



Western Australian  
Future Health Research  
& Innovation Fund

# FHRI Fund

## Distinguished Fellows 2024-25

### Guidelines and Conditions

**Application due by:**  
1:00pm (AWST) Wednesday 25 June 2025

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## 1. Introduction

The Future Health Research and Innovation (FHRI) Fund Distinguished Fellows 2024-25 (the Program) is a funding program of the Western Australian (WA) [Future Health Research and Innovation \(FHRI\) Fund](#).

The FHRI Fund provides a secure source of funding to drive health and medical research, innovation and commercialisation and through these activities, improve the health and prosperity of all Western Australians. It also provides an opportunity to diversify the economy, create jobs, improve the sustainability of the health system and position WA as a leader in research and innovation.

This Program contributes to the [FHRI Fund Priority Goals](#):

- target high-performing researchers in WA to maintain and/or advance the State's position as a leader in health and medical research
- enhance clinical trial capacity and expertise to improve the quality of clinical trials in WA and make the State more attractive to funders of clinical trials (grant funding and commercial sponsors).

The expected outcomes are in alignment with the following objectives of the [Western Australian Future Health Research and Innovation Fund Act 2012](#):

- improving the health and wellbeing of Western Australians
- advancing Western Australia to being, or maintaining Western Australia's position as, a national or international leader in research and innovation activities.

The Program is administered by the Office of Medical Research and Innovation (OMRI), WA Department of Health (Department of Health). Queries may be directed to [DOH.OMRI@health.wa.gov.au](mailto:DOH.OMRI@health.wa.gov.au).

## 2. Purpose

The purpose of the Program is to provide 5-year fellowship packages to attract outstanding and innovative world-class research leaders (Activity Lead) to WA who will undertake a program of research that builds WA's reputation and capability for WA-led globally recognised research.

The objectives of the Program are to:

- improve WA's success in nationally and internationally competitive funding programs
- deliver high quality research outputs with demonstrated research and health impacts in the relevant field
- support sustainable and successful research careers for early- to mid-career researchers supervised by the Activity Lead
- support successful completion of research studies by students (Masters by research and PhD) who are associated with the Activity Lead's program of research.

## 3. Program description

Fellowship packages are being made available to international or interstate senior research leaders, appointable at academic Level D or E professor, or equivalent clinical level (for allied health<sup>1</sup> and health sciences, dental, medical, nursing and midwifery professions), to relocate to WA and undertake a significant program of research aligned to the strategic

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<sup>1</sup> Allied Health includes all disciplines that fall under this [category](#)

areas of the WA Health and Medical Research Strategy 2023-2033 which include: Aboriginal health, precision health, regional and remote, digital health, and prevention.

The Activity Lead will be required to:

- develop and undertake a research program in a relevant field in WA, which will achieve significant research outputs within the 5-year term of the funding. Expected outputs include:
  - peer-reviewed publications in high-ranking journals
  - additional research income through national and international competitive grant funding and funding through industry engagement, with at least one competitive Category 1<sup>2</sup> grant application submitted within the first 12 months of the Fellowship
  - increased research capacity through appointment of local research personnel and students and completion of their research studies
  - demonstrated translation of the research to health and/or commercial impacts.
- establish significant new partnerships with relevant research and non-research organisations and with consumers to support the program of research and achieve the expected outputs and impacts.
- plan for sustainability of the research program, including appointed research personnel, beyond the 5-year term of this funding.
- provide broader leadership and mentoring across the Responsible Entity, partnering organisations and WA more broadly with the aim of driving better research outcomes for WA.

Responsible Entities through which the Activity Lead will be appointed are encouraged to partner with other research and non-research organisations to provide the required cash contribution to support the Activity Lead and program of research.

Funding will be awarded through a competitive and merit-based process.

The Activity Lead will be responsible for coordinating the research Activity, ensuring its timely execution, and complying with all reporting requirements.

