



Government of **Western Australia**
Department of **Health**

WACPCN Cancer Fellowships 2023

Guidelines for Applicants

Closing Date: 1.00pm, Monday 23 May 2022

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1 Description

The Department of Health has established the WACPCN Cancer Fellowships to assist medical practitioners to expand their experience and skills, specifically to a) develop their research capability and facilitate high quality research; and b) to acquire specialised clinical skills that cannot be funded through the usual clinical pathways, that will ultimately lead to improved health outcomes for Western Australian cancer patients.

Funding is provided through 2 streams, to conduct research (Research Stream) or to acquire new specialised skills (Training Stream) over a 12month period.

- 1.1 Fellowships are not intended to be a replacement for existing clinical staff. Hospital duties that are not required to undertake the research plan or training plan will not be covered by the fellowship funding, instead funding for these duties should be covered by the administering institution.
- 1.2 The Training Stream may include on the job training provided within a hospital department under the direction of a Specialist to learn new techniques, skills and/or approaches to screening, diagnosis and clinical cancer care. New techniques, skills and other outcomes of training must be demonstrated with evidence provided via a logbook or audit.
- 1.3 The Research Stream may include basic, clinical, health service and population health research. It may include one discrete project, multiple short projects or a component of a larger long-term research project provided that the component of research proposed has its own discrete outcomes and can be completed within the 12-month period.
 - 1.3.1 NOTE: Projects that are solely quality assurance, clinical audit (including chart review), needs analysis, or literature review are not eligible.
- 1.4 Research must:
 - Address relevant contemporary challenges faced by the WA health system. For example:
 - Public health issues of significance to cancer in WA;
 - Patient-focused healthcare delivery for cancer patients;
 - Health system organisation, financing and access issues that impact cancer care;
 - Emerging health risks for people with cancer; and
 - Cancer care for those living in rural and remote areas and/or for Aboriginal people.
 - Where possible, be linked to priorities of the [WA Cancer Plan 2020-2025](#), the [WA Health Strategic Intent](#), recommendations of the [Sustainable Health Review](#) and other WA reform initiatives.
 - Demonstrate the potential pathway(s) to translation and implementation of research findings into improved health policy and practice.
 - Include relevant multi-disciplinary and cross-institution collaborations.
 - Include engagement with consumers during both the development of the research proposal and for the ongoing project. The [Consumer and Community Health Research Network](#) can be contacted for further assistance. *Note: A useful resource is [Consumer and Community Participation in Health and Medical Research: A practical guide for health and medical research organisations](#) by Annie McKenzie.*

- 1.5 A combination of acquiring new specialised skills (Training Stream) whilst using these to undertake a related research project (Research Stream) is allowed.
- 1.6 The [WACPCN Cancer Fellowships program](#) is administered by the Department of Health's Cancer Network.
- 1.7 Queries regarding the application process should be directed to the Department of Health's Cancer Network. by email to: cancernetwork@health.wa.gov.au.

2 Eligibility

- 2.1 Applicants must be a Medical Practitioner who:
 - a) Is an Australian citizen or permanent resident in Australia for the duration of the Fellowship, noting that pending residency applications must be finalised at time of awarding of the Fellowship.
 - b) Is employed in Western Australia at a public or private hospital.
 - c) Practices in a cancer-related specialty such as cancer screening, surgery, medical oncology, haematology, supportive care, palliative care, paediatric oncology, diagnostic radiology, radiation oncology and/or pathology.
 - d) Intends to undertake a program of research and/or training in Western Australia.
 - e) Has not previously received a WACPCN Cancer Fellowship.
 - f) Is nearing completion (within 12-months) or has recently completed a specialist qualification (within the past 12-months).
 - g) Does not hold a consultant post that is greater than 2 sessions per fortnight at the time of commencing the Fellowship.
 - h) Is able to be released from clinical duties for the period of the Fellowship with the post adequately back-filled (if applicable).
- 2.2 The position is for research and/or training and not for routine clinical work. Clinical work such as after hour's rosters and 'on call' work should be minimal (no more than 8 hours per week) and will not be funded by the Fellowship.
- 2.3 The Fellowship will align with the registrar year and **commence on 6 February 2023 and conclude on 4 February 2024.**
- 2.4 PhD students may apply to undertake a component of their PhD studies through a Research Fellowship however the research idea must be the applicants, the research methodology must meet the rigour set out in these Guidelines and the applicant must be able to demonstrate research outcomes within the 12-month period of the Fellowship.
- 2.5 Recipients of a full time Fellowship cannot be placed in additional positions (i.e. all appointments cannot exceed 1.0 FTE). All other sources of salary must be declared (e.g. PhD student salary).
- 2.6 If a recipient wishes to accept a consultancy post during the term of the Fellowship the following apply:

- The appointment to a consultant post should not exceed 0.2 FTE
- A reduction in FTE may be considered on a case by case basis and requires a request for variation to the agreement to be made to the Department of Health's Cancer Network.
- The fellowship payment will continue to be based upon the base salary rate Classification at the time of fellowship commencement.

