



Western Australian  
Future Health Research  
& Innovation Fund

# Translation Fellowships 2024 – Burden of Disease and Genomics

## Guidelines and Conditions

**Applications close:**

1:00 pm (AWST) Thursday 13 June 2024

# Contents

1. Introduction	3
2. Purpose	3
3. Program description	4
4. Eligibility	4
5. Program funding	6
6. Program conditions	7
7. Application instructions	7
8. Selection process	8
9. Consumer involvement	9
10. Partnerships with providers of burden of disease or genomics health services	10
11. Contractual arrangements	11
12. Funding conditions	13
13. Approvals	14
14. Reporting	14
15. Publicising, acknowledgements and publications	15
16. Confidentiality	16
17. Evaluation	16
18. Complaints	16

## 1. Introduction

The Translation Fellowships – Burden of Disease and Genomics (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](#):

- support the development of early- and mid-career researchers, helping them to achieve an independent and self-sustaining career
- target high-performing researchers in WA to maintain and/or advance the State's position as a leader in health and medical research.

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

Translational research is defined as research that aims to facilitate the practical application, or translation, of scientific discoveries to the development and implementation of new ways to prevent, diagnose, and treat health conditions, and improve the health and wellbeing of the community.

The purpose of this Program is to support translational research in the areas of burden of disease and genomics.

The aims of the Program are to:

- create a sustainable foundation for supporting research excellence in the areas of burden of disease and genomics and making WA a place of choice for health and medical research in this area
- attract and retain high-quality researchers to WA
- create employment opportunities in WA
- increase competitiveness in national and international funding
- increase research translation, commercialisation and alignment to FHRI Fund priority areas.

The objectives of the Program are to:

- increase WA translational research expertise and capacity in the areas of burden of disease and genomics
- increase WA translational research applications to competitive funding programs
- translate burden of disease and genomics research findings into policy and/or practice
- facilitate engagement between the academic and health service sectors.

### 3. Program description

The Translation Fellowships – Burden of disease and Genomics program will provide three-year fellowship funding and a research allowance to support high-quality early- to mid-career researchers in the areas of burden of disease and/or genomics who partner with a service provider to support translational research.

The Program is directed towards Activities that fall within the [health and medical research stream](#) of the FHRI Fund in the areas of burden of disease or genomics.

The Translation Fellowships – Burden of disease and Genomics program will consider applications in any of the following areas:

#### **Burden of disease**

The top five disease groups contributing the most to [Western Australian total burden of disease](#) (disability adjusted life years; DALYs) include cancer, mental and substance use disorders, musculoskeletal conditions, cardiovascular diseases and injuries.

#### **Genomics**

Research concerned with the application of genomics to health care.

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

The Activity Lead will be responsible for coordinating the Activity and ensuring its timely execution.

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

\* *It is acknowledged that the term Administering Institution 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

- The Responsible Entity must:
  - have an active Australian Business Number (ABN)
  - have a physical and operational presence in WA
  - be a university, research institution, public health service provider<sup>1</sup> or a public-private partnership provider<sup>2</sup>.
- The Activity Lead must:
  - be an Australian or New Zealand citizen, a permanent resident of Australia, or have an appropriate work visa in place for the duration of the Activity
  - be based in WA for a minimum of 80 per cent of the period of the Activity

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<sup>1</sup> WA public health service provider means a health care 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.

<sup>2</sup> Public-private partnership (PPP) provider refers to private hospitals with an agreement with the state government to provide public health services, for example, Joondalup Health Campus and St John of God Midland Public Hospital

- have no overdue reports for any grant funding program administered by OMRI (including FHRI Fund programs) from any year (excludes authorised extensions)
  - ensure that funding has not been awarded for any component of the Activity
  - 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 (b), if the Activity Lead is employed by another entity (the Employer), this entity must have 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 we have in-principle agreement from 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 IP required to deliver the Activity and address ownership of new IP generated by the Activity.*
  - undertake the Fellowship at a minimum of 0.5 FTE for the period of the Fellowship
  - hold at a minimum a postgraduate research degree (PhD or Masters by Research), or have equivalent research experience in a health-related field or clinical science
  - be at the early- or mid-career stage of their research career  
*For the purposes of this Program, an early-career researcher is equivalent to the NHMRC Emerging Leadership Level 1 and a mid-career researcher is equivalent to the NHMRC Emerging Leadership Level 2 as defined in [NHMRC Statements of expectations](#).*
- Must have a WA-based translation partner as described in Section 10
  - The application must include a support package as described in Section 6
  - Applications must include only one project and one Activity Lead
  - 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
  - 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 Activity Lead may submit more than one application to the Program, providing that there is no overlap in the activities, however if successful can accept no more than one Fellowship
  - 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

Translation Fellowships will be funded, each to the value of up to \$200,000 (ex GST) per annum for up to 3 years, to support the Activity Lead's salary costs (up to \$150,000 per annum) and a substantial research project (up to \$50,000 per annum). An additional \$10,000 per annum towards research costs is required from the Responsible Entity.

