# Final Report

Consistent with clause E (Reporting) of the Commonwealth grant agreement, the Grantee is required to provide the information requested below in its final report. The Department of Health, Disability and Ageing (the Department) reserves the right to amend or adjust the requirements.

Variations should not be requested through this report. For varying your grant and grant agreement please refer to the [MRFF Grant Variation Policy](https://www.health.gov.au/resources/publications/medical-research-future-fund-grant-variation-policy).

Please ensure that you are using the latest version of this template. MRFF reporting templates can be found on the [MRFF website](https://www.health.gov.au/our-work/mrff/grants-management-resources). The finalised report must be submitted in a Microsoft Word document format.

You must submit your report on the business.gov.au [portal](https://portal.business.gov.au/). You can enter the required information in stages and submit when it is complete. Further information about submission is available on the [grant hub’s website](https://portal.business.gov.au/Home/FAQ).

Complete all sections in white as prompted. Remove all instruction or guidance text in the white response fields, prior to providing your responses. Any images or diagrams (including tables that are not part of the template) should be added at the end of the document under Figures and Tables. Please number all images or diagrams (e.g. Figure 1) and refer to the numbers within your report responses as necessary.

## Project Information

|  |  |
| --- | --- |
| Grant ID |  |
| Grant Opportunity Name |  |
| Administering Organisation |  |
| Chief Investigator A / Project Lead |  |
| Grant Title |  |
| Grant Agreement Start Date | DD/MM/YYYY |
| Grant Agreement End Date | DD/MM/YYYY |
| Activity Start Date | DD/MM/YYYY |
| Activity Completion Date | DD/MM/YYYY |
| Australia New Zealand Clinical Trials Registry Trial ID (where relevant): |  |
| Reporting Period Start Date | DD/MM/YYYY |
| Reporting Period End Date | DD/MM/YYYY |
| If the Commonwealth Commercialisation Clauses apply to this project, do you plan to execute any new Commercialisation Agreements that relate to Relevant Intellectual Property developed during the term of the Grant? | Select |

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| 1. **Have you completed all milestones or objectives outlined in your Grant Agreement, original application or approved variation (whichever is most recent and applicable)?** If ‘No’ was selected: Please review the MRFF Grant Variation Policy to consider whether an Extend End Date request might support successful completion of the milestones/objectives. | Select |
| **Complete the following table for each milestone or objective**  The table must outline information against all milestones or objectives with agreed research activities. The comments field should clearly summarise the extent to which you completed all agreed research activities relevant to each milestone/objective and provide a justification for any incomplete milestones/objectives. | |

**Project Outcomes**

| **Milestone/Objective** | **Agreed End Date** | **Actual End Date** | **Current % Complete** |
| --- | --- | --- | --- |
| enter Milestone/Objective information | DD/MM/YYYY | DD/MM/YYYY | X% |
| **Comments:** enter activity summary and justifications for incomplete activity | | | |
| enter Milestone/Objective name | DD/MM/YYYY | DD/MM/YYYY | X% |
| **Comments:** enter activity summary and justifications for incomplete activity | | | |

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| 1. **Did you complete any additional research activities during the reporting period that are not captured in the table above?** | Select |
| If ‘Yes’ was selected: provide details on the additional research activities and how this relates to or supports the milestones and objectives outlined above (suggested 200-300 words) | |
| Provide your response here | |

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| 1. **Provide a statement explaining how you have met the objectives and intended outcomes of the project as specified in section 1.3 of the grant opportunity guidelines.** (suggested 200-300 words) |
| Provide your response here |

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| 1. **Provide a summary of:**    1. **how you are implementing your research findings and ensuring their translation to support improved health outcomes.**    2. **key enablers for implementation and translation you have faced**    3. **key barriers for implementation and translation you have faced.**   (total suggested 200-300 words across a to c) |
| 1. Provide your response here |
| 1. Provide your response here |
| 1. Provide your response here |