2.7 Extensions may be granted upon application if the payment of salary does not cross financial years.

2.8 Fellows will be responsible for coordinating the proposed training/research and ensuring its timely execution including the obtaining of acceptance into training courses, research approvals, data collection, analysis and reporting within the 12-month period of the Fellowship.

2.9 Applicants are required to outline how the expertise gained through the Fellowship will be used within Western Australia.

3 Supervisor

3.1 Applicants must nominate a Supervisor who will be responsible for the training and/or research performance of the Fellow.

3.2 Training Stream: The Supervisor must be a suitably qualified consultant who is skilled in the area of interest and who has capacity to train and supervise the Fellow during the term of the Fellowship.

3.3 Research Stream: The Supervisor must be a senior/established researcher who rigorously reviews the proposal providing expert advice on the design and statistical analyses as well as providing guidance and ongoing support during the term of the Fellowship.

4 Application Instructions

4.1 All required sign-offs and approvals must be provided at the time of submission. These will include the signing of relevant sections by the applicant; the supervisor; Heads of Departments (or equivalent) that are contributing resources and/or access to patients and data relevant to the work; Business Manager; and the administering institutions Research Administration Officer (or their equivalent).

4.2 Electronic signatures are acceptable. The onus is on the applicant to ensure permissions to use electronic signatures have been obtained.

4.3 Applications must be in accordance with the conditions described in these Guidelines. Applications that are not consistent with these Guidelines will not be considered.

4.4 The *WACPCN Cancer Fellowships 2023 Application Form* must be used and is available at the [WACPCN Cancer Fellowships](#) website.

4.5 Applications must be submitted by the due date through [MedJobsWA](#) (Reference No. 11330). Late applications will not be accepted.

5 Funding

- 5.1 The Fellowship is usually granted as 1.0 full time equivalent post. However, part time fellowships at no less than 0.5 FTE will be considered.
- 5.2 Funding is provided for 12-months of salary only, to the nominated administering institution. The administering institution should be where the Fellow is primarily employed. Administering institutions can include either a public or private hospital, or a WA Health entity (i.e PathWest).
- 5.3 The Fellowship payment will be equivalent to:
 - a) Base salary rate as per the [WA Health System Medical Practitioners AMA Industrial Agreement 2016](#); Classification and Increment point (Registrar Year 1 to Senior Registrar Year 2 dependent on experience) at the time of fellowship commencement;
 - b) Professional Development allowance as per the [WA Health System Medical Practitioners AMA Industrial Agreement 2016](#); Classification and Increment point (Registrar Year 1 to Senior Registrar Year 2 dependent on experience) at the time of fellowship commencement; and
 - c) Salary On-costs calculated from the combined salary base rate and professional development allowance, as per the WA Health Financial Management Manual [Section 521: On-Cost Charges](#).
- 5.4 Funding is not provided for laboratory consumables or purchase of equipment.
- 5.5 A research project may receive additional funds from other sources to meet its budget requirements.
- 5.6 Funding is only made available for the scope of work described in the application. The Department of Health is not obliged to underwrite any recurrent or capital costs beyond the term of the Fellowship.
- 5.7 Funding will be released in two instalments. The first instalment will be released after awarding of the fellowship and the second instalment will be released following receipt of a Progress Report that outlines the progress achieved to date.
- 5.8 Funds shall revert to, or be recoverable by the Department of Health in instances where:
 - The Fellowship is terminated by the Department of Health, Cancer Network as a result of insufficient progress being made at the time of the Progress Report.
 - Funds are not fully spent at the conclusion of the 12-month period, unless an extension has been agreed.
 - Funds are used for purposes other than those for which they were awarded.
 - A variation to reduce FTE is executed, unless an extension is agreed.
- 5.9 Fellowship funding is offered subject to the availability of funds, which could be varied in the event of unforeseen circumstances.
- 5.10 Fellowship funds can be used for annual leave and long service leave entitlements that accrue during the Fellowship term. However, severance and termination payments and extended leave payments (leave entitlements accrued in non-Fellowship roles) are not supported and must not be paid for with Fellowship funding.
- 5.11 Fellowship expenditure is subject to the [Financial Management Act 2006 \(WA\)](#), and may be subject to audit by the Office of the Auditor General or their representative and/or the Department of Health.