If the Fellow is part-time, the duration of the Fellowship period is still limited to 3 years and the requirements of the support package remain unchanged.

Requested FTE, salary level, costs and duration must reasonably reflect the proposed Activity and be directly attributable to the delivery of the proposed Activity.

Funding will be in accordance with the following:

- Salary costs:
  - must be directly attributable to the delivery of Activity outcomes
  - for the Fellow salary will be paid to the Activity Lead by the Responsible Entity in accordance with their employment conditions and the applicable FTE up to \$150,000 (ex GST)
  - may include on-costs up to a maximum of 30%, noting that WA public health system salaries can only claim superannuation as a salary on-cost
  - may include leave entitlements that accrue and are taken, during the period the salary is being paid by the grant funding (annual leave is accrued at a rate of 7.69% of the base salary paid by grant funding). Leave entitlements accrued outside this period, long service leave, parental leave, sabbatical, severance and termination payments cannot be paid by the grant funding.
- Non-salary costs:
  - may include essential services, supplies, equipment 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 10% of the budget request or \$15,000, whichever is the lesser amount, 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).

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.

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

Funding is offered subject to 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 support package*

Applications must describe a suitable support package for the Fellowship, as provided by the Responsible Entity and/or other parties.

The support package must:

- be sufficient to support additional research project costs, not included in the Fellowship funding request
- include a minimum \$10,000 per annum cash contribution for research project costs
- include at least one linked PhD or Masters by research scholarship.

The support package may also include additional cash and in-kind contributions, for items such as:

- additional linked PhD or Masters by research scholarships
- supporting team members
- other enabling resources.

The cash contribution must be 'new' cash for the purposes of conducting the Fellowship. Previous funding received by the Activity Lead and/or any of the team members for research, including funding received through other FHRI Fund and the Department of Health funding programs, cannot be included as a cash contribution in the support package.

The support package requirements remain the same for part-time and full-time fellowships.

## 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) Thursday 13 June 2024**.
- 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 – Translation Fellowships BG2024  
e.g. SMITH, Alex – Translation Fellowships BG2024
- 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 those applications that are most aligned with the aims and objectives of the Program.

All eligible applications will be assessed by a review panel comprising one or more of each of the following:

- experts in health and medical research and translation.
- persons with appropriate WA health and medical knowledge/experience in the areas of burden of disease and/or genomics.
- consumer representatives.

Applications will be assessed based on the criteria and percentage weightings set out in the table below.

Conflicts of interest that may arise will be treated in accordance with the WA health system [Managing Conflicts of Interest Policy](#).

Assessment Criteria	%
<b>Translation and implementation</b> Potential for translation and implementation of research findings into policy and/or practice including: <ul style="list-style-type: none"> <li>• planned steps for translation and/or implementation</li> <li>• knowledge, expertise and experience of the team and partners</li> <li>• future plans for the Activity.</li> </ul>	<b>20</b>
<b>Significance of the Activity</b> Significance of the Activity proposal in the areas of burden of disease or genomics including: <ul style="list-style-type: none"> <li>• the issue, its significance and impact on the WA health system</li> <li>• how the proposed Activity will address the issue</li> <li>• expected benefits to the WA health system</li> <li>• impact on existing programs operating in this area.</li> </ul>	<b>15</b>



