Preparing a successful salary award submission: Tips from the trenches

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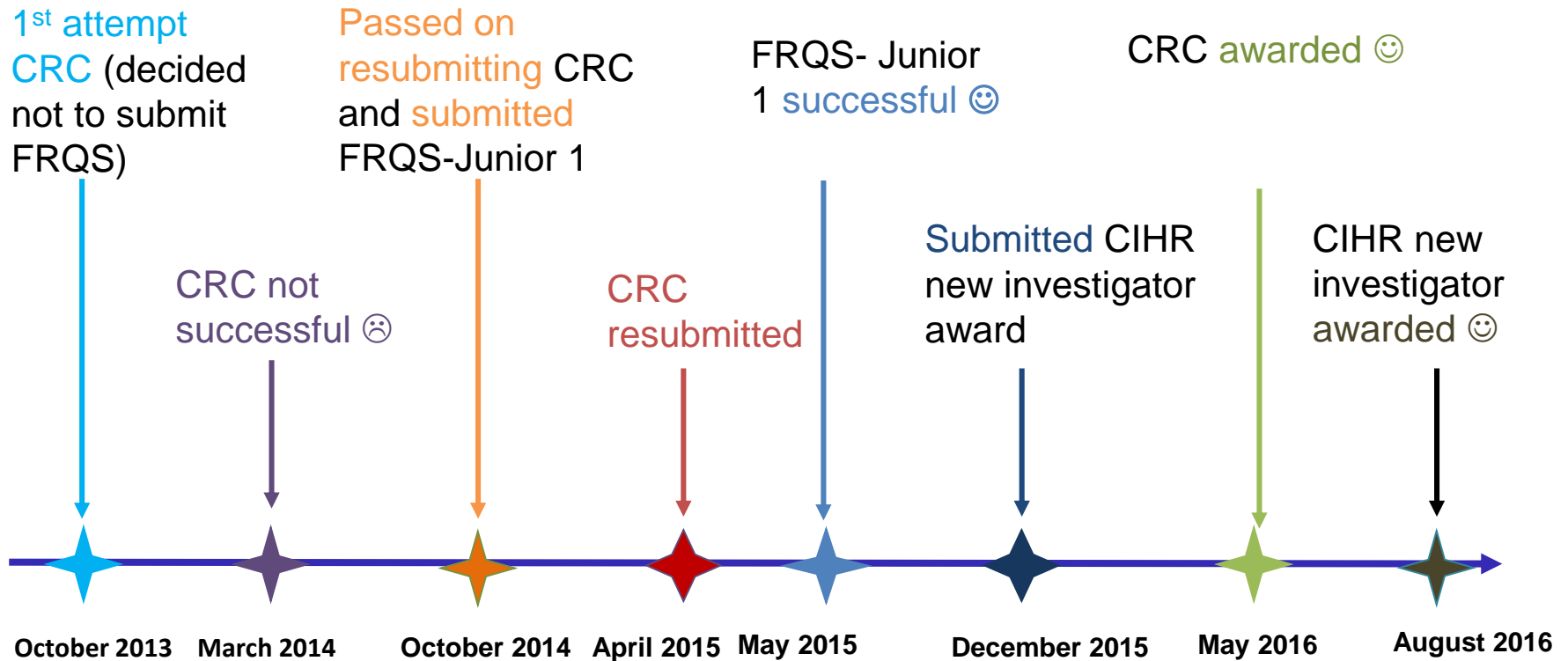Assistant Professor, Ingram School of Nursing
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McGill

Goals of today's presentation

- Using three examples of salary award applications (all three eventually successful) to share my experience as an early career researcher, including lessons learned and my top tips in preparing these applications

Salary award timeline

1st attempt CRC (decided not to submit FRQS)

CRC not successful ☹

Passed on resubmitting CRC and submitted FRQS-Junior 1

CRC resubmitted

FRQS- Junior 1 successful ☺

Submitted CIHR new investigator award

CRC awarded ☺

CIHR new investigator awarded ☺

October 2013   March 2014   October 2014   April 2015   May 2015   December 2015   May 2016   August 2016

