



AUSTRALIAN PRIMARY HEALTH CARE RESEARCH INSTITUTE

APHCRI / Institute for Clinical Evaluative Sciences (ICES)

Visiting Fellowship 2014

Information for Applicants

Closing date 22 August 2014

Background

The Australian Primary Health Care Research Institute (APHCRI) was established at The Australian National University in 2003 as a component of the Primary Health Care Research Evaluation and Development (PHCRED) strategy. Its mission is to provide national leadership in improving the quality and effectiveness of primary health care through the conduct of high quality, priority-driven research and the support and promotion of best practice.

APHCRI'S Mission¹

To maximise the health and well-being of the community by leading high-quality, priority-driven research and supporting its uptake into primary health care policy, programs and services.

Key goals²

APHCRI has three main goals which are achieved through undertaking a number of specific activities:

1. To support priority-driven primary health care research

Support for priority-driven research is critical to the role of APHCRI. Rather than research which follows the interest of researchers, APHCRI funds and facilitates research into areas driven by nationally identified priorities. This enables research to be focussed on issues of current policy interest and supports a closer link and interaction between research, policy and service delivery. It also ensures that APHCRI-supported and led research is focussed on the most relevant and current policy and service priorities. This facilitates the incorporation of research findings into policy to directly influence primary health care delivery.

¹ Extracted from APHCRI Strategic Intent Document
<http://aphcri.anu.edu.au/files/Statement%20of%20Strategic%20Intent%202013-2016%20WEB.pdf>

² Extracted from APHCRI Strategic Intent Document
<http://aphcri.anu.edu.au/files/Statement%20of%20Strategic%20Intent%202013-2016%20WEB.pdf>

2. To increase the capacity to undertake primary health care research

APHCRI aims to increase overall capacity for research in the primary health care sector through targeted initiatives, such as supporting PhD students, networking researchers working in similar areas, identifying early-career researchers and facilitating their research, developing partnerships with relevant international organisations and working with primary health care organisations to translate research into practice.

3. To drive the implementation of research into primary health care policy and services

To ensure primary health care research delivers maximum community benefits it needs to be embedded within policy and services. APHCRI supports an interactive engagement between researchers, policy makers and practitioners and service users to promote evidence-based primary health care by building relationships and developing strategic partnerships. Through establishing a dialogue between policy makers, researchers, system managers, health care practitioners and service users, APHCRI promotes informed national debate on ongoing primary health care reform initiatives.

APHCRI research focuses on important sectoral questions relating to the organisation, financing, delivery and performance of primary health care, including its interaction with public health and the secondary and tertiary health care sectors. The intended beneficiaries of APHCRI's activities are consumers of Australian primary health care services.

In fulfilling its mandate, APHCRI collaborates with several national and international institutions, including the Institute for Clinical Evaluative Sciences (ICES) in Ontario, Canada.

ICES leads cutting-edge studies that evaluate health care delivery and outcomes. Its community of researchers and data and clinical experts access a vast and secure array of Ontario's health-related data, including population-based health surveys, anonymous patient records, clinical and health services administrative databases.

The collaboration between APHCRI and ICES has developed over the past few years. We are now pleased to offer the first APHCRI / ICES Visiting Fellowship to Australian early career researchers to visit Ontario, Canada.

Objectives of the APHCRI / ICES Visiting Fellowship

The objectives of the APHCRI / ICES Visiting Fellowship are to:

1. provide the Visiting Fellow with an overseas research and policy immersion experience focused on health policy as seen from a family medicine and/ or primary care perspective
2. share lessons learned from Australia and develop a multinational perspective and network of contacts to facilitate policy exchange and ongoing collaboration
3. develop infrastructure and improve the capacity of Australian Primary Health Care researchers
4. provide the overseas research centre with a source of ideas, energy, competencies and services that enhance its performance and contributions to primary care policy research
5. provide the Visiting Fellow with the opportunity to attend the Australian Primary Health Care Research conference

6. produce an abstract of the researcher's research program suitable for acceptance and delivery at the next Australian Primary Health Care Research conference.

