1. OBJECTIVES

1.1 The Research Fellowship Scheme of the Health and Medical Research Fund (HMRF) aims to support researchers or professionals, particularly healthcare professionals (including but not limited to medical doctors), in their early to mid-career to enhance their skills in public health and health services research\(^1\). The funding support under the Research Fellowship Scheme is expected to help attract young healthcare professionals to join the research community as well as retain such talents at the early stage of their career, particularly in the area of public health policy and research.

1.2 Funding support will be provided for successful applicants to (a) attend overseas training programmes which can broaden their horizons and equip them with the knowledge and skills to become independent scientists/researchers; and (b) apply what they have learnt from the training programmes to conduct a small scale original research project with translational potential within short-to-medium timeframe.

2. FRAMEWORK

2.1 The Research Fellowship Scheme is operated on an annual basis and supports applications from researchers or professionals in their early to mid-career, who want to acquire training and conduct **research in public health (in particular public health policy) and health services** in order to fill the gap among the fellowship schemes in Hong Kong.

2.2 To echo the Health Bureau’s strategic direction to stepping up prevention and control of cancer and tackling non-communicable diseases (NCD),

---

\(^1\) Health services research covers a broad area of clinical research on the prevalence, incidence, cause, prevention, treatment of human diseases, effectiveness and cost-effectiveness of healthcare services and policy. Clinical studies on the care and rehabilitation of patients are also included. Examples include clinical studies on major non-communicable diseases (NCD), modifiable lifestyle factors, primary care, chronic disease management and palliative care, elderly care and infectious diseases.
higher priority will be given to applications which relate to cancer research or address the following modifiable risk factors for NCD -

(a) Smoking;
(b) Alcohol drinking;
(c) Unhealthy diet; and
(d) Physical inactivity

2.3 Each application has to cover the following two components -

(a) An overseas training programme (regular programmes for higher academic qualification, e.g. Master or PhD degree will not be considered); and
(b) A small scale research project relating to the proposed training programme.

2.4 The training programme aims to train the Fellowship Applicant (FA) as a better scientist/researcher. It should be an overseas attachment to a reputable institution for at least three months cumulatively throughout the fellowship period. Clinical attachment that cannot improve the research capability of the FA will not be considered. The knowledge and skills acquired in the training programme should also be applied to the research project and be able to benefit public health and health services in Hong Kong.

2.5 A solid and detailed training plan is required. Details of the training programme including its purpose, duration, activities, relevance to the research project and deliverables should be clearly stated in the electronic Application Form (e-Form). The FA is expected to apply the knowledge and skills obtained from the overseas training programme to complete the research project covered by his/her application.

2.6 The research project should offer an opportunity for the FA to apply knowledge and skills acquired in the training programme. It can be a small scale study with no more than three research objectives. Pilot or
proof of concept studies\(^2\) will also be considered. Replication of previous overseas studies is not acceptable.

2.7 As HMRF emphasises the importance of translational potential of research findings, only **clinical research and research on infectious diseases with public health implications** will be supported. Making reference to the definition of clinical research by the National Institutes of Health of the United States\(^3\), clinical research refers to “research with human subjects that is:

(a) Patient-oriented research. Research conducted with human subjects (or on material of human origin such as tissues, specimens, and cognitive phenomena) for which an investigator directly interacts with human subjects. It includes: (i) mechanisms of human disease, (ii), therapeutic interventions, (iii) clinical trials, or (iv) development of new technologies. Excluded from this definition are in vitro studies that utilise human tissues that cannot be linked to a living individual;

(b) Epidemiological and behavioural studies; and

(c) Outcomes research and health services research.”

2.8 **Research proposals on infectious diseases** should focus on those diseases which are prevalent in or pose threat to Hong Kong and neighbouring regions or areas in which the Hong Kong academic community has a competitive edge. Research proposals on infectious diseases with public health implications from bench to bedside and at community level, and with translational value are supported.

2.9 For **Chinese medicine**, only clinical research based on Chinese medicine theory or clinical research on Chinese medicine theory and methodology is supported.

2.10 Examples of research within or outside the funding scope mentioned in paragraphs 2.7 – 2.9 are provided at Annex 1.

---

\(^2\) Proof of Concept studies refer to the studies which aim to verify the practical potential of some concepts or theories. Examples of Proof of Concept studies include clinical research on early testing of potential efficacy, safety or feasibility of a treatment.

2.11 The FA should state clearly how the fellowship application fits the objectives of the Research Fellowship Scheme; discuss the potential beneficiaries and impact of the proposed research to improve patient care and population health, influence clinical practice and/or health services management or inform health policy; and identify the barriers to achieve the said beneficiaries and impact.

3. ELIGIBILITY

3.1 FAs must be researchers or professionals in medical and health-related disciplines (including doctors, nurses and allied-health professionals) in their early or mid-career.

3.2 FAs should have no more than ten years’ post-doctoral or post-qualification (e.g. medical or nursing degree) experience at the closing date of the application, whichever is less. The experience is counted from the day the FA obtained the doctoral degree or other relevant qualification (e.g. medical or nursing degree).

3.3 FAs must be full-time employees of the following administering institutions (AIs) at the time of application and based at the same AI throughout the fellowship period –

(a) Stream A: Tertiary institutions funded by the University Grants Committee; or
(b) Stream B: Designated teaching hospitals of the medical schools of The Chinese University of Hong Kong (CUHK) and The University of Hong Kong (HKU), i.e. Prince of Wales Hospital and Queen Mary Hospital.

3.4 Each FA must secure the support of a mentor, who is a full-time staff of the AI and undertakes to provide guidance to the FA to select the training programme and carry out the research project throughout the fellowship period. For Stream B, the mentor can be a full-time staff of the respective medical school of the CUHK and the HKU.
3.5 The AI must provide all necessary support such as laboratory service and access to equipment/central facilities to facilitate the FA to undertake their research projects.

4. GRANT APPLICATIONS

4.1 Each AI is allowed to nominate up to eight FAs in each application round except CUHK and HKU which are each allowed to nominate up to ten FAs in each application round.

4.2 Each FA is allowed to submit one application in each application round.

4.3 Each application should have one FA and not more than nine Co-applicants in the research project.

4.4 Resubmission of application declined in the previous application round(s) of HMRF is not accepted.

4.5 Current grant holder of Research Fellowship Scheme cannot submit a new application until his/her current fellowship has been completed.

5. SUBMISSION OF GRANT APPLICATIONS

5.1 Applications must be submitted via the electronic Grant Management System (eGMS) (https://rfs.healthbureau.gov.hk/eGMS/) by completing the e-Form on or before the deadline of submission specified by the Research Fund Secretariat (the Secretariat). FAs, especially those who are new to the eGMS, are strongly advised to prepare their applications well before the deadline of submission to avoid unexpected situations. Explanatory Notes and Quick Guide for completing the e-Form can be found at Annex 2 and Appendix A of the Explanatory Notes respectively.

5.2 Endorsement letter from Mentor and Nomination letter from President/Vice-Chancellor (for Stream A) or Hospital Chief Executive (for Stream B) shall be attached in the e-Form (Part J).
5.3 Applications that are incomplete, inconsistent with the submission requirements, out-of-scope or insufficiently detailed to peer review will not be processed and may result in administrative withdrawal. Applications which do not use the standard proposal template (Section 7 of PART I) will be treated as incomplete. The template for Section 7 of PART I can be downloaded from the Secretariat’s website.

6. **FINANCIAL/FUNDING ARRANGEMENTS**

6.1 Each fellowship award is capped at HK$1,200,000 and lasts for a normal duration of two years (inclusive of both training and research components).

