From: SOMI, Masha
To: s22
Cc: ESSEX, Allyson; GOULD, Phillip; s22
Subject: Action - option for an MRFF Grant Opportunity focused on acute care models [SEC=OFFICIAL]
Date: Thursday, 23 December 2021 5:39:09 PM

---

s22

As requested, please find below an outline for an MRFF Grant Opportunity focused on models of care that reduce pressure on EDs.

Please let me know if you need anything further.

Best, Masha

Proposal for an MRFF Grant Opportunity

- 2022 Models of Care to Improve the Efficiency and Effectiveness of Acute Care Grant Opportunity

Objective and outcomes

Consistent with the *Medical Research Future Fund Act 2015*, the objective of this grant opportunity is to provide grants of financial assistance to support medical research and medical innovation projects in each state and territory that develop, implement and validate evidence-based and scalable clinical models of care that improve acute care and reduce the pressure on Australian emergency departments.

The intended outcome of the grant opportunity is to improve the health and wellbeing of Australians by generating evidence that supports implementation of more effective and timely acute care approaches.

Financial and grant details

- Funding: up to $24m from 2021-22 from the Emerging Priorities and Consumer Driven Research Initiative
    - As the MRFF is fully allocated in 2021-22, funds in this financial year will be diverted from the 2021 Mitochondrial Donation Grant Opportunity as this program has been delayed and is likely to commence in 2022-23
- Grants: 1 grant per state/territory providing up to $3m over 5 years
    - If more than one application is received from a state, the highest ranked application will be funded
- Eligibility: applicants must submit a letter of support from the relevant state/territory Department/Ministry of Health that indicates support for the project

Next steps

- If the Minister agrees with the proposal, we'll get a Min Sub in early January and aim to open the grant opportunity in late January 2022.
- We'll need to negotiate with NHMRC re the closing date and when outcomes will be available, however appreciate the Minister is after a March 2022 closing date and for outcomes to be available in April 2022.

Background

- Some of the most promising interventions being developed to relieve pressure on EDs include:
    1. Development of general ED post-discharge clinics staffed by a mix of GPs/general physicians/ED trained clinicians (doctors, nurses and nurse practitioners).
    2. Identification of patients who are 'frequent flyers', developing personalised health plans and linking them to a multidisciplinary care home for support, incl social services.
    3. Redesign of the triage system, as the current measure (the ATS) only describes clinical urgency; additional measures are needed to account for severity and complexity.
        - **It is a common misunderstanding that patients allocated ATS category 4 or 5**

        should have been managed by a GP. Patients within this category could include a someone needing a plaster cast (which most GPs don't undertake) or admission for an exacerbation of their chronic congestive cardiac failure or those eventually discharged after an acute asthma exacerbation.
    - High preventable mortality is found in ATS category 5 patients.
  4. Testing GP-led acute care clinic within or on the same site as emergency departments in the Australian context.

- AIHW report: presentations to public hospital emergency departments, in every state and territory in Australia, have continued to rise, at an average of 3.2% a year, or 200,000 more people. The results are long and potentially dangerous waits for ED care and for admission.
- The patients presenting to ED are increasingly old and complex (about 25% are over 70) and each patient takes longer to assess (more tests are needed) and treat (including the need for social care planning) even when they are able to be discharged. On the other hand, it does not take long to provide care for patients with a single acute problem (e.g. a laceration needing suturing). Thus, they do not contribute significantly to ED crowding – however they are affected by it in terms of waiting time to be seen.
- A UK evidence synthesis has suggested that utilisation of a GP within an emergency department or closely located unit is not beneficial. However, the current Australian context: health system funding, ED staffing profile (e.g. FACEM leadership, GPs working in ED), physical geography, and patient expectations would need to be understood in order to reach a valid conclusion.

From: s22
To: SOMI, Masha
Cc: ESSEX, Allyson; GOULD, Phillip; s22
Subject: Re: Action - option for an MRFF Grant Opportunity focused on acute care models [SEC=OFFICIAL]
Date: Thursday, 23 December 2021 7:59:39 PM

Hi Masha

This looks good. Can you pls remove this requirement:

Eligibility: applicants must submit a letter of support from the relevant state/territory Department/Ministry of Health that indicates support for the project

---
Sent from Workspace ONE Boxer

On 23 December 2021 at 5:39:08 pm AEDT, SOMI, Masha wrote:

> s22
>
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> Please let me know if you need anything further.
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    2. Identification of patients who are 'frequent flyers', developing personalised health plans and linking them to a multidisciplinary care home for support, incl social services.

    3. Redesign of the triage system, as the current measure (the ATS) only describes clinical urgency; additional measures are needed to account for severity and complexity.

        - **It is a common misunderstanding that patients allocated ATS category 4 or 5 should have been managed by a GP.** Patients within this category could include a someone needing a plaster cast (which most GPs don't undertake) or admission for an exacerbation of their chronic congestive cardiac failure or those eventually discharged after an acute asthma exacerbation.

        - High preventable mortality is found in ATS category 5 patients.

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[SEC=OFFICIAL]

Australian Government
National Health and Medical Research Council

Medical Research
Future Fund

Medical Research Future Fund – Emerging Priorities and Consumer Driven Research Initiative

2022 Models of Care to Improve the Efficiency and Effectiveness of Acute Care Grant Opportunity Guidelines

Opening date:	**XX January 2022**
Closing date for minimum data:	**5pm ACT local time** on **XX February 2022**
Application closing date and time:	**5pm ACT local time** on **16 March 2022**
Commonwealth policy entity:	**Australian Government Department of Health**
Administering entity	**National Health and Medical Research Council**
Enquiries:	Applicants requiring further assistance should direct enquiries to their MRFF Eligible Organisation's Research Administration Officer. Research Administration Officers can contact NHMRC's Research Help Centre for further advice: Phone: 1800 500 983 Email: help@nhmrc.gov.au Questions should be submitted no later than 1:00pm ACT Local Time on **Wednesday XX Month 2022**.
Date guidelines released:	**XX January 2022**
Type of grant opportunity:	**Targeted Competitive**

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Medical Research Future Fund (MRFF) Emerging Priorities and Consumer Drive Research Initiative: 2022 Models of Care to Improve Efficiency and Effectiveness of Acute Care Grant Opportunity process

The Medical Research Future Fund is designed to achieve Australian Government objectives

This grant opportunity is part of the above grant program, which contributes to the Department of Health's Outcome 1. The Department of Health works with stakeholders to plan and design the grant program according to the *Commonwealth Grants Rules and Guidelines.*

↓

The lead organisation registers to become an MRFF Eligible Organisation

If the organisation through which you are applying (the lead organisation) is not already an MRFF Eligible Organisation (i.e. approved to submit MRFF grant applications and receive MRFF funding through NHMRC), the organisation should check its eligibility and then submit an MRFF Eligible Organisation certification form. The form is available on the NHMRC website, as well as a list of already approved MRFF Eligible Organisations. The lead organisation will be required to enter into a grant agreement with the Commonwealth if your application is successful.

↓

The grant opportunity opens

We publish the grant guidelines on GrantConnect.

↓

You complete and submit a grant application

You complete the application form for the grant opportunity in the NHMRC's Granting System (Sapphire). Your application must address all of the eligibility and assessment criteria to be considered for a grant. Your organisation's Research Administration Officer (RAO) then certifies and submits the application form.

↓

We assess all grant applications

We review all applications against eligibility criteria and notify you if you are not eligible. Then a grant assessment committee assesses eligible applications against the technical assessment criteria (weighted) and the non-technical assessment criterion (non-weighted).

↓

We make grant recommendations

We provide advice to the decision maker on the recommendations of the grant assessment committee.

↓

Grant decisions are made

The decision maker decides which applications are successful.

↓

We notify you of the outcome

We advise you of the outcome of your application via Sapphire.

↓

We enter into a grant agreement

We will enter into a grant agreement with the MRFF Eligible Organisation through which you applied, if your application is successful. The grant agreement may have specific conditions based on the nature of the grant and will be proportional to the risks involved.

↓

Delivery of grant

You undertake the grant activity as set out in your grant agreement. We manage the grant through the relevant MRFF Eligible Organisation, monitor your progress and make payments.

↓

Evaluation of the grant opportunity

We evaluate your specific grant activity, the Emerging Priorities and Consumer Driven Research Initiative as a whole, and the MRFF. We base this on information you provide to us and that we collect from various sources.

1. About the Medical Research Future Fund

1.1 Medical Research Future Fund (MRFF)

The MRFF, established under the *Medical Research Future Fund Act 2015* (MRFF Act), provides grants of financial assistance to support health and medical research and innovation to improve the health and wellbeing of Australians. It operates as an endowment fund with the capital preserved in perpetuity. The MRFF reached maturity at $20 billion in July 2020. The MRFF provides a long-term sustainable source of funding for endeavours that aim to improve health outcomes, quality of life and health system sustainability.

This MRFF investment is guided by the *Australian Medical Research and Innovation Strategy 2016-2021* (the Strategy) and related set of *Australian Medical Research and Innovation Priorities 2020-2022* (the Priorities), developed by the independent and expert Australian Medical Research Advisory Board following extensive national public consultation.

In the 2019-20 Budget, the Government announced its continued commitment to supporting lifesaving medical research with a $5 billion 10-year investment plan for the MRFF. It will place Australia at the leading edge of research in areas like genomics and will support the search for cures and treatments, including for rare cancers. The plan is underpinned by four key themes – patients, researchers, translation and missions.

1.2 About the Emerging Priorities and Consumer Driven Research Initiative

The Emerging Priorities and Consumer Driven Research Initiative (the Initiative) aims to enable or support:

- high quality biomedical, clinical, health services and/or population health research that improves patient care
- translation of new discoveries into clinical practice
- new diagnoses, treatments and cures for those suffering from rare and debilitating conditions
- joint collaboration of consumers and researchers in undertaking research in emerging priority areas; and
- many Australians with debilitating conditions.

Further information on the rationale of the Initiative is available on the Department of Health website.

The MRFF Monitoring, Evaluation and Learning Strategy (the Evaluation Strategy) provides an overarching framework for assessing the performance of the MRFF and is publicly available on the MRFF website.

Applicants to this grant opportunity are expected to describe how their proposed project aligns with the objectives and outcomes of the Emerging Priorities and Consumer Driven Research Initiative and the Measures of Success as described in the Evaluation Strategy. These will be key assessment criteria for funding. Projects funded from this grant opportunity will be monitored and evaluated against the Evaluation Strategy.

For further details see sections 5 and 6.

There will be other grant opportunities as part of this Initiative and we will publish the opening and closing dates and any other relevant information on the NHMRC website and GrantConnect.

We administer the MRFF according to the Commonwealth Grants Rules and Guidelines (CGRGs).

1.3 About the MRFF 2022 Models of Care to Improve Efficiency and Effectiveness of Acute Care Grant Opportunity

These guidelines contain information for the 2022 Models of Care to Improve Efficiency and Effectiveness of Acute Care Grant Opportunity.

Emergency departments (EDs) are an essential pillar of the Australian acute health care system. A recent Australian Institute of Health and Welfare (AIHW) report[1] shows that, despite declines during the early months of the COVID-19 pandemic, presentations to public hospital EDs, in every state and territory in Australia, have continued to rise at an average of 3.2% a year, or 200,000 more people per year. The results are long and potentially deleterious waits for ED admission and care.

More older Australians with complex health conditions are presenting to ED. They require more time for assessment and treatment (including the need for social care planning), even when they are able to be discharged.

The delivery of acute care in the ED is affected by upstream and downstream health system pressures. The capacity and accessibility of primary and community care services varies across Australia[2][3] and there may be limited reliable 7 day/week follow up for patients well enough to leave the ED, but who need timely clinical follow-up review.

A range of workforce configurations and operational models currently exist in Australian EDs[4] and national and international experience suggests there is potential to implement innovative reshaping of the ED workforce and the way work is organised and care delivered.

Thus, there are multiple opportunities to undertake health service research, including implementation science trials, in order to help relieve the pressure EDs are under and improve the health and wellbeing of all Australians.

The objective and intended outcome of this grant opportunity are aligned with the following *Australian Medical Research and Innovation Priorities 2020-2022*:

- Consumer-Driven Research
- Comparative Effectiveness Research.

Consistent with the *Medical Research Future Fund Act 2015*, the objective of this grant opportunity is to provide grants of financial assistance to support medical research and medical innovation projects in each state and territory that develop, implement and validate evidence-based and scalable clinical models of care that improve acute care and reduce the pressure on Australian emergency departments.

To be competitive for funding, applicants must propose to conduct research that delivers against the above objective and those of the Emerging Priorities and Consumer Driven Research Initiative.

---

[1] AIHW, 2021. “Emergency department care report” - https://www.aihw.gov.au/reports-data/myhospitals/sectors/emergency-department-care

[2] https://www.aihw.gov.au/reports/primary-health-care/use-of-ed-for-lower-urgency-care-2018-19/contents/about

[3] https://www.aihw.gov.au/reports/primary-health-care/patient-experiences-small-geographic-areas-2018-19/contents/about

[4] Gardner, Glenn, et al. "Mapping workforce configuration and operational models in Australian emergency departments: a national survey." *Australian Health Review* 42.3 (2017): 340-347.

Applicants are encouraged to propose novel and/or innovative research and describe how the outcomes of the research will be translated into health benefits for Australians.

Applicants should consider incorporating a comprehensive health economic analysis that would support the successful implementation of approaches as outlined in their research proposal.

There are eight streams under this grant opportunity:

- **Stream 1**: Australian Capital Territory
- **Stream 2**: New South Wales
- **Stream 3**: Northern Territory
- **Stream 4**: Queensland.
- **Stream 5**: South Australia
- **Stream 6**: Tasmania
- **Stream 7**: Victoria
- **Stream 8**: Western Australia

Applicants must specify the Stream to which they are applying in their application, that is, the state or territory in which the research will be conducted.

The intended outcome of the research funded by this grant opportunity is to improve the health and wellbeing of Australians by generating evidence that supports implementation of more effective and timely acute care approaches.

If applicants propose research that is not relevant to the desired outcome, they will be considered against the assessment criteria and found to be uncompetitive. MRFF Eligible Organisations are requested to ensure they only submit applications that address the desired outcomes.

This document sets out:

- the eligibility and assessment criteria
- how we consider and assess applications
- how we notify applicants and enter into grant agreements with grantees
- how we monitor and evaluate grantees' performance, and
- responsibilities and expectations in relation to the grant opportunity.

The NHMRC is responsible for administering this grant opportunity on behalf of the Department of Health.

Impact of COVID-19

The MRFF acknowledges the potential impacts of COVID-19 on the health and medical research sector, including the ability of researchers to submit applications and undertake research. You will be asked to consider these impacts in your risk management plan. This information will be taken into account in the assessment of your application (see sections 5 and 6.4).

You should read this document carefully before you fill out an application. We have defined key terms used in these guidelines in the glossary at section 13.

1.4 Encouraging Partnerships

Applicants are encouraged to seek strategic partnerships involving organisations whose decisions and actions affect Australians' health, health policy and health care delivery in ways that improve the health of Australians. Organisations that are capable of implementing policy and service delivery and would normally not be able to access funding through the MRFF are highly valued as partners.

Partnerships and co-investment, including across jurisdictions, are encouraged in order to maximise impact of investment, provide opportunities for more mature sites/agencies to build the capacity of emerging sites/agencies, reduce duplication of activities, and reduce potential respondent administrative burden on participating communities. Partnerships are also encouraged to ensure the proposed research is of relevance to consumers and delivery of services, and to support translation of research outcomes into practice.

Partner organisations may include:

- medical research institutes, i.e. organisations that conduct medical research as a primary purpose, and are also registered with the Australian Charities and Not-for-Profits Commission
- universities
- corporate Commonwealth entities, i.e. Commonwealth entities that are bodies corporate
- corporations, i.e. Australian public companies, Australian private companies and other incorporated entities
- those working in federal, state, territory or local government in the health portfolio or in other areas affecting health, such as economic policy, urban planning, education or transport
- those working in the private sector such as employers, private health insurance providers or private hospitals
- non-government organisations and charities
- education institutions
- state or territory education departments
- community organisations such as consumer groups
- healthcare providers
- professional groups.

In some instances, a body of a type listed above may be eligible to apply for MRFF funding in its own right, for example in the case of commercial entities or non-government organisations that are corporations. The above list recognises the desirability of entering into partnerships as a means of advancing the outcomes of the MRFF and is not intended to imply that the types of bodies listed are ineligible to seek MRFF funding.

Partnerships with an overseas partner organisation are acceptable, provided the objectives of the grant opportunity are fully met and all overseas expenditure is eligible (see section 4). However, you cannot use the grant to support research projects undertaken outside of Australia (although funding can be sought to support the Australian-based components of multinational clinical trials).

While partnerships are encouraged, they may not necessarily be relevant for all projects. Where relevant, partner funding contributions will contribute to the assessment of project impact and overall value and risk, but are not a requirement (see section 5).

