Electronic Grant Management System (eGMS)

Training Manual for
Fellowship Applicants (FAs)
Project Monitoring Module

(Research Fellowship Scheme)

If you have any queries or encounter difficulties relating to eGMS, please send email to egmsenquiry@healthbureau.gov.hk

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Abbreviations

AI = Administering Institution

CoA = Co-Applicant

DH = Department Head*

DR = Dissemination Report

eGMS = Electronic Grant Management System

EO = Executive Officer*

FA = Fellowship Applicant

FO = Finance Officer*

FR = Final Report

IR = Interim Report

PA = Principal Applicant

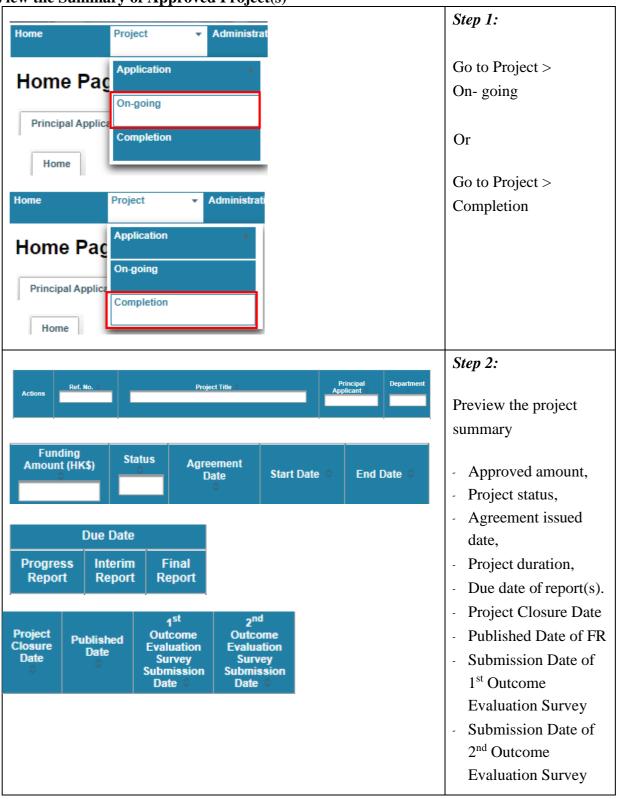
RFS = Research Fund Secretariat

RO = Research Officer*

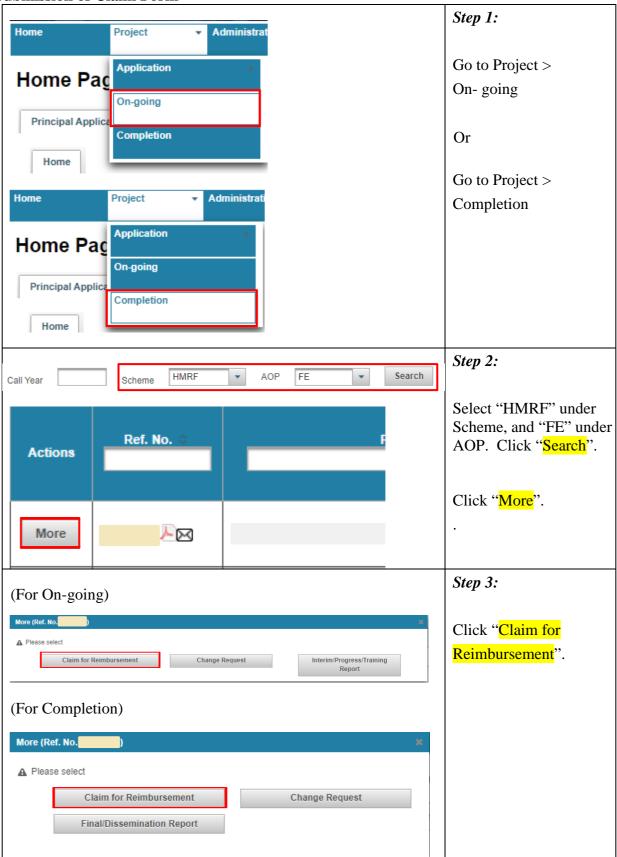
TR = Training Report

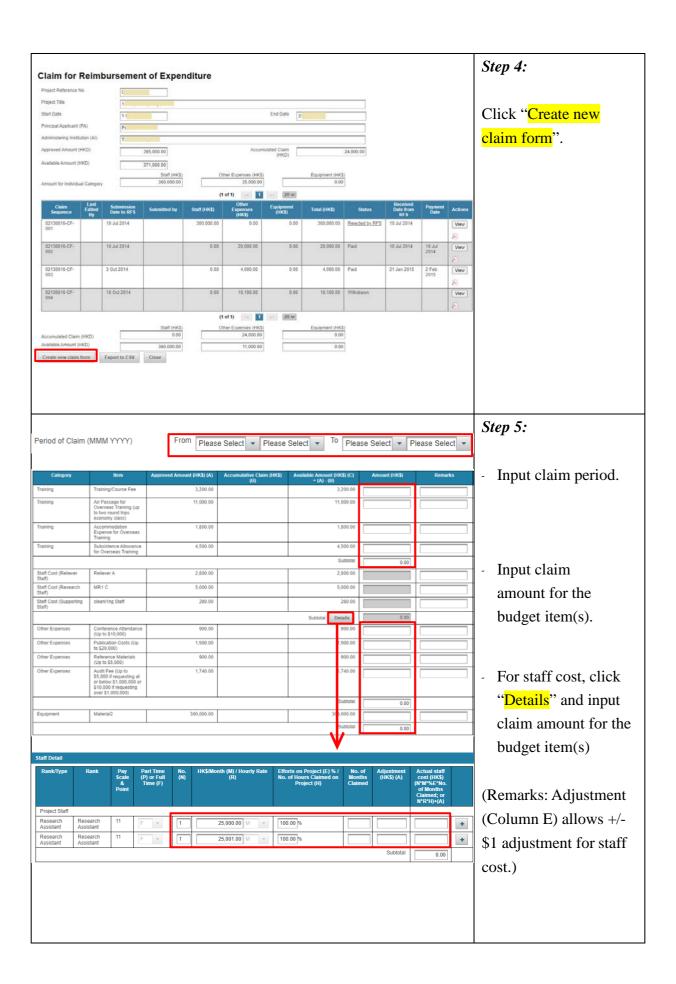
^{*} AI user

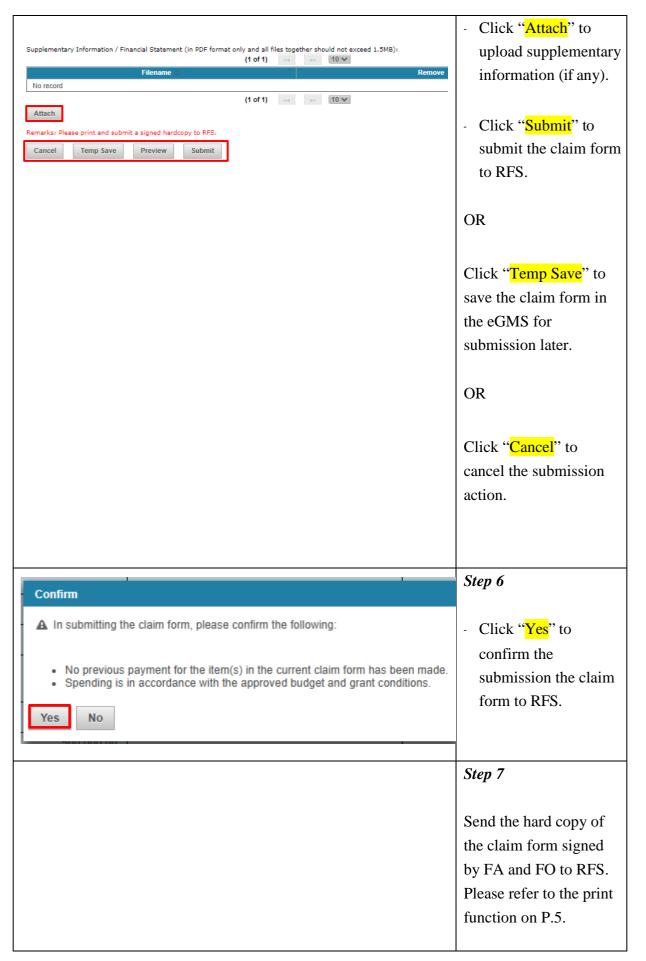
View the Summary of Approved Project(s)



