

2020

HEALTH+MEDICAL RESEARCH

—  
**Translational Research  
Grants Scheme  
Round 5**

Guidelines for Applicants



NSW Health

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[www.medicalresearch.nsw.gov.au/translational-research-grants-scheme](http://www.medicalresearch.nsw.gov.au/translational-research-grants-scheme)

# Call for Applications

NSW Health invites local health districts (LHDs), specialty health networks (SHNs), NSW Ambulance and NSW Health Pathology to apply for funding under the Translational Research Grants Scheme (TRGS). These guidelines provide information about the application procedure, selection process, and reporting and evaluation requirements for the scheme.

Further information on TRGS is available on the TRGS website. For any queries please contact MOH-TRGS@health.nsw.gov.au.

## 1. Program Outline

TRGS is currently in its fifth round of funding. The Scheme offers grants to facilitate high impact research that will translate into better patient outcomes, health service delivery and population health and wellbeing, while also building research capability within NSW Health.

TRGS funding is available to staff within NSW LHDs, SHNs, NSW Ambulance, and NSW Health Pathology, including medical staff, nursing staff, allied health professionals and population health practitioners.

TRGS aims to incentivise research that is a priority for the State or articulated in local strategic research plans, and to support the translation of research into policy and practice.

## 2. Program Objectives

The objectives of TRGS are to:

1. Foster the generation of high quality research that is directly relevant to clinical, health service and population health practice in NSW. The Scheme supports:
  - projects that demonstrate sufficient evidence and background to justify the research proposed
  - rigorous research with an appropriate study design that aligns with the research question
2. Support projects that have the potential to be translated into policy and practice. The Scheme supports:
  - research that is translatable; that is, research that can be generalised and scaled across other LHDs/ SHNs across the state
  - translation research; that is, implementation science projects that examine how to more effectively apply best practice in models of care

- projects with a robust implementation plan, which is developed and agreed to at the outset of the research design by the research team and local or statewide policy/practice partners, to first assess the intervention for implementation and then lead the process.
3. Reduce the time from evidence generation to practice implementation. The Scheme supports:
    - research with a strong governance framework that includes key stakeholders such as policy makers, health system administrators, clinicians and practitioners to:
      - ensure the research project addresses system needs
      - support the faster uptake of research findings that are supportive of implementation across the system
  4. Enhance health and medical research capability and capacity within the NSW health system, including:
    - providing opportunities for medical, nursing, population and allied health staff to conduct research within LHDs, SHNs and Statewide Health Services.
    - enabling opportunities to leverage complementary programs which support workforce development such as the NSW Health Early-Mid Career Fellowships and the NSW Health PhD Scholarships
    - enabling opportunities to leverage philanthropy and non-government organisation in-kind and financial support for research.

## 3. Round 5 Priority Themes

Each round of TRGS focuses on a number of identified statewide priority areas. Applicants are encouraged to consider aligning research projects with these priority themes in consultation with statewide partners. Applications that address local priorities are also encouraged, with appropriate justification.

Round 5 will focus on the following priority research areas.

- Aboriginal health
- Alcohol and other drugs
- Integrated Care
- Potentially preventable hospitalisations
- Pregnancy and the first 2000 days
- Value Based Health Care

- Locally identified priorities

Further information about each priority is available on the [TRGS webpage](#).

Note that all applications are assessed according to the eligibility and selection criteria outlined below. There are no funding quotas applied for priority themes.

## 4. Key Considerations

### Ethics

Ethics approval is not required at EOI or Full Application stage, but proposals should demonstrate that ethics requirements have been considered early.

The requirements of the National Health and Medical Research Council's National Statement on Ethical Conduct in Human Research should be reviewed and considered. It is recommended that all proposals are discussed with the Executive Officer of the relevant HREC for each host institution.

For research projects involving Aboriginal and Torres Strait participants, sensitivities need to be recognised. Consultation with the Aboriginal Health and Medical Research Council Human Research Ethics Committee is advised.

Similarly all health research projects involving persons in custodial or forensic mental health settings in NSW should consult with the Justice Health and Forensic Mental Health Network Human Research Ethics Committee.

