Planning Award for Patient-Oriented Research and Knowledge Translation

Application Form

Note: Patient representatives are part of the review committee ― please ensure writing is in clear, accessible language. See guidelines for details and submit application via email to blapietr@sfu.ca.

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| **Project Title** |
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| **Principal Applicant(s)**For each principal applicant, list name, job title and institutional affiliations (if applicable), and role on team (specify if patient partner, academic researcher, health practitioner, or decision maker).\*Choose one person to serve as the administrative contact and include their contact information: address, phone number and email address. |
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| **Co-Applicants**For each co-applicant, list name, job title and institutional affiliations (if applicable), and role on team (specify if patient partner, academic researcher, health practitioner, or decision maker) |
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| **Administering Institution** List the institution that will administer the award and prepare financial reporting on behalf of the applicants. Include name and contact information of financial officer that will oversee award administration.  |
| **Name of Institution:** **Institutional Official Responsible for Approving Applications****Name of Official:****Signature of Official:****Name of Financial Officer:****Address:****Phone number:****Email address:** |

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| **Overview (1.5 page limit)** |
| **Background**State the problem/issue, including relevant statistics (e.g. prevalence, incidence, cost to health care system, etc.), brief summary of relevant studies and evidence, the evidence gap in the literature (for research planning) or in practice and/or policy (for KT planning). Include the extent of the problem in Canada, and if possible, in BC. **(1 page limit)** |
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| **Objectives**List objectives of the research or knowledge translation planning activity. Include required deliverables for award. Objectives should be specific, measurable and achievable. **(1/4 page limit)** |
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| **Significance and Benefit of Proposed Planning Activity**What will this research or knowledge translation planning activity achieve? Who will it benefit? **(1/4 page limit)** |
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| **Activity Plan (2 page limit)** |
| **Activities**List and describe the planning activities that will be carried out to achieve proposed objectives. Include milestones / target dates. For events such as planning workshops, include a tentative agenda. |
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| **Engagement Strategy**1. Describe what stakeholders will be engaged and the method of engagement.
2. Describe how stakeholders and team members will contribute to the planning activities and how decisions will be made. Refer to the IAP2 levels of engagement (see Table 1 in guidelines).
3. State how the proposed activity is patient-oriented (done in partnership with patients, answers research questions that matter to patients, and aims to improve health care).
4. If some team members and stakeholders are yet to be recruited, describe the recruitment plan.
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| **Budget (2 page limit)****\*\*see list of eligible / ineligible expenses in award guidelines** Provide a list of expenses, including relevant calculations, and total budget requested. (e.g., for staff: hourly rates + benefit rates x number of hours worked = total cost) (e.g., for supplies: cost per unit x # of units = total cost).Use the following section headings: PersonnelServicesSuppliesTravel OtherInclude a justification for each expense.Please note that SPOR recommends that patients be fairly compensated for their contribution. Please consult Rableen Nagra (rableen.nagra@fraserhealth.ca) for information regarding patient compensation. |
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| **Appendices**Attach, in the following order:* References (use APA format)
* Team member descriptions: for each applicant, attach 1 page describing their expertise as pertains to their role in the proposed planning activity. Academic researchers can use a CIHR Project Co-Applicant Common CV.
* Optional: Letters of collaboration (from stakeholders you intend to partner with or include in your engagement activity)
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