# Progress Report

Consistent with clause 10 (Reports) of the MRFF Grant Agreement, the administering organisation is required to provide the information requested below in its progress reports. The Department of Health, Disability and Ageing (the Department) reserves the right to amend or adjust the requirements of the reports.

Variations should not be requested through progress reports. 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 the Progress Report 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 Word document format.

Further information about submission is available on the [grant hub’s website](https://www.nhmrc.gov.au/funding/manage-your-funding/mrff-funding/reporting-and-milestones/information-mrff-scientific-reporting-and-milestones).

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 |  |
| Eligible Organisation |  |
| Chief Investigator A |  |
| Grant Title |  |
| Research Activity Start Date | DD/MM/YYYY |
| Research Activity End Date | DD/MM/YYYY |
| Australia New Zealand Clinical Trials Registry Trial ID or similar (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, have there been any changes to the Commercialisation Plan? | Select |
| Do you plan to execute any new agreements that relate to Relevant Intellectual Property developed during the term of the Grant? | Select |

## Project Progress

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| 1. **Complete the following table for each milestone or objective outlined in your grant agreement, original application, or approved variation (whichever is most recent and applicable).**

The table must outline information against all milestones or objectives with agreed research activities in this reporting period, or where progress has been made in this reporting period towards milestones or objectives due in a future reporting period. The comments field should clearly summarise progress as at the end of this reporting period towards completion of the agreed research activities (including details such as participant recruitment numbers where relevant) and provide a justification for any changes or delays to milestones/objectives. |

| **Milestone/Objective** | **Agreed End Date** | **Actual/Anticipated End Date** | **Current % Complete** |
| --- | --- | --- | --- |
| enter Milestone/Objective information | DD/MM/YYYY | DD/MM/YYYY | X% |
| **Comments:** enter progress summary to date, justifications for changes or delays and strategies to rectify OR where applicable, for milestones which have been fully completed and reported on in a previous report, state ‘As previously reported’ |
| enter Milestone/Objective information | DD/MM/YYYY | DD/MM/YYYY | X% |
| **Comments:** enter progress summary to date, justifications for changes or delays and strategies to rectify OR where applicable, for milestones which have been fully completed and reported on in a previous report, state ‘As previously reported’ |

|  |  |
| --- | --- |
| 1. **Did you undertake or complete any additional research activities during this 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. **Complete the following table with all** [**variation requests**](https://www.nhmrc.gov.au/funding/manage-your-funding/vary-your-grant) **under the MRFF Grant Variation Policy approved, submitted (pending approval) or in draft (pending submission) for this grant to date**.
 |

| **Type of Variation** | **Description of Variation** | **Have the requested changes been implemented for the research activity?**See note below | **Current Status** |
| --- | --- | --- | --- |
| Select | enter description of variation | Select | Select |

|  |
| --- |
| Note: If any changes have been implemented without an approved variation, you must submit a variation request immediately, as variation requests must be submitted in advance of the proposed date of effect. |

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| 1. **Are there any new risks, or changes to existing risks, to completion of milestones/objectives that have arisen during this reporting period?**
 | Select |
| If ‘Yes’ was selected: Provide details of the risks and how you are managing or propose to manage these risks (suggested 200-300 words). Attach an updated risk management plan if the risk to your project is high. You should review the MRFF Grant Variation Policy and consider if any of the variation types are appropriate.  |
| Provide your response here |

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| 1. **Are you on track for completion of the Research Activity by the agreed end date?**

**Provide a statement below on your overall progress towards completion of the Research Activity by the agreed end date.** If the Research Activity is not on track, describe the extent of the overall delay. (suggested 200-300 words) | Select |
| Provide your response here |

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| 1. **Provide a summary of:**
	1. **progress towards implementing your research findings and how you intend to ensure 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
 |

## Project Expenditure

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| --- |
| 1. **Provide details of current total budget and forecast expenditure to be incurred using MRFF funding.**

The table should indicate for each expenditure item (A), the total budget for the expenditure item across the duration of the grant as noted in the budget summary section of the application report, approved change to expenditure variation, or reported total budget where allowable changes were made without a variation, whichever is most recent (B), and estimated expenditure for the next period (C). |
| **Have you had any significant overspends or underspends in this reporting period, including any carry forwards?** | Select |
| If ‘Yes’ was selected: The comments field (D) should provide justification on how the estimated expenditure for the next period will bring this back in alignment. |
| **Have you made any changes to expenditure items that are allowable in the grant opportunity guidelines and do not require 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 (D) should explain differences between the original approved budget and the updated budget. |

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| --- | --- | --- | --- |
| **(A) Expenditure Item** | **(B) Total Budget (AUD)** | **(C) Estimated expenditure for next period (AUD)** | **(D) Comments** |
| Salary | enter amount in $AUD | enter amount in $AUD | enter comments as requested above |
| Other Direct Research Costs |  |  |  |
| Equipment |  |  |  |
| **TOTAL** |  |  |  |

All expenditure should be GST inclusive, less GST credits that can be claimed. Refer to the grant opportunity guidelines or if you have any questions about expenditure your RAO should contact NHMRC.

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| 1. **Is all expenditure of MRFF grant funds incurred during the reporting 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; add rows as needed. |
| **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 in the comments section. |

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| **Name of Partner Organisation** | **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 of any delays or changes to the delivery of the grant 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, for each Measure of Success applicable to your project:* list each outcome/result (one per row), including a quantitative or qualitative description of the target that will indicate its achievement or completion (Note: You may select the same Measure of Success for several outcomes/results.)
	+ you should include all outcomes/results listed in section F of your grant proposal.
	+ you can include additional outcomes/results.
* indicate the estimated percentage of progress towards achieving the Measure of Success and provide a summary of your progress towards achievement or completion of the target at the end of the reporting period.
	+ 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.

|  |  |  |  |
| --- | --- | --- | --- |
| **Measure of Success** | **Outcome/Result** | **Estimated Progress** | **Comments** |
| Select | enter outcome/result from application or additional outcome/result | X% | enter comments summarising progress to date |
| 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 |

## Attachments

*Attach any agreed evidence required above (e.g. updated risk management plan).*

## 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 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 and Schedule
* 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.