Health and Medical Research Fund:

2025-26 Annual Report

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Health and Medical Research Fund

On 9 December 2011, the Legislative Council (LegCo) Finance Committee approved a new commitment of $1,415 million for setting up the Health and Medical Research Fund (HMRF), by consolidating the former Health and Health Services Research Fund (HHSRF) and the former Research Fund for the Control of Infectious Diseases (RFCID), with a broadened scope for funding health and medical research in Hong Kong. Research projects funded under the former HHSRF and the former RFCID have been subsumed under the HMRF.

On 28 May 2016, the Finance Committee approved to increase the approved commitment for the HMRF from $1,415 million by $1,500 million to $2,915 million to sustain its operation for another five years from 2017-18 to 2021-22 and expand the scope of the HMRF to incorporate the functions of the former Health Care and Promotion Fund[1] (HCPF). After the consolidation of the HMRF and the HCPF on 28 April 2017, the HCPF and the HCPF Committee (the governing body of the HCPF) were renamed as the Health Care and Promotion Scheme (HCPS) and the Health Care and Promotion Committee (HCPC) respectively.

To further streamline the operation of the HMRF, on 1 August 2018, the HCPC and its Promotion Sub-Committee (technical arm of the HCPC) were consolidated and subsumed under the Grant Review Board (GRB, technical arm of the Research Council (RC)) for providing technical support to the RC for the HCPS. The RC thus became the sole governing body of the HMRF to provide strategic steer for all funding schemes (including the HCPS) under the HMRF. In December 2018, the annual open call for investigator-initiated research projects and the annual open call for HCPS were consolidated into one single open call.

On 28 April 2021, the LegCo approved to further increase the commitment of the HMRF by $1,308 million (from $2,915 million to $4,223 million) to sustain the HMRF's operation and enhance the funding scope of HMRF.

The HMRF aims to build research capacity and to encourage, facilitate and support health and medical research to inform health policies, improve population health, strengthen the healthcare system, enhance healthcare practices, advance standard and quality of care, and promote clinical excellence, through generation and application of evidence-based scientific knowledge derived from local research in health and medicine. It also provides funding support to evidence-based health

[1] The Health Care and Promotion Fund (HCPF) was established in 1995 to provide financial support for activities related to health promotion, preventive care and related research; and patients in need of treatment not available in Hong Kong, particularly in respect of rare diseases. In 2006, the HCPF Committee decided to revise the scope the HCPF to focus primarily on health promotion activities and disease prevention.

promotion projects that help people adopt healthier lifestyles by enhancing awareness, changing adverse health behaviours and creating a conducive environment that supports good health practices.

The HMRF considers funding health and medical research/projects in the following areas –

(a) public health, human health and health services (e.g. primary healthcare, non-communicable diseases, Chinese medicine);

(b) prevention, treatment and control of infectious diseases with public health implications;

(c) advanced medical research which applies advanced technologies to facilitate the translation of knowledge generated from health and health services or infectious diseases studies into clinical practice and to inform health policy; and

(d) health promotion that facilitates mobilisation of local resources to promote good health and prevention of illness in the community.

The HMRF provides funding support for the following types of projects –

(a) Investigator-initiated Projects (funding ceiling: $1.5 million per project) – to support research studies and health promotion projects from individual applicants in response to "HMRF Open Call" invitations for grant applications guided by reference to the thematic priorities.

(b) Government-commissioned Programmes – to support specific programmes commissioned to, inter alia, build research capacity, fill knowledge gaps, support policy formulation, address specific issues, assess needs and threats, etc. Funding may cover research projects, facilities, infrastructure and other capacity building initiatives as appropriate.

