



DoH Grant Management System

User Guide: Application submission

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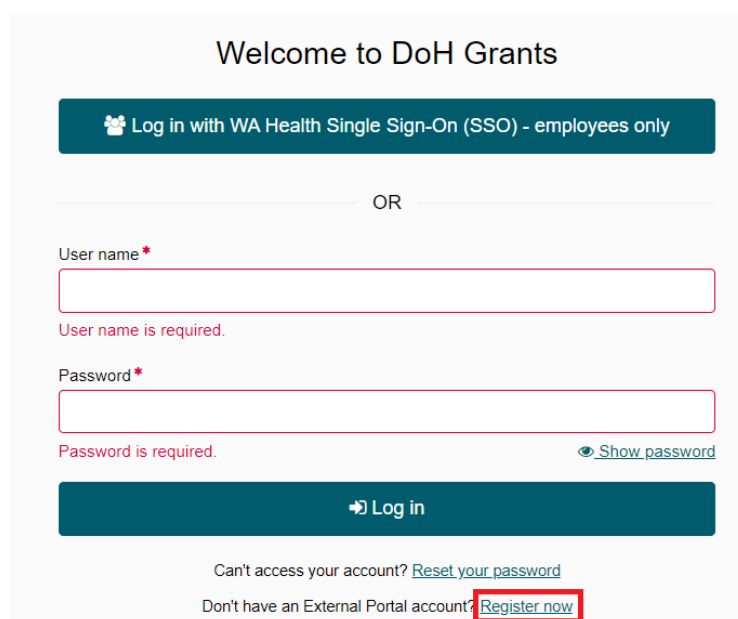
Please note this document is updated regularly. The version date is provided in the footer.

SECTION A: Applicant instructions

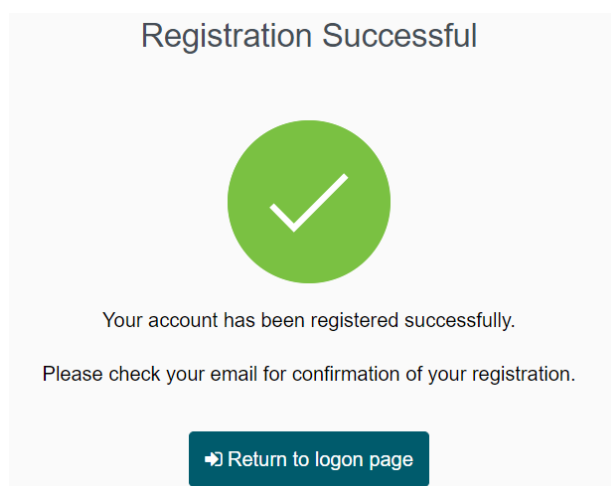
1. Create an account

Go to <https://grants.health.wa.gov.au/>.

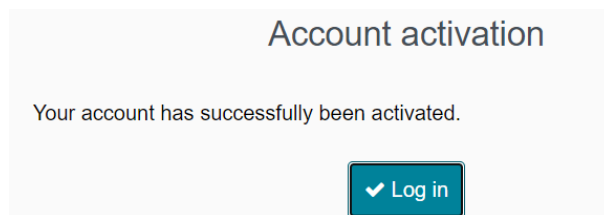
- If you are employed by WA Health, select 'Log in with WA Health Single Sign-On (SSO)'.
- If you are not employed by WA Health, select the 'Register now' weblink at the bottom.



Enter the email address you wish to use in the system (this will be your username), your first and last name, and select a password, noting the password must be a minimum of 10 characters in length and contain uppercase, lowercase, numeric and non-alphanumeric characters. Select 'Register an account' and you should see this screen:



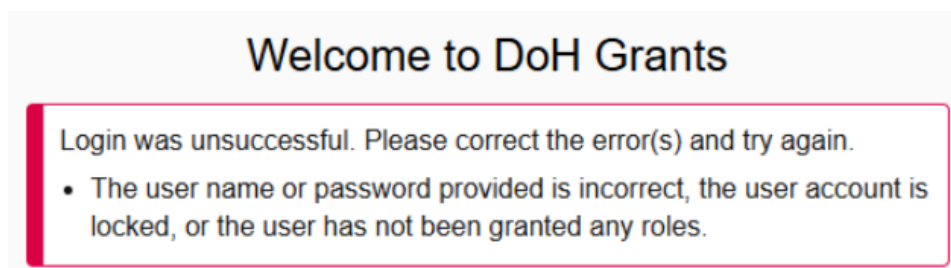
Go to your email and open the email from no-reply@mail.grants.health.wa.gov.au (it may take up to 20 minutes for you to receive this email – also check your 'Junk' folder). Open the weblink in the email to activate your account. The Account activation screen will appear:



Select '✓ Log in' and use the details you entered to register.