2. Grant amount and grant period

2.1 Grants available

The Australian Government has announced a total of $633 million for the Emerging Priorities and Consumer Driven Research Initiative. For this grant opportunity, up to $24 million of funding is available over 5 years from 2021-22.

Funds will be provided to the MRFF Eligible Organisation according to the available funding indicated in Table 1; however, funds can be expended across the life of the grant (grant period). See below and section 2.2.

For this grant opportunity, an application may be submitted to one of the above eight Streams only. Applicants must specify the Stream to which they are applying in their application.

The top ranked project in each Stream will be funded (i.e. the highest ranked applications from each state or territory will be funded).

For all Streams, there is no minimum grant amount. The maximum amount available for a single grant in each Stream is $3 million.

Applicants are encouraged to design a research project that best addresses the objectives and intended outcomes of the grant opportunity and propose an appropriate budget.

Table 1. Available funding over the grant period ($ million - GST exclusive)

2021-22	2022-23	2023-24	2024-25	2025-26
3.238	4.0	5.762	7.0	4.0

2.2 Grant period

The maximum grant period that can be applied for is 5 years.

3. Eligibility criteria

We cannot consider your application if you do not satisfy all eligibility criteria.

We cannot provide a grant if you receive funding from another source for the same purpose (see section 9).

3.1 Who is eligible to apply for a grant?

To be eligible your organisation must be an MRFF Eligible Organisation approved by NHMRC.

Information on becoming an MRFF Eligible Organisation can be found on the NHMRC website.

Joint applications are encouraged, provided you have a lead organisation who is the main driver of the project and is eligible to apply.

This eligibility criterion derives from provisions set out in section 24 of the MRFF Act and cannot be waived.

3.2 Who is not eligible to apply for a grant?

Your application will be ruled ineligible if:

- the MRFF Eligible Organisation through which you are applying, or a participating organisation on your application, is included on the National Redress Scheme's website on the list of 'Institutions that have not joined or signified their intent to join the Scheme'
- persons named on the application are the subject of a decision by the NHMRC Chief Executive Officer or Delegate that any application they make to NHMRC, for specified funding opportunities, will be excluded from consideration for a period of time, whether or not they meet other eligibility requirements. Such decisions will generally reflect action taken by NHMRC in response to research misconduct allegations or findings, or a Probity Event. See the NHMRC Research Integrity and Misconduct Policy.

3.3 Chief Investigators

Applicants must nominate a Chief Investigator A (CIA) who will take the lead role in completing the application, conducting the research, and reporting as required under the grant agreement.

A person must not be named as a Chief Investigator (CI) on more than one application submitted to this grant opportunity. If a CI is named on more than one application submitted to this grant opportunity, both applications will be considered ineligible.

To facilitate collaborative research teams with the required capacity and capability to undertake the proposed research, up to 15 CIs may be included as members of the research team.

It is generally required that, at the time of application submission, the CIA is an Australian citizen or is a permanent resident in Australia. Where the CIA is not an Australian citizen or permanent resident, they must have the requisite work visa in place at the time of accepting the grant (see section 6.4). The CIA must be based in Australia for the duration of the grant.

Researchers who are not Australian citizens or permanent residents in Australia are eligible to apply as a CI, but not as CIA (see also section 6).

3.4 Additional eligibility requirements

Your application may also be ineligible and excluded from further consideration if it contravenes other requirements as set out in these grant guidelines. Examples include, but are not limited to:

- minimum data describing your application is not entered in Sapphire by the specified date
- the application is not certified and submitted in Sapphire by the RAO of an approved MRFF Eligible Organisation by the advertised closing date and time
- the Grant Proposal does not comply with formatting requirements and page limits
- the proposed research duplicates research previously or currently being undertaken. We may compare the research proposed in applications with grants previously or currently funded by the MRFF, NHMRC or other agencies (e.g. Australian Research Council) and published research (see sections 4.7, 7.2 and 7.3)
- the application fails to accurately declare the source, duration and level of funding already held by the research team for research in the particular area of the application
- the application includes any incomplete, false or misleading information

- its aims are inconsistent with the object of the MRFF Act to improve the health and wellbeing of Australians.

If a decision to exclude an application from further consideration is made, we will provide the decision and the reason(s) for the decision to the MRFF Eligible Organisation's RAO in writing. The MRFF Eligible Organisation's RAO is responsible for advising applicants of the decision in writing.

4. What the grant money can be used for

4.1 Eligible grant activities

To be eligible, activities in your Grant Proposal must clearly demonstrate their criticality in meeting the objectives of the 2022 Models of Care to Improve Efficiency and Effectiveness of Acute Care Grant Opportunity under Section 1.3. You can only spend grant funds to pursue the research activities described in your Grant Proposal. You can use the grant to pay costs that arise directly from these activities. The following categories must be used in your proposed budget:

- Equipment
- Personnel (Personnel Support Packages)
- Other Direct Research Costs (DRCs).

Rules apply to each category of expenditure. Applicants are required to justify the budget requested for each year of the proposed research. Your budget, including your justification of the proposed expenditure, will be part of the overall value and risk assessment (see sections 5.4 and 6.4).

4.2 Equipment

You can request funding to pay for equipment costing over $10,000 that is essential to the research. The total equipment requested cannot exceed $80,000. Individual items of equipment costing less than $10,000 must be requested within DRCs (see below).

Applicants must clearly outline the total value of all items of equipment for each year, why the equipment is required for the proposed research and why the equipment cannot be provided by the organisation.

For each item of equipment requested, a written quotation must be received and held with the MRFF Eligible Organisation submitting the application, to be available to the Australian Government on request.

The MRFF Eligible Organisation must be prepared to meet all service and repair costs in relation to equipment funded.

Funds will not be provided for the purchase of computers except where these are an integral component of a piece of laboratory equipment or are of a nature essential for work in the research field, for example, a computer used for the manipulation of extensively large datasets (i.e. requiring special hardware).

4.3 Personnel

Salary contributions for research staff (CIs and Professional Research Persons) are provided as Personnel Support Packages (PSPs). The level of PSP requested in an application must match the roles and responsibilities of the position and the percentage of the PSP requested must reflect the required time commitment. Applicants must fully justify all requests for PSPs.

Table 2. Personnel Support Packages

Personnel Support Packages – for funding commencing in 2022		
Level	**Description**	**$ per annum**
PSP1	Technical support - non-graduate personnel Note: A PSP1 at 50% may be claimed for postgraduate students supported on NHMRC research grants	58,373
PSP2	Junior graduate research assistant; or junior graduate nurse, midwife or allied health professional; or junior data manager/data analyst	72,888
PSP3	Experienced graduate research assistant/junior postdoctoral research officer; or experienced graduate nurse, midwife or allied health professional; or experienced data manager/analyst	80,148
PSP4	Experienced postdoctoral researcher or clinician without specialist qualifications (i.e., a researcher who may be considered as a named investigator on the research application)	94,666
PSP5	Senior experienced postdoctoral researcher (i.e., a researcher who would normally be considered as a named investigator on the research application and is more than 10 years post-doctorate.	101,924

Chief Investigators

CIs, including the CIA, may draw a salary if they are based in Australia for at least 80% of the grant period. CIs based overseas are not able to draw a salary, but salary support is available for research support staff based overseas (see section 4.1). Requested salaries must be based on PSPs.

Applicants can receive up to 100% salary across NHMRC and MRFF grants. Multiple partial salaries can be drawn up to 100%, if allowed in the grant guidelines for the respective grant opportunity.

Associate Investigators

An Associate Investigator (AI) is an individual who provides intellectual input to the research and whose participation reasonably warrants recognition. AIs are ineligible to draw a salary from this grant opportunity. Up to 15 AIs may be named in an application.

4.4 Other Direct Research Costs

For the purposes of this grant opportunity, other Direct Research Costs (DRCs) are costs that are integral to achieving the approved research objectives of a grant where the recipient is selected on merit against a set of criteria. Such costs must directly address the research objectives of the grant, relate to the approved research plan and require the associated budget to have been properly justified. DRCs may include the following:

- personnel costs related to contract staff and limited external persons (not Chief Investigators or additional personnel). The basis for the costing must be included.
- clinical services that are over and above standard care.
- Medicare costs (out of pocket medical expenses)
- reimbursement of reasonable costs associated with randomised control trials (RCTs)
- reasonable imaging and diagnostic costs (MRI, PET, CT, ultrasound, genotyping, biochemical analysis)
- equipment costing less than $10,000 that is unique to the project and is essential for the project to proceed
- purchases of services directly required for the successful conduct of the project (including services from organisational facilities)
- specialised computing requirements that are essential to meeting project-specific needs.

Publication costs cannot be requested in your application but may be listed as a direct research cost in your financial acquittal.

The above list is not comprehensive. Where a research cost is not included in the above list you should refer to the definition in the first paragraph of this section. If you are still unsure, clarification should be sought from NHMRC. DRCs will be critically scrutinised during the assessment of applications and during on-site compliance monitoring visits.

4.5 Accessing existing research infrastructure

Applicants are encouraged to utilise existing research infrastructure to support their research wherever possible so as to reduce duplication and achieve the best return on grant funding. DRCs can be requested to support access to research facilities and infrastructure.

Applicants are encouraged to consider utilising research infrastructure projects such as those funded by the Australian Government through the National Collaborative Research Infrastructure Strategy (NCRIS). The NCRIS projects encompass a variety of infrastructure relevant to health research such as the Translating Health Discovery (THD) project and the Population Health Research Network (PHRN) project. Further information, including access and pricing, is available on the Department of Education, Skills and Employment website.

Your approach to accessing research facilities or infrastructure may impact the assessment of the suitability and value of the requested budget. For information on how to include information on research facilities within your application refer to section 6.4.

4.6 Travel and overseas expenditure

Applicants may request funding for a component of their research to be undertaken overseas if the equipment/resources required for that component are not available in Australia and the component is critical to the successful completion of the grant.

Eligible overseas activities expenditure is generally limited to 10 per cent of total eligible project expenditure.

Eligible travel and overseas expenditure may include:

- domestic travel limited to the reasonable cost of accommodation and transportation required to conduct agreed project and collaboration activities in Australia
- domestic travel for third parties (i.e. certifiers, tradesman), where the travel is essential to the successful completion of the grant activity
- overseas travel (where it is formally documented within your grant application and formally approved by the relevant MRFF Eligible Organisation, or where subsequently requested, documented and agreed by the Delegate) as being essential to the conduct of the project, ahead of the travel being taken, will be limited to the reasonable cost of accommodation and transportation.

Eligible air transportation is limited to the economy class fare for each sector travelled. Where non-economy class air transport is used:

- only the equivalent of an economy fare for that sector is eligible expenditure
- the grantee will be required to provide evidence showing what an economy air fare cost was at the time of travel
- grant funding only up to the economy air fare cost at the time of travel amount can be used.

When considering an application for overseas travel, the Delegate will undertake a Value with Money assessment to determine whether the cost of overseas expenditure is eligible. This may depend on:

- the proportion of total grant funding that you will spend on overseas expenditure
- the proportion of the service providers total fee that will be spent on overseas expenditure
- how the overseas expenditure is likely to aid the project in meeting the program objectives.

4.7 What the grant money cannot be used for

Indirect costs of research

You cannot use grant funds to pay the indirect costs of research.

Indirect costs of research are organisation overhead costs that benefit and support research. They can include the operations and maintenance of buildings, provision of facilities and libraries, hazardous waste disposal, regulatory and research compliance and administration of research services. Although they are necessary for the conduct of research, and may be incurred in the course of research, they are costs that do not directly address the approved research objectives of a grant.

Costs that cannot be paid with grant funds include, but are not limited to:

- airline club memberships
- computers, computer networks, peripherals and software for communicating, writing and undertaking simple analyses
- communications costs (mobiles, telephone calls)
- conference attendance and associated travel
- entertainment and hospitality costs
- ethics approval costs
- furniture
- health insurance, travel insurance, foreign currency, airport and related travel taxes, passports and visas
- organisational overheads and administrative costs

- non-project related staff training and development
- overseas travel (except as provided for in section 4.6)
- patent costs
- personal membership of professional organisations and groups
- personal subscriptions (e.g. private journal subscriptions)
- physical space and all associated administrative, laboratory and office services
- purchase of reprints
- research infrastructure: facilities necessary for the research endeavour that a responsible Organisation would be expected to supply as a prerequisite to its engagement in research.

Other ineligible expenditure

You cannot use grant funds to cover retrospective costs or to support research activities undertaken outside of Australia (although funding can be sought to support the Australian-based components of multinational clinical trials). See sections 4.6 and 9.1.

A grant for a particular research activity cannot be provided to you if you receive funding from another government source for the same research activity. You can apply for grants under any Commonwealth program but, if your applications are successful, you must choose either the grant from this Program or the other Commonwealth grant.

Where you have submitted the same application to NHMRC and MRFF grant opportunities and have received an offer of funding from one of these sources, NHMRC and the Department of Health reserve the right to withhold any further offer of funding for the application.

Where it appears that an applicant has submitted similar applications for research funding and has been successful with more than one application, the applicant is required to provide NHMRC with a written report clearly identifying the difference between the research aims of the two research activities. If we do not consider the two research activities to be sufficiently different, an offer of funding for one of the applications may be withheld or withdrawn at the discretion of the Minister or the Delegate, or you will be required to decline or relinquish one of the grants (see section 9).

For grants funded under the Emerging Priorities and Consumer Driven Research Initiative, you cannot use the grant to fund extensions of funding for ongoing research projects, as the Initiative and associated grant opportunities aim to support new research projects.

5. The assessment criteria

You must address all assessment criteria in your application. We will assess your application based on the weighting given to each technical criterion and against the non-weighted (non-technical) assessment criterion.

The application form requests information that directly relates to the assessment criteria below. The amount of detail and supporting evidence you provide in your application should be relative to the project size, complexity and grant amount requested. You should provide evidence to support your responses to each criterion. Size limits apply to all responses.

Funding will only be awarded to applications that score satisfactorily against all criteria.

5.1 Assessment Criterion 1 - Project impact (40% weighting)

You are required to address this criterion within your Grant Proposal. Project impact is the potential to increase knowledge of important topics that achieve the outcomes of the grant opportunity and the Initiative. You should demonstrate this by providing details of how your research proposal will be directly relevant to the objectives and desired outcomes of this grant opportunity and the Initiative.

In your application you should:

- describe the potential impact of your research on health outcomes
- articulate how your research will deliver outcomes that are a priority for the Australian public, including details of community engagement and involvement during conceptualisation, development and planned implementation of your project
- demonstrate how a systematic review of the research literature has informed the proposed research
- explain how your research will provide high-quality evidence of scalable clinical models of care and approaches that improve acute care
- describe how your proposed project is engaging with partners (e.g. consumer, commercial, health service delivery, multi-disciplinary, government, policy) to achieve the objectives of the grant opportunity and translate the research outcomes into practice, as quickly as possible
- where relevant, describe the extent to which your research includes new and innovative approaches, such as new clinical trial designs, new treatment methods or adaptions in treating patients
- where relevant, describe the extent to which your research builds on and supports other initiatives, including consideration of existing research outcomes, datasets and other funded activities
- provide details if, and to what extent, your research is leveraging existing or complementary research funding opportunities from Government, non-Government and/or industry sources
- demonstrate how your research will generate the intended outcomes (health outcomes or validated surrogate health outcomes) within 12 months of the grant period concluding.

You should demonstrate how the outcomes or results you have identified against the MRFF Measures of Success are relevant and meaningful to the goal and aims of the Initiative.

Please commence addressing this criterion by substantiating that the research addresses the objective of the grant opportunity as outlined in section 1.3.

Further instructions are in section 6.4.

5.2 Assessment Criterion 2 - Project methodology (30% weighting)

In responding to this criterion you should demonstrate your proposed methodology, encompassing the strengths and weaknesses of the study design and the scientific quality and feasibility of the proposal. You are required to provide information on appropriate milestones, performance indicators and timeframes.

You should also consider the following questions in relation to the scientific quality of your research proposal:

- Is there a clear research question? Does the research measure health outcomes? Or validated surrogates for health outcomes?
- Is the methodology described in sufficient detail? Are the participants, intervention/exposure and comparators/controls clearly specified? Are data collection, management and statistical analysis described?
- Is the methodology appropriate for the research question? What are the strengths and weaknesses of the study design? Have any major pitfalls been overlooked?
- Is the research design feasible? Are the required expertise, tools and techniques established? Are targets for the recruitment of participants realistic? Will the study have sufficient sample size to be able to identify meaningful effect differences?
- Does the proposal include milestones, performance indicators and timeframes?
- Does the proposal identify mechanisms to support ongoing sustainability and affordability of implementing the proposed research findings?

Grantees will be required to report against the milestones, performance indicators and timeframes at twelve month intervals.

Further instructions are in section 6.4.

