2023 Convening & Collaborating ($C^2$) Competition

GUIDELINES

DEADLINE

Application Deadline: May 15, 2023, 4:30 p.m. PT
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Help with your Application

For questions regarding the application and submission process, please contact:

Akhil Huggi
Research Competitions Coordinator
c2@healthresearchbc.ca

For information about the Michael Smith Health Research BC ApplyNet system or help with login information, please contact:

Michael Smith Health Research BC Help Desk
helpdesk@healthresearchbc.ca
604.714.6609

1. Introduction

Michael Smith Health Research BC (Health Research BC) is British Columbia’s health research agency. We are working towards a future where BC is recognized worldwide for its vibrant, coherent, inclusive, and globally competitive health research system, which improves the health of British Columbians, the health system, and the economy. Our ambition is to inspire and connect curious, creative and passionate minds to drive discovery and innovation for better health and health care. We support the people who do and use health research and we strengthen the system in which they work. Learn more at www.healthresearchbc.ca.

Delivering for BC in a changing context
As BC’s health research agency, we are committed to helping develop, support, and retain the province’s research talent base. The COVID-19 pandemic has created rapid change and uncertainty within BC’s health research community.

Health Research BC continues to reach out to stakeholders in BC’s health research system to better understand current needs. Using our program learning and improvement cycle, we continue to grow and evolve our health research funding programs to ensure they meet the needs of BC’s health research and life sciences community. Beginning with the 2021 C^2 competition, Health Research BC implemented changes to our application and review process to account for the impact of the pandemic on research outputs and activities.

Pathway to impact (knowledge translation)
At Health Research BC we use the term “knowledge translation (KT)” to describe the broad range of activities that encourage and enable evidence use in practice, policy and further research. These activities include the synthesis, dissemination, exchange and implementation of evidence. KT science is the study of these activities, including implementation science. These important enabling activities, and the research of these activities, form the “pathway to impact” for health research evidence.

Health Research BC offers funding opportunities designed to foster knowledge translation and support the use of research evidence. The Convening & Collaborating (C^2) and Reach Programs help health researchers and research users move research evidence further along a pathway to impact.
If you would like to assess your KT skills, learn more about KT competencies and find resources on incorporating a pathway to impact into your application, please see KT Pathways. For additional resources on KT in health research, please visit the Health Research BC KT page or contact the Health Research BC KT team at KT@healthresearchbc.ca.

**Purpose**

The Convening & Collaborating (C²) Program is designed to bring together researchers¹ and research users² to co-develop research to increase the likelihood that the research findings will be relevant and directly impact patients and a diverse range of stakeholders.

*Note:* If the KT activity you are seeking funding for focuses on the dissemination of research evidence with research users (i.e. end of grant KT activities), you should apply to Health Research BC’s Reach Program.

**Objectives**

The objectives of the C² Program are to:

- Support meaningful collaboration and knowledge exchange between health researchers and research users.
- Support the co-development of research questions and processes.
- Build KT capacity, experience and skills in BC’s research and health professional trainees.

Projects might include, but are not limited to developing a research agenda, building a new partnership, or evaluating a peer support initiative.

**2. Key Competition Dates**

<table>
<thead>
<tr>
<th>Action</th>
<th>Target Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Competition launch</td>
<td>Week of April 3, 2023</td>
</tr>
<tr>
<td>Application deadline (applicant)</td>
<td>May 15, 2023, 4:30 p.m. PT</td>
</tr>
<tr>
<td>Application deadline (host institution)</td>
<td>May 23, 2023, 4:30 p.m. PT</td>
</tr>
<tr>
<td>Anticipated notice of funding decision</td>
<td>August 2023</td>
</tr>
<tr>
<td>Anticipated start of funding</td>
<td>October 1, 2023</td>
</tr>
</tbody>
</table>