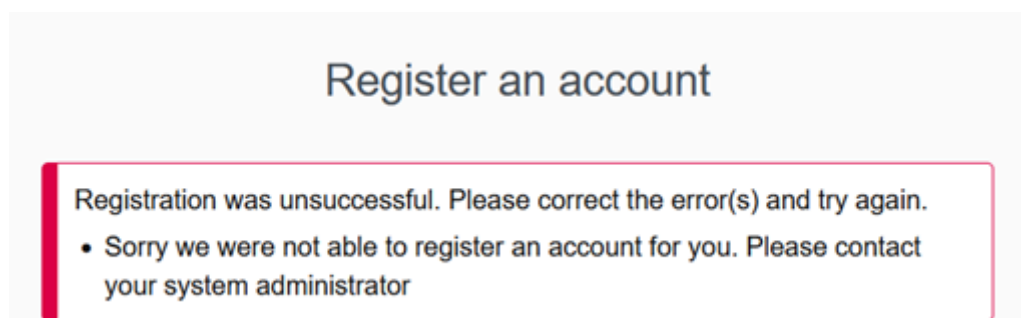
Login unsuccessful

If you receive the following error message, you may not have opened the weblink in the email sent from no-reply@mail.grants.health.wa.gov.au to activate your account (see bottom of previous page):

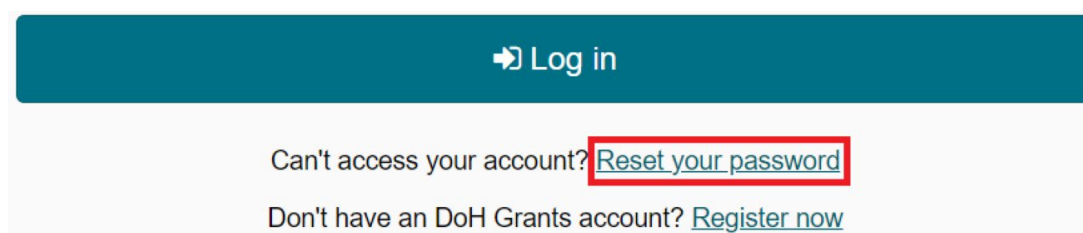


Registration unsuccessful

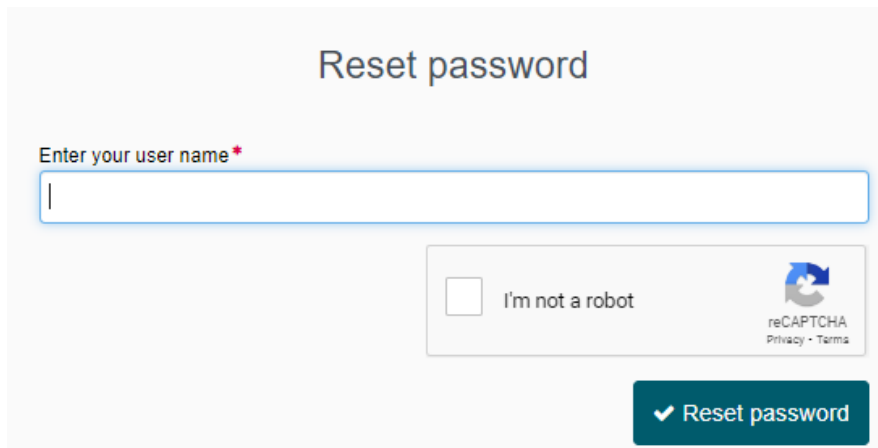
If you receive the following error message, a user account may already exist for you:



Try selecting 'Reset your password' on the log in page:



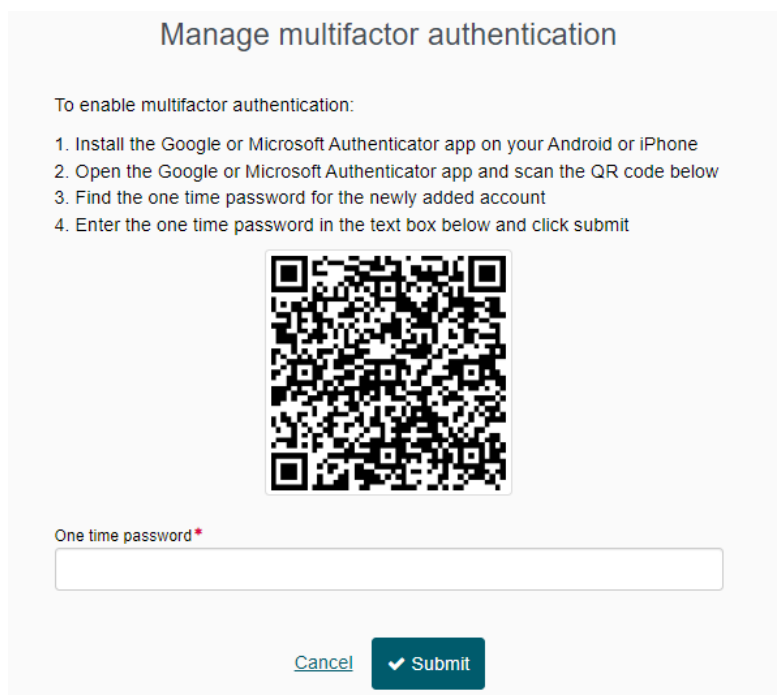
Enter your email address as your user name on the next screen, select the checkbox 'I'm not a robot' and select '✓ Reset password':



Check your email for an email from no-reply@mail.grants.health.wa.gov.au with the subject 'DoH Grants reset password confirmation'. If you receive this email, click on the link to reset your password. If this does not work, email DOH.GMS@health.wa.gov.au for assistance.

