



Western Australian  
Future Health Research  
& Innovation Fund

# Mental Health Translational Research Grants 2025-26

## Guidelines and Conditions

**Expressions of Interest close:**

1:00 pm (AWST) Thursday 18 June 2026

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## 1. Introduction

The Mental Health Translational Research Grants 2025-26 (the Program) is a one-off targeted 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.

The Program contributes to the following [FHRI Fund Strategy Theme and Priorities](#):

**Strategic Theme 1: Connect and Collaborate.** Bold ambition needs clear direction. By setting powerful priorities and managing them with discipline and transparency, the FHRI Fund drives faster action, stronger partnerships, and lasting impact, putting WA at the forefront of global health innovation.

- **Priority 1: Empower Pathways and collaboration.** Long-term change comes from building shared solutions across disciplines, sectors, and services. This priority supports structures and relationships that extend well beyond the initial spotlight area.
- **Priority 2: Inspire Impact through an aligned focus.** Concentrating effort on a single, uniquely Western Australian health challenge each year creates clarity and energy across the system. This focused approach is designed to deliver visible outcomes and elevate WA's national and global profile.

**Strategic Theme 3: Foundational Confidence.** Support the people, systems, and infrastructure that underpin WA's health and medical research and innovation sector, ensuring it can attract top talent, win national grants, and deliver sustainable growth.

- **Priority 7: Retain early to mid-career researchers.** Provide targeted support to secure the future of WA's health and medical research and innovation workforce at a critical career stage. Fellowships, near-miss grants, and career pathways will help reduce attrition and keep top talent engaged.

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

- improving the financial sustainability of Western Australia's health system
- improving the health and wellbeing of Western Australians

The Program also contributes to the purpose of the [Mental Health and Alcohol and Other Drugs Strategy 2025-2030](#) (Mental Health Strategy), developed by the Mental Health Commission (Commission):

- To guide the transformation of Western Australia's mental health and alcohol and other drugs systems to empower and support people, families and communities in their wellbeing.

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

## 2. Purpose

The purpose of the Program is to provide a one-off round of targeted grants to accelerate the implementation of the Mental Health Strategy. Funding will support Western Australian researchers and their teams to advance implementation of 'evidence-based' models that improve mental health and wellbeing or prevent mental illness in priority areas that are aligned to the Mental Health Strategy.

The aims of the Program:

- fund research of direct significance to the mental health and wellbeing of Western Australians
- promote the translation of research findings into evidence-based health policy and practice which will ultimately provide better health outcomes
- contribute to integrating research capability across health services, universities and research institutes by supporting research-policy-practice partnerships.

The objectives of the Program are to:

- support implementation of 'evidence-based' models that improve mental health and wellbeing or prevent mental illness.
- support the capacity and capability of the mental health workforce to deliver contemporary, evidence-based, safe and sustainable care.
- build the research capability of the WA mental health research sector.

### 3. Program description

The Program provides research project (Activity) support to Western Australian health and medical researchers and their teams to undertake Activity that addresses priority areas identified in the [Mental Health and Alcohol and Other Drugs Strategy 2025-2030](#). Teams are required to work collaboratively to fast-track implementation of findings through partnerships with consumers, the community service sector and/or specialised and acute health services and to build the mental health research workforce through involving early-career researchers and students.

Activity that is solely quality assurance, clinical audit (including chart review), needs analysis, or literature review is not eligible.

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, 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 duration of the Activity
  - physically reside in WA for a minimum of 80 per cent of the period of the Activity
  - 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 Director of the company that is the Responsible Entity; or*
  - (b) *honorary or adjunct title at the Responsible Entity (if not an employee of the Responsible Entity).*

***In the case of (a)***, if the Activity Lead is also employed by the WA public health system (may include Clinical Academics) they will [register](#) (WA Health staff access only) a Conflict of Interest for this grant in accordance with the Department of Health [Managing Conflicts of Interest Policy](#) that addresses how the Activity Lead intends to ensure WA Health intellectual property (IP) is protected.