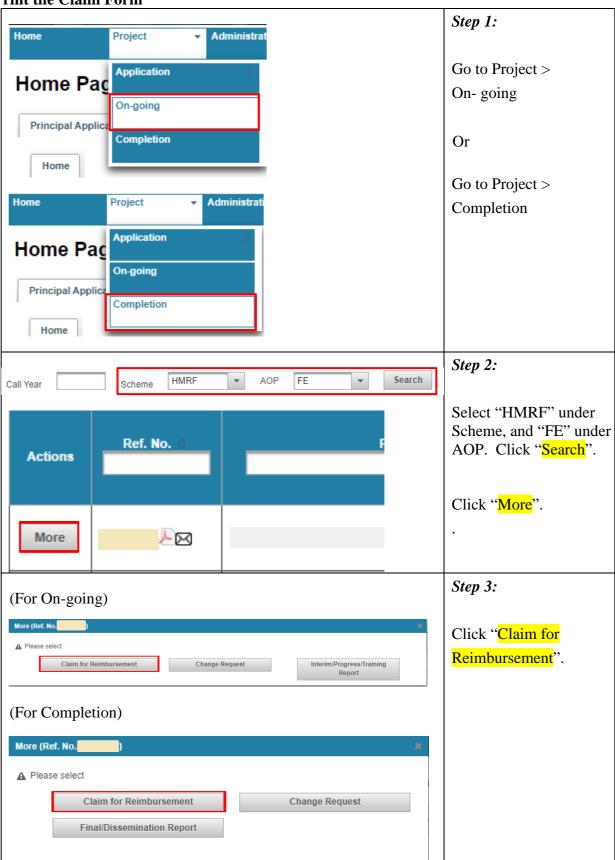
Submission of Claim Form

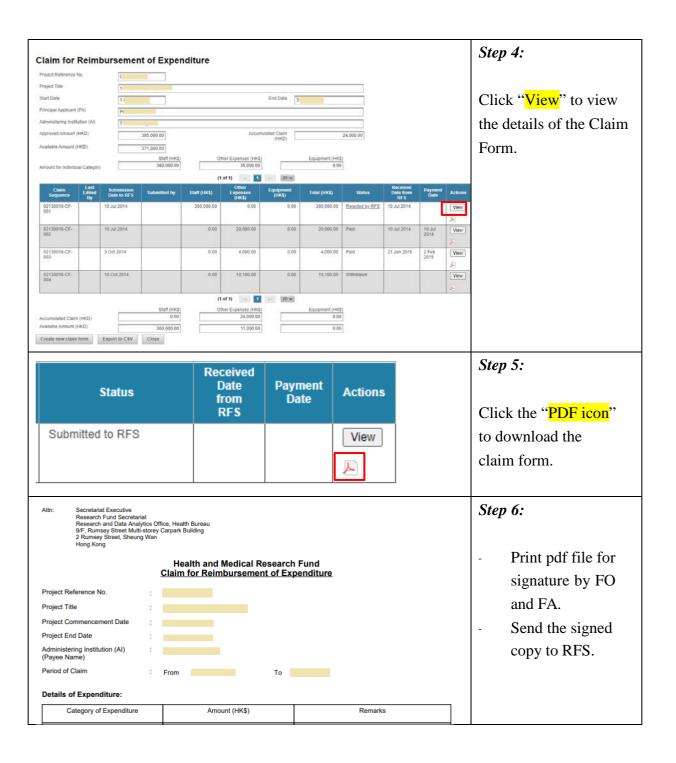




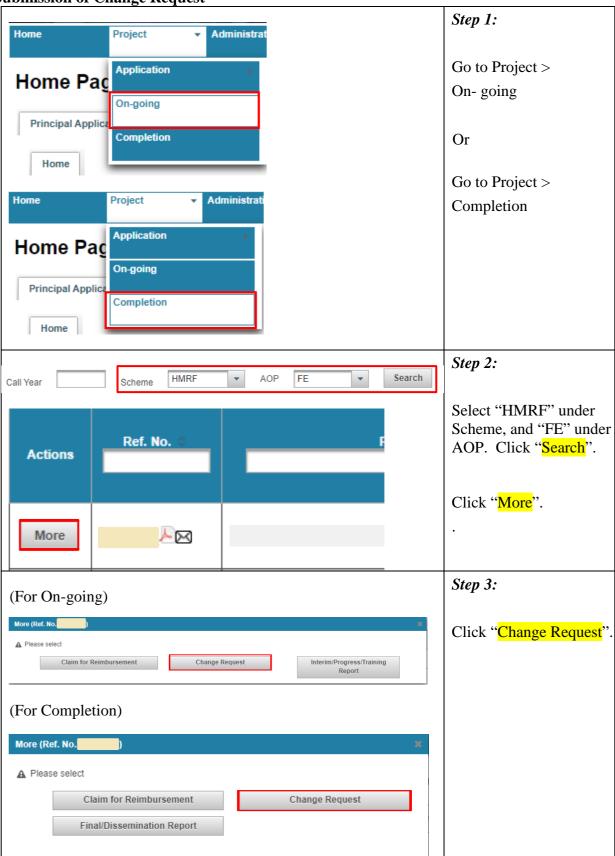


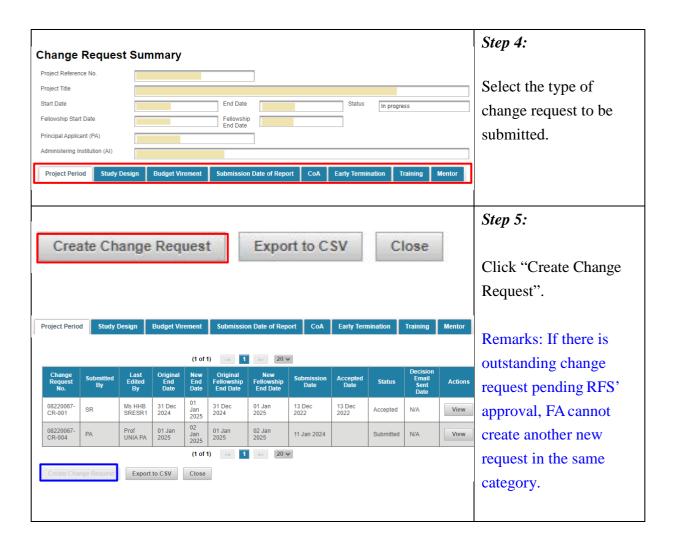
Print the Claim Form



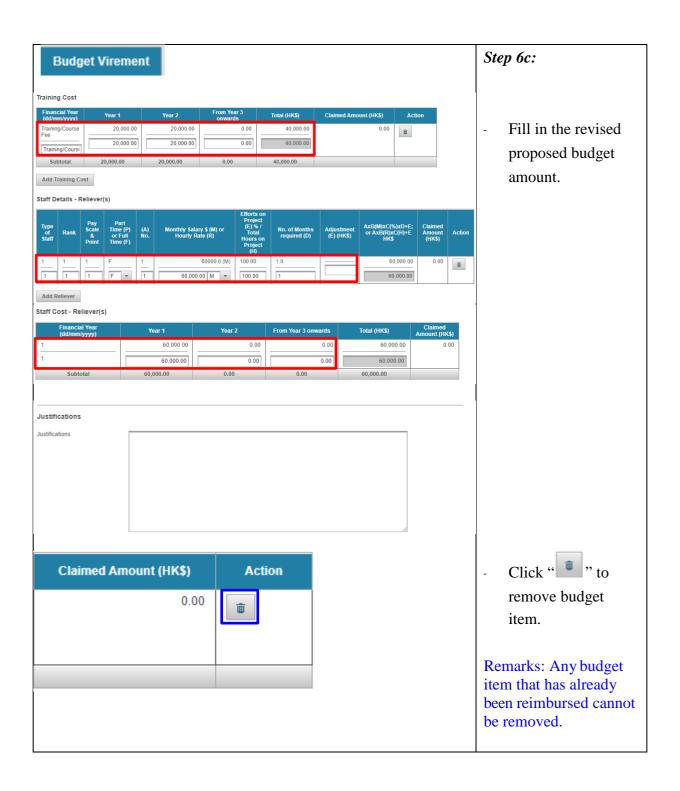


Submission of Change Request

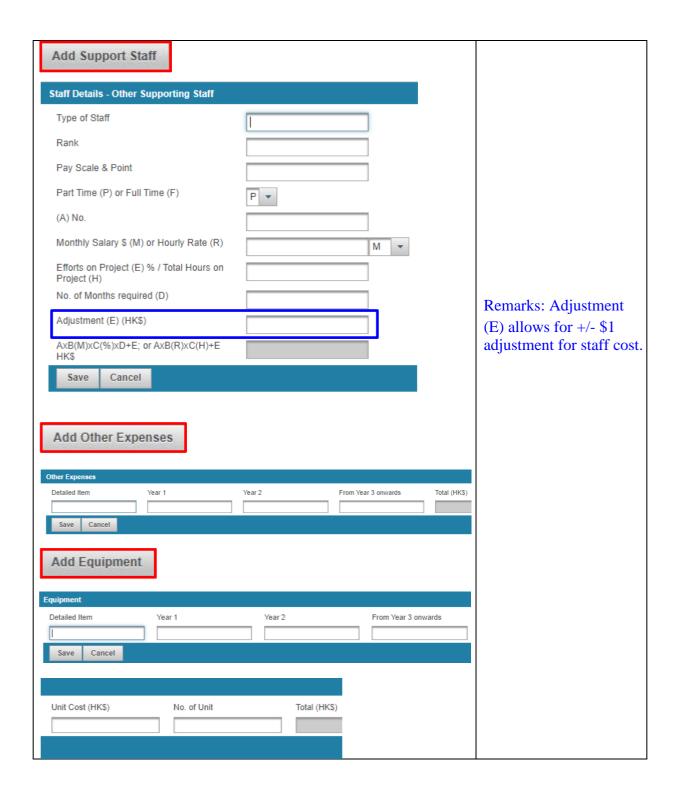


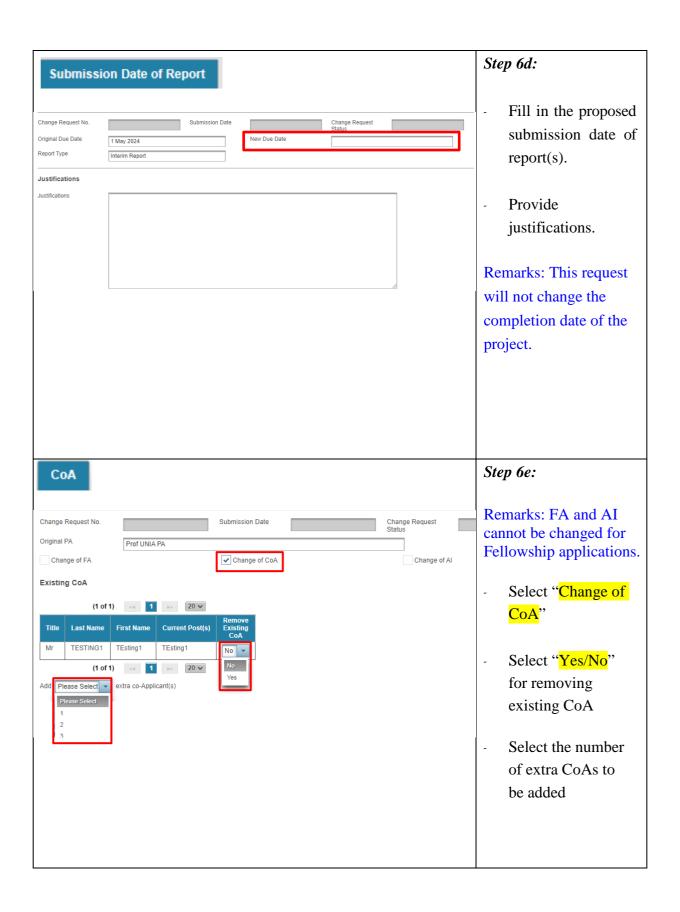


Project Perio	od					Step 6a:
Change Request No. Original End Date Original Fellowship End Date Supporting documen	08220077-CR-Temp-009 1 Jan 2025 1 Jan 2025	Submission Date New End Date New Fellowship End Date DF format only and the	e maximum file size is 600KB)	Change Request Status		Fill in the proposed End Date and Fellowship End Date.
Attach Justifications Justifications	(1 of 1) <<	20 V				Click "Attach" to upload supporting documents
					-	Provide justifications
Study Design	,					Step 6b:
Study Design						Fill in the details for the change of study design.
Track-change version (in If format only and the maxin file size is 1MB) Clean version (in PDF for only and the maximum file is 1MB) Attachment (if any) (in PD	mat size	Browse Browse	Timetable of Work (item 1 Delete Delete	3j) in both track-chang	e and cle	Attach revised proposal in track-change version & clean version
format only and the maxin file size is 1MB) Remarks	num					Attach other supporting documents (if any).
Justifications Justifications						Provide details for revised work plan, if any, under Remarks
						Provide justifications