2. Multi-Factor Authentication

When you first log in, the system requires Multi-Factor Authentication (MFA) using either Microsoft Authenticator or Google Authenticator on your device. Users are responsible for maintaining the security of the device that is set up for MFA and ensuring appropriate steps are taken if the device is lost or compromised.



Microsoft Authenticator



Install the [Microsoft Authenticator](#) app on your phone. The QR codes to download the app for iOS and Android devices are below:

To install Authenticator on your iOS device

Scan the QR code



To install Authenticator on your Android device

Scan the QR code



Once downloaded, open the Microsoft Authenticator app and add your 'Grant Management System' account by selecting the blue circle at the bottom right (or select the + on the top menu bar and in the 'Add account' page, select 'Other account'), which will bring up the 'Scan QR Code' screen. Scan the QR code showing on your computer to add your Grant Management System user account, which will show as 'DoH+Grants' in the Authentication app. Select 'DoH+Grants' in the app to obtain a one-time password code to enter on the computer to log in.

Google Authenticator



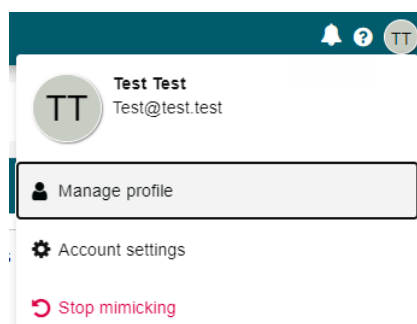
Android: [Google Authenticator \(Google Play\)](#)

iOS: [Google Authenticator \(App Store\)](#)

Once downloaded, open the Google Authenticator app and add your 'Grant Management System' account by selecting the '+' at the bottom right, then select 'Scan a QR Code'. Scan the QR code showing on your computer to add your Grant Management System user account, which will show as 'DoH Grants: your user email address' in the Authentication app. Enter the one-time password code showing for DoH Grants to log in.

3. User profile

Once you have successfully logged in, the first thing you need to do is set up your profile, as this contains data that will auto-populate application forms. Select the avatar icon at the top-right of the screen, then select 'Manage Profile':



Personal details

The first profile screen is the **Personal details** screen. Please note that most of this information is collected for statistical purposes only and is not visible to the Responsible Entity. Some information may be used to auto-populate application forms if you are the **Activity Lead** or a **team member**, for example, Residency, Discipline/Profession, Clinician

Profession. Once you enter all the mandatory fields (those with a red asterisk), select 'Save'. Please ensure you select your 'Title' from the drop-down options.

Title * <input type="text"/>		
First name * <input type="text"/>	Other names <input type="text"/>	Last name * <input type="text"/>
Preferred name <input type="text"/>		
Has disability <input type="checkbox"/>		
ORCID ID <input type="text"/>		
Gender * <input type="text"/>	ATSI * <input type="text"/>	Residency * <input type="text"/>
Discipline/Profession * <input type="text"/>	Clinician Profession * <input type="text"/>	Research career stage * <input type="text"/>
Postgraduate research degree * <input type="text"/>	Date degree awarded <input type="text"/>	Number of months of career disruption <input type="text"/>
WA Health employee * <input type="text"/>	Within which area are you located * <input type="text"/>	


If you enter your ORCID iD, the following will appear:


 [View ORCID record](#) Synchronise with ORCID


Select 'Synchronise with ORCID' to synchronise your DoH Grants user profile with ORCID. You will need to log into your ORCID account.


Phone details

Select **Phone details** from the menu on the left of the screen, then '+ Add new phone number'. This will auto-populate your phone number on application forms.

 Personal details


 Address details

 Email details

 Phone details

Phone details

You can manage your profile on this page.

 Add new phone number

There are no records to display. Use the add button to create a new record.

Employment, titles and affiliations

Select **Employment** from the menu on the left of the screen, then '+ Add new employment' for all the entities that you are employed by or have an affiliation with. 'Title' here is the position/title at the Entity you are employed by or affiliated with. Follow the instructions at the top of the screen. Employment information is required if you are an **Activity Lead** or a **team member** on an application, as this data will automatically populate the 'employment and affiliations' section of the application form.

Personal details

Address details

Email details

Phone details

Social media contacts

Appointments

Qualifications

Publications

Funding

Employment

Documents

Account settings

Availability

Employment

Please "Add new employment" rows for all the entities that you are employed by or have an affiliation with. Identify in the "Title" field if it is an adjunct or honorary title or a Clinical Academic position e.g. Honorary Research Fellow, Adjunct Associate Professor, Clinical Professor.
For **Entity** you must enter the Entity name exactly as it appears on the <https://abr.business.gov.au/> i.e. for WA Health employees it is the name of the Health Service Provider (HSP). For **Department**, if there is no Department in the Entity, please enter "Not Applicable".
For **Region** please enter the State.
If the row data has been imported from ORCID, you cannot edit it here and have to update the data in ORCID.

Title *

Entity *

City *

Country *

Start date *

End date

Department *

Region *

Australia

dd/mm/yyyy

dd/mm/yyyy

Save

Cancel

There is no employment data. To import data from ORCID click [here](#). This link will redirect you to the personal details page where an ORCID can be entered to allow data to be imported.