¹ A researcher is an individual who is eligible to hold research operating funds at the time of the award start date.
² Research users are the target audience(s) of research evidence. Research users are experts on their needs, environment and local context. Including research users as equal members of the research team will ideally result in more relevant research evidence and an increased likelihood of its use for the purpose of making informed decisions about health policies, programs and/or practices. A research user may include, but is not limited to, other researchers, policy makers, health care practitioners, decision makers, health care administrators, educators, patient user group, or health charity, and the public. [Adapted from Canadian Institutes of Health Research’s ‘Guide to Knowledge Translation Planning at CIHR: Integrated and End-of-Grant Approaches’. www.cihr-irsc.gc.ca/e/45321.html [Accessed February, 2023].]
3. **Award Amount and Duration**

The maximum amount for each C² award is **$15,000**. Beginning with the 2022 C² competition, Health Research BC extended the award duration to **18 months** (see eligibility requirements for additional details). A complete list and description of allowable expenses can be found in **Appendix A**.

Awards will be distributed across the Reach and C² Programs proportional to the number of applications received for each program. Over the past three years (2020 – 2022), we have awarded an average of 29 Reach and C² awards each year, for an average success rate of 54 percent. Additional funds contributed by partners (see Section 8) may increase the number of awards we are able to offer.

4. **Eligibility Requirements**

   **Team**

The team may be new or pre-existing and must include the following members:

1. Researcher co-lead³ who will act as the Primary Applicant. The researcher co-lead must be based in BC and affiliated with an **eligible BC host institution**.

2. Research user co-lead⁴ who will provide expertise on the needs, environment and local context of the target audience. **Note:** Government of British Columbia employees (individuals directly employed by provincial ministries) are not eligible to apply as a researcher or research user co-lead, but may be named as a team member. Employees of organizations funded directly by the Government of British Columbia, such as health authorities or school districts, are eligible to serve as co-leads. Health Research BC employees including Clinical Trials BC, knowledge translation, Research Ethics BC, BC SUPPORT Unit, are not eligible to apply and may not be listed as team members. Potential applicants and team members who may be impacted by this policy should contact Akhil Huggi (c2@healthresearchbc.ca) to clarify their eligibility prior to completing the application form.

3. At least one research or health professional trainee. The trainee may be an undergraduate or graduate student, postdoctoral or clinical fellow, or equivalent engaged in a formal training or education program. The trainee may be based inside or outside of BC. If the trainee is based outside of BC, they must be studying at a BC university or employed by a BC-based organization.

All other personnel named in the application are designated as team members.

Applicants can only serve as the primary applicant on one application, but can be included in up to two applications total per competition.

If appropriate, the individual in the role of Research/Health Professional Trainee may also fulfill the role of research user co-lead.

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³ See footnote 1.
⁴ See footnote 2.
Activities and Activity Timelines

1. Activities starting or taking place before the funding start date are not eligible for funding through this opportunity.

2. Activities must be planned to occur within 12 months of the funding start date (October 1, 2023). To reduce administrative burden on award recipients, should delays occur, funds may be spent up to 18 months after the start date without the need to request a no-cost extension. Recipients must request a no-cost extension if delays require funds to be spent more than 18 months after the start date.

3. Activities or events that are part of an annual series (e.g. workshop, public engagement event, etc.) may only be funded once through the C² Program, if eligible. Any collaborative events, or activities funded by a C² award are not eligible for additional Health Research BC support, i.e. sponsorship.

Health Research BC reserves the right to declare applications ineligible.

Additional Contributions

Health Research BC encourages applicants, when appropriate, to engage other organizations and stakeholders to:

- Contribute to the co-development and implementation of research programs, projects, and/or activities between researchers and research users; and/or
- Enhance the availability of funding for the proposed co-development of research programs, projects, and/or activities through additional cash or in-kind\(^5\) support.

Any additional in-kind or cash support should be indicated in the budget section of the application, and appropriately captured in a signed letter of support outlining the nature and amount of the contribution.

5. Indigenous Health Research

Health Research BC is on a learning journey towards enacting our organizational commitments to Indigenous cultural safety and Indigenous health research, grounded in respect for Indigenous self-determination and awareness of reconciliation as an active and ongoing process. Our organizational commitments to Indigenous cultural safety and Indigenous health research build on relationships nurtured and work with Indigenous partners. Key among these relationships are the BC Network Environment for Indigenous Health Research (BC NEIHR) and the First Nations Health Authority.