Further information and key questions for researchers about ethics is available on the OHMR website.

### Program Logic

In line with NSW Health's long-term strategic priority to move from a focus on outputs to a focus on outcomes, applicants at the Full Application stage will be required to complete a program logic model to demonstrate the impact of the project on policy and/or practice.

A program logic model is a schematic representation that describes how a project is intended to work by linking activities with outputs, intermediate impacts and longer term outcomes. Program logic aims to show the intended causal links of a project or program. The program logic should be developed in the planning stage to allow stakeholders to articulate the desired impacts and outcomes, and clarify how the project will achieve these.

Using a program logic approach to describe a project has many benefits, including:

- Providing a systematic and integrated approach to project planning, implementation and evaluation
- Illustrating the change process underlying the project by clarifying the activities and intended outcomes, and how these are linked
- Making assumptions explicit and enabling the testing of how these assumptions are supported by evidence
- Providing a useful tool for engaging stakeholders in project planning and evaluation, and clearly communicating with stakeholder audiences about project concepts
- Facilitating a common language about the project and building a shared understanding of how it will work and what it will achieve
- Providing a framework for evaluating the project by identifying areas where evaluation will be most important, and informing the development of meaningful evaluation questions.

Further information around program logic is available through [Developing and Using Program Logic: A Guide](#) and the short animation '[Exploring Program Logic](#).'

### Translational Research Framework

The Sax Institute has developed the [Translational Research Framework](#) and [Source Book](#) to assist grant applicants to refine research questions, identify feasible research methods to answer these questions and to identify where the project fits on the Translational Research Continuum.

The Framework has been developed for health professionals who may have limited research experience, but may also be useful for more experienced researchers as a structured reminder of the range of issues that will be taken into account in the screening and assessment of proposals.

### Research and Implementation Partners

Host Organisations must identify and engage relevant partners to support effective delivery of the research project and implementation of the outcomes in NSW.

Partners may include:

- Consumers, patients, or other 'end users'
- Researchers from universities and medical research institutes

- NSW Health Pillars (Agency for Clinical Innovation, Clinical Excellence Commission, Health Education and Training Institute, Bureau of Health Information)
- Statewide Services (HealthShare NSW, eHealth NSW, Health Infrastructure)
- NSW Ministry of Health Branches
- other LHDs, SHNs, NSW Ambulance, and NSW Health Pathology
- Aboriginal Community Controlled Health Services
- Primary Healthcare Networks
- Health Research and Translation Centres
- Clinical networks
- Non-government organisations.

Where the research is likely to impact any of these groups or their policy, the appropriate partner should be included in the project Steering Committee.

Key policy and practice partners must be included throughout the following stages:

- Co-production of the research question and design
- Development of an implementation plan, which is agreed in the research design stage
- Reviewing research findings and assessing readiness for implementation
- Implementation handover and delivery of the implementation plan if research findings are supportive of implementation
- Implementation of the research findings where appropriate
- Monitoring and evaluating implementation process to support sustainability.

The Chief Executives of the Host Organisation is required to certify the implementation plan at the Expression of Interest and Full Application stages

Chief Executives or Executive Directors of partner organisations are also required to sign off on the implementation plan in the Full Application stage.

## Priority Populations

All TRGS projects must consider the following:

- Differences in health need, service utilisation, or research participation between different priority populations (e.g. Aboriginal people,

culturally and linguistically diverse (CALD) communities and low socioeconomic groups) and the broader population.

- Design, method and intervention is at least as effective for priority population groups when compared to the broader population.
- An Aboriginal Health Impact Statement, a resource that systematically considers the needs of priority population groups, is required for all projects at Full Application stage.
- The right partners (e.g. Aboriginal Community Controlled Health Services) are on board to ensure the research approach is appropriate for different population groups, to assist with engaging patients from priority populations effectively and to assist with translating research findings.
- Aboriginal people should be included in the research investigator team if the research involves Aboriginal specific settings (e.g. Aboriginal Medical Services), a focus on Aboriginal people or includes specific design elements (e.g. data collection, intervention elements) relating to Aboriginal people.