5.3 Assessment Criterion 3 - Capacity, capability and resources to deliver the project (30% weighting)

This criterion is used to assess whether the research team named in your application has the appropriate mix of research skills and experience to undertake the research project. In demonstrating Capacity, Capability and Resources you should not provide information about your MRFF Eligible Organisation.

Your application must clearly demonstrate that:

- the CIs have an appropriate mix of research skills and experience to successfully undertake this research project
- the CIs have expertise sufficient to anticipate and solve potential obstacles (e.g. higher than anticipated non-compliance rates or new competing therapies) to the successful completion of the proposal, including those related to COVID-19 restrictions where relevant
- the CI team has expertise in all aspects of the Grant Proposal, including the methodological and scientific underpinnings (e.g. statistics, bioinformatics and health economics)
- the CI team's previous research outputs demonstrate their capability to undertake the research project
- the research team builds capacity by including researchers across career stages

Each CI should provide an example from within the last 5 years of how their research has impacted policies or programs, through the translation or implementation of the research findings.

Your application should also provide details of any relative to opportunity and career disruption considerations, where relevant.

Further instructions are in section 6.4.

Relative to Opportunity

For this grant opportunity, the policy is that assessment processes will accurately assess an applicant's track record and associated productivity relative to stage of career, including consideration as to whether productivity and contribution are commensurate with the opportunities available to the applicant. In alignment with NHMRC's Principles of Peer Review, particularly the principles of fairness and transparency, the following additional principles further support this objective:

- Research opportunity: Researchers' outputs and outcomes should reflect their opportunities to advance their career and the research they conduct
- Fair access: Researchers should have access to funding support available through NHMRC grant programs consistent with their experience and career stage
- Career diversity: Researchers with career paths that include time spent outside of academia should not be disadvantaged. We recognise that time spent in sectors such as industry may enhance research outcomes for both individuals and teams.

The above principles frame our approach to the assessment of a researcher's track record during expert review of grant applications. We expect that those who provide expert assessment will give clear and explicit attention to these principles to identify the highest quality research and researchers to be funded. We recognise that life circumstances can be very varied and therefore it is not possible to implement a formulaic approach to applying Relative to Opportunity and Career Disruption considerations during expert assessment.

Circumstances considered may include:

- amount of time spent as an active researcher
- available resources, including situations where research is being conducted in remote or isolated communities
- building relationships of trust with Aboriginal and/or Torres Strait Islander communities over long periods and subsequent impact on track record and productivity
- clinical, administrative or teaching workload
- relocation of an applicant and their research laboratory or clinical practice setting or other similar circumstances that impact upon research productivity
- for Aboriginal and/or Torres Strait Islander applicants, community and cultural obligations
- restrictions on publication of research undertaken in other sectors
- the typical performance of researchers in the research field in question
- research outputs and productivity noting time employed in other sectors. For example, there might be a reduction in publications when employed in sectors such as industry
- carer responsibilities (that do not come under *Career Disruption* below)
- calamities, such as pandemics, bushfires or cyclones.

Career Disruption

A career disruption involves a prolonged interruption to an applicant's capacity to work, due to pregnancy, major illness/injury or carer responsibilities.

Interruptions must involve either a continuous absence from work for periods of 90 calendar days or more and/or a long-term partial return to work that has been formalised with the applicant's employer.

The period of career disruption may be used to determine an applicant's eligibility for a grant opportunity or to allow additional track record information to be considered during assessment. See also *Relative to Opportunity* above.

Circumstances not meeting the requirements for consideration under career disruption may be considered under *Relative to Opportunity*.

5.4 Assessment Criterion 4 - Overall Value and Risk of the Project (non-weighted)

Your application should demonstrate the overall value and risk of the project, including that you have robust risk identification and management processes. This should include consideration of risks related to COVID-19 restrictions.

You should provide:

- your Measures of Success statement
- your proposed budget and justification
- a risk management plan.

Our assessment will also take into consideration:

- the relative contribution of the outcomes or results you have identified against the MRFF Measures of Success to the goal and aims of the Initiative
- whether the overall strategy, methodology, and analyses are well-reasoned, appropriate and feasible to accomplish the specific aims of the project
- the suitability of your proposed budget to complete all project activities
- how well the requested budget has been detailed and justified
- the value and type of any partner contributions to your project
- how soundly your risk management approach is demonstrated
- any risks identified as part of the assessment of your application
- the appropriateness of the submitted risk management plan in documenting key risks to the completion of the research proposal, including your plan to manage those identified risks
- how you propose to monitor and report risks (both those identified in your submitted risk management plan and those which may arise during your project).

Refer section 6.4 and to the *Rating Scale for Overall Value and Risk* for further information.

5.5 Health research involving Aboriginal and/or Torres Strait Islander peoples

We are committed to improving the health outcomes of Aboriginal and/or Torres Strait Islander peoples and encourage applications that address Aboriginal and/or Torres Strait Islander health.

NHMRC has established certain requirements and processes designed to ensure that research into Aboriginal and/or Torres Strait Islander health is of the highest scientific merit and is beneficial and acceptable to Aboriginal and/or Torres Strait Islander peoples and communities.

To qualify as Aboriginal and/or Torres Strait Islander health research, at least 20% of the research effort and/or capacity building must relate to Aboriginal and/or Torres Strait Islander health.

Qualifying applications must address Indigenous research excellence in Sapphire, as follows:

- Community engagement - the proposal demonstrates how the research and potential outcomes are a priority for Aboriginal and/or Torres Strait Islander communities with relevant community engagement by individuals, communities and/or organisations in conceptualisation, development and approval, data collection and management, analysis, report writing and dissemination of results.

- Benefit - the potential health benefit of the project is demonstrated by addressing an important public health issue for Aboriginal and/or Torres Strait Islander peoples. This benefit can have a single focus or affect several areas, such as knowledge, finance and policy or quality of life. The benefit may be direct and immediate or it can be, indirect, gradual and considered.
- Sustainability and transferability - the proposal demonstrates how the results of the project have the potential to lead to achievable and effective contributions to health gain for Aboriginal and/or Torres Strait Islander peoples, beyond the life of the project. This may be through sustainability in the project setting and/or transferability to other settings such as evidence-based practice and/or policy. In considering this issue the proposal should address the relationship between costs and benefits.
- Building capability - the proposal demonstrates how Aboriginal and/or Torres Strait Islander peoples, communities and researchers will develop relevant capabilities through partnerships and participation in the project.

Your response will be taken into account when assessing your application against the Assessment Criteria relevant to your proposal (refer to the *Assessment Criteria Scoring Matrix* for further information).

You will address Indigenous research excellence within the form provided in Sapphire.

Further instructions are in section 6.4.

5.6 Consumer and community involvement

The Statement on Consumer and Community Involvement in Health and Medical Research (the Statement) has been developed because of the important contribution consumers make to health and medical research. The Statement's purpose is to guide research institutions, researchers, consumers and community members in the active involvement of consumers and community members in all aspects of health and medical research. NHMRC and the Consumers Health Forum of Australia Ltd worked in partnership with consumers and researchers to develop the Statement. Further information on the Statement is available on NHMRC's website.

Researchers are encouraged to consider the benefits of actively engaging consumers in their proposed research (see section 5.1).

6. How to apply

Before applying, you must read and understand these guidelines.

These documents may be found at GrantConnect. Any alterations or addenda[5] will be published on GrantConnect and by registering on this website, you will be automatically notified of any changes. GrantConnect is the authoritative source of information on this grant opportunity.

Applications must be submitted electronically using Sapphire. Electronic submission requires the MRFF Eligible Organisation and CIs named in an application to register for an account.

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[5] Alterations and addenda include but are not limited to: corrections to currently published documents, changes to close times for applications, Questions and Answers (Q&A) documents and Frequently Asked Questions (FAQ) documents

If an organisation wishing to apply is not yet an approved MRFF Eligible Organisation, the organisation must complete an MRFF Eligible Organisation certification form and receive approval before the organisation will receive a Sapphire account. It is important that the organisation submits their MRFF Eligible Organisation certification form as soon as possible, so there is enough time for the certification process to be completed in Sapphire before the minimum data due date (see section 3.1).

CIs who are not registered in Sapphire can submit a new user request via the system login page. Sapphire Tutorials and FAQs can be found here:

Tutorials: https://healthandmedicalresearch.gov.au/tutorials.html#

FAQ: https://healthandmedicalresearch.gov.au/help.html

Contact your RAO or the NHMRC Research Help Centre for further assistance.

Your application will consist of:

- a Profile Report containing information drawn from each CI's Profile in Sapphire
- an Application Report containing information that you entered directly into the Application Form in Sapphire
- a Grant Proposal (including a Risk Management Plan and a Measures of Success statement). You will upload this PDF file into Sapphire (see section 6.4)
- a Declaration of Applicant Interests. You will upload this PDF file into Sapphire (see section 6.4 and 12.1)
- letter/s of support from partner organisation/s (where relevant). These PDF files will be uploaded into Sapphire (see section 6.4)
- letter/s from research facilities (where relevant). These PDF files will be uploaded into Sapphire (see section 6.4).
- a statement of claims against the Aboriginal and/or Torres Strait Islander Research Excellence criteria (where relevant). You will enter this information directly into the Application Form in Sapphire (see section 5.4).

Detailed instructions on completing your application are in section 6.4. Your MRFF Eligible Organisation is required to certify your application as correct and complete prior to submitting it to NHMRC. Giving false or misleading information is a serious offence under the *Criminal Code 1995* and we will investigate any false or misleading information and may exclude your application from further consideration.

Examples of false or misleading information in an application include, but are not limited to:

- providing a dishonest statement regarding time commitments to the research
- providing incomplete or inaccurate facts regarding other sources of funding
- providing a fictitious record of your achievements
- falsifying claims in publication records (such as describing a paper as accepted for publication when it has only been submitted).

If we believe that omissions or inclusion of misleading information are intentional we may refer the matter for investigation and take action under the grant guidelines, the grant agreement or, for this grant opportunity, the NHMRC Research Integrity and Misconduct Policy.

You cannot change your application after the closing date and time. You should keep a copy of your application and any supporting documents.

6.1 Joint (consortia) applications

In some cases, the organisation that will administer your grant may differ from the organisation in which you will actually conduct the proposed research. For example, many universities administer research being conducted in an affiliated teaching hospital. You are required to list participating organisations in your application and specify the percentage of the research effort being undertaken within these organisations.

Prior to submission your MRFF Eligible Organisation's RAO is required to assure us that arrangements for the management of the grant have been agreed between all organisations associated with the application.

6.2 Timing of grant opportunity processes

Minimum data describing your application must be submitted by the due date shown below. Applications that fail to satisfy this requirement will not be accepted.

Applications must be submitted to NHMRC by the closing date below. Late applications will not be accepted.

Requests for application extensions will be considered on a case by case basis and must be submitted by email to help@nhmrc.gov.au on or before the close date and time. Requests will only be considered for:

- unforeseen circumstances, e.g. natural calamities such as bushfires, floods or cyclones, or
- exceptional circumstances that affect multiple applicants, e.g. power and/or internet network outages, or
- where an applicant, or a member of their immediate family[6], is incapacitated due to an unforeseen medical emergency, such as life-threatening injury, accident or death.

Extensions, if granted, will be for a maximum of seven calendar days. This is to ensure that subsequent assessment processes and approval of funding recommendations are not delayed.

Requests for extension submitted after the scheme close date and time will not be considered.

The expected completion date of your research must be nominated in your application and must not extend beyond the grant period specified in section 2.2.

Table 3. Expected timing for this grant opportunity

Activity	Timeframe
Applications open	XX January 2022
Minimum data due	5pm ACT local time on XX February 2022
Applications close	5pm ACT local time on XX March 2022
Assessment of applications	XX March 2022
Approval of outcomes of selection process	XX April 2022

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[6] Immediate family comprises a spouse, child, parent or sibling. It includes de facto, step and adoptive relations (e.g. de facto, step or adopted children).

Activity	Timeframe
Announcement of outcomes	XX May 2022
Notification to unsuccessful applicants	On announcement
Acceptance of grant offer	To be specified within the grant schedule (generally within one month of formal offers)
Grant activity commences	To be specified within the grant schedule (within a reasonable timeframe following execution of the grant schedule)
End date of grant activity	Within 5 years of execution of the grant schedule

To avoid delays to the commencement of research, applicants are encouraged to seek ethics approval as soon as their application is drafted, prior to announcement of outcomes.

6.3 Questions during the application process

Applicants requiring further assistance should direct enquiries to their MRFF Eligible Organisation's Research Administration Officer. Research Administration Officers can contact NHMRC's Research Help Centre for further advice:

Phone: 1800 500 983

Email: help@nhmrc.gov.au

NHMRC will not respond to any enquiries submitted after the date and time indicated on the cover page of these grant guidelines.

Any alterations or addenda to the grant guidelines will be published on GrantConnect.

6.4 Completing the grant application

Using Sapphire

Applications must be submitted electronically using Sapphire. Electronic submission requires approved MRFF Eligible Organisations and CIs on an application to register for an account.

Sapphire Tutorials and FAQs can be found here:

Tutorials: https://healthandmedicalresearch.gov.au/tutorials.html#

FAQ: https://healthandmedicalresearch.gov.au/help.html

If you have any technical difficulties, please contact your RAO or NHMRC's Research Help Centre on

1800 500 983 or by email to help@nhmrc.gov.au.

Starting your application in Sapphire

Applicants must create a new application for this grant opportunity in Sapphire. The following advice is provided to assist you to complete specific sections of the application.

Minimum data

You must submit minimum data in Sapphire by the applicable due date and time.

Failure to meet this deadline will result in your application not proceeding.
Minimum data are indicated in Sapphire by a blue flag and are comprised of:

- Application Title (minimum of 10 characters)
- Application Details:
  - MRFF Eligible Organisation
  - Stream applied for (one per application)
  - Aboriginal/Torres Strait Islander Research (yes/no)
  - Project Synopsis (see *Project Synopsis* below) (minimum of 100 characters)
  - Privacy Agreement
- Research Classification:
  - Broad Research Area
  - Fields of Research
  - Peer Review Areas (at least three subjects must be selected)
  - Research Keywords (five keywords must be selected)
- Research Team:
  - Chief Investigator A (a complete CIA Role, Name and Email).

Using placeholder text such as “text”, “synopsis” or “xx” etc. is not acceptable as minimum data.

Please note you will also need to complete the Privacy Agreement in order to save your minimum data. Your RAO is not required to certify the minimum data. Applications should only be certified once complete and ready for submission.

Profile requirements

Instructions for entering Profile information in Sapphire are provided in the relevant Sapphire user guides. All mandatory sections of your CIs’ profiles must be completed.

It is important that CIs update their Profile in Sapphire prior to certification of the application by your RAO. Changes made to your CV after RAO certification will not appear in the submitted application.
The following components of your CIs’ Profile will be incorporated into your application:

My Grants (during the last 5 years)

Provide sufficient details about the funding to make clear what the funding was intended for, what you achieved and your role within these grants.

Other Funding (during the last 5 years)

Provide sufficient details about the funding to make clear what the funding was intended for, what you achieved and your role within these grants.

Career Disruptions (during the last 5 years)

For guidance on what constitutes a career disruption see section 5. If applicable, you (or members of your CI Team) should use this opportunity to declare any career disruptions that may be relevant to your career history.

If you have had an extended career disruption within the last 5 years, it is advised that you briefly explain this in your application and nominate additional research achievements from the most recent year/s without a career disruption.

For example, if in the last 5 years you have taken six (6) months of parental/carer's leave and then returned to work at 0.5 Full Time Equivalent (FTE) for three (3) years before resuming at a full-time level, you will have worked an equivalent of 3 FTE over the past 5 years.

You should therefore:

1. provide the details of your career disruption/s in your Profile in Sapphire
2. consider including publication/s that predate 5 years by the claimed FTE (two (2) years in the above example) in your publications list (see below)
3. consider including research achievements that predate 5 years by the claimed FTE (2 years in the above example) in section D2 - Chief Investigator capability and capacity of the Grant Proposal (see section 6.4). Please preface these items in D2 with the following sentence: *The following have been included in accordance with sections 5.3 and 6.4 of the grant guidelines (career disruption)*.

When providing the details for your career disruption/s in Sapphire, please select the nature of the career disruption from the drop down menu.

- Impact

Provide a brief explanation on the impact the career disruption/s has had on your research and research achievements and associated productivity relative to stage of career. Applicants should not describe the nature of the career disruption in this field. Note that this information will be provided to expert assessors. Maximum of 2000 characters including spaces and line breaks.

- Additional research outputs

The Additional Research Outputs section of your Sapphire Profile does not need to be completed for this grant opportunity (refer to Publications and section D2 of the Grant Proposal).

- Dates

You are required to nominate the periods in the last 5 years where you have had a disruption (approximate dates). Entries will be listed in reverse chronological order.