Tips

1. Ask your institution which awards are available to you
2. Know the guidelines of the competition
3. Do not hesitate to post-pone your application
4. Review successful applications
5. Find a GREAT mentor
6. Know the evaluation criteria
7. Quantify your achievements (be specific)
8. Benchmark your achievements
9. Back-up your claims to fame with data
10. Explicitly link research goals to major priority areas for the funding agency
11. Organize research program around a main goal
12. Propose an ambitious, but realistic research program
13. Showcase funding and progress to date in description of research program
14. Do not forget your collaborators
15. Standardize your description of the studies within program
16. Ask a senior professor not in your field to read your application

Tip #1 - Ask your institution which awards are available to you

- E-mail Office of Sponsored Research (OSR) find out which awards are available
- Canada Research Chair (CRC) – need to be nominated by institution first http://www.chairs-chaires.gc.ca/program-programme/index-eng.aspx

- Why?
  - I was not aware of the CRC until contacted
  - Many funding agencies and foundations have salary awards you might not be aware of?

Tip #2 - Know the guidelines of the competition

- Including what are the success rates? Are there previous successful candidates in your faculty?

- If there are no guidelines or these are vague (e.g., CRC), ask questions…

- Why?
  - Once I knew what the CRC application was about, I realized that I should have waited (CRC limited to 2 tries)

Tip #3 - Do not hesitate to post-pone your application

- With a better understanding of the criteria to obtain a CRC, I decided to post-pone until 2015

- Why?
  - For some competitions limited attempts allowed
  - Instead of working on your application for months and months, can be working on improving your CV

Tip #4 – Review successful applications

- OSR?

- Colleagues?

- Why?
  – Can help you to organize your application
  – Ideas of how to manage page limits
  – Give ideas about what needs to be included in research program (e.g., themes)

Tip #5 – Find a GREAT mentor

- 1st CRC application = no mentor

- FRQS-Junior 1, CIHR new investigator award, and 2nd CRC application = mentor

- A mentor who:
  - Is willing to read your application
  - Has mentored other successful faculty
  - Who is available

- Why?
  - Key in helping me decide on how to present my research program
  - Helps to develop a competitive track record for Junior 2 application

Tip #5 – Find a GREAT mentor

- For FRQS-Junior 1 applicants, nominate a mentor that will be truly present and within your institution

- Mentorship plan should be about you will work together, not just about the mentor

  «*Son mentor expose clairement la qualité du soutien qu'il pourra lui apporter (fonds, réseautage, occasions de collaboration projets de recherche, rétroaction protocole de recherche, renforcement habiletés de gestion des fonds de recherche, leadership) rencontres périodiques*.»

  «*La faisabilité du programme est élevée considérant les travaux antérieurs de la chercheuse, les fonds de recherche déjà obtenus et un milieu d'accueil (mentorat de qualité au sein de l'Université) et de collaboration pancanadien*.»

Mentorship plan (FRQS-Junior 1)

- Overview of candidate and mentors' evaluation of candidate
- Previous work with the mentor
- Accomplishments of mentor
- Mentoring plan
  - Vision statement: Dr Lambert's four year career goal is to establish an innovative program of research in psycho-oncology, focusing on the evaluation of sustainable service delivery models for enhancing patients' with cancer and caregivers' access to coping skills and illness self-management interventions. Career objectives include a) being recognised as an emerging expert in her field, b) be a PI on a major provincial or national grant, c) build research capacity by supervising PhD students, d) disseminate findings through high-impact scientific publications and at conferences, and e) have research findings influence practice.
  - Goals of mentoring plan: Goals that will be the driving force of our mentoring relationship are: a) Provide Dr Lambert with ongoing advice regarding professional directions, b) provide critical review of Dr Lambert's academic progress, c) foster academic productivity, d) facilitate the development of additional experiences (e.g., RCT mentoring)
  - Specific activities: Launching of Dr Lambert's proposed program of research, provide networking and collaborative opportunities, collaborate on projects to further develop her track record, review Dr Lambert's first CIHR or FRQS grant submission as PI, further develop research skills, and advise on dissemination of her research findings
  - Evaluation of the success of the mentoring plan

Tip #6 – Know the evaluation criteria

- FRQS-Junior 1 guidelines include a detailed evaluation grid – review, re-review it, ask a colleague to evaluate your application using it…