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| 1. **Have you complied with all funding conditions and legislation applicable to the delivery of the project as outlined in the grant agreement?** | Select |
| If ‘No’ was selected, explain why. (suggested 200-300 words) | |
| Provide your response here | |

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| 1. **Did your grant involve identifying, supporting and working in partnership with selected organisations to progress their own research project/s?** | Select |
| If ‘Yes’ was selected, complete the table below with information on these projects. | |
| **Were all of the projects completed?** | Select |
| If ‘No’ was selected, explain why. (suggested 200-300 words) | |
| Provide your response here | |

Add rows as necessary.

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Subcontractor/ Awardee** | **Project Title** | **Summary of Project** | **Lead Researcher** | **Grant Funds Provided (AUD)** | **Start Date**  **of Project** | **% Project Complete** |
| enter name of organisation | enter project title | enter summary of project conducted by subcontractor | enter name of lead researcher from subcontractor organisation | enter amount in $AUD | DD/MM/YY | X% |

**Project Expenditure**

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| 1. **Provide details of all expenditure incurred using MRFF funding during the project.**   The table should indicate for each expenditure item in the activity budget section of the grant agreement (A), the total approved budget (B), any expenditure since the previous reporting period (C), and the total expenditure (D) for the duration of the grant. The comments field (E) should justify any differences between the budgeted and actual expenditure. | |
| **Have you made any changes to expenditure items that are allowable in the grant opportunity guidelines not requiring a variation?** | Select |
| If ‘Yes’ was selected: The total budget field (B) should be updated with the new amounts for each expenditure item. The comments field (E) should note the reasons for differences between the original approved budget and the updated budget. | |

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| --- | --- | --- | --- | --- |
| **(A) Expenditure Item** | **(B) Total Budget (AUD)** | **(C) Actual expenditure since previous report**  **(AUD)** | **(D) Total actual expenditure (AUD)** | **(E) Comments** |
| enter expenditure item name | enter amount in $AUD | enter amount in $AUD | enter amount in $AUD | enter comments justifying differences between the budgeted and actual expenditure |
|  |  |  |  |  |
| **TOTAL** |  |  |  |  |

If you are registered for GST, enter the GST exclusive amount. If you are not registered for GST, enter the GST inclusive amount. We may ask you to provide evidence of costs incurred. Refer to the grant opportunity guidelines or if you have any questions about expenditure your administration officer or Project Lead should contact [mrff@industry.gov.au](mailto:mrff@industry.gov.au).

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| 1. **Is all expenditure of MRFF grant funds incurred during the grant period eligible?** | Select |
| If ‘No’ was selected: provide details of the ineligible costs and explain why they have been incurred. (max 300 words) | |
| Provide your response here | |

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| 1. **Did your application include details of cash or in-kind contributions from partner organisations or participating institutions?** | Select |
| If ‘Yes’ was selected: provide details of the contributions in the table below. | |
| **Have all contributions outlined in the Grant Agreement or application been made as expected?** | Select |
| If ‘No’ was selected: describe the impact of any delays or changes to the delivery of the Research Activity. | |

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| **Name of Partner** | **Type of Contribution** | **Expected Value of Contribution (AUD)** | **Actual Value of Contribution (AUD)** | **Comments** |
| enter name of partner organisation | Select | enter amount in $AUD | enter amount in $AUD | enter comments describing the impact on the delivery of the research activity |

**Project Evaluation**

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| 1. **Did you provide a Measures of Success statement with your application, as specified in the grant opportunity guidelines?** Refer to the [MRFF Monitoring, Evaluation and Learning Strategy](https://www.health.gov.au/our-work/mrff/about/monitoring-evaluation-learning) for more information. | Select |
| If ‘Yes’ was selected, foreach Measure of Success applicable to your project:   * list each outcome/result (one per row), including a quantitative or qualitative description of the target (Note: You may select the same Measure of Success for several outcomes/results.).   + you should include all outcomes/results listed in your grant application.   + you can include additional outcomes/results. * indicate to what extent you have achieved the outcome or result and summarise how you have achieved or completed the target.   + The [Performance indicators towards the impact of the MRFF](https://www.health.gov.au/resources/publications/performance-indicators-towards-the-impact-of-the-medical-research-future-fund) can be used to describe how your project has contributed towards the Measure of Success. | |

Add rows as necessary.

