Medical Research Future Fund – Cardiovascular Health Mission: 2019 Cardiovascular Health Grant Opportunity Guidelines

The Cardiovascular Health Mission (the Mission) provides \$220 million over ten years from 2019-20 for research to drive transformative improvements in cardiovascular health and stroke for all Australians. This includes:

- innovative, high quality, collaborative research that focuses on prevention, early-intervention, treatment and survivorship of heart disease and stroke across the life span
- effective translation of research into health policy and/or practice
- fostering and building of research capacity and workforce capability
- providing opportunities to expand and improve collaborations between research teams
- active involvement of people with lived experience of heart disease and stroke in all aspects of the research pathway as part of genuine codesign and co-delivery
- leveraging of collaborations between research teams, policy makers, healthcare funders and the health delivery sector (e.g. education, community, industry and/or healthcare).

Total Available: \$12 million dollars available over 3 years Min request \$1M, Max Request \$3M* Project duration – up to 3 years from 2019-20-to 2022-23 Project activity commences June 2020, must end June 2023

*Funding will be awarded to the **top ranked application** in each of the three priority areas. The remaining funding be awarded in rank order to the best ranked applications from across all priority areas.

The objectives of this grant opportunity are to:

support **multidisciplinary and collaborative approaches** in three priority areas to drive significant improvements in cardiovascular health and stroke outcomes such as disability, mortality and morbidity.

The three priority areas are:

Although your program may cross more than one priority, you must nominate one priority that is most relevant to your project

Priority 1: Improving prevention of heart disease and stroke

The expected outcome of the research funded under this priority is to

improve knowledge and its translation into practice in order to *reduce the number of Australians suffering from heart disease and stroke*. By doing so, premature disability, mortality and morbidity would be prevented and survival and quality of life would be improved.

Research undertaken in this priority area should primarily involve:

- \checkmark innovative approaches to detect subclinical disease and risk
- ✓ avoiding life-threatening events through novel and personalised preventative strategies
- ✓ reducing premature disability, mortality and morbidity
- ✓ improving access to best practice preventive care for people at high risk.

Need Support?

The UoM MRFF Initiatives team is here to help you with templates, advice and review (strategic alignment and eligibility), budget checks and letters of support.

For support email enquiries-mrff@unimelb.edu.au

Key dates and submission information	
Opening date	13 th December 2019
Submit Notice of Intent	ASAP
	https://ric-
	noticeofintent.app.uni
	melb.edu.au/apex/f?p
	<u>=ric_noi:noi_form</u>
Submit Draft Grant Proposal	10am, Mon 20 Jan 2020
for strategic review	Early submissions
	encouraged
Minimum Data Due on RGMS	5pm Wed 29th Jan 2020
Submit Draft application for	(ACT time)
compliance and eligibility	
check	
Submit Authority to Submit	5pm, Mon 10 th Feb 2020
INTERNAL-FINAL SUBMISSION	5pm, Mon 10 th Feb 2020
TO RIC	ACT Time
Final Application submitted	5pm, Wed 12 Feb 2020
to NHMRC	
Number of applications	CI (A-J) can only submit
	one application in this
Instructions and Submission	opportunity Instructions:
portal: NHMRC	https://research.unime
portai. Innine	lb.edu.au/support/fun
	ding/mrff/mrff-2019-
	cardiovascular-health
	Portal:
	https://www.rgms.n
	hmrc.gov.au
Submit documents to RIC via:	
mrff@unimelb.edu.au	
mrff@unimelh.edu.au	

Priority 2: Improved survival outcomes after an acute heart or stroke event through a focus on treatment

The expected outcome of the research funded under this priority is to improve knowledge and its translation into practice in order to *improve survival and function of patients suffering acute cardiovascular and stroke events*.

Research undertaken in this priority area should primarily involve:

- ✓ innovative approaches to improve treatment of acute events
- ✓ improving outcomes from life-threatening events through novel and personalised treatment strategies, for example devices, pharmacotherapies, delivery models and systems
- ✓ reducing premature disability, mortality and morbidity
- ✓ improving access to best practice treatment options for heart attack, stroke, cardiogenic shock, and cardiac arrest.

Priority 3: Improving secondary prevention and survivorship after a cardiovascular event

The expected outcome of the research funded under this priority it to improve knowledge and its translation into practice in order to *enhance recovery and survivorship* after a cardiovascular or stroke event.