Guidance on strengthening TRGS projects that have an identified focus on Aboriginal health is available at the [Educational Resources webpage](#).

## Value Based Care

In line with NSW Health's long-term strategic priority to move from a focus on outputs to a focus on outcomes, TRGS Round 5 applicants are encouraged to demonstrate how their proposals will support the delivery of value based healthcare.

Value based healthcare is an approach for organising health systems to improve health outcomes and experiences for patients and maximise value for the system.

All TRGS applications are encouraged to demonstrate how their projects will lead to improvements across the four domains of value:

- health outcomes that matter to patients
- the experience of receiving care
- the experience of providing care
- the effectiveness and efficiency of care.

A rigorous approach to measurement and evaluation is fundamental to value based healthcare. Measurement helps to inform how care is delivered, how we prioritise

resources and to determine whether we are achieving the desired outcomes. TRGS applications should describe:

- how they intend to measure and evaluate their impact on outcomes and experiences
- how new models of care or processes can be sustainably scaled and embedded over time as business as usual across the system.

## Resources

Information on NSW Health's approach to value can be found at: <https://www.health.nsw.gov.au/Value>

The NSW Value Based Healthcare Framework supports communication and shared understanding and shows how key strategic priorities and enablers align to support value:

<http://internal.health.nsw.gov.au/vbhc/vbhc-framework.html>

The NSW Health intranet has more detail on current statewide initiatives supporting the move towards value based healthcare:

<http://internal.health.nsw.gov.au/vbhc>

Measurement and evaluation, including Patient Reported Measures (PRMs), is essential to value based healthcare. More information on measuring outcomes can be found at:

<http://internal.health.nsw.gov.au/vbhc/measurement.html>.

Further information and advice can be provided by the NSW Ministry of Health Value Based Healthcare team at: [MOH-VBHC@health.nsw.gov.au](mailto:MOH-VBHC@health.nsw.gov.au).

## Digital and Information Technology Interventions

If an applicant wishes to submit an Expression of Interest that includes interventions for technologies that may require NSW Health system integration, they must consult as early as possible with their local IT service and eHealth NSW for advice on solution architecture and integration costing. These technologies include:

- Web-based interventions
- Telehealth
- Apps
- Remote monitoring
- Interventions delivered via smart phone.

It is beneficial for applicants to have a clear understanding of any need to access data held by

NSW Health and to incorporate relevant privacy and security processes. Please engage early with eHealth NSW, particularly if seeking data from outside your host organisation.

For all TRGS enquiries for eHealth NSW, contact [Wilson.Yeung@health.nsw.gov.au](mailto:Wilson.Yeung@health.nsw.gov.au)

## Intellectual Property

Intellectual property (IP) arrangements should be agreed between the host and partner organisations, according to local policy. IP arrangements must cover both background IP and IP that is developed during the project. The arrangements should be detailed in the application, if applicable.

## PhD Students

NSW Health encourages TRGS applicants to consider including funding for a PhD Student in the application. The PhD student must be supervised by an Academic Supervisor at a partnering University.

NSW Health will provide \$20,000 per annum for three to four years as a contribution to a stipend for the PhD student and the partnering University must provide of \$20,000 per annum to match NSW Health's contribution, bringing the PhD student's total stipend to \$40,000 per annum.

Applications should include NSW Health's financial contribution in the requested budget for the project and ensure the budget does not exceed \$1 million.

Further details regarding the PhD student will be required if the application progresses to the Full Application stage. Recruitment of the PhD candidate is not required until after the outcome of the Full Application is known.

## Educational Resources

Educational resources providing guidance on designing a research study, analysing research data, translating research findings and commercializing research ideas are available at the [Educational Resources webpage](#).

Frequently asked questions (FAQs) about TRGS processes and requirements are available at the [TRGS webpage](#).

## 5. Eligibility Criteria

1. The project must be conducted in NSW, within a Local Health District (LHD), Specialty Health Network (SHN), NSW Ambulance, or NSW Health Pathology.

