

Australian Centre for Health Services Innovation

Implementation Grant Funding Policy

August 2016

Purpose of this Document

This document describes the policy and procedures the Australian Centre for Health Services Innovation (AusHSI) will follow in awarding and distributing funds via the Implementation Grant funding scheme, and the requirements and responsibilities of researchers reporting on research outcomes.

Background

AusHSI's mission is to enable our clients to create genuine improvements in the quality and cost effectiveness of health services. We empower health decision makers to implement and sustain innovations for better health services. We do this by generating insights from research, translating knowledge into practice and promoting partnerships between clinicians and academics.

The first phase of AusHSI supported 40 new research initiatives worth more than \$2.4 million. From these grants alone we have shown how improved health outcomes and \$160 million in savings can be made.

Knowing how health services *should* be organised is not enough for a re-organisation to happen. The next stage is to *implement* new knowledge and change the way health services are organised. There are many hurdles to be overcome and helping health services develop a structured method for dealing with them is the intent of AusHSI. One of the ways AusHSI supports and grows capacity for successful implementation is through a program of Implementation grants.

Implementation Grants

Implementation Grants of up to \$150,000 are available to Queensland-based health services groups for projects of 12 months in duration. These grants will be to support groups to conduct health services research involving implementation and evaluation in a "real world" health service setting. The focus should be on providing evidence for health service changes that are both effective and sustainable.

A successful application for an implementation grant will have these attributes:

- A strong evidence-base for the health service innovation, including existing pilot data, to support the value, impact and feasibility of its wider adoption.
- A clearly identified and conceptually justified plan for implementation and evaluation.
- Validated and verifiable support of the innovation by the leadership of the relevant health service/s.
- Demonstrated evidence of a partnership between health professionals, academics and decision makers and capacity within the team to conduct the research.
- Demonstrated commitment of the team to learning implementation science and further developing a strategy for knowledge translation, implementation and evaluation.
- A realistic, justified budget.

In addition to the funding from the Implementation Grants, AusHSI will support translation activities in these ways:

- A post-doctoral health economist will be available to help research groups make the economic case for the innovation.
- A post-doctoral implementation scientist will be available to help develop an appropriate implementation strategy.
- General training and skills development opportunities in Knowledge Translation, Implementation Science and Cost-Effectiveness.
- AusHSI will help identify key stakeholders and actively advocate and negotiate for wider implementation of the project's innovation.
- AusHSI will facilitate engagement with our partners to leverage skills and resources to develop or strengthen competitive Partnership Grant applications.

The application process will remain short and simple

Why the focus on Implementation Research?

Methods to produce evidence to show ‘*what should be*’ in health services are relatively established. Causal inference, interpretation of observational data and models to estimate the expected change to costs and health benefits from alternate configurations of health services are used routinely by research groups worldwide. Using these methods to find alternate allocations of scarce resources so that more health is generated for lower or similar cost has been the task of AusHSI since 2011. We have previously used the stimulus grants scheme to support over 40 clinician-led research initiatives that demonstrated improvements to health services.

However, changing the way health services are organised in response to the new information is harder and has led to the current phase of AusHSI. There is a growing movement to turn more health research into evidence-based practice. Large strides have been made with diffusion theory that led to public health research on dissemination and paved a way for implementation practices. Implementation science is a fast growing discipline, much like epidemiology and health economics were in the 1970’s. The methods are still relatively young, the theories heterogeneous and the practical application relatively sparse. Embedding evidence into practice is not a linear or technical process that can be achieved by individual clinical champions. Evidence implementation requires whole system change involving both the individual and organisation.

There are a multitude of theoretical frameworks developed to guide implementation. One example of an implementation framework is iPARIHS, developed by Gill Harvey and Alison Kitson from the University of Adelaide. The PARIHS framework deals with how to implement innovations to health services. They have recently published a very useful book¹ that extends their previous work. The update is called iPARIHS and proposes that successful implementation of evidence results from facilitation of an innovation with the recipients in their context – with facilitation being an ‘active ingredient’. The book is a practical ‘how-to’ guide for facilitating the implementation process.

