersons within that panel;
- Allocation by the spokespersons in consultation with the GRP Chair, of three appropriate independent assessors. Review by the GRP of the Assessors reports and questions;
- Formulation of the GRP questions to the applicant;
- Applicants to provide a written response to the assessments and GRP questions. GRP members review the applicants responses to the Assessor comments and questions and the GRP questions;
- Removal of non-competitive applications;
- The GRP meets and collectively reviews each application allocated to the panel to firstly determine a Category for each application and then to rank each application in comparison with all others allocated to the GRP.

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● ● ● | **Criteria**

- Significance and innovations
- Scientific quality
  - Hypotheses and objectives
  - Strengths and weakness of design
  - Feasibility
- Track record – grants, publications relative to opportunity

Process for dealing with conflict of interest

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● ● ● | **Grading**

- 1-2 not suitable
- 3 not competitive
- 4-5 supported if sufficient funding
- 6-7 should be funded
  
- 1 in 5 success rate

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● ● ● | **PHCRED Research Grants**

- Funds PHC grants 4 or more which are below the cut off for standard NHMRC but still assessed as quality proposals
- \$2.388m 2003, \$1,835m 2004
- Committee reviews projects (but not rating) to determine if they are “PHC” projects
  - Michael Kidd
  - Doris Young
  - Marie Johnson 2002/3, Kay Price 2004
  - Sue Elliot
  - Mark Harris (chair)

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● ● ● | **Criteria**

Some evidence that the project:-

- was being carried out in PHC service, or had a direct application to PHC services
- was being conducted by a team which included PHC researchers

Some difficulty in discerning from other public health (eg health promotion) and specialised vs. generalist services (eg aged care)

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## Statistics

- Funding
  - 80-579,000, Mean 301,674
- Duration
  - 1-5 years Mean 2.79 years

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## Successful

Commencing in 2003		Commencing 2004	
CIA	Institution	CIA Full Name	Institution
Pr Nicholas Zwar	University of New South Wales	Dr Cathy Barwell	Australian National University
Pr Frances Baum	Flinders University of South Australia	A/Pr Jeremy Anderson	Monash University
Pr Louis Pлото	Flinders University of South Australia	Dr Seham Girgis	South Western Sydney Area Health Service
Pr Richard Hays	James Cook University	Prof Justin Beilby	Adelaide University
A/Pr Caroline Crowther	University of Adelaide	Dr Nigel Stocks	Adelaide University
Pr Geoffrey Nicholson	University of Melbourne		
Dr Christopher Maher	University of Sydney		
Pr Michael Kidd	University of Sydney		
Dr Douglas Pritchard	University of Western Australia		

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Grants to CIAs from PHCRED capacity building funded Departments by year of commencement

	NHMRC	PHCRED
2001	0	-
2002	1	-
2003	2	9
2004	2	4

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## Issues for the future?

- None have finished yet
- Is there sufficient spread across Departments – eg UDRH (will this be too thin?)
- How do these link to capacity building activities such as networks,
- How do they link to the RDP and research students
- How will the transfer to policy and practice
- How can we get more 5+ projects, program grants, SRGs, ARC

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## Clinical research grants

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## GENERAL PRACTICE CLINICAL RESEARCH PROGRAM

15 questions in seven priority areas:

- Health Promotion and Disease Prevention
- Diabetes
- Depression
- Ischaemic Heart Disease
- Osteoarthritis
- Chronic Respiratory Disease
- Dementia

A maximum of \$4 million allocated, with no individual project funding exceeding \$500,000 over a maximum of 3 years.

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## Criteria

- **Quality of proposal for capacity-building for general practice research**  
Involvement of general practice researchers; Involvement of general practice clinicians; Training in general practice research; Junior researchers as part of the research team; Links to the primary health care capacity building program
- **Scientific quality**
- Extent to which the proposal answers the research question (this includes suitability of methodology); Quality of methodology; Feasibility; Reporting (including research products, such as public and decision support tools, and research transfer and implementability)
- **Engagement of end users**
- Quality of strategies to enhance the transfer of findings into practice and policy; Demonstrated understanding and involvement of key stakeholders in all stages of research (including practitioners and policymakers)
- **Research team**
- Track record (research, publications etc.); Composition of team. Skills to address the research question; Experience in the clinical research area; Evidence of links/collaboration within the team
- **Consumer participation**
- Meaningful involvement of relevant consumers, carers and consumer advocates in project development and implementation; Involvement of consumers, carers and consumer advocates as researchers

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## Timetable

DATE	TASK/EVENT
9 September 2004	First meeting of NHMRC Working Group to discuss terms of reference, policy framework and advertising for call for Expressions of Interest
18 September 2004	Call for Expressions of Interest based on priority questions in The Australian
15 October 2004	Closing date for submission of Expressions of Interest
8 November 2004	Working Group to provide scores/comments on EOI submissions to Secretariat.
11 November	Meeting of the Working Group to review scores and rank EOIs, determine a short-list, endorse proforma and instructions for full applications and submit contacts for suggested reviewers.
19 November 2004	Place proformas and guidelines for full applications on the web. Request for full research applications.
14 January 2005	Closing date for submission of full applications
21 January 2005	Full application submissions collated and sent to assessors for peer review
18 February 2005	Peer assessment due
25 February 2005	De-identified comments provided to applicants
11 March 2005	Responses to peer assessments due
18 March 2005	Full applications, assessors' reports and applicants comments provided to WG for consideration
7 April 2005	Meeting of the Working Group to consider and rank applications and make recommendations
15 April 2005	Recommendations to Policy and Evaluation Branch of PHC Division
	Successful and unsuccessful applicants advised

## Where to next for clinical grants

- Long process of development
- Strong response (48 EOI)
- Need to evaluate how the process answers the questions, builds capacity, transfers to policy and practice etc
- ? Joint funding from PHCRED and others (eg Heart foundation etc)

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## Awards



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## Process

- Similar to project grants:
  - Assessed by NHRMC using criteria
  - Dept establishes committee to assess those which are of quality but which NHRMC is unable to fund and have ticked PHC box. Assessment focuses on whether the research is applicable to PHC.
  - Similar processes for fellowships (fellows are only for GPs)

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## Criteria (for public health)

- academic record,
- research experience and publications,
- quality of the proposed research and institution,
- development or capacity building opportunities to be gained from the research,
- suitability of the intended supervisor and institution, and
- suitability of the applicant for research training.

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## Successful Scholars

CIA Full Name	Administering Institution
<b>2001</b>	
Dr George T Somers	Monash University
Dr Kelly Shaw	University of Queensland
<b>2002</b>	
Ms Elizabeth McDonald	Menzies School of Health Research
Ms Catherine Joyce	Monash University
Mr Lucio Naccarella	University of Melbourne
Ms Susan Kruske	University of Technology, Sydney
<b>2003</b>	
Dr Hani Tawk	University of Sydney
<b>2004</b>	
Dr Ruth McNair	University of Melbourne

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## Successful Fellowships

### Fellowships PHCRED in 2002

Dr Eugene Mattes	University of Western Australia
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Fellowship Public Health 2002  
Helen Tolhurst University of Newcastle

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## Scholarships to students in PHCRED Departments by year of commencement

	NHMRC	PHCRED
2000	0	-
2001	0	2
2002	1	4
2003	3	1
2004	1	1

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## Issues for the future

- Why so few?
- How can we replace and extend our workforce of PHC academics and researchers?

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