Note that if you have synchronised your profile with ORCID, you cannot edit the employment data imported from ORCID on this screen – you must update it in ORCID.

Important note: the 'Entity' name in the **Employment** screen must match the Entity name on <https://abr.business.gov.au/> exactly, as that is what is used by the system for the 'Responsible Entity' name, and if this is not entered correctly, the user will not be linked to that Responsible Entity in the system (noting that the system will only show the Entity name in CAPS if the Responsible Entity put it in CAPS in the form they submitted to be set up in the system). For example, for public hospital staff you must enter the Entity as the Health Service Provider name:

Current details for ABN 11 297 417 435

Current details

Historical details

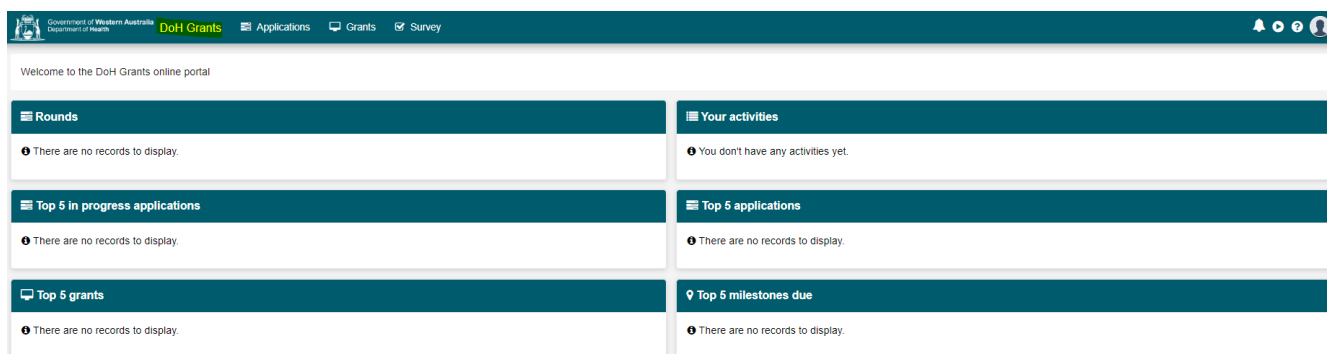
ABN details

Entity name: EAST METROPOLITAN HEALTH SERVICE

Once you have completed setting up your user profile, select 'DoH Grants' next to the Department of Health logo in the top menu to return to the home page.

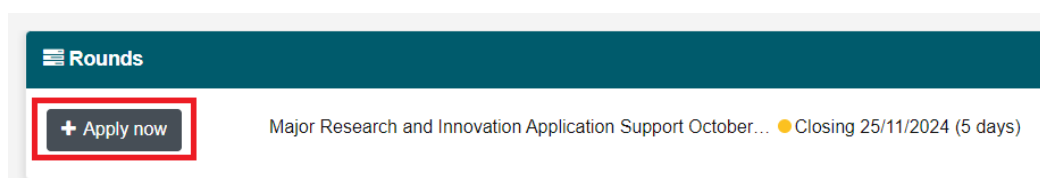
4. Home page

On this page you will find available funding program rounds, applications in progress, your grants, upcoming milestones, activities and applications. You can return here at any time by selecting 'DoH Grants' next to the Department of Health logo in the top menu.



5. Apply for funding

To create a new application, in the section 'Rounds' select '+ Apply now' next to the funding program round you wish to apply to:



Enter the application title (use the 'Activity title') and select '✓ Done':

Name application

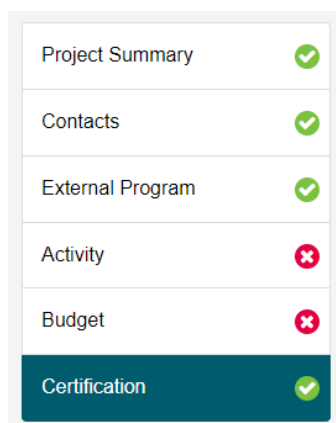
Please provide a name for the new application below (this will be used as a part of the submission process).

Application title *

✓ Done
✗ Cancel

Note: if you change the Activity title during the application, the Application title will only update once the application is submitted.

The relevant application form will open. Answer the application questions in each section and select 'Next' to go to the next section. If there are any mandatory questions that have not been answered, a red error message will appear under each mandatory question not answered when you select 'Next'.




If you wish to move to another section without answering all mandatory questions, select the section from the menu on the left of the screen (example shown opposite).

Once all mandatory fields in a section are answered, the section will be marked with a green tick. If there are any mandatory questions that have been left blank or error messages, there will be a red cross.

Important note: fields that are greyed out in the application form are automatically populated from the relevant user's profile. If there is no data in the greyed out field, then the relevant user needs to enter the data in their user profile so that it appears in the application form.