6.2 Up to HK$400,000 could be allocated to the overseas training programme, whereas up to HK$800,000 for the research project.

6.3 The fellowship is to be held at the AI and is **not transferable** throughout the course of the fellowship.

6.4 Expenditure of the fellowship must be at the benefits of the FA’s professional development. Funding can be used to meet the costs of the following items -

(a) fees of the training course/attachment to acquire the specialised knowledge and enhance the skill set for conducting research;
(b) air passage (up to two round trips economy class), accommodation and subsistence allowance for overseas training according to the established procurement policy and standard of the relevant AI;
(c) procurement of equipment or consumables or recruitment of research staff for conducting the research project; and
(d) salary of the reliever at the rank of the FA or below to take over the **teaching duties** of the FA according to the salary rates set by the AI.

6.5 The fellowship does not support the salary of the FA, and medical/insurance cover, fringe benefits and on-costs of reliever/research staff.
6.6 Funding cannot be solely used to support a particular item in paragraph 6.4. The AI has to absorb any expenses exceeding its standard rates in 6.4(b) and 6.4(d). Funding support for other allowable and unallowable items can be found in Appendix B of the Explanatory Notes.

6.7 Funding will be paid on a reimbursement basis upon submission of a claim form. Reimbursement of expenses will be paid up to the actual amount incurred in the approved budget items. The details of financial arrangements can be found in Appendix C of the Explanatory Notes.

7. REVIEW AND SELECTION PROCESS

7.1 Applications will be assessed by the Research Fellowship Assessment Panel (RFAP) to shortlist FAs for an interview.

7.2 The assessment criteria include -

- **FA’s capability (30%)**
  (a) Applicant’s research potential and capability including Applicant’s qualifications, track record in research and training;

- **Training proposal (35%)**
  (b) Importance of the training to health care development;
  (c) Relevance of the training to the research proposal;

- **Research proposal (35%)**
  (d) Scientific merits of the research proposal; and
  (e) Translational potential/value of the research proposal to public health or health services in Hong Kong.

7.3 Shortlisted FAs will be notified of the outcomes two weeks before the date of the interview.

7.4 The RFAP may at its absolute discretion invite external reviewers to assess the applications.
7.5 Sixteen awards for Stream A and four awards for Stream B will be granted in each application round. However, depending on the quality and budget requirements of the applications, the RFAP reserves the absolute right to recommend more or fewer applications for funding under the two Streams in each round.

7.6 Subject to the quality of applications, out of the total 20 awards, at least four awards will be granted to applications that can address the four modifiable risk factors for NCD as stated in paragraph 2.2, with one award in each area.

7.7 Funding recommendations by the RFAP will be submitted to the Research Council (RC) for approval. The decision of RC is final.

8. ANNOUNCEMENT OF RESULTS

8.1 The results of the applications will be announced normally within six months after the application deadline.

8.2 All FAs will be informed of the results made by the RC.

8.3 The award of a fellowship is conditional upon the enrolment of the proposed training.

8.4 Contractual agreement covering terms and conditions, payment, reporting, deliverables, etc., will be signed by the Government, the AI, and the FA.

8.5 FA shall declare work done before commencement of the fellowship and duplicate funding, if any, before signing the contractual agreement.

8.6 Approval for new funding will not be granted if the FA has not submitted outstanding/overdue report(s)/certified financial statement(s) and audited account(s)/evaluation questionnaire(s) for his/her other grant(s) supported by the HMRF.
9. MONITORING AND EVALUATION

9.1 The FA and the AI shall report the progress of the training on a regular basis. A training report shall be submitted within one month after completion of the training. The timing and frequency of submission shall refer to the terms and conditions of the contractual agreement.

9.2 The FA and the AI shall submit interim/progress reports of the research project on a regular basis. A final report and a dissemination report shall be submitted within six months of completion of the fellowship. Such reports must conform to guidelines that are issued from time to time by the Secretariat. The timing and frequency of submission shall refer to the terms and conditions of the contractual agreement.

9.3 Unless specified, the AI shall submit an annual certified financial statement within 2 months following the first anniversary of the commencement date of the fellowship, and shall submit the audited account within 6 months after the end date, or within 60 days after the expiry or termination of the fellowship, whichever is earlier.

9.4 The FA is expected to deliver presentation(s) on his/her achievements and project deliverables and share his/her learning experience after completion of the fellowship at the request of the Secretariat. The final and dissemination reports will be assessed before dissemination via the Secretariat’s website (https://rfs.healthbureau.gov.hk) and the Hong Kong Medical Journal, where appropriate.

9.5 The FA shall complete at least two evaluation surveys to assess the outcomes and impacts of the completed project two and four years after completion of the project or at other timeline specified by the Secretariat.

9.6 If after due assessment, the FA is not considered to be making satisfactory progress, the RC reserves the right to discontinue the provision of financial support under the terms of the fellowship and may seek the return of any funds provided to date.

9.7 If any false, fictitious, under declaration, or fraudulent statements or claims are detected and subsequently substantiated after the fellowship is
approved, the FA and the AI shall refund all grants received, and are liable for damages and losses incurred. Track records of the FA may be affected. Please refer to Section 12.10.

10. RESEARCH ETHICS/SAFETY APPROVAL/CONSENT FOR ACCESSING THIRD-PARTY DATA

10.1 Written clearance from recognised ethics committee/Institutional Review Board (IRB) and safety approval from a designated Safety Officer, or equivalent, must be obtained prior to the commencement of the research project. The primary responsibility for seeking relevant approvals rests with the FA.

10.2 The FA should ensure that the regulatory/ethics approval(s)/evidence for accessing third-party data bear(s) the same project title as that in his/her application approved by the RFAP. The protocol/scope included in such approval(s) / evidence for accessing third-party data must be the same as that in the application.

10.3 Under Regulation 36B of the Pharmacy and Poisons Regulations (Cap. 138A), for the purpose of conducting a clinical trial on human beings or medicinal tests on animals using pharmaceutical products, a Certificate for Clinical Trial/Medicinal Test issued by the Pharmacy and Poisons Board must be obtained prior to the commencement of the research project. According to Section 129 of the Chinese Medicine Ordinance (Cap. 549), for the purpose of facilitating the conduct of a clinical trial or medicinal test of any proprietary Chinese medicine, a Certificate for Clinical Trial and Medicinal test issued by the Chinese Medicines Board must be obtained prior to the commencement of the research project. FAs are strongly advised to confirm the need for the relevant certificate as early as practical (preferably before/during the submission of applications to the HMRF) to avoid delay in project commencement. If a relevant certificate is required, failure to present a valid certificate by a specified deadline, may result in the application being rejected.

10.4 Consent for accessing third-party data, e.g. a letter of support, must be obtained from the data owner (or their authorised representative) when
access to third-party data is required by the applicants. Any fee or payment required for accessing third-party data should be clearly documented under “Other Expenses”.

11. PRIVACY, CONFIDENTIALITY AND DATA PROTECTION

11.1 The FA and the AI are responsible for ensuring that the requirements of any data protection are fully observed. In particular, the FA shall ensure at all times that any personal data collected in the course of the project shall be securely held and handled and that the anonymity of persons to whom the data refer shall be preserved in any report or publication.

11.2 The FA and the AI shall adhere to the Personal Data (Privacy) Ordinance (Cap 486).

11.3 The information and personal data provided in the e-Form will be used by the RC, the RFAP, the Secretariat and the relevant government department(s) or its authorised users for the purposes of assessing applications to the Research Fellowship Scheme of the HMRF or checking of plagiarism/duplicate funding. For successful applications, such information and personal data will also be used for project monitoring, research and statistical analysis, promotion, publicity and dissemination purposes as appropriate. Contents of the submitted application set out in PART H (except proposal details) and Sections 1 – 6 and 11 of PART I with the status of research project will be made available for public access once funding approval is offered.

