|  |  |  |
| --- | --- | --- |
|  |  |  |
| **FIP YOUNG PHARMACISTS’ GROUP**  **FIP FOUNDATION FOR EDUCATION AND RESEARCH**  **Grant for Professional Innovation** Application Form for **Young Pharmacists and Pharmaceutical Scientists**  **2020**  **INTERNATIONAL**  **PHARMACEUTICAL**  **FEDERATION**  **(FIP)** | |

|  |
| --- |
| **General Regulations** |
|  |

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Please note that this application form will be the applicant’s project entry in the Grant database of the International Pharmaceutical Federation (FIP) Young Pharmacists’ Group (YPG). By signing this form, the applicant grants FIP the right to publicise the outcomes of the project.  To expedite the processing of this form, please fill it in completely and correctly. Should you have any questions, please do not hesitate to contact the YPG Steering Committee at [**ypg@fip.org**](mailto:ypg@fip.org).  **Grant Description**  The goal of the Grant for Professional Innovation is to promote innovation in the profession of pharmacy and pharmaceutical sciences through innovative projects by young pharmacists and pharmaceutical scientists to improve the practice of pharmacy or advancement of pharmaceutical sciences. The grant supports innovative ideas that provide insights in local or global health issues with potential resolutions, creative methods in providing healthcare services, promotions of the pharmaceutical professions, development of pharmaceutical sciences and technologies. It should be highlighted that the innovative project **must have a direct clinical application**. The grant is to be used for supporting **a sole project**.  **Application and Procedures**  Young pharmacists can submit a project proposal that addresses a specific issue or problem that may be improved through an innovative pharmacist-led intervention. The issue may be related to any field of professional practice and its outcome should have a positive impact on the community and a direct clinical application.  **Award**  The winner will receive a grant of 1,000 Euros to assist in the implementation of the winning project. The winner will be announced during the YPG business meeting of the annual FIP Congress and Grant will be given at that time.  One year later, upon acceptance of the final project report by the FIP Foundation for Education and Research, the winner is entitled to a complimentary registration, a return APEX airfare, and hotel accommodation to attend the annual FIP Congress. At the Congress, the winner is expected to present the project results in poster format.  **Eligibility and Limitations**  Only members of FIP YPG are eligible to apply. All previous Grant winners are not eligible to apply again. Each applicant can submit only one project. Group Work must be submitted under one applicant’s name only.  The grant prohibit application that requires sources of funding beyond the YPG grant and prohibit applications of studies that are unlikely to be completed in the 1-year funding period. This would not preclude pilot studies or small proof-of-concept trials, as long as the pilot is expected to produce outcomes that are, in-and-of themselves, relevant and applicable  **Application Deadline**  Applications must be submitted or postmarked by **1st May 2020**. The application should include:   1. This application form, complete and signed 2. Applicant’s curriculum vitae (CV) 3. Mentorship acceptance/support letter   Submissions may be made by email, fax, or post mail to:  **FIP Foundation Grant for Professional Innovation**  **Andries Bickerweg 5**  **2517 JP, The Hague**  **The Netherlands**  **Email:** [**foundation@fip.org**](mailto:foundation@fip.org)  **Fax: (31) - 70 302 1999**  **Incomplete applications or those that do not strictly comply with the application instructions will be disqualified and returned to the applicant without review or score.**  **Judging Process**  All entries received will be assigned a number and screened for compliance to application rules. A review panel nominated by YPG and approved by the FIP Foundation will consider all valid applications. The winning project will be selected by the review panel and subjected to approval by the FIP Foundation’s Board of Directors.  Each entry will be evaluated anonymously based on five criteria and assigned a numerical score. The following scoring system will be used:  Significance and Relevance (25 points): Indication of the importance, direct clinical application and the impact the identified problem or issue is having on populations/communities, or in general. Identify the gap between the problem and current practices/knowledge. How the hypothetical result can fill this gap of practice/knowledge.  Creativity and Innovation (20 points): The demonstration of imagination, problem-solving techniques, etc, and an assessment of the proposed solution's originality and uniqueness, the use of science to solve the problem, or the potential impact of the solution on the community or in general.  