Innovations in Cancer Control Grants 2019

Priority 4: Building on Innovations in Cancer Care
Quick Facts

- **How much?** maximum of $120,000 (ex GST) per grant
- **How long?** up to 24 months
- **Who for?** Local Health Districts, Specialty Health Networks, Primary Health Networks, non-government organisations
- **When?** Commence 2019/20 FY and completed by June 2021
- All obligations for previously funded projects must be fulfilled
2018-2019 Re-cap

- CINSW funded 10 grants in 18-19 round from 22 applications
- Totalling < $1.1 million
- Grants focussed on pathway localisation, MDT support, resources/technology to improve system (data focussed)
Projects should target:

- Innovative projects that improve service provision to people with cancer
- Localisation of Optimal Care Pathways - prioritising lung, bowel and liver
- Building on systems and processes to improve access to psycho-oncology services, physical rehabilitation services and survivorship services
Essential Criteria

1. Lead applicant must be a NSW Local Health District, Specialty Health Network, Primary Health Network, non-government organisation, and the project must align with the organisation’s strategic plan or local cancer plan

2. Clear rationale of scope of project

3. Consumers should be part of the project

4. Inclusion of evaluation plan and strategy, with budget

5. Must demonstrate sustainability of the initiatives beyond funding period
Desirable Criteria

- Encourages collaboration within health networks
- Partners with academic bodies
- Sharing of knowledge within system (COP, IT)
- Focuses on priority cancers or communities of the NSW Cancer Plan
- Uses in-kind resources
- Has the potential for state-wide implementation
What we won’t fund

- Capital purchases
- Research proposals
- Continuation/evaluation of existing programs/initiatives, including localised cancer pathways
- Funding clinical service positions or delivery of clinical services. May be used to appoint a fixed term project officer to undertake the project.
Grantees seeking funding to localise an optimal care pathway are encouraged to:

- Focus on lung, bowel and liver cancer pathways
- Focus on referral to diagnosis and treatment. Include screening for bowel cancer.
- Make use of the Cancer care pathways – Mapping and Dissemination Toolkit
- Work closely with the primary health network or local health district
- Publish the final pathway/s on their local HealthPathways website.
Questions and Thank You