Some more information and suggested references are available on the AusHSI website.

Contact us first

We expect groups who are interested in applying for an Implementation Grant to discuss their project with AusHSI before they apply by emailing contact@aushsi.org.au. This will be a criterion on the application form. Please see below for details on the expression of interest process.

Who is Eligible?

We realise research groups will be at different stages of the implementation process, and we aim to invest in a range of groups.

We expect to receive applications from our existing community of clinicians and researchers who have previously been supported with AusHSI Stimulus Grants, but having a Stimulus Grant is not a requirement. We also wish to engage with new groups who have a good innovation they wish to implement and evaluate.

The research team undertaking the project must include at least one Queensland-based, actively practicing health professional (nurse, allied health professional, doctor, health administrator) as the lead researcher; and at least one academic researcher, preferably with a university or research institute appointment. The strength of the team will be a criterion against which the application is assessed (this does **not** mean track record, more the appropriateness of the skills the combined team members bring).

¹ Harvey G and Kitson A, *Implementing Evidence-Based Practice in Healthcare*. 2015: Routledge.

Ensuring research addresses priority areas

An important component of a successful implementation is making sure the target innovation is a priority for all stakeholders. That an innovation is considered important by clinicians or academics is unlikely to lead to practice change, unless the innovation is also a priority for the health service Executive and/or the Department of Health.

To ensure projects are addressing priority areas, AusHSI will first expect applicants to provide a **letter of support** for their project, endorsed by the Senior Executive of their health service.

The AusHSI Scientific Review Committee (SRC) will assess applications against the criteria set out later in this document, and shortlist proposals.

Shortlisted applications will then be presented to the relevant health service and Department of Health representatives to seek confirmation that they would support the proposed implementation. It is possible that projects ranked highly by the SRC may be excluded at this stage because they are not considered a priority by decision makers who manage health services. However, having this support will greatly increase the likelihood of successful implementation.

AusHSI will also undertake an ongoing process of consulting widely with leading clinicians, Hospital and Health Service (HHS) Executives and the Department of Health to identify priority areas within the health services, and may from time to time address these identified research gaps by calling for Implementation Grants that specifically address these priority areas.

Detailed Protocols for AusHSI Implementation Grant Funding

General information

- Maximum funding awarded for an Implementation Grant is \$150,000 (excluding GST). Appropriately costed smaller projects will be considered favourably.
- Upon notification of round outcomes, successful applicants will be sent letters of offer and a standard funding agreement. This agreement is not negotiable, and an executed copy must be returned to AusHSI, along with an invoice for 50% of the total funds awarded, within 30 business days or the offer of award may lapse.
- The period of funding for an Implementation Grant is a maximum of **one year**. This period will **commence upon dispersal of funds**. Funds will not be disbursed until an Ethics clearance/waiver is provided. It is expected that ethical approval will occur within one month of notification of successful application.
- Budget items which **will not** be supported by AusHSI funding include capital works, infrastructure, and indirect costs. Travel, telephone and computer costs will not be funded unless justified to be directly related to the research.
- The number of grants awarded within each round (and each year) will be determined by the AusHSI Management Committee who will be guided by the following factors:
 - Amount of funding available, as outlined in the AusHSI Annual Business Plan;
 - Number of applications that are deemed fundable by both the SRC and the Management Committee.
- Two funding rounds will be held annually, unless otherwise determined by the Management Committee. These funding rounds will be advertised on the AusHSI website and as broadly as possible through appropriate existing research and health department networks.