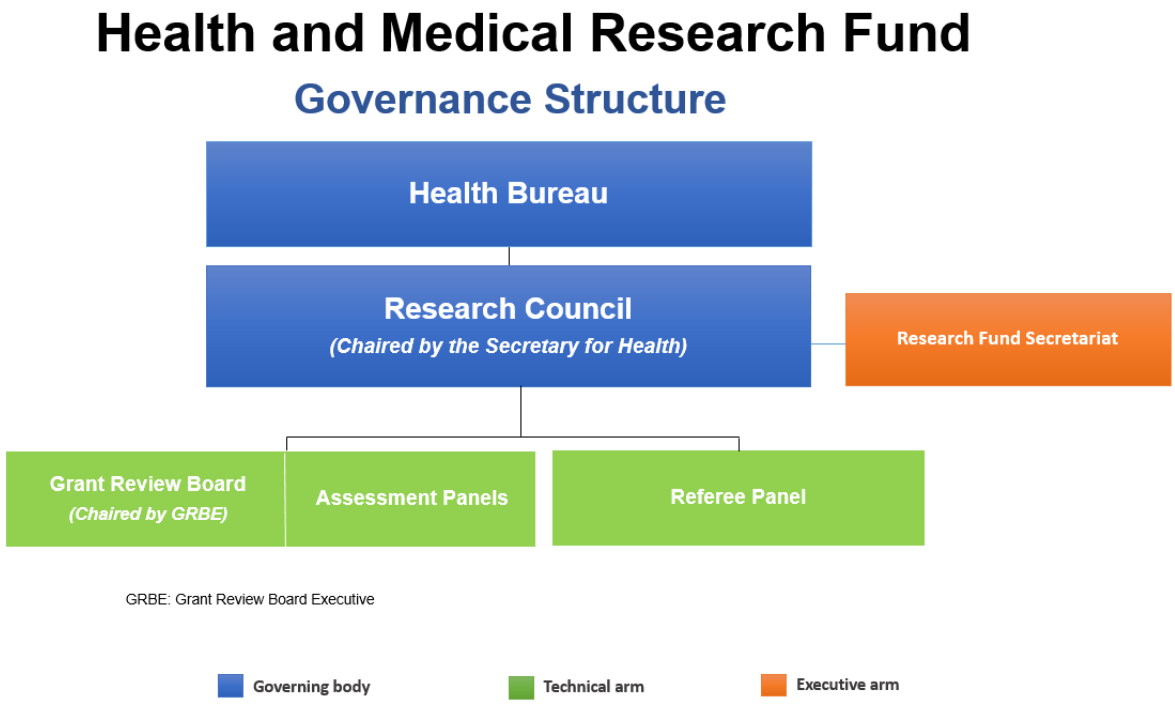
(c) Research Fellowship Scheme (funding ceiling: $1.2 million per award) – to enhance research capability and build research capacity to facilitate the translation of knowledge into formulation of health policy and clinical practice. Research fellowships will be awarded to eligible candidates covering a range of research areas and specialties on the advice of the RC.

In general, members of any discipline or profession in health or health-related field can apply for funding. Grants may be awarded to locally based tertiary institutions, hospitals, medical schools, non-governmental organisations and other

appropriate centres, units or services. Members of other disciplines, such as social welfare and education may also apply if the proposed projects are within the ambit of the HMRF.

On completion of approved projects, the final and dissemination reports will be assessed before dissemination via the website (https://rfs.healthbureau.gov.hk), the Hong Kong Medical Journal, circulation to public sector end-users (e.g. Department of Health, Hospital Authority), and at the monthly Journal Club meetings. In addition, the HMRF organises the Health Research Symposium every three years to provide a platform for experts, researchers, healthcare professionals and community partners to share their knowledge and achievements in various research and health promotion topics, and acknowledge outstanding projects funded by the HMRF.

Governance



Chaired by the Secretary for Health, the RC is responsible for providing strategic steer for funding health and medical research and health promotion projects, and overseeing the management of the HMRF including the allocation of funds for approved grants. Its terms of reference are as follows –

(a) to determine research agenda and funding control mechanism of the HMRF and other funding schemes to be determined by the Health Bureau;

(b) to approve procedures for inviting, and criteria for vetting grant applications;

(c) to approve standard terms and conditions for grant holders;

(d) to approve funding allocation after peer-review process;

(e) to approve processes for the ongoing monitoring and evaluation of approved research/projects;

(f) to establish the GRB and Assessment Panel to carry out the technical work of the RC;

(g) to delegate its authority to its committee at its discretion;

(h) to oversee research translation of funded projects; and

(i) to supervise the management of the relevant funds.