The Responsible Entity\* will be accountable for the governance and financial management of any funding awarded.

*\* It is acknowledged that the term Responsible Entity has traditionally been used by universities and research institutes, however for this grant, the term Responsible Entity is inclusive of industry and reflects that grant agreements are the responsibility of the contracted entity.*

## 4. Eligibility

To be eligible for this Program all of the following criteria apply:

- Applications must be submitted through a Responsible Entity which:
  - has an active Australian Business Number (ABN)
  - has a physical and operational presence in WA

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<sup>2</sup> Category 1 grants are defined in the Australian Government's [Higher Education Research Data Collection](#) specifications as those being provided through Australian competitive research and development funding programs such as those administered by the National Health and Medical Research Council

- be a WA university, WA research institution or a WA public health service provider<sup>3</sup> that is a recognised National Health and Medical Research Council (NHMRC) Administering Institution.
- The Activity Lead must:
  - be a 'mid or post mid-career' researcher who has held their PhD for more than 5 years from the date that their PhD was passed
  - not be working or living in WA or already committed to relocating to WA, and must not be employed by a WA university, research institution, WA public Health Service Provider or public-private partnership provider at the time of application
  - be an Australian or New Zealand citizen, a permanent resident of Australia, or have an appropriate work visa in place at the time of appointment if successful
  - have no overdue reports for any OMRI or FHRI Fund grant funding programs from any year (excludes authorised extensions)
  - physically reside in WA for a minimum of 80 per cent of the period of the Fellowship package
  - be employed by the Responsible Entity for the period of the Fellowship at a minimum of 0.5 FTE to work on the nominated research program
  - have a position or title at the Responsible Entity for the period of the Activity

*The Activity Lead will be required to declare which of the following applies:*

- (a) *employee of the Responsible Entity; or*
- (b) *honorary or adjunct title at the Responsible Entity.*

*In the case of (a), if the Activity Lead is also employed by the WA public health system (may include Clinical Academics) they 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.*

*In the case of (b), if the Activity Lead is employed by another entity (the Employer), this entity must have an active ABN, a physical and operational presence in WA and evidence must be provided that either:*

- i. an affiliation agreement\* exists between the Responsible Entity and the relevant Employer; or*
- ii. the intention is for this Activity to be subcontracted\* to the relevant Employer and there is in-principle agreement between the Responsible Entity and the Employer for this arrangement.*

*\* the affiliation/subcontract agreement must clearly define each entity's responsibilities in relation to the Activity, and in accordance with the 'Contractual arrangements' section below, include relevant permissions to use third-party intellectual property (IP) required to deliver the Activity and address ownership of new IP generated by the Activity.*

- There must be a cash contribution equal to 25% of the value of the total funding package.
- The Responsible Entity or other entities that fund or are involved in the Activity must not be part of an industry that produces products or services that may contribute to poor physical health or mental wellbeing of the community.

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<sup>3</sup> WA public health service provider means a health service provider established by an order made under section 32(1)(b) of the *Health Services Act 2016*, such as the Child and Adolescent Health Service, East Metropolitan Health Service, North Metropolitan Health Service, South Metropolitan Health Service, WA Country Health Service and PathWest.

- The grant funding must not constitute the entire financial base of the Responsible Entity i.e. the Responsible Entity must have other external sources of income.
- The Responsible Entity must ensure applications meet all eligibility criteria as set out in these guidelines.
- Applications must be submitted in accordance with the 'Application instructions' section of this document.
- An application may be deemed ineligible and excluded from further consideration if OMRI identifies that:
  - it does not meet all eligibility criteria as set out in these guidelines
  - the proposed Activity duplicates activity previously or currently being undertaken
  - it includes any incomplete, false or misleading information
  - it was submitted after the advertised closing date and time.
- Grant offers may be withdrawn if it is determined that eligibility criteria are not met.
- OMRI reserves the right to request further information and make final decisions regarding eligibility.
- Decisions made in relation to previous grant programs will not be regarded as precedents and will not be considered when assessing eligibility for this grant program.