2014 Proposed exchange program

ICES is collaborating with APHCRI on a visiting researcher program, with a preference for a research exchange of up to three months dependent on applicant availability.

Applicants will be affiliated with a relevant university department. The successful applicant will visit ICES in Ontario, Canada in late 2014 or by August 2015 to undertake a research project relevant to ICES, the Australian PHC sector and the work of APHCRI.

ICES has developed vast, longitudinal databases that can be accessed for a wide range of research purposes. Many ICES scientists lead multidisciplinary teams that include expert statisticians and epidemiologists, as well as specialists in knowledge translation and information security, privacy and information technology. The diversity within these teams and their expertise at using ICES' array of linked datasets is the foundation of the innovative approach to research at ICES.

ICES research results in an evidence base that is published as atlases, investigative reports and peer-reviewed papers, and is used to guide decision-making and inform changes in health care policy and delivery. Many ICES reports are undertaken to answer specific questions (known as Applied Health Research Questions) posed by health system stakeholders and policy-makers.

ICES offers the following research topics that are also areas of interest for PHCRED and APHCRI,

- > models of primary care – impact on access, quality and equity
- > use of EMR data for research and quality improvement
- > wait times between primary care and specialist care
- > integration of care across health sectors for high cost patients
- > impact of geographic variations in primary care workforce on health outcomes
- > value for investment in primary care
- > inter-provincial and international comparisons of primary care organization and performance, and
- > effective knowledge translation strategies.

Other ICES primary care researcher projects are on the primary care aspects of disease management in specific areas including,

- > cancer screening
- > cancer care
- > immunization
- > diabetes care

- > HIV/AIDS
- > substance use
- > mental health, and
- > developmental disability.

Preconditions for exchange projects

In order to approve a research exchange ICES stipulates that

- > The Visiting Fellow is a researcher from another institution, generally outside of Canada, who comes to ICES to conduct independent research in their field of expertise and to exchange knowledge and expertise while at ICES.
- > The term for the Visiting Fellow is to be defined prior to commencement.
- > ICES Visiting Fellows conduct their work within an ICES Research Program and must have an ICES supervisor who is a full-status ICES scientist.
- > A research plan and confirmation of the resources needed to conduct the research are submitted for approval ahead of time.

Funding

APHCRI will provide a stipend of \$20,000 AUD to support travel and accommodation³ costs, attendance at the Australian Primary Health Care Research conference and incidental costs associated with the Fellowship. All travel and accommodation arrangements will be administrated by, and the stipend paid to, the Fellow's employing organisation. The host organisation will provide in kind support for the research facilities such as work place, access to databases, data collection, supervision and methodological / statistical support.

Additional support will be provided at the time for the successful 2014 Fellowship recipient to attend the next appropriate PHC Research conference if the recipient of the Fellowship has had an abstract accepted for presentation by the conference scientific committee.

It is the responsibility of the successful applicant's employing organisation to organise visas and other travel documents if required.

Eligibility

- (a) An applicant must be an Australian citizen, an Australian permanent resident or a New Zealand citizen who holds a Special Category Visa. Note that applicants who have not yet been granted permanent residency or a Special Category Visa may apply, provided that such status has been sought. Evidence that this status has been granted must be provided prior to commencement of the Fellowship.
- (b) Applicants must be residing in Australia at the time of application.

³ Estimated accommodation costs in Toronto are \$2k-\$3k (CAD) per month.

- (c) Eligible applicants must be affiliated with a relevant Australian university department or clinical school.
- (d) By signing the Application Form, the employer agrees to continue the successful Fellow's usual salary / income throughout the period of the international visit.
- (e) Preference will be given to applicants who can demonstrate formal links with a research centre (e.g. a university department or rural clinical school), so that they can be appropriately mentored and can contribute to that centre's development upon completion of the Fellowship.