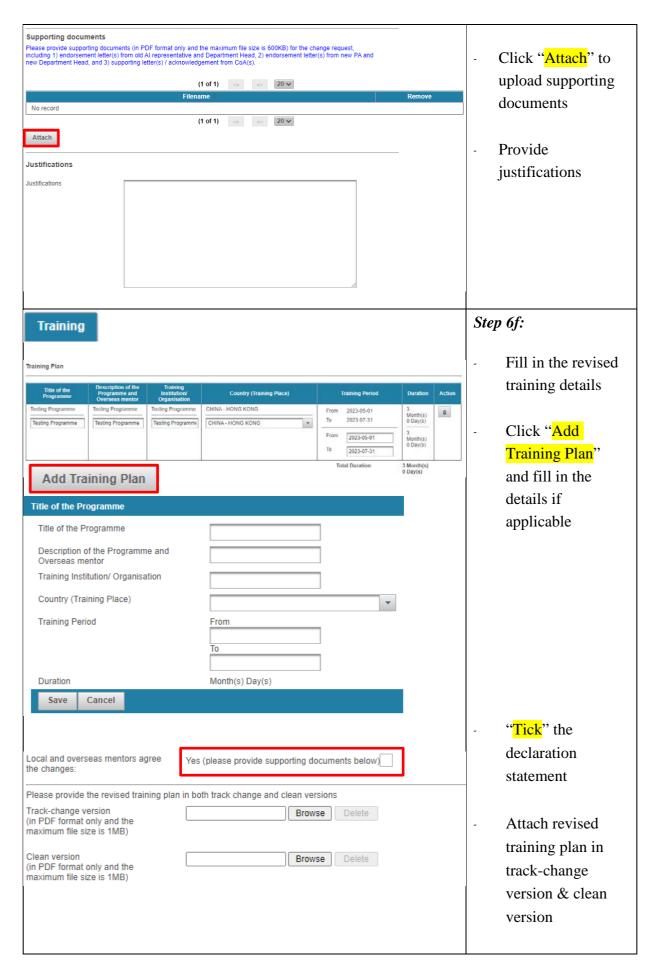


Add Training Cost Detailed Item Year 1 Save Cancel Add Reliever Staff Details - Reliever(s) Type of Staff Rank Pay Scale & Point Part Time (P) or Full Time (F)	Year 2 From Year 3 onwards Total (HK\$)	- Click "Add Training Cost", "Add Reliever", "Add Research Staff", "Add Support Staff", "Add Other Expenses" or "Add Equipment" to add new budget item(s).
(A) No. Monthly Salary \$ (M) or Hourly Rate (R) Efforts on Project (E) % / Total Hours on Project (H) No. of Months required (D) Adjustment (E) (HK\$) AxB(M)xC(%)xD+E; or AxB(R)xC(H)+E HK\$ Save Cancel Add Research Staff Type of Staff		Remarks: Adjustment (E) allows for +/- \$1 adjustment for staff cost.
Rank Pay Scale & Point Part Time (P) or Full Time (F) (A) No. Monthly Salary \$ (M) or Hourly Rate (R) Efforts on Project (E) % / Total Hours on Project (H) No. of Months required (D) Adjustment (E) (HK\$) AxB(M)xC(%)xD+E; or AxB(R)xC(H)+E HK\$ Save Cancel	P V	Remarks: Adjustment (E) allows for +/- \$1 adjustment for staff cost.

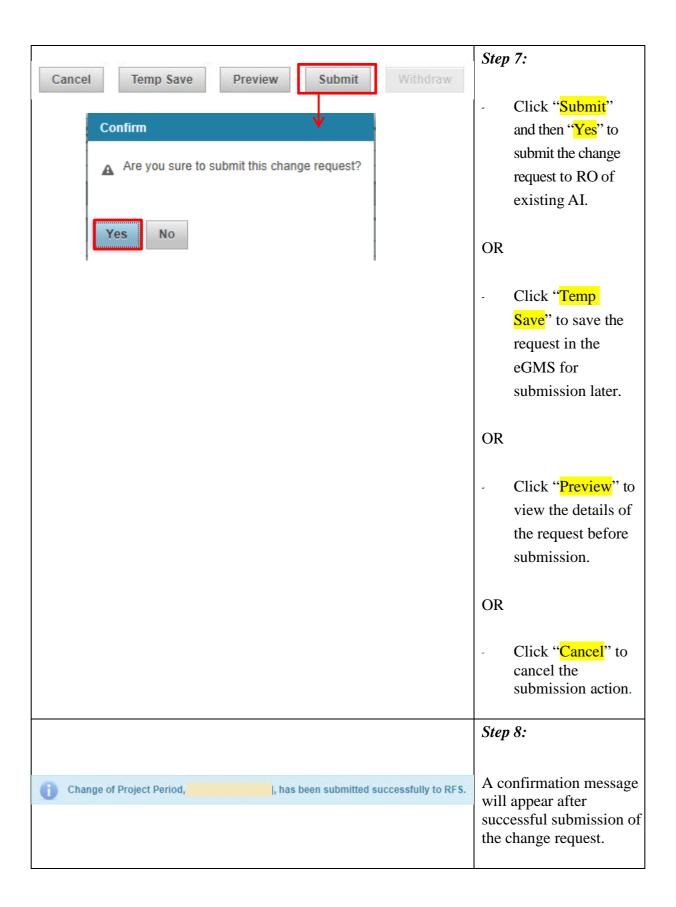




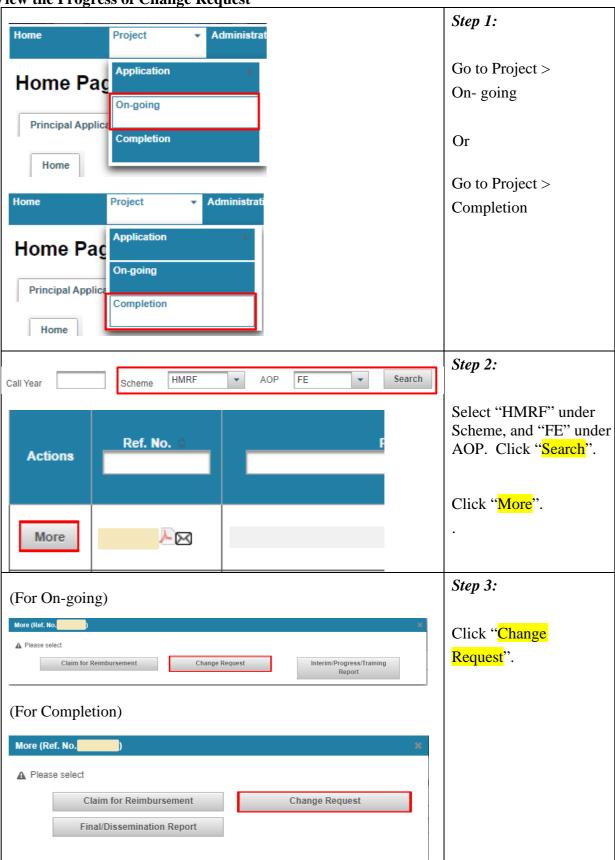
Remove CoA		- Fill in the details,
New co-Applicant	1	full address and CV of New CoA
Title	Please Select ▼	C V OI NEW CON
Last Name	First Name	
Current Post(s)		
Department		
Full Address		
Institution		
Room / Floor		
Building		
Street		
City / Area		
Location of Administering Institution	China - Hong Kong Overseas	
Country / Region	China - Hong Kong	
Contact No.		
Contact No.	Fax	
Email	No. of hrs/week on project	
cv		
Education/Training		
Position and Honours (in		
reverse chronological		
order with dates)		
Five Most Recent Relevant		
Publications and Description of		
Relevant Experience		
Role and		
Responsibility in the Project		