Application process

Step 1

1. Before applying, applicants **must consult with AusHSI** regarding whether their idea is suitable for the funding scheme. This can be done by sending an email (no longer than 400 words) with dot-points outlining the broad concept of your proposal to contact@aushsi.org.au. You will receive written feedback from a member of the Scientific Review Committee (SRC) on your project. The deadline for doing this will be specified in the advertisement and is generally two weeks before the submission deadline. Applicants must name the AusHSI SRC member who reviewed their EOI, in their application.

Step 2

2. Applicants must register on the AusHSI website. After entering their contact details, they will be assigned a unique registration number which will link all their future grant applications.
3. After logging in to the AusHSI website, applicants will fill in the online, **text-only** application form, describing in **no more than 1,500 words** the following:
 - the evidence-based innovation, or change to practice you propose to implement and evaluate and the quality gap it aims to reduce
 - evidence to support the feasibility of the implementation (including pilot data and evidence from any other settings in Australia or overseas where a similar innovation or change to practice has been implemented, with reference to relevant publications)
 - evidence to support the potential value or impact of the innovation on health services, both in this setting and more broadly
 - conceptual framework/theory/model that informs the research design and key outcome and process variables of interest
 - the health services setting in which the innovation will take place
 - the activities of any individual/s who are currently or will in the future play a role in facilitating implementation of the innovation or change to practice
 - the executive leadership support you have for this implementation
 - the suitability of the clinician/academic team undertaking the research
 - how you will spend the proposed budget

Step 3

4. Applicants must upload a signed **letter of support** from their health service Executive or delegate. A template is available on the application page of the website. The letter need not be in the same format, but must indicate support for the future implementation.
5. **We will not reject an application without a letter of support, but a project will not be shortlisted without one**, so applicants should submit one as soon as possible. The deadline for submission of a letter of support will be specified in the advertisement for the funding round.
6. After you have submitted your application, email a scan of the signed letter (NOT the application) directly to contact@aushsi.org.au, include your grant reference number (IG0022-000xxx) in the subject line.
7. Applicants will not be allowed to submit another version of the same research project within the same funding round. Applicants will be allowed to submit multiple applications as long as they are different research proposals.
8. Applicants will be asked to read and agree to set terms and conditions before submitting their application (**See Appendix 2 - Implementation Grant Terms and Conditions**).
9. Immediately after submitting, applicants will automatically be emailed a copy of their application, along with the terms and conditions of the funding.

10. No detailed correspondence will be entered into, until after applications are reviewed.

Assessment process

1. Applications will be screened by the AusHSI administration team for those that are deemed invalid by not addressing the criteria. An example of an invalid entry might be one that does not list collaborators, or has no description of budget. Applicants of invalid applications will be sent notification by email that their application has been rejected as invalid together with the reason.
2. All valid applications will be allocated and distributed by the Centre Manager to members of the SRC for review (taking into account conflicts of interest identified by SRC members).
3. Applications will be assessed against the following judging criteria (additional criteria may be taken into account by the individual committee members at their discretion):
 - i. How clearly the innovation or change to practice has been described
 - ii. The **feasibility** of the implementation (within budget and timeframe, within context)
 - iii. The potential **impact** of the innovation through improved health services (How many patients or services might be affected by the change; what efficiency gains)
 - iv. Whether the change can be evaluated
 - v. The extent to which the applicant demonstrates an understanding of implementation activities (based on their answers to ii – v above)
 - vi. The potential for broader implementation (e.g. state/national roll out).
 - vii. The strength of the clinician/academic team to undertake the research
 - viii. Whether the innovation addresses a priority area identified by Department of Health and/or health service decision makers.