Activity Lead

Activity Lead name  *

Title *

First Name *

Last Name *

ORCID (if relevant) 

Primary phone number *

Primary email address *

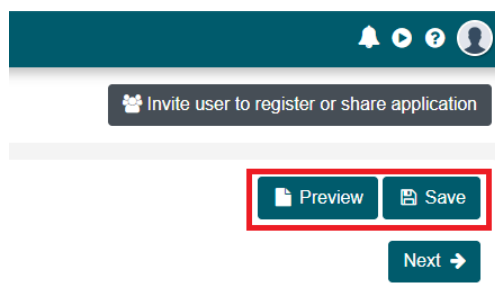
Citizenship/residency status *

Note: this answer is from the Activity Lead user profile and is collected for statistical purposes only

- ☐ Australian citizen
- ☐ Australia permanent resident
- ☐ New Zealand citizen
- ☐ Appropriate work visa

Downloading the application form

At any time you can select 'Save' at the top-right of the screen to save. Select 'Preview' to download your application - the application will be downloaded in a [Zip file format](#) and include the application in word and pdf format and all uploaded documents.



Responsible Entity

If the name of the Responsible Entity (the entity which would administer grant funds) does not appear in the Responsible Entity drop-down, please email DOH.GMS@health.wa.gov.au with the subject 'GMS New Responsible Entity' so that the forms required for setting up the Responsible Entity can be completed. This includes setting up the four position roles required in the system of pre-award contact, post-award contact, finance contact and authorised signatories.

Inviting team members

It is recommended that you invite **team members** to the application as soon as possible, since their user profile data is required for application questions and they are required to sign the application prior to inviting the Responsible Entity to certify. Select 'Invite user to register or share application' from the top-right, then select '+ Add another user':

Invite user to register, share & manage access

There are currently no users assigned to this application.

+ Add another user

Preview Save

Enter the team member's email address and select 'Invite and share with edit access'. The system will advise if the user is found in the system or if no user is found. If no user is found, an invitation will be sent inviting them to register an account:

Invite user to register, share & manage access

The list of users currently assigned to this application are listed below

SEND	NAME	USERNAME	ACCESS STATUS	MODIFY ACCESS
<input checked="" type="checkbox"/>		test@testtest.au <small>No user is found. An invitation will be sent to this email address</small>	No current access	Invite only Invite and share with view access Invite and share with edit access

+ Add another user

Save and send Cancel

Select '+ Add another user' at the bottom left to invite multiple people, then select '✓ Save and send' to send the invitation(s). Please share this user guide with users that you invite to your application to assist them. It is important that each team member follows the instructions above to enter user profile information since the greyed out fields of the application form are automatically populated from the user profile:

Team member 1

Title *

First Name *

Last Name *

ORCID (if relevant) ?

Primary phone number *

Primary email address *

Certification by consumer representatives (if applicable)

Consumers are not required to be users of the system. It is recommended that you share a copy of the application with each consumer outside the system (to download the application, select 'Preview' from the top-right). Once the consumer representative agrees to the consumer certification statement, anyone (this includes team members) with edit access to the application can insert the consumer representative name and either drop an image of their signature (if they provide it) or upload other evidence of approval (such as an email).

Consumer representative certification

I certify that:

1. I commit to taking part in the Activity proposed in this application for the duration of the grant if successful
2. I agree to abide by the *Guidelines and Conditions*
3. I agree to be contacted in relation to the grant, e.g. for evaluation of the grant funding program.

Consumer Representative 1

First Name *

Last Name *


Select the way to sign: *

☐ Sign on screen

☐ Drop an image

☐ Upload other evidence

Date *



Certification by team members

Invite all **team members** following the instructions above. In the 'Certification' section, each team member must read the 'Team certification' and insert their signature and date under their name:

Team certification

We certify that:

- a. we commit to taking part in the Activity proposed in this application for the duration of the grant if successful.
- b. the information supplied by us on this form is complete, true and correct in every particular.
- c. we agree to abide by the *Guidelines and Conditions*.
- d. we agree to participate in an evaluation whether the application is successful or unsuccessful.
- e. we have discussed the likely impact of the Activity on participating organisations, and this Activity is acceptable to them.
- f. we have relevant permissions to use any third-party intellectual property required to deliver the Activity and have Freedom to Operate for this Activity.
- g. we agree to obtain any research ethics and governance approvals that might be required for undertaking the funded Activity.
- h. we understand and agree that if the application is successful, that no further claim will be made on the Department of Health to cover any expenditure beyond the approved budget.
- i. if the Activity Lead is employed by the WA public health system and the Responsible Entity is not the WA public health system entity (includes Clinical Academics where applicable), the Activity Lead will register a Conflict of Interest for this grant in accordance with the Department of Health [Managing Conflicts of Interest Policy](#) that addresses how the Activity Lead intends to ensure WA Health intellectual property (IP) is protected.
- j. the Activity Lead does not have overdue reporting obligations for any grant funding program administered by the Office of Medical Research and Innovation (including FHRI Fund programs) from any year (excludes authorised extensions).
- k. we will advise if funding is awarded for any component of the Activity.

