

TRANSLATIONAL RESEARCH GRANTS SCHEME GUIDELINES

September 2026

1. INTRODUCTION

The HCF Research Foundation was established in 2000 by The Hospitals Contribution Fund of Australia Limited (HCF). The aim of the HCF Research Foundation is to fund health and medical research for the benefit of HCF members and all Australians, with a focus on health services research.

The HCF Research Foundation aims to increase the evidence base in the delivery of health care services and support the translation and uptake of effective health care models and services. The HCF Research Foundation strives to support research that will ultimately improve the delivery of health services for our members and all Australians.

2. TRANSLATIONAL RESEARCH GRANTS

The HCF Research Foundation Translational Research Grants (TRG) scheme is focused on responding to health issues identified within health care provider communities, and the **translation of research findings into practice** by health service delivery stakeholders. Through this scheme, the Foundation aims to facilitate the **implementation of cost-effective evidence-based innovation into health care delivery** to improve outcomes and the experience of patients, carers and health care workers.

The HCF Research Foundation notes the existence of a wealth of health services research providing a compelling evidence-base for improved health care service delivery within Australia, including research funded by the Foundation (see <https://www.hcf.com.au/about-us/hcf-foundation/hcf-foundation-grants> for details).

Funding through the TRG scheme is available to health care providers to implement and evaluate evidence-based innovation into practice to improve outcomes. For the 2026 TRG round there are three streams available for funding, and applicants must state which of these streams their Expression of Interest (EOI) and application is addressing.

The 2026 TRG round is calling for applications specifically addressing either:

- (1) **care navigation.** This topic calls for implementation of models that support patients accessing the appropriate care for their needs. This can include (but is not limited to) transitions of care across provider settings, entire disease journeys, accessing appropriate interventions while on waitlists for more intensive treatments, and supported discharge from acute facilities.
- (2) **optimising health delivery settings.** This topic includes models of care that relieve the burden on high acuity facilities and provide care in alternative, 'right' settings where safe to do so. This topic is not restricted to shifting hospital to home-based care, and can include (but is not limited to) transitions such as from hospital to doctors rooms, and inpatient to outpatient settings. Projects would be expected to make a case for clinical safety and efficacy alongside economic and other efficiencies.

OR

- (3) **implementation of the outcomes from previously funded HCF RF research projects into practice.** Previously funded HCF RF Research projects are listed here: <https://www.hcf.com.au/about-hcf/hcf-foundation/hcf-foundation-grants>. Please note there is no requirement that applications under this funding theme include previous funding recipients as part of the research and implementation team.

Successful applications will incorporate both translation research (i.e. implementation research, examining how to more effectively apply best practice models) and evaluation of the outcomes of the changes that are implemented. **Significant support from health care providers and commercial partners for these projects is expected, in the form of cash support and/or in-kind contributions.**

There is a limited amount of funding available each year. Applicants are advised that while there is no cap on the amount of funding that they can apply for, applicants must clearly articulate the value of their project, and costing must be realistic.

The TRG scheme has a two-stage application process. The first stage requires applicants to submit an EOI, with the second stage being a full application. The Foundation will conduct an initial review of EOIs, with a selection invited to prepare and submit full applications. An email will be sent to the project lead of shortlisted EOI applications requesting the submission of a full application on the date applications open.

3. NOTABLE CHANGES FOR THE 2026 TRG ROUND

- Three streams of funding are available, as detailed in section 2. All topics stated in section 2 require EOIs and applications that specifically address the nominated topic.
- All applications must now be submitted through the HCF Research Foundation online grant management portal available through this website: <https://hcf.service-now.com/csp>. Further detail on the grant management portal is provided below in Section 7 - Online Grant Management Portal.
- One new question has been added to the full application form. While this question does not need to be addressed in the EOI form, applicants will need to consider responses to this question from the earliest stages of project inception and design.
 - Socially disadvantaged, geographically remote and other minority groups are frequently under-represented in health research despite having some of the highest health care seeking needs. The HCF Research Foundation is now asking applicants to provide details of how their sample will be representative of the diversity of the Australian population. Responses should consider the cultural, linguistic, geographic and socio-economic diversity of research participants.
- We have provided further clarification of acceptable costs associated with the involvement of consumers and community in trials. Providing honoraria to consumers/community members as remuneration for time committed to trials is encouraged and other relevant consumer engagement costs for projects will be considered.