11.4 FAs have the right to access and correct the personal data provided in accordance with sections 18 and 22 and Principle 6 of Schedule 1 of the Personal Data (Privacy) Ordinance (Cap 486). Their right of access includes the right to obtain a copy of their personal data provided in the e-Form.

11.5 Enquiries concerning the personal data collected in the e-Form, including access and corrections, should be addressed to -

Research Fund Secretariat
Research Office
12. OTHERS

Plagiarism

12.1 The FA is responsible for ensuring that the submitted grant application and all supplementary materials (where applicable) comprise original work and are not plagiarised (or self-plagiarised) from other sources according to the definitions in paragraphs 12.2 and 12.3. Plagiarism, including self-plagiarism, is not tolerated and is considered as a type of serious misconduct.

12.2 Plagiarism is the appropriation or use of the work of others for example, copying sentences, paragraphs, sections or whole articles from other publications without acknowledgement or credit. Apart from words, figures, tables, images and software, etc., can also be considered plagiarism if the source is not acknowledged.

12.3 Self-plagiarism occurs when researchers reuse their own data or previously published work without appropriate acknowledgement that the material had previously been published.

12.4 Common examples of plagiarism and self-plagiarism found in the preparation of grant applications are illustrated below –

(a) Example 1 (plagiarism): The applicant copies verbatim the sentence(s) from another source in the proposal without citing the reference or giving any indication that it had been previously published by others. This is unacceptable – the source of the original text must be acknowledged; the passage should be enclosed by quotation marks to indicate that it has been cited in its entirety.
(b) **Example 2 (plagiarism):** The applicant copies a sentence or text from another source and makes minor editorial adjustments such as adding or removing abbreviations, changing tenses, etc. but acknowledges the original source. This is unacceptable – the acknowledgement of the original source merely indicates the text was consulted; it does not indicate that a portion has been quoted almost verbatim with only minor editorial changes. For the avoidance of doubt, the edited passage should have been enclosed in quotation marks.

(c) **Example 3 (plagiarism):** The applicants replicates the plan of investigation, research aims, objectives and hypotheses of another research group without acknowledgement. This is unacceptable – the research study should be original and studies conducted by others should be acknowledged clearly.

(d) **Example 4 (plagiarism):** One or more of the figures used in the grant application was found to have been used in a previous publication or public presentation such as a symposium or conference without acknowledgement. This is unacceptable – plagiarism can involve non-textual items such as figures, images, tables, software, etc. and prior usage should be acknowledged clearly.

(e) **Example 5 (self-plagiarism):** The applicant reproduces text and/or figures from his/her own previously published work in the proposal without acknowledgement. This is unacceptable – all previously published work by the applicants should be acknowledged.

**Work done before project commencement**

12.5 Costs of work (e.g. the purchase of equipment or the first working day of a project staff) incurred before the commencement date or the writing-up of such work are **not** allowed.

12.6 Training or research work (e.g. subject recruitment) conducted before the commencement of the fellowship which includes the period before and after application submission is not allowed. If such case is declared
upfront before the Agreement is signed for fundable application, the FA has to adjust the funding scope and the funding amount for RFAP’s consideration and approval.

**Similar studies and other funding**

12.7 Applicants listed in Part I Section 11 of the e-Form should declare any duplicate funding. At any time before the announcement of the funding decision of the RC, applicants are required to notify the Secretariat immediately about –

(a) any other similar or related application submitted to other funding agencies in addition to those listed in the e-Form; and
(b) the funding decision of any similar or related application once available.

**Supplementary sponsorship**

12.8 Supplementary sponsorship must be fully justified. FAs shall state clearly whether any supplementary support has been/will be received from other sources, including but not limited to monetary, investigational new drugs/devices, reagents, and consumables and rental of equipment.

12.9 AI or any of the applicants listed in Part I Section 11 of the e-Form, or any of the proposed personnel and sub-contractors/agencies to be engaged in the project, shall declare any actual or perceived conflict of interest, such as receiving any funding or assistance directly or indirectly from industries (including but not limited to tobacco related businesses, infant formula companies, or organisations funded by such businesses). The declaration shall include any use of the grant monies to purchase products or services from businesses owned wholly or partly by the AI or any of the applicants listed in Part I Section 11 of the e-Form, or any of the proposed personnel and sub-contractors/agencies to be engaged in the project.

**Management of track records**

12.10 Plagiarism or double dipping not declared or research work done before project commencement without declaration, if substantiated, will lead to
severe consequences including but not limited to disqualification from the current application round, debarment from applying and receiving grants from the HMRF in the capacity of principal applicant/FA, marking of the track record of the FA, and recovery of grants. The track record of the affected applicant shall be taken into account when considering future applications to any funds administered by the Secretariat. The Management of Track Records of Applicants is available on the Secretariat’s website.

Commencement of fellowship

12.11 Fellowship shall commence **within six months** from the award approval date.

Change(s) to approved training and research project

12.12 After an award is granted, all major changes to the training and the research plans require prior approval from the RFAP. (Note: Change of objectives of the research/training plan is not allowed.)

- End -
Examples of research that would be within and outside the funding scope of
Health and Medical Research Fund
(Research Fellowship Scheme and Investigator-initiated Projects)

**Within funding scope**

i. *Clinical research: mechanisms of human disease, therapeutic interventions, clinical trials, development of new technologies*

<table>
<thead>
<tr>
<th>No.</th>
<th>Research Area</th>
<th>Examples</th>
</tr>
</thead>
</table>
| 1.  | Clinical virology                | *Clinical research: mechanisms of human disease*  
A combination of pre-clinical and clinical research to investigate the immune responses and the associated cellular pathways among vaccinees and SARS-CoV-2 infected subjects. The pre-clinical part is to conduct animal experiments to study the functional role of a selected type of immune cell and evaluate potential drug treatment. Research conducted with human subjects involving primary data collection to identify correlation with results generated from animal experiments. |
| 2.  | Treatment                         | *Clinical research: therapeutic interventions/clinical trials*  
A prospective cohort study aiming to determine the safety and efficacy of novel drug therapy regimen among patients with a particular medical condition. |
| 3.  | Clinical study of Chinese Medicine formula | *Clinical research: therapeutic interventions/clinical trials*  
A study aiming to investigate the clinical efficacy and safety of an empirical formula consisting of multiple Chinese herbal medicines on patients with a particular medical condition using a randomised placebo-controlled clinical trial. The effects of this formula on the modulation of the oral and fecal microbiota of these patients will be determined by metagenomics. |
| 4.  | Integration of Chinese medicine and Western medicine | *Clinical research: therapeutic interventions/clinical trials*  
A clinical trial aiming to investigate the clinical efficacy and drug interaction of the combination of Chinese and Western medicines in certain cancer patients. Blood samples will be collected from each patient at pre- and post-treatment for assessing the changes in molecular markers and treatment responses. |
| 5.  | Treatment                         | *Clinical research: therapeutic interventions*  
A combination of pre-clinical and clinical research involving biopsy samples obtained from prospectively recruited cancer patients and used for drug sensitivity profiling. Ex vivo cultured biopsy tissues will be tested against a panel of anti-cancer chemotherapeutics and immunotherapies. The treatment response in ex vivo culture will be correlated with treatment response among those patients assigned to chemotherapy or immunotherapy. |
**Within funding scope**

i. Clinical research: mechanisms of human disease, therapeutic interventions, clinical trials, development of new technologies

