Project and Research Grants:

Simulation and Clinical Placement Grant

The Canadian Society for Medical Laboratory Science (CSMLS) is excited to offer support for accredited academic programs and health care organizations looking to create quality assurance projects and research that increase our body of knowledge in:

* enhancing simulation education and curriculum for medical laboratory science students;
* understanding how to relieve pressures from clinical placement sites in relation to supporting student competency or through the evaluation of new clinical placement models; and
* identifying gaps in knowledge associated with health human resource issues impacting academic programs and/or employers.

It is expected that the assistance received from these funds will help contribute to CSMLS knowledge production efforts for members and support streamlining of knowledge exchange for simulation and clinical placement discussions.

For this submission, ‘medical laboratory science’ refers to accredited programs and organizations associated with medical laboratory assistants/technicians (MLA) and medical laboratory technologists (MLT).

**Funding**: A total of two grants valued at $500.00 CAD each will be awarded.

**Project Requirements**:

* Canadian accredited medical laboratory science academic programs (MLA and/or MLT) and accredited health care organizations who employ medical laboratory professionals and medical laboratory science students may apply. Funding will be paid to the academic or health organization (internal redistribution to grant applicants).
* The project must clearly describe how it relates to increasing our body of knowledge within the described themes.
* The application of project outcomes must be relevant for MLAs and MLTs.
	+ Example: Information seeking event that includes questions for both professional groups.
	+ Example: Curriculum evaluation is MLT based but process methodology can be applied to MLA.
* Students and/or recent graduates (within five years of certification) must play an integral role in the creation, implementation and/or evaluation of the project, regardless of the project theme or methodology.
* Funding must be used by the end of the 2018 calendar year, regardless of total project timeline.
* Submit a final report to CSMLS and provide permission to publically display it on the CSMLS website and other CSMLS media outlets as required. A project dissemination plan is required and should commit to at least two avenues of communication to relevant stakeholders (beyond the local organization).

**Submission Deadlines:**

All submissions are due Monday October 15th 2018. Exceptions for proposal acceptance after this deadline will only be made under extreme circumstances as determined by the Granting Review Board.

All submissions should be sent to Miriam at MiriamG@csmls.org.

**Granting Review Board:** Each submission will be processed and evaluated by knowledgeable CSMLS staff and Board of Director members. The Executive Lead and Project Lead for the larger Simulation and Clinical Placement Initiative at CSMLS will not be involved in the decision making process.

**Questions:** Should you have any questions regarding the application or submission process, please contact Laura Zychla, CSMLS Researcher, at research@csmls.org.

Simulation and Clinical Placement Grant

Submission Application

**Deadline:** Monday, Oct 15th, 2018

The Canadian Society for Medical Laboratory Science (CSMLS) is excited to offer support for academic programs and health care organizations looking to create projects/research that increase our body of knowledge in:

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For this submission, ‘medical laboratory science’ refers to programs and organizations associated with medical laboratory assistants/technicians and medical laboratory technologists (students and professionals).

**Questions:** research@csmls.org

# Contact Information

**Primary Contact:**

|  |  |  |
| --- | --- | --- |
| **First Name** | **Last Name** | **Credentials** |
|  |  |  |
|  |  |  |
| **Organization – name and mailing address** | **Phone** | **Email** |
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**Additional Contacts:**

|  |  |  |
| --- | --- | --- |
| **Full Name** | **Organization** | **Role in Project** |
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**1. Provide a summary of the proposed project/research: 200 words**

**2. Background: 100 words**

**3. Project/Research Description, including methodology: 300 words**

**4. Describe how the project relates to the granting themes.** **100 words**

*Create projects/research that increase our body of knowledge in:*

* *enhancing simulation education and curriculum for medical laboratory science students;*
* *understanding how to relieve pressures from clinical placement sites in relation to supporting student competency or new models for clinical placement; and*
* *identifying gaps in knowledge associated with health human resource issues impacting academic programs and/or employers.*

**5. How will you ensure that the project outcomes are relevant for medical laboratory science programs and/or medical laboratory professionals? 200 words** *For this submission, ‘medical laboratory science’ refers to programs and organizations associated with medical laboratory assistants/technicians and medical laboratory technologists (students and professionals).*

**6. Describe how the project will integrate the student’s voice in the creation, implementation and/or evaluation components? 200 words**

**7. Describe your communication plan upon completion of your project. 100 words** *Please include at least two avenues of communication that extend beyond your local organization.*

**8. Briefly describe the project timeline (high level only***)***.** *Completion of the project or components associated with the grant must be confined to one year.*

**9. How will the grant be allocated?**

Part IV: Employer Endorsement

As the employer of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (primary applicant), I endorse this application. Our organization is supportive of her/his commitment and time to complete the tasks described therein.

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| **Printed Name** |  | **Signature** |

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| **Job Title**(e.g., Manager, Chair, Director) |  | **Date** |
|  |
| **Name of Organization** |

Part V: Primary Contact Declaration

By submitting this application, you are acknowledging that all persons listed within the contact sections have provided their permission for participation in grant and consent for public release of grant application information and the final report. Research, products or services produced by receiving the grant funds are otherwise owned by the respective organization(s).

This application has been reviewed by and submitted on behalf of all individuals listed in the contact sections. I acknowledge that any grant funding awarded to my organization will be released by early November 2018 and is required to be used by March 31st 2019. In the event that the grant funding is not used or is used for payment beyond the scope of the information described in this application, the Primary Applicant accepts responsibility on behalf of the organization to ensure the grant is refunded to the Canadian Society for Medical Laboratory Science.

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|  |  |  |
| **Printed Name** |  | **Signature** |
|  |  |  |
| **Job Title** |  | **Date** |