The RC is supported by the Grant Review Board (GRB), the GRB Executive (GRBE)[2], Assessment Panels (APs) and Referee Panel as technical arms which comprise local and non-local experts from a wide spectrum of medical, health, social and analytical sciences to make recommendations on funding applications and assess the progress and outcomes of funded projects.

The membership of the RC and its supporting committees can be found at ***Appendix A***. Their operation is supported by the Research Fund Secretariat of the Research and Data Analytics Office under the Health Bureau.

Highlights of 2025-26

Investigator-initiated Projects

The HMRF since its establishment in 2011 has supported 2,437 investigator-initiated projects, of which 1,312 projects have been completed and closed. These projects cover most research topics under the thematic priorities on –

(a) Health and Health Services – prevention and management of major non-communicable diseases including cardiovascular illnesses, cancers, chronic respiratory diseases, diabetes and mental disorders; modifiable lifestyle factors including tobacco use, internet gaming disorder, harmful use of alcohol,

[2] The GRBE comprises Chairpersons of the GRB.

and physical inactivity; mental health; sleep deprivation; reproductive health; psychosocial burdens of carers; health services including primary healthcare, chronic disease management, health economics, preventive care for children, elderly care, palliative care and Chinese medicine;

(b) Infectious Diseases – epidemiology, surveillance and control of emerging and re-emerging infectious diseases, transmission dynamics, pathogen characteristics, mechanism of infection, diagnosis and therapeutics, antimicrobial resistance, antimicrobial stewardship, host immunology, vaccine research, health economics and promotion of vaccination programme;

(c) Advanced Medical Research – use of advanced technologies to understand the prevalence, risk factors, causes, diagnosis, treatment and prevention of a wide range of human diseases and conditions, including development of telemedicine, use of artificial intelligence and deep learning models for outcome prediction, improving treatment response and disease management, application of genetics and genomics approaches for the development of personalised medicine; and

(d) Health Promotion – reduction of tobacco/alcohol-related problems, strengthening of preventive care in children, adolescents, elderly and ethnic minorities, promotion of healthier lifestyles, empowerment of patients in chronic disease management, mental health promotion, injury prevention and breastfeeding, women's health and sexual health.

During the year, 71 investigator-initiated projects were completed and closed.

Annual Open Call for Investigator-initiated Projects

The 2025 HMRF Open Call for Investigator-initiated Projects was announced in December 2025. Only **clinical research and research on infectious diseases with public health implications** will be supported as HMRF emphasises the importance of translational potential of research findings. Research proposals on infectious diseases with public health implications from bench to bedside and at community level, and with translational value are supported. Clinical research based on Chinese medicine theory or clinical research on Chinese medicine theory and methodology will also be supported. Those falling under the thematic priorities[3] will be given higher priority for funding. In accordance with the thematic priorities and the established assessment criteria[4], the GRB's

[3] https://rfs.healthbureau.gov.hk/images/HMRF/ResearchAreas_Themes.pdf.

[4] Grant applications are assessed through a stringent two-tier peer review process, first by the Referee Panel, and then by the Grant Review Board. The assessment criteria include scientific merit and originality, local

recommendations on funding applications will be considered by the RC. Funding results will be announced in September 2026.

Government-commissioned Programmes

Since the establishment of the HMRF, 29 commissioned programmes (covering about 298 individual studies) have been approved covering the following key areas –

(a) **Infectious diseases** including studies on prevention, control and treatment of infectious diseases, including COVID-19, to address important research areas in transmissibility and infectivity of the virus, effective detection and surveillance, prevention strategies of the disease, development of vaccines, treatments and therapies, promotion of the acceptance, uptake and adherence to public health and social measures, including influenza vaccination programmes;

(b) **Non-communicable diseases** including evaluation of Government's cancer screening pilot programmes; surveys on mental health morbidity in different age groups; evaluation of the Hong Kong Genome Project and the Chronic Disease Co-Care Pilot Scheme; and using Artificial Intelligence in lung cancer screening for high-risk non-smokers;

(c) **Life-course research and cohort studies** targeting paediatric population such as nurturing a breastfeeding friendly community to elderly care including review on end-of-life care and service models to improve quality of healthcare for the elderly; and various local cohorts relating to young-onset diabetes, late-onset dementia, non-communicable diseases in "Children of 1997" birth cohort; and

(d) **Research on policy issues** including review on healthcare manpower planning; review on regulatory framework for healthcare professional development; evaluating the impact of tobacco control policies in Hong Kong; mental health promotion through community partnership programmes; and application of health economic methods in Hong Kong's healthcare system.