2. The Host Organisation for the project must be a LHD, SHN, NSW Ambulance or NSW Health Pathology (see Host Organisation criteria below).
3. The project must directly align with the strategic plan of the Host Organisation, Premier's priorities, State priorities, or TRGS priorities.
4. The project cannot be specific to one site only, unless justified because it is a proof of concept study. Projects involving collaborations across multiple sites within an LHD, or between one or more LHD/SHN or NSW Ambulance/NSW Health Pathology will generally be prioritised.
5. Host Organisations must provide financial and in-kind support for the research and translation activities.
6. Host Organisations must conduct a review of the applications, ensuring they meet the intent of the Scheme before submission.
7. The Chief Executive of the Host Organisation must certify at both the EOI and Full Application stages that and the project findings will be implemented if the results are supportive of implementation. Partner organisations must co-sign the Full Application.

## Out of scope

This grant scheme is targeted at supporting practice-based research projects. The types of research listed below are out of scope for this grants scheme and will not be funded.

1. Basic science research
2. Research occurring only in a primary health care network
3. Commercially-sponsored clinical trials
4. Descriptive research – research that is 'idea generation' or 'monitoring' as described in the Translational Research Framework
5. Projects with a primary focus on cancer - funding in this area is provided by the Cancer Institute NSW and includes the Translational Program Grants
6. Projects where the host LHD is not responsible for implementation of the research findings.

## 6. Selection Criteria

All Expressions of Interests and Full Applications that meet the eligibility criteria will be assessed against the following selection criteria:

Selection criteria	Section of EOI Application Form
Evidence base and research question	C
Research design, methods and proposed intervention	D
New evidence/health impact evidence	E
Team, partners and timeframe	F
Research implementation	G
Budget	H

All technical terms must be explicitly defined, methods clearly explained, and thorough background for the research proposal should be provided.

### 1. Evidence base and research questions

The following criteria will be considered by reviewers:

- 1.1 Clear definition of the problem being addressed
- 1.2 Relevant and succinct research aims, including a clear statement of the research question(s)
- 1.3 The existing evidence informing the research proposal, including whether the intervention has been evaluated or tested/validated before, a description of preliminary findings and how they will be built on through the proposed intervention
- 1.4 Alignment of the research question to the Host Organisation's health service delivery/outcomes or population health and wellbeing activities.

### 2. Research design and methods

The following criteria will be considered by reviewers:

- 2.1 Design aligned with research question(s)
- 2.2 Clear identification and appropriate use of study type
- 2.3 Note: TRGS can include randomised control trials, pragmatic clinical trials, implementation science, translational research, health services research, population health research, and proof of concept studies
- 2.4 Patient/provider population and selection

- 2.5 Appropriate comparison/reference/ control group(s) and/or control site(s)
- 2.6 Methods of sampling and allocation of study participants
- 2.7 Baseline, intervention and follow-up period(s)
- 2.8 Details of the proposed intervention or other activity being tested, including a clear description of the nature of the intervention, intended effects, frequency, evidence of acceptability to patients and clinicians, integration with current practice, and resources required for the intervention
- 2.9 Primary and secondary outcomes(s) and how they are measured
- 2.10 Data sources or qualitative tools/instruments
- 2.11 Effect size, sample size, calculation details
- 2.12 Statistical analysis, data linkage plan
- 2.13 Costing component or economic evaluation details

### 3. Evidence of health impact

The following criteria will be considered by reviewers:

- 3.1 Potential to generate new and relevant evidence for policy and/or practice
- 3.2 Likelihood and extent of impact the results of the study on disease prevention, patient care or health service delivery
- 3.3 Intervention is novel or is putting known evidence into practice where this is not occurring
- 3.4 Potential for further research activity and funding
- 3.5 Alignment with local and/or State health plans and priorities.

### 4. Team, Partners and Timeframe

The following criteria will be considered by reviewers:

- 4.1 Strength, experience and diversity of the research and implementation team
- 4.2 Key stakeholders involved in research design and implementation
- 4.3 Strong project governance including evidence of appropriate partnerships
- 4.4 Consultation undertaken in the development of the proposal and clear links to the

stakeholders that will likely implement the outcomes from the research

- 4.5 Ability of research team to carry out the proposed project in the timeframe.