- CRC the criteria were not available, and I should have asked more questions to OSR and successful applicants
  - But overall these were the typical metrics: publications, grants, national and international leadership

- Why?
  - You know exactly what to focus on and emphasize

Tip #7 – Quantify your achievements (be specific)

- How many publications? Specify number of publications in your discipline (nursing) and multidisciplinary journals
- How many 1st authors publication?
  - Include a note about publication convention in your discipline. In FRQS application I included: *Citation convention:* the first author is the person who has led the manuscript and represents the most significant contributing author in multi-authored publications
- How many publications without supervisor?
- How many publications with students? Specify training levels
- What are the Journals' impact factors?
- What is the ranking of the journals? e.g., Top 10% of journals in psychology
- How many times have your manuscripts been cited? What is your h-Index?
- How many grants awarded? Emphasize continuous, uninterrupted funding (e.g., fellowships for all levels?)
- How many students supervised? …

- Why?
  - Reviewers do not need to count
  - Information to evaluate criteria explicit

Tip #7 – Quantify your achievements (be specific)

- Throughout the documents (e.g., cheminement scientifique, detailed contribution) include summary sentences for the information needed to evaluate the application (evaluation criteria)

  – Cheminement scientifique/Most significant contributions: "To date, study findings have been disseminated through five manuscripts published in the top 10-15% journals in the field, such as Annals of Behavioural Medicine IF = 3.621; Psycho-Oncology IF = 4.04; and Psychological Assessment IF = 2.84."

  – Most significant contributions: "These manuscripts have already been cited 30 times, with the concepts postulated by the theory guiding analyses in several international studies and across other illness contexts (utility extending beyond cancer)."

  – Most significant contributions: "I have led the design and implementation of the *Coping-Together* research program. Early on in the inception of this program of work, four pilot grants were obtained (as PI), which was followed by securing highly competitive project funding from the National Health and Medical Research Council (NHMRC) for a multicentre trial (as co-investigator). That same year, I was also awarded the prestigious NHMRC Early Career Fellowship (Total Funding 2009-2011 = $1,066,154.00)."

  – Publication pertinente: "I have published 32 manuscripts (Scopus h-index = 11), primarily on the substantial impact of cancer on patients and caregivers, their approaches to manage cancer challenges, and preferences for support and interventions. Also, my studies have focused on evaluating the psychometric properties of scales commonly used in psychosocial oncology. My five most significant manuscripts include:…"

Tip #8 – Benchmark your achievements

- *"This is a very difficult application to evaluate due to the Nursing aspect of it."*

- Find references to compare your achievements (e.g., h-index, number of publication, grant budgets) with those within and outside your field
  - Not enough to say excellent, what does that mean?
  - E.g., RRISIQ h-index of members, U of A h-index of assistant professors, Hack T et al. Research citation nursing academics in Canada JAN 2010; 66:2542-49

- Why?
  - Many reviewers not from your substantive field and need to convince them of your achievement in comparison to those within and outside the field
 - Demark your achievements from the crowd

Tip #9 - Back-up your claims to fame with data

- "*Refer to the school as an international institute, but there is no backup to this*."
  - Solution: Statistics about the School's standing, contribution to international initiatives, international collaborators, evidence of impact on practice and policy

- "In Australia, few researchers receive both an NHMRC fellowship and a grant" – Comment: "*This is anecdotal*"

Tip #9 - Back-up your claims to fame with data

- If include qualifiers, back it up with data
  - Sustained scholarly activity since Masters as evidenced by….
  - Awarded a competitive grant with only 4% success rate demonstrating…
  - This grant ranked 3/10….
  - Exponential increase in citations over the past 5 years, demonstrating a trajectory toward becoming a leading researcher in my field (include graph)

