

# **Innovation Challenge 2023 - Sustainable Health Priorities**

# **Guidelines and Conditions**

Minimum Data Form due by: 1:00 pm (AWST) Tuesday 1 August 2023

Application due by:
1:00 pm (AWST) Tuesday 15 August 2023

fhrifund.health.wa.gov.au

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## 1. Introduction

The Innovation Challenge 2023 - Sustainable Health Priorities (the Program) is a funding program of the Western Australian (WA) <u>Future Health Research and Innovation (FHRI)</u> 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 Goal:

 Establish innovation Programs and Initiatives to support topical and/or early-stage ideas and enable opportunities for these innovative ideas to secure follow-on funding from commercial/other funders.

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
- improving the financial sustainability of Western Australia's health system.

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.

# 2. Purpose

The Sustainable Health Review (SHR) was undertaken to assist in the delivery of a WA health system that is more person-centred, and to provide innovative and financially sustainable care to ensure Western Australians receive excellent care, closer to home, now and into the future.

The 2019 SHR Final Report to the Western Australian Government includes eight Enduring Strategies and thirty Recommendations. Immediate focus has now been placed on six of the Recommendations, that have been designated as priority recommendations.

The purpose of the Program is to invite WA innovators to propose innovative solutions in the six SHR priority recommendations and two additional SHR areas (*Sustainable Health Priority* areas):

1	Improve timely access to outpatient services. (Recommendation 11)	SHR priority recommendation
2	Implement models of care in the community for groups of people with complex conditions who are frequent presenters to hospital.  (Recommendation 13)	SHR priority recommendation
3	Implement a new funding and commissioning model for the WA health system focused on quality and value for the patient and community.  (Recommendation 17)	SHR priority recommendation

4	Invest in digitisation of the WA health system to empower citizens with greater health information.  (Recommendation 22)	SHR priority recommendation
5	Build a systemwide culture of courage, innovation and accountability to support collaboration for change. (Recommendation 23)	SHR priority recommendation
6	Build capability in workforce planning and formally partner with universities, vocational training institutes and professional colleges to shape the skills and curriculum. (Recommendation 26)	SHR priority recommendation
7	Implement models of care for people to access responsive and connected mental health services in the most appropriate setting.  (Recommendation 7)	Aligned with the Mental Health Focus Area of the FHRI Fund Refreshed Strategy
8	Implement genomics-based precision medicine and precision public health solutions. (Recommendation 28)	Aligned with the five strategic priority areas of the <u>WA</u> <u>Genomics Strategy</u> 2022-2032

## The aims of the Program are to:

- encourage activity that builds Western Australian innovation capability and capacity within the Sustainable Health Priority areas
- stimulate and enable the development of high-quality innovations that contribute to the Sustainable Health Priority areas
- enhance opportunities for the implementation of innovations in the context of the Sustainable Health Priority areas
- improve the success of Western Australian innovators in accessing additional funding, such as from private sector investment and/or Commonwealth grant programs, to assist in taking innovations to market, where this is applicable.

## The objectives of the Program are to:

- promote partnerships between stakeholders, including researchers, innovators, healthcare providers, industry and consumers, to expand innovation skills and experience and ensure proposed solutions are best practice and translatable
- advance the development of innovative solutions that contribute to achievement of the Sustainable Health Priority areas
- increase the implementation and adoption of innovative solutions within the Sustainable Health Priority areas
- drive the scalable implementation and long-term viability of innovative solutions, including commercialisation where applicable, within Sustainable Health Priority areas.

# 3. Program description

The Program will provide funding through a competitive process for the development of innovative solutions across the Sustainable Health Priority areas.

The aim is to have at least one successful application, dependent on quality, in each of the Sustainable Health Priority areas.

To be eligible for consideration for funding, the innovation must have at least completed Proof of Concept (Innovation Maturity Level (IML) 3) and have not completed Preliminary Validation (IML 6), as outlined in Appendix 1.

The funding will support activities that are in the range of Proof of Feasibility (IML 4), Proof of Value (IML 5) or Preliminary Validation (IML 6) stages of the innovation development life cycle. IMLs 7 to 9 are beyond the scope of the Program.

The Program is directed towards activities that fall within the <u>health and medical innovation</u> and <u>commercialisation stream</u> of the FHRI Fund.

Funding cannot be used to support activities that are deemed to be <u>research</u>, unless these are an integral part of the innovation activity and are feasible to be undertaken within the timeframe of the grant.

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 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.
- 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 period of the Activity
  - o be based in WA for a minimum of 80 per cent of the period of the Activity
  - have no overdue reports for any OMRI or FHRI Fund grant funding programs from any year (excludes authorised extensions)
  - ensure that an OMRI or FHRI Fund grant 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 specify 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 confirmation 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.

- The innovation must have at least completed IML 3 and have not completed IML 6 (see Appendix 1).
- The IML of the proposed innovation activity must be within the range of IML 4 to IML
   6.
- The grant funding must not constitute the entire financial base of the Responsible Entity.
- Applications must be submitted in accordance with the 'Application instructions' section of this document.

An applicant may submit more than one application to this Program.

