



# WA Child Research Fund 2024-25

# **Guidelines and Conditions**

Applications close: 1.00pm (AWST) Friday 30 May 2025

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# 1. Introduction

The Western Australian (WA) Department of Health in conjunction with the Channel 7 Telethon Trust (the Trust) established the WA Child Research Fund (the Program) to provide funding for research activities that focus on child and adolescent health in WA.

Funding for this Program is provided by both the WA State Government and the Trust.

The program is administered by the Office of Medical Research and Innovation (OMRI), Department of Health. Queries may be directed to <u>DOH.OMRI@health.wa.gov.au</u>.

# 2. Purpose

The purpose of the Program is to support research that leads to better health outcomes for children and adolescents in WA.

The aims of the Program are to:

- fund research of direct significance to the health of WA children and adolescents
- promote the translation of research findings into evidence-based health policy and practice which will ultimately provide better health outcomes
- contribute to integrating research capability across universities, research institutes and health services by encouraging the development of research-policy-practice clusters.

# 3. **Program description**

The Program will provide grants of up to \$600,000 for research Activity to be conducted over a period of up to 3 years.

Research Activity must directly address a problem that arises from an unmet health or medical need or opportunity of significance to children and/or adolescents in WA.

Examples of research areas are:

- public health issues
- rural, remote and Aboriginal health
- mental health
- health prevention and promotion interventions
- patient-focused healthcare delivery along the continuum of care
- health system organisation and access
- emerging health risks
- prenatal and neonatal care.

Funded Activity may include research along the continuum of basic, clinical, health service and public health.

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

Funding will be awarded through a competitive and merit-based process.

The Activity Lead will be responsible for coordinating the Activity and ensuring its timely execution.

The Responsible Entity\* will be accountable for the governance and financial management of any funding awarded.

\* It is acknowledged that the term Administering Institution has traditionally been used by universities and research institutes, however for this grant, the term Responsible Entity is inclusive of industry and reflects that grant agreements are the responsibility of the contracted entity.

# 4. Eligibility

To be eligible for this Program all of the following criteria apply:

- The Responsible Entity must:
  - have an active Australian Business Number (ABN)
  - have a physical and operational presence in WA.
- The Activity Lead must:
  - be an Australian or New Zealand citizen, a permanent resident of Australia, or have an appropriate work visa in place for the period of the Activity
  - physically reside in WA for a minimum of 80 per cent of the period of the Activity
  - have no overdue reports for any grant funding program administered by OMRI (including Future Health Research and Innovation (FHRI) Fund programs) from any year (excludes authorised extensions)
  - o ensure that funding has not been awarded any component of the Activity
  - have a position or title at the Responsible Entity for the period of the Activity The Activity Lead will be required to specify which of the following applies:
    - (a) employee of the Responsible Entity; or
    - (b) honorary or adjunct title at the Responsible Entity.

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

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

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

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

- The Responsible Entity or other entities that fund or are involved in the Activity must not be part of an industry that produces products or services that may contribute to poor physical health or mental wellbeing of the community.
- The grant funding must not constitute the entire financial base of the Responsible Entity i.e. the Responsible Entity must have other external sources of income.
- The Responsible Entity must ensure applications meet all eligibility criteria as set out in these guidelines.
- Applications must be submitted in accordance with the 'Application instructions' section of this document.
- An applicant may not submit more than two applications to this Program.
- An application may be deemed ineligible and excluded from further consideration if OMRI identifies that:
  - o it does not meet all eligibility criteria as set out in these guidelines
  - $\circ$  the proposed Activity duplicates activity previously or currently being undertaken
  - o it includes any incomplete, false or misleading information
  - $\circ~$  it was submitted after the advertised closing date and time.

- Grant offers may be withdrawn if it is determined that eligibility criteria are not met.
- OMRI reserves the right to request further information and make final decisions regarding eligibility.
- Decisions made in relation to previous grant programs will not be regarded as precedents and will not be considered when assessing eligibility for this grant program.