CONDITIONS OF THE AWARD – APHCRI / ICES Visiting Fellowship

Expected outcomes

1. The recipient will provide a narrative report (approximately 1000 words) of the research and policy immersion experience to APHCRI no later than one month after their return from the visit. The report will be published on the APHCRI website.
2. The recipient will produce a 1.3.25 report for APHCRI addressing their research program.
3. Where relevant to Department of Health policy development, the recipient will provide a presentation in Canberra for relevant policy staff at a meeting facilitated by APHCRI. The presentation will outline the activities undertaken, lessons learned from the international context and the benefits derived from the Fellowship, including opportunities for ongoing collaboration with the relevant research centre.
4. The recipient will produce an abstract, suitable for acceptance and delivery at the Australian PHC conference 2015 (or in 2016, depending on the timing of the visit), on their program of work.

Time frame

The visit of **up to three months** duration will occur between late 2014 and August 2015. The successful applicant will need to negotiate the exact dates of the visit with ICES. A 'block' period of time at ICES is the preferred approach to maximise the experience.

Use of funds

The Visiting Fellowship will provide the holder time to work on the project, funding for international travel, accommodation and related project costs; and attendance at the annual Australian PHC Research conference.

Funds will normally be made available directly to the administering institution on acceptance of the award.

Funds must be acquitted within two months of return from the annual Australian PHC Research conference to which the abstract has been submitted. Financial acquittal of all funds must be

provided to APHCRI in Australian dollars. APHCRI reserves the right to recoup unexpended funds.

Acknowledgement

The contribution of the Department of Health will be acknowledged in all correspondence, public announcements, advertising material and other material produced by the recipients on behalf of APHCRI.

This acknowledgement will normally be of the form:

The Australian Primary Health Care Research Institute is supported by a grant from the Australian Government Department of Health.

Publication of APHCRI research

Acknowledgement of the Institute's role in recipient's research publications will normally be of the form:

The research reported in this paper [or presentation] is a project of the Australian Primary Health Care Research Institute, which is supported by a grant from the Australian Government Department of Health, under the Primary Health Care Research, Evaluation and Development Strategy. The information and opinions contained in it do not necessarily reflect the views or policy of the Australian Primary Health Care Research Institute or the Australian Government Department of Health.

On notification by a publisher of intent to publish an article or research report submitted by a recipient, the researcher will advise APHCRI of the paper's acceptance for publication and send APHCRI a copy of the final version of the paper or report, embargoed from further dissemination until publication.

Application details

The closing date for receipt of applications for the 2014 APHCRI/RGC Fellowship is **22 August 2014**. Applications are to be submitted using the application form. An electronic version (in .pdf format) and signed hard copy version must be submitted. All text in the application should be no smaller than 11 point and single line spaced. Applicants should succinctly address all requested information. **Stated page limits must not be exceeded.**

Fax copies will not be accepted. For enquiries, please call Dr Chilandu Mukuka on (02) 6125 0782 or e-mail using: submissions.aphcri@anu.edu.au. Applications must include the following information:

Cover letter

A cover letter, signed by both the researcher and the administering institution or employer or practice principal endorsing the proposal,

agreeing to the time commitment by the researcher and supporting the planned visit overseas, must be attached to the proposal.

Application components

<i>Applicant details:</i>	Include full name and all relevant contact details.
<i>Employment details:</i>	Include current position and all contact details relating to the administering institution or employer or practice principal.
<i>Qualifications/ experience:</i>	<p>Provide</p> <ul style="list-style-type: none">• details of tertiary qualifications (award name, institution and year awarded)• details of relevant experience in the primary health care sector• a list of relevant publications in the last five years. <p>Applicants must make explicit their academic and health policy experience including participation in research activities, scholarship in teaching and learning / professional presentation and engagement with organisations or government bodies that participate in health policy processes.</p> <p>This information should not exceed one page.</p>
<i>Project title:</i>	Give a title for your project (10 words or less).
<i>Commencement and completion dates:</i>	<p>State the proposed dates for commencement and completion of the Fellowship, allowing time for preparation before travel and submission of the final report.</p> <p>This information should not exceed one half page.</p>
<i>Travel itinerary:</i>	<p>Provide a proposed schedule for the visit, including the length of stay and proposed activities to be undertaken. This should include your time at ICES and the preparation of reports and research abstract.</p> <p>This information should not exceed one half page.</p>
<i>Budget requested:</i>	<p>Provide a detailed budget with justification. This will include travel (international and domestic), accommodation, conference registration, per diem estimate for meals etc., and incidental costs associated with the Fellowship.</p> <p>This information should not exceed one half page.</p>
<i>Fellowship details:</i>	<p>Describe in no more than two pages why you are applying for this Fellowship; how it fits in with your career plan; how you will meet the objectives for this Fellowship and what research you will conduct under this Fellowship. The description of the research should include a clearly stated aim and describe</p>