Activity Lead invites the Responsible Entity to certify

Once all sections are completed (all pages on the left menu have a green tick next to them), and all team members (and consumer representatives if applicable) have signed the 'Certification' section, scroll to the bottom of the Certification section and select 'Yes' (which will lock editing of the application except for the Responsible Entity signatures):

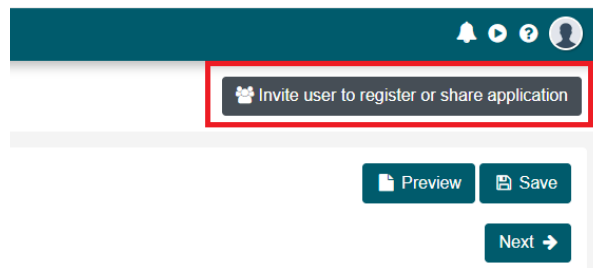
Application ready for Responsible Entity to certify *

- ☐ Yes
- ☒ No

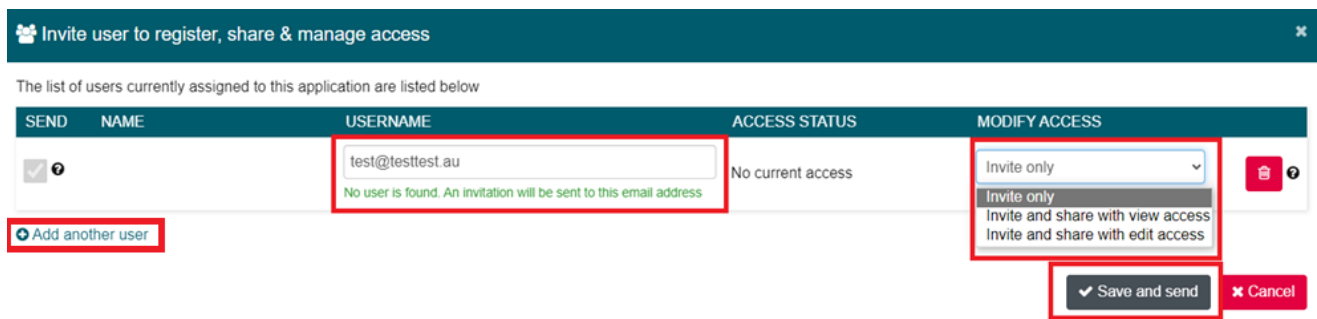
The Responsible Entity is to determine whether the **pre-award contact** or the **finance contact** is to certify the application first, noting that the **pre-award contact** is the only user who can submit the application. Invite the relevant contact following the instructions below. Upon submission by the Responsible Entity to Department of Health, an email will be sent to the **pre-award contact** and **Activity Lead** cc'd to all **team members** and the application owner (the person who created the application) confirming submission with a copy of the application attached.

Option1: Pre-award contact certifies before finance contact

Invite the **pre-award contact** selected in the 'Contacts' section of the application by selecting 'Invite user to register or share application' from the top-right:



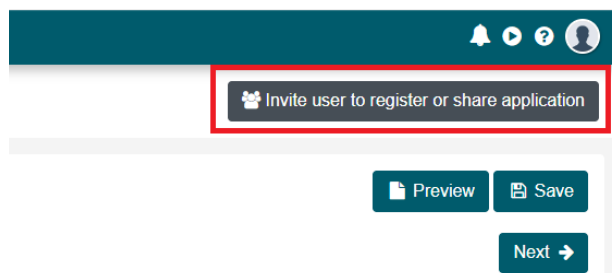
Select '+ Add another user' from the bottom left. Enter the **pre-award contact** email address as shown in the 'Contacts' section. Select 'Invite and share with edit access' then select '✓ Save and send'.



The **pre-award contact** is responsible for arranging certification by the **finance contact**.

Option 2: Finance contact certifies before pre-award contact

Invite the **finance contact** by selecting 'Invite user to register or share application' from the top-right:



Select '+ Add another user' from the bottom left. Enter the **finance contact** email address. Make sure the user is found (if they are not found, then they have not been set-up in the system and therefore will not have the required system position role of **finance contact**. Contact the **pre-award contact** at the Responsible Entity to find out who has the position role of **finance contact** at the Responsible Entity). Select 'Invite and share with edit access' then select '✓ Save and send'.

Invite user to register, share & manage access

The list of users currently assigned to this application are listed below

SEND	NAME	USERNAME	ACCESS STATUS	MODIFY ACCESS
<input checked="" type="checkbox"/>		<div>test@testtest.au</div> <div>No user is found. An invitation will be sent to this email address</div>	No current access	<div>Invite only</div> <div>Invite only</div> <div>Invite and share with view access</div> <div>Invite and share with edit access</div>

Add another user

Save and send

Cancel

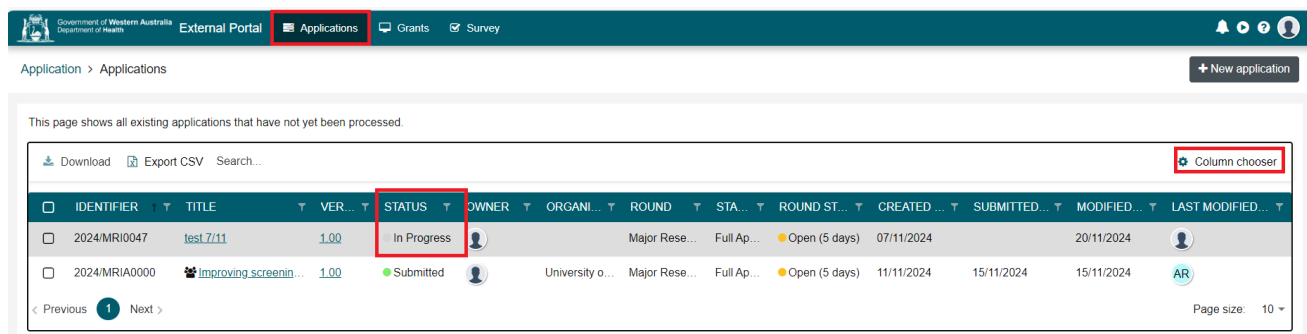
The **finance contact** is responsible for arranging certification by the **pre-award contact**.