## 5. Program funding

The Activity Lead will be provided with an attractive 5-year funding package consisting of salary support for the Activity Lead as well as other research personnel salaries, direct research funding and relocation costs.

Each grant will be to the value of up to \$3.75 million funded through the FHRI Fund.

In exceptional circumstances, applications may include a request for Reserve Funding. Applications seeking Reserve Funding are required to provide additional information to clearly justify why the budget requested is necessary. Where this is requested the Fellowship grant is to the value of up to \$4.5 million funded through the FHRI Fund.

A cash co-contribution equal to 25% of the Fellowship package including any Reserve Funding, must be made by the Responsible Entity and can include cash contributions made by other partner organisation(s).

The funding through the FHRI Fund may be used for:

- Salary costs:
  - may include salary for the Activity Lead (the Fellow)
  - may include clinical salary for the Activity Lead (the Fellow) up to 0.5 FTE for clinician-researchers where clinical duties are justified to achieving the aims, objectives and deliverables of the Fellowship
  - may include salary for research personnel for example, post-doctoral researcher(s), research assistants(s)
  - may include Award/Agreement increases and salary increments as appropriate
  - may include leave entitlements that accrue and are taken during the period the salary is being paid by the grant funding (noting annual leave is accrued at a rate of 7.69% and long service leave at a rate of 2.5% of the base salary paid by grant funding)
  - may not include leave entitlements accrued outside this period, parental leave, sabbatical, severance and termination payments

- may include superannuation, payroll tax and workers compensation as on-costs up to a maximum of 30%, noting that WA public health system salaries can only include superannuation as a salary on-cost.
- Non-salary costs:
  - may include relocation costs of up to a maximum of \$30,000 in the first year and can include relocation costs for other research personnel appointed
  - may include expenses such as essential services, supplies, equipment unique to the Activity and consumer involvement
  - for travel will not be approved unless strongly justified as being essential to the undertaking of the Activity and must not include costs related to conference attendance
  - may be requested for equipment, however, the total value of all equipment items must not exceed \$50,000, and quotes for each item must be attached to the application.
- Overhead charges:
  - may be requested up to a maximum of 10% of the total budget, noting that WA public health system Responsible Entities cannot claim standard overhead charges in accordance with the Financial Management Manual s522 (grant funding administered by OMRI is exempt).

Salary will be paid to the Activity Lead by the Responsible Entity in accordance with their employment conditions and the applicable FTE. Salaries for other research personnel will be paid to the employing organisation in accordance with their employment conditions and applicable FTE.

Funding will only be made available for the scope of work described in the Application Form, or any modifications to the scope of work approved in writing by OMRI. The Department of Health will not underwrite any costs beyond the funding awarded through the Program.

The intention is that funding will be spent within WA unless goods and services expenditure items are not available in WA and/or it is beneficial to WA if goods or services are procured from outside WA.

All budget items should be adequately described and justified as consideration is given to budgets during the assessment process and applicants must ensure that the budget is suitable for supporting the Activity Lead to achieve the aims of the Fellowship and the Fellowship deliverables.

Budgets must be calculated accurately, as requests for additional funding will not be considered.

Funding is offered subject to FHRI Fund budget availability, which could be varied in the event of unforeseen circumstances.

Relevant external funding information must be included in the Budget section of the Application Form.

## **6. Program conditions**

### ***Fellowship commencement***

The Activity Lead must relocate to WA and commence their employment and Fellowship with the Responsible Entity within 6 months of the award of the grant.

### ***Cash co-contribution***

A cash contribution equal to 25% of the total Fellowship Package must be made by the Responsible Entity and can include cash contributions made by any other partner organisation(s).

The cash contribution must be 'new' cash for the purposes of conducting the Fellowship. Therefore, funding from active research grants received by the Activity Lead, Responsible Entity and any of the partners cannot be included as a cash contribution in the support package.