<table>
<thead>
<tr>
<th>No.</th>
<th>Research Area</th>
<th>Examples</th>
</tr>
</thead>
<tbody>
<tr>
<td>6.</td>
<td>Diagnosis/Disease monitoring</td>
<td>Clinical research: development of new technologies</td>
</tr>
<tr>
<td></td>
<td></td>
<td>A study conducted with human subjects involving primary data collection aiming to develop and validate an AI-based system for automated image-based diagnosis of specific health conditions and disease progression risk. Scanned images of the relevant organ will be obtained from retrospective archives of clinical data and from prospectively recruited patients and healthy controls to train and validate the AI-based algorithm.</td>
</tr>
</tbody>
</table>

ii. Epidemiological study/Behavioural study

<table>
<thead>
<tr>
<th>No.</th>
<th>Research Area</th>
<th>Remarks</th>
</tr>
</thead>
<tbody>
<tr>
<td>7.</td>
<td>Longitudinal study</td>
<td>Epidemiological study/Behavioural study</td>
</tr>
<tr>
<td></td>
<td></td>
<td>A longitudinal study conducted over several years to examine trajectories of chronic diseases and associated morbidities in the local population, and to identify modifiable risks and protective factors for different chronic disease outcomes for future preventative intervention work.</td>
</tr>
<tr>
<td>8.</td>
<td>Infectious disease epidemiology</td>
<td>Epidemiological study with machine learning approach</td>
</tr>
<tr>
<td></td>
<td></td>
<td>A study which aims to characterise the pre-existing risk factors and severity of reinfection of a particular pathogen by using machine learning approach to identify patients' subphenotypes associated with the reinfection. It involves the use of data from electronic medical records to identify the study subjects with the relevant clinical information (e.g. pre-existing risk factors like comorbidities, medication history and severity of infection) and make associations with mild or severe re-infection for comparison.</td>
</tr>
</tbody>
</table>

iii. Outcome research and health services research

<table>
<thead>
<tr>
<th>No.</th>
<th>Research Area</th>
<th>Remarks</th>
</tr>
</thead>
<tbody>
<tr>
<td>9.</td>
<td>Health economics</td>
<td>Outcome research and health services research</td>
</tr>
<tr>
<td></td>
<td></td>
<td>A study which aims to evaluate the cost-effectiveness of telehealth versus conventional face-to-face care for managing chronic diseases in Hong Kong.</td>
</tr>
</tbody>
</table>
iv.  *Research on infectious diseases with public health implications*

<table>
<thead>
<tr>
<th>No.</th>
<th>Research Area</th>
<th>Remarks</th>
</tr>
</thead>
<tbody>
<tr>
<td>10</td>
<td>Risk assessment and surveillance</td>
<td>A study which aims to determine the microbiome and antimicrobial resistome shared by environmental samples collected at different sites and time periods using metagenomics sequencing, followed by associating them with the clinical multi-drug resistant organisms (MRDO) strains reported in different community regions to review whether there is any epidemiological lineage.</td>
</tr>
<tr>
<td>11</td>
<td>Antimicrobial agent</td>
<td>A study which aims to develop a novel nanomaterial that is effective in bioaerosol disinfection. The disinfection efficacy of the proposed nanomaterial will be evaluated in a laboratory under various environmental conditions against designated microorganisms, followed by further open field testing for natural airborne microbial communities.</td>
</tr>
</tbody>
</table>

**Outside funding scope**

i.  *Basic / preclinical research on Chinese medicine*

<table>
<thead>
<tr>
<th>No.</th>
<th>Research Area</th>
<th>Remarks</th>
</tr>
</thead>
</table>
| 1   | Biochemical study of medicinal plant extracts | *Non-clinical research*  
A pre-clinical study which aims to determine the treatment effect of a traditional Chinese medicine/herbal formula for a particular disease using mouse models. |

ii.  *Research on infectious diseases with low public health implication*

<table>
<thead>
<tr>
<th>No.</th>
<th>Research Area</th>
<th>Remarks</th>
</tr>
</thead>
<tbody>
<tr>
<td>2</td>
<td>Phylogenetic analysis</td>
<td>A study which aims to identify novel virus species by next-generation sequencing of samples collected from various animal sources, followed by bioinformatics analysis to investigate the virus evolution and the susceptibility of transmission to potential new hosts. This study is a viral evolutionary biology project, and is unlikely to identify new viruses that can infect human and cause public health threats.</td>
</tr>
</tbody>
</table>
Health and Medical Research Fund  
Research Fellowship Scheme  

Explanatory Notes for completing Application Form

IMPORTANT!

- All Fellowship Applicants (FAs) MUST read the Explanatory Notes in conjunction with the Application Guidelines for the Research Fellowship Scheme of the Health and Medical Research (HMRF) before completing the Application Form (e-Form).
- Applications that are incomplete, inconsistent with the submission requirements, out-of-scope or insufficiently detailed to peer review will not be processed and may result in administrative withdrawal.
- For general enquiries about completing the application, please contact the Research Fund Secretariat (the Secretariat) (email: rfs@healthbureau.gov.hk).

GENERAL INFORMATION

1. All applications must be submitted via the electronic Grant Management System (eGMS) (https://rfs.healthbureau.gov.hk/eGMS/) by completing the e-Form on or before the deadline of submission specified by the Secretariat. FAs who are unfamiliar with the eGMS are strongly advised to prepare their applications well before the deadline for submission to avoid unexpected situations. FA will receive an acknowledgement email from the eGMS after successful submission of the application.

2. The Quick Guide for completing the e-Form is available at Appendix A.

RESEARCH FELLOWSHIP SCHEME APPLICATION FORM

PART A to PART D – Complete the personal particulars of the FA.

PART E – Complete mentor information.

PART F – Please state clearly how the research plan and training plan fit the objectives of the Research Fellowship Scheme.

PART G – PROPOSED RESEARCH FELLOWSHIP PERIOD: The duration of fellowship support is two years covering two components: training and research. The expected start date is counted as the date on which the institution first incurs a cost for the fellowship award. The completion date should be entered based on the proposed duration of the fellowship. The start date of fellowship must be after the announcement of funding decisions. For example, applications submitted by the closing date of 8 January 2024 should not be expected to start before 1 October 2024.

PART H – OVERSEAS TRAINING PROPOSAL: The training programme should be an overseas attachment to a reputable institution for at least three months cumulatively throughout the fellowship period.

Please complete the name of the programme, description of the programme and overseas mentor (if any), training institution/organisation, country (training place) and training period. The start date and end date of the training period should be within the fellowship period.

The training proposal content should follow the word limit and cover the details described below. In particular, insufficiently detailed proposals may be withdrawn.
Word limit
Details of Overseas Training Proposal:
- Not more than 1,000 words in total (for all items 1-4 under Details).
- Not more than 600 words for each item.
(Training proposal details exceeding the word limit will not be considered.)

Details
1. State the purpose and importance of the training to the betterment of (a) the FA as a better scientist/researcher and (b) the public health and health services in Hong Kong: Describe the purpose of the training programme, including the background information of the training institution and overseas mentor (if any), and state why this is important to train the FA as a better scientist/researcher and to benefit the public health and health service in Hong Kong.

2. Describe the training plan including its activities/content. State the expected deliverables of the training upon completion in point form.

3. State the relevancy and how the specialised skills obtained from the training programme will be applied to the research project proposed in PART I.

4. Justify the funding requirements for the training plan (Please provide supporting documents such as course information in Section 7(j) of Part I, if appropriate): All requested items must be fully justified demonstrating the value of money. For proposed budget in Section 10 of PART I, please provide the details for overseas training, e.g., itinerary of travel, standard rates for subsistence allowance/accommodation.

