



Government of **Western Australia**  
Department of **Health**



Western Australian  
Future Health Research  
& Innovation Fund

# Translation Fellowships 2021

## Guidelines and Conditions

**Closing Date: 1.00pm, Tuesday 31 August 2021**

[fhrifund.health.wa.gov.au](http://fhrifund.health.wa.gov.au)

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## 1. Introduction

The Translation Fellowships program is funded through the [Future Health Research and Innovation \(FHRI\) Fund](#), which aims to improve, through research and innovation, the health and prosperity of Western Australians, the sustainability of the health system and to advance the State's standing as a leader in research and innovation.

This program is aligned with the 2020/21 FHRI Fund Research Priority to: support research translation to foster a vibrant research translation culture in the public health system, facilitate quantifiable buy-in from health system leadership and improve patient care and outcomes.

Administration of this program is provided by the Research and Innovation Office (RIO), WA Department of Health (Department of Health). Queries regarding this program may be directed to [RIO.DOH@health.wa.gov.au](mailto:RIO.DOH@health.wa.gov.au).

## 2. Program Description

Translational research can be described as research that focusses on facilitating the practical application, or translation, of scientific discoveries to the development and implementation of new ways to prevent, diagnose, and treat disease.

The aim of the Translation Fellowships program is to support translational research in the following two streams:

- Aboriginal health issues
- Country and regional WA health issues.

Applications can be made by eligible WA administering institutions (administering institutions), in partnership with at least one WA Health Service Provider (HSP).

The proposed research will be led by a Coordinating Principal Investigator who will be the Translation Fellow if the application is successful.

Fellowships are being made available to high-quality early- to mid-career researchers to:

- a. Conduct translational research projects in one of the two streams.
- b. Increase WA translational research expertise and capacity.
- c. Increase WA translational research applications to competitive funding programs.
- d. Facilitate the translation of research findings into policy and/or practice.
- e. Facilitate engagement between the academic and health service sectors.

For the purposes of this program, an early career researcher is equivalent to PSP 3 and a mid-career researcher is equivalent to PSP 4 or 5 as defined according to the [National Health and Medical Research Council Personnel Support Package \(PSP\)](#) descriptions.

The Fellows will also contribute to reporting on critical enablers and barriers for translation of research across the WA public health system.

One Fellowship will be available for each stream, each to the value of \$200,000 per annum for three years, to support salary costs and a substantial research project. The Fellowship funding must be matched by the administering institution with a 'support package' to at least the same value.

The total funding (FHRI Funding plus the support package) must result in at least \$300,000 for the research project costs.

### **3. Eligibility**

- a. Applications can be made by a WA administering institution that is a WA university or WA research institution with an ABN.
- b. The Coordinating Principal Investigator must be an Australian citizen or permanent resident of Australia and hold at a minimum a bachelor's degree or equivalent, in a health-related field or clinical science or a postgraduate research degree.
- c. The support package for the Fellow must be at least equal to the value of the Fellowship grant and include at least one linked PhD scholarship and a cash contribution.
- d. Applications must include a substantial research project proposal (to the value of minimum \$300,000), which seeks to deliver benefits to the WA public health system in the areas of Aboriginal or country/regional WA health.
- e. To ensure relevance to the WA public health system, a WA HSP must be involved in scoping and preparing the application and commit to working with the Fellow in facilitating the objectives of the research translation project. The Country and Regional WA Translation Fellow must form at least one partnership with WACHS.

### **4. Conditions of Fellowship**

- a. The Fellow must be employed by the administering institution and undertake the Fellowship at 1 full-time equivalent (FTE) for the duration of the Fellowship.
- b. The Country and Regional WA Translation Fellow is expected to be based at a country or regional location for at least part of the Fellowship term, with the duration and location to be negotiated with the relevant HSP.
- c. RIO shall be notified immediately if there are changes that affect Fellowship eligibility, Fellowship administration or Fellowship research activity. This includes changes to the Fellowship recipient FTE, the recipient leaving the administering institution or inability to undertake the described research activities.