<p><b>Activity plan</b></p> <p>Quality of the Activity plan, including well defined:</p> <ul style="list-style-type: none"> <li>• hypothesis, questions and objectives</li> <li>• methodology, including objective measurement of outcomes</li> <li>• approvals and agreements that will be required</li> <li>• achievable timeline.</li> </ul>	<b>15</b>
<p><b>Partnership with provider(s) of burden of disease or genomics healthcare</b></p> <p>Evidence of the provider(s) of burden of disease or genomics healthcare's (refer to Section 10) capacity, plan and commitment to:</p> <ul style="list-style-type: none"> <li>• integrating the work and outputs of the Fellow into policy and/or practice</li> <li>• achieving translational outcomes</li> <li>• achieving benefits to the WA health system.</li> </ul>	<b>15</b>
<p><b>Fellowship support package</b></p> <p>Feasibility and attractiveness of the Fellowship support package (refer to Section 6) including:</p> <ul style="list-style-type: none"> <li>• cash and in-kind contributions</li> <li>• relevance and strength of qualifications and availability of the team to conduct the Activity</li> <li>• collective gain of the team to the Activity</li> <li>• access to required resources, including expertise</li> <li>• PhD or Masters by research support provided</li> </ul>	<b>15</b>
<p><b>Track record and potential of the Activity Lead</b></p> <p>Track record of the Activity Lead which must be consistent with an early- or mid-career stage, including:</p> <ul style="list-style-type: none"> <li>• contribution to translational research and the area of burden of disease-related and/or genomic research</li> <li>• track record of influencing policy and/or practice</li> <li>• career plan, including key milestones for achieving a sustainable research career and broader translational research interests</li> <li>• capacity and plan for meeting the Fellowship deliverables.</li> </ul>	<b>10</b>
<p><b>Consumer involvement</b></p> <p>Appropriate level of consumer involvement (refer to Section 9) throughout the Activity timeline, including:</p> <ul style="list-style-type: none"> <li>• how consumers have been involved in the development of the proposed Activity</li> <li>• plan for ongoing engagement.</li> </ul>	<b>10</b>

### ***Selection of recipients***

Based on the review panel assessments, 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 offer lower funding rates than requested and/or request modification to the Activity 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 encouraged that all team members complete the free online 30 minute [Consumer and Community Involvement in Health Research](#) course (or equivalent) and the Activity Lead also completes the free online 30 minute [Consumer & Community Involvement and Grant Writing e-Course](#).

## **10. Partnerships with providers of burden of disease or genomics health services**

Effective research translation involves collaborative research and, therefore, the skills needed to build and maintain policy and practice partnerships are a critical consideration. Applications to the Program, must include a partnership with at least one WA provider of burden of disease or genomics-related healthcare services.

A provider of burden of disease-related or genomics healthcare services includes any public or private organisation that delivers burden of disease and/or genomics services or policies.

Each provider of burden of disease-related or genomics health service partner named on the application must:

- be involved in scoping and preparing the application
- commit to working with the Activity Lead and Responsible Entity (if different) in supporting the translation of the research activity's outputs (subject to these outputs being found to be useful)
- work with the Fellow to develop an implementation plan for the outputs of the research project (subject to these outputs being found to be useful)
- work with the Fellow to develop a forward plan for the outputs of the research project to be utilised towards securing additional funding to support further

translational research, the Fellow's longer-term career, and if applicable, the broader research program.

There is no limit on the number of partnerships that can be involved in supporting the Fellowship.

## **11. 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). Within the WA public health system, a Memorandum of Understanding (MOU) will be entered into.

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, or MOU, 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 recommend 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 or MOU, such as Activity description, Activity Lead or 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.

## 12. 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 or MOU\*.
- Subsequent instalments (if applicable) will be subject to satisfactory progress being achieved against the Activity milestones, as demonstrated in 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.*

If ethics and governance approvals are required (refer to 'Approvals' section of this document), then the Responsible Entity may only release the first instalment to the Activity Lead once all approvals for the Activity have been obtained and lodged with the Responsible Entity.

### ***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 because 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
- full or partial funding for the Activity is obtained from another source
- 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 Fellow 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 Fellow and completion of the Fellowship activities, within the remaining term of the grant.

## 13. 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 relevant ethics committees (human and/or animal). Research governance authorisation (also known as site specific assessment or access request review) 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*

An Activity that requires access to and use of WA Department of Health 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 data request and approval process.

## 14. 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 templates provided by OMRI.

### *Progress Activity Report*

Progress Reports outlining the progress against the milestones listed in the Activity plan will be required as stipulated in the Grant Funding Agreement or MOU.

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 the Activity Lead 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.

### ***Survey***

Completion of a survey to identify enablers and barriers to translation of research in the chosen area will be required in the third year of the Fellowship. The survey findings may be used to inform system-wide opportunities for improved research translation.

The OMRI will provide the survey closer to the time.

## **15. 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 must 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](#).

## 16. 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.

## 17. Evaluation

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

## 18. 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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