Cash contributions can include:

1. items listed in Section 5 Program Funding
2. PhD Scholarships
3. clinical salary costs up to 0.5 FTE for a clinician-researcher Activity Lead.

### **Competitive grant application**

The Activity Lead must submit at least one competitive Category 1 grant application within the first 12 months of the Fellowship.

## **7. Application instructions**

The instructions below must be followed when making a submission:

- The Application Form available from the [FHRI Fund website](#) must be submitted by **1:00 pm (AWST) Wednesday 25 June 2025**.
- The application must be completed in Arial font 11 point or larger.
- Electronic signatures are acceptable if approval to use the electronic signature has been obtained from that person.
- The application is to be emailed to [DOH.OMRI@health.wa.gov.au](mailto:DOH.OMRI@health.wa.gov.au) as a **single** Adobe Acrobat PDF or Microsoft Word file, not exceeding 5 MBs, including CVs and bibliographic references (if applicable). The application document and email subject line must be titled as follows:  
Activity Lead SURNAME, First name – FHRIFundDF  
e.g. SMITH, Alex – FHRIFundDF
- Applications must be complete, include requested certifications and be submitted by the closing date/time. Consideration must be given to the time needed to comply with internal deadlines.

Acknowledgement of receipt of the Application Form will be provided via email to the Responsible Entity and Activity Lead within 5 working days of the closing date.

Queries regarding the application process should be directed by email to [DOH.OMRI@health.wa.gov.au](mailto:DOH.OMRI@health.wa.gov.au).

## **8. Selection process**

### **Assessment Process**

Funding will be awarded on merit, based on a process of assessment and selection.

Depending on the number of applications received, a review panel may conduct a shortlisting assessment stage to determine the eligible applications that are most aligned with the aims and objectives of the Program.

All eligible applications, or only those selected if a shortlisting assessment stage is undertaken, will be referred for full assessment and scoring by a review panel comprising of, health and medical research and/or innovation leaders and experts and consumer representative(s).



This assessment will be based on the criteria and % weightings set out in the table below. Conflicts of interest that may arise will be treated in accordance with the WA health system [Managing Conflict of Interest Policy and Guidelines](#).

<b>Assessment criteria</b>	<b>%</b>
<p><b>Quality of the Activity Lead (Fellow)</b></p> <p>Relative to opportunity, the Activity Lead demonstrates:</p> <ul style="list-style-type: none"> <li>• major accomplishments that have had a significant impact in their field</li> <li>• recognition internationally as leaders in their field</li> <li>• track record of attracting national and international funding for research</li> <li>• track record of partnerships including with industry resulting in research translation through commercialisation and/or realisation of health or other impacts</li> <li>• track record of influencing policy and/or practice</li> <li>• capacity and plan for meeting the Fellowship deliverables.</li> </ul>	<b>30</b>
<p><b>Quality and significance of the research program</b></p> <p>The quality and significance of the proposed research programs components including:</p> <ul style="list-style-type: none"> <li>• the hypothesis, research questions and objectives</li> <li>• alignment with the WA Health and Medical Research Strategy 2023-2033</li> <li>• the scientific framework, design, methodology and analysis, including techniques, target group(s) and measures to be used</li> <li>• expected research outcomes and outputs (e.g. publications, products, services, intellectual property, consulting, licensing)</li> <li>• expected research knowledge and translation of research evidence into policy and/or practice, commercial outputs, health and/or other impacts</li> <li>• an achievable timeline</li> </ul>	<b>20</b>
<p><b>Leadership</b></p> <p>Relative to opportunity in their field, the Activity Lead demonstrates superior performance in:</p> <ul style="list-style-type: none"> <li>• supervising and mentoring research students and post-doctoral fellows within and beyond their research group</li> <li>• conception and direction of a research program(s)</li> <li>• building and maintaining partnerships and collaborative networks to achieve research outcomes within and beyond their institution</li> <li>• experience and contribution to peer review of publications and grant applications.</li> </ul>	<b>20</b>
<p><b>Environment of the Responsible Entity</b></p> <p>Feasibility and attractiveness of the environment of the Responsible Entity and any partner organisation(s) including:</p> <ul style="list-style-type: none"> <li>• quality of the existing or planned institutional environment at which the Activity Lead will be based including opportunities for local, national and international collaborations and partnerships</li> <li>• access to required resources, including expertise and equipment.</li> <li>• the likelihood of the Activity Lead and/or Responsible Entity to develop a feasible plan for longer-term support to sustain the program of research and program personnel beyond the term of the Fellowship package.</li> </ul>	<b>10</b>
<b>Budget and commitment</b>	<b>10</b>