Relative to Opportunity (during the last 5 years)

If applicable, you (or members of your CI Team) should use this section to provide details on any relative to opportunity considerations and the effect they have had on your research and research achievements. For guidance on what constitutes 'relative to opportunity' see section 5.

Project Synopsis

A Synopsis of your application is required in the Sapphire form as part of the minimum data requirements. This information will inform the selection of assessors with suitable expertise to review your application, and for communication with various audiences regarding how the grants selected for funding will achieve the outcomes sought from this grant opportunity.

Applicants proposing clinical research, including clinical trials, should ensure that the Project Synopsis is written in plain English, incorporates Participant, Intervention, Comparator and Outcome, and concludes by stating why the research is important.

Publications (during the last 5 years)

For each CI, nominate up to five (5) publications from the past 5 years (taking into account Career Disruptions) in the free text fields provided. For each publication, sufficient information should be provided in an appropriate format for an assessor to identify the publication (maximum 200 characters including spaces and line breaks). Web links can be used to reference publications where there is no practical alternative (see section 6.4).

Provide an explanation of how the publications illustrate your capability to contribute to the proposed research (maximum 2000 characters including spaces and line breaks). Metrics (but not journal-based metrics) may be included in your explanation.

The Grant Proposal

You will upload your Grant Proposal into Sapphire as a PDF file. A pre-formatted Microsoft Word template for the Grant Proposal can be downloaded from the grant opportunity webpage on GrantConnect.

Applicants must use this template to complete their Grant Proposal. Mandatory naming, size and formatting requirements apply.

Table 4. Formatting Requirements for the Grant Proposal

Formatting Requirements for the Grant Proposal	
File format	The Grant Proposal must be saved and uploaded in Portable Document Format (PDF)
File size	The PDF file MUST NOT exceed 2MB in size
File name	The PDF file must be named as follows: *CIA Surname_ grant opportunity name_document type.pdf* e.g. Smith_ 2022 Models of care to improve acute care _Grant Proposal.pdf
Page size	A4
Page limits	Page limits are specified for each component of the Grant Proposal
Font	NHMRC recommends a minimum of 12 point Times New Roman. Applicants must ensure the font is readable.
Header	Application ID and CIA surname must be included in the header
Line spacing	Single
Language	English

Web links	Web links are not permitted except in citations of materials only available online. The full URL must be provided and the style must allow identification from a printed version of the application.

Applications that fail to comply with the formatting requirements or the specified page limits may be excluded from consideration. Applicants and MRFF Eligible Organisations are advised to retain a copy of the PDF file. If printing the PDF file for the purposes of checking formatting and page length, ensure that page scaling is set to ‘None’ in the print settings.

Your Grant Proposal must include the following components, and no other components:

Table 5. Grant Proposal Components

	Component	Page Limit
A	Project impact	3 pages
B	Project methodology	5 pages
C	Milestones and Performance Indicators	2 pages
D	Capacity, capability and resources to deliver the project	
	1. Team capacity and capability relevant to this application	1 page
	2. Chief Investigator capacity and capability	1 page per CI
E	Overall Value and Risk of your project	
	1. Risk Management Plan	2 pages
	2. Partner Funding	1 page
F	Measures of Success statement	1 page
G	References	1 page

A brief description of each component is provided below.

A. Project impact (maximum three A4 pages)

This section should be used to address Assessment Criterion 1 – Project Impact. Applicants are requested to commence this section (i.e. the top of the first page) by substantiating that the proposed research project meets the objectives as described in section 1.3. Applicants should articulate how the proposed project will facilitate high-quality interdisciplinary research that addresses the needs of communities and health consumers.

B. Project methodology (maximum five A4 pages)

This section should be used to address Assessment Criterion 2 - Project methodology. Please provide sufficient background information to justify the research being proposed, identify the aims and approach to be taken and provide sufficient information on the research plan for assessors to assess scientific validity, research quality and feasibility. Provide details to demonstrate your access to critical resources that will support the research. This section may include background, defined aims and outcomes.

C. Milestones and Performance Indicators (maximum two A4 pages)

This section should be used to address Assessment Criterion 2 - Project methodology. Please provide a table of milestones and performance indicators and corresponding dates. The approach should be specific to the proposed research project and provide for effective monitoring of progress at twelve month intervals. Applicants applying to this grant opportunity under the Emerging Priorities and Consumer Driven Research Initiative are encouraged to include milestones such as receipt of ethics approval for first trial site and all trial sites, enrolment of first participant, recruitment numbers per month, reporting to Human Research Ethics Committees (HREC) sites, budget targets, placement of data in a repository, close out and publication.

You must indicate how your milestones and performance indicators take into account potential disruptions to your research due to COVID-19 restrictions. Grantees will be required to report against milestones, performance indicators and timeframes at twelve month intervals.

D. Capacity, capability and resources to deliver the project

This section should be used to address Assessment Criterion 3 - Capacity, capability and resources to deliver the project. Provide details of any relative to opportunity and career disruption considerations, where relevant.

1. Team Capacity and Capability relevant to this application (maximum one A4 page)

You should provide a summary of the research team's overall capacity and capability including:

- the expertise and productivity of team members relevant to the proposed project
- the team's influence in this specific field of research
- how the team will work together on this project
- how junior members are contributing to the capabilities of the team.

Applicants should clearly articulate how the proposed project encourages collaboration between health researchers, health professionals, the private sector, and/or industry.

Information about Associate Investigators must not be included as contributing to team capacity and capability.

2. Chief Investigator Capacity and Capability (maximum one A4 page per CI)

CIs should use this section to highlight their research achievements. Each CI should provide an example/s from the last 5 years (taking into account Career Disruptions) on the impact of previous research.

Some examples of research impact may include:

- development of new knowledge within an internationally recognised field of research
- improvement to health in the Australian population and/or in Aboriginal and Torres Strait Islander communities
- improvement to health systems, services, policy, programs or clinical practice
- development of a service delivery or system change, prevention or intervention program, device, therapeutic or change in clinical practice

- change in policy that has impacted social well-being, equality or social inclusion or impacted the social well-being of the end-user, public and community.

E. Overall Value and Risk of your project

This section should be used to address Assessment Criterion 4 - Overall Value and Risk of your project. This Assessment Criterion is used to determine how well your project presents as an investment in the achievement of MRFF priorities, as well as that the application represents an efficient, effective, economical and ethical use of public resources. Your project should also thoroughly consider the risks associated in all aspects of the delivery of your project, and the impact of these risks. Your response to the criteria must consist of the following:

1. A Risk Management Plan (maximum two A4 pages)

Please provide a Risk Management Plan that addresses key risks in relation to your project and how you propose to address, manage, mitigate, monitor and report those risks including risks related to COVID-19 restrictions. Risk themes for consideration in developing your risk management plan are provided in the below table (the list is not exhaustive).

Risk Themes	Types of Risk
People	People capability Recruitment Project management Stakeholders Safety
Information	Intervention or procedures for gathering research data Data integrity / accuracy Data disclosure / unauthorised access
Governance	Accountability Assurance processes Litigation Reporting
Delivery	Scientific design / research integrity Budget / financial Innovation Resources Project failure Performance measures Poor practice / incorrect analysis
Regulatory	Legislation Ethics Policy

STEP 1: Provide a tabulated list of the key risks in the following format:

Risk theme	Risk	How risk is mitigated / managed

STEP 2: You must also explain how you propose to monitor and report risks (both those identified in your submitted risk management plan and those which may arise during your project):

- describe your proposed approach for monitoring risks (e.g. timing of review, what risk ratings you propose to use in monitoring, whose responsibility)
- describe how you plan to report on risks (e.g. what you will report, what process, to who and at what point).

The risk management plan (incorporating **STEPS 1 and 2**) must be no longer than two A4 pages in length.

2. Partner Funding (maximum one A4 page)

Applicants should provide a tabulated list of any contributions (either funding or in-kind) from partner organisations in the following format:

Name of partner organisation	Type of contribution	Value of contribution

Note that applicants are required to submit a letter of support from each partner organisation as part of their application. See *Letters of support from Partner Organisations* below.

F. Measures of Success statement (maximum one A4 page)

This section should be used to address Assessment Criterion 1 – Project Impact and Assessment Criterion 4 - Overall Value and Risk of your project. This statement is used to determine the extent to which your project will contribute to the Measures of Success for the MRFF as described in the Evaluation Strategy, taking into consideration the objectives and outcomes of the Emerging Priorities and Consumer Driven Research Initiative. Your response must provide a tabulated description of how the research activities will contribute to one or more of the Measures of Success described in the Evaluation Strategy and appropriate outcome/s or result/s against which your progress will be evaluated in the following format:

Measure of success	How the project will contribute towards the measure of success	Description of outcome or result against which the contribution will be evaluated

The statement must be no longer than one A4 page in length. Grantees will be required to report against the outcome/s or result/s at twelve month intervals.

G. References (maximum one A4 page)

Provide a list of all references cited in the application using a recognised citation style. Only include references to cited work.

Letters of support from Partner Organisations

Information on any partner organisation(s) contributing to your grant must be entered into the 'Partner Organisation(s)' section within the application form in Sapphire. Provide the name and address of the partner organisation and the details of an authorised officer within the organisation. The authorised officer must be a person occupying a position with responsibility for the Partner's participation in the research who has the authorisation to expend the partner's money or resources.

A letter of support should be uploaded for each partner organisation listed in your application. The letter must be on the partner organisation's letterhead and be signed by the authorised officer (see above). Please note that applicants should not sign the letter of support unless they are a representative of the partner organisation and have the authorisation to expend the partner's money or resources.

Each letter of support should be no more than two A4 pages in length and must include:

- application number and title
- a brief description of the partner organisation
- the authorised officer's role within the organisation
- the organisation's lead researcher for the study (name, position held and a brief background)
- information on the financial and/or in-kind support for the proposed research that are the responsibility of the partner organisation
- consent for the Australian Government to identify the partner organisation in media releases, on websites and in future grant opportunity documentation
- a weblink to the partner organisation's most recent annual report - the full URL must be provided and the style must allow identification from a printed version of the grant application.

Letters of support should comply with the formatting requirements for the Grant Proposal (see section 6.4) with exceptions to provide for the use of organisational letterheads and a weblink to the annual report. It is important that the title of the file is in the following format: *CIA Surname_grant opportunity name_LoS_organisation name (or acronym).pdf*

Declaration of Applicant Interests

Your declaration of applicant interests will take the form of a single PDF file that complies with the formatting requirements for the Grant Proposal specified in section 6.4. It is important that the name of the file is in the following format: *CIA Surname_grant opportunity name_Declaration of Interests.pdf*

The declaration should be uploaded into Sapphire.

For further details see section 12.2.

Direct Research Costs

Enter details of the proposed research budget into Sapphire, keeping in mind the level and duration of funding available under this grant opportunity. Details on permitted uses of funds and setting of budgets can be found in section 4. All components of your budget requests are to be included in 'Direct Research Costs'.

Requests for Equipment, PSPs and DRCs must be included in your budget. For each item you must enter:

- the item type
- the name/description of the item
- the total value of the item requested for each year
- a justification for the particular item requested.

Applicants may request funding for services from research facilities required to undertake the Grant Proposal. These services may include, but are not limited to, biospecimens or data from biobanks, pathology services, clinical registries, the Australian Twin Registry, Cell Bank Australia, the Trans-Tasman Radio Oncology Group or clinical trial services.

Provide details of the costs of using the services of research facilities within 'Other Research Costs' in Sapphire and ensure they are fully justified. Applicants should consult with research facilities to ensure that the services they require can be provided and that the charges included in the research budget reflects their charges. Letters from research facilities confirming their collaboration must be uploaded into Sapphire in 'Third Party Research Facilities'. It is important that the name of the file is in the following format: *CIA Surname_grant opportunity name_Research Facilities.pdf*.

Submitting the application

Prior to submitting the application the CIA and RAO must ensure that:

- all CIs have provided written agreement to the CIA for the final application to be certified
- all personnel have provided written agreement to their being named in the application, to participate in the manner described in the application and to the use of their personal information as described in the *NHMRC Privacy Policy*.

Once all Profile details, application form details and PDF documents have been entered/uploaded into Sapphire, the application can be certified and submitted.

Certification is required by both the CIA and MRFF Eligible Organisation. Please review the application to ensure it is accurate and complete and meets all eligibility requirements.

The CIA must provide the RAO with evidence that the application is complete. This written evidence should be retained by the MRFF Eligible Organisation and must be provided to us on request. The following assurances, acknowledgements and undertakings are required of the CIA prior to submitting an application:

- all required information has been provided and is complete, current and correct
- all eligibility and other application requirements have been met
- all personnel contributing to the research activity have familiarised themselves with the *Australian Code for the Responsible Conduct of Research*, the *National Statement of the Ethical Conduct of Human Research*, the *Australian Code for the Care and Use of Animals for Scientific Purposes* and other relevant NHMRC policies concerning the conduct of research, and agree to conduct themselves in accordance with those policies
- that the application may be excluded from consideration if found to be in breach of any requirements, in accordance with section 3.

and if funded,

- the research will be carried out in strict accordance with the grant guidelines, grant agreement and schedule, and
- the research may be used to inform evaluations of the grant opportunity and the Program.

The following assurances, acknowledgements and undertakings are required of the MRFF Eligible Organisation prior to submitting an application:

- reasonable efforts have been made to ensure the application is complete and correct and complies with all eligibility and other application requirements detailed in the grant guidelines
- where the CIA is not an Australian citizen or permanent resident, they will have the requisite work visa in place at the time of accepting the grant and will be based in Australia for the duration of the grant period
- the appropriate facilities and salary support will be available for the entirety of the grant period
- approval of the research activity by relevant organisational committees and approval bodies, particularly in relation to ethics and biosafety, will be sought and obtained prior to the commencement of the grant, or the research activities that require their approval
- arrangements for the management of the grant have been agreed between all organisations associated with the application
- the application is being submitted with the full authority of, and on behalf of, the MRFF Eligible Organisation, noting that under section 136.1 of *the Commonwealth Criminal Code Act 1995*, it is an offence to provide false or misleading information to a Commonwealth body in an application for a benefit. This includes submission of an application by those not authorised by the MRFF Eligible Organisation to submit applications for funding to NHMRC.

The MRFF Eligible Organisation's RAO must certify and submit grant applications. Once an application has been submitted and the application period has closed, the application is considered final and no changes may be made.

7. The grant selection process

7.1 Assessment of grant applications

NHMRC will assess the eligibility of your application at any stage following the close of applications. NHMRC may request further information in order to assess whether the eligibility requirements have been met. MRFF Eligible Organisations will be notified in writing of ineligible applications and are responsible for advising applicants.

If eligible, we will then assess your application on its merits, based on:

- how well it meets the assessment criteria
- whether it provides value with relevant money.[7]

Scoring of the technical assessment criteria will be done in accordance with the Assessment Criteria Scoring Matrix provided with these grant guidelines. Rating of the non-technical (Overall Value and Risk of your project) assessment criterion will be done in accordance with the Rating Scale for Assessment Criterion: Overall Value and Risk of your project provided with these grant guidelines.

To be awarded MRFF funding applications must receive a score of 4 or higher against each of the weighted technical assessment criteria (criteria 1, 2 and 3), and a rating of 'Good' or 'Excellent' for the non-weighted assessment criterion (criterion 4). When assessing the extent to which the application provides value with relevant money, we will have regard to:

- its potential contribution to the achievement of outcomes of this grant opportunity and the MRFF, relative to the value of the grant amount sought, and
- the extent to which the evidence in the application demonstrates that it will contribute to meeting the outcomes/objectives.

7.2 Who will assess applications?

Applications will undergo rigorous assessment whereby they are subject to scrutiny and evaluation by individuals with relevant experience and expertise appropriate to the grant opportunity such as scientific experts, consumers, industry experts and health service providers. Assessors will be selected on the basis that they will bring experience and expertise in a range of areas including:

- trans-disciplinary
- academia
- clinical
- health services delivery
- translation research
- consumer and patients
- Aboriginal and/or Torres Strait islander health
- Industry and commercialisation expertise.

Gender balance will also be considered, along with geographic representation. We strive to include at least one international representative to ensure MRFF funded research is internationally competitive.

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[7] See glossary for an explanation of 'value with money'.

When developing your application, you should take into account the nature of expert assessment: assessors will be selected taking into account the experience and expertise appropriate to the grant opportunity and may draw, as appropriate, from their breadth of knowledge relevant to the grant opportunity when assessing applications. Issues not relevant to the assessment criteria will not be considered.

Australian and/or international expert assessors will be selected and applicants should therefore construct applications with the knowledge that the full application may be provided to Australian and international expert assessors.

Assessors are required to declare material personal interests (financial or non-financial) and material personal associations in accordance with NHMRC policy on the declaration and management of conflicts of interest.