We recognize that we are still learning how to respectfully support reconciliation efforts and develop meaningful relationships and partnerships with Indigenous people in British Columbia. Our work continues to be guided by our Indigenous partners.

We expect applicants to approach their research and knowledge translation activities with culturally safe practices that demonstrate humility, integrity, accountability and respect for Indigenous self-

\(^5\) Cash-equivalent goods or services that represent an incremental expense that the partner would not normally incur, and which would have to be purchased by award funds if not donated. This can include research and technical staff, providing direction and direct participation in the project, or the provision of access to specialized and/or proprietary equipment, tools or technology.
determination. Applicants must comply with the ethical and research policies outlined in Chapter 9: Research Involving the First Nations, Inuit and Métis Peoples of Canada of the Tri-Council Policy Statement: Ethical Conduct for Research Involving Humans (2022). When appropriate, applicants must also describe their data management plan in accordance with the First Nations principles of OCAP®: ownership, control, access and possession.

Additional resources:

- First Nations Health Authority
- Health Research BC’s Indigenous Research Ethics Resources

6. Integrating Equity, Diversity and Inclusion (EDI) Considerations in Research

Health Research BC has a strategic commitment to addressing systemic inequities in the health research system. Diversity in research is important to cultivating talent and promoting inclusive excellence, which in turn drives discovery and helps build a more equitable health research system.

Data from Canada and around the world show a lack of diversity in the research system, as well as systemic inequities in access to research jobs, funding and other resources. These inequities disproportionately and negatively affect groups who have been historically underrepresented among researchers and in academia, including those who are Indigenous, Black and people of colour, LGBTQ2S+ people and people with disabilities.

As BC’s health research agency, we have an important role in leading and supporting efforts to address systemic racism and other forms of bias and discrimination that create and exacerbate inequities in the health research system. We are doing this in a few ways including continuing to seek ways to improve the design and implementation of our funding programs and peer review processes, requiring all Health Research BC’s peer reviewers to participate in unconscious bias training and being a strategic partner on an international consortium undertaking empirical research studies to advance evidence-informed research funding. We are in a continuous mode of listening and learning with our stakeholders and international and national partners.

**New for 2023:** A section in the application form will be provided for applicants to describe how they meaningfully and appropriately account for EDI in their KT activities and teams. Health Research BC recognizes that meaningful approaches to support EDI in research and KT will vary depending on the research topic, discipline, audience, etc.

Where guidance is needed, applicants are encouraged to consult appropriate resources, access additional training and professional development, and seek input from more experienced mentors. Some resources include:

- NSERC Guide on Integrating Equity, Diversity and Inclusion Considerations in Research
- SSHRC Guide to Addressing Equity, Diversity and Inclusion in Partnership Grant Applications
7. **Partnerships**

Health Research BC partners with other funders to build capacity and support research in priority areas. Partnerships increase the total number of awards funded. Partnered awards have the added benefit of offering researchers the opportunity to develop relationships with partners and their community of stakeholders. Details regarding potential partners will be available on our website and Health Research BC ApplyNet, (our online application portal) in the coming weeks.

8. **How to Apply**

The application process for the Health Research BC Convening & Collaborating (C²) award is comprised of two steps:

1. Eligibility quiz for the C² Program
2. Online application:
   - Deadline date: May 15, 2023
   - Reminder: As Health Research BC is now a signatory of the Declaration on Research Assessment (DORA), we no longer allow the use of journal-based metrics, such as Journal Impact Factor, as surrogate measures of research quality. In keeping with best practices for responsible research assessment, we will no longer allow the use of article citation counts or H-index. Please do not include Journal Impact Factors, article citation counts or H-index in your application.
   - Includes:
     - Research user co-lead form
     - Department head sign-off form
     - Team quality and engagement section
     - Quality of proposed work section (including an upload of your workplan and timeline)
     - Potential co-funding partners section
     - Letter(s) of support (upload, if applicable)

**New for 2023: letters of support** – Health Research BC cannot accept letters of support from any department within Health Research BC (including Clinical Trials BC, knowledge translation, Research Ethics BC and BC SUPPORT Unit).