<p>Budget justification for the requested funding and feasibility and attractiveness of commitments made by the Responsible Entity and any other partner organisations(s) including:</p> <ul style="list-style-type: none"> <li>• budget items are appropriate and adequately justified to achieve the proposed research program</li> <li>• cash and in-kind contributions are substantial and directly support the Activity Lead and the research program</li> <li>• (if applicable) strong justification for the inclusion of clinical salary as part of the cash contributions clearly describing why a clinical salary is required, why the nominated clinical FTE is required and how this supports the Activity Lead achieving the aim of the Fellowship and its deliverables</li> <li>• (if applicable) strong justification for requesting Reserve Funding, including additional benefits that will be realised and value for money.</li> </ul>	
<p><b>Consumer involvement</b></p> <p>Appropriate levels of consumer involvement throughout the project timeline including:</p> <ul style="list-style-type: none"> <li>• demonstrated excellence in involving consumers in research</li> <li>• how consumers have been involved in the development of the research program</li> <li>• plan for ongoing engagement.</li> </ul>	<b>10</b>

### **Selection of recipients**

Based on the assessments and recommendations of the review panel, the recommended applications will be invited to an interview to be conducted by the OMRI and review panel. Online interviews will be conducted between October and November 2025. Applicants must ensure they are available for interviews. Recommended applicants will be contacted by OMRI in September 2025 to schedule an interview.

The Department of Health will determine and approve the awarding of grants in accordance with the Department of Health financial and procurement processes and delegation authorities.

OMRI reserves the right to negotiate lower funding rates than requested, the timing of the funding awarded or to request modification to the Fellowship on a case-by-case basis.

## **9. Consumer involvement**

In line with the National Health and Medical Research Council (NHMRC) definition, consumers are people who have lived experience of a health issue. They include patients and potential patients, carers and people who use health care services. Consumers can also be people who represent the views and interests of a consumer organisation, a community or a wider constituency.

There is increasing recognition of the benefits of involving consumers in research and innovation. Effective consumer involvement can ensure research and innovation is relevant to the WA community and improves translation into policy and practice.

Health consumers should be engaged during the development of funding applications and embedded in the proposed Activity by being provided with a detailed description of their role and contribution and, where appropriate, included as a team member.

Consumer involvement should incorporate:

- clearly defined relationships with health consumers or community groups who have 'lived experience' of the issue the Activity addresses

- demonstrated understanding of the benefits derived from involving people with a lived experience
- inclusion of consumers in the Activity where appropriate
- plans to involve consumers in the Activity throughout the delivery timeline
- budget strategy with funds allocated to support, implement and acknowledge consumer involvement (e.g. training opportunities, honoraria and payments, additional time to support involvement activities, administration support and consultations and events associated with involvement activities).

Guidance on consumer involvement can be found at the [Consumer and Community Involvement Program](#) website and the [NHMRC Statement on Consumer and Community Involvement in Health and Medical Research 2016](#).

It is recommended that all team members complete the free online 30 minute [Consumer and Community Involvement in Health Research](#) course (or equivalent) and for the Activity Lead to complete the free online 30 minute [Consumer & Community Involvement and Grant Writing](#) course.