OMRI reserves the right to request further information and make final decisions regarding eligibility.

# 5. Program funding

Funding amounts between \$150,000 and \$450,000 are available to successful applicants to finance an innovation activity to be completed within a 2 year period.

Funding will be in accordance with the following:

- Salary costs:
  - must be directly attributable to the delivery of Activity outcomes
  - may include on-costs up to a maximum of 30%, noting that WA public health system applicants must claim salary on-costs in accordance with the WA Health Financial Management Manual s521 'Internal Salary Recoup (within WA Health entities)' table.
  - can include leave entitlements that accrue during the period the salary is being paid by the grant funding. Leave entitlements accrued outside this period, severance and termination payments cannot be paid by the grant funding.
- Non-salary costs:
  - include essential services, supplies, equipment, consumer involvement and other expenses directly related to the Activity
  - for travel will not be approved unless strongly justified as being essential to the undertaking of the Activity
  - may be requested for equipment up to a maximum of \$10,000 and quotes 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 applicants cannot claim standard overhead charges in accordance with the Financial Management Manual s522 (OMRI is an exempt organisation).

Requested FTE, salary level, costs and duration must reasonably reflect the proposed Activity.

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.

Applicants should calculate budgets accurately, as requests for additional funding will not be considered. A change of 10% per budget line will not require a formal variation.

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

# 6. Application instructions

The instructions below must be followed when making a submission:

### Minimum Data Form

- The Minimum Data Form (MDF) available from the <u>FHRI Fund website</u> must be submitted by 1:00 pm (AWST) Tuesday 1 August 2023 to be eligible to submit an Application Form.
- The MDF does not need to be submitted through the Responsible Entity and may be emailed directly by the applicant to DOH.OMRI@health.wa.gov.au.
- The email subject line must be titled as follows:
   Applicant SURNAME, First name IC2023-SHP MDF
   e.g. SMITH, Alex IC2023-SHP MDF

## Application Form

- Application Forms will only be accepted if a Minimum Data Form has been submitted by the required date/time above.
- The Application Form available from the <u>FHRI Fund website</u> must be submitted by **1:00 pm (AWST) Tuesday 15 August 2023**.
- The application must be completed in Arial font 11 point or larger.
- Electronic signatures are acceptable. The onus is on the applicant to ensure approval to use an electronic signature has been obtained.
- The application is to be emailed to <u>DOH.OMRI@health.wa.gov.au</u> as a **single** Adobe Acrobat PDF or Microsoft Word file, not exceeding 5 MBs, including CVs,
   and bibliographic references (if applicable). The application and email subject line
   must be titled as follows:

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Applicant SURNAME, First name – IC2023-SHP e.g. SMITH, Alex – IC2023-SHP
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 Applications must be complete, include requested certifications and be submitted by the closing date/time. Applicants are responsible for complying with internal deadlines.

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

Applications including commercially sensitive information should be marked as commercial-in-confidence, noting that the 'Activity summary' section in the Application Form may be used for publicity purposes.

Queries regarding the application process should be directed by email to <a href="mailto:DOH.OMRI@health.wa.gov.au">DOH.OMRI@health.wa.gov.au</a>.

# 7. Selection process

## Assessment process

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

All eligible applications will be shortlisted by independent innovation and commercialisation experts.

Shortlisted applications will then be referred for full assessment and scoring by an expert review panel comprising of experienced innovators, content experts and consumer representation.

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

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

Assessment Criteria			
<ul> <li>Significance of the problem</li> <li>The problem that the proposed innovation would address.</li> <li>The aspect of the relevant Sustainable Health Priority area the problem relates to.</li> <li>The relevance and scale of the problem in WA.</li> <li>The importance of addressing the problem in the WA health system.</li> </ul>	20		
<ul> <li>The importance of addressing the problem in the WA health system.</li> <li>Proposed solution         <ul> <li>The appropriateness of the solution to address the stated problem.</li> <li>The current Innovation Maturity Level (IML) of the innovation, and justification for this (see Guidelines and Conditions Appendix 1).</li></ul></li></ul>			
<ul> <li>Activity plan</li> <li>The activity that will be undertaken, including objectives, methodology and realistic measures of expected outcomes.</li> <li>The contribution the activity provides towards the proposed solution.</li> <li>The achievability of the proposed milestones and timeframe.</li> <li>The proposed budget to undertake the activity and justification for budget items, including any proposed salary components.</li> </ul>	15		

The contribution of the Activity Lead to the proposed activity, including the specific responsibilities towards the delivery of the objectives, methodology and outcomes.      The extent to which the Activity Lead's expertise and experience will support the proposed activity.	10
<ul> <li>The extent to which the Activity Lead demonstrates the ability to deliver the proposed solution.</li> </ul>	
<ul> <li>Supporting environment</li> <li>The knowledge, expertise and experience of activity team members.</li> <li>The capacity and capability of the activity team to deliver the proposed activity.</li> <li>Appropriate level of partner engagement and collaboration during both the development of the proposal and the conduct of the activity.</li> <li>Access to technical resources infrastructure equipment and facilities and additional support personnel, if necessary.</li> </ul>	10
<ul> <li>Consumer involvement</li> <li>How consumers (e.g. patients, carers, community members with a lived experience of a health issue) have been involved in the development of the proposed activity.</li> <li>The plan for ongoing consumer engagement in the activity, including their roles and how their lived experience perspectives will inform the activity through formal and informal processes.</li> </ul>	10
Please refer to the 'Consumer involvement' section of this document.	