# 5. **Program funding**

Funding amounts of up to \$600,000 excluding GST are available to successful applications to finance the Activity to be completed over a period of up to 3 years.

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

Funding will be in accordance with the following:

- Salary costs:
  - may include Award/Agreement increases and salary increments as appropriate
  - may include leave entitlements that <u>accrue and are taken</u> during the period the salary is being paid by the grant funding (noting annual leave is accrued at a rate of 7.69% and long service leave at a rate of 2.5% of the base salary paid by grant funding)
  - cannot include leave entitlements accrued outside this period, parental leave, sabbatical, severance and termination payments
  - can only include superannuation, payroll tax and workers compensation as oncosts up to a maximum of 30%, noting that WA public health system salaries can only include superannuation as a salary on-cost
  - are not to provide salary for the Activity Lead. An exemption to this rule may be requested, where it is deemed that this salary is crucial to the success of the Activity. Adequate justification must be provided. Determination of exemptions will be made on a case-by-case basis, at the discretion of OMRI.
- Non-salary costs:
  - can only include expenses such as essential services, supplies, unique equipment and consumer involvement
  - for travel will not be approved unless strongly justified as being essential to the undertaking of the Activity and must not include costs related to conference attendance
  - may be requested for equipment, however, the total value of all equipment items must not exceed 10% of the budget request or \$15,000, whichever is the lesser amount, and quotes for each item must be attached to the application.
- Overhead charges (indirect/infrastructure costs):
  - may be requested up to a maximum of 10% of the total budget, noting that WA public health system Responsible Entities cannot claim overhead charges in accordance with the Financial Management Manual s522 (grant funding administered by OMRI is exempt).

Funding will only be made available for the scope of work described in the Application Form, or with any modifications approved by OMRI. The Department of Health will not underwrite any costs beyond the funding awarded through this Program.

The intention is that funding will be spent within WA unless goods and services expenditure items are not available in WA and/or it is beneficial to WA if goods or services are procured from outside WA.

All budget items should be adequately described and justified as consideration is given to budgets during the assessment process.

Budgets must be calculated accurately, as requests for additional funding will not be considered.

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

Relevant external funding information should be included in the 'Budget' section of the Application Form.

# 6. Application instructions

The instructions below must be followed when making a submission:

- The Application Form available from the <u>Department of Health website</u> must be submitted by **1.00pm (AWST) Friday 30 May 2025**.
- The application must be completed in Arial font 11 point or larger.
- Electronic signatures are acceptable if approval to use the electronic signature has been obtained from that person.
- The application is to be emailed to <u>DOH.OMRI@health.wa.gov.au</u> as a single Adobe Acrobat PDF or Microsoft Word file, not exceeding 5 MBs, including CVs, and bibliographic references (if applicable). The application and email subject line must be titled as follows:
  - Activity Lead SURNAME, First name WACRF2024-25
  - e.g. SMITH, Alex WACRF2024-25
- Applications must be complete, include requested certifications and be submitted by the closing date/time. Consideration must be given to the time needed to comply with internal deadlines.

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

Queries regarding the application process should be directed by email to <u>DOH.OMRI@health.wa.gov.au</u>.

# 7. Selection process

#### Assessment process

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

Depending on the number of applications received, a review panel may conduct a shortlisting assessment stage to determine the eligible applications that are most aligned with the aims and objectives of the Program.

All eligible applications, or only those selected if a shortlisting assessment stage is undertaken, will be referred for full assessment and scoring by a review panel comprising of experienced child health and medical researchers and consumer representatives.

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

This assessment will be based on the criteria and % weightings set out in the table below.