PART I – RESEARCH PROPOSAL:
The Research Fellowship Scheme aims to support research in public health (in particular public health policy) and health services research.1

1. Area of research: Indicate the area of research (public health, health and health services or infectious diseases) and the type of research (clinical or pre-clinical) in the appropriate boxes.

   1.1 As HMRF emphasises the importance of translational potential of research findings, only clinical research and research on infectious diseases with public health implications will be supported. Making reference to the definition of clinical research by the National Institutes of Health of the United States,2 clinical research refers to “research with human subjects that is:

   (a) Patient-oriented research. Research conducted with human subjects (or on material of human origin such as tissues, specimens, and cognitive phenomena) for which an investigator directly interacts with human subjects. It includes: (i) mechanisms of human disease, (ii) therapeutic interventions, (iii) clinical trials, or (iv) development of new technologies. Excluded from this definition are in vitro studies that utilise human tissues that cannot be linked to a living individual;

   (b) Epidemiological and behavioural studies; and

1 Health services research covers a broad area of clinical research on the prevalence, incidence, cause, prevention, treatment of human diseases, effectiveness and cost-effectiveness of healthcare services and policy. Clinical studies on the care and rehabilitation of patients are also included. Examples include clinical studies on major non-communicable diseases (NCD), modifiable lifestyle factors, primary care, chronic disease management and palliative care, elderly care and infectious diseases.

1.2 **Research proposals on infectious diseases** should focus on those diseases which are prevalent in or pose threat to Hong Kong and neighbouring regions or areas in which the Hong Kong academic community has a competitive edge. Research proposals on infectious diseases with public health implications from bench to bedside and at community level, and with translational value are supported.

1.3 For **Chinese medicine**, only clinical research based on Chinese medicine theory or clinical research on Chinese medicine theory and methodology is supported.

2. **Research topic(s):** Indicate the research topic(s) of cancer research, smoking, alcohol drinking, unhealthy diet, physical inactivity and/or others (please specify).

3. **Project title:** The project title should be concise but informative and self-explanatory. **Limit to 25 words.**

4. **Abstract of project:** Presented **in BMJ house style** of **not more than 250 words** with the following headings: objectives; hypothesis to be tested; design and subjects; study instruments; interventions; main outcome measures; data analysis and expected results. For details, please refer to [https://www.bmj.com/about-bmj/resources-authors/house-style](https://www.bmj.com/about-bmj/resources-authors/house-style).

5. **Potential application:** Please explain how the research findings will benefit patients and/or the healthcare system. Elaborate in **not more than 500 words.** FA should describe in simple language the potential of the research findings to improve patient care, population health, influence clinical practice and/or health services management, or inform health policy in Hong Kong and elsewhere. What are the potential facilitators and barriers to this impact being achieved?

6. **Keywords:** Please enter up to 10 keywords for the project

7. **Project proposal:**

   To ensure consistency and fairness, applicants must strictly comply with the formatting requirements listed below. The Secretariat **will not process applications that do not comply with these formatting requirements.** In particular, insufficiently detailed proposals may be withdrawn.

   **Format**

   Proposal template: Sections 7(a) – (h) of the proposal, with the standard header “2023 Research Fellowship Open Call Proposal”, should be **attached as a PDF file** to the e-Form. Please download the proposal template at [Secretariat’s website](https://www.bmj.com/about-bmj/resources-authors/house-style).

   Word limit: **Section 7(a) – (d) of PART I inclusively. Not more than 4,000 words.**

   Please provide the word count for Section 7(a) – (d) of PART I.

   Margin: Left at least 2.5cm. Others at least 1.5cm.

   Font: At least 10-point. Preferably Arial.

   Character spacing: Normal

   Line spacing: At least Single.

   **Content**

   a. **Title:** Same as the project title in Section 3 of PART I.

   b(i). **Research in context:** Ask the two questions:
(i) What is the existing evidence before this study based on an up-to-date literature search? State clearly whether research on a similar topic has been/is being carried out. Outline the research approaches in other studies and highlight their deficiencies and the research gap.

(ii) How will this study add value to existing evidence to improve patient care, population health, influence clinical practice and/or health services management, or inform health policy in Hong Kong and elsewhere?

b(ii). **Introduction:** Explain the relevance of the proposal to the scope of the fund. Elaborate in details with references to support the answers provided to b(i) above.

c. **Aims and Hypotheses to be Tested:** State the aims and hypotheses, wherever possible, as a list of questions to which answers will be sought. Limit the research objectives to no more than three.

d. **Plan of Investigation:** Give practical details of how answers will be obtained to the questions posed. This should include information on:

   (i) **Study design** described in sufficient detail to allow assessment of workload and timetable and including but not limited to, experiments, observations to be made, randomisation method where relevant, and the use of controls. Pilot studies and proof of concept studies will be considered.

   (ii) **Methods** to be employed, giving references where these are non-standard. Where new methods are being developed, arrangements for establishing validity and reliability should be described. Examples of non-standard questionnaires, tests etc. should accompany the application or their content be clearly indicated.

   (iii) **Subjects** to be included in the study. Justification for sample size and power analysis to support the chosen sample size must be provided for all studies including pilot or proof of concept study.

   (iv) **Data processing and analysis** including outcome measures, means of validating records, and the type of statistical analysis to be carried out.

   (v) **Potential pitfalls and contingency plans** describing potential problem(s) that may be encountered during implementation of the study and providing a proactive strategy to continue the project if such problems are encountered.

e. **Existing Facilities:** Describe resources and facilities available for supervision, equipment, space, staffing, relevant departmental interests, and collaboration. Supplementary sponsorship must be fully justified. Applicants shall state clearly whether any supplementary support has been/will be received from other sources, including but not limited to monetary, investigational new drugs/devices, reagents, and consumables and rental of equipment.

f. **Justification of Requirements:** The staff requirement should be justified in terms of expertise and workload required by the research. Reasons should be given for selecting particular types of equipment, purchasing of services and provision of incentives, etc. Please refer to the allowable and unallowable items in Appendices B and C.

---

3 Proof of Concept studies refer to the studies which aim to verify the practical potential of some concepts or theories. Examples of Proof of Concept studies include clinical research on early testing of potential efficacy, safety or feasibility of a treatment.
g. **Plan to Disseminate Research Findings to End Users:** Describe the ways in which the research results will be disseminated.

h. **Key References:** Include a maximum of 40 references in Vancouver style. Follow the “Uniform Requirements for Manuscripts Submitted to Biomedical Journals” at [www.icmje.org/index.html](http://www.icmje.org/index.html) for referencing. If it is considered essential to cite work by the applicants that are in press for publication, please provide a copy (PDF file) in “Section 7(j) - List of additional materials”.

i. **Attachment(s) Referred in the Proposal:** Include figures/tables, diagrams, questionnaires, tools, patient consent forms, etc. Figures and tables should be of sufficient size and resolution to allow easy reading. Use colour where applicable. List the items that have been attached. Attach not more than 5 files (with total file size of 8 MB) properly titled in PDF format under this section.

j. **List of Additional Materials:** Include ethics/safety approval(s), consent for accessing third-party data, letters of collaboration from study partners, quotation of budget item(s), supporting documents of training proposal, etc. List the items that have been attached. Attach not more than 5 files (with total file size of 5 MB) properly titled in PDF format under this section.

8. **Project Start and End Dates:** The expected start date and completion date should be entered. The project period should be within the fellowship period.

9. **Timetable of Work:** In the table provided, describe clearly the key milestones of the project, the date (i.e., months after project commencement) by which these key milestones are expected to be reached, and the resulting deliverable. An example is included for reference, which may be overwritten/deleted in the final submission. Include 3-5 key milestones. These milestones will be used to determine the frequency of reporting progress to the Secretariat.