Applications will be categorised by each committee member into one of three categories:

- Reject
 - Revise
 - Accept for Interview
4. After a period of not less than two (2) weeks from receiving the applications for review, all members of the SRC will meet to discuss any applications where one or more reviewers have categorised the application as *Accept for Interview*.
 5. Applications will be discussed and designated to a mutually agreed category. If a unanimous decision cannot be reached after discussion, the majority decision will be taken.
 6. Applications categorised as *Reject* will be sent notification by email, including feedback from the SRC. No further correspondence will be entered into.
 7. Applications categorised as *Revise* will be sent notification by email, including feedback and suggestions for improvement from the SRC. Applicants are welcome to contact AusHSI to seek further feedback after receiving this initial feedback.
 8. In the case of applications categorised as *Accept for Interview*, AusHSI will seek review from a representative of the Department of Health Queensland, and relevant decision makers within the originating applicant's health services. A commitment will be sought that the implementation plans will be supported when successfully developed.
 9. Applications categorised as *Accept* but not supported by the Executives of the health service will be notified by email.
 10. The remaining applicants will be directed back to the website to select an interview time, and asked to provide a 150 word synopsis of their project. These applicants may be asked to respond to an additional set of questions prior to the interview to clarify details of their project proposal.

11. Interviews will be short, with a 10 minute presentation from the applicant, followed by 10 minutes for questions from the SRC. If the SRC has specific questions they would like addressed at the interview these may be communicated to the applicants ahead of the interview.
12. After completion of all interviews the SRC will decide final funding recommendations to be made to the Management Committee.
13. All applications that progress to interview and are deemed by the SRC to be fundable will be ranked by the SRC as a group. The amount of funding available will determine how many of the top ranked applications will be recommended to the Management Committee for funding.
14. In order to be accepted by the SRC for recommendation to the Management Committee for funding, the applicants must satisfy the SRC that:
 - The project can be started within 1-2 months of notification of successful application
 - The project can be completed within 12 months
 - The project can be completed within the proposed budget
 - There are no obvious impediments to the project being approved by all relevant Ethics and Research Governance committees
 - If undertaken as proposed, the project will comply with any legislative requirements for conducting research in Australia
 - The applicants have provided written assurances that their Executive supports the project should they be funded.
15. Should there be more fundable applications than funding available, the applications ranked below the cut-off will be re-categorised as *Revise* and the applicants sent notification by email, including feedback and suggestions for improvement from the SRC. Applicants in this category are welcome to contact AusHSI to seek further feedback.
16. A brief summary (including the ranking) of each application categorised *Accept* by the SRC will be prepared and submitted to the Management Committee for final approval.
17. If, due to exceptional circumstances, the Management Committee decides not to fund one or more of the recommended applications, they will be re-categorised as *Revise*, and the applicants will be sent notification by email, including feedback from the SRC.

Grant management process

1. Applications accepted for funding by the Management Committee (Recipients) will be sent notification of their success and a request to supply:
 - i. Contact details for the recipient organisation
 - ii. a more detailed budget breakdown of anticipated expenditure
 - iii. an indicative funding schedule indicating amount and timing of invoices to be sent to QUT for payment (to be approved by AusHSI). See point 8 below.
2. This information must be supplied within 7 days, and will be used to draft the standard AusHSI funding agreement which will be sent to recipients via email.
3. This funding agreement is not negotiable, and a signed copy must be returned to AusHSI within 30 business days of issue of the award letter.
4. An invoice for the amount stipulated in the funding agreement must also be received by AusHSI within 30 business days of issue of the award letter.
5. If the required documents are not provided within 30 business days, the offer of award may lapse. Applicants may re-apply in the next funding round.
6. Before funds will be disbursed, the Recipient will also be required to submit the following documents to AusHSI, however these may be sent at a later date:

- a copy of any Ethics approvals/waivers required to conduct the research
 - a copy of the Research Governance Approval to conduct the research at the intended site/sites.
7. Once in receipt of all items in points 1-6, QUT (on behalf of AusHSI) will make the awarded funds available to the Recipient. Maximum total funding will be \$150,000 (excl. GST).
 8. The standard funding schedule will be 50% paid on execution of the contract along with receipt of the required ethics and governance approvals and 50% on receiving an interim report at 6 months paid upon receipt of a valid tax invoice from the Recipient's host organisation. No funds will be paid to individuals. The recipient may request a different funding schedule and QUT will make all reasonable effort to meet this request if approved by AusHSI.
 9. As per the Terms and Conditions of funding (see Appendix 2), and the Funding Agreement, the recipients are required to immediately notify AusHSI in writing if any of the following occur:
 - i. There is a significant change to the proposed research protocol
 - ii. There is a change in investigators
 - iii. There is a change in the proposed budget categories of more than 10%
 - iv. There is a delay in project commencement that would extend beyond 2 months post notification of award.
 10. In exceptional circumstances a no-cost extension may be requested (in writing).
 11. An interim report will be due 6 months after the commencement of the project before the final 50% of funds will be disbursed.
 12. At the end of the 12 months a brief final report will be due. Recipients will be sent a reminder and a final report template at 11 months from the date of funding.
 13. Recipients may also be required to schedule a completion presentation to the Scientific Review Committee.
 14. A summary of the project and results will be included on the AusHSI website.
 15. The Recipients may be requested to present their project results at relevant conferences and forums.
 16. Publications arising from this grant should acknowledge the AusHSI Implementation Grant funding received. Details should be sent to AusHSI for inclusion in their annual report.

Scientific Review Committee

The Scientific Review Committee (SRC) will evaluate Research Projects and recommend funding priorities to the Management Committee, who will make the final decision on which projects are funded. The Scientific Review Committee has no powers in relation to the management of the Centre.

The Scientific Review Committee will consist of the following Members:

- AusHSI Academic Director (Chair)
- AusHSI Clinical Director
- statistician
- implementation scientist
- an expert in health research ethics
- a minimum of two clinical expert advisors selected from the Queensland Hospital and Health Services
- a maximum of two academic researchers with expertise in health services research as nominated by the Chair.

Clinical expert advisors and academic researchers will be selected to ensure balanced representation of disciplines, expertise and research methodologies.

See Appendix 1 – Terms of Reference for the AusHSI Scientific Review Committee

Confidentiality

- AusHSI will treat information contained in a research proposal as confidential. However, AusHSI may disclose information contained in a proposal to the extent that the information is:
 - disclosed by AusHSI to its advisers (including external assessors), officers, employees or other third parties in order to assess, evaluate or verify the accuracy or completeness of a proposal;
 - disclosed to AusHSI's personnel to enable effective management or auditing of the Implementation Grant scheme or any Funding Agreement;
 - authorised or required by law to be disclosed;
 - disclosed in accordance with any other provision of this Funding Policy; *or*
 - in the public domain.
- Where information contained in a Proposal is made available to third parties for evaluation or assessment purposes AusHSI will require the third parties to maintain the confidentiality of the material.
- AusHSI may publicise and report offers or awards of funding, including information about the proposed research; the name of the investigators and their organisations; the name of the Administering Organisation and any other parties involved in or associated with the project; the title and summary descriptions of the project and its intended outcomes (including the benefits that are expected to arise from the research); and the level and nature of financial assistance from AusHSI. Administering Organisations should ensure that information contained in the project title and summaries would not, if released, compromise their own requirements for confidentiality (such as future protection of intellectual property).
- In making public information about a proposal which has been approved for funding, AusHSI may use a project description, including title and summary, which may differ from that provided in the proposal.

Appendix 1:

Australian Centre for Health Services Innovation

Scientific Review Committee

Terms of Reference

Preamble

The Australian Centre for Health Services Innovation (AusHSI) was established in 2011. The partners of AusHSI are the Queensland Government, The Royal Brisbane & Women's Hospital, the University of Queensland, and Queensland University of Technology.

The objectives of the Centre are to encourage partnerships between Hospital and Health Services and academics to drive and evaluate robust models of improvement in quality, safety and efficiency in health services. The Centre will broker relationships, identify priorities, fund and support rigorous Health Services Research and develop opportunities for implementation. The Centre will support teams in evaluating high priority changes to services so that improvements can be disseminated widely, and successful innovations recognized.