Expert assessors will score your application against the technical assessment criteria (criteria 1, 2 and 3) and the non-technical assessment criterion (criterion 4). NHMRC may collate the scores against the technical assessment criteria provided by expert assessors to identify applications to be considered for funding and less meritorious applications, which may then be removed from further consideration. A grant assessment committee may meet to discuss the application and finalise assessment scores.

NHMRC may seek additional advice on any application.

NHMRC will forward the outcomes of the assessment process to the Department of Health. NHMRC may also provide copies of all application information to the Department of Health.

Applicants must not make contact about their application with anyone who is directly engaged with its assessment such as a member of the grant assessment committee. Doing so may constitute a breach of the *Australian Code for the Responsible Conduct of Research 2018* and result in the application being excluded from consideration.

7.3 Who will approve grants?

NHMRC will provide the outcomes of the assessment process to the Department of Health. This information will consist of a combined score against each of the individual technical assessment criteria, a weighted combined score against the technical assessment criteria and a separate rating against the non-technical assessment criterion.

The Minister or the Delegate will approve grants drawing on the outcomes of NHMRC's assessment process. The Delegate may take into consideration applicant interests declared pursuant to section 12.1.

The Delegate's decision is final in all matters, including:

- the approval of grants
- the grant funding amount to be awarded
- the terms and conditions of the grant.

The Delegate must not approve funding if it reasonably considers that the funding available across financial years will not accommodate the funding offer, and/or the application does not represent value with relevant money (see section 7.1).

8. Notification of application outcomes

You will be advised of the outcome of your application by NHMRC via Sapphire. If you are successful, you will also be advised about any specific conditions attached to the grant, including the timing of any public communications you make regarding being awarded a grant.

8.1 Feedback on your application

All applicants will be provided with feedback on the outcome of the application, which may consist of individual scores and an overall score against the technical assessment criteria, and a rating against the non-technical assessment criterion.

9. Successful grant applications

Successful applicants are expected to contribute to assessment processes for future MRFF grant opportunities which require expert assessment.

A grant cannot be provided to you if you receive funding from another source for the same purpose. You can apply for grants under any program but, if your applications are successful, you must choose either the grant from this Program or the other grant.

Where you have submitted the same application to other grant opportunities and have received an offer of funding from one of these sources, NHMRC and the Department of Health reserve the right to withhold any further offer of funding for the application.

Where it appears that an applicant has submitted similar applications for research/project funding and has been successful with more than one application, the applicant is required to provide a written report clearly identifying how the proposed research objectives/outcomes and expenditure in the applications are different. If the applications are not sufficiently different, NHMRC and the Department of Health reserve the right to withhold or withdraw an offer of funding at the discretion of the Minister or the Delegate, or you will be required to decline or relinquish one of the grants.

9.1 The grant agreement

Your MRFF Eligible Organisation must enter into a legally binding grant agreement with the Commonwealth. The grant agreement will consist of a schedule underneath the Funding Agreement between the Commonwealth and the MRFF Eligible Organisation through which you applied. A sample Funding Agreement and schedule are available on NHMRC's website.

We must execute a grant agreement with the MRFF Eligible Organisation before we can make any payments. Execute means both the MRFF Eligible Organisation and the Program Delegate have signed the grant agreement. We are not responsible for any expenditure you incur until a grant agreement is executed. You must not start any research activities until a grant agreement is executed.

The approval of your grant may have specific conditions determined by the assessment process or other considerations made by the Minister or the Delegate. We will identify these in the offer of grant funding.

If the MRFF Eligible Organisation enters an agreement under this grant opportunity, you cannot receive other grants for the same research activity from other Commonwealth, State or Territory granting programs.

The Commonwealth may recover grant funds if there is a breach of the grant agreement.

The offer may lapse if both parties do not sign the grant agreement within a specified time period. Under certain circumstances, we may extend this period. We base the approval of your grant on the information you provide in your application. We will review any required changes to these details to ensure they do not impact the project as approved by the Minister or the Delegate.

Where a grantee fails to meet the obligations of the grant agreement, the Commonwealth may suspend grant payments and take action to recover grant funds.

Your MRFF Eligible Organisation should not make financial commitments until a Funding Agreement and schedule have been executed by the Commonwealth and your MRFF Eligible Organisation continues to meet its undertakings, including:

- where the CIA is not an Australian citizen or permanent resident, having the requisite work visa in place at the time of accepting the successful grant and being based in Australia for the duration of the grant period
- the appropriate facilities and salary support being available for the entirety of the grant period
- approval of the research activity by relevant organisational committees and approval bodies, particularly in relation to ethics and biosafety, being sought and obtained prior to the commencement of the research, or the parts of the research that require their approval, and
- arrangements for the management of the grant having been agreed between all organisations associated with the research.

If the above undertakings are not being met your MRFF Eligible Organisation must notify NHMRC. Payment of the grant may be suspended until NHMRC and the Department of Health has considered a request from your MRFF Eligible Organisation to vary the grant conditions.

Commonwealth commercialisation clauses

The Grant Agreement relating to projects funded under this Grant Opportunity may include the Commonwealth commercialisation clauses.

These commercialisation clauses seek to ensure that the Commonwealth has an early opportunity to enter into arrangements with any counter party to commercialisation agreements to permit the Commonwealth's purchase of any resulting commercialised products on commercial terms which are no less favourable than terms offered to any other party.

Further, commercialisation agreements relating to the commercialisation of Intellectual Property arising from research funded under this Grant Opportunity (where such Intellectual Property is created, developed, funded, derived or otherwise brought about as part of, a result of or as contemplated by project research activities) must be provided to the Department of Health for review before the Eligible Organisation administering the grant executes or otherwise becomes bound by the agreement. The Department of Health will review such commercialisation agreements to ensure they comply with the terms set out in the Commonwealth commercialisation clauses.

Where a grant is awarded under this Grant Opportunity a commercialisation plan will also be required for review by the Department of Health, as specified within the Grant Agreement at award.

The Department of Health will identify which projects will be subject to the commercialisation clauses in the Grant Agreement based on information provided in the application.

9.2 Specific legislation, policies and industry standards

You must comply with all relevant laws and regulations in undertaking your project. You must also comply with any specific legislation/policies/industry standards within the grant agreement, such as:

- The MRFF Act [1]
- Working with Vulnerable People registration
- State/Territory legislation in relation to working with children
- Ethics and research practices.

9.3 How we pay the grant

The schedule to the Funding Agreement will state the:

- grant amount approved by the Commonwealth
- proportion of the approved grant amount that will be paid in each financial year during the term of the grant.

Your MRFF Eligible Organisation is responsible for paying any extra eligible expenses that are incurred.

All amounts referred to in these grant guidelines are exclusive of GST, unless stated otherwise. MRFF Eligible Organisations are responsible for all financial and taxation implications associated with receiving funds.

Payments will depend on satisfactory progress being made against milestones and performance indicators. The Commonwealth will review your progress reports to confirm that the milestones and performance indicators have been achieved. Where milestones and performance indicators have not been achieved grant payments may be suspended.

Expenditure against approved activities will be monitored over the duration of the grant period. Grant funding will be dependent on meeting any conditions and agreed milestones.

10. Announcement of grants

If successful, your grant will be listed on the GrantConnect website 21 days after the date of effect[8] as required by Section 5.3 of the *Commonwealth Grants Rules and Guidelines*. The following information may also be published in a manner that allows it to be searched and viewed in a variety of ways:

- Application identity number
- MRFF Initiative and Grant Opportunity from which the grant was funded

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[1] https://www.legislation.gov.au/Details/C2015A00116

[8] See glossary

- Funded Organisation
- Organisation Type (as per Section 24 of the MRFF Act)
- State/Territory
- Project Title
- Media Summary
- Chief Investigator name/s
- Partner Organisations (if relevant)
- Selection Process
- Approved grant amount
- Broad Research Area
- Research Keywords.

11. How we monitor your grant activity

11.1 Keeping us informed

Your MRFF Eligible Organisation's RAO should let us know if anything is likely to affect your organisation or impact successful delivery of your project.

We need to know of any key changes to your organisation or its business activities, particularly if they affect your ability to complete your grant, carry on business and pay debts due.

Your RAO must also inform us of any changes to your:

- name
- addresses
- nominated contact details
- bank account details.

If you become aware of a breach of terms and conditions under the grant agreement you must contact us immediately.

Your MRFF Eligible Organisation must notify us of events relating to your grant and provide an opportunity for the Minister or their representative to attend.

11.2 Reporting

Your MRFF Eligible Organisation is required to report to NHMRC on the progress of the grant and the use of grant funds. Where an organisation fails to submit reports (financial or otherwise) as required, the Commonwealth may take action under the provisions of the grant agreement. Failure to report within timeframes may affect eligibility to receive future funding.

You must submit reports in line with the grant agreement. Reporting milestones are listed against each grant listed in Sapphire, and are visible to your RAO. We will expect you to report on:

- progress against agreed milestones and MRFF Measures of Success
- risks arising and how these are being managed

- project expenditure, including expenditure of grant funds, and
- information about your research that supports evaluation of the MRFF.

The amount of detail you provide in your reports should be relative to the project size, complexity and grant amount.

We will monitor the progress of your project by assessing reports you submit and may conduct site visits to confirm details of your reports if necessary. Occasionally we may need to re-examine claims, seek further information or request an independent audit of claims and payments.

11.2.1 Progress reports

Progress reports must:

- include details of your progress towards completion of agreed activities, including any risks arising and how these are being managed to ensure outcomes
- include evidence to demonstrate progress against the outcome/s and result/s identified in your Measures of Success statement (see section 6.4)
- show the total expenditure incurred within the reporting period
- include details of research outputs (see section 11.7)
- be submitted by the report due date (you can submit reports ahead of time if you have completed relevant activities), and
- include information about your grant that supports evaluation of the MRFF.

We may withhold grant payments pending receipt of a satisfactory progress report. You must discuss any activity, milestone or reporting delays with us as soon as you become aware of them.

11.2.2 Annual financial reports

Annual financial reports are required in a form prescribed by the Commonwealth. At the completion of the grant, a financial statement is also required to verify that you spent the grant in accordance with the grant agreement.

11.2.3 End of project report

When you complete the grant activity, you must submit an end of project report.

End of project reports must:

- include evidence of completion of agreed activities (including, but not limited to, evidence of project impact)
- include evidence to support achievement of the outcome/s and result/s identified in your Measures of Success statement (see section 6.4)
- identify the total expenditure incurred
- report on any underspends
- include details of research outputs (see section 11.7)
- be submitted by the report due date, and
- include information about your grant that supports evaluation of the MRFF.

11.2.4 Ad-hoc reports

We may ask you for ad-hoc reports on your grant. This may be to provide an update on progress, or any significant delays or difficulties in completing grant activity, or to support evaluation of the MRFF.

11.3 Audited financial acquittal report

At the completion of the grant, we may ask you to provide an independently audited financial acquittal report. A financial acquittal report will verify that you spent the grant funding in accordance with the grant agreement. The report requires you to prepare a statement of grant income and expenditure.

11.4 Grant agreement variations

We recognise that unexpected events may affect your progress. In these circumstances, you can request a variation to your schedule, including:

- changing milestones
- extending the timeframe for completing the grant
- changing grant activities.

The Program does not allow for:

- an increase of grant funds.

If you want to propose changes to the schedule, refer to the NHMRC variation policy.

NHMRC can provide you with advice on how to make your request in Sapphire.

If a delay in the grant causes milestone achievement and payment dates to move to a different financial year, you will need a variation to the schedule. We can only move funds between financial years if there is enough Program funding in the relevant year to allow for the revised payment schedule. If we cannot move the funds, you may lose some grant funding.

You should not assume that a variation request will be successful. We will consider your request based on factors such as:

- how it affects the project outcome
- consistency with the Program policy objective, grant guidelines and any other relevant policies
- changes to the timing of grant payments
- availability of Program funds.

11.5 Registration of clinical trials

Clinical trials supported through MRFF grant opportunities must be registered in the Australian New Zealand Clinical Trials Registry (ANZCTR) within three months of HREC approval and prior to recruitment of the first participant. Information on how to register your clinical trial in the ANZCTR is available at www.anzctr.org.au. Your ANZCTR Trial ID must be provided along with other details of your grant in your progress and final reports (see section 11.2).

11.6 Compliance visits

We may visit you during or at the completion of your grant activity to review your compliance with the grant agreement. We may also inspect the records you are required to keep under the grant agreement. We will provide you with reasonable notice of any compliance visit.

11.7 Dissemination of research outcomes

MRFF Eligible Organisations and CIs must ensure appropriate safeguards are in place to protect patient privacy, intellectual property and commercially confidential information.

Authors should endeavour to retain all necessary rights to enable the authors to publish and share their publications in any format at any time, and use the Creative Commons Attribution licence, CC-BY, where possible, when publishing their article.

Except where publication may compromise the MRFF Eligible Organisation's obligations with respect to patient privacy, intellectual property and/or commercially confidential information, grantees are required to comply with the following:

- if a clinical trial, register the trial (including the protocol) with ANZCTR within three months of HREC approval and prior to recruitment of the first participant (see section 11.5). You must include the MRFF grant number and an acknowledgement of MRFF funding in the ANZCTR registration details (see section 11.9)
- list any resulting patents in Source IP (sourceip.csiro.au), referencing the MRFF grant number in the description (see section 11.9)
- within 12 months of the date of publication, ensure that all peer-reviewed research outputs arising from MRFF supported research:
  - are openly accessible in an institutional repository or other acceptable location (e.g. publisher website, subject-specific repository)
  - are linked to author ORCID iD(s), and
  - acknowledge MRFF grant support (in whole or in part) and the MRFF grant number in all relevant publications (see section 11.9).

Grantees are expected to include details of research outputs (including clinical trial registration information, patents, and publications) in their grant reports (see section 11.2). Grantees are also strongly encouraged to publish de-identified research data and associated metadata in an open access repository or a public database and in accordance with best practice.

11.8 Evaluation

We will evaluate the grant to measure how well the outcomes and objectives have been achieved. Your grant agreement requires you to provide information to help with this evaluation. We may use information from your application and reports for this purpose, and for the purpose of evaluation of the Initiative and the MRFF more broadly. We may also interview you, or ask you for more information to help us understand how the grant impacted you and to evaluate how effective the Program was in achieving its outcomes.

We may contact you up to two years after you finish your grant for more information to assist with this evaluation.

11.9 Acknowledgement

If you make a public statement about a grant funded under the Program, including in a brochure or publication, and/or disseminate the outcomes of your research as described in section 11.7, you must acknowledge the grant by using the following, where *MRFXXXXXXX* is the unique grant ID:

‘Research reported in this publication was supported by the Medical Research Future Fund under grant number *MRFXXXXXXX*’

If you erect signage in relation to the grant, the signage must contain an acknowledgement of the grant.

12. Probity

We will make sure that the grant opportunity process is fair, according to the published grant guidelines, incorporates appropriate safeguards against fraud, unlawful activities and other inappropriate conduct and is consistent with the CGRGs.

12.1 Enquiries and feedback

All applicants will be provided with feedback on the outcome of their application (see section 8).

Applicants or grantees seeking to lodge a formal complaint should do so via the MRFF Eligible Organisation’s RAO, in writing, within 28 days of the relevant decision or action.

Each complaint should be directed to the Complaints Team at: complaints@nhmrc.gov.au. NHMRC will provide a written response to all complaints.

If you do not agree with the way NHMRC has handled your complaint, you may complain to the Commonwealth Ombudsman. The Ombudsman will not usually look into a complaint unless the matter has first been raised directly with NHMRC.

The Commonwealth Ombudsman can be contacted on:

Phone (Toll free): 1300 362 072
Email: ombudsman@ombudsman.gov.au
Website: www.ombudsman.gov.au

12.2 Conflicts of interest

Any conflicts of interest could affect the performance of the grant opportunity or Program. There may be a conflict of interest, or perceived conflict of interest, if our staff, any member of a committee or advisor and/or you or any of your personnel:

- has a professional, commercial or personal relationship with a party who is able to influence the application selection process, such as an Australian Government officer or member of an external panel
- has a relationship with or interest in, an organisation, which is likely to interfere with or restrict the applicants from carrying out the proposed activities fairly and independently, or

  - has a relationship with, or interest in, an organisation from which they will receive personal gain because the organisation receives a grant under the Program/grant opportunity.

As part of your application, we will ask you to declare any perceived or existing conflicts of interests or confirm that, to the best of your knowledge, there is no conflict of interest.

See section 6.4 for instructions on uploading a Declaration of Applicant Interests with your application in Sapphire.

If you later identify an actual, apparent, or perceived conflict of interest, you must inform NHMRC in writing immediately.

Conflicts of interest for Australian Government staff are handled as set out *in the Australian Public Service Code of Conduct (Section 13(7))* of *the Public Service Act 1999* (Cth). Committee members and other officials including the decision maker must also declare any conflicts of interest.