10. **Budget Proposal:**

   10a. **Summary of financial support requested:** The FA is not required to complete Section 10a of PART I; the e-Form will automatically summarise the funding requested in Section 10b of PART I. Costs should be rounded to the nearest dollar. FAs should refer to **Items Allowable and Unallowable for Reimbursement and Financial Arrangements** at Appendices B and C for details. The total cost should not exceed HK$1,200,000 inclusive of research and training costs up to HK$800,000 and HK$400,000 respectively.

   10b. **Details of Financial Support Requested:** All items must be fully justified as stated in **Appendix B**. Costs of work incurred before the commencement date of fellowship or the writing-up of such work are not allowed. Training or research work (e.g. subject recruitment) conducted before the commencement of the fellowship which includes the period before and after application submission is not allowed. If such case is declared upfront before the Agreement is signed for fundable application, the FA has to adjust the funding scope and the funding amount for Research Fellowship Assessment Panel’s consideration and approval.

   Application should be based on actual prices. Standard rates, if available, should be specified. No allowance should be made for inflation. Costs should be rounded to the nearest dollar.
10b(i). **TRAINING COST**

The training cost includes training/course fee. Air passage (up to two round trips economy class), accommodation expenses and subsistence allowance for overseas training will be covered. The total training costs should not exceed HK$400,000.

10b(ii). **STAFF DETAILS**

The proposed project staff shall enter into contract of employment with the administering institution (AI). Staff costs should be justified in terms of the level of expertise and workload required by the research project. Reliever must be at the rank of the FA or below to take over the teaching duties of the FA. The FA should consult their finance office about the pay scale and the appropriate pay point proposed. In general, salary scales that apply to equivalent workers employed by the AI are acceptable. Funding may be requested for full-time (which may be for periods shorter than the duration of the grant) and part-time posts. For part-time staff, the effort on the Project must be at least 20%. Monthly contributions to the Mandatory Provident Fund should also be included and absorbed in the monthly salary instead of a standalone item. Staff benefits such as gratuity, bonus, severance payment, untaken leave of staff employed and medical insurance costs will not be supported.

Information in this section should reflect salary costs for the entire project, based on the proposed salaries as at the date of the application and the estimated percentage on level of participation in the project. The actual costs for each financial year of the grant should be entered in “Staff Costs”.

10b(iii). **STAFF COSTS**

Please provide an annual cost for each post identified in “Staff Details” above during the proposed fellowship period.

10b(iv). **OTHER EXPENSES**

Other expenses include consumable or equipment items costing less than HK$10,000, conference (i.e. travel and subsistence), publication costs, reference materials, Audit fee, etc. Only direct costs can be charged to the project grant. Unit cost should be provided as far as possible, e.g. incentive per participant, whole genome sequencing cost per sample. Indirect costs of the project will not be considered.

*For incentives*

The purchase of gifts, coupons, etc., as incentives/tokens of appreciation for study participants is allowed if well justified with valid reason(s). A governance system shall be in place to adequately monitor the disbursement of incentives to ensure accountability and traceability.

*For purchase of services*

Purchase of services from non-local organisations, such as consultancy for project, experimental work, Biosafety Level 3 (BSL-3)/P3 laboratory facilities, etc., is allowed if well justified with valid reason(s), which should include full justifications for not acquiring the resources/facilities in Hong Kong.

*For travel and subsistence*

The cost of local travel for project staff to attend clinics and training sites, for purposes directly related to the project are allowed.
10b(v). **EQUIPMENT**

Only include items dedicated to the project and costing HK$10,000 or above. Items costing less than HK$10,000 should be included under “Other Expenses”.

Purchase of particular types of equipment should be well justified by, providing details (including but not limited to, the needs of the research and the cost, performance and specifications of the equipment) under Section 10b(v). Tendering should be carried out according to the AI’s procedures. The AI should pay attention to the transparency and fairness in the procurement process and follow its disposal procedures properly. Where the relevant guidelines are not in place, the institution should adopt the *Notes on Acquisition and Disposal of Equipment Items for Institutions without Established Guidelines*, which can be obtained from the Secretariat by email (rfs@healthbureau.gov.hk).

*For computer equipment and software*

FAs should provide valid justifications for purchase of software and computing equipment/facilities. Local departmental computing charges which can be assigned to the research project will be considered as an allowable cost, including stationery supplies and software licences. Expenses for computing equipment specific for the project, such as notebook computers, software, etc., will be covered. Central computing facilities remain the responsibility of the AI. The purpose of any special software to be developed, e.g. commissioned in house, or modifications of existing software should be detailed and the development time required given in hours or man-months.

If external resources are to be used, the estimated time required, a breakdown of the resources required, and the cost per unit of computing time/purchase of consultancy should be given.

Any computing consumable to be purchased should be itemised under “Other Expenses” with a breakdown of both quantity and price.

Should computing advice be sought, details of the persons/organisations to be consulted should be given.

11. **Applicants (Project Team):** Research project should not have more than nine co-applicants (Co-A). The email address of each applicant must be entered twice to minimise incorrect entries. The employment relationship between the FA and the AI should be made clear. If an applicant holds more than one post, e.g., one in University and one in Hospital or another Service or Unit, details of the position at the AI should be stated. All applicants are expected to be personally and actively engaged in the project. Each applicant must provide his/her personal particulars and their specific roles and responsibilities on this project.

12. **Curriculum Vitae (CV):** The FA must provide the date(s) of award of PhD and/or other degree(s) (date on degree certificate) and five most recent publications (including those submitted or in press). Other applicant(s) is/are also required to list the five most recent publications.

13. **Research Ethics/Safety Approval/Consent for Accessing Third-party Data:** Select the appropriate option button to confirm if approvals for the respective ethics, safety issues and/or consent for accessing third-party data is required, is being sought or has been obtained from the proper authorities. Provision of ethical approvals and/or consent is not required at the time of submission. FAs shall submit such approvals and/or consent within 12 weeks (or as specified by the Secretariat) from the date of decision letter for the application, and should ensure that the regulatory/ethics approval(s)/evidence for accessing third-party data bear(s) the same project title as that in his/her application approved by the Research Fellowship Assessment Panel. The protocol/scope included in such approval(s)/evidence for accessing third-party data must be the same as that in the application.
If you are unable to provide such documentary evidence or information by the deadline stated, or the information is found to be incomplete or inaccurate, the processing of the application may be delayed or the application may be rejected. Letters of exemption for non-applicable regulatory committees are not required. For details regarding Independent Ethics Committee/Institutional Review Board (IEC/IRB), please refer to Section 3 of the following document published by the International Council for Harmonisation at https://www.ich.org/page/efficacy-guidelines.

Clinical Trials: Under Regulation 36B of the Pharmacy and Poisons Regulations (Cap.138A), for the purpose of conducting a clinical trial on human beings or medicinal tests on animals using pharmaceutical products, a Certificate for Clinical Trial/Medicinal Test issued by the Pharmacy and Poisons Board must be obtained prior to the commencement of the research project. According to Section 129 of the Chinese Medicine Ordinance (Cap. 549), for the purpose of facilitating the conduct of a clinical trial or medicinal test of any proprietary Chinese medicine, a Certificate for Clinical Trial and Medicinal test issued by the Chinese Medicines Board must be obtained prior to the commencement of the research project. FAs are strongly advised to confirm the need for the relevant certificate as early as practical (preferably before/during the submission of applications to the HMRF) to avoid delay in project commencement. If a relevant certificate is required, failure to present a valid certificate by a specified deadline, may result in the application being rejected. For further details, please refer to the relevant guidance notes available in the websites of the Department of Health’s Drug Office and the Chinese Medicine Regulatory Office.