6 Selection and Assessment

- 6.1 Fellowships will be awarded on merit in open competition, based on a process of assessment and selection. Assessment shall be conducted by a panel comprising:
- Department of Health, Medical Advisor, Cancer.
 - North Metropolitan Health Service, Director of Nursing – WA Cancer and Palliative Care Network Clinical Implementation Unit
 - Senior Department of Health staff.
 - Experienced WA cancer researchers, academics and clinicians.
 - Health consumer representative(s).
- 6.2 The composition of the panel may change from year to year according to availability of reviewers.
- 6.3 Conflicts of interest that arise will be treated in accordance with the [WA Health Managing Conflict of Interest Policy and Guidelines](#).
- 6.4 The Department of Health’s Cancer Network reserves the right to request further information from applicants at any stage of the review process.
- 6.5 Applications will be assessed based on their ability to address the eligibility and assessment criteria as set out below:

Assessment Criteria – Research Stream	Points
1) Significance and potential benefit of the proposed application to cancer control in WA including: <ul style="list-style-type: none"> - <i>potential for research findings to be implemented and lead to health gains for consumers and/or health system benefits.</i> 	15
2) <i>Engagement and collaboration including:</i> <ul style="list-style-type: none"> - <i>collaboration with consumer, policy, operational and other groups as appropriate</i> - <i>involvement of consumers in appropriate parts of the research plan/study design;</i> 	10
3) Quality of research plan, including: <ul style="list-style-type: none"> - <i>objective measurement of outcomes;</i> - <i>achievable timeline;</i> - <i>consideration of existing evidence-base;</i> 	20
4) Capacity based on: <ul style="list-style-type: none"> - <i>expertise and availability of the Fellow to undertake the training/research, including track record;</i> - <i>role, expertise and availability of the supervisor and time allocated to supervise the Fellow; and</i> - <i>potential for new capacity and improved cancer care to arise from the work</i> 	15

Assessment Criteria – Training Stream	Points
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<p>1) Significance and potential benefit of the proposed application to cancer control in WA including:</p> <ul style="list-style-type: none"> - <i>degree to which the training addresses an unmet cancer workforce need in WA</i> - <i>potential for training to contribute to meeting the needs of consumers and cancer services in WA beyond the life of the fellowship.</i> 	15
<p>2) Quality of training plan, including:</p> <ul style="list-style-type: none"> - <i>suitability of the proposed training program to achieve the desired expertise</i> - <i>appropriateness of the proposed training methodology;</i> 	20
<p>3) Capacity based on:</p> <ul style="list-style-type: none"> - <i>expertise and availability of the Fellow to undertake the training/research, including track record;</i> - <i>role, expertise and availability of the supervisor and time allocated to supervise the Fellow; and</i> - <i>potential for new capacity and improved cancer care to arise from the work</i> 	15

7 Key Dates

7.1 The following dates are provided as a guide only and may be subject to change.

Key Activity	Estimated End Date
1. Applications close	1:00pm, Monday 23 May 2022
2. Review concludes	July 2022
3. Notification	August 2022

8 Approvals and Agreements

8.1 The onus is on the Health Service/hospital to appoint successful candidates to positions at their site for the 12-month period of the Fellowship.

8.2 The time required to obtain acceptance into registered training courses, research approvals and to sign agreements should be built into the Fellowship's milestones and mapped against the project's timeline.

Registered Training Courses

8.3 Where it is proposed to undertake a registered training course provided through an educational organisation, acceptance into the course must be obtained before the commencement of the Fellowship year.

Research Approvals

8.4 Approvals must be obtained before the commencement of the research project. Approvals that may be applicable, include:

- 1) Research Governance approval from the administering institution and each site participating in the research. For WA health system sites this will be through a Site Specific Assessment (SSA).

- 2) Human Research Ethics Committee (HREC) approval for each site involved in the research, this may be reciprocal approval for secondary sites. For WA health system sites this must be from a WA health service provider HREC.

Depending on the type of project, additional HREC approvals may be required from:

- Department of Health WA HREC (for Department of Health Data Collections and Data linkage);
- Coronial Ethics Committee (WA); and/or
- WA Aboriginal Health Ethics Committee.

- 3) Other approvals may be relevant, such as:

- Data Custodians;
- The Office of the Gene Technology Regulator;
- Institutional Bio-safety Committee;
- NHMRC Embryo Research Licensing Committee;
- NHMRC Human Genetics Advisory Committee;
- Radiation Safety Officer (i.e. Dosimetry Report);
- Radiological Council;
- Reproductive Technology Council; and/or
- Therapeutic Goods Administration.

8.5 Research Governance and HREC approvals for WA health system sites are obtained through the [Research Governance Service](#).