Total Citations

2005-2006	2007-2008	2009-2010	2011-2012	2013 - Accepted
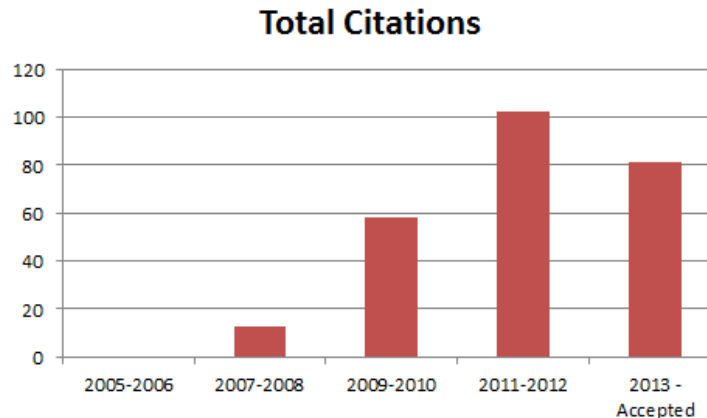
Tip #10 – Explicitly link research goals to major priority areas for the funding agency

- "*I see the importance of this topic but perhaps I am missing the critical information linking the field to cutting edge CIHR fundable research.*"

- E.g., CIHR Institute of Health Services and Policy Research STRATEGIC PLAN 2015–19, link to priorities of patient groups or other government institutions
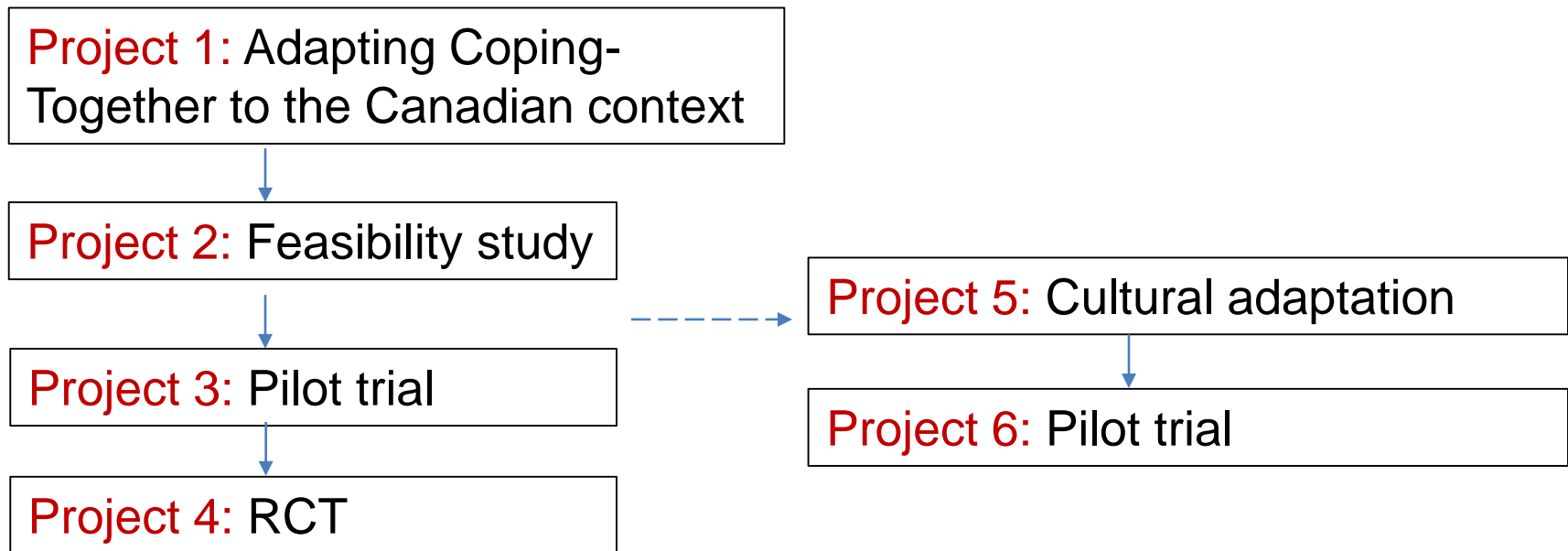
Tip #10 – Explicitly link research goals to major priority areas for the funding agency

- Comment CRC on resubmission:
  - "*Caregiving is certainly a public health priority and cancer deaths will continue to increase.*"

Tip #11 – Organize research program around main goal

CRC 1ˢᵗ submission

To further develop and evaluate a literacy-sensitive, multi-media, self-directed coping skills and self-management intervention for patients and caregivers. Concurrently, this intervention will be adapted for use by CALD patients and caregivers.