Research undertaken in this priority area should primarily involve:

- \checkmark innovative approaches to support effective, long term secondary prevention
- ✓ improving outcomes from cardiovascular and/or stroke events through novel and personalised secondary prevention strategies to maximise post-event wellness and minimise recurrent and repeat hospitalisation
- \checkmark reducing premature disability, mortality and morbidity
- ✓ improving access to effective strategies (for example rehabilitation) and/or improvements in current treatments.

Additionally encouraged:

- ✓ Partnerships* and co-investment are encouraged in order to maximize impact of investment, reduce duplication of administration and activities across agencies/sites/communities
 - *Partners include with organizations that can affect health, health policy and health care delivery such as; federal, state, territory or local government in portfolios affecting health (including economic policy, urban planning, education or transport); private sector providers or hospitals, non- government organsiations and charities, community and consumer groups, professional groups and health care providers.
- ✓ Leveraging existing research infrastructure to reduce duplication including NCRIS projects, Translating Health Discovery project and Population Health Research Network (PHRN) project

Am I Eligible?

Yes, if you are/have:

- ✓ Applying through the University of Melbourne (a NHMRC approved administering organization)
- ✓ Submitted minimum data through RGMS
- ✓ CIs (CIA-CIJ) have not submitted more than 1 application in the grant opportunity
- Are not duplicating research funded by MRFF, NHMRC or ARC (and other organizations) and the proposal is not under consideration or on the merit list of the MRFF International Clinical Trial program
- ✓ CIA must be an Australian citizen or PR in Australia

There are additional eligibility requirements and you should consult section 3 of the Guidelines to fully understand if you meet all requirements

TO BE COMPETITIVE your research proposal and application should:

- Address the <u>scheme objectives</u> and all the <u>objectives/outcomes</u> relevant for your research priority. Directly speak to each objective/outcome in your application. Align budget requests, team capabilities with the ability to deliver on these objectives
- Score highly on ALL Assessment Criteria (section 5 in the guidelines). Recommend you cut and paste the criteria into your project plan

What do I need to apply?

- 1. Submit a Notice of Intent: <u>https://ric-noticeofintent.app.unimelb.edu.au/apex/f?p=ric_noi:noi_form</u>
- 2. Go to URL: UOM WEBSITE or Grant Connect to obtain the documents for the Grant opportunity
- 3. Review **full guidelines** and supporting documents for the relevant Grant Opportunity
 - i. Proposal Templates
 - ii. Assessment Criteria
 - iii. Rating scale and Assessment Criteria Scoring Matrix
 - iv. any addendums
- 4. Complete the Grant application in accordance with guidelines (see section 6).
 - a. Commence a new application in the NHMRC Grants Management System: RGMS. Complete all components of Part A and B
 - b. Develop your proposal using the <u>UoM MRFF CVM 2019 Cardiovascular Health Grant Proposal Template</u> according to the formatting requirements (page 25)
 - ✓ HIGHLY RECOMMEND you consult guidelines Section 5 for point by point description WHAT is required under each heading and HOW each section is assessed This offers significantly more information than the template.
 - ✓ TIP- cut and paste the Assessment Criteria in Section 5 directly into your proposal and address each point.
 - ✓ Section 6.4 provides additional information on the components of the proposal, including completing the Risk Assessment
 - c. Complete minimum data by 5pm, Wed 29 Jan 2020
 - i. General Application Information
 - ii. Administering Institution
 - iii. Application Title (Applications proposing clinical research including clinical trials, should ensure the Application Title is in the PICO format (i.e. the title includes information on the Participants, Intervention and Comparison groups, and the Outcomes of the research).
 - iv. Aboriginal/Torres Strait Islander Research (yes/no)
 - v. Synopsis (see section 6.4)

Plain English Summary that can be used to describe your project to the general public (500 character limit, including spaces and line breaks).

- vi. A-RC: Research Classification
- 5. Develop **Proposed budget** that is **justified**, **eligible and value for money**: See guidelines section 4 what IS eligible and What is NOT eligible. This will go into Part B of the application form in RGMS.
- 6. Complete all other components of the application and complete the internal submission by Mon 3 Feb 2020 5pm

How is the grant assessed?

The NHMRC will review all applications against eligibility criteria. Then a peer review panel of experts assesses eligible applications against the technical assessment criteria (weighted) and against the non-technical criterion value and risk (non-weighted).

If eligible, the application will be assessed on its merits, based on:

- ✓ how well it meets the assessment criteria (you must score well on ALL criteria, and aim to score 4 or more on Criterion 1,2,3 and Good or excellent on the Overall value and Risk criteria). Note that funding is based on top rankings.
- ✓ whether it provides value for money

Applications will be assessed by peer review by independent experts in the field