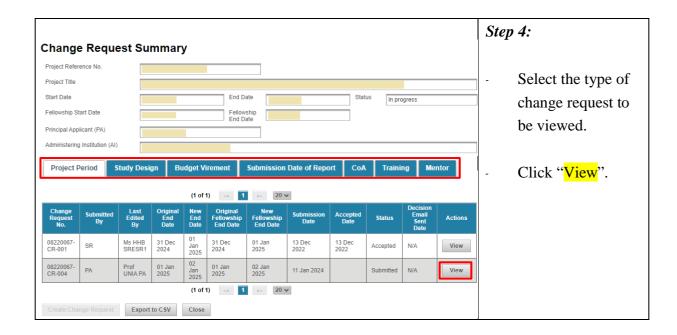


Supporting documents Please provide supporting documents (in	PDF format only and the maximum file size is 600KB) for the change request.			
(1 of 1) 20 v				Click "Attach" to
No record	Filename (1 of 1)	Remove		upload supporting
(1 of 1) 20 se				documents
Justifications				
			-	Provide
				justifications
				Justifications
ļ				
			~ .	- CO
Mentor			Step	6f:
	Current Mentor	Proposed Changes	-	Fill in the
Name	TEsting			proposed changes
Department	Department 1			
Institution	The University A	The University A	-	Indicate the
Email Address	dh1unia@healthbureau.gov.hk			mentor's
Now menter has kn	own the applicant for a period of	veers and have been the applicant's		relationship with
		years and have been the applicant's		the FA
control of the last research advise control of the last research a				ule I'A
teacher	solo duvioci			
others(please s	pecify:		-	Fill in the
Throughout the fellowship period, I shall e	give the Fellowship Applicant all necessary guidance and shall be actively invo	olved in overseeing the proposed research. My role and plan are as follows:		mentor's role and
				plan
			-	Click "Attach" to
Supporting documents				upload supporting
Please provide supporting documents (in Pl representative and Department Head, 2) en	DF format only and the maximum file size is 600KB) for the change request, include idorsement letter(s) from new PA and new Department Head, and 3) supporting letters.	ng 1) endorsement letter(s) from old All er(s) / acknowledgement from CoA(s).		documents
	(1 of 1) == 20 y	Remove		
No record	(1 of 1) 20 ¥		-	Provide
Attach				justifications
Justifications				•
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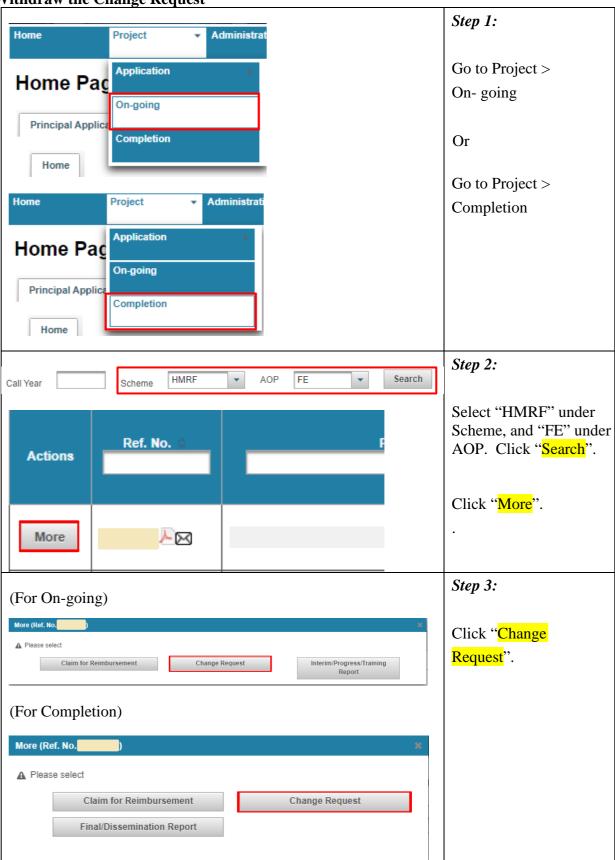