Project 1: Adapting Coping-Together to the Canadian context

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Project 2: Feasibility study

↓

Project 3: Pilot trial

↓

Project 4: RCT

- - ->

Project 5: Cultural adaptation

↓

Project 6: Pilot trial

CRC 1ˢᵗ submission

- Problem: Program of research depend on the research of some initial studies and if these are not successful or results are not what is expected, the rest of the studies might not be relevant

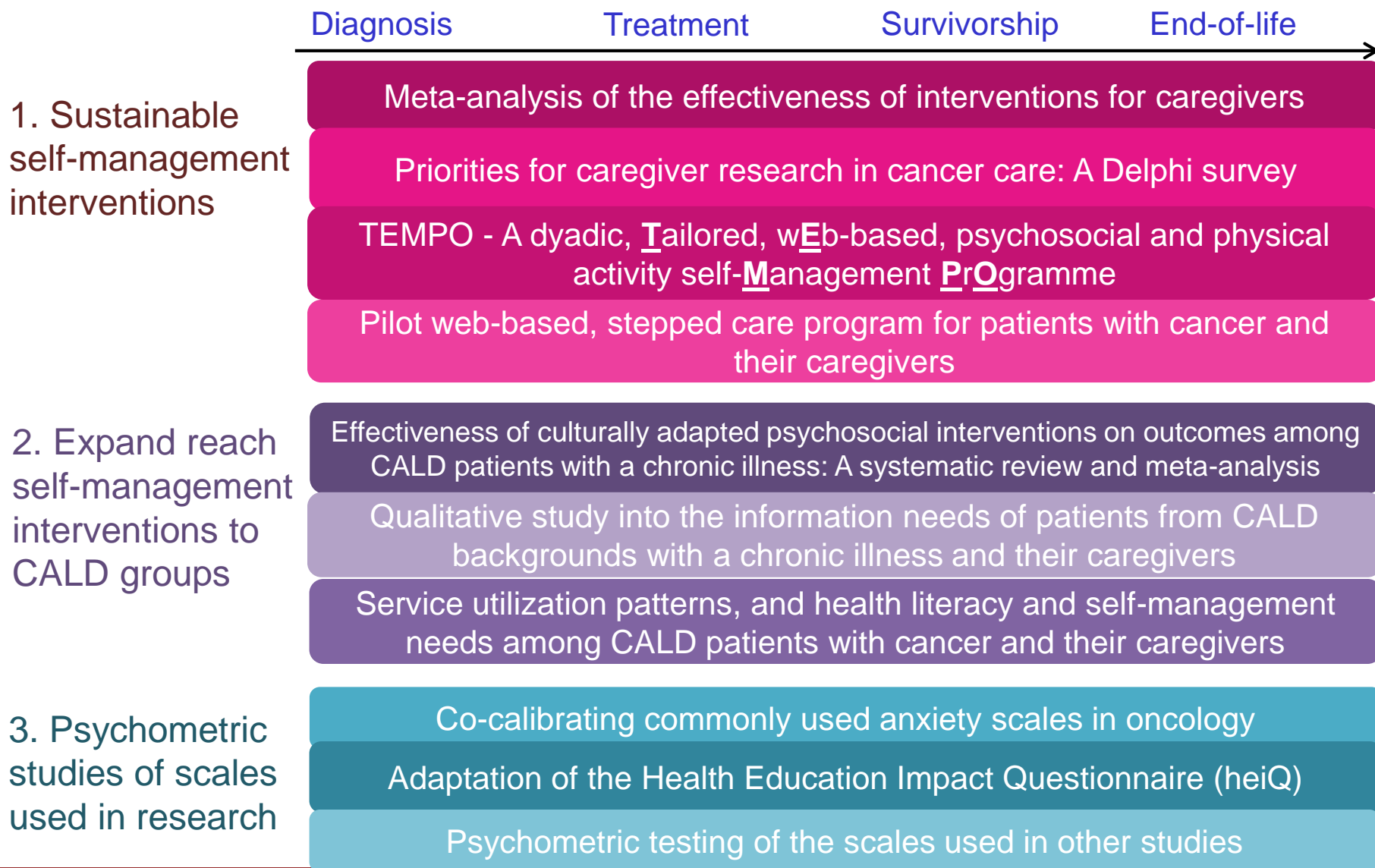# Tip #11 – Organize research program around main goal