### 5. Research Implementation

The following criteria will be considered by reviewers:

- 5.1 Extent to which the project supports implementation of positive research findings into policy and practice, and supports funding decisions
- 5.2 Quality, completeness and feasibility of the post-research implementation plan, for example cost, acceptability, safety and compatibility with existing infrastructure
- 5.3 Generalisability and applicability of study findings to other districts or organisations, and/or across NSW
- 5.4 Ability of the research findings to integrate with existing state/regional initiatives
- 5.5 Considerations around equity of access in implementation to ensure the intervention will not contribute to an increased disparity in health outcomes, including Aboriginal people and Torres Strait Islanders, CALD communities, and rural and regional populations
- 5.6 Consideration of sustainability and scalability, including a costing plan, value for money and long-term funding source
- 5.7 Identification of roles and responsibilities for implementation handover and implementation activities
- 5.8 Communication plan including dissemination and publication of findings.

### 6. Budget

The review process will consider the extent to which the requested budget is reasonable and well-justified.

The requested funds should include all anticipated TRGS funding required for the research project, including project management, external expertise required, and activities to support translation. For salaries, please specify the salary level, maximum on-costs and FTE.

## 7. Application and selection process

The application and selection process includes two stages:

- Stage 1: Expression of Interest
- Stage 2: Full Application

### Key dates

Stage 1 – Expression of Interest	Date
Call for Expressions of Interest	27 Feb 2020
EOIs submitted to TRGS coordinator	9 June 2020
Internal selection process, liaison with pillars and partners	9 June – 1 July
Chief Executive sign off period	1 July – 7 July
<b>EOIs submitted to NSW Ministry of Health</b>	<b>8 July 2020</b>
EOI review period	July – August 2020

Stage 2 – Full Application	Date
Invitation to progress to Full Application, feedback provided	11 September 2020
Full application prepared and feedback addressed	September – October 2020
Host and partner organisation sign off period	9 – 16 October 2020
<b>Full applications submitted to NSW Ministry of Health</b>	<b>20 October 2020</b>
Assessment by Expert Review Panel	Nov 2020 – Feb 2021
Applicants notified of outcome	February 2021

### Stage 1: Expression of Interest (EOI)

#### Development and Submission Process

**In Round 5, Expressions of Interest will be capped to a maximum of five per Host Organisation.**

Expressions of Interest must be reviewed and certified by the Host Organisation. Each Host Organisation has its own review processes to ensure that applications meet the intent and address the selection criteria for TRGS.

This process allows for Host Organisations to select the applications they will submit to the Scheme, and to work with applicants to improve the quality of submitted Expressions of Interest.

Applicants are encouraged to consult with the Research Director and TRGS Coordinator of their Host Organisation and to partner with other LHDs, universities and medical research institutes well in advance of drafting an Expression of Interest.

Contact details for TRGS coordinators are listed below.