4. ELIGIBILITY

In the 2026 TRG round, health care providers can apply for funding to implement evidence-based change into practice and evaluate the results of that change on patient outcomes, costs and other relevant metrics. Applicant health care providers must be able to self-identify areas where performance, relative to peers is sub-optimal (i.e. using benchmarking data) and propose an appropriate solution to improve safety and quality, effectiveness and patient outcomes.

In order to be eligible for funding within the TRG scheme, research projects must address both implementation (research into the effective implementation of the new model), and evaluation (the outcomes of the implemented approach).

Applications must provide an implementation plan for their specific context that includes research into the effectiveness of the implementation plan. Applications must also describe the intended approach to evaluate the outcomes of the implemented approach.

As the intent of this scheme is to catalyse permanent change, applications must provide a plan for sustained/permanent implementation (provided the outcomes evaluation is positive).

Health care providers should note that the application and review process would be conducted with appropriate confidentiality by HCF Research Foundation, and that HCF Research Foundation grant processes are independent of HCF.

A. KEY DATES

The 2026 round of the HCF Translational Research Grants scheme will proceed according to the below timetable. The timetable is subject to change without notice, with the exception of the closing date for EOIs. Please note that in order to complete a full application, an EOI must be submitted.

PHASE	DATE
EXPRESSIONS OF INTEREST OPEN	September 2026
EXPRESSIONS OF INTEREST DUE	21 October 2026 (5pm AEDT)
FIRST REVIEW PERIOD	October - November 2026
APPLICATIONS OPEN	9 November 2026
APPLICATIONS CLOSE	1 February 2027 (5pm AEDT)
SECOND REVIEW PERIOD	February - March 2027
BOARD DECISION	April 2027
OUTCOMES COMMUNICATED TO APPLICANTS	April 2027

FUNDING START DATE

From 1 July 2027

The funding start date is flexible and successful applicants would be able to choose a start date within 12 months of 1 July 2027. Nevertheless, applicants must be able to demonstrate in their application that their project is feasible in these conditions.

B. ADMINISTERING INSTITUTION

A single reputable research institution must be nominated as the Administering Institution. Typically, these are a university, hospital or health district – if your proposed Administering Institution is not one of the above, please contact us PRIOR to submitting an application to confirm eligibility as an Administering Institution. The Administering Institution must have in place policies and procedures for the management of research funds, management of intellectual property, and for the conduct of research consistent with the Australian Code for the Responsible Conduct of Research.

The Administering Institution must review the Funding Agreement (<https://www.hcf.com.au/about-us/hcf-foundation/hcf-foundation-applications>) prior to submission of any application and agree to signing the terms of the agreement should funding be awarded.

There is no limit on the number of EOIs or applications per Administering Institution.

C. PROJECT LEAD AND INVESTIGATOR TEAM

Each application must have a single nominated project lead who is the primary individual responsible for delivering the program of research should it be funded. The same individual cannot be named as project lead on more than three EOIs (if >3 are submitted, only the first three will be considered). There is no limit on the number of applications an individual may be listed as a project lead and/or co-investigator.

Collectively, the team must show that they are ideally positioned and have the requisite skills to implement and evaluate the proposed project within their institution.

Awarded grants are generally not transferable to an alternative project lead, nor are they transferable to an alternative administering institution based outside of Australia.

A maximum of 5 Co-Investigators can be included in any application. Co-Investigators are those key individuals involved in the research application whose participation is required for successful completion of the project. Associate Investigators may also be listed in the application. It is appropriate for individuals with minor supporting roles and input in the research program to be listed as Associate Investigators. The roles of each Co-Investigator and Associate Investigator should be adequately described and justified.