### **5. Fellowship Deliverables**

Deliverables of the Fellowship include:

- a. Complete within the term of the Fellowship a substantial research project addressing contemporary challenges or needs faced by the WA public health system in the areas of Aboriginal or country/regional WA health. This includes obtaining governance approvals, data collection, data analysis and report writing.
- b. Apply for other competitive grant funding, such as from the National Health and Medical Research Council, to support further translational research, the Fellow's longer-term career and broader research program.
- c. Work with the Implementation Science Fellows (appointed through a parallel FHRI Fund funding program) to develop an implementation plan for the outputs of the research project (subject to these outputs being found to be useful).
- d. Work with the other Translation Fellow and Implementation Science Fellows to inform system-wide opportunities to enhance research translation and implementation. This work will be captured in a report to the FHRI Fund Advisory

## 6. Consumer Involvement

In line with the NHMRC's definition, consumers are people who have lived experience of a health issue. They include patients, their friends, families, carers and members of the general public. 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 the research process. Effective consumer involvement can ensure research is relevant to the WA community and improves the uptake of findings.

Applicants should engage with health consumers during both the development of the research project proposal and for the ongoing project by including them in the research team where appropriate and providing a detailed description of their role and contribution.

Consumer involvement should incorporate:

- Clearly defined relationships with health consumers or community groups who have 'lived experience' of the research project issue being investigated.
- Demonstrated understanding of the benefits derived from involving people with a lived experience in research.
- Inclusion consumers in the research team where appropriate.
- Plans to involve consumers in the project throughout the research timeline.
- Budget strategy with funds allocated to support, implement and acknowledge consumer involvement (e.g. stakeholder 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's Statement on Consumer and Community Involvement in Health and Medical Research 2016](#).

## 7. Health Service Provider Partnerships

Effective research translation involves collaborative research and, therefore, the skills needed to build and maintain policy and practice partnerships are a critical consideration.

For the purposes of the Fellowship, a HSP partner must be involved in the application and commit to working with the Fellow in supporting the translation of the research project's outputs (subject to these outputs being found to be useful).

HSP partners include the Child and Adolescent Health Service (CAHS), East Metropolitan Health Service (EMHS), North Metropolitan Health Service (NMHS), South Metropolitan Health Service (SMHS), WA Country Health Service (WACHS) and PathWest. Health entities which are contracted to provide health services to the State are also eligible, for example, Joondalup Health Campus and St John of God Midland Public Hospital.

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

## 8. Support Package for the Fellow

Applications must describe a suitable support package for the Fellow, which must be at least equal to the value of the FHRI Fund's contribution and will include at least one linked PhD scholarship and a cash contribution. The support package may include:

- Additional cash contribution, including but not limited to the cash contribution required to support a minimum \$300,000 research project (mandatory)
- In-kind support
- Linked PhD scholarships (at least one mandatory)
- Supporting team
- Other enabling resources.

This information should form part of the Budget (Section 12) of the Application Form.

Funding received through other FHRI Fund and the Department of Health funding programs cannot be included as a cash contribution in the support package.

## 9. Track record and potential of the Fellow

Applications must describe the potential Fellow's track record of influencing policy and practice.

Applications should address the Fellow's broader career plan, including milestones contributing to achieving an independent and self-sustaining career once the funding support ceases and the Fellow's translational research interests beyond the scope of the Fellowship.

## 10. Funding

This Fellowship program is funded by the [Future Health Research and Innovation \(FHRI\) Fund](#).

Fellowship grants to the value of \$200,000 per annum for three years will be made available to the successful administering institution, which may be used for Fellowship salary and research project costs. Research project costs must be at least \$60,000 per annum after salary costs are paid.

Fellowship salary will be paid to the Fellow by the administering institution in accordance with their employment conditions. Salary funding can be used for annual leave and long service leave entitlements that accrue during the Fellowship term. However, severance and termination payments and extended leave payments (leave entitlements accrued in non-Fellowship roles) are not supported and must not be paid for with Fellowship funding.

Research project costs may include funding for additional personnel working on the research project, minor equipment, consumables, and other additional expenses directly related to the research project. The support package described in the application must be sufficient to support additional research project costs, not included in the Fellowship award.

Relevant external funding information should be included in the Budget (Section 12) of the Application Form.

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

### ***Budget Information***

Applicants should calculate budgets accurately, as requests for additional funding will not be considered. Budget requests should be adequately described and justified.

The budget information should include an outline of the support package for the Fellow, which must be at least equal to the value of the FHRI Fund's contribution.

It is intended that funds will be spent in WA only. An exception to this may be considered in the case where specific expertise or equipment is required and is not available in WA. When this situation occurs, adequate justification must be provided.

Funding is only made available for the scope of work described in the application (or with any modifications requested by RIO). RIO is not obliged to underwrite any recurrent or capital costs beyond the funding awarded through this program.