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

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

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

- 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/funding.
- 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 applicant may not be named as an Activity Lead on more than 2 applications to this Program however may be named as a team member on multiple applications.
- There is no limit to the number of team members that may be included on an application.
- 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.
- To be eligible to submit an Application Form the Activity Lead must have received an invitation from OMRI to progress to the Application stage following the Expression of Interest stage.

## 5. Program funding

Funding amounts of up to \$600,000 excluding GST are available to successful applications to finance the Activity to be completed within a 36-month period.

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

If ethics and governance approval is required to commence the Activity, expenditure cannot be incurred until these have been obtained. The salary commencement dates in the budget table must align with the expected governance approval date recorded in the milestone table.

Funding will be in accordance with the following:

- Salary costs:
  - may include the direct labour costs of employees from the Responsible Entity and/or partner organisation (e.g. team members) undertaking core elements of the Activity, i.e. cannot include any commercial mark-up/profit
  - may include Award/Agreement increases and salary increments as appropriate
  - may include leave entitlements that accrue and are taken during the period the salary is being paid by the grant funding as a base salary cost (noting annual leave is accrued at a rate of 7.69% of the base salary paid by grant funding and long service leave at a rate of 2.5% of the base salary paid by grant funding)
  - cannot include leave entitlements accrued outside the period the salary is being paid by the grant funding, parental leave, sabbatical, severance and termination payments
  - can only include superannuation, payroll tax and workers compensation as salary on-costs up to a maximum of 30%, noting that salaries paid by a WA public health system entity can only include superannuation as a salary on-cost (this includes WA public health system invoices for salaries paid by the Responsible Entity).
  - cannot include salary or remuneration for the Activity Lead. An exemption to this rule may be requested, where it is deemed that this salary is crucial to the success of the Activity. Adequate justification must be provided. Determination of exemptions will be made on a case-by-case basis, at the discretion of OMRI.
- Non-salary costs:
  - can only include essential expenses such as services, supplies, equipment unique to the Activity and consumer involvement
  - for travel will not be approved unless strongly justified as being essential to the undertaking of the Activity and must occur during the Activity timeframe
  - must not include costs related to dissemination of outcomes, such as conference attendance and publications.
  - may be requested for equipment and specialised computing requirements that are unique to the Activity and cannot include service, maintenance and repair costs. 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
  - cannot include personal computers/devices and IT equipment, related peripherals or software for communicating, writing and undertaking simple analyses
  - cannot include entertainment, meals or hospitality costs unless incurred in support of participants of a clinical trial or as part of travel for the purposes of

- the Activity in accordance with the ATO reasonable travel allowance rate. Alcohol cannot be included except in the case that it is classified as an investigational product in the context of a clinical trial or cohort study.
  - cannot include administrative costs such as stationery, photocopying, postage and communications (such as telephone, internet or videoconferencing).
- Overhead charges (indirect/infrastructure costs):
  - may be requested up to a maximum of 10% of the total Activity (direct) costs and must be justified and described
  - cannot be charged on, or included in, WA public health system expenditure in accordance with the *Financial Management Manual* s522 for grant funding administered by OMRI.

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.

If the Expression of Interest is shortlisted and an application is invited, all budget items should be adequately described and justified in the Application Form 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.

Shortlisted Expression of Interest applicants will be provided the Application Form.

If your application is successful, we may ask you to verify the Activity budget that you provided in your application when we negotiate your *Grant Funding Agreement*. You may need to provide evidence such as quotes for major costs.

A separate cost centre or account must be created for the Activity to easily track costs and facilitate financial reporting.

## 6. Application instructions

The instructions below must be followed when making a submission:

- The Expression of Interest must be submitted via the Department of Health Grant Management System by **1:00 pm (AWST) Thursday 18 June 2026**.
- The Expression of Interest 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.

Instructions for the Grant Management System are located at <https://fhrifund.health.wa.gov.au/Funding/GMS-link-page>.

Acknowledgement of receipt of the Application Form will be provided via email to the Responsible Entity, Activity Lead and Team Members after submission in the Grant Management System.

Queries related to the Guidelines and Conditions can be directed to [DOH.OMRI@health.wa.gov.au](mailto:DOH.OMRI@health.wa.gov.au) with the subject line beginning with 'Query – MHRTG2025-26'.