12.3 Privacy, confidentiality and protection of personal information

NHMRC is the Administering Entity for this grant opportunity. NHMRC will receive applications and manage the assessment process. NHMRC will forward all application material and assessment scores to the Department of Health.

The Privacy Act 1988 (Privacy Act) requires entities bound by *the Australian Privacy Principles to have a privacy policy*. NHMRC's *Privacy Policy* is available on the NHMRC website. The privacy policy outlines the personal information handling practices at the NHMRC.

NHMRC may disclose your personal information to assessors from overseas countries, where there is a need, and in accordance with *the Privacy Act* and the NHMRC's *Privacy Policy*.

Grantees are required by the grant agreement to comply with the *Privacy Act 1988*, including *the Australian Privacy Principles*, and impose the same privacy obligations on any subcontractors engaged by the grantee to assist with the grant.

NHMRC may share information provided to it by applicants with other Commonwealth agencies for any purposes including government administration, research or service delivery and according to Australian laws, including the *Public Service Act 1999*, *Public Service Regulations 1999*, *Public Governance, Performance and Accountability Act 2013*, *Crimes Act 1914*, and the *Criminal Code Act 1995*.

12.4 When we may disclose confidential information

We may disclose confidential information:

  - to the committee and our Commonwealth employees and contractors, to help us manage the Program effectively
  - to the Auditor-General, Ombudsman or Privacy Commissioner
  - to the responsible Minister or Assistant Minister
  - to a House or a Committee of the Australian Parliament.

We may also disclose confidential information if:

  - we are required or authorised by law to disclose it
  - you agree to the information being disclosed,

- someone other than us has made the confidential information public.

12.5 Freedom of information

All documents in the possession of the Australian Government, including those about the Program, are subject to the *Freedom of Information Act 1982* (Cth) (FOI Act).

The purpose of the FOI Act is to give members of the public rights of access to information held by the Australian Government and its entities. Under the FOI Act, members of the public can seek access to documents held by the Australian Government. This right of access is limited only by the exceptions and exemptions necessary to protect essential public interests and private and business affairs of persons in respect of whom the information relates.

If someone requests a document under the FOI Act, we will release it (though we may need to consult with you and/or other parties first) unless it meets one of the exemptions set out in the FOI Act.

All Freedom of Information requests must be referred to the Freedom of Information Coordinator in writing.

By mail: Freedom of Information Coordinator

National Health and Medical Research Council

GPO Box 1421

CANBERRA ACT 2601

By email: foi@nhmrc.gov.au

13. Glossary

Term	Definition
Administering entity	When an entity that is not responsible for the policy, is responsible for the administration of part of all of the grant administration processes. NHMRC is the Administrating entity for this grant opportunity.
Application form	The document or computerised submission system that applicants use to apply for funding under the Program/grant opportunity.
Assessment criteria	The specified principles or standards, against which applications will be judged. These criteria are also used to assess the merits of proposals and, in the case of a competitive grant opportunity, to determine application rankings.
Assessment Criterion 4 – Overall Value and Risk Rating Scale	A document accompanying the grant guidelines that provides example benchmarks against Assessment Criterion 4 – *Overall Value and Risk* to assist assessors when scoring applications.
Commencement date	The expected start date for the grant activity.
Commonwealth entity	A Department of State, or a Parliamentary Department, or a listed entity or a body corporate established by a law of the Commonwealth. See subsections 10(1) and (2) of the PGPA Act.
Commonwealth Grants Rules and Guidelines (CGRGs)	Establish the overarching Commonwealth grants policy framework and articulate the expectations for all non-corporate Commonwealth entities in relation to grants administration. Under this overarching framework, non-corporate Commonwealth entities undertake grants administration based on the mandatory requirements and key principles of grants administration.
Completion date	The expected date by which the grant activity must be completed and the grant funding spent.
Date of effect	Can be the date on which a grant agreement/schedule is signed or a specified starting date. Where there is no grant agreement, entities must publish information on individual grants as soon as practicable.
Decision maker	The person who makes a decision to award a grant.
Delegate	An Australian Government official in the Department of Health or the NHMRC with responsibility for the grant opportunity.
Eligibility criteria	Refer to the mandatory criteria which must be met to qualify for a grant. Assessment criteria may apply in addition to eligibility criteria.

Term	**Definition**
Eligible activities	The activities undertaken by a grantee in relation to a grant that are eligible for funding support as set out in section 4.
Eligible application	An application or proposal for services or grant funding under the program that the Delegate has determined is eligible for assessment in accordance with these grant guidelines.
Eligible expenditure	The expenditure incurred by a grantee on a project and which is eligible for funding support as set out in section 4.
Grant activity/activities	Refers to the project/tasks/services that the grantee is required to undertake.
Grant agreement	Sets out the relationship between the parties to the agreement and specifies the details of the grant. For MRFF grants administered by NHMRC, this will comprise a schedule underneath the Funding Agreement between the Commonwealth and the MRFF Eligible Organisation.
Grant funding or grant funds	The funding made available by the Australian Government to grantees under the Program.
Grant opportunity	Refers to the specific grant round or process where a Commonwealth grant is made available to potential grantees. A grant opportunity is aimed at achieving government policy outcomes under a Portfolio Budget Statement Program.
GrantConnect	The Australian Government's whole-of-government grants information system, which centralises the publication and reporting of Commonwealth grants in accordance with the CGRGs.
Grantee	The individual/organisation which has been selected to receive a grant.
Minister	The Australian Government Minister for Health and Aged Care.
MRFF Eligible Organisation	An organisation that meets the eligibility requirements for receiving and administering MRFF funding and has been approved as an MRFF Eligible Organisation by NHMRC.
Personal information	Has the same meaning as in the *Privacy Act 1988* (Cth) which is: Information or an opinion about an identified individual, or an individual who is reasonably identifiable: a. whether the information or opinion is true or not; and b. whether the information or opinion is recorded in a material form or not.
Project	A project described in an application for grant funding under this grant opportunity.

Term	Definition
Research Administration Officer	The officer nominated by a MRFF Eligible Organisation as its contact person for the purpose of grant applications and grant agreements.
Selection process	The method used to select potential grantees. This process may involve comparative assessment of applications or the assessment of applications against the eligibility criteria and/or the assessment criteria.
Sapphire	NHMRC's online grant and application management system.
Value with money	Value with money in this document refers to 'value with relevant money' which is a judgement based on the Grant Proposal representing an efficient, effective, economical and ethical use of public resources and determined from a variety of considerations. When administering a grant opportunity, the relevant financial and non-financial costs and benefits of each proposal are considered including, but not limited to: - the quality of the Grant Proposal and activities - fitness for purpose of the proposal in contributing to government objectives - that the absence of a grant is likely to prevent the grantee and government's outcomes being achieved - the potential grantee's relevant experience and performance history.

KAUSHIK, Ananya

From: SOMI, Masha
Sent: Wednesday, 12 January 2022 12:44 PM
To: Minister Hunt DLO
Cc: s22
s22
Subject: Action - request for a waiver: MS22-000018 MRFF Grant Opportunity [SEC=OFFICIAL]

Dear DLO team

Can we please have a waiver for MS22-000018 Policy Authority MRFF EPCDR 2022 Models of Care to Improve the Efficiency and Effectiveness of Acute Care Grant Opportunity?

We'd appreciate a critical date of 17 January, to enable the Grant Opportunity to open by late January and outcomes to be available from April 2022 (as requested by the Minister).

The Min Sub is expected to be with the Office tomorrow at the latest.

Best, Masha

From: Minister Hunt DLO
To: SOMI, Masha; Minister Hunt DLO
Cc: s22
s22
Subject: RE: Action - request for a waiver: MS22-000018 MRFF Grant Opportunity [SEC=OFFICIAL]
Date: Wednesday, 12 January 2022 12:47:15 PM
Attachments: image001.png

Waiver approved. Thanks Masha
s22

Departmental Liaison Officer

Office of the Hon Greg Hunt MP
Minister for Health and Aged Care
s22
E: Minister.Hunt.DLO@health.gov.au
Suite M1.41, PO Box 6022, Parliament House, Canberra ACT 2600, Australia

From: SOMI, Masha
Sent: Wednesday, 12 January 2022 12:44 PM
To: Minister Hunt DLO
Cc: s22
s22
Subject: Action - request for a waiver: MS22-000018 MRFF Grant Opportunity [SEC=OFFICIAL]

Dear DLO team

Can we please have a waiver for MS22-000018 Policy Authority MRFF EPCDR 2022 Models of Care to Improve the Efficiency and Effectiveness of Acute Care Grant Opportunity?

We'd appreciate a critical date of 17 January, to enable the Grant Opportunity to open by late January and outcomes to be available from April 2022 (as requested by the Minister).

The Min Sub is expected to be with the Office tomorrow at the latest.

Best, Masha

From: SOMI, Masha
To: s22
Cc: GOULD, Phillip; s22
Subject: Action - timelines for the Acute Care Models Grant Opportunity [SEC=OFFICIAL]
Date: Friday, 4 February 2022 5:21:46 PM

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s22

Please find below two options for timeframes for the Acute Care Grant Opportunity.
Assuming the Grant Opportunity opens on Monday 7 Feb, Option 1 gives applicants 23 days to apply and Option 2 gives applicants 30 days to apply.
Can you please let me know which timeline the Minister prefers?
Best, Masha

Option A: Minimum Viable Timeline

Key Process	**Date**
Applications Open	7-Feb-22
Minimum Data	16-Feb-22
Applications Close	2-Mar-22
Committee Establishment	9-Mar-22
COIs Due	23-Mar-22
Initial Assessment Due	12-Apr-22
GAC	Week of 19 April
Outcomes to Health	22-Apr-22
Announcement	Week of 25 April

Option B: Provide more time for applications

Key Process	**Date**
Applications Open	7-Feb-22
Minimum Data	23-Mar-22
Applications Close	9-Mar-22
Committee Establishment	21-Mar-22
COIs Due	25-Mar-22
Initial Assessment Due	17-Apr-22
GAC	Week of 25 April
Outcomes to Health	29-Apr-22
Announcement	Week of 2 May

From: Minister Hunt DLO
To: SOMI, Masha; s22
Cc: Minister Hunt DLO; s22
Subject: FW: MC22-000308 - Birmingham to Hunt - Seeking agreement to release grant opportunity guidelines - Models of Care to Improve the Efficiency and Effectiveness of Acute Care Grant Opportunity [SEC=OFFICIAL]
Date: Friday, 4 February 2022 5:27:29 PM
Attachments: image001.jpg
MC22-000308 - Birmingham to Hunt - MF signed letter (2).pdf
image002.png

Hi all

Please find attached response from the Finance Minister to the Models of Care to Improve the Efficiency and Effectiveness of Acute Care Grant Opportunity.

MPS – please code for info of HERD. This is a response to MS22-000018.

Thank you

s22

s22

Departmental Liaison Officer s

Office of the Hon Greg Hunt MP
Minister for Health and Aged Care
s22
E: Minister.Hunt.DLO@health.gov.au
Suite M1.41, PO Box 6022, Parliament House, Canberra ACT 2600, Australia

From: DLO - Finance
Sent: Friday, 4 February 2022 5:20 PM
To: Minister Hunt DLO
Subject: MC22-000308 - Birmingham to Hunt - Seeking agreement to release grant opportunity guidelines - Models of Care to Improve the Efficiency and Effectiveness of Acute Care Grant Opportunity [SEC=OFFICIAL]

SEC=OFFICIAL

Good afternoon,

Please find attached letter from Minister Birmingham.

Thank you.

Kind regards,

s22

s22 | Departmental Liaison Officer
Office of Senator the Hon Simon Birmingham
Minister for Finance
s22 | s22

SEC=OFFICIAL

Senator the Hon Simon Birmingham
Minister for Finance
Leader of the Government in the Senate
Senator for South Australia

REF: MC22-000308

The Hon Greg Hunt MP
Minister for Health and Aged Care
Parliament House
CANBERRA ACT 2600

Dear Minister

Thank you for your letter of 4 February 2022 seeking my agreement to release the Grant Opportunity Guidelines for the Medical Research Future Fund (MRFF) 2022 Models of Care to Improve the Efficiency and Effectiveness of Acute Care.

My Department, and the Department of the Prime Minister and Cabinet, have agreed that a medium risk rating is appropriate for the grant, informed by the advice of the Australian Government Solicitor. I ask that the Department of Health closely monitor the grant activities to ensure that they align with the legislative and constitutional powers of the Commonwealth.

On this basis, I approve the public release of these Grant Opportunity Guidelines.

Yours sincerely

Simon Birmingham

4 February 2022

Adelaide
107 Sir Donald Bradman Drive, Hilton SA 5033
Ph 08 8354 1644

Canberra
Parliament House Canberra ACT 2600
Ph 02 6277 7400

From: Minister Hunt DLO
To: SOMI, Masha; s22
Cc: Minister Hunt DLO; s22
Subject: SIGNED MS22-000018 - Models of Care to Improve the Efficiency and Effectiveness of Acute Care Grant Opportunity [SEC=OFFICIAL]
Date: Friday, 4 February 2022 10:17:31 AM
Attachments: SIGNED MS22-000018 001 Policy Approval - MRFF EPCDR 2022 Models of Care to Improve the Efficiency and Effectiveness of Acu.pdf
SIGNED MS22-000018 - Letter Hunt to Birmingham - Models of Care to Improve the Efficiency and Effectiveness of Acute Care Grant Opportunity.pdf
MS22-000018 003 Attachment A - Draft 2022 models of care to improve efficiency and effectiveness of acute care GO -.DOCX
image001.png

Hi Masha and team

The Minister has approved *MS22-000018 - MRFF EPCDR 2022 Models of Care to Improve the Efficiency and Effectiveness of Acute Care Grant Opportunity*. Please find attached signed copy.

Confirming I have dispatched the letter to the Finance Minister's Office.

Many thanks

s22

s22

Departmental Liaison Officer

Office of the Hon Greg Hunt MP
Minister for Health and Aged Care
s22
E: Minister.Hunt.DLO@health.gov.au
Suite M1.41, PO Box 6022, Parliament House, Canberra ACT 2600, Australia

The Hon Greg Hunt MP
Minister for Health and Aged Care

Ref No: MS22-000018

Senator the Hon Simon Birmingham
Minister for Finance
Parliament House
CANBERRA ACT 2600

4 February 2022

Dear Minister

I write seeking your agreement to release and publish grant opportunity guidelines (Guidelines) for the 2022 Models of Care to Improve Efficiency and Effectiveness of Acute Care Grant Opportunity.

The grant opportunity will be funded from the Medical Research Future Fund (MRFF) Emerging Priorities and Consumer Driven Research Initiative.

The Emerging Priorities and Consumer-Driven Research Initiative is a budget measure under the MRFF and was approved in the context of the 2019–20 Budget. It exists to support high quality research that improves patient care, translation of new discoveries and encourages collaboration of consumers and researchers in undertaking research in emerging priority areas.

Further information about the Initiative is detailed on my Department's website at: www.health.gov.au/initiatives-and-programs/emerging-priorities-and-consumer-driven-research-initiative.

My Department has prepared the Guidelines in consultation with the National Health and Medical Research Council, which will be the administering grants hub. With your agreement, the Guidelines will be released and published on GrantConnect in accordance with the Commonwealth Grants Rules and Guidelines.

In order to support commencement of this important research in 2021–22, I would be grateful for a response before the end of January 2022.

Yours sincerely

Greg Hunt

Greg Hunt

Encl (1)

s22

From: Minister Hunt DLO
Sent: Wednesday, 12 January 2022 12:47 PM
To: SOMI, Masha; Minister Hunt DLO
Cc: s22
s22
Subject: RE: Action - request for a waiver: MS22-000018 MRFF Grant Opportunity [SEC=OFFICIAL]

Waiver approved. Thanks Masha

s22

Departmental Liaison Officer

Office of the Hon Greg Hunt MP
Minister for Health and Aged Care
s22
E: Minister.Hunt.DLO@health.gov.au
Suite M1.41, PO Box 6022, Parliament House, Canberra ACT 2600, Australia

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From: SOMI, Masha
Sent: Wednesday, 12 January 2022 12:44 PM
To: Minister Hunt DLO
Cc: s22
Subject: Action - request for a waiver: MS22-000018 MRFF Grant Opportunity [SEC=OFFICIAL]

Dear DLO team

Can we please have a waiver for MS22-000018 Policy Authority MRFF EPCDR 2022 Models of Care to Improve the Efficiency and Effectiveness of Acute Care Grant Opportunity?

We'd appreciate a critical date of 17 January, to enable the Grant Opportunity to open by late January and outcomes to be available from April 2022 (as requested by the Minister).

The Min Sub is expected to be with the Office tomorrow at the latest.

Best, Masha

From: s22
To: SOMI, Masha
Cc: GOULD, Phillip; s22
Subject: RE: Action - updated MRFF announcements for March and April 2022 [SEC=OFFICIAL]
Date: Monday, 21 March 2022 1:59:36 PM

Hi Masha – Can I please get the latest version of the table below for the Minister? You should have all the subs back this afternoon as well (all were approved as put forward by the Dept).