SECTION B: Responsible Entity instructions

1. Application invitation

When you have been invited to certify an application, you will receive an email with the subject: WA Department of Health application invitation (application ID).

Go to <https://grants.health.wa.gov.au/> and log in with your details. Select 'Applications' from the top menu:



This page shows all existing applications that have not yet been processed.

Download Export CSV Search...

Column chooser

IDENTIFIER	TITLE	VER...	STATUS	OWNER	ORGANI...	ROUND	STA...	ROUND ST...	CREATED ...	SUBMITTED...	MODIFIED...	LAST MODIFIED...
2024/MRI0047	test 7/11	1.00	In Progress			Major Rese...	Full Ap...	Open (5 days)	07/11/2024		20/11/2024	
2024/MRI0000	Improving screenin...	1.00	Submitted		University o...	Major Rese...	Full Ap...	Open (5 days)	11/11/2024	15/11/2024	15/11/2024	AR

< Previous 1 Next >

Page size: 10

Filter by the Status 'In Progress'. The 'Round status' will show the how many days until applications close. To open an application, select the 'Title'. Note: you can choose the columns to display on this screen at the top-right of the table.

2. Pre-award contact certification

Review the details entered in each section of the application. If anything does not meet the certification criteria, email the Activity Lead the edits that are required and request that they advise you once they have been made.

If all details are correct, go to the 'Certification' section, scroll down to the 'Responsible Entity certification' and read the certification:

Responsible Entity certification

I certify that:

- I am an authorised representative of the Responsible Entity
- all the eligibility criteria listed in the *Guidelines and Conditions* are met
- the Activity Lead will have a position or title at the Responsible Entity for the period of the MRIAS and External Program grant if successful.
- if the Activity Lead is not an employee of the Responsible Entity, evidence of an affiliation agreement with, or in-principle agreement for subcontracting to, the relevant Employer has been attached, where this evidence has not previously been provided to the Office of Medical Research and Innovation.
- the Responsible Entity endorses this application and confirms that the information supplied on this form is complete, true and correct in every particular.
- the Responsible Entity will coordinate the major External Program funding application and is willing to administer the grant if successful under the conditions specified in the Guidelines and Conditions, including the requirement to ensure that appropriate agreements are in place with the Activity Lead, team members and participating entities.
- the grant will not constitute the entire financial base of the Responsible Entity, i.e. the Responsible Entity has other external sources of income.
- The Responsible Entity or other entities that fund or are involved in the Activity are not part of an industry that produces products or services that may contribute to poor physical health or mental wellbeing of the community.
- the Department of Health will be notified immediately of any changes to eligibility or changes to the information originally provided in this application.

Once you have signed this section please invite the **Finance Officer** to sign this form

First Name *

Last Name *

Position *

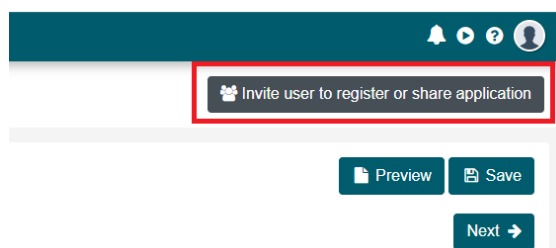
Signature *

Date *

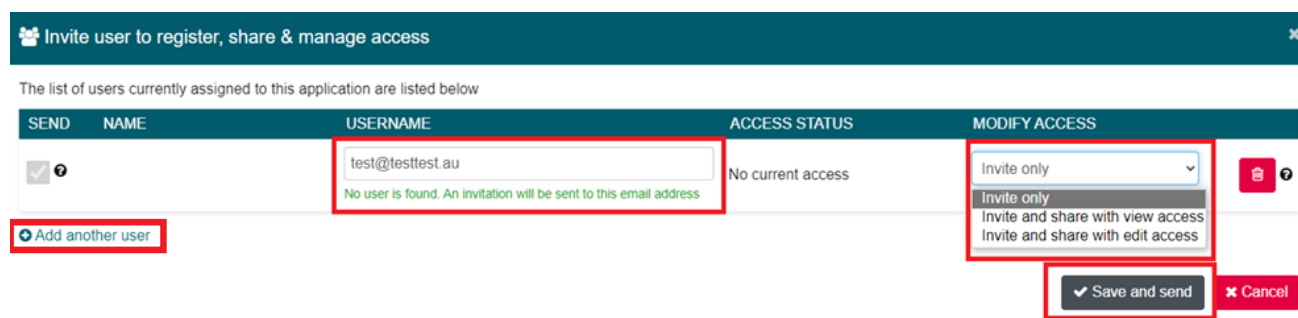


The name and position will be automatically populated (contact DOH.GMS@health.wa.gov.au if there are errors in these details). Insert your signature, select the date, then scroll up to the top of the screen and select 'Save'.