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| **Measure of Success** | **Outcome/Result** | **Level of achievement** | **Comments** |
| Select | enter outcome/result from application | Select | enter comments summarising how you achieved or completed the target |
| Select |  |  |  |

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| 1. **Are there any important findings or outcomes during this reporting period that the Department can publicise?**   If ‘Yes’ was selected, using lay language, explain in a few sentences the most important finding(s) or outcome(s) from your project during this reporting period, and why they are important. (suggested 200-300 words) | Select |
| Note that your response may be used in public communications about the MRFF, and that you may be contacted to expand on your response below. **Is any of the information you provided commercial in confidence?** | Select |
| Provide your response here | |

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| 1. **Have the new findings or outcomes led to or will lead to publications?** | Select |
| If ‘Yes’ was selected, provide information on the status of or plan for the manuscript or publication in the table provided below. | |

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| --- | --- | --- | --- | --- |
| **Publication Status** | **Author(s)** | **Title** | **Journal Name/ Preprint Repository** | **DOI** |
| Select | enter all author names in the order in which they (will) appear in PubMed | enter published/anticipated title of publication | enter publishing journal name or preprint repository | enter DOI of publication or preprint |
| Select |  |  |  |  |

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| 1. **Describe any facilitators (a) or barriers (b) to translation or implementation of research you have faced that may systemically affect the broader sector, discipline or field.**   This information will be used to inform future MRFF funding opportunities. (min 200 words) |
| 1. Provide your response here on facilitators |
| 1. Provide your response here on barriers |

## Updated Business Indicators

**Provide the following financial data for your organisation for your latest complete financial year.**

These fields are mandatory. Entering $0 is acceptable, if applicable.

* Financial year completed
* Sales revenue (turnover)
* Export revenue
* R&D expenditure
* Taxable income
* Number of employees including working proprietors and salaried directors (headcount)
* Number of independent contractors (headcount).

## Attachments

1. *Attach any agreed evidence required to demonstrate successful completion of the project.*
2. *Attach copies of any published reports and promotional material relating to the project.*

## Figures and Tables

Include any images, graphs, charts, or diagrams here (if applicable):

Each figure or table must have a clear title (Figure 1 or Table 1), descriptive headers and include all labels or applicable units of measurement. Captions must be included as text within the report rather than as part of the figure and give a clear and concise description and highlight the key findings. Font type for the captions should be Arial and size 11. Reference each figure or table in your report (e.g., Figure 1, Table 1) as needed.

## RAO Certification

This report should be reviewed and certified by a Research Administration Officer[[1]](#footnote-1) on behalf of the Grantee.

By submitting this progress report, you are certifying that:

* an authorised person has completed the report.
* the information in this report is accurate, complete and not misleading and that you understand the giving of false or misleading information is a serious offence under the *Criminal Code 1995* (Cth).
* you have complied with the relevant grant opportunity guidelines, as well as all funding conditions and relevant legislation applicable to the delivery of the Research Activity, as described in the grant agreement.
* you are aware that the grant agreement empowers the Department to terminate the grant agreement and to request repayment of funds paid to the grantee where the grantee is in breach of the grant agreement.

1. The officer nominated by the administering organisation as its contact person for the purpose of grant applications and grant agreements. For MRFF grants administered by BGH, this term equates to the administration officer(s) at the administering organisation identified as the Grantee. [↑](#footnote-ref-1)