Name	Email address	Host Organisation
Dr Rosemary Carney	<a href="mailto:rosemary.carney@health.nsw.gov.au">rosemary.carney@health.nsw.gov.au</a>	NSW Ambulance
Katherine Bolton	<a href="mailto:Katherine.Bolton@health.nsw.gov.au">Katherine.Bolton@health.nsw.gov.au</a>	CCLHD
Kristy Morris	<a href="mailto:Kristy.Morris@health.nsw.gov.au">Kristy.Morris@health.nsw.gov.au</a>	HNELHD
Dr Mark Bassett	<a href="mailto:Mark.Bassett@health.nsw.gov.au">Mark.Bassett@health.nsw.gov.au</a>	ISLHD
Cc Leigh Lees	<a href="mailto:Leigh.Lees@health.nsw.gov.au">Leigh.Lees@health.nsw.gov.au</a>	
Dr Julia Bowman	<a href="mailto:Julia.Bowman@health.nsw.gov.au">Julia.Bowman@health.nsw.gov.au</a>	J&FMHN
Michelle Eason	<a href="mailto:michelle.eason@health.nsw.gov.au">michelle.eason@health.nsw.gov.au</a>	
Nicole Raschke	<a href="mailto:Nicole.Raschke@health.nsw.gov.au">Nicole.Raschke@health.nsw.gov.au</a>	MNCLHD
Marietta Coutinho	<a href="mailto:Marietta.Coutinho@health.nsw.gov.au">Marietta.Coutinho@health.nsw.gov.au</a>	NBMLHD
Dr Alexandre Stephens	<a href="mailto:Alexandre.Stephens@health.nsw.gov.au">Alexandre.Stephens@health.nsw.gov.au</a>	NNSWLHD
Rebeka Freckleton	<a href="mailto:rebeka.freckleton@health.nsw.gov.au">rebeka.freckleton@health.nsw.gov.au</a>	NSLHD
Bente Talseth-Palmer	<a href="mailto:NSWPATH-Research@health.nsw.gov.au">NSWPATH-Research@health.nsw.gov.au</a> <a href="mailto:Bente.TalsethPalmer@health.nsw.gov.au">Bente.TalsethPalmer@health.nsw.gov.au</a>	NSW Health Pathology
Prof Chris Cowell	<a href="mailto:chris.cowell@health.nsw.gov.au">chris.cowell@health.nsw.gov.au</a>	SCHN
Prof Craig Munns	<a href="mailto:craig.munns@health.nsw.gov.au">craig.munns@health.nsw.gov.au</a>	
Louise Fazekas (EA to Cowell)	<a href="mailto:louise.fazekas@health.nsw.gov.au">louise.fazekas@health.nsw.gov.au</a>	
A/Prof Christopher White	<a href="mailto:Christopher.White@health.nsw.gov.au">Christopher.White@health.nsw.gov.au</a>	SESLHD
Leah McManus	<a href="mailto:Leah.McManus@health.nsw.gov.au">Leah.McManus@health.nsw.gov.au</a>	
Dot Hughes	<a href="mailto:Dot.hughes@health.nsw.gov.au">Dot.hughes@health.nsw.gov.au</a>	SNSWLHD
A/Prof Philip Cunningham	<a href="mailto:philip.cunningham@svha.org.au">philip.cunningham@svha.org.au</a>	SVHN
Rachel Goldrick	<a href="mailto:SWSLHD-ResearchDirectorate@health.nsw.gov.au">SWSLHD-ResearchDirectorate@health.nsw.gov.au</a>	SWSLHD

Imogen Baker	<a href="mailto:Imogen.Baker@health.nsw.gov.au">Imogen.Baker@health.nsw.gov.au</a>	SLHD
Julaine Allan	<a href="mailto:Julaine.Allan@health.nsw.gov.au">Julaine.Allan@health.nsw.gov.au</a>	WNSWLHD
Mark Smith	<a href="mailto:MarkT.Smith@health.nsw.gov.au">MarkT.Smith@health.nsw.gov.au</a>	WSLHD
Wendy Gleeson	<a href="mailto:Wendy.Gleeson@health.nsw.gov.au">Wendy.Gleeson@health.nsw.gov.au</a>	FWLHD
Barbara Taylor	<a href="mailto:Barbara.Taylor@health.nsw.gov.au">Barbara.Taylor@health.nsw.gov.au</a>	MLHD

## Review Process

All Expressions of Interests will be reviewed against both eligibility and selection criteria by the TRGS EOI Review Panel, Chaired by the Chief Health Officer and Deputy Secretary Population and Public Health, NSW Ministry of Health. Expressions of Interest must meet all eligibility criteria. The EOI Review Panel may contact applicants in order to clarify or confirm information contained in the Expression of Interest.

The NSW Ministry of Health will engage with a range of policy and health service stakeholders on specific applications throughout the review process. Advice may be sought from the EOI Subcommittee, NSW Health Pillars, relevant policy and program areas within the NSW Ministry of Health and other experts at any stage of the assessment process.

All applicants will be informed as to whether they have been selected to progress to Full Application stage. The EOI Review Panel's decision is final. General feedback on Expressions of Interest will be made available.