- With the helped of my mentor, I re-organized my program of research around one main goal

- The, stated more specific objectives to meet this goal (i.e., defines the themes or streams within program of research)

FRQS Junior 1, CRC Resubmission, CIHR New Investigator

High-quality cancer care in Canada depends on family caregivers. However, this support comes at a high cost to caregivers' own health. My research is organized around three objectives to address caregivers' burden:
- Develop an evidence-base to support the feasibility, cost, and efficacy of different intervention models for sustainable self-management among patients with cancer and their caregivers
- Expand the reach of self-management interventions to patients from culturally and linguistically diverse (CALD) backgrounds and their caregivers.
- Strengthen the psychometric evidence-base to guide the selection of scales most likely to capture the effects of interventions

Psychosocial oncology program of research

Diagnosis → Treatment → Survivorship → End-of-life

1. Sustainable self-management interventions

- Meta-analysis of the effectiveness of interventions for caregivers
- Priorities for caregiver research in cancer care: A Delphi survey
- TEMPO - A dyadic, **T**ailored, w**E**b-based, psychosocial and physical activity self-**M**anagement **PrO**gramme
- Pilot web-based, stepped care program for patients with cancer and their caregivers

2. Expand reach self-management interventions to CALD groups

- Effectiveness of culturally adapted psychosocial interventions on outcomes among CALD patients with a chronic illness: A systematic review and meta-analysis
- Qualitative study into the information needs of patients from CALD backgrounds with a chronic illness and their caregivers
- Service utilization patterns, and health literacy and self-management needs among CALD patients with cancer and their caregivers

3. Psychometric studies of scales used in research

- Co-calibrating commonly used anxiety scales in oncology
- Adaptation of the Health Education Impact Questionnaire (heiQ)
- Psychometric testing of the scales used in other studies
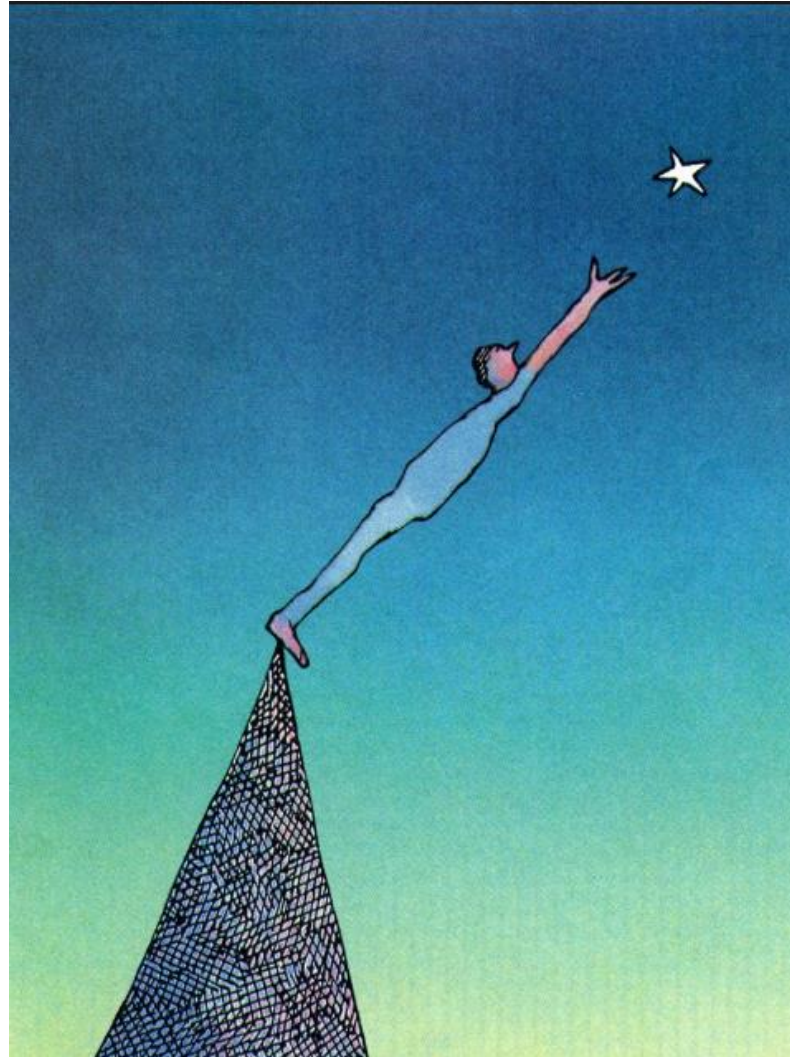
Comment received