From: SOMI, Masha
Sent: Saturday, 26 February 2022 3:38 PM
To: s22
Cc: GOULD, Phillip ; s22
Subject: Action - updated MRFF announcements for March and April 2022 [SEC=OFFICIAL]

s22

As requested, please find below an updated table with potential announcements for the MRFF.

I think you specifically mentioned the Chronic Musculoskeletal Conditions Grant Opportunity; we are still looking to see if those outcomes can be provided before end-April 2022.

Please let me know if you need anything further.

Best, Masha

Grant Opportunity		Value	Date available, by….	Comments
Ready to announce now ($15.7m)				
	s22			
	s22			
Outcomes of Grant Opportunities available in March 2022 ($47m)				
	s22			
	s22			
Grant Opportunities to open in late March 2022 ($305.9m)				
	s22			
				s22

s22				
	s22			
				s22
	s22			
				s22
	s22			
Outcomes of Grant Opportunities available in April 2022 ($39m)				
EPCDR	2022 Models of Care to Improve the Efficiency and Effectiveness of Acute Care	$24m	End April 2022	
	s22			
	s22			

From: SOMI, Masha
To: s22
Cc: GOULD, Phillip; s22
Subject: FYI - January 2022 MRFF Newsletter [SEC=OFFICIAL]
Date: Friday, 25 February 2022 9:31:01 PM
Attachments: Medical Research Future Fund Newsletter - February 2022.DOCX

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s22

FYI, the January MRFF Newsletter will be distributed early next week; I have attached a copy for your information.
Best, Masha

Medical Research Future Fund News

February 2022

Welcome

Welcome to the Medical Research Future Fund (MRFF) newsletter.

What's in this edition?

- Support for research to reduce pressure on emergency departments
- Why assess MRFF grants? Our Roll of Honour members explain
- Reducing clot complications
- Let us know about your research
- Current grant opportunities
- MRFF grant opportunities calendar
- Awarded MRFF grants
- Is COVID-19 impacting your grant?
- MRFF on social media
- How to access previous editions of the MRFF newsletter
- Subscribe
- Contact us

Support for research to reduce pressure on emergency departments

The MRFF's 2022 Models of Care to Improve the Efficiency and Effectiveness of Acute Care grant opportunity is providing up to $24 million for medical research and innovation projects in each state and territory that develop and implement evidence-based, scalable clinical models of care to improve acute care and reduce pressure on hospital emergency departments.

Funding is from the MRFF's Emerging Priorities and Consumer-Driven Research initiative.

Find out more about this funding to improve acute care systems and reduce emergency department waiting times.

Why assess MRFF grants? Our Roll of Honour members explain

Have you thought about participating in a MRFF Grant Assessment Committee (GAC)? The success of MRFF grant funding relies on informed and committed scientific and industry experts, consumers and health service providers assessing grant applications.

Six GAC members recently talked to us about their reasons for stepping forward. Find out why from MRFF Roll of Honour members explain why they assess our grants, and learn how you can also take part.

Reducing clot complications

Blood clots in leg veins and lung arteries are a significant public health problem. Blood thinning agents reduce the chance of clotting, but they can also increase the chances of bleeding.

Learn how the COBRRA trial is comparing rivaroxaban and apixaban for the treatment of acute venous thromboembolism to find out which agent results in fewer bleeds for patients.

COBRRA is supported by the MRFF's Clinical Trials Activity initiative.

Let us know about your research

We would like to hear about the achievements of researchers who have received MRFF funding for their work.

Write to us about your research outcomes at: MRFF@health.gov.au.

Remember to include information about how your research outcomes have made a difference, for example, their application in programs, clinical practice or guidelines, or published findings.

Current grant opportunities

Australian Brain Cancer Mission

- 2021 Brain Cancer Research grant opportunity
  - Minimum data closes 20 April 2022
  - Applications close 4 May 2022

- 2021 GBM AGILE grant opportunity
  - Minimum data closes 16 February 2022
  - Applications close 2 March 2022

Clinical Trials Activity initiative

- 2021 Clinical Trials Activity grant opportunity
  - Minimum data closes 22 June 2022
  - Applications close 6 July 2022

Coronavirus Research Response

- 2021 mRNA Clinical Trial Enabling Infrastructure grant opportunity
  - Applications open 16 March 2022

  - Applications close 15 July 2022

Early to Mid-Career Researchers

- 2021 Early to Mid-Career Researchers grant opportunity
  - Minimum data closes 29 June 2022
  - Applications close 13 July 2022

Emerging Priorities and Consumer-Driven Research initiative

- 2021 Chronic Neurological Conditions grant opportunity
  - Minimum data closes 23 February 2022
  - Applications close 9 March 2022

- 2022 Models of Care to Improve the Efficiency and Effectiveness of Acute Care grant opportunity
  - Minimum data closes 16 February 2022
  - Applications close 2 March 2022

Indigenous Health Research Fund

- 2021 Indigenous Health Research grant opportunity
  - Minimum data closes 16 February 2022
  - Applications close 2 March 2022

Medical Research Commercialisation initiative

- 2021 BioMedTech Incubator grant opportunity
  - Applications open 8 March 2022
  - Applications close 25 August 2022

Preventive and Public Health Research initiative

- 2021 Chronic Respiratory Conditions grant opportunity
  - Minimum data closes 29 June 2022
  - Applications close 13 July 2022

- 2021 Consumer-Led Research grant opportunity
  - Minimum data closes 29 June 2022
  - Applications close 13 July 2022

- 2021 Maternal Health and Healthy Lifestyles grant opportunity
  - Minimum data closes 29 June 2022
  - Applications close 13 July 2022

- 2021 Optimising the Clinical Use of Immunoglobulins grant opportunity
  - Minimum data closes 16 February 2022
  - Applications close 2 March 2022

Primary Health Care Research initiative

- 2021 Primary Health Care Digital Innovations grant opportunity
  - Minimum data closes 29 June 2022

    - Applications close 13 July 2022

All MRFF grant opportunities are advertised on GrantConnect.

Register with GrantConnect to receive notifications when new opportunities open.

MRFF grant opportunities calendar

For information on all MRFF grant opportunities from 1 January 2020, visit the MRFF grant opportunities calendar.

Awarded MRFF grants

You can find information about all MRFF funded projects at MRFF grant recipients.

Is COVID-19 impacting your grant?

Significant changes to our grant opportunities because of COVID-19 will be published on the MRFF website.

You can also contact the Grant Hub administering the relevant MRFF grant opportunity or grant agreement (NHMRC: help@nhmrc.gov.au or BGH: MRFF@industry.gov.au) or MRFF@health.gov.au with any enquiries.

MRFF on social media

Keep an eye out for MRFF announcements, opportunities and outcomes on Twitter - Australian Government Department of Health (@healthgovau) and LinkedIn.

How to access previous editions of the MRFF newsletter

Previous editions of the MRFF newsletter are available on the MRFF newsletter archive page.

Subscribe

Do you know someone who would like to receive this newsletter? They can sign up here.

Contact us

If you have any questions about the newsletter, please email HMRO@health.gov.au.

From: SOMI, Masha
To: s22
Cc: GOULD, Phillip; s22
Subject: Action - updated MRFF announcements for March and April 2022 [SEC=OFFICIAL]
Date: Saturday, 26 February 2022 3:37:56 PM

---

s22

As requested, please find below an updated table with potential announcements for the MRFF.

I think you specifically mentioned the s22 ; we are still looking to see if those outcomes can be provided before end-April 2022.

Please let me know if you need anything further.

Best, Masha

	Grant Opportunity	**Value**	**Date available, by….**	**Comments**
Ready to announce now ($15.7m)				
	s22			
	s22			
Outcomes of Grant Opportunities available in March 2022 ($47m)				
	s22			
	s22			
Grant Opportunities to open in late March 2022 ($305.9m)				
	s22			
				s22
s22				
	s22			
				s22

	s22			
	s22			
				s22
	s22			
Outcomes of Grant Opportunities available in April 2022 ($39m)				
EPCDR	2022 Models of Care to Improve the Efficiency and Effectiveness of Acute Care	$24m	End April 2022	
	s22			
	s22			

From: SOMI, Masha
To: s22
Cc: GOULD, Phillip; MCBRIDE, Paul; s22
Subject: FYI - February 2022 MRFF Financial and Granting Report [SEC=OFFICIAL]
Date: Tuesday, 5 April 2022 2:18:02 PM
Attachments: MRFF monthly update as at 28 February 2022 (2nd 10-year Investment Plan (2022-23 - 2031-32).DOCX

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s22

Please find attached the February 2022 MRFF Financial and Granting Report.

Best, Masha

Medical Research Future Fund – Financial Report as at 28 February 2022

Initiative	2021-22 Financial Year (as at 28 February 2022)[1]							Total MRFF Since 2016-17			
	Funding Agreements Executed in February 2022	Current Funding Agreements	2021-22 Budget (million)	Funds Expended/ paid (million)	Funds Committed / In contract yet to be paid (million)	Total in Progress (million)	Funds not yet allocated (million)	Total Funding Agreements[2]		Total Funds Committed (million)	
								Awarded[3]	Announced[3]	Awarded[3]	Announced[3]
Patients											
Emerging Priorities and Consumer Driven Research		84	$80.9	$20.4	$38.3	$22.2		92		$339.2	

s22

Notes [1]*All figures are current as reported by the Grant Hubs to ARIP for month ending 28 February 2022;* [2]*Total Funding Agreements = Current and Expired Agreements. Funding agreements can run over multiple years, so in some cases the number of Current Funding Agreements equals the number of Total Funding Agreements (i.e. no funding agreements in those Initiatives have been finalised);* [3]*Awarded funding agreements have been executed and are currently under contract, whereas Announced funding agreements are in the process of being executed and put under contract;* [4] *Figures may not add up exactly due to rounding. *2021-22 budget decreased to $455.0m and supplemented with $172.5m from PRI002.*

* Note that the number of awarded grants under the Indigenous Health Research Fund initiative has reduced by one due to relinquishment of a grant.

Medical Research Future Fund – Financial Report as at 28 February 2022

s22

MRFF Initiative currently unallocated funds	2021-22 $	2022-23 $	2023-24 $	2024-25 $	2025-26 $
Patients	**4,450,255**	**359,746**	**32,391,268**	**87,500,000**	**128,000,000**
Emerging Priorities and Consumer Driven Research	-134	2,418,575	12,601,183	39,500,000	55,000,000

s22

Medical Research Future Fund – Financial Report as at 28 February 2022
MRFF Grant Opportunities

APPROVED/OPEN						
MRFF Initiative	**Grant Opportunity and Funding**	**Type of Grant**	**Hub**	**Open**	**Close**	**Outcomes Status**
Emerging Priorities and Consumer Driven Research	2022 Models of Care to Improve the Efficiency and Effectiveness of Acute Care ($24.0 million)	Competitive	NHMRC	7/02/2022	2/03/2022	May 2022
	s22					

s22

From: SOMI, Masha
To: s22
Cc: GOULD, Phillip; s22 ; Minister Hunt DLO
Subject: Action - grants funded through the MRFF 2022 Models of Care to Improve the Efficiency and Effectiveness of Acute Care Grant Opportunity [SEC=OFFICIAL]
Date: Wednesday, 6 April 2022 10:08:04 PM
Attachments: Summaries of Successful Grants - April 2022 - Acute Care GO.docx

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s22

Apologies for the delay in getting this list to you, however please find attached the list of grants funded through the 2022 Models of Care to Improve the Efficiency and Effectiveness of Acute Care Grant Opportunity.

You will see there were no grants funded in the ACT or Victoria; that is because none were rated fundable by the Grant Assessment Committee.

The Media Release will follow shortly however I thought you might like to look at this list asap.

Best, Masha

MRFF Grant Opportunities – Summaries of Successful Grants

MRFF Emerging Priorities and Consumer Driven Research Initiative: 2022 Models of Care to Improve the Efficiency and Effectiveness of Acute Care Grant Opportunity

Stream	Applicant name	Institution	Project Title	Project Description	Grant Value
Stream 2 (NSW)	Professor Kate Curtis	University of Sydney	Giving patients an EPIC-START: An evidence based, data driven model of care to improve patient care and efficiency in emergency departments	We will address emergency department overcrowding to improve patient outcomes by studying an innovative model of care across 30 emergency departments in New South Wales. The EPIC-START model of care enables earlier decisions, delivery of care and detection of clinical deterioration by front line ED clinicians. Our leading team of clinician researchers, consumers and partners represent the key agencies that deliver or support emergency care in Australia.	**$2,847,592.26**
Stream 2 (NSW)	Assoc Prof Robyn Clay-Williams	Macquarie University	Working together: innovation to improve Emergency Department (ED) performance, and patient outcomes and experience for five complex consumer cohorts	In NSW Emergency Departments (ED) consumers who are older, have a disability, present with a mental health condition, are Aboriginal and Torres Strait Islander, or come from culturally and linguistically diverse (CALD) backgrounds, spend longer than average in the ED and have worse outcomes. We will work with these consumers and clinicians to understand their needs and to co-design new models of care that reduce excess length of stay and improve the care outcomes and experience for these groups.	**$2,836,550.49**
Stream 2 (NSW)	Professor Chris Maher	University of Sydney	Reshaping the management of low back pain in emergency departments	This research program will reduce the pressure on EDs through implementation of a novel virtual hospital model of care for low back pain and reshaping the ED workforce by providing timely access to dedicated physiotherapists to triage patients and manage non-serious/non-urgent low back pain conditions. Outcomes of this project include a novel model of care for low back pain with the potential to reduce length of ED stay, admissions and costs, while improving health outcomes.	**$2,818,123.57**
Stream 3 (NT)	Didier Palmer	Menzies School of Health Research	StreamlinED – improving the effectiveness and efficiency of Northern Territory (NT) Emergency Departments	Northern Territory (NT) emergency departments (ED) face sustained pressure to deliver efficient and effective care. NT ED presentations are more than double the national average per 1,000 population: 745 compared to 343 in 2020-21. Our grant responds to this challenge through research projects that will improve care for high risk adolescents, frequent attenders and dialysis patients. Our grant will also strengthen aeromedical retrieval services and national acute care research collaborations.	**2,917,464.18**

Stream 4 (QLD)	Dr Donna Franklin	Griffith University	Improved Respiratory Support in Remote Settings for Children: A Paediatric Acute Respiratory Intervention Study (PARIS), PARIS on Country	Rural/remote communities are disadvantaged in health care, a gap that is well known. Over the last 8 years an acute respiratory care bundle for infants and children with acute respiratory disease has been implemented in urban cities in Australia avoiding transfer to centralised children's hospitals. This project aims to close this gap and introduce the same respiratory care bundle in North Queensland as in urban Australia and keep children with acute respiratory disease in their communities.	**1,630,153.35**
Stream 5 (SA)	Associate Professor Craig Whitehead	Flinders University	"There must be a better way": partnering with consumers to implement a digitally enabled geriatric urgent care unit to improve hospital flow	Consumers have told us 'there must be a better way' to provide care for older people. In 2021, the Southern Adelaide Local Health Network invested in an alternative model of urgent care for older people. This research will use mixed methods to assess the outcome of this new model for patients, families and the health service, and inform service improvements. A strong focus on involving consumers in all aspects of the research will generate new information about their needs and preferences.	**1,116,756.25**
Stream 5 (SA)	Professor Derek Chew	South Australian Health and Medical Research Institute Limited	Using a State-wide Learning Health System for the Rapid Deployment, Evaluation and Translation of New Models of Care in South Australia to Reduce Pressure on Emergency Departments and Acute Care	Solutions to emergency department congestion must be highly integrated and multifaceted, given the interconnectedness and dependencies that exist across our health system. Fusing digital and analytical innovation, health service re-engineering and health policy evaluation and reform, this program will deliver 3 exemplar projects across the acute care continuum to establish new scalable and sustainable models of care, ensuring consumers get the right care, in the right setting, at the right time.	**2,919,835.57**
Stream 5 (SA)	Professor Prashanthan Sanders	The University of Adelaide	Improving Acute Atrial Fibrillation Management for better patient outcomes	Atrial fibrillation (AF) is the most common cause of heart related hospitalisations in Australia. Variations in acute care delivery for this condition, such as that in the emergency department, means that a number of these hospitalisations could be preventable. The aim of this study is therefore to examine the effect of an emergency department protocol to guide clinicians in the acute management of AF, in addition to early outpatient follow up in a nurse led outpatient clinic.	**1,075,421.05**

Stream 6 (TAS)	Dr Viet Tran	University of Tasmania	IMplementing clinical Pathways for Acute Care in Tasmania (IMPACT)	Clinical pathways (CPs) are multidisciplinary tools enabling large-scale consistent practice of evidence based medicine, and have the potential to improve patient care and reduce pressure on Emergency Departments. The effectiveness of CPs in Australia is not well known. IMPACT will utilise a consumer driven approach to investigate barriers for CP use, develop a scalable and sustainable implementation strategy for CPs, and identify CP priorities to drive further excellence in health care.	**2,919,107.98**
Stream 8 (WA)	Professor Antonio Celenza	University of Western Australia	OPERATE: Older Persons Early Recognition Access and Treatment in Emergencies	Inefficient healthcare delivery and hospital overcrowding increases healthcare associated harm, particularly in older patients, and worsens pressures in Emergency Departments. The OPERATE program aims to implement, coordinate and evaluate strategies that provide health care for older people with functional decline or acute illness. These strategies target improving care at home rather than in hospitals, streamlined ED and hospital care when necessary, and ensuring safe discharge and ongoing care.	**2,918,995.32**
				Total Commitment Expenditure	$24,000,000.00
				Available Funds for this Grant Opportunity	$24,000,000.00
				Total Residual Funding	*$00.00*

From: SOMI, Masha
To: s22
Cc: GOULD, Phillip; s22
Subject: FW: FYI - February 2022 MRFF Financial and Granting Report [SEC=OFFICIAL]
Date: Wednesday, 6 April 2022 3:53:56 PM
Attachments: MRFF monthly update as at 28 February 2022 (2nd 10-year Investment Plan (2022-23 - 2031-32).DOCX

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s22

Here is the document that outlines funds available by Initiative, in 2021-22 and beyond. Please note the caveats re Min Subs on page 2 – we can manually update the document to incorporate the impact of the Min Subs on each initiative, over financial years.
Best, Masha

From: SOMI, Masha
Sent: Tuesday, 5 April 2022 2:18 PM
To: s22
Cc: GOULD, Phillip ; MCBRIDE, Paul ; s22
Subject: FYI - February 2022 MRFF Financial and Granting Report [SEC=OFFICIAL]

s22

Please find attached the February 2022 MRFF Financial and Granting Report.
Best, Masha

From: SOMI, Masha
To: s22
Cc: GOULD, Phillip; s22 Minister Hunt DLO; s22
s22
Subject: FW: Action - grants funded through the MRFF 2022 Models of Care to Improve the Efficiency and Effectiveness of Acute Care Grant Opportunity [SEC=OFFICIAL]
Date: Wednesday, 6 April 2022 11:35:16 PM
Attachments: Summaries of Successful Grants - April 2022 - Acute Care GO.docx
220406 -HUNT MB 1274 Acute Care FINAL.docx

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s22 DLOs

I have now also attached the media release to support announcement of the outcomes.