## 10. Contractual arrangements

Grants to entities external to the WA public health system are offered in accordance with the Department of Health Grant Funding Agreement (and its Terms and Conditions) which is a legal agreement between the Department of Health (Us) and the Responsible Entity (You).

The Responsible Entity must ensure that appropriate agreements are in place with the Activity Lead, team members and participating entities.

The Department of Health reserves the right to withdraw an offer of award to a Responsible Entity if the Grant Funding Agreement and/or Grant Funding Agreement Terms and Conditions cannot be agreed between the parties.

### **Insurance**

A Responsible Entity external to the WA public health system will be required to provide evidence of insurance as a condition of the Grant Funding Agreement, which may include:

- Public Liability (mandatory for all grants)
- Professional Indemnity (mandatory if the Responsible Entity is conducting a clinical trial, provides any form of medical treatment or advice, training, or will provide any tailored design, advice or specification services)
- Property for the Responsible Entity's replacement value of assets (mandatory for building, plant, machinery, equipment)
- Workers Compensation (mandatory if the Responsible Entity has employees or is paying salaries, noting this includes payments to working Directors)
- Product Liability (mandatory if the Responsible Entity manufactures, supplies, sells, services or repairs a product)
- Motor Vehicle if the Responsible Entity owns vehicles
- Clinical Trials if the Responsible Entity undertakes clinical trials (note this insurance may include Professional Indemnity)
- Cyber Liability if the Activity involves confidential data, e.g. identifiable patient information.

OMRI recommends that you seek advice from your insurance advisors to confirm what level and type is required for the Activity.

The Responsible Entity is responsible for ensuring participating entities have appropriate insurance.

Note that any Activity that requires site governance approval will also be required to provide evidence of appropriate insurance during the governance process, which may vary depending on the site.

### ***Intellectual Property***

Intellectual Property (IP) that arises out of the Activity will vest with the Responsible Entity (You). However, consideration will be given to the provisions of the [Western Australian Government Intellectual Property Policy 2023](#) (or any future iterations of this), and that IP rights should be allocated to optimise the economic, social or environmental benefits for WA from the use, commercialisation and disposal of the IP. For information, the IP clause that will apply to this Program is:

1. The ownership of any Intellectual Property generated by undertaking the Activity shall vest in You.
2. The ownership of any background or pre-existing Intellectual Property and associated Moral Rights, used or incorporated in the Activity that is presently vested in a Party shall remain vested in that Party, unless otherwise agreed.
3. Each Party will be entirely and solely responsible for the use in the Activity of any Intellectual Property and associated Moral Rights it has provided to undertake the Activity which belongs to, or is licensed from, any other party, and indemnifies the other Party against all claims by a third party arising out of use of that Intellectual Property and associated Moral Rights.
4. Subject to the confidentiality provisions of the Agreement, You hereby grant to Us, a non-exclusive, irrevocable, perpetual, royalty-free licence to use (excluding the ability to sub-licence or grant further licences) any of the Intellectual Property generated in the Activity, and which falls within the scope of WA Health's normal activities. This includes, but is not necessarily limited to, activities related to healthcare provision, teaching, training and research. This license does not automatically extend to any potential or eventual commercial development of the Intellectual Property, and any commercial products that might directly or indirectly result from the Activity Intellectual Property. However, where You believe that there is the potential for commercialisation of the Intellectual Property developed in the course of the Activity, both Parties shall negotiate in good faith the appropriate legal and beneficial interests, rights and access to the Intellectual Property by Us.
5. You indemnify and will keep indemnified Us and all Our respective officers, employees and agents from and against all costs, losses, expenses, actions, suits, demands, claims, damages and other liabilities resulting from Your failure to comply with this agreement, or otherwise resulting from the actual or alleged infringement of the Intellectual Property rights or associated Moral Rights of any third party by You.
6. Your obligations under this Agreement are continuing and survive expiration or termination of the Agreement.