Scientific Accuracy (20 points): Evaluation of the methods used to research the topic and to test the proposed probable results of the intervention. Clarity of the framework, design, methods and analysis. The relation between the method and the hypothesis. Anticipation of the method problems and proposal of solving the problems or alternative approaches.  Clarity of Communication (15 points): Includes adherence to the entry guidelines as well as clarity, organization of the facts and data, etc. The project should show a coherent display and presentation.  Feasibility and Scale (20 points): Assessment of the likelihood that the project is realistic, feasible, and able to show results in 1 year with the level of funding being provided. ​The innovation project must not require sources of funding beyond this grant and must be completed in the 1-year funding period. The applicants should describe the scale of the project and the milestones by time. Competency (Skills and knowledge) of the applicant for the success of the projects is presented in the application (for example in CV).  **Mentorship**  The overarching goal of the YPG Innovation Grant programme is to increase the number of pharmacists and pharmaceutical scientists who view research as an important part of their professional life. It is recognized that research training (including graduate-level education, residencies, fellowships, etc.) are important paths to build research skills. However, we recognize that some pharmacists and pharmaceutical scientists seek research skills but are unable to build their skills through formal educational and training programs. Those who wish to conduct research outside those formal training programmes must have mentors– experts in research, willing to help others develop research skills.  The role of the research mentor is to guide young researchers as they formulate research ideas and questions, develop grant applications that articulate their research questions, conduct research projects successfully and report the results of research in an appropriate manner. One important role of the research mentor is to help new researchers focus and narrow their research ideas, so that their projects can be successfully completed with the available time and financial resources available to them.    Given the goal of the YPG Innovations Grant programme, and the critical importance of mentorship in developing new researchers, **every applicant seeking a YPG Innovations Grant must have a research mentor qualified to guide them through their project.**    Mentors should have research training and experience, documented success in completing research projects (as demonstrated by published research results), and a willingness to help support the applicant in their YPG Innovation Grant application. Applicants must identify their research mentor, provide their name, title and affiliation, and contact information in the application form. A letter of acceptance and support from the mentor must also accompany each application, indicating that the mentor understands their responsibility and is willing to help.    Applicants who are unable to identify and recruit their own mentor may seek assistance from the FIP Foundation by contacting (**YPGInnovationGrant@fip.org**). Every effort will be made to identify a mentor willing to help.  For more detailed instruction, please read the *Tips for Success and Pointers for Professional Innovation Grant application.*  The Grant for Professional Innovation is only awarded to **ONE winning project** each year. The winner will be announced during the **FIP Congress in Seville, Spain, September 2020**. Applicants who have previously received financial support from the Foundation are not eligible to apply for this grant.    **Report submissions by Grant winner:**  The Grant winner for 2020 is required to adhere to the following timeline to be able to present the winning project at the 2021 FIP Congress in Brisbane, Australia.   |  |  | | --- | --- | | **January 2021** | Submit brief progress report to YPG | | **April 2021** | Submit project abstract with preliminary results for FIP Congress Brisbane, Australia, 2021 and a brief report for FIP Foundation’s Annual Report | | **July 2021** | Submit final project report to YPG and FIP Foundation. The report should include:  • Description of activities carried out;  • Evaluation of objectives achieved;  • Declaration of how the Grant has been spent. | | **April 2022** | Submit summary report for FIP Foundation’s Annual Report |   Reminders with submission instructions and exact deadlines will be communicated to the winner periodically.  ***The information on this page aims to explain the various parts of this application form and to aid in its completion.***  ***Part I. Project identification***  **Project title**  You must give your project a name. It should be short and descriptive i.e. be brief and informative.  There are no boundaries as to what your project can be about. The Grant for Professional Innovation is based only on the principle that pharmacists should be able to fully reveal their knowledge and skills to improve the health of the public. This Grant is looking at innovative ideas that improve pharmacists’ practice or pharmaceutical science/ technology with **direct clinical application**. You may choose any kind of topic and any type of intervention. However, you must address a widespread problem, which could have a direct and measurable impact on a large segment of the community.  ***Example:***  *Perhaps you have set up a new service for your blind patients, so they may be better able to understand their medicines. You may want to develop a way of educating others involved in pharmacy through use of the internet, or you may be involved in developing a new drug delivery system.*  **Summary**  This is a simple, straightforward non-technical language descriptionof your project. This summary should explain the purpose of the project and describe what the project will do; its impact on the community and any potential consequences of not solving or improving the situation.  ***Part II. Applicant information***  **Applicant**  Any young pharmacist or pharmaceutical scientist who is a member of the FIP Young Pharmacists Group can nominate him/herself. Group work may be submitted, but one member of the group would have to be designated to receive the Grant on behalf of the group. Applicants are limited to submitting one project per year.  **Signature**  In order for the application form to be reviewed, please make sure you have read, understood and signed it properly. By signing the application form the applicant agrees to adhere to the general regulations as described here.  ***Part III. Project description***  **Themes**  Please select one to three themes, which best describe the project.You are free to define new fields that are applicable to your project. The number of the themes you select or the subjects you select will not have any effect in the evaluation process. They are collected for statistical purposes only.  **Project Significance**  This is the part where you describe the issue or problem, its impact on the community and any potential consequences of not solving or improving the situation.  *1. What is the issue?*  *2. How did you identify the issue?*  *3. Why is it important?*  *4. How does it affect the community?*  *5. What will happen if the issue is not addressed?*  Please indicate clearly the primary goals, aims and objectives of the project and possible measurable outcome(s).  **Project duration**  Please indicate the time span for implementation of the project: short-term can be between 3 weeks and 6 months and long-term projects are longer than 6 months. Remember that the project **must be completed** with **measurable** results in the **1-year funding period**. This would **not** preclude pilot studies or small proof-of-concept trials, as long as the pilot is expected to produce outcomes that are, in-and-of themselves, relevant and applicable.  **Scientific background / Development of the problem**  Please provide a rationale for the project and what is known about the topic. Indicate the appropriate resources and/or references used in developing your proposal. In case no scientific information is available or accessible – please describe in detail the development of the problem you would like to address with this project.    **Project Impact**  Describe the outcomes you expect to be available at the end of the project. The application form should clearly indicate the potential outcomes from the implementation of your project. They should have concrete measurable aspects. Your project should address one (or more) fields where we can see the outcomes: the society, the profession and/or to the science/research.  **Methods**  Please remember this is the most important part of the form. The tasks should be clearly explained, with examples of what an applicant will be doing and a timeline. Describe your idea and proposed intervention: How do you think the pharmacist could intervene?  **How your solution will work in practice**  Please include data that demonstrates the feasibility of the project, detailing the resources required.  *1. How is it a feasible solution?*  *2. Evidence you gather that supports your expected results*  *3. What major challenges must you overcome?*  **Pharmacists’ role in the project**  How the unique qualifications/situation of the pharmacists in the society enables the applicant to act on that project?  **Budget Proposal**  How will the award be used? It is highly encouraged that be included a brief description of the expected costs per task/objective. The innovative project **must not require sources of funding beyond this grant** and **must be completed in the 1-year funding period.**  **Submitting the application:**  All communication with regard to the Grant should be addressed towards the Foundation’s Executive Director:  **FIP Foundation Grant for Professional Innovation**  **Andries Bickerweg 5**  **2517 JP, The Hague**  **The Netherlands**  You can also send your application by email or fax to: **Email:** [**foundation@fip.org**](mailto:foundation@fip.org)  **Fax: (31) - 70 302 1999**  Applications must be postmarked by **1st May 2020**. They must be completed in full, signed properly and accompanied by the applicant’s curriculum vitae (CV) and mentorship acceptance/support letter. |