# 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.

## 8. 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.

Applicants should engage with health consumers during the development of funding applications and embed them in the proposed Activity by including them in the 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 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 <u>Consumer and Community Involvement Program</u> website and the <u>NHMRC Statement on Consumer and Community Involvement in Health and Medical Research 2016.</u>

It is encouraged that all team members complete the free online 30 minute Consumer and Community Involvement in Health Research course.

# 9. 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 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.

Note that 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 <u>Western Australian</u> <u>Government Intellectual Property Policy 2023</u> (or any future iterations of this) 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. Applicants should make themselves aware of the IP clause that will apply to this Program:

- 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 the 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. You will negotiate in good faith with Us to provide, in a fair and reasonable manner for both parties, any product to which this grant funding has significantly contributed, to the WA (public) Health system, or agreed components of this, either free of charge, or at the cost of production, for a mutually acceptable period of time after its production, providing that this in no manner compromises the attraction of additional funding, and/or the commercialisation by You of the product.
- 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.

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

## Requests for variation

Requests for variations to the Grant Funding Agreement or MOU, such as Activity description, Budget (if a line varies more than 10%), 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.

# 10. 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.

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

Applicants are permitted, and encouraged, to seek additional sources of funding for the duration of the Activity, provided it complements, but does not duplicate, the Activity for which the funding was 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 funding recipient or OMRI that the Activity is no longer viable
- 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.

# 11. Approvals

## Research ethics and research governance

Funding cannot be used to support Activities that are deemed to be <u>research</u>, unless these are an integral part of the innovation Activity and are feasible to be undertaken within the timeframe of the Activity.

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 <u>Health Services Act</u> <u>2016</u> and the <u>Health Services (Information) Regulations 2017</u>. 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 from contacting <a href="DataServ@health.wa.gov.au">DataServ@health.wa.gov.au</a>. 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.

# 12. 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 Reports**

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 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 overexpenditure 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 stakeholders, 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 consumer groups and a copy submitted to OMRI with the Final Activity Report.

# 13. 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.

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 <u>Australian Code for the Responsible Conduct of Research</u> page, and the NHMRC's <u>Open Access Policy</u>.

All peer-reviewed publications that are supported in whole or in part by the FHRI Fund must be made immediately open access, that is, without any embargo period at the time of first online publication, regardless of whether such publication is an advanced or early online publication or the Version of Record. Funding recipients are encouraged to upload to a pre-print site any draft publication or report resulting in whole or in part from the funded Activity prior to submission to a peer-reviewed publication (if permitted by the publisher) The funding recipient must notify OMRI of all publication DOIs. If the paper is peer-reviewed and published, the funding recipient must notify OMRI of the publication DOI. The corresponding author's ORCiD should also be notified to OMRI.

If successful, the Activity Lead or a suitable team member will be required to submit an abstract and attend the annual *Science on the Swan* conference after the first year of the grant. However, if submission of an abstract will restrict the Activity Lead's ability to publish their research in a peer-reviewed journal, this should be raised with OMRI at the earliest opportunity so that alternative arrangements can be discussed.

# 14. 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 <u>Freedom of Information Act 1992 (WA)</u> or information pertaining to the receipt of State Government financial assistance tabled in the Parliament of Western Australia.

## 15. 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.

# 16. Complaints

Applicants 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).

# **Appendix 1 - Innovation Maturity Level**

The following has been adapted from the Innovation Maturity Levels (IML) of the MTPConnect *BioMedTech Horizons* program, which is based on the Consortia for Improving Medicine with Innovation & Technology's *Navigating the HealthTech Innovation Cycle*.

The maturity level of the innovation, at its current stage of development, must have at least completed IML 3 but no further advanced than IML 6.

The proposed innovation activities to be undertaken with this Program must therefore align with the highlighted IML 4, 5, or 6.

	IML 1	IML 2	IML 3	IML 4	IML 5	IML 6	IML 7	IML 8	IML 9
	Need	ldea	Proof of Concept	Proof of Feasibility	Proof of Value	Preliminary Validation	Confirmatory Validation	Approval and Launch	Uptake
Description	Identification of problem or unmet need	Potential solution described, evaluated and selected (where applicable, in comparison with any existing, inferior, solution)	Key concepts validated and value proposition tested	solution demonstrated , which aligns with stakeholder and/or potential user	a stage where it is recognised to have value by stakeholders	Production of prototype, minimum viable product, or equivalent, and collection of relevant data. As required, is attractive to further developmental investment.	The solution is definitively demonstrated to be effective and to be of value to stakeholders and/or users. The solution is ready to be taken to market (or equivalent).		The solution is implemented/used by stakeholders and/or users



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