HCF Research Foundation acknowledges that no two research careers are the same, therefore in determining track record, reviewers are instructed to take relative to opportunity considerations into account (within the past 10 years) where information is provided by applicants. It is at the applicant's discretion whether to provide information on relative to opportunity considerations.

Relative to opportunity considerations that are taken into account when assessing a track record are divided into two categories: career disruption and other considerations. Career disruptions are considered separately below. Other considerations that may be considered during peer review include (but are not limited to):

- Research role(s) and responsibilities, including amount of time spent as an active researcher
- Available resources and facilities (including situations where research is conducted in remote or isolated communities)
- Other professional responsibilities, such as clinical, administrative or teaching workload, and time working in other (non-academic research) sectors.

Career disruptions are prolonged interruptions to the ability of the investigator to work in research, due to pregnancy, illness/injury and/or career responsibilities. It is expected that any career disruption would need to result in an absence of work for 90 calendar days or more (this may be continuous or cumulative due to a reduced %FTE).

D. BUDGETS

All items in the requested budget must be directly related to the project and fully justified. Failure to sufficiently justify items may result in a reduced offer of funding. Please note that funding for clinical services will not be provided. Submitted budgets should be divided into three components – salaries, direct research costs and translation costs. The below guide is not exhaustive, and all funding is at the discretion of the HCF Research Foundation Board.

1. Salaries:

- HCF Research Foundation will only support salaries for individuals for their time committed to the project. For example, an investigator requesting salary who is only working 0.6 FTE on the project will only be eligible for 0.6 of their per annum salary. We do not fund business as usual staff salaries providing in or out of hospital services, or other healthcare services.
- Additional salary on-cost support is limited to 20%.
- We do not fund salaries for staff based outside Australia.

- For administrative and technical support staff hourly rates of pay are to be determined from the relevant Award Rates.

2. Direct Research costs:

- **Equipment, materials and consumables:** The purchase of essential items and equipment specifically required for the project is allowed if such items are normally not available.
- **Research services:** Research services directly required for the successful conduct of the project are permitted. Budgets must include information of the facility to be used, rates per hour, and number of hours required. Reasonable expenses for computer services, or purchase/licensing of software is also permitted.
- **Travel:** Funds for travel will only be considered when they form an integral part of the project.
- **Participant recruitment:** costs for participant recruitment may be included where there is a justifiable need.
- **Software development:** Software development costs will not be funded.
- **Consumer involvement:** Remuneration of consumers for their time supporting the project will be funded. Duration of expected consumer involvement and rate should be provided. Funding for other relevant costs for consumer engagement will be considered.

3. Research Translation costs:

It is important to comprehensively explain and itemise the costs of translation activities. Translation costs may include:

- Publishing fees
- Peer engagement and training
- Consumer/patient education
- Government, funder, college, national body and other stakeholder engagement
- Clinical guidelines and/or policy change
- Media and promotions

HCF Research Foundation will not fund:

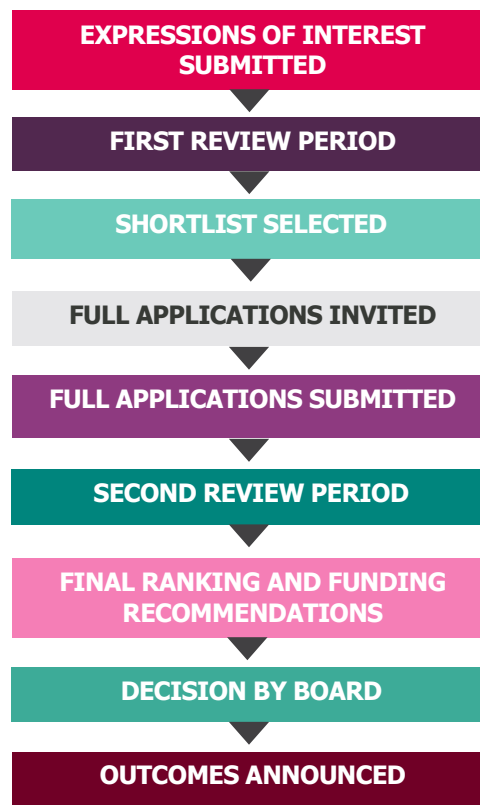
- Provision of clinical services
- Institutional overhead and administration costs (including office supplies)
- Research infrastructure
- Insurance costs
- Costs related to intellectual property
- Entertainment, hospitality and personal expenses (including subscriptions and professional membership fees)