Where relevant, agreements between the Activity Lead, team members and participating entities must include relevant permissions to use third-party IP required to deliver the Activity and have Freedom to Operate for the Activity. When a team includes a member(s) from the WA public health system as a participant in the Activity (i.e. the WA public health entity is not the Responsible Entity), the IP agreement must be authorised at an appropriate level by the relevant WA public health system entity.

Any questions regarding such IP matters should, in the first instance, be directed to OMRI ([DOH.OMRI@health.wa.gov.au](mailto:DOH.OMRI@health.wa.gov.au)).

## **Requests for variation**

Requests for variations to the Grant Funding Agreement, such as Activity description and Responsible Entity must be directed to OMRI. Approval of the variation will be at the discretion of the Department of Health. If variations are not approved this could result in termination of the grant with associated funding reverting to, or being recoverable by, the Department of Health, where for example eligibility or viability of the Activity is affected.

## **11. Funding conditions**

### **Payment instalments**

Funding will be provided in instalments to the Responsible Entity as follows:

- The first instalment will be subject to execution of a Grant Funding Agreement\*.
- Subsequent instalments (if applicable) will be subject to satisfactory progress being achieved against the project milestones, demonstrated in annual Progress Reports.

*\* Within the WA public health system, payment will be made to the Responsible Entity via a General Ledger Journal (GLJ) transfer progressively upon receipt of evidence of expenditure.*

### **Additional funding sources**

Additional sources of funding are permitted, and encouraged, provided the additional funding supports activities that complement, but do not duplicate, the Activity for which grant funding under this Program is awarded.

### **Partial payment or suspension of funds**

The Department of Health reserves the right to:

- provide funding instalments in parts, based on milestone achievement and risk assessment of future milestones
- suspend payment of funding instalments or part instalments where activity viability has become uncertain.

### **Termination of funds**

Funds shall revert to, or be recoverable by, the Department of Health in instances where:

- eligibility requirements are no longer met, unless a request for variation to address this is approved by OMRI
- the Activity is terminated by OMRI as a result of insufficient progress being made at the time of Progress Reports or any interim Progress Report, or it has been otherwise determined by either the Responsible Entity or OMRI that the Activity is no longer viable
- funds are used for purposes other than those for which they were awarded
- funds were spent on activities that require ethics and/or governance approvals and such approvals were not obtained before undertaking the activities
- funds are not fully expended at the conclusion of the Activity (including any extensions approved by OMRI)
- it is determined that misleading or fraudulent information has been provided
- the Responsible Entity does not enter into formal agreements with respect to this Activity, which includes Intellectual Property ownership, where appropriate
- other entities fund or are involved in the Activity that are part of an industry that produces products or services that may contribute to poor physical health or mental wellbeing of the community

- the Activity Lead is no longer employed by the Responsible Entity, unless a transfer of Responsible Entity has been approved by OMRI
- the Activity Lead leaves the Responsible Entity or relevant Employer or resigns from the Fellowship and OMRI determines that it is not feasible for the objectives of the grant to be fulfilled, including recruiting a replacement Activity Lead and completion of the Fellowship activities, within the remaining term of the grant.

## 12. Approvals

### *Research ethics and research governance*

The Responsible Entity, and any participating entity, will be responsible for obtaining and lodging all relevant research ethics and governance approvals that are required for undertaking funded activities, and ensuring these are maintained as required for the duration of the Activity.

Research ethics approvals must be obtained from appropriate ethics committees (human and/or animal). Research governance authorisation (also known as site specific authorisation) must be obtained from each relevant institution/site conducting the Activity or providing access to data, participants or tissue samples.

For information on research ethics and governance submission requirements for the WA public health system please refer to the following websites: [Research Ethics](#); [Research Governance](#); [Multi-centre Research](#).