Assessment Criteria	%
Significance of the Activity	20

The issue t	hat the research addresses.	
• The releva	nce and scale of the issue in relation to WA child and adolescent health.	
	contribution of the Activity to the identified issue (e.g. advancing , informing policy/practice, improving health care or health outcomes).	
• Potential e	conomic, social and environmental benefits of the Activity to WA.	
Activity Plan		20
• Quality of t	he research proposal, including:	
<ul> <li>hypoth</li> </ul>	esis, research questions and objectives	
o metho	dology, including objective measurement of expected outcomes	
o <b>achiev</b>	able timeline and milestones.	
	sed budget to undertake the Activity and justification for budget items, ny proposed salary components.	
Novelty		15
-	oach and distinction from any similar or related research in this area.	
	enefit and value of the novel approach.	
Consumer inv		15
	imers (e.g. patients, carers, community members) have been involved in	10
	pment of the proposed research.	
how their I	r ongoing consumer engagement in the research, including their roles and ived experience perspectives will inform the research (refer to Section 8 <i>involvement</i> ).	
Feasibility		15
	edge, expertise and experience of the Activity Lead and team members is for the proposed research.	
• The contrib the Activity	oution of the Activity Lead and team members, and the collective gain to .	
and policy	e level of partner engagement and collaboration, e.g. healthcare providers makers, during both the development of the research proposal and the the research.	
	technical resources, infrastructure, equipment, facilities and additional rsonnel, if necessary.	
Translation a	nd implementation	15
	or translation and implementation of research findings into policy and cluding potential commercialisation.	
•	ns for the Activity. For example, a possible extension of the Activity to a ographical area, population or to other disciplines.	
Potential for	r applications to national or international funding bodies (if applicable).	

#### Selection of recipients

Based on the assessment and recommendations of the review panel(s), the Department of Health will determine and approve the awarding of grants in accordance with the Department of Health financial and procurement processes and delegation authorities.

OMRI reserves the right to offer lower funding rates than requested and/or request modification to the Activity on a case-by-case basis.

# 8. Consumer involvement

In line with the National Health and Medical Research Council (NHMRC) definition, consumers are people who have lived experience of a health issue They include patients and potential patients, carers, and people who use health care services. Consumers can also be people who represent the views and interests of a consumer organisation, a community or a wider constituency.

There is increasing recognition of the benefits of involving consumers in research and innovation. Effective consumer involvement can ensure research and innovation is relevant to the WA community and improves translation into policy and practice.

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

Consumer involvement should incorporate:

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

Guidance on consumer involvement can be found at the <u>Consumer and Community</u> <u>Involvement Program</u> website and the <u>NHMRC Statement on Consumer and Community</u> <u>Involvement in Health and Medical Research 2016.</u>

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

# 9. Contractual arrangements

Grants are offered in accordance with the Department of Health *Grant Funding Agreement* (and its Terms and Conditions), which is a legal agreement between the Department of Health (Us) and the Responsible Entity (You).

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

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

#### Insurance

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

- Public Liability (mandatory for all grants)
- Professional Indemnity (mandatory if the Responsible Entity is conducting a clinical trial, provides any form of medical treatment or advice, training, or will provide any tailored design, advice or specification services)

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

OMRI recommend that you seek advice from your insurance advisors to confirm what level and type is required for the Activity

The Responsible Entity is responsible for ensuring participating entities have appropriate insurance.

Note that any Activity that requires site governance approval will also be required to provide evidence of appropriate insurance during the governance process, which may vary depending on the site.

#### Intellectual property

Intellectual Property (IP) that arises out of the Activity will vest with the Responsible Entity (You). However, consideration will be given to the provisions of the <u>Western Australian</u> <u>Government Intellectual Property Policy 2023</u> (or any future iterations of this), and that IP rights should be allocated to optimise the economic, social or environmental benefits for WA from the use, commercialisation and disposal of the IP. For information, the IP clause that will apply to this Program:

- 1. The ownership of any Intellectual Property generated by undertaking the Activity shall vest in You [the Responsible Entity].
- 2. The ownership of any background or pre-existing Intellectual Property and associated Moral Rights, used or incorporated in the Activity that is presently vested in a Party shall remain vested in that Party, unless otherwise agreed.
- 3. Each Party will be entirely and solely responsible for the use in the Activity of any Intellectual Property and associated Moral Rights it has provided to the undertake the Activity which belongs to, or is licensed from, any other party, and indemnifies the other Party against all claims by a third party arising out of use of that Intellectual Property and associated Moral Rights.
- 4. Subject to the confidentiality provisions of the Agreement, You hereby grant to Us, a non-exclusive, irrevocable, perpetual, royalty-free licence to use (excluding the ability to sub-licence or grant further licences) any of the Intellectual Property generated in the Activity, and which falls within the scope of WA Health's normal activities. This includes, but is not necessarily limited to, activities related to healthcare provision, teaching, training and research. This license does not automatically extend to any potential or eventual commercial development of the Intellectual Property, and any commercial products that might directly or indirectly result from the Activity Intellectual Property. However, where You believe that there is the potential for commercialisation of the Intellectual Property developed in the course of the Activity, both Parties shall negotiate in good faith the appropriate legal and beneficial interests, rights and access to the Intellectual Property by Us.
- 5. You indemnify and will keep indemnified Us and all Our respective officers, employees and agents from and against all costs, losses, expenses, actions, suits, demands, claims, damages and other liabilities resulting from Your failure to comply

with this agreement, or otherwise resulting from the actual or alleged infringement of the Intellectual Property rights or associated Moral Rights of any third party by You.

6. Your obligations under this Agreement are continuing and survive expiration or termination of the Agreement.

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

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

#### Requests for variation

Requests for variations to the *Grant Funding Agreement*, such as Activity description, Activity Lead or Responsible Entity, must be directed to OMRI. Approval of the variation will be at the discretion of the Department of Health. If variations are not approved this could result in termination of the grant with associated funding reverting to, or being recoverable by, the Department of Health, where for example eligibility or viability of the Activity is affected.

# **10.** Funding conditions

#### Payment instalments

Funding will be provided in instalments to the Responsible Entity as follows:

- The first instalment will be subject to execution of a Grant Funding Agreement\*
- Subsequent instalments, if applicable, will be subject to satisfactory *Progress Reports*.
- \* Within the WA public health system, payment will be made to the Responsible Entity via a General Ledger Journal (GLJ) transfer progressively upon receipt of evidence of expenditure.

If ethics and governance approvals are required (refer to 'Approvals' section of this document), then the Responsible Entity may only release the first instalment to the Activity Lead once all approvals for the Activity have been obtained and lodged with the Responsible Entity.

#### Partial payment or suspension of funds

The Department of Health reserves the right to:

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

#### Additional funding sources

Additional sources of funding are permitted, and encouraged, provided the additional funding supports activities that complement, but do not duplicate, the Activity for which grant funding under this Program is awarded.

#### Termination of Funds

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

• eligibility requirements are no longer met

- the Activity is terminated by OMRI as a result of insufficient progress being made, or it has been otherwise determined by either the Responsible Entity or OMRI that the Activity is no longer viable
- full or partial funding for the Activity is obtained from another source, noting the date funds revert to, or are recoverable from, would be the date you are notified by the funding source
- funds are used for purposes other than those for which they were awarded
- funds were spent on activities that require ethics and/or governance approvals and such approvals were not obtained before undertaking the activities
- funds are not fully expended at the conclusion of the Activity (including any extensions approved by OMRI)
- it is determined that misleading or fraudulent information has been provided.
- the Responsible Entity does not enter into formal agreements with respect to this Activity, which includes Intellectual Property ownership, where appropriate
- other entities fund or are involved in the Activity that are part of an industry that produces products or services that may contribute to poor physical health or mental wellbeing of the community.

# 11. Approvals

#### Research ethics and research governance

The Responsible Entity, and any other participating entity, will be responsible for obtaining and lodging all relevant research ethics and governance approvals that are required for undertaking funded activities, and ensuring these are maintained as required for the duration of the Activity.