- "*Goals of the program of research are clearly delineated around 3 major issues in caregivers' cancer research. The objectives of the program of research are consistent with the overarching goal and the proposed studies.*"

- Include statements about the links among the different parts of the research program (in one submission deleted because of word count and was criticized)

Number of projects?

- In my opinion and experience, the number of projects does not matter so much, they have to be well aligned with research program objectives

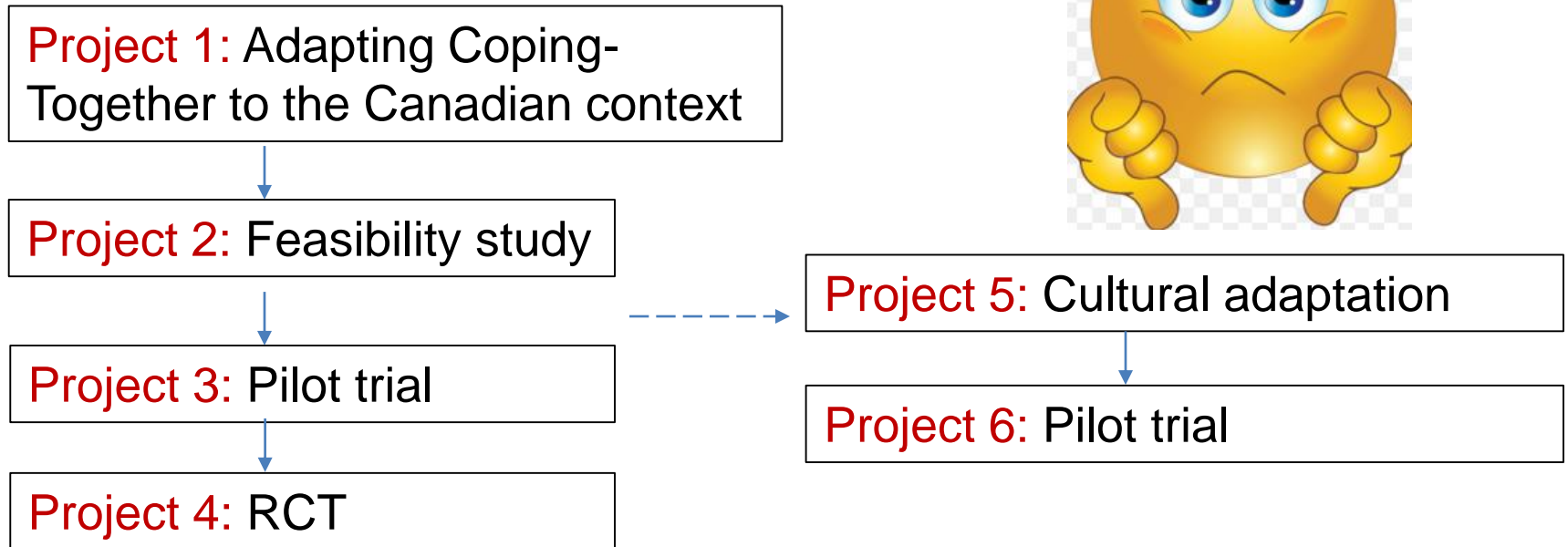# Tip #12 - Propose an ambitious, but realistic research program

Tip #12 - Propose an ambitious, but realistic research program

Summary of comments received

Strengths	Weaknesses
Strong theoretical foundation	CRC reviewers agreed that program too ambitious
Builds directly from previous work	Feasibility questioned because no team in place
Innovative elements (e.g., cultural adaptation)	The relevance of chosen outcomes to policy makers unclear (empowerment)
Area not been addressed comprehensively by researchers previously	
Great potential to impact patient and caregiver outcomes	