To complete your application, sign-in or create a Health Research BC ApplyNet account and follow the instructions in the online application form. Ensure that your application is complete and submitted by the application deadline. Incomplete or late applications cannot be considered. Additional information on how to use the Health Research BC ApplyNet online platform can be found here.

**Note:** The primary applicant, i.e. the one who initiates and submits the full application, is designated as a researcher co-lead.

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6 See Bibliometrics: The Leiden Manifesto for research metrics.

7 A signed letter of support is required for partners secured by the applicant who provide cash or in-kind contributions in support of the collaborating and convening activities described in the application. Letters of support must include how the partner is involved in the proposed work, describe the potential benefits the partner may derive from participating in the proposed work and detail any cash or in-kind contributions.
Submission Requirements

- All steps of the application must be submitted using Health Research BC ApplyNet, our online application submission system.
- All documents uploaded onto Health Research BC ApplyNet must be in pdf format.
- Applicants will receive a pdf copy of their full application via email following submission.
- It is the primary applicant’s responsibility to review the pdf copy of the application prior to submission to ensure that all data entered are complete and accurate. Once an application is submitted, it cannot be modified in any way.

Applicants applying to Health Research BC for the first time must register on Health Research BC ApplyNet and create a system account email and password.

9. Review Process

C² award applications will be screened for eligibility by Health Research BC staff. Eligible applications will be reviewed and funding recommendations will be provided by an external review panel consisting of researchers and knowledge translation specialists.

Applications will be evaluated via a process that incorporates six principles of peer review: integrity, accountability, transparency, balance, confidentiality, and impartiality. For more details, please see the overview of Health Research BC’s peer review process.

Health Research BC recognizes that each BC region brings strengths to the provincial health research system and that there is variation in the infrastructure, resources, and supports available to health researchers at different institutions. Our commitment to rigorous peer review includes ensuring applications from across BC are reviewed fairly and equitably.

The information presented in the Evaluation Criteria and Rating Scale sections below will be used for the peer review process. All applications will be assessed against a defined set of criteria in the following categories: 1) team quality and engagement, and 2) quality of the proposed work. To be considered for funding, the application must receive a minimum score of 3.5.

Evaluation Criteria

All applications are assessed against the criteria and weightings below. A full description of the evaluation criteria can be found on our website. It is highly recommended that applicants refer to the evaluation criteria when completing their applications.

<table>
<thead>
<tr>
<th>Criterion</th>
<th>Weighting</th>
</tr>
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<tbody>
<tr>
<td>Quality of proposed work</td>
<td>50%</td>
</tr>
<tr>
<td>Team quality and engagement</td>
<td>50%</td>
</tr>
</tbody>
</table>
Rating Scale

<table>
<thead>
<tr>
<th>Descriptor</th>
<th>Range</th>
<th>Outcome</th>
</tr>
</thead>
<tbody>
<tr>
<td>Outstanding</td>
<td>4.5 – 4.9</td>
<td>May be funded</td>
</tr>
<tr>
<td>Excellent</td>
<td>4.0 – 4.4</td>
<td></td>
</tr>
<tr>
<td>Very good</td>
<td>3.5 – 3.9</td>
<td></td>
</tr>
<tr>
<td>Fair</td>
<td>3.0 – 3.4</td>
<td>Not fundable</td>
</tr>
<tr>
<td>Less than adequate</td>
<td>0 – 2.9</td>
<td></td>
</tr>
</tbody>
</table>

Funding Decisions

Following peer review, the highest rated applications will be identified. Applicants are notified of the outcome of the peer review process after peer review and the subsequent approval of the results. There is no appeal process.

Applicants will receive notification of the funding decisions and the reviewers’ comments. A list of successful applicants is published on Health Research BC’s website.

10. Award Start Date

Funding for C² awards begins October 1, 2023. Successful applicants must confirm their acceptance of the award within the stipulated time indicated in the award notification package. Deferral of the award is not permitted.