intended research method/s.

Assessment and decision-making process

Expert Review Committee (ERC)

- > The closing date for applications is **22 August 2014**.
- > **An APHCRI ERC will assess candidates' applications in the week 8-12 September 2014.** This committee will include a representative of ICES.
- > The ERC will rank shortlisted applicants and provide the rank order list, comments and recommendations to the Research Advisory Board (RAB).

Research Advisory Board

The RAB will decide the successful Fellow. The Fellowship will be **announced** in the **week of 22 – 26 September 2014**.

Selection criteria

Applications will be assessed against the following selection criteria, taking account of outcomes achieved relative to opportunity:

1. Applicant meeting the eligibility requirements (Yes/No)
2. Applicant's academic research experience (e.g. publications, grants won, participation in research activities, contributions to university departments, experience with quantitative research, computer literacy in terms data analysis) (10 point scale)
3. Applicant's academic and / or professional teaching and or presentation experience (e.g. presentation at conferences or other professional meetings, development of modules /sessions /courses, teaching / presentation sessions delivered, feedback on teaching / presentation activities, contributions to teaching presentation activities) (10 point scale)
4. Applicant's health policy experience (e.g. participation in relevant organisations such as colleges, divisions, training consortia, registrar associations including succinct description of roles) (10 point scale)
5. Applicant's vision for the Fellowship (the extent to which the applicant not only meets the stated objectives for the Fellowship, but succinctly expresses a vision for the Fellowship that results in sound research, policy and capacity building outcomes. What value will this particular applicant add to the Fellowship?) (10 point scale)
6. Suitable budget and logical timeline (10 point scale)

Submission

The signed original hardcopy of the application and one electronic copy (**faxed copies will not be accepted**); must be received at APHCRI no later than close of business, **5pm AEST on 22 August 2014** to:

MAILING ADDRESS:

The Head of Programs, APHCRI
Building 63
Cnr. Mills & Eggleston Rd
The Australian National University
CANBERRA CITY ACT 0200

EMAIL ADDRESS:

The electronic copy can be emailed to
submissions.aphcri@anu.edu.au

COURIER ADDRESS:

The Head of Programs, APHCRI
Building 63
Cnr. Mills & Eggleston Rd
The Australian National University
Acton ACT 2601
(02) 6125 0766

Certification

By signing the application, the applicant and administering institution (where relevant) are agreeing to accept the Conditions of the Award as set out in this document.

Summary of Process for APHCRI / ICES Visiting Fellowship

Activity	Proposed 2014
Announcement of Visiting Fellowship	1 July
Closing date for receipt of applications	22 August
ERC assessment process against Selection Criteria and RAB decision making	8-12 September
APHCRI / ICES Visiting Fellowship announced	22-26 September
Fellowship may commence	Oct-Nov 2014
Fellowship expiration	August 2015
Narrative report provided to APHCRI	One month after return from visit
Final Report provided to APHCRI	Three months after return
Presentation to DoH (if requested)	2015 (or 2016, as appropriate)
Submission of abstract to PHC Research Conference 2015 (or 2016, depending on time of visit) Committee	April 2015 (or April 2016)
Final report on conference presentation and acquittal of funds	September 2015 (or September 2016)