**Frequently Asked Questions**

28 October, 2016

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Q1. In section 2 the following is requested:

*“Confirm that letters of support for this research project have been obtained from all participating institutions named in this application above.  Provide a copy of each letter with your application.  If you are unable to provide a copy of any letter of support please provide reasons for this.”*

If the study has been approved by Ethics (which included signatures of all participating members/units) would a copy of this be sufficient or are individual letters essential?

Answer: Signed ethics approval is not sufficient. Letters from all participating institutions named in the application must be provided. These institutions should acknowledge the support that they are expected to provide within the application.

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Q2. Will my specific research topic be suitable?

Answer: The NBA is not pre-screening applications to provide advice on whether or not a specific topic is suitable. The decision to apply or not must be made by the applicant.

Applicants should ensure that their topic is listed as an evidence gap in the PBM Guidelines OR listed as a high priority topic within the Immunoglobulin stream. These topics are listed on page 2 of the Information for Applicants Booklet.

The application should also meet the eligibility requirements outlined on Page 5 of the Information for Applicants Booklet.

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Q3. Are there budget limits for each grant type?

Answer: An indicative amount for each grant type is listed on page 3 of the Information for Applicants booklet. The total funding allocated to R&D Pilot is $2.4M ($1.2M per round). This translates to $400,000 per year for both grant streams (PBM and Immunoglobulin) and all grant types (Project Grants, Seed Grants and Scholarship Research Grants). The number of grants to be awarded for each stream and grant type depends on the number and quality of applications received.

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Q4. Where the application form stipulates confirmation that essential partners and stakeholders named in this application have agreed to be named within the application and have endorsed the application, is written evidence of such confirmation required?

Answer: No. There is no requirement to provide evidence.  This is a tick-box answer. However, if you cannot answer “Yes” then you must provide the reasons that the essential partners or stakeholders named in the application have not agreed to be named or have not endorsed the application.

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Q5. Is written confirmation required from CIs, AIs and other research team members named in the application?

Answer: No. There is no requirement to provide evidence.  This is a tick box answer. However, if you cannot answer “Yes” then you must provide the reasons that the CIs,  AIs or other research team members have not agreed to be named in the application.

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Q6. Are completed and signed conflict of interest forms required as a part of the initial application?

Answer: A conflict of interest form is not required as a part of your initial application due on 10 February 2017. Conflict of interest forms will be required before finalisation of funding agreements with successful applicants.

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Q7. Where can I find the Evidence Gaps for PBM Guidelines Module 6?

Answer: They are available upon request by emailing R&D@blood.gov.au.

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Q8. Do you want bio’s for the Chief Investigator(s) even if they are not being funded?

Answer: While bios for non-funded team members are not required for Round 1, they would be appreciated if provided. Bio’s for CI’s will be required in Round 2.

Q9. Can employees of the Australian Red Cross Blood Service apply for a grant?

Answer: Yes.

Q10. Can grant topics include those funded under the Deed of Agreement between the Australian Red Cross Blood Service and the National Blood Authority on behalf of all Australian governments?

Answer: No. The intent of this funding is for the Blood Service to conduct research where the outcomes are directly translatable into changes at the Blood Service, that is, research to inform and improve the Blood Service’s core activities as funded under the Deed of Agreement, removing risk and adding value, thereby ensuring sufficiency of supply of safe and cost effective blood and blood products. Governments invest approximately 1.6% of the total funding to the Blood Service for research and development.

R&D project outcomes provide evidence to inform decision making and help drive best practice, thereby maximising return on investment.  The Blood Service R&D is underpinned by a robust business plan that is reviewed by the NBA and focuses on five strategic themes as detailed below.  These five themes provide detail to the activities outlined in the Deed of Agreement. All research activities provided under this grant must fall within one of these five themes. Any changes to these themes must be agreed with the NBA.

1. **Donor behaviour**

Donor behaviour R&D applies behavioural and social science theory and methods to describe, explain, predict and influence blood donation behaviour.  The Donor behaviour research theme focuses on recruitment, retention, conversion, flexibility and sustainability of plasma, platelet and whole blood donor panels.

1. **Donor health and wellbeing**

Donor health and wellbeing R&D focuses on prevention and management of donation-related adverse events and on the promotion of long-term donor health.

1. **Product development and storage**

Product development and storage R&D contributes to the strategic direction of the Blood Service by investigating novel ways to manufacture and store blood components.  The goals are to maximise donation potential, create efficiencies and reduce waste, improve component quality and shelf-life, and meet the clinical demand for blood components.

1. **Product safety**

Product safety R&D consists of projects to improve the understanding of the clinical effects of transfused blood and blood products.  This R&D provides information on the risk of transfusion transmitted infections, the underlying causes of adverse transfusion reactions and the characterisation of rare blood groups which may require specialised transfusion support. This area of R&D also focuses on the quantification of risk to ensure the safety of blood components for clinical use.

1. **Product usage**

Product usage R&D focuses on the safety, efficacy and appropriate use of transfused blood components.  Work is conducted in collaboration with other research groups by carrying out human clinical trials, and development, analysis and linkage of clinical registries and other data.

Each year R&D proposals are assessed by the Research Advisory Committee