Please let me know if you need anything further.

Best, Masha

From: SOMI, Masha
Sent: Wednesday, 6 April 2022 10:08 PM
To: s22
Cc: GOULD, Phillip ; s22 Minister Hunt DLO
Subject: Action - grants funded through the MRFF 2022 Models of Care to Improve the Efficiency and Effectiveness of Acute Care Grant Opportunity [SEC=OFFICIAL]

Kylie

Apologies for the delay in getting this list to you, however please find attached the list of grants funded through the 2022 Models of Care to Improve the Efficiency and Effectiveness of Acute Care Grant Opportunity.

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Best, Masha

MRFF Grant Opportunities – Summaries of Successful Grants

MRFF Emerging Priorities and Consumer Driven Research Initiative: 2022 Models of Care to Improve the Efficiency and Effectiveness of Acute Care Grant Opportunity

Stream	Applicant name	Institution	Project Title	Project Description	Grant Value
Stream 2 (NSW)	Professor Kate Curtis	University of Sydney	Giving patients an EPIC-START: An evidence based, data driven model of care to improve patient care and efficiency in emergency departments	We will address emergency department overcrowding to improve patient outcomes by studying an innovative model of care across 30 emergency departments in New South Wales. The EPIC-START model of care enables earlier decisions, delivery of care and detection of clinical deterioration by front line ED clinicians. Our leading team of clinician researchers, consumers and partners represent the key agencies that deliver or support emergency care in Australia.	**$2,847,592.26**
Stream 2 (NSW)	Assoc Prof Robyn Clay-Williams	Macquarie University	Working together: innovation to improve Emergency Department (ED) performance, and patient outcomes and experience for five complex consumer cohorts	In NSW Emergency Departments (ED) consumers who are older, have a disability, present with a mental health condition, are Aboriginal and Torres Strait Islander, or come from culturally and linguistically diverse (CALD) backgrounds, spend longer than average in the ED and have worse outcomes. We will work with these consumers and clinicians to understand their needs and to co-design new models of care that reduce excess length of stay and improve the care outcomes and experience for these groups.	**$2,836,550.49**
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Stream 5 (SA)	Professor Derek Chew	South Australian Health and Medical Research Institute Limited	Using a State-wide Learning Health System for the Rapid Deployment, Evaluation and Translation of New Models of Care in South Australia to Reduce Pressure on Emergency Departments and Acute Care	Solutions to emergency department congestion must be highly integrated and multifaceted, given the interconnectedness and dependencies that exist across our health system. Fusing digital and analytical innovation, health service re-engineering and health policy evaluation and reform, this program will deliver 3 exemplar projects across the acute care continuum to establish new scalable and sustainable models of care, ensuring consumers get the right care, in the right setting, at the right time.	**2,919,835.57**
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Stream 8 (WA)	Professor Antonio Celenza	University of Western Australia	OPERATE: Older Persons Early Recognition Access and Treatment in Emergencies	Inefficient healthcare delivery and hospital overcrowding increases healthcare associated harm, particularly in older patients, and worsens pressures in Emergency Departments. The OPERATE program aims to implement, coordinate and evaluate strategies that provide health care for older people with functional decline or acute illness. These strategies target improving care at home rather than in hospitals, streamlined ED and hospital care when necessary, and ensuring safe discharge and ongoing care.	**2,918,995.32**
				Total Commitment Expenditure	$24,000,000.00
				Available Funds for this Grant Opportunity	$24,000,000.00
				Total Residual Funding	*$00.00*

The Hon. Greg Hunt MP

Minister for Health and Aged Care

DRAFT MEDIA RELEASE

Date

$24 million for innovative research to improve emergency care

An innovative research project will partner with consumers to develop a geriatric urgent care unit, as an alternative to the emergency department for older people.

The South Australian project is one of ten around Australia which will explore better ways to reduce wait times for people presenting to emergency departments (EDs).

The ten research projects will receive a total of $24 million from the Australian Government through the Medical Research Future Fund's Emerging Priorities and Consumer Driven Research Initiative.

A recent Australian Institute of Health and Welfare (AIHW) report[1] shows that, despite declines during the early months of the COVID-19 pandemic, presentations to public hospital EDs continue to rise.

More older Australians with complex health conditions are presenting to ED.

The Flinders University project, entitled "there must be a better way" is based on an alternative model of urgent care for older people developed in 2021 by the Southern Adelaide Local Health Network.

The research will use mixed methods to assess the outcome of this new model for patients, families and the health service, and inform service improvements. There will be a strong focus on involving consumers in all aspects of the research, which will generate new information about their needs and preferences.

The University of Tasmania will receive $2,919,107 to conduct research on the use of clinical pathways (CPs) in acute care to improve patient care and reduce pressure on EDs. This project will also utilise a consumer-driven approach to investigate barriers for CP use, develop a scalable and sustainable implementation strategy for CPs, and identify CP priorities to drive further excellence in health care.

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[1] AIHW. 2021. "Emergency department care report" - https://www.aihw.gov.au/reports-data/myhospitals/sectors/emergency-department-care

In Western Australia, the University of WA will receive $ 2,918,995 for a project focussed on improving emergency health care for older people with cognitive decline or acute illness. OPERATE: Older Persons Early Recognition Access and Treatment in Emergencies will implement, coordinate and evaluate strategies including better care at home rather than in hospitals, streamlined ED and hospital care when necessary, and ensuring safe discharge and ongoing care.

These ten research projects will point the way to new approaches to enable EDs to operate more efficiently and more effectively, to provide better health outcomes for all patients.

The Morrison Government's $20 billion MRFF, is a long-term, sustainable investment in Australian health and medical research, helping to improve lives, build the economy and contribute to the sustainability of the health system.

Further information about the MRFF is available at www.health.gov.au/mrff

MRFF 2022 Models of Care to Improve the Efficiency and Effectiveness of Acute Care Grant Opportunity

Project	**Recipient**	**Funding**
Giving patients an EPIC-START: An evidence based, data driven model of care to improve patient care and efficiency in emergency departments	University of Sydney	$2,847,592.26
Working together: innovation to improve Emergency Department (ED) performance, and patient outcomes and experience for five complex consumer cohorts	Macquarie University	$2,836,550.49
Reshaping the management of lowback pain in emergency departments	University of Sydney	$2,818,123.57
StreamlinED – improving the effectiveness and efficiency of Northern Territory (NT) Emergency Departments	Menzies School of Health Research	2,917,464.18
Improved Respiratory Support in Remote Settings for Children: A Paediatric Acute Respiratory Intervention Study (PARIS), PARIS on Country	Griffith University	1,630,153.35
"There must be a better way": partnering with consumers to implement a digitally enabled geriatric urgent care unit to improve hospital flow	Flinders University	1,116,756.25
Using a State-wide Learning Health System for the Rapid Deployment, Evaluation and Translation of New Models of Care in South Australia to Reduce Pressure on Emergency Departments and Acute Care	South Australian Health and Medical Research Institute Limited	2,919,835.57
Improving Acute Atrial Fibrillation Management for better patient outcomes	The University of Adelaide	1,075,421.05
IMplementing clinical Pathways for Acute Care in Tasmania (IMPACT)	University of Tasmania	2,919,107.98
OPERATE: Older Persons Early Recognition Access and Treatment in Emergencies	University of Western Australia	2,918,995.32
	TOTAL	**$24,000,000.00**

ENDS

TALKING POINTS

- The Australian Government is providing $24 million for ten innovative research projects which will test new ways to improve care in hospital emergency departments.
- A key target of the research is better ways to care for older patients, including those who are acutely ill or have complex needs.
- One of the projects, from Flinders University, is appropriately titled "there must be a better way".
- It's based on alternative model of urgent care for older people developed in 2021 by the Southern Adelaide Local Health Network.
- EDs are an essential component of Australia's health care system.
- Pressure on them is rising, not only because of the continuing rise in the number of people presenting, but the number of older people with chronic and complex conditions.
- These ten research projects will point the way to new approaches to enable EDs to operate more efficiently and more effectively, to provide better health outcomes for all patients.

From: Minister Hunt DLO
To: s22 ; Minister Hunt DLO
Cc: GOULD, Phillip; MCBRIDE, Paul; s22
Subject: RE: FW: URGENT - Caretaker Brief - Acute Care s22 [SEC=OFFICIAL]
Date: Saturday, 14 May 2022 7:27:04 PM
Attachments: image001.png

Hi s22

Very grateful and appreciative of this weekend work! Thank you so much and have a good night.

s22

s22

Departmental Liaison Officer

Office of the Hon Greg Hunt MP
Minister for Health and Aged Care
s22
E: Minister.Hunt.DLO@health.gov.au
Suite M1.41, PO Box 6022, Parliament House, Canberra ACT 2600, Australia

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From: s22
Sent: Saturday, 14 May 2022 7:17 PM
To: Minister Hunt DLO <Minister.Hunt.DLO@health.gov.au>
Cc: GOULD, Phillip <Phillip.GOULD@Health.gov.au>; MCBRIDE, Paul <Paul.McBride@health.gov.au>;
s22

Subject: FW: FW: URGENT - Caretaker Brief - Acute Care s22 [SEC=OFFICIAL]

> Dear s22
>
> Please find below input for the MB. Please let Kylie know this is all the information we have on hand.
>
> Kind regards
> s22
>
> ---
>
> **CLEARED INPUT**
>
> The $24 million 2022 Models of Care to Improve the Efficiency and Effectiveness of Acute Care Grant Opportunity opened on 7 February 2022 and closed on 2 March 2022 (MS22-000018 refers).
>
> The grant opportunity was administered by the National Health and Medical Research Council (NHMRC).
> A total of twenty-five (25) eligible applications were submitted to the NHMRC.
> Eight streams of funding were available under this grant opportunity, each of which correspond to a state or territory.
>
> In accordance with the grant opportunity guidelines, all 25 eligible applications were assessed by a grant assessment committee, comprised of experts from within

Australia and international reviewers to ensure that the applications were competitive from an international perspective.

Applications to this Grant Opportunity were assessed against a combination of quantitative and qualitative criteria:

1. Project Impact (40% weighting)
2. Project Methodology (30% weighting)
3. Capacity, Capability and Resources to deliver the Project (30% weighting)
4. Overall Value and Risk of the Project (non-weighted).

The Overall Value and Risk criterion was used to determine how well projects presented as an investment in the achievement of MRFF priorities, and the extent to which the applications represented an efficient, effective, economical and ethical use of public resources.

To be awarded MRFF funding, applications must receive a rating of 4 or higher against each of the weighted technical assessment criteria (criteria 1-3), and a rating of “Excellent” or “Good” for the Overall Value and Risk criterion.
Ten (10) applications were awarded funding including one application from Queensland.

s22

Background information

The objective of the 2022 Models of Care to Improve the Efficiency and Effectiveness of Acute Care Grant Opportunity is to provide grants of financial assistance to support medical research and medical innovation projects in each state and territory that develop, implement and validate evidence-based and scalable clinical models of care that improve acute care and reduce the pressure on Australian emergency departments.

There were eight streams under this grant opportunity:

- Stream 1: Australian Capital Territory
- Stream 2: New South Wales
- Stream 3: Northern Territory
- Stream 4: Queensland
- Stream 5: South Australia
- Stream 6: Tasmania
- Stream 7: Victoria
- Stream 8: Western Australia.

As per the grant guidelines, the top ranked project or projects in each Stream would be funded (i.e. the highest ranked applications from each state or territory will be funded).

A total of twenty-five (25) eligible applications were submitted to the NHMRC (1 in Stream 1, 8 in Stream 2, 1 in Stream 3, 5 in Stream 4, 5 in Stream 5, 1 in Stream 6, 2 in Stream 7, 2 in Stream 8.
Outcomes from this grant opportunity are as follows:

APP ID	Stream	Applicant Name	TOTAL ($ GST exclusive)
2018573	2	University of Sydney	**2,847,592.26**
2018473	2	Macquarie University	**2,836,550.49**
2018041	2	University of Sydney	**2,818,123.57**
Subtotal for Stream 2			**8,502,266.31**
2017845	3	Menzies School of Health Research	**2,917,464.18**
Subtotal for Stream 3			**2,917,464.18**
2018023	4	Griffith University	**1,630,153.35**
Subtotal for Stream 4			**1,630,153.35**
2018361	5	Flinders University	**1,116,756.25**
2018031	5	South Australian Health and Medical Research Institute Limited	**2,919,835.57**
2018250	5	The University of Adelaide	**1,075,421.05**
Subtotal for Stream 5			**5,112,012.87**
2018280	6	University of Tasmania	**2,919,107.98**
Subtotal for Stream 6			**2,919,107.98**
2018274	8	University of Western Australia	**2,918,995.32**
Subtotal for Stream 8			**2,918,995.32**
TOTAL Commitment Expenditure			**24,000,000.00**

Note that no applications for Stream 1 (Australian Capital Territory) or Stream 7 (Victoria) were ultimately assessed as fundable, therefore no applications are being recommended for funding from these Streams.

From: Minister Hunt DLO <Minister.Hunt.DLO@health.gov.au>

>> **Sent:** Saturday, 14 May 2022 3:54 PM
>> **To:** s22 GOULD, Phillip <Phillip.GOULD@Health.gov.au>; MCBRIDE, Paul <Paul.McBride@health.gov.au>;
>> s22
>> s22
>> **Cc:** Minister Hunt DLO <Minister.Hunt.DLO@health.gov.au>
>> **Subject:** URGENT - Caretaker Brief - Acute Care s22
>> [SEC=OFFICIAL]
>>
>> Hi s22
>>
>> I understand s22 has already been in touch with you about this request.
>>
>> The MO is requesting a Caretaker Fact Brief in relation to the MRFF Acute Care grant and in particular the s22 . With apologies for the weekend work, this is bring requested for today.
>>
>> I'm not sure if in any way relevant or helpful, but attached is a historical document that I took out of PDMS and provided s22 earlier today.
>>
>> Please do not hesitate to let me know if any issues with the request or timing.
>>
>> Many thanks
>>
>> s22
>>
>> s22
>>
>> Departmental Liaison Officer
>>
>> Office of the Hon Greg Hunt MP
>> Minister for Health and Aged Care
>> s22
>> E: Minister.Hunt.DLO@health.gov.au
>> Suite M1.41, PO Box 6022, Parliament House, Canberra ACT 2600, Australia
>
> [SEC=OFFICIAL]

[SEC=OFFICIAL]