Eighteen programmes have been completed and closed.

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relevance/impact, translational potential/value and feasibility of the proposals, sustainability of health promotion projects, capacity of the administering institutions, track record of applicants, value for money and research ethics, where applicable.

Research Fellowship Scheme

The Research Fellowship Scheme has been launched since 2015 to support researchers or professionals in their early to mid-career, particularly healthcare professionals to enhance their skills in public health and health services research. Tertiary institutions funded by the University Grants Committee are invited to nominate fellowship applicants annually. In order to provide more training opportunities to build up the research capacity of Hong Kong to meet future needs and challenges, invitation for applications has been extended to Prince of Wales Hospital and Queen Mary Hospital starting from the 2021 application round. The grant ceiling per award is $1.2 million including up to $0.4 million[5] for non-local training/attachment relating to health services or public health, in particular public health policy topics. 107 awards have been approved since the implementation of the Scheme.

The 2025 Open Call was issued in October 2025 and closed on 5 January 2026. A total of 36 applications were received. The Research Fellowship Assessment Panel's recommendations on funding applications will be considered by the RC. Funding results will be announced in June 2026.

During the year, four research fellowship projects were completed and closed.

Research translation impact

The HMRF attaches great importance to the translational value of the funded projects, and they have been yielding fruitful results in translating research into practice. From the outcome evaluation survey conducted on 124 research projects in 2025, it was revealed that:

(a) Close to 70% of the funded projects had their research findings published in peer-reviewed journals, showcasing that the HMRF is effective in supporting knowledge generation;

(b) 40% of the funded projects received additional funding for further research, with each project receiving an additional funding amounting to seven times that of the HMRF grant on average;

(c) Findings from HMRF-funded projects consistently shape the formulation of healthcare policies and practices. A study on the effectiveness of an orthogeriatric multidisciplinary care model for patients with fragility hip fractures showed positive results on clinical outcomes (e.g. reduced length of

[5] Since the 2019 Open Call for Research Fellowship Scheme, the budgets for training plan and research plan have been revised from $0.2 million to up to $0.4 million and about $1 million to $0.8 million respectively.

stay in both acute and rehabilitation hospitals, higher functional recovery at discharge, reduced chest infections), system efficiency (e.g. streamlined patient transfers between acute and rehabilitation hospitals), and cost-effectiveness through shorter hospital stay, with most Hospital Authority (HA) clusters having adopted this model as the standard of care. Another study evaluating the clinical efficacy and cost-effectiveness of online cognitive behavioural therapy for anxiety and depression has informed service development in the community setting through the Jockey Club TourHeart+ Project (JCTH+), which now forms part of the counselling services at eight local universities and colleges, enabling their students to use the online-offline hybrid platform and to connect with face-to-face counselling services.

Research Translation Strategy

In September 2025, the RC endorsed the Research Translation Strategy (Strategy), subsequent to a consultation exercise with diverse stakeholders during which strong support was received. The Strategy covers four priorities, namely:

(a) To shape research translation culture;
(b) To build quality partnership;
(c) To promote end-of-grant translation; and
(d) To monitor and evaluate research outcomes.

Several research translation initiatives have been implemented under the Strategy to promote research translation for HMRF. These include (i) capacity building initiatives, e.g. sharing sessions at HA clusters to introduce HMRF and promote research collaboration; (ii) enhanced reporting requirements, whereby all project teams are required, from July 2025, to submit bilingual dissemination report in the format tailored to their target end-users to strengthen research dissemination, e.g use of infographic and plain language summary; (iii) ongoing stakeholder engagement, including discussions with public sector end-users to explore mechanisms to promote research collaboration and translation, as well as meetings with faculty communications teams of universities to strengthen coordination; (iv) establishment of new dissemination channel through the launch of the HMRF LinkedIn page in October 2025, which serves as a professional platform for brand building and providing updates on HMRF activities; (v) introduction of the HMRF logo to strengthen visibility.