|  |  |
| --- | --- |
| ***FIP Foundation for Education & Research***  ***Young Pharmacists/Pharmaceutical Scientists Grant for Professional Innovation*** | **Application Form**  *2020* |

|  |  |
| --- | --- |
| ***To be filled in by the FIP Foundation*** | |
| **Reference number:** |  |
|  | |
|  | |
| ***This form must be completed in English!*** | |
|  | |
|  | |
| **Part I. Project Identification** | |
|  | |
| **Title of your proposed project**  *Please note that you have to give the project a name. Please provide a title that is clear, precise and informative* | |
|  | |
|  | |

|  |
| --- |
| **A summary of the project in a non-technical language for publicity:**  *Please describe the issue or problem, its impact on the community and any potential consequences of not solving or improving the situation in simple, non-technical terms (max. 50 words)* |
|  |

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Part II. Applicant Identification** | | | | | | | | | | |
|  | | | | | | | | | | |
|  | | | | | | | | | | |
| **A. Details of the applicant**  ***Please attach a short Curriculum Vita (CV) of the applicant****. If this is a group application, please submit a short CV of the person who will represent the applying group.* | | | | | | | | | | |
| Name | |  | | | | | | | | |
| FIP Membership Number | |  | | | Professional occupation | | | |  | |
| Street address | |  | | | | | | | | |
| Postcode | |  | | | City |  | | | | |
| Region | |  | | | Country |  | | | | |
| E-mail: | |  | | | | | | | | |
| Telephone | | prefix | number | | Fax | | prefix | | | Number |
|  | | | | | | | | | | |
| **Signature** | | | | | | | | | | |
|  | | | | | | | | | | |
| By signing this application, the applicant agrees and understands that any monies received or paid as a result of this application are subject to the following terms:  1. All information contained in this application is truthful and accurate to the best of your knowledge, and no relevant information has been withheld.  2. Funds granted as a result of this request are expended for the project described in this application.  3. The International Pharmaceutical Federation and its Foundation have the right to make available and to use all data provided in this form for the purposes of managing the grant and to publicize the outcomes of the project.  4. The applicant is obliged to keep the International Pharmaceutical Federation and its Foundation informed of any changes concerning the proposed project in a timely manner.  5. In the event of winning the Grant, the applicant is obliged to submit reports and updates as required by the International Pharmaceutical Federation.  I affirm that this application for the Young Pharmacists/Pharmaceutical Scientists’ Grant for Professional Innovation is original and has been independently developed by the author. I further affirm that I have read and understand the rules of the competition. | | | | | | | | | | |
| Applicant’s name: |  | | | | | | | | | |
| Place |  | | | Date | | | |  | | |
| Signature |  | | | | | | | | | |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Part III. Project Description** | | | | |
|  | | | | |
| Main themes for the activities *The topics listed below are examples. The applicant is free to define new themes/subjects applicable to the project.* | | | | |
| *Please tick (*) *a maximum* *of 3* *boxes*) | | | | |
| ☐ *International cooperation* | ☐ *Compounding & drug development* | ☐ *Continuous professional development* | | |
| ☐ *Emerging trends in practice* | ☐ *Research & model designs* | ☐ *E-pharmacy & new technologies* | | |
| *☐ Rural healthcare development* | ☐ *Diagnostics & clinical practice* | ☐ *Novel community pharmacy services* | | |
| ☐ *Access to medication* | ☐ *Pharmaceutical analysis* | ☐ *Medication management practices* | | |
| ☐ *Vaccination services* | ☐  *Biotechnology & pharmacogenetics* | ☐ *Professional development & promotion* | | |
| ☐ *Healthcare promotion* | ☐ *Epidemiology & post market research* | ☐ *“Seven star” pharmacist* | | |
| ☐ *Managing disease outbreaks* | ☐ *Drug targeting & drug delivery* | ☐ *Other (specify: )* | | |
| ☐ *Anti-drugs/substance abuse* | ☐ *Herbal & traditional medicines* | ☐ *Other (specify: )* | | |
| ☐ *Disadvantaged people* | ☐ *Academia & pharmacy education* | ☐ *Other (specify: )* | | |
|  |  |  | | |
| **Project Significance**  *Describe why the research is significant and whether the research addresses an important problem.* *Please indicate clearly the primary goals, aims and objectives of the project (Max. 100 words)* | | | | |
|  | | | | |
| **Proposed duration of the project:**  *Short-term - between 3 weeks and 6 months*  *Long-term - longer than 6 months*  *Remember that the project* ***must be completed*** *with* ***measurable results*** *in the* ***1-year funding period****.* | | Short-term | ☐ |  |
| Long-term | ☐ |

|  |
| --- |
| **Project Description (cont.)** |
|  |
| **Scientific Background / Problem Development (with references):**  *Please provide a rationale for the project and what is known about the topic*. *(Max. 100 words)* |
|  |
|  |
| **Project Impact:**  *Describe possible outcomes resulting from project implementation that will have direct clinical application. These outcomes should be measurable. (Max. 100 words)* |
|  |
|  |
| **Project Description (cont.)** |
|  |
| **Methods**  *Describe the proposed intervention and all steps required to achieve or evaluate the defined outcomes. (Max. 300 words)* |
|  |
|  |
| **How your solution will work in practice**  *Information and data that demonstrates the feasibility of the project, detailing the resources required. (Max. 150 words)* |
|  |
| **Pharmacists’ role in the project:**  *What qualifications will be important? What is the role of the pharmacist in this particular project? (Max. 50 words)* |
|  |
| **Budget Proposal:**  *How do you plan to use the grant? Remember that the grant prohibit application that requires sources of funding beyond the YPG grant. Please consider breakdown the list into personnel, consumable supplies, travel expenses, other expenses, and administrative costs to start.* |
|  |

|  |
| --- |
| **Mentorship**  *Identify your research mentor, provide their name, title and affiliation, and contact information. Do not forgot to attach the mentorship acceptance/support letter to this application.* |
|  |

***~ End of Application Form ~***