The Centre will bring together academics, health professionals and decision makers to conduct Healthy Services Research that focuses on the investigation, development and evaluation of strategies to improve quality, safety and efficiency in health services. The Centre will enhance the knowledge of clinicians and managers in methods of evaluation, system modelling and decision making relevant to their work environment. The Centre will pursue innovative approaches to funding and managing research among academic and health service communities.

Governance Framework of AusHSI

- Accountability for the implementation and management of AusHSI is shared by Queensland Health, the Royal Brisbane and Women's Hospital, the University of Queensland and the Queensland University of Technology through the forum of the Management Committee.
- The Scientific Review Committee, a sub-committee of the Management Committee evaluates research proposals and recommends research funding priorities to the Management Committee.
- The Strategic Advisory Group provides high level strategic advice and guidance to the Management Committee on strategic and priority areas of research, training, consultancy and knowledge transfer. The Strategic Advisory Group has no powers or accountability in relation to management of the Centre.
- Queensland University of Technology is responsible for the day to day management and administration of AusHSI through the Centre Manager and AusHSI Team, who are appointed by Queensland University of Technology.

Role of the Scientific Review Committee

1. The Scientific Review Committee will evaluate applications for Funding against selection criteria set out in the Funding Policies of the various Funding Schemes, and make recommendations to the Management Committee for funding. Two of these criteria shall include:
 - The project must be supported by a strong partnership between a Queensland-based health services professional and a full time researcher, and;
 - The findings have good potential to be used to improve health services.

2. The Scientific Review Committee will also provide advice to the Management Committee on the following issues regarding recommended proposals:

Ethical considerations

- The Scientific Review Committee will consider the need for Human Research Ethics Committee clearance (as per the requirements of the NHMRC *National Statement on the Ethical Conduct of Research Involving Humans*, the Australian Code of Responsible Conduct of Research), and whether clearance may need to be obtained from another Ethics Committee (e.g. an Indigenous Ethics Committee, an Animal Ethics Committee or a Coronial Ethics Committee).
- The Committee may identify possible issues that may prevent or delay the proposal being cleared by an ethics Committee or review process within the term of the funding period, and bring this to the attention of the applicant and/or Management Committee.
- Proposals will only be recommended for funding when the Review Committee is satisfied that the proposed research is likely to be approved by the appropriate Research Ethics Committees, a review committee for low and negligible risk or quality improvement review process.

Note: As per the AusHSI funding policies funding will only be awarded once all appropriate Ethics clearances are obtained by the successful applicant, and by signing the funding agreement the Recipient recognises that it is their responsibility to carry out the research in accordance with all relevant legislation and the NHMRC *National Statement on the Ethical Conduct of Research Involving Humans*, the Australian Code of Responsible Conduct of Research.

Legal compliance

- The Review Committee will consider the proposal's compliance with legislation and regulations governing research in Australia, including but not limited to: *National Health and Medical Research Council Act 1992*, *National Statement on Ethical Conduct in Human Research (2007)*, *Australian Code for the Responsible Conduct of Research (2007)*, *Note for Guidance on Good Clinical Practice (CPMP/ICH/135/95)*, *Privacy Act 1988*, *Archives Act 1983*, *Public Health Act 2005*, *Transplantation and Anatomy Act 1979*.
- Proposals will only be recommended for funding if the Review Committee is satisfied that the researchers will be able to conduct the research as proposed without breaching any relevant legislation.

Note: As per the AusHSI funding policies a funding agreement must be signed by the successful applicants prior to being awarded the funding, in which they agree to conduct the research in a manner that meets all legislative requirements relevant to their research.