Hospital Authority (HA)’s Data Access: Approval from the Central Panel on Administrative Assessment of External Data Requests of HA is required for using HA data where applicable. Please visit http://www3.ha.org.hk/data/Provision/Index/ for details. Use of Clinical Data Analysis & Reporting System (CDARS) for research purpose must only be conducted with written approval by appropriate Research Ethics Committee.

14. Similar or Related Proposals:

Failure to make declaration may lead to application not eligible for further processing and shall be subject to penalty. Please refer to the Management of Track Records of Applicants which is available on the Secretariat’s website.

14a(i). FA and Co-A(s) listed in Section 11 of PART I must indicate whether they have submitted the current or similar application(s) (funded or rejected) to the HMRF or other funding agencies (local or overseas) in the past three years from the closing deadline. The following information should be uploaded to the e-Form: (i) a copy of each previously submitted similar application [in PDF format and maximum file size (1MB)]; and (ii) all comments raised by the funding agency and point-by-point responses to address these comments (if any) [in PDF format and maximum file size (600KB)].

14a(ii). FA and Co-A(s) listed in Section 11 of PART I must indicate whether they intend to submit the current or similar application(s) to the HMRF or other funding agencies (local or overseas) in the next six months from the closing deadline. The details of the similar application(s) and the similarities and differences between the current application and the similar application(s) should be provided.

At any time before the announcement of the funding decision of the current application, applicants are required to notify the Secretariat immediately by email to rfs@healthbureau.gov.hk about: (a) any other similar application(s) submitted to other funding agencies (local or overseas) in addition to those listed in the e-Form; (b) the funding decision of any similar application(s) once available, or (c) change in funding status, e.g. project is withdrawn or terminated.
15. Other Applications and Track Record:

15a(i). FA must indicate whether the FA has been awarded grant(s) currently ongoing or completed from the HMRF or other funding agencies (local or overseas) in the past three years from the closing deadline. FA should provide details of the funded project(s) undertaken by him/her in Principal Applicant (PA)/Co-A capacity, the similarities and differences between the current application and the funded project(s), and publications/scientific papers directly resulting from the funded project(s) as well as check the box if the project is funded by the HMRF.

15a(ii). All Co-A(s) listed in Section 11 of PART I must indicate whether they have been awarded grant(s) currently ongoing or completed from the HMRF or other funding agencies (local or overseas) in the past three years from the closing deadline. They should provide details of the funded project(s) undertaken by them in PA capacity, the similarities and differences between the current application and the funded project(s) and publications/scientific papers directly resulting from the funded project(s) as well as check the box if the project is funded by the HMRF.

PART J – DECLARATION AND AUTHORISATION

The e-Form must be signed by the FA, the mentor, the Head of Department, and authorised persons on behalf of the AI and finance office via the eGMS.

To the best of knowledge of FA, the AI, and any of the applicants listed in Section 11 of PART I or any of the proposed personnel and sub-contractors/agencies to be engaged in the project, FA should declare any actual or perceived conflict of interest, such as receiving any funding or assistance directly or indirectly from industries (including but not limited to tobacco related businesses, infant formula companies, or organisations funded by such businesses), or using the grant monies (budgeted under Sections 10 of PART I) to purchase products or services from businesses owned wholly or partly by from the AI or any of the applicants listed in Section 11 of PART I, or any of the proposed personnel and sub-contractors / agencies to be engaged in the project.

Mentor: Mentor must be a full-time staff of the AI. For Stream B, the mentor can be a full-time staff of the respective medical school of the Chinese University of Hong Kong and the University of Hong Kong. He/She is required to state his/her support and role to the FA throughout the fellowship period. A copy of the CV and signature of the mentor should be attached as PDF file(s) to the e-Form. The limit of the total file size is 1MB.

Signature of Co-As: The research proposal must be endorsed by all Co-As. If Co-A(s) is/are not an existing eGMS user, please register a Co-A account from eGMS login page. If the FA has attached Co-A(s)’ physical signature(s) (an email confirmation from Co-A(s) is acceptable), the relevant electronic endorsement is not required (i.e. the eGMS will not send out notification email to the Co-A(s) concerned for signing.). The limit of the file size is 1MB.

The FA should make sure that all Co-As endorse the application as the track record for the whole project team might be adversely affected if misconduct/fraud is found. All project team members should be well aware of their participation and roles and responsibilities in the project. Please refer to the Management of Track Records of Applicants which is available on the Secretariat’s website.

AI: The e-Form must be endorsed by (i) the Head of Department, (ii) the officer who will be responsible for administering the fellowship that may be awarded; and (iii) the finance officer who will be responsible for overseeing/administering the related finance matters, via the eGMS.

The email address of the Head of Department must be entered twice to minimise incorrect entries. Please attach the nomination letter from the President/Vice-Chancellor (for Stream A)/Hospital Chief Executive (for Stream B) as a PDF file to the e-Form. The limit of the file size is 1.5MB.
Quick Guide for Completing the Electronic Application Form

(A) Minimum system requirements

To use the electronic Grant Management System (eGMS), your computer should meet these minimum system requirements -

1. Google Chrome\textsuperscript{1} or Mozilla Firefox\textsuperscript{2} or Safari 7+
2. Enable Transport Layer Security (TLS) version 1.2 in the browser
3. 1280 x 1024 Minimum Screen Resolution
4. Microsoft Office Word 2007 or above (for opening MS Word Offline Application Form)

\textsuperscript{1} Recommended version for Google Chrome is 57 or above.
\textsuperscript{2} Recommended version for Mozilla Firefox is 51 or above.

Operating system

1. Microsoft Windows 8.1/10
2. Apple Mac OS x 10.5 or above
3. Fedora Linux Core 7 or above

Transport Layer Security (TLS)

Since old Transport Layer Security (TLS) versions may cause security risks, we highly recommend eGMS users to enable TLS version 1.2 in their browsers. Please refer to the details in Appendix A(i).
(B) Access to eGMS

1. Address: https://rfs.healthbureau.gov.hk/eGMS/

2. Login account: If Fellowship Applicant (FA) has not registered for a Principal Applicant (PA) account in the eGMS, please register on the login page of the eGMS (see below). FA will have to wait for approval from his/her Administering Institution (AI) for the creation of PA account.

3. If co-applicant is not an existing eGMS user, he/she is encouraged to register a co-applicant account from the eGMS login page in advance. Their electronic endorsement of the proposal will be required after submission of the application by FA to AI.
(C) Complete the Web-based Online e-Form

Reminder:
Please update your eGMS profile before filling in the e-Form, as your latest personnel information will be auto filled up in the e-Form (Part A and Part I – Section 11 Project Team accordingly).

(i) Click Project > Application > View Application

(ii) Click the tab “Application Call”

(iii) Click “Complete Web-based Online e-Form”

(Note: Useful templates for completing Sections 7, 14 and 15 can be downloaded here. Please refer to Pages 6-7 of this Quick Guide.)
(iv) Read the Terms of Use, tick the boxes and click “Continue”

(v) Click relevant tab to go to relevant Section directly for completing the details

Attention: The eGMS will be logged out automatically if the screen has been idling for 20 minutes. Please be reminded to save the e-Form regularly.
(vi) Click “Save” to save the e-Form and “Yes” for confirmation.

(vii) An acknowledgment message will be displayed on the top showing the e-Form has been saved with a temporary Ref. No.