Co-funding and in-kind support

Significant contributions in co-funding and/or in-kind support are expected from providers and commercial research partners. Co-funding should be itemized and included so HCF Research Foundation can appropriately assess the value proposition of the investment. In-kind support that has been committed should also be included.

5. REVIEW PROCESS

The HCF Research Foundation review process is designed as shown below, however remains subject to change without notice. In the event of a significant change to the process, HCF Research Foundation will use its best efforts to notify all affected parties.



The decisions of the HCF Research Foundation Board will be final. The HCF Research Foundation will ensure all applicants are made aware of their application outcome. No feedback will be provided regarding specific applications.

ASSESSMENT CRITERIA

All applications to HCF Research Foundation's Translational Research Grants scheme are to be assessed against the four Assessment Criteria described below and in detail in the Appendix. HCF Research Foundation will generate a single overall score for each application based on the weighted scores for each of the criteria from the reviewers. This overall score will be used to rank applications.

i. The case for change

Applicants must clearly articulate the foundation of the project; the area of need and what evidence-based innovative practices will be introduced to address the issue. The Background section should clearly state the rationale for the project, and why this area is a priority for change. The proposed practice change must be described in detail, and the case must be made for the new approach to address the area of need.

ii. Implementation

All applications must detail the implementation plan, along with key milestones. Applicants should also identify any risks and barriers to successful implementation, and outline mitigation strategies. The implementation plan should intend for the sustainable and permanent implementation of the evidence-based approach.

iii. Evaluation

The application should clearly describe what is being measured for both implementation and effectiveness outcomes. Applicants should be clear about the study methodology and list all metrics that will be measured and state where data measurements will come from. The application **must** include detail on the statistical methods to be employed during the study.

iv. Team and stakeholders

Applicants will need to provide sufficient information for each investigator and justify their selection as part of the research team. The team should collectively display the requisite strength, experience and diversity to achieve the project's aims. Additionally, all key stakeholders and partners that will be impacted by, or able to assist with, the research project should be identified.

6. EXPECTATIONS IF SUCCESSFULLY FUNDED

Following submission of their applications, applicants must notify HCF Research Foundation if any additional or overlapping funding is obtained from another source (or sources) for delivering the research project described in their application. Applicants should also notify

HCF Research Foundation if there are any significant and material changes to circumstances that affect their ability to complete the research as described in their application.

Applicants should also be aware of HCF Research Foundation's expectations, should they be awarded funding. HCF Research Foundation will strive where possible to minimize the administrative and logistical burden on funded applicants, however this must be balanced with the needs of HCF Research Foundation.

A) FUNDING AGREEMENT

On submission, applicants acknowledge that they and their administering institution have had the funding agreement reviewed and that the funding agreement can be signed with no amendments. Successful applicants may request to defer the start date for a period of no more than 12 months.

Project Leads may request variations to the executed funding agreement during the project due to changes in circumstance. This may include changes to the Co-Investigator team, or changes to the budget allocation (note that the HCF Research Foundation will not increase the overall amount of funding, however will consider re-purposing the funding to increase the value of the research investment).

B) GOVERNANCE REQUIREMENTS (ETHICS, INSURANCE ETC.)

The HCF Research Foundation may not provide any funds until such time as the Foundation is assured that all ethics approvals and other governance approvals have been granted, for the research to proceed. Additionally, the Foundation must be assured that the administering institution has all the appropriate insurance and relevant policies in place prior to the provision of funding.