3. It is important that research projects are conducted within budget and on time. Researchers should demonstrate management of risks that may impact on the ability to achieve this.
 - The Scientific Review Committee will provide advice on the budget for the proposed research, evaluating whether it is value for money, and whether the budget is sufficient for the proposed research.
 - The Scientific Review Committee will provide advice on the feasibility of completing the proposed research within the agreed timeframe.
 - The Scientific Review Committee will provide advice on risk management and the likelihood that the research will provide findings that will be translated into better healthcare practices.

4. The Scientific Review Committee will take advice from the AusHSI Management Committee regarding research funding priorities and consider the Queensland Health priorities as provided each year by the Department of Health.
5. The Scientific Review Committee will provide reports annually to the Management Committee on the progress, outputs and outcomes of funded research and will contribute to the AusHSI Annual Report.

Membership

The Scientific Review Committee will consist of the following Members:

- AusHSI Academic Director (Chair)
- AusHSI Clinical Director
- statistician
- implementation scientist
- an expert in health research ethics
- a minimum of two clinical expert advisors selected from the Queensland Hospital and Health Services
- a maximum of two academic researchers with expertise in health services research as nominated by the Chair.

Clinical expert advisors and academic researchers will be selected to ensure balanced representation of disciplines, expertise and research methodologies.

Operating Procedures

The Scientific Review Committee will operate as per the standard operating procedures outlined in the AusHSI Funding Policies, which may be reviewed and changed from time to time with prior approval from the Management Committee. The AusHSI Funding Policies will be freely available on the AusHSI website.

All participants in the peer review process must observe, or be aware of, relevant policies and standards with respect to the following:

Conduct during Review

The Australian Code for the Responsible Conduct of Research stipulates that participants in peer review should:

- be fair and timely in their review;
- act in confidence and not disclose the content or outcome of any process in which they are involved;
- declare all conflicts of interest, not permit personal prejudice to influence the peer review process and not introduce considerations that are not relevant to the review criteria;
- not take undue or calculated advantage of knowledge obtained during the peer review process;
- ensure that they are informed about, and comply with, the criteria to be applied;
- not agree to participate in peer review outside their area of expertise; and
- give proper consideration to research that challenges or changes accepted ways of thinking.

Confidentiality

Information contained in applications is regarded as confidential unless otherwise indicated. AusHSI staff and committee members must not disclose confidential information, to which they become privy as a result of the exercise of their responsibilities to AusHSI, to any person not authorised to receive such information.

At the direction of the AusHSI Centre Manager, Members the Scientific Review Committee must sign a confidentiality agreement prior to reviewing applications.

Conflict of Interest

AusHSI is committed to ensuring that conflicts of interest (Col) are dealt with consistently, transparently and with rigour. A Col arises in any situation in which a member of the SRC has an interest which may influence, or be perceived to influence, the proper performance of the participant's responsibilities in reviewing grant applications. The perception of a Col is as important as any actual Col.

Col's must be declared at the beginning of the review process. However Col's may be declared at any stage of the review process if new conflicts become apparent.

Members of the SRC must declare a Col in the following instances:

1. they have involvement with the application under review (for example they are a named investigator, have reviewed or given input into the development of application)
2. they have active collaborations with anyone involved with the application
3. they have active working relationships with anyone involved with the application
4. they have social relationships or interests with anyone involved with the application
5. they have teaching or supervisory relationships with anyone involved with the application
6. they have financial relationships or interests with anyone involved with the application
7. they have a personal conflict with anyone involved with the application or the content of the application itself (for example religious, political, or philosophical conflict)

Conflicts or perceived conflicts must be declared at the beginning of each meeting. Conflicts falling under point 1 automatically exclude the member from participating in the review, discussion or ranking of the application in conflict. All other declarations will be assessed by the SRC Chair and other panel members as to whether the member should be excluded from reviewing that application. If there is any doubt or dissent amongst the other committee members the conflicted member will be excluded. It should be remembered that the perception of a Col is as important as any actual Col.

Meetings

Frequency

The Scientific Review Committee will meet at least once for each funding round and more frequently if required. However, much of the work of this Committee and communication can be managed electronically.