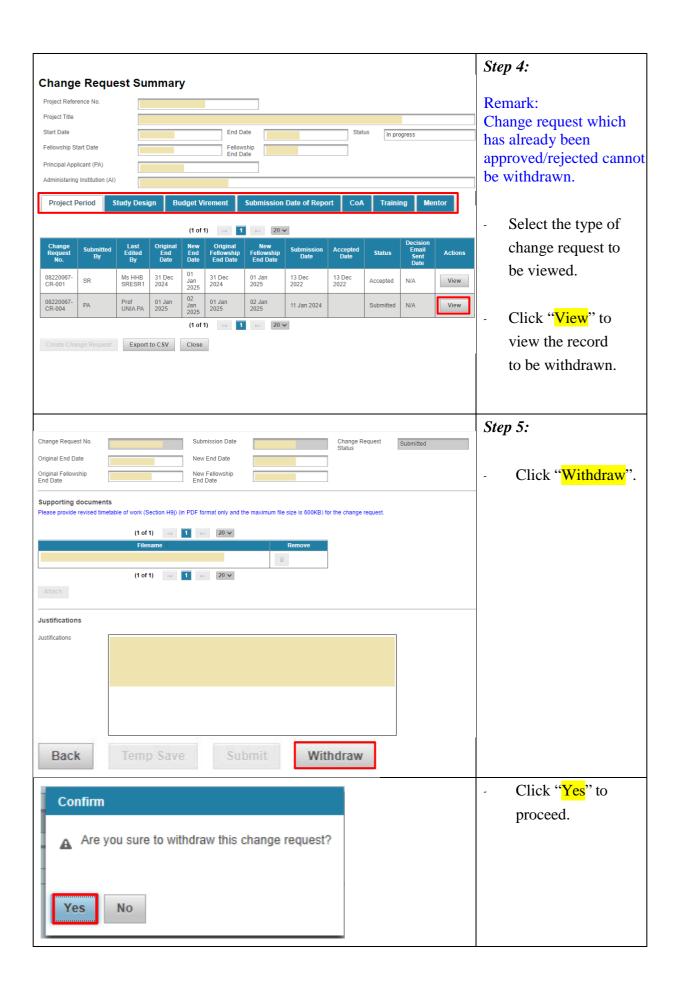
View the Progress of Change Request



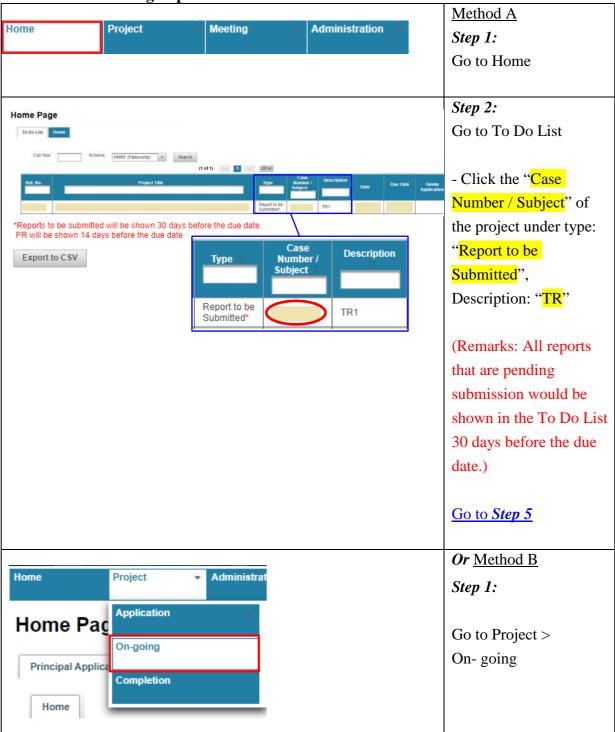


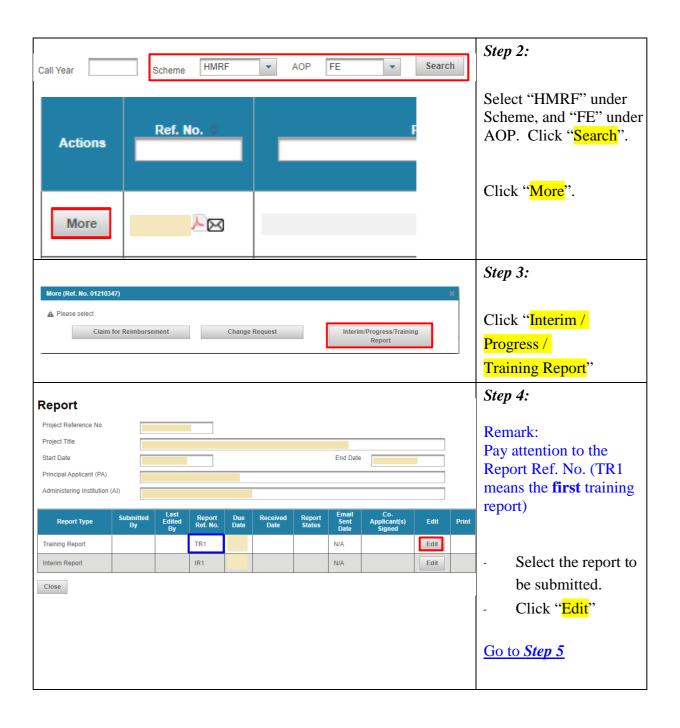
Withdraw the Change Request