11. Reporting Requirements

Award recipients are required to submit a final report 30 days after the award end date. Health Research BC will provide reporting information and/or materials for these purposes. The final report may include the following:

- Details on the main activities that were supported by the award.
- Description of the involvement of trainees and research users with your team.
- Activity-specific outcomes such as a grant application or post-activity working paper, media release, workshop materials, etc.
- Description of any expected or realized benefits to the BC health system and/or the health British Columbians as a result of activities funded by the award.

A financial statement of expenditures, signed by the award co-leads and an authorized financial officer of the host institution, is required within **three months** following the award end date. Any unexpended funds must be returned to Health Research BC.

Health Research BC reserves the right to contact award recipients up to five years after the award end date to determine the outcomes and/or impacts of the C² award.
Additionally, to inform evaluation and continued improvement of our funding programs, award recipients will be invited to provide feedback to Health Research BC staff to determine areas of improvement for this funding opportunity.

**Note:** Researchers may not submit an application for any Health Research funding program until all outstanding award information (e.g. final report, financial statement, etc.) requested by Health Research BC for previous grants and awards has been received.
Appendix A – Eligible Expenses

Applicants must provide justification for the amount of funds being requested, including a breakdown of estimated costs for eligible expenses, within the budget section of the online application. Eligible costs must be incurred within the funding period. Health Research BC will not support any expenses incurred prior to, or after completion of, the funding period. The majority of expenses must be incurred within BC.

This funding opportunity will support the following costs that are reasonably and properly incurred in the development and implementation of events, activities, and/or tools that support meaningful collaboration and knowledge sharing between health researchers and research users.

**Human Resources**

**Eligible Expenses**

- Honoraria for guest speakers and/or key meeting participants, up to maximum value of C$500 per individual.
- Fees for meeting facilitators/ knowledge brokers, or similar.
- Partial or full salary support for research users' participation as a team member or key meeting participant, including buy-out/release time from work.
- Cost of caregiving services (e.g. childcare) to allow research users or key meeting participants to participate in virtual meetings.
- The Tri-Council Policy Statement 2 (TCPS 2 - Chapter 9 Research Involving the First Nations, Inuit and Métis Peoples of Canada) recognizes the importance of respecting the cultures and traditions of Indigenous Peoples. To facilitate culturally safe KT activities, eligible expenses may include (but are not limited to):
  - Costs related to Indigenous community mobilization and engagement, including culturally relevant promotional items such as, tobacco, cloth, feasting and gift giving for honoring ceremonies, and cash reimbursements (in a method acceptable to the individual or community being reimbursed) to compensate community participation; and
  - Contracts and/or consultant fees for knowledge translation and communication activities for Indigenous Elders, community members, and Indigenous Knowledge Holders involved in activities related to the Indigenous community.
- Research/health professional trainees and staff may be paid to complete services directly related to and integral to the success of the proposed activities.

**Non-Eligible Expenses**

- Partial or full salary support for researchers including buy-out/release time from work, teaching, clinical or administrative duties.
Services and Supplies

Eligible Expenses

- Costs for the purchase or maintenance of equipment required to bring people together for the purposes of collaborating, networking and knowledge exchange (e.g. tablets, cell phones, etc.)
- Direct costs associated with bringing people together for the purposes of collaborating, networking and knowledge exchange, including planning, co-ordination, translation, and/or outreach activities (e.g. teleconference call, internet conferencing, etc.).
- Meeting rooms and associated meeting costs (e.g. audio-visual equipment fees, videoconference fees, registration services, etc.).
- Office costs including supplies, communications, stationery, photocopying, software and network or internet access directly related to the proposed work.
- Hospitality costs (non-alcoholic refreshments and/or meals).

Non-Eligible Expenses

- Costs associated with developing a new intervention or to pay the cost of interventions or their scale-up.
- Costs associated with pilot research studies or research operating funds (e.g. primary research or primary data collection including surveys).
- Other expenses already funded by another grant (Health Research BC-funded or otherwise), e.g. publication costs, open access fees, etc.
- Purchase of alcohol.