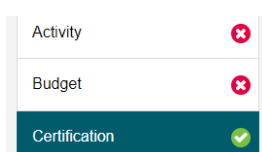
If the application has not been certified by the **finance contact**, invite the **finance contact** by selecting 'Invite user to register or share application' from the top-right:



Select '+ Add another user' at the bottom left. Enter the **finance contact** email address and select 'Invite and share with edit access'. Make sure the user is found (if they are not found, then they have not been set-up in the system and therefore will not have the required system position role of **finance contact**. Contact the **pre-award contact** at the Responsible Entity to find out who has the position role of 'finance contact' at the Responsible Entity). Select '✓ Save and send'.



3. Finance contact certification



Select the 'Budget' section from the application menu on the left. Review all the details in the 'Budget' section to ensure they exclude GST, are true, correct and reflect the latest costing information.

If the anything in the 'Budget' section does not meet the certification criteria, email the Activity Lead the edits that are required and request that they advise you once they have been made.

To certify, select 'Certification' from the application menu on the left and scroll down to the 'Responsible Entity finance officer (or equivalent) certification' section:

Responsible Entity finance officer (or equivalent) certification

I certify that:

- a. I am an authorised finance representative of the Responsible Entity
- b. the budgeted costs in this application are true and correct and reflect the latest costing information available to me.
- c. amounts requested in the Budget are in Australian dollars and are exclusive of Australian GST.
- d. I understand that funding will only be made available for the scope of work described in the application, or any modifications to the scope of work approved in writing by the Department of Health. The Department of Health is not obliged to underwrite any costs beyond funding awarded through this Program.

First Name *

Last Name *

Position *

Signature *

Date *



If you have been set up as a **finance contact** in the system then you will be able to enter your name and position title at the Responsible Entity (the fields will not be greyed out). Insert your signature, select the date, then scroll up to the top and select 'Save' at the top-right:

Preview

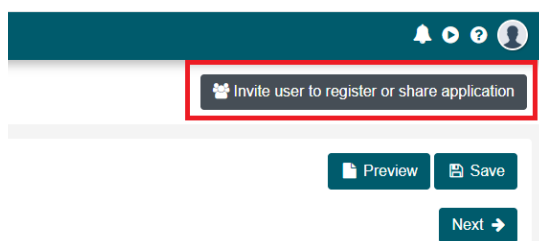
Save

If you were invited by the pre-award contact

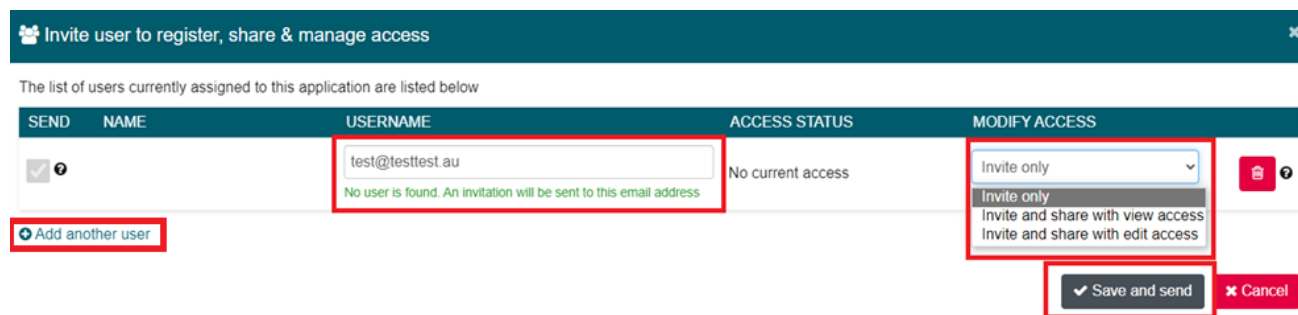
Notify the **pre-award contact** that you have certified the application by forwarding the email that invited you to the application to the **pre-award contact**. Only the Responsible Entity **pre-award contact** can submit the application, hence they are the only person who can view the submit button on the application form.

If you were invited by the Activity Lead

Invite the **pre-award contact** selected in the 'Contacts' section of the application by selecting 'Invite user to register or share application' from the top-right:



Select '+ Add another user' from the bottom left. Enter the **pre-award contact** email address as shown in the 'Contacts' section. Select 'Invite and share with edit access' then select '✓ Save and send'.



4. Application submission (by pre-award contact)

Select 'Certification' from the application menu on the left. Scroll down to the bottom of the 'Certification' section and select 'Submit':

Submit

If successful, a window will appear with a green tick and then a link to download the application forms and attachments will appear:

Application submission

Select the application attachments you wish to download:

[All application forms and attachments \(.zip\)](#)

This package of files contains your application content, attachments, and other files supporting your application.

> Next

The next screen will confirm notification of successful submission:

Application submission

The application **2024/IF0010** has been successfully generated.

Your application has been successfully submitted. Thank you for your application. To continue please click the close button.

< Back

✕ Close

An email will be sent to the **pre-award contact** and Activity Lead cc'd to all team members and the application owner (the person who created the application) confirming submission with a copy of the application attached. **Note: it may take up to 20 minutes to receive this email.**