C) COMMUNICATIONS (CONFIDENTIALITY, ACKNOWLEDGEMENT OF SUPPORT, MEDIA ETC.)

All publications, including journal articles, conference presentations and media releases that emerge from awarded grants must acknowledge the support of the HCF Research Foundation. The HCF Research Foundation requests all non-academic articles and media releases be provided to the Foundation for review and approval prior to public release.

HCF Research Foundation may also request funded researchers make themselves available to present their work at conferences and webinars from time to time, and for public communications.

D) REPORTING

Project Leads of funded awards will be required to submit progress reports (including financial reports) at regular intervals through the funding period. The format of these reports is standard and will be available in advance on the HCF Research Foundation grants administration portal. Payment of grant installments by the HCF Research Foundation will be conditional on receipt and approval of progress reports. Unsatisfactory reports, or failure to submit reports may result in the suspension of funding by the HCF Research Foundation.

E) PEER REVIEW PARTICIPATION

In order to deliver a fair review process and ensure that the very highest quality research projects are identified for funding, the HCF Research Foundation relies on the support of the research community through taking part in peer review. All named Investigators on submitted applications are strongly encouraged to take part in peer review, and all named investigators on successfully funded grants are expected to take part in the HCF Research Foundation's peer review through the duration of the grant.

7. ONLINE GRANT MANAGEMENT PORTAL

The online grant management portal will be used for the submission of all applications and the management of funded research projects. The grant management system is available through this website: <https://hcf.service-now.com/csp>. Any EOIs or applications submitted via email will not be accepted. Lead investigators will need to create a profile on the grant management system to be able to complete the EOI form. Applicants will need to select which of the grant topics they are applying for.

In the 'HOME' screen, applicants will be able to see buttons to active grant topics. In the 'My Lists' page, applicants will be able to see any submitted or saved grant applications.

Applicants will receive an automated email to their nominated email address from the grant management system to notify them of the successful submission of applications. The same nominated email address will be used for on-going correspondence related to applications or any funded grants.

8. EXPRESSION OF INTEREST INSTRUCTIONS

Applicants should make sure their EOI is easy to read and understand. The purpose of the EOI form is to provide brief details of the proposed research, yet enough information to ensure it meets the topic brief and the guidelines and meets the Foundation's expectations in terms of significance and impact before it progresses to full application stage. Applicants may attach figures, but this is not required or expected. Excessive use of text in figures will be counted against the word limit.

To be invited to submit a full application, EOIs must make a compelling case for funding. Key factors considered during the review of EOIs are:

- The proposed intervention is backed by relevant and compelling evidence;

- The intervention directly addresses an issue of scale and significance; and
- Post-implementation there will be a significant (measurable) and material impact on relevant outcomes.

Information within the EOI is not considered strictly binding, and applicants may change details of the project (e.g. intervention site(s), co-investigators). However, significant changes to the project should be discussed with the Foundation prior to submission of the full application as the changes may result in the project no longer meeting eligibility requirements.

Please note that the use of generative artificial intelligence in the drafting of EOIs (and applications) carries potential risks in areas including (but not limited to) security, confidentiality, intellectual property, privacy, the accuracy of generated content and plagiarism.

The EOI must be submitted through the HCF Research Foundation online grant management portal by **5.00pm AEDT on Wednesday 21st October 2026**. All applicants are encouraged to submit their EOI well in advance of the deadline. **The portal will close immediately at 5.00pm AEDT and not accept late submissions.** The portal will send out an email to the nominated email account confirming successful submission of the EOI. Once submitted, the EOI is considered final and no changes will be permitted.

9. APPLICATION INSTRUCTIONS

Lead investigators on EOIs will be notified of the outcomes of the EOI stage via email. For those submissions that are shortlisted, further details on submitting a full application will be provided.