### ***Payment Schedule***

Grants will be released in three instalments:

- The first instalment will be subject to full execution of a Grant Funding Agreement between the administering institution and the Department of Health.
- The second and third (final) instalments will be paid annually, subject to satisfactory progress being achieved against the research project milestones, demonstrated in progress reports.

### ***Partial Payment or Suspension of Funds***

RIO reserves the right to:

- pay instalments in parts based on milestone achievement to date and risk assessment of future milestones
- suspend payment of instalments or part-instalments where project feasibility has become uncertain.

### ***Termination of Funds***

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

- the project is terminated by RIO as a result of insufficient progress being made at the time of the annual progress report or any interim progress report
- funds are not fully spent at the conclusion of the Fellowship, unless an extension has been agreed to by RIO
- funds are used for purposes other than those for which they were awarded
- the Fellow is successful in obtaining funding for the project or their salary from another source
- the Fellow leaves the administering institution and RIO 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.



## 11. Selection Process

Funding will be awarded on merit, based on a process of assessment and selection. The assessment process shall be conducted by an independent Review Panel comprising of experienced researchers, experts and consumer representatives.

Conflicts of interest that may arise will be treated in accordance with the WA Health [Managing Conflict of Interest Policy and Guidelines](#).

RIO reserves the right to:

- request further information from applicants in the event that the reviewers assess an application to be of particular benefit to the WA community but require further clarification before a final decision is made
- request modifications to research project proposals.

Applications must meet defined eligibility requirements and will be assessed based on the criteria and weightings set out in the table below:

<b>Assessment Criteria</b>	<b>%</b>
<p><b>Significance of the Research Project</b></p> <p>Significance of the research project proposal to the WA public health system in the areas of Aboriginal or country/regional WA health.</p>	<b>15</b>
<p><b>Research Plan</b></p> <p>Quality of the research plan including well defined:</p> <ol style="list-style-type: none"> <li>1) hypothesis, research questions and objectives</li> <li>2) methodology, including objective measurement of outcomes</li> <li>3) achievable timeline.</li> </ol>	<b>15</b>
<p><b>Consumer Involvement</b></p> <p>Evidence of the involvement of a consumer/s in the development of the research proposal and the plan for ongoing involvement during the project.</p>	<b>10</b>
<p><b>Health Service Provider Partnership/s</b></p> <p>Evidence of the Health Service Provider Partner's plan and commitment to integrating the work and outputs of the Fellow into practice.</p>	<b>10</b>
<p><b>Support Package for the Fellow</b></p> <p>Feasibility and attractiveness of the support package for the Fellow.</p>	<b>20</b>
<p><b>Track record and potential of the Coordinating Principal Investigator</b></p> <p>Track record of the Coordinating Principal Investigator, which should be consistent with an early- to mid-career stage, relative to opportunity, and career plan relevant to research translation in WA. Note applicants that do not align with the National Health and Medical Research Council PSP definitions (refer to Section 2), may be deemed to be ineligible by the Review Panel</p>	<b>15</b>
<p><b>Research Translation</b></p> <p>Potential for translation and implementation of research findings into policy and/or practice.</p>	<b>15</b>



## 12. Approvals and Agreements

### **Research Governance**

It is the responsibility of the administering institution to obtain all relevant research governance approvals prior to commencement of the associated research project.

Research Governance approvals can include:

- a. Ethics approvals, from relevant Ethics Committees (human and/or animal).
- b. Research governance authorisation (also known as site specific authorisation) from each relevant institution/site conducting the project or providing access to data, participants or tissue samples.

For information on ethics and governance submission requirements please refer to the following websites:

- <https://rgs.health.wa.gov.au/Pages/Research-Ethics.aspx>.
- <https://rgs.health.wa.gov.au/Pages/Research-Governance.aspx>.
- <https://rgs.health.wa.gov.au/Pages/Multi-centre-Research.aspx>.

### **Data Linkage**

A research program proposal that includes a request for linked data from the [Department of Health](#) requires the team to demonstrate feasibility to obtain, and adequate expertise to analyse, the requested data.

Where linked data are required, the [Research Data Services \(RDS\) Team](#) should be contacted for assistance with the Application for Data process. The RDS Team should provide both i) a cost estimate; and ii) an estimate of time required to obtain the data. All requests should state that the data request is associated with the *FHRI Fund Translation Fellowships 2021* program, which requires the project/research to be completed within a specific period.

The preliminary cost estimate should be included in the proposed Budget (Section 12) and the time-estimate built into the Proposed Research Project (Section 2) in the Application Form.

