

Pilot Research Project Funding

Funding decisions:

The proposals will be reviewed by a pilot research grant review committee, consisting of a minimum of three members: two faculty and a clinician, all with substantial research experience.

The criteria contained in Appendix 2 will be used to review the projects.

Administrative considerations:

Upon review, the principal investigator will receive notification of the funding decision. A project that has been funded will need to meet the administrative requirements of Health Research Services at McMaster University, which will include the submission of a completed and signed HRS checklist (obtained at http://fhs.mcmaster.ca/healthresearch/administration_forms.html), a copy of the award letter, a copy of the proposal, a budget, a budget justification, and any applicable ethics approvals. The Department of Family Medicine Research Administration will provide financial administration of the funds.

Reporting requirements:

The successful applicants will be asked to complete a brief progress report after six months and a brief final report or publication copy plus financial report by March 31, 2020.

It will be necessary to return the funds to the Department of Family Medicine if:

- the funds have not been used by February 28, 2020,
- the project account has not been opened by May 31, 2019,
- progress reports have not been submitted, or
- the progress of the project is deemed unsatisfactory based on the proposal submitted.

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Appendix 2: Review Criteria¹ for DFM Pilot Research Project Proposals

BACKGROUND AND RATIONALE (10 points): Are the specific aims/hypothesis for the research project clearly stated? Does the proposal explain why this project should be undertaken? Does it reflect an adequate review of the literature?

SIGNIFICANCE (10 points): Is the project relevant to primary care practice? Is the proposed project original or unique in any respect (new problem or question, new or unique study method or evaluation technique, etc.)? Will the outcome of the project likely help to advance primary care?

METHODS (40 points): Do the proposed methods appropriately address the specific aims/hypotheses? Are the methods well described? Are methodological problems anticipated and alternative approaches proposed?

INVESTIGATORS (10 points): Are the professional (including clinical, educational or research) competencies and previous research experiences of the principal investigator and co-investigators appropriate to carry out the project? Do the previous research experiences, availability of pilot data, or the clarity in presentation of the research methods indicate that the investigators are familiar with the research methods being employed?

FEASIBILITY (10 points): Is the intervention or research activity feasible according to the proposed scope and timeline of the project? Will the target population be available for recruitment and participation in the project within the proposed timeline?

BUDGET (10 points): Does the budget match the staffing resources required (i.e. staff, students) to complete the project? Is the probable outcome worth the time and money invested? Will the grant serve as the total sum for the project or supplement an existing research effort? If the grant will provide only partial support for the project's total budget or any personnel, has the investigator stated specifically how the balance will be funded and provided evidence of its guaranteed availability?

LIKELIHOOD TO CONTRIBUTE TO FUTURE RESEARCH ENDEAVOURS (5 points): Will the project most likely generate findings that can support a future full scale grant application?

PRIORITY AREA (5 points): Does the project focus on the priority area of the call for proposals (i.e. research related to primary health care)?

¹ Review criteria adapted from the TIPPS call for pilot funding, Canadian College of Clinical Pharmacy Research Grant Call for proposals, and CFPC Janus Research Grants