Research ethics approvals must be obtained from relevant ethics committees (human and/or animal). Research governance authorisation (also known as site specific assessment or access request review) must be obtained from each relevant institution/site conducting the Activity or providing access to data, participants or tissue samples.

For information on research ethics and governance submission requirements for the WA public health system please refer to the following websites: <u>Research Ethics</u>; <u>Research Ethics</u>; <u>Research Ethics</u>; <u>Research</u>.

#### Use of data collections

An Activity that requires access to and use of WA Department of Health data collections requires review and approval for data release in accordance with the <u>Health Services Act</u> <u>2016</u> and the <u>Health Services (Information) Regulations 2017</u>. This is in addition to research ethics and governance approvals and will include a feasibility assessment to determine whether the data requested is appropriate for the purposes of the study and approval for use of the data from the data custodian.

Preliminary cost and time estimates can be obtained from contacting <u>DataServ@health.wa.gov.au</u>. Cost estimates should be included in the proposed budget and an estimate of time for release of the data should be incorporated into the milestones in the Application Form.

For further information please review the <u>Data Linkage Services</u> website.

Should the application for funding be successful, we recommend you immediately begin the data request and approval process.

# 12. Reporting

The Activity Lead and Responsible Entity are responsible for meeting reporting requirements over the duration of the Activity and at its conclusion.

All reports are to be completed on templates provided by OMRI.

#### **Progress Activity Report**

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

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

OMRI reserves the right to suspend or withdraw funding where insufficient progress has been made.

#### Final Activity Report

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

#### Financial Report

A financial acquittal statement outlining the expenditure of funds must be submitted to OMRI at the conclusion of the Activity. Acquittal statements must be certified by an authorised finance officer (or equivalent) of the Responsible Entity.

OMRI reserves the right to request interim *Financial Reports* at any stage during the Activity.

Any unexpended funds must be returned to the Department of Health. Any over-expenditure is the responsibility of the Responsible Entity, and no claim may be made against the Department of Health.

#### Community Stakeholder Brief

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

# 13. Publicising, acknowledgements and publications

The Minister for Health and/or Medical Research and/or the Department of Health and the Channel 7 Telethon Trust will publicly announce recipients, including the title of the Activity. All other parties must withhold announcement/media coverage until after OMRI advises this has occurred.

Acknowledgment of WA State Government and Channel 7 Telethon Trust support must be made in publications, conference presentations, public discussion, press statements etc. A copy of any published material or media must be provided to Us.

In order to maximise knowledge exchange, funding recipients must comply with the NHMRC 'Publication and dissemination of research: a guide supporting the *Australian Code for the Responsible Conduct of Research*', which can be downloaded from the <u>Australian Code for the Responsible Conduct of Research</u> page, and the <u>NHMRC Open Access Policy</u>.

# 14. Confidentiality

Activity title, Activity Lead, funding amount, Responsible Entity, plain language summaries and sections indicated on applications or reports may be used for publicity purposes.

All other information provided in applications and reports will be maintained confidentially by OMRI, review panels and evaluation panels. If requests are received by OMRI to make public any aspect of the Activity, other than the aspects listed above, the authorisation of the Responsible Entity will be sought, notwithstanding information requested under the *Freedom of Information Act 1992 (WA)* or information pertaining to the receipt of State Government financial assistance tabled in the Parliament of Western Australia.

# 15. Evaluation

OMRI undertakes evaluations of Funding Programs, which will include unsuccessful applications. All parties in the application, including team members and consumer representatives, are required to contribute to the evaluation.

# 16. Complaints

Responsible Entities or Activity Leads who feel that their interests have been adversely affected by an action taken by OMRI in administering the Program may lodge a complaint. Complaints can only be considered when they refer to the administrative process and not to the funding decision. Complaints must be submitted via email (marked Confidential) to: Deputy Director General (OfficeoftheDDG@health.wa.gov.au).



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