Tip #13 - Showcase funding and progress to date in description of research program

- Mistake CRC 1st submission – described 6 studies, none underway, none funded = not feasible

Project 1: Adapting Coping-Together to the Canadian context

↓

Project 2: Feasibility study

↓

Project 3: Pilot trial

↓

Project 4: RCT

- - - - → Project 5: Cultural adaptation

↓

Project 6: Pilot trial

Tip #13 - Showcase funding and progress to date in description of research program

- Clearly identified those studies that were underway

- The point of this example is not about the number of projects, but how to demonstrate feasibility
  - FRQS – Junior 1
    - 9 studies – 1 funded and underway, 3 funding applications under review, 2 not funded = "*research program highly feasible*"
  - CRC resubmission/CIHR new investigator
    - 9 studies – 5 funded and underway, 2 funding under review, 2 not funded ="*complete and logical research plan and already funded*"

  **Another important aspect to keep in mind is the duration of the award!

- Why?
  - Enhances feasibility

Tip #14 - Do not forget your collaborators

- **Collaborations (national and international):** seen to be a strong asset, demonstrate ability to develop teams and leadership

- 1st CRC submission no description of the team for each study and one reason why application not funded (e.g., major doubts about ability to recruit)

- Why?
  - Support feasibility

Tip #14 - Do not forget your collaborators

- Name not sufficient, as the reviewer will not know all collaborators

- Instead focus on roles

- E.g., The team includes researchers, HCPs, and knowledge users with complementary expertise in e-Health research (Drs Loiselle and Rochefort, McGill); nursing (Dr Katz, Manitoba Prostate Centre; Dr Laizner, McGill University Health Centre - MUHC), cognitive behaviour therapy (Dr Courbasson, Centre for Addiction and Mental Health); psychosocial interventions (Dr Maheu, McGill), health services (Dr McCusker, SMH), self-management (Dr Howel, University Health Network), physical activity (Dr Duncan, McGill), statistics (Dr Ciampi, SMH), and health economics (Dr Peacock, ARCC)

Tip #15 - Standardize your description of the studies within program

- Limited word count or page limit is a challenge in deciding what information to include/remove when describing each study

- Make sure key information according to best practice in conducting these studies (e.g., Trial – CONSORT)

- Through trial and error, noting at each application what the reviewers appreciated, I identified the key information to include for each study description:
  - Title
  - Funding
  - Progress – team, sample already recruited, data collected
  - Aims
  - Methods

Example

1.2 National and international priorities for caregiver research in cancer care using the Delphi procedure (2015 – 2016). This study addresses Objective 1 by identifying national and international stakeholders' views on priorities for caregiver research in cancer care, including priorities for health services research. **Funding:** CIHR Planning and Dissemination grant obtained (PI). **Progress:** Ethics approval obtained and recruitment underway with the collaboration of national (e.g., Dr Loiselle, McGill) and international researchers (e.g., Dr Kim, University of Miami), health care professionals (HCPs, e.g., Dr Yaffe, SMH) and managers of professional and non-for-profit organizations (e.g., Ms Lafantaisie, Canadian Cancer Society). **Aim:** Identify priorities for caregiver research in cancer care. **Methods:** Three-round online Delphi survey involving four panels of national and international stakeholders (10-18 stakeholders/panel[33]): a) oncology HCPs, b) managers, c) researchers, and d) caregivers. Stakeholders are identified mainly through the research team's network, an extensive online search, hospital-based oncological services, and/or professional organizations. Interested stakeholders are then e-mailed the link to the Round 1 survey, which asks: *"What are the most important topics for caregiver research in cancer care over the next decade?"* Rounds 2 and 3 will focus on obtaining consensus among stakeholders regarding the importance of each research topic identified in Round 1. The study will conclude with an online meeting to discuss the operationalization of priorities. Given the open-ended nature of Round 1, content analysis will be applied. In Rounds 2 and 3, non-parametric tests will be used to assess differences across stakeholder panels in their ratings.

Tip #16 - Ask a senior professor not in your field to read your application

- To do this you need to have your application ready 2-3 months ahead of time

- Ask OSR to help you find someone

- Is an internal review committee available?

- Why?
  - Reviewer will most likely not be from your field

Thank you!