Financial Position

The cash balance of the HMRF as at 31 March 2026 is $1,499.47 million, with an uncommitted funding balance of $234.53 million (i.e. funding available for new projects/programmes). The financial position of the HMRF for the 2025-26 financial year is at ***Appendix B***.

Membership of the Research Council and its Supporting Committees (as at 31 March 2026)

(A) Research Council

Chairperson

Secretary for Health (or Permanent Secretary for Health)

Non-official Members

Prof Engle Angela CHAN

Prof Karen CHAN Kar-loen

Prof Paul CHAN Kay-sheung

Prof Anthony CHAN Tak-cheung

Prof Ivan HUNG Fan-ngai

Dr Raymond LAI Wai-man

Prof Linda LAM Chiu-wa

Prof Tatia LEE Mei-chun

Prof LEUNG Wai-keung

Prof Ronald MA Ching-wan

Dr Alexander NG Man-tat

Prof Karl TSIM Wah-keung

Prof Samuel WONG Yeung-shan

Ex-officio Members

Secretary for Innovation, Technology and Industry (or representative)

Director of Health (or representative)

Commissioner for Primary Healthcare (or representative)

Secretary-General of the University Grants Committee (or representative)

Chief Executive of the Hospital Authority (or representative)

Dean of the Faculty of Medicine of the Chinese University of Hong Kong (or representative)

Dean of the Faculty of Health and Social Sciences of the Hong Kong Polytechnic University (or representative)

Dean of the Li Ka Shing Faculty of Medicine of the University of Hong Kong (or representative)

President of the Hong Kong Academy of Medicine (or representative)

Convenor of the Institute for Medical Advancement and Clinical Excellence (or representative)

Secretary

Head (Research and Data Analytics Office)
Health Bureau

(B) Grant Review Board Executive

Terms of Reference:

The terms of reference of the Grant Review Board Executive are –

(a) to assess and recommend action (on behalf of the Grant Review Board (GRB)) on requests for additional funds, budget revision and/or reallocation, changes to study design or methods, and changes to the principal applicant or administering institution;

(b) to monitor the quality of the peer review including the assignment of referees to grants for review;

(c) to monitor the response of grant applicants and grant holders to requests by the GRB;

(d) to evaluate and advise the GRB regarding changes to the grant or final report review process; and

(e) to advise the Research Fund Secretariat on the monitoring of the progress of current research/projects.

Non-official Members

Prof Engle Angela CHAN

Prof Juliana CHAN Chung-ngor

Prof Karen CHAN Kar-loen

Prof Paul CHAN Kay-sheung

Prof Andrew CHAN Man-lok

Prof Philip CHIU Wai-yan

Prof Ivan HUNG Fan-ngai

Prof Karen LAM Siu-ling

Prof LAU Chak-sing

Prof LEUNG Wai-keung

Prof Gilberto LEUNG Ka-kit

Dr Grace LUI Chung-yan

Prof David MAN Wai-kwong

Prof Leo POON Lit-man

Dr Thomas TSANG Ho-fai

Prof Karl TSIM Wah-keung

Prof Stephen TSUI Kwok-wing

Prof WING Yun-kwok

Prof Martin WONG Chi-sang

Prof William WONG Chi-wai

Prof Samuel WONG Yeung-shan

(C) Grant Review Board

Terms of Reference:

The terms of reference of the Grant Review Board are –

(a) to advise Standard Operating Procedures for the grant submission and review process, and the assessment and dissemination of final reports;

(b) to review and assess applications and recommend projects for funding;

(c) to review and assess final and dissemination reports;

(d) to promote the development of research in the areas of health and health services, controlling infectious diseases, advanced medicine and health promotion in the wider community;

(e) to monitor the progress of approved projects; and

(f) to monitor the financial performance of approved projects.