Following confirmation of funding support, the application for data process as outlined on the [Data Linkage WA](#) website should be followed.

### **Intellectual Property**

The ownership of Intellectual Property (IP) produced by the Fellow in the course of the Fellowship shall vest with the administering institution, with an appropriate IP access agreement for other team members' organisations.

It is the administering institution's responsibility to ensure that appropriate agreements are in place with any partner organisations.

When a research team involves more than one institution and includes a member from the WA public health system, then the IP agreement must be authorised by the relevant WA public health system entity and the administering institution.

### **13. Reporting**

The administering institution will be responsible for coordinating the Fellowship activities and meeting reporting requirements over the duration of the Fellowship and at its conclusion.

Research projects must be concluded within the allocated period which includes obtaining ethics and governance approvals, employment of research staff, data collection and analysis and submission of reports.

A member of RIO will be assigned to each Fellowship (RIO liaison officer) and will liaise with the relevant delegate of the administering institution to assist with grant payments, reporting and other operational issues as they arise. RIO liaison officers will provide the relevant reporting templates as required.

#### ***Progress Reports***

An annual Progress Report outlining the progress against the milestones listed in the Research Plan is required at the 12- and 24-month points of the grant. Interim progress reports may be requested at any point throughout the funding period.

#### ***Final Report and Community Stakeholder Brief***

A final report detailing the Fellowship and research project outcomes is to be submitted to RIO at the end of the Fellowship term.

Failure to submit the final report at this time may render the Fellow ineligible for further funding from the FHRI Fund and RIO until the report is received.

In addition, in order to provide feedback to stakeholders, a one-page *Community Stakeholder Brief* which includes an outline of the research project, its outcomes, and next steps is to be provided to all participating consumer groups (including Aboriginal communities) and a copy submitted to RIO.

#### ***FHRI Fund Advisory Council Report***

The Fellow will work with the other FHRI Fund Translation Fellow and Implementation Science Fellows to inform system-wide opportunities to enhance research translation and implementation. This work will be captured in a report to the FHRI Fund Advisory Council, co-authored by FHRI Fund Translation Fellows and Implementation Science Fellows.

#### ***Financial Acquittal Statement***

An acquittal statement outlining the expenditure of funds must be submitted to RIO at the conclusion of the Fellowship. Acquittal statements must be certified by an authorised finance officer at the administering institution.

### **14. Acknowledgements**

The Minister for Health and/or Department of Health will publicly announce the recipients of the *FHRI Fund Translation Fellowships 2021*. As such, all other parties must withhold announcement/media coverage promoting their association with the selected projects until after RIO advises that the announcement of recipients has occurred.

Full acknowledgement of FHRI Fund support must be made as opportunities arise in publications, conference presentations, public discussion, press statements etc.

The suggested citation is: “*this project was/is co-funded by the Future Health Research and Innovation Fund through the Translation Fellowships 2021 program.*”

## 15. Complaints

Applicants who feel that their interests have been adversely affected by a decision made by the Review Panel and/or RIO may lodge a complaint. Complaints can only be considered when they refer to the administrative process and not to the actual outcome of a particular decision. Complaints must be submitted in writing to:

Executive Director, Clinical Leadership and Reform  
Clinical Excellence Division, Department of Health  
PO Box 8172  
Perth Business Centre WA 6849

## 16. Confidentiality

Plain language summaries and researcher statements provided on applications or reports may be used for publicity purposes as stated on the relevant templates.

All other information provided in applications and reports will be maintained confidentially by RIO and the Review Panel. If requests are received by RIO to make public any aspect of the Fellowships, the authorisation of the administering institution will be sought.

Applicants are advised that the Department of Health is subject to the *Western Australian Freedom of Information Act 1992*. This provides a general right of access to records held by State Government agencies. In addition, information pertaining to the receipt of State Government financial assistance is tabled in the Parliament of Western Australia.

## 17. Publications

Researchers are requested to forward copies of publications resulting from the funded project to RIO. In order to maximise knowledge exchange, researchers 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](#).

## 18. Evaluation

RIO will undertake an evaluation of the *FHRI Fund Translation Fellowships 2021* program and Fellows, co-investigators, consumers, administering institutions and Health Service Providers will need to participate in this.

The evaluation will focus on matters such as the extent of implementation of the research findings into practice and health policy, product development, commercialisation, contribution to capacity building, knowledge transfer, publications and further research funding/grants received as a result of activity funded by the *FHRI Fund Translation Fellowships 2021* program.



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