Web Form is saved with Ref. No. (Temporary Ref. No.)
Supplementary Information for Completing Sections 7, 14 and 15 of the e-Form

1. Go to Application > Application Call page

For Part I – Section 7, after completing the research proposal MS Word template, please convert it into a PDF file and click “Browse” to select the PDF file for uploading it onto Section 7.
For Part I – Sections 14 and 15, after completing the excel file of the relevant records from you and project team members, please click “Browse” to select the excel file for uploading it onto Sections 14 and 15.

An example in Section 14a(i) stated below -
(E) Need Help?

1. If some fields are not completed according to the format, error message box will pop up when you click the “Submit” button in the application form. Please edit the application form again and re-submit.

2. For enquiry, please contact the Research Fund Secretariat by email (egmsenquiry@healthbureau.gov.hk), or by phone at 3427 3344 during office hours.
1. **Google Chrome**

(a) We recommended eGMS user to use version 57 or above. If you are using Google Chrome version 22 or above, TLS 1.1 is automatically supported. TLS 1.1 and 1.2 are automatically enabled from version 29 or above.

(b) To find out which version of google chrome you are using -
   i. Open your Chrome browser
   ii. Click the “More” icon at the right corner of the address bar.
   iii. At the bottom of the menu, click “Help”, then click “About Google Chrome”
   iv. The version of Google Chrome will be shown

(c) To update Google Chrome –
   i. Chrome will check for any updates and immediately download them when you open the About Google Chrome page
   ii. Close your browser and restart Chrome to complete the updates
2. Mozilla Firefox

(a) Set the TLS version of the browser

i. Open Firefox browser

ii. In the address bar, type “about:config” and press “Enter”

iii. In the Search field, enter “tls”. Find and double-click the entry for “security.tls.version.max”

iv. Set the integer value to 2 to force a minimum protocol of TLS 1.1

v. Set the integer value to 4 to force a maximum protocol of TLS 1.3

vi. Click “OK”

vii. Close your Firefox browser and restart your Firefox browser

viii. Recommended version 51 or above
(b) To find out which version of Firefox browser you are using –
   i. Open your Firefox browser
   ii. At the top of your Firefox browser, to the right of the address bar, click the “Menu” icon
   iii. At the bottom of the menu, click “Help”, then “About Firefox”
   iv. The version of Firefox browser will be shown
      (Note: Updated version will be downloaded automatically)
   v. Close your browser and restart Firefox browser to complete the update

3. Safari

   There are no options for enabling SSL protocols. If you are using Safari version 7 or above, TLS 1.2 is automatically enabled.
ITEMS ALLOWABLE AND UNALLOWABLE FOR REIMBURSEMENT

1. Items Allowable

1.1 Training Costs
Funds can be requested to support the registration/tuition fees for the training/attachment. Up to two economy class roundtrips air passage by most direct route, accommodation expenses and subsistence allowance can be supported. The travel expenses and allowance should follow the AI’s established procurement procedures and standard rates.

1.2 Staff Costs
Funds may be requested for the salaries of the reliever of the FA, research staff and other supporting staff. Reliever must be at the rank of the FA or below to take over the teaching duties of the FA. Staff cost (full or part-time) includes salary and mandatory provident fund of staff employed. For part-time staff, the part-time effort must meet at least the 20% threshold.

For instance, the Research Council is prepared to reimburse 20% of staff salary for a research or support staff provided that it is used for 20% of time on the project. When applying for reimbursement, the FA should specify the particular staff to which the costs relate and the percentage of time the staff spent on the project.

1.3 Facilities

1.3.1 Computer equipment, software and computing consumables
The FA should provide valid justifications for purchase of software and computing equipment/facilities. Local departmental computing charges which can be assigned to the research project will be considered as an allowable cost, including stationery supplies and software licences. Expenses for computing equipment specific for the project, such as notebook computers, software, etc., will be covered. Central computing facilities remain the responsibility of the AI.

1.3.2 Equipment
Maintenance costs, service contracts and spare parts for equipment not purchased specifically for the project but used for a significant portion of the project will be paid on a pro rata basis.

For example, a piece of equipment that is used 50% of the time for an approved project and 50% of the time for other purposes will be covered for half of the maintenance costs. When applying for maintenance costs, the FA should specify the piece of equipment to which the costs relate and the percentage of time the equipment will be in use on the project.

Equipment costing less than HK$10,000 should be applied for and charged under the heading “Other Expenses”.

1.4 Administrative services

1.4.1 Cost of Audited Account
HK$5,000 per project for grant amount between HK$100,001 and HK$1,000,000.
HK$10,000 per project for grant amount over HK$1,000,000.

1.4.2 Administrative expenses
Costs such as printing, telephone, fax, postage, etc. are allowed where they are separately metered and can be attributed to a specific research project.

1.5 Others

1.5.1 Travel and subsistence
All reasonable costs associated with conference attendance relating to the research project are supported up to a maximum of HK$10,000 (e.g. registration, travel, accommodation, subsistence and preparation of materials).

The cost of local travel for research staff to attend clinics, training sites, patients’ homes, etc., for purposes directly related to the research project are allowed.

1.5.2 Publication costs
The cost of publishing the results of research grant up to a maximum of HK$20,000 is allowed.

1.5.3 Reference materials
Purchase of essential reference materials, e.g. textbooks, downloads of articles, cost up to a maximum of HK$5,000 is allowed.

1.5.4 Incentives
The purchase of gifts, coupons, etc., as incentives/tokens of appreciation for study participants is allowed if it is well justified with valid reason(s). A governance system shall be in place to adequately monitor the disbursement of incentives to ensure accountability and traceability.

2. Items Unallowable

2.1 Employment of all applicants listed in Section 11 of PART I of the Application Form.

2.2 Employment of established academic and service staff (e.g. Assistant Professor and Post-doctoral Fellow) supported by other funds (e.g. University Grants Committee/Research Grants Council).

2.3 General premises costs including -
  • construction and maintenance of buildings
  • land purchase/lease
  • refurbishment/renovation/adaptation
  • basic services and utilities (including heating, lighting and communications)
  • lease/rent/rates
Annex 2 – Appendix B

- insurance
- cleaning/pottering/security/safety

2.4 Cost of unspecified research work.

2.5 Cost of work incurred before the commencement of the project date, or the writing-up of such work.

2.6 Cost of literature surveys.

2.7 Remuneration of undergraduates (other than payment for vacation work under the existing award if such earnings are allowed by the AI).

2.8 Any costs associated with a research student supported by other funds (e.g. University Grants Committee/Research Grants Council).

2.9 Cost of the facilities of the AI to which the applicants and hired staff normally have free access.

2.10 Staff benefits such as gratuity, bonus, severance payment and untaken leave of staff employed.

2.11 All kinds of insurance costs, such as medical insurance, labour insurance, clinical trial insurance.

2.12 Costs for clearance/approvals/certificates from relevant ethics committees/IRBs and regulatory bodies.

2.13 Entertainment and overseas visits not directly related to the research project.

2.14 Advertising costs for recruitment of staff.
FINANCIAL ARRANGEMENTS

1. Approval of Fellowship

   1.1 Approved fellowships are funded on actual basis with a pre-approved cash ceiling.

2. Payment of Fellowship Support

   2.1 An annual certified financial statement must be submitted covering the 12-month period from the project commencement date. The AI shall submit an annual certified financial statement within 2 months following the first anniversary of the commencement date, and shall submit the audited account within 6 months after the end date or within 60 days after termination of the project, whichever is earlier.

   2.2 Final claim for reimbursement of expenditures

   Claims for reimbursement of expenditures may only cover the period between the commencement date and end date of the fellowship. A final reimbursement claim form shall be submitted together with the audited account and the final report.