## Stage 2: Full Application

### Development and Submission Process

Following the review of Expressions of Interest, applicants will be advised of their success in progressing to the Full Application stage. Successful applicants will be provided with detailed feedback on their application.

The feedback process may involve further engagement between the NSW Ministry of Health and applicants, intended to enhance the quality of research proposals, ensure that proposals are consistent with the objectives of the TRGS, capitalise on potential synergies between projects and build research and translation capability.

As a key part of the feedback process, advice may be provided on potential partners and specialist expertise to improve the rigor of the research proposal or implementation activities. The NSW Ministry of Health

may also facilitate engagement with relevant collaborators to further develop the proposal.

Where applicants from two or more LHDs submit similar proposals, and there may be benefits of working together, the EOI Review Panel may recommend a meeting of relevant applicants.

Development of the Full Application is the responsibility of the research team. Participation in Stage 2 of the process is not a guarantee of funding.

The TRGS coordinator should submit the Full Application to the NSW Ministry of Health on behalf of the applicant. The Chief Executive of the Host Organisation must approve and sign the Full Application prior to submission. Partner organisations must co-sign the Full Application. Research coordinators at these partner sites should be provided with information around the proposed research activity as early as possible to allow them to assess impact of the research on their services and staffing, and to seek support from their Chief Executive.

### Review Process

All Full Applications will be reviewed against the selection criteria by the TRGS Expert Review Panel, chaired by the Chief Health Officer and Deputy Secretary Population and Public Health, NSW Ministry of Health. The Expert Review Panel may contact applicants in order to clarify or confirm information in the application.

All applicants and their host organisations will be informed as to whether they have been awarded funding. This decision is final and may not be appealed. Successful projects may be requested to make adjustments to the project based on feedback from the Expert Review Panel.

The NSW Ministry of Health will make contact with the Host Organisation for each successful applicant to establish budget supplementation letters between the Host Organisation and NSW Ministry of Health. Funds may not be drawn down until the budget supplementation letter is reviewed and certified by the Chief Executive of the Host Organisation. TRGS Coordinators will be responsible for submitting the signed budget supplementation letter to the NSW Ministry of Health.

## 8. Funding for Successful Projects

### Details of funding

Grants ranging from \$50,000 to \$1 million will be provided to successful applicants for projects of a two year duration. Funding is provided over a 2.5 year

period, including an initial 6 month establishment phase to allow time for recruitment and ethics approvals. An indicative funding split over the 2.5 years is as follows. The proportion of funding requested for each tranche is flexible with appropriate justification.

face-to-face meetings for which all parties will be required to make themselves available. Feedback received will inform the future direction of the Scheme.

Funding tranche	Timing of payment	Approximate proportion of total funding
Initial payment for establishment phase	Feb 2021	20%
Second payment	July 2021	40%
Third payment	July 2022	40%

## Funding conditions and exclusions

Grant funds must be quarantined for the purposes of the specified research project through a dedicated cost centre in the general fund. TRGS funding may be used for costs associated with the research project and translation activities, but cannot be directed towards research administration costs, capital works, general maintenance costs, telephone/ communication systems, basic office equipment such as desks and chairs, rent and the cost of utilities.

Funding is conditional on the Host Organisation and Research Team remaining compliant with all eligibility criteria for the duration of the funding period for TRGS Round 5. Recipients must meet all reporting and evaluation requirements set out in the budget supplementation letter.

The NSW Ministry of Health will not provide additional funding beyond the amount specified in the budget supplementation letter.

## 9. Reporting Requirements

Successful applicants must provide scheduled financial acquittals and forecasts, and progress reports on research and implementation activities as set out in the budget supplementation letter.

Funding for the subsequent year will be dependent on these reports showing satisfactory progress. Should the project cease for any reason, remaining project funds will need to be returned to the NSW Ministry of Health.

## 10. TRGS Implementation Assessment

TRGS is subject to ongoing assessment to ensure it is meeting its objectives. This includes evaluation and analysis of the findings and implementation of all completed projects in collaboration with the Host Organisations and grant recipients. This may include