Travel

Eligible Expenses

- Travel to attend collaborative trips and similar meetings integral to the activity, program or meeting(s) proposed in the C² application.
- Travel and accommodation for invited guests if integral to the activity, program or meeting(s) proposed in the C² application.

Note: Convening and collaboration activities should be planned in accordance with public health guidelines. As public health guidelines may change over the course of the pandemic, applicants are encouraged to develop mitigation and/or contingency plans with this in mind (e.g. consider a back-up plan to host a virtual meeting if travel is not possible.).

When travelling by air, individuals must obtain the most economical airfare which, in most cases, is economy class. First or business class air travel may only be authorized in specific circumstances where warranted (such as where the in-flight travel time exceeds five hours), and if allowed by the host institution’s financial policies and approved by Health Research BC and the appropriate financial officer at the host institution.
Non-Eligible Expenses

- Travel for candidates under recruitment consideration, or for relocation purposes
- Travel to attend conferences, workshops, symposia, congresses, etc. not directly related to the activity, program or meeting(s) proposed in the C^2 application
- Reimbursement for airfare purchased with personal frequent flyer points
- Reimbursement for costs resulting from a stopover requested for reasons unrelated to the primary purpose of travel

All items not specified should be deemed as non-eligible expenses unless prior approval from Health Research BC is received. If the applicant can demonstrate the added value and make a case for an item identified as an ineligible expense, then Health Research BC will evaluate the merit of the argument. **Such a case must be made before the expense is incurred.**
Appendix B – Frequently Asked Questions

General Questions about C², Reach, and Knowledge Translation

What is the difference between the Health Research BC Convening & Collaborating (C²) and Reach awards?

Although the C² and Reach Programs both fund knowledge translation (KT) activities related to health research, each program supports distinct KT activities at different points in the research process.

The C² Program is designed to bring researchers and research users together to co-develop research; for the purpose of this award, this is defined as KT activities that occur earlier in or throughout the research process, i.e. integrated KT, rather than at the end of the research process.

In contrast, the Reach Program is designed to support the dissemination of research outputs within the context of an established body of knowledge; for the purpose of this award, this is defined as KT activities that occur near the end of the research process, i.e. end-of-grant KT.

Applicants should take the time to consider which funding opportunity is most relevant to their proposed activity, event or tool. It is the responsibility of the applicant to ensure the content of their C² or Reach application aligns with the objectives of that program.

Why does Health Research BC refer to knowledge translation (KT) activities as “pathway to impact”?

Health Research BC defines knowledge translation as “the broad range of activities and initiatives meant to improve the use of health research evidence in health planning, practice, policy and further research.” The set of KT activities undertaken for a research project or program, or the study of those KT activities themselves, is the “pathway to impact” for the use of health research evidence. That is, those KT activities, and/or the study of those KT activities, are unique research-study specific steps embedded in the design, conduct and use of research that aim to increase the impact of the evidence generated in that study. KT activities may include synthesis, dissemination, knowledge exchange, and/or implementation of research evidence, and/or the science of evidence synthesis, the science of knowledge exchange, dissemination science and/or implementation science.

What is research evidence?

Research evidence involves the explicit documentation of methods, peer review and external scrutiny that helps provide a means to judge the trustworthiness of findings, and offers the potential to assess the validity of one claim compared to another. For example, this may include research articles, case studies, systematic reviews, meta-analysis, etc.

What does “uptake” of research evidence mean?

Research uptake refers to the processes through which a diverse set of audiences, including policymakers, practitioners and other researchers, use research evidence to inform practice or decision-making. Research uptake is most likely to occur when there is communication and dialogue between researchers and research users to ensure the research conducted produces evidence that is both relevant and useful to the research users.
Where can I find information on, or examples of KT?
The KT section of Health Research BC’s website can assist both researchers and research users in their exploration of KT methods, including methods of KT evaluation.