### *Use of data collections*

A project that requires access to WA public health system data collections requires review and approval for data release in accordance with the [Health Services Act 2016](#) and the [Health Services \(Information\) Regulations 2017](#). This is in addition to research ethics and governance approvals and will include a feasibility assessment to determine whether the data requested is appropriate for the purposes of the study and approval for use of the data from the data custodian.

Preliminary cost and time estimates can be obtained by contacting [DataServ@health.wa.gov.au](mailto:DataServ@health.wa.gov.au). Cost estimates should be included in the proposed budget and an estimate of time for release of the data should be incorporated into the milestones in the Application Form.

For further information please review the [Data Linkage Services](#) website.

Should the application for funding be successful, we recommend you immediately begin the request and approval process.

## 13. Reporting

The Activity Lead and Responsible Entity are responsible for meeting reporting requirements over the duration of the Activity and at its conclusion.

All reports are to be completed on template forms provided by OMRI.

### *Progress Activity Report*

Progress Reports outlining the progress against the milestones listed in the Activity plan may be required as stipulated in the Grant Funding Agreement. OMRI reserves the right to request a Progress Report at any point.

OMRI reserves the right to suspend or withdraw funding where insufficient progress has been made.

### ***Final Activity Report***

A Final Report detailing the Activity and outcomes is to be submitted to OMRI at the conclusion of the Activity. Failure to submit the Final Report at this time may render all team members ineligible for further funding from the FHRI Fund and OMRI until the Final Report is received.

### ***Financial Report***

A financial acquittal statement outlining the expenditure of funds must be submitted to OMRI at the conclusion of the Activity. Acquittal statements must be certified by an authorised finance officer (or equivalent) of the Responsible Entity.

OMRI reserves the right to request interim Financial Reports at any stage during the Activity.

Any unexpended funds must be returned to the Department of Health. Any over-expenditure is the responsibility of the Responsible Entity and no claim may be made against the Department of Health.

### ***Community Stakeholder Brief***

In order to provide feedback to consumers, a one-page *Community Stakeholder Brief* which includes an outline of the Activity, its outcomes, and next steps is to be provided to all participating consumers and a copy submitted to OMRI with the Final Activity Report.

## **14. Publicising, acknowledgements and publications**

The Minister for Medical Research and/or the Department of Health will publicly announce recipients, including the title of the Activity. All other parties must withhold announcement/media coverage until after OMRI advises this has occurred.

Acknowledgement of FHRI Fund support must be made in publications, conference presentations, public discussion, press statements etc. A copy of any published material or media must be provided to Us.

In order to maximise knowledge exchange, funding recipients are asked to comply with the NHMRC's 'Publication and dissemination of research: a guide supporting the Australian Code for the Responsible Conduct of Research', which can be downloaded from the [Australian Code for the Responsible Conduct of Research](#) page, and the [NHMRC Open Access Policy](#).

## **15. Confidentiality**

Activity title, Activity Lead, funding amount, Responsible Entity, plain language summaries and sections indicated on applications or reports may be used for publicity purposes.

All other information provided in applications and reports will be maintained confidentially by OMRI, review panels, evaluation panels and the FHRI Fund Advisory Council. If requests are received by OMRI to make public any aspect of the Activity, other than the aspects listed above, the authorisation of the Responsible Entity will be sought, notwithstanding information requested under the [Freedom of Information Act 1992 \(WA\)](#) or information pertaining to the receipt of State Government financial assistance tabled in the Parliament of Western Australia.

## **16. Evaluation**

OMRI undertakes evaluations of Funding Programs, which will include unsuccessful applications. All parties included in the application, including team members and consumer representatives, are required to contribute to the evaluation.

## **17. Complaints**

Responsible Entities or Activity Leads who feel that their interests have been adversely affected by an action taken by OMRI in administering the Program may lodge a complaint. Complaints can only be considered when they refer to the administrative process and not to the funding decision. Complaints must be submitted via email (marked Confidential) to: Deputy Director General ([OfficeoftheDDG@health.wa.gov.au](mailto:OfficeoftheDDG@health.wa.gov.au)).





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