Non-official Members

Prof John BACON-SHONE

Prof BIAN Zhao-xiang

Prof David Makram BISHAI

Prof CAI Jing

Prof CAI Zongwei

Prof CHAIR Sek-ying

Dr CHAN Wai-man

Prof CHAN Ying-shing

Prof Albert CHAN Chi-yan

Prof Allen CHAN Kwan-chee

Prof Chetwyn CHAN Che-hin

Prof Daniel CHAN Tak-mao

Prof Emily CHAN Ying-yang

Prof Esther CHAN Wai-yin

Prof Francis CHAN Ka-leung

Prof Jasper CHAN Fuk-woo

Prof Godfrey CHAN Chi-fung

Prof Henry CHAN Hin-lee

Prof Sherry CHAN Kit-wa

Prof CHANG Wing-chung

Dr David CHAO Vai-kiong

Ms Mabel CHAU Man-ki

Prof Kathryn CHEAH Song-eng

Prof CHEN Honglin

Prof CHEN Zhiwei

Prof CHEN Zigui

Dr Catherine CHEN Xiao-rui

Prof Alfred CHENG Sze-lok

Prof Cecilia CHENG

Prof CHEUNG Ching-lung

Dr CHEUNG Kin

Prof CHEUNG Yiu-fai

Prof Annie CHEUNG Nga-yin

Prof Jason CHEUNG Pui-yin

Prof Raymond CHEUNG Tak-fai

Prof Peter CHIU Ka-fung

Prof CHOW Chun-bong

Dr Ferrick CHU Chung-man

Mr Thomas CHU Sai-ming

Prof Winnie CHU Chiu-wing

Mr William CHUI Chun-ming

Prof Brian CHUNG Hon-yin

Prof CHUNG Pui-hong

Prof Benjamin John COWLING

Prof DENG Xin

Prof FENG Yibin

Prof Daniel FONG Yee-tak

Prof Kenneth FONG Nai-kuen

Prof Tony GIN

Prof James Francis GRIFFITH

Dr HO Lai-ming

Prof HO Pak-leung

Prof Joshua HO Wing-kei

Prof Rainbow HO Tin-hung

Prof HUANG Yu

Prof Wendy HUANG Yajun

Prof David HUI Shu-cheong

Prof Margaret IP

Prof JIN Dong-yan

Prof KHOO Ui-soon

Prof Jean KIM Hee

Dr Fanny KO Wai-san

Prof Timothy KWOK Chi-yui

Prof Daniel LAI Wing-leung

Prof Jimmy LAI Shiu-ming

Prof Timothy LAI Yuk-yau

Prof LAM Tai-hing

Prof Andrew LAM Kwok-cheung

Prof Cindy LAM Lo-kuen

Prof David LAM Chi-leung

Prof LAM Hugh Simon Hung-san

Prof Eddy LAM Kwok-fai

Prof Linda LAM Chiu-wa

Dr Mona LAM Wai-cheung

Prof Wendy LAM Wing-tak

Prof LAU Yu-lung

Dr LEE Chi-chiu

Prof Calvin LEE Kai-fai

Dr Jenny LEE Shun-wah

Prof Tatia LEE Mei-chun

Prof Alice KONG Pik-shan

Mr LEUNG Kwok-fai

Prof LEUNG Suet-yi

Prof LEUNG Ting-fan

Dr LEUNG Wing-cheong

Prof Angela LEUNG Yee-man

Prof Christopher LEUNG Kai-shun

Dr Gabriel Matthew LEUNG

Dr Pamela LEUNG Pui-yu

Prof Polly LEUNG Hang-mei

Prof Raymond LI Hang-wun

Prof William LI Ho-cheung

Prof LIN Chia-chin

Prof LIN Zhi-xiu

Prof LO Kwok-wai

Dr Raymond LO See-kit

Prof Alice YUEN LOKE

Dr Lobo LOUIE Hung-tak

Dr Annissa LUI Wai-ling

Dr Christopher LUM Chor-ming

Prof LUO Ruibang

Prof LYU Aiping

Prof Ronald MA Ching-wan

Prof Nancy MAN Kwan

Prof Enders NG Kwok-wai

Prof Irene NG Oi-lin

Prof Margaret NG Heung-ling

Dr Roger NG Man-kin

Prof Simon NG Siu-man

Prof Hextan NGAN Yuen-sheung

Prof Marco PANG Yiu-chung

Mr Tim PANG Hung-cheong

Prof Liona POON Chiu-yee

Prof Randy POON Yat-choi

Prof Timothy Hudson RAINER

Prof SHEN Jiangang

Prof Gilman SIU Kit-hang