What is an integrated knowledge translation (iKT) plan?
iKT refers to collaboration between research users and researchers as equal partners, the purpose of which is to generate research findings that are more relevant, and thus more likely to be useful to research users. Each stage in the research process is an opportunity for significant collaboration with research users, including the development of research questions and methodology, interpretation of findings and dissemination and potentially implementation of findings. As such, it is not a separate stand-alone plan from the research project but a series of embedded activities.

Is an integrated KT (iKT) plan an eligible topic for a C² or Reach award application?
Both the C² and Reach awards can be used in the context of an iKT plan as they involve collaboration with research users. The C² award may take place at the beginning of iKT projects as researchers seek to begin engagements with research users. The Reach award may be used at the conclusion of a project as researchers work with research users to plan for and create a dissemination event, tool or activity.

Team Composition and Eligibility Questions

Who must be included on a team?
All applications must include, at a minimum:

- A researcher co-lead, who initiates and submits the application in Health Research BC ApplyNet.
- A research user co-lead, who completes a research user co-lead form in Health Research BC ApplyNet.
- A research or health professional trainee included in the project in a meaningful way.

Teams may include more members according to the needs of the KT activities. Note: Government of British Columbia employees (individuals directly employed by provincial ministries) are not eligible to apply as a researcher or research user co-lead, but may be named as a team member. Employees of organizations funded directly by the Government of British Columbia, such as health authorities or school districts, are eligible to serve as co-leads. Health Research BC employees are not eligible to apply and may not be listed as team members. Potential applicants and team members who may be impacted by this policy should contact Akhil Huggi (c2@healthresearchbc.ca) to clarify their eligibility prior to completing the application form.

Who is eligible to apply as a researcher co-lead?
The researcher co-lead is the primary applicant, i.e. the one who launches and submits the application. This must be an individual that holds an appointment at an eligible BC host institution. For the purposes of this award, the researcher co-lead must be an independent investigator eligible to hold research operating funds at the time of the award start date, according to their host institution’s guidelines. Note: Government of British Columbia employees (individuals directly employed by provincial ministries) are not eligible to apply as a researcher or research user co-lead, but may be named as a team member. Employees of organizations funded directly by the Government of British Columbia,
such as health authorities or school districts, are eligible to serve as co-leads. Health Research BC employees, including Clinical Trials BC, knowledge translation, Research Ethics BC, BC SUPPORT Unit, are not eligible to apply and may not be listed as team members. Potential applicants and team members who may be impacted by this policy should contact Akhil Huggi (c2@healthresearchbc.ca) to clarify their eligibility prior to completing the application form.

Who qualifies as a research user?
For the purposes of this award, a researcher user is a member of the target audience of research evidence. A research user is any individual who might use, benefit, or be impacted by the results of research, but are not necessarily involved in their production. These include, but are not limited to health professionals, patients, family members, community leaders, health charities, policy makers, decision makers, other researchers, etc. Each team must include at least one research user designated as the research user co-lead on the application. Applicants may include additional research users as team members. Note: Government of British Columbia employees (individuals directly employed by provincial ministries) are not eligible to apply as a researcher or research user co-lead, but may be named as a team member. Employees of organizations funded directly by the Government of British Columbia, such as health authorities or school districts, are eligible to serve as co-leads. Health Research BC employees, including Clinical Trials BC, knowledge translation, Research Ethics BC, BC SUPPORT Unit, are not eligible to apply and may not be listed as team members. Potential applicants and team members who may be impacted by this policy should contact Akhil Huggi (c2@healthresearchbc.ca) to clarify their eligibility prior to completing the application form.

Who qualifies as a research/health professional trainee?
For the purposes of this funding opportunity, a trainee is defined as any individual involved in formal research or clinical training that is under the supervision of an independent investigator. These typically include, but are not limited to, undergraduate and graduate students, post-doctoral fellows, and clinical fellows. At least one trainee must be included as a team member in the application. If the trainee is based outside of BC, they must be studying at a BC university or employed by a BC-based organization. Health Research BC is aware trainee appointments can differ in name and requirements depending on the institution.