8.6 It should be noted that the timelines for approvals can be lengthy and therefore should be taken into account in the project's timeline.

Data Linkage

8.7 A request for linked data from the 'WA Data Linkage System' requires the research team to demonstrate adequate expertise to analyse the requested data. Where linked data is required, [Data Linkage Western Australia](#) should be contacted to obtain both i) a preliminary quote; and ii) an estimate of time required to obtain the data. All requests should state that the data request is associated with a WACPCN Cancer Fellowship, which requires the research to be completed within a 12-month period. The time-estimate should be built into the project's milestones and mapped against the timeline.

Intellectual Property

8.8 Intellectual Property (IP) that arises out of the project will generally vest in the Fellows administering institution. It is the administering institution's responsibility to ensure that appropriate agreements are in place.

8.9 Intellectual Property that is produced in conjunction with a host research group or other agency shall be consistent with the [Western Australian Government Intellectual Property Policy 2015](#) or that policy's successor.

9 Reporting

9.1 The Fellow will be responsible for coordinating the training requirements and/or proposed research and ensuring its timely execution including the obtaining of ethics and governance approvals, data collection, analysis and reporting within the 12-month period of the Fellowship.

- 9.2 Supervisors will be required to verify and co-sign reports.
- 9.3 The Department of Health Cancer Network will provide Fellows with the relevant reporting templates as required.

Progress Report

- 9.4 A report outlining progress made against the milestones listed in the application is required mid-project and prior to the second instalment of funds being released. The Department reserves the right to terminate and/or withdraw funding for a project where insufficient progress has been made.

Final Report

- 9.5 A final report detailing the outcomes achieved through the Fellowship is to be submitted to the Department of Health Cancer Network at the project’s conclusion.

Financial Acquittal

- 9.6 A financial acquittal statement outlining the expenditure of the Fellowship funds must be submitted at the project’s conclusion. The Financial acquittal statement must be certified by an authorised finance officer based at the administering institution.

Report	Due Date
1. Progress Report	Friday, 9 June 2023
2. Final Report	Friday, 22 March 2024
3. Financial Acquittal Statement	Friday, 22 March 2024

10 Acknowledgement

- 10.1 Full acknowledgement of the Department of Health’s funding for the Fellowship must be made as opportunities arise in publications, conference presentations, public discussion, press statements etc.
- 10.2 The suggested citation is:
“This research/activity/project was/is funded by the Department of Health WA through the WA Cancer and Palliative Care Network (WACPCN) Cancer Fellowships program”.

11 Publications and Media

- 11.1 Fellows are requested to forward copies of publications resulting from the funded work to the Department of Health Cancer Network.
- 11.2 In order to maximise knowledge exchange researchers are asked to consider the *NHMRC’s Publication and dissemination of research: a guide supporting the Australian Code for the Responsible Conduct of Research*, which can be downloaded from the [Australian Code for the Responsible Conduct of Research](#) page.

- 11.3 The Department of Health will publicly announce the recipients of the Fellowship round and requests that all other parties withhold announcement/media coverage until after this time. The Department of Health Cancer Network will advise once this has occurred.
- 11.4 Recipients are expected to present their training outcomes/research at one of the WA Clinical Oncology Group (WACOG) Education Series events in early 2023. Fellows will be contacted closer to the time with details.

12 Complaints

- 12.1 Applicants who feel that their interests have been adversely affected by a decision made by the Department of Health may lodge a complaint. Complaints can only be considered when they refer to the administrative process and not to the actual outcome of a particular decision. Complaints must be submitted in writing to:

Executive Director, Clinical Leadership and Reform
Clinical Excellence Division, Department of Health
PO Box 8172
Perth Business Centre WA 6849

13 Confidentiality

- 13.1 Lay summaries and Fellow statements provided on project applications or reports may be used for publicity purposes as stated on the relevant templates.
- 13.2 All other information provided in applications and reports will be maintained confidentially by the Department of Health and the selection panel. If requests are received by the Department to make public any aspect of funding, the authorisation of the Fellow will be sought.
- 13.3 Applicants should be aware that the Department is subject to the Western Australian Freedom of Information Act 1992. This provides a general right of access to records held by State Government agencies. In addition, information pertaining to the receipt of State Government financial assistance is tabled in the Parliament of Western Australia.

14 Evaluation

- 14.1 On occasion, the Department of Health will undertake an evaluation of the WACPCN Cancer Fellowship program for which all past recipients may be asked to participate.
- 14.2 The objectives of evaluations will focus on the contribution to capacity building, knowledge transfer, publications, conduct of further research, obtainment of further research funding, roll-out of skills/research findings to other areas and resulting cost-savings and/or efficiencies for the WA health system.

This document can be made available in alternative formats on request for a person with disability.

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