Location

Meetings will be held a location most convenient to the majority of members. Meetings may be conducted by teleconference.

Notice of meeting

Unless otherwise agreed, at least 14 days' notice of a meeting is required.

Agenda

The agenda will be prepared by the AusHSI Centre Manager and will be determined by the applications received and the funding round being assessed. Members will be given the opportunity to raise matters of "other business" at the end of each meeting.

Proxies

As members are appointed to the Scientific Review Committee on the basis of their individual expertise proxies are not acceptable. Members who are unable to attend a meeting should notify the Centre Manager and forward written advice regarding their assessment of research proposals and recommendations for funding.

Quorum

All members must have input to recommendations forwarded to the Management Committee regarding research funding, unless they declare a conflict of interest.

Fees

There are no sitting fees provided for Scientific Review Committee members or the Chair.

Appendix 2

Australian Centre for Health Services Innovation (AusHSI)

Implementation Grant

Terms and Conditions

In submitting this grant application, we the Investigators agree that should this research project be funded by AusHSI we will abide by the following terms and conditions in conducting the research:

1. We certify that all the information given in this application is correct, and we will accept the decision of the AusHSI Scientific Review Committee as final.
2. Upon an offer of funding from AusHSI, the recipient's administering organisation will have 30 business days to return a signed funding agreement and an invoice for the amount stipulated in the funding agreement to Queensland University of Technology, or the offer of award may be forfeited.
3. The Funding Agreement is not negotiable, and outlines all conditions of the Implementation Grant, including provisions for the protection and ownership of Intellectual Property and commercialisation interest, in line with the AusHSI Information Privacy and Security Statement, which is available on the AusHSI website.
4. If any of these documents are not provided within 30 business days, the offer of award may lapse, and applicants may re-apply in the next funding round.
5. As the research project will be included in an overall evaluation of the funding scheme, the successful teams are expected to engage with AusHSI before project commencement and through the research process.
6. At least one member of the core research team is expected to attend scheduled AusHSI professional development learning events
7. The research project will be conducted as described in the proposal submitted for review, incorporating reasonable feedback from AusHSI, unless AusHSI is advised otherwise in advance by writing, and approves the changes.
8. The research project will be conducted by those Investigators named in the proposal submitted for review, unless AusHSI is advised otherwise in advance by writing, and approves the changes.
9. All relevant Ethical and site specific Governance approvals will be sought, and followed, in conducting the research. Initial Funding will be contingent on all Ethics and site specific Governance approvals being obtained. Continued funding will be contingent on all Ethics and site specific Governance approvals being adhered to.
10. The research project must be carried out in a manner that complies with all relevant legislation governing research in Australia, including but not limited to: *National Health and Medical Research Council Act 1992*, *National Statement on Ethical Conduct in Human Research (2007)*, *Australian Code for the Responsible Conduct of Research (2007)*, *Note for Guidance on Good Clinical Practice (CPMP/ICH/135/95)*, *Privacy Act 1988*, *Archives Act 1983*, *Public Health Act 2005*, *Transplantation and Anatomy Act 1979*.
11. The Recipient will own any equipment purchased with grant monies. The Recipient will be fully responsible for, and bear all risks and costs relating to the use or disposal of the equipment both during the project and subsequent to the project's completion. If the equipment is sold prior to the end of the research project the Recipient must notify AusHSI who may require a proportion of the funds be returned.
12. The research project must be completed within 12 months of receipt of grant monies, unless a no-cost extension request is submitted to AusHSI in writing prior to the end of this term, and approved.

13. Upon completion of the research project the Recipient shall provide a written report and presentation to AusHSI, in a format as prescribed by AusHSI, regarding the conduct of the research, and the results and findings.
14. A brief summary of the project, including results, will be published on the AusHSI website.
15. AusHSI may request that the Recipient present project results at relevant conferences and forums, the Recipient shall make all reasonable endeavours to honour these requests.