Prof SZETO Cheuk-chun

Prof TAM Lai-shan

Dr Stanley TAM Kui-fu

Prof Kathryn TAN Choon-beng

Prof Nelson TANG Leung-sang

Prof Sydney TANG Chi-wai

Prof Julian Alexander TANNER

Prof Anthony TEOH Yuen-bun

Prof Agnes TIWARI Fung-yee

Prof TO Ka-fai

Prof Kelvin TO Kai-wang

Prof Kenneth TSANG Wah-tak

Prof TSE Hung-fat

Prof Eric TSE Wai-choi

Prof Gary TSE Man-kit

Dr Gene TSOI Wai-wang

Dr Wendy TSUI Wing-sze

Prof Kelvin WANG Man-ping

Prof WONG Yung-hou

Dr Cesar WONG Sze-chuen

Prof Eliza WONG Lai-yi

Prof Frances WONG Kam-yuet

Prof Gary WONG Wing-kin

Prof Joseph WU

Prof Justin WU Che-yuen

Dr Kitty WU Kit-ying

Prof WU Peng

Prof XU Aimin

Prof Bryan YAN Ping-yen

Prof Maurice YAP Keng-hung

Prof YEOH Eng-kiong

Prof YEUNG King-lun

Prof Michael YING Tin-cheung

Prof Benjamin YIP Hon-kei

Prof YIP Shea-ping

Prof Janelle YORKE

Prof Joyce YOU Hoi-sze

Prof YU Weichuan

Prof Doris YU Sau-fung

Prof YUEN Kwok-yung

Prof Richard YUEN Man-fung

Prof Patrick YUNG Shu-hang

Prof Benny ZEE Chung-ying

Prof ZHANG Zhang-jin

Ex-officio Members

Dr Rachel CHENG Pui-yan

Dr CHUANG Shuk-kwan

Dr Manny LAM Man-chung

Dr Kellie SO Pui-sheung

Dr Kitty HSE Mei-yin

Dr Joanna SO Shuk-kuen

Appendix B

Health and Medical Research Fund
Financial Report for the year ended 31 March 2026

		HK$	HK$
Cash balance as at 31.3.2025			**1,799,571,267.64**
Grants paid for the period from 1.4.2025 to 31.3.2026			(300,106,146.15)
HMRF	Commissioned project grants	(121,656,744.33)	
	Investigator-initiated project grants	(170,097,103.58)	
	Research Fellowship Scheme	(3,663,804.87)	
	Health Care and Promotion Scheme	(1,739,606.36)	
		(297,157,259.14)	
Direct operation costs paid		(2,948,887.01)	
		(2,948,887.01)	
Increase in commitment			-
Cash balance as at 31.3.2026			**1,499,465,121.49**
Less:			(1,264,933,363.59)
HMRF	Fund committed but not yet paid:		
	Commissioned project grants	(238,494,394.99)	
	Investigator-initiated project grants[1]	(965,626,051.94)	
	Research Fellowship Scheme	(60,812,916.66)	
	Health Care and Promotion Scheme[1]	-	
		(1,264,933,363.59)	
Uncommitted balance as at 31.3.2026			**234,531,757.90**

[1] The uncommitted fund balances as at 31 March 2026 have incorporated prior-period adjustments. These include:
(i) Recognition of Unspent Balances: $160,388.90 representing unspent balances from three closed projects under the Health Care and Promotion Scheme from FY2022/23.
(ii) Reclassification of Grant Payment: $1,629,407.17 representing the realignment of project commitments for six projects. These were previously categorized under the Health Care and Promotion Scheme and have been reclassified to Investigator-initiated Projects to reflect the financial position.
There is no impact on the total expenditure or the Fund's overall cash balance.