Queries regarding the application process can be directed to [DOH.GMS@health.wa.gov.au](mailto:DOH.GMS@health.wa.gov.au) with the subject line beginning with 'GMS Application Assistance – MHRTG2025-26'.

## 7. Selection process

### Assessment process

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

A review panel comprising of experienced mental health, alcohol and other drug experts, health and medical researchers and consumer representatives will assess eligible Expressions of Interest to determine proposals that are most aligned with the aims and objectives of the Program.

Selected Expressions of Interest applicants will be invited to submit an Application Form and referred for full assessment and scoring by the review panel.

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

Assessment of **Expressions of Interest** will be based on the criteria and % weightings set out in the table below.

Assessment Criteria	%
<p><b>Significance and relevance of the Activity</b></p> <ul style="list-style-type: none"> <li>• The issue and its significance to WA mental health and alcohol and other drugs systems (e.g. incidence, prevalence, burden of disease, impact on delivery or cost of health service)</li> <li>• How the Activity will address the issue described above and the expected benefits to WA mental health and alcohol and other drugs systems (e.g. reduce inequities, improved efficiencies and cost savings, economic, social and environmental benefits)</li> <li>• Direct relevance of the proposed research to the purpose, Strategic Pillars and Focus Areas outlined in the Mental Health Strategy.</li> <li>• Potential to support capacity and capability of the mental health workforce to undertake research and deliver contemporary, evidence-based, safe and sustainable care</li> </ul>	<b>50</b>
<p><b>Activity Plan</b></p> <p>Quality of the research proposal, including:</p> <ul style="list-style-type: none"> <li>○ the Activity objectives, ensuring these are specific, measurable, attainable, relevant and time-bound</li> <li>○ the methodology, including techniques, target group(s), a realistic sample size and measures to be used</li> <li>○ achievable timeline and milestones.</li> <li>• Plans to evaluate cost-effectiveness of any innovations in healthcare delivery.</li> </ul>	<b>50</b>

Assessment of the **Application Form** will be based on the criteria and % weightings set out in the table below.

Assessment Criteria	%
<p><b>Significance and relevance of the Activity</b></p> <ul style="list-style-type: none"> <li>• The issue, its significance to WA mental health and alcohol and other drugs systems (e.g. incidence, prevalence, burden of disease, impact on delivery or cost of health service)</li> <li>• How the Activity will address the issue described above and the expected benefits to WA mental health and alcohol and other drugs systems (e.g. reduce inequities, improved efficiencies and cost savings, economic, social and environmental benefits)</li> <li>• The impact on existing programs that are currently operating in this area</li> <li>• Direct relevance of the proposed research to the purpose, Strategic Pillars and Focus Areas outlined in the Mental Health Strategy</li> <li>• Potential to support capacity and capability of the mental health workforce to undertake research and deliver contemporary, evidence-based, safe and sustainable care.</li> </ul>	<b>20</b>
<p><b>Activity Plan</b></p> <ul style="list-style-type: none"> <li>• Quality of the research proposal, including: <ul style="list-style-type: none"> <li>○ the Activity objectives, ensuring these are specific, measurable, attainable, relevant and time-bound</li> <li>○ the methodology, including techniques, target group(s), a realistic sample size and measures to be used</li> <li>○ locations and appropriate consideration of ethics and governance</li> <li>○ achievable timeline and milestones</li> </ul> </li> <li>• Plans to evaluate cost-effectiveness of any innovations in healthcare delivery</li> <li>• The proposed budget to undertake the activity and justification for budget items, including any proposed salary components.</li> </ul>	<b>20</b>
<p><b>Novelty</b></p> <ul style="list-style-type: none"> <li>• Novel approach and distinction from any similar or related research in this area</li> <li>• Impact on existing programs that are currently operating in this area and potential benefit and value of the novel approach.</li> </ul>	<b>15</b>
<p><b>Consumer involvement</b></p> <ul style="list-style-type: none"> <li>• How consumers (e.g. patients, carers, community members) have been involved in the development of the proposed research</li> <li>• The plan for ongoing consumer engagement in the research, including their roles and how their lived experience perspectives will inform the research (refer to <i>Consumer involvement</i>).</li> </ul>	<b>15</b>
<p><b>Feasibility and track record</b></p> <ul style="list-style-type: none"> <li>• The knowledge, expertise and experience of the Activity Lead and team members is appropriate for the proposed research</li> <li>• Evidence demonstrates that the Activity Lead and Team members are culturally informed and competent to work with the populations they collaborate with</li> <li>• Appropriate level of partner engagement and collaboration, e.g. healthcare providers and policy makers, during both the development of the research proposal and the conduct of the research</li> <li>• Access to technical resources, infrastructure, equipment, facilities and additional support personnel, if necessary.</li> </ul>	<b>15</b>
<p><b>Translation and implementation</b></p>	<b>15</b>