Applicants should make sure their applications are easy to read and understand. Use plain language, do not use acronyms, jargon or buzz-words. Use headings, bold, underline, bullets to make the text readable and easy on the eye. Avoid large blocks of text without paragraph breaks. Applicants may upload figures and other relevant documents, but excessive use of text in figures will be counted against the word limit. Cover letters will not be taken into consideration.

Letters of support detailing the proposed contributions from co-funding organisations should be uploaded with the application.

Applicants will also be expected to upload a single page/slide infographic (or visual abstract) describing the proposed project. These should be a single, concise, pictorial/visual summary of the proposal and should avoid excessive use of text.

Applicants will need to submit their application online through the grant management portal in advance of the deadline - 5.00pm AEDT on Monday 1st February 2027. All applicants are encouraged to submit their application well in advance of the deadline. **The portal will close immediately at 5.00pm AEDT and not accept late submissions.** The HCF Research Foundation will confirm the successful receipt of your application by email. Once submitted, the application is considered final and no changes will be permitted.

10. CONTACT HCF RESEARCH FOUNDATION

For any questions relating to the Translational Research Grants scheme process please contact hcffoundation@hcf.com.au

1 APPENDIX A – APPLICATION ASSESSMENT CRITERIA

CRITERIA	EXCELLENT (5)	GOOD (4)	ACCEPTABLE (3)	BELOW STANDARD (2)	POOR (1)
CASE FOR CHANGE Weighting 25%	Well-founded opportunity to significantly improve healthcare provision and outcomes. Identified practice change is highly innovative, described in detail and is ideally suited to address the area targeted for improved health care provision.	Good opportunity to improve outcomes. Practice change is quite innovative, well described and very likely to address area targeted for improvement.	Reasonably founded opportunity to improve outcomes. Practice change is innovative, adequately described and likely to address area targeted for improvement.	Somewhat justified opportunity to improve outcomes. Practice change is somewhat innovative, vaguely described and may address area targeted for improvement.	Poorly justified opportunity to improve outcomes. Practice change is not innovative, not well described and insufficiently aligned to area targeted for improvement.
IMPLEMENTATION Weighting 25%	Exceptional detailed and highly feasible implementation plan provided which will result in sustainable and permanent implementation of the described change in practice. Implementation plan takes into account the specific context; key risks and barriers identified, and logical mitigation strategies well described.	Detailed and feasible implementation plan provided. Implementation plan takes into account risks and barriers, and mitigation strategies described.	Reasonably detailed and likely feasible implementation plan provided. Implementation plan acknowledges risks and barriers, and partial mitigation strategies described.	Somewhat detailed and possibly feasible implementation plan provided. Implementation plan notes some risks and barriers, and mitigation strategies vaguely described.	Poorly detailed and likely unfeasible implementation plan provided. Implementation plan takes no account of risks and barriers, no mitigation strategies described.
EVALUATION Weighting 25%	Comprehensive evaluation plan and methodology incorporating pre- and post-implementation data and benchmark metrics, appropriate study end-point(s).	Reasonably comprehensive evaluation plan and methodology, incorporating mostly suitable data, metrics, and end-point(s).	Satisfactory evaluation plan and methodology, incorporating some suitable data, metrics, and end-point(s).	Evaluation plan and methodology has limitations, and incorporates few suitable data, metrics, and end-point(s).	Vague and limited evaluation plan and methodology, not incorporating suitable data, metrics, and end-point(s).
TEAM AND STAKEHOLDERS Weighting 25%	Team have exceptional expertise in all facets of project. Highly experienced and competent team with exceptional record and outcomes in areas relevant to the research. All relevant organisations engaged during research.	Team covers most aspects of the project. Experienced and solid team with very good evidence of previous research outcomes. Most relevant organisations considered during research.	Team has some expertise relevant to the project. Team has experience in some aspects of the project and moderate research outcomes. Some relevant organisations considered during research.	Team has limited expertise needed for the project. Team has limited experience relevant to the project with minor research outcomes. Most relevant organisations omitted from consideration during research.	Team has no relevant expertise. Team has limited evidence of successful research outcomes. No consideration of relevant organisations.