What are Health Research BC’s expectations of a trainee being included in a “meaningful” way?
The co-leads should actively engage the trainee in the proposed activities in a way that builds KT capacity. Depending on the program (C² or Reach), some examples of meaningful KT involvement for trainees may include:

- Engaging them to develop innovative means of collaborating with end-users throughout the research process, or engaging with the audience of a dissemination event.
- Mentoring them to develop the stakeholder engagement plan, or to engage and develop relationships with champions/key opinion leaders.
- Providing the opportunity to craft the message and assemble the information for an event or the final report to Health Research BC.

Can the trainee also qualify as the research user co-lead member of the team?
Yes, if appropriate, provided the individual meets the eligibility requirements for both.
Can a student, trainee, or research associate apply for the award?
Please check with your research services office. Primary applicants must be able to hold operating funds as an independent investigator. If you are unable to apply as a primary applicant, we encourage you to approach your supervisor (if they are eligible to apply) to co-develop an application.

Application Questions

Can I still reference work with Health Research BC departments (including Clinical Trials BC, knowledge translation, Research Ethics BC, BC SUPPORT Unit) in my application form?
Work with or supported by one of Health Research BC’s departments may be described or referenced in your application (e.g. in the description of knowledge translation activities, in the description of the proposed work section, etc.). However, applicants must not list the name of employees of Health Research BC in their team list. Applicants may not submit letters of support from Health Research BC (see below).

My research project includes collaborative work with Health Research BC departments (including Clinical Trials BC, knowledge translation, Research Ethics BC, BC SUPPORT Unit). What can I do to verify to peer reviewers that I have developed a working relationship with Health Research BC?
Health Research BC has implemented a verification process for applicants who plan to collaborate with departments within Health Research BC. This process will replace a letter of support. Applicants will be asked for information related to any collaborations with Health Research BC as part of the application process. Health Research BC staff will verify the relationship between the applicant and the staff person, and provide a statement verifying this relationship in the application form that is provided to peer reviewers. The verification process is not an endorsement of the application, only a verification of the collaboration between the applicant and Health Research BC.

Will Health Research BC tell me the score of my application?
After peer review, Health Research BC’s standard practice is to provide applicants with a quartile ranking of their application for the competition, as well as the reviewers’ comments. The final score is not shared.

How many applications can I submit?
Applicants who are eligible may submit one Reach and one C² application in one year, provided the proposed activities are sufficiently different. Applicants can be included in up to two applications in total per competition (i.e. as researcher co-lead on one application and a researcher team member on another application).

If I received a Reach or C² award in the past, can I apply for one again for the same activity?
Activities or events that are part of an annual series (e.g. annual conference, seminar series, etc.) may only be funded once through either program, if eligible.
I am applying to the Reach award to support my dissemination event. Can I also request sponsorship support from Health Research BC?
No. Events funded by the Reach award are not eligible for Health Research BC sponsorship.

When do the activities funded by the C² or Reach award need to occur?
Activities must be planned to occur within 12 months of the funding start date (October 1, 2023). To reduce administrative burden on award recipients, should delays occur, funds may be spent up to 18 months after the start date without the need to request a no-cost extension. Recipients must request a no-cost extension if delays require funds to be spent more than 18 months after the start date.

Can dissemination events or activities funded by the C² and Reach award be held outside of British Columbia?
Outputs supported by this funding opportunity must be based within British Columbia.

Can expenses for the activities take place outside of BC?
The majority of expenses must be incurred within BC.

Is providing salary support/buy-out time for the researcher co-lead an eligible expense?
No.

Can trainees or other research staff be hired to coordinate award-related activities?
Research/health professional trainees and staff may be paid to complete services directly related to and integral to the success of the proposed activities.

Award Administration Questions
Can I renew my award?
No. The award is not renewable.

Can I defer the start date of the C² or Reach award?
No. The award is not deferrable.

How much time do I have to respond to an offer of the C² or Reach award?
Successful award recipients will have to accept or decline the offer of funding within the date stipulated on the award notification letter.

What documents will I need to provide before I can start my award?
A copy of the Award Acceptance Form signed by you, your research user co-lead, and an authorized finance personnel from the host institution must be uploaded in .pdf format to Health Research BC ApplyNet.