<ul style="list-style-type: none"> <li>• Planned steps for the translation and/or implementation of findings and the Activity timeframes for translational impacts</li> <li>• How the knowledge, expertise and experience of the team members and partnerships with the community services and/or specialised and acute services will assist with the process of translating findings into policy and/or practice.</li> <li>• Potential to build the mental health research workforce through involving early-career researchers and students.</li> <li>• Future plans for the activity. For example, a possible extension of the activity to a broader geographical area, population or to other disciplines, and the embedding of research, evaluation and best practice benchmarking into clinical services.</li> <li>• Potential for applications to national or international funding bodies (if applicable).</li> </ul>	
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### **Selection of recipients**

Based on the assessment and recommendations of the review panel(s), 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.

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

Consumer involvement should incorporate:

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

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

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

## 9. Contractual arrangements

Grants 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).

While finalising the *Grant Funding Agreement*, OMRI may ask for further information and verification to confirm compliance with Section 4. Eligibility and Section 5. Program funding.

The Responsible Entity must ensure that appropriate agreements and subcontracts are in place with the Activity Lead and team member (partner) organisations.

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

### **Insurance**

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

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

OMRI recommends that you seek advice from your insurance advisors to confirm what level and type of insurance 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.
4. 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.
5. Your obligations under this Agreement are continuing and survive expiration or termination of the Agreement.

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

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

### **Requests for variation**

Requests for variations to the *Grant Funding Agreement*, such as Activity description, 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*.
- Subsequent instalments, if applicable, will be subject to provision of satisfactory *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.

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

The Department of Health reserves the right to:

- provide funding instalments in parts, based on Activity to date and risk assessment of future Activity
- suspend payment of funding instalments or part instalments where Activity viability has become uncertain.

### ***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.

### ***Termination of funds***

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

- eligibility requirements are no longer met
- the Activity is terminated by OMRI as a result of insufficient progress being made, 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, noting the date funds revert to, or are recoverable from, would be the date you are notified by the funding 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 Activity end date (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.

## **11. 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.

## **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 Report**

*Progress Activity Reports* may be required as stipulated in the *Grant Funding Agreement*.

OMRI reserves the right to request a *Progress Activity Report* at any point.

OMRI reserves the right to suspend or withdraw funding where insufficient progress has been made or where it has been determined that the Activity is no longer viable.

### **Final Activity Report**

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

### **Community Stakeholder Brief**

In order to provide feedback to participants in the Activity and consulted communities, a one-page **plain language** *Community Stakeholder Brief* must be provided to the participants and consulted communities, which includes an outline of the Activity, its outcomes, next steps and a contact person. A copy of this document must be provided with the *Final Activity Report*. We encourage that consumers involved in the research/innovation Activity assist in preparing the Brief.

## **Financial Report**

A *Financial Report* outlining the expenditure of funds must be submitted to OMRI at the conclusion of the Activity and may be required during the Activity. *Financial Reports* must be certified by an authorised finance officer (or equivalent) of the Responsible Entity.

OMRI reserves the right to request a *Financial Report* 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.

## **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. 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 '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](#).

## **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, co-funding partners 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.

Applicants can give OMRI permission to share the application with a partner funding organisation in the application form.

## **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**

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, Infrastructure, Medical Research, and Innovation ([ODDG.IMRI@health.wa.gov.au](mailto:ODDG.IMRI@health.wa.gov.au)).



**This document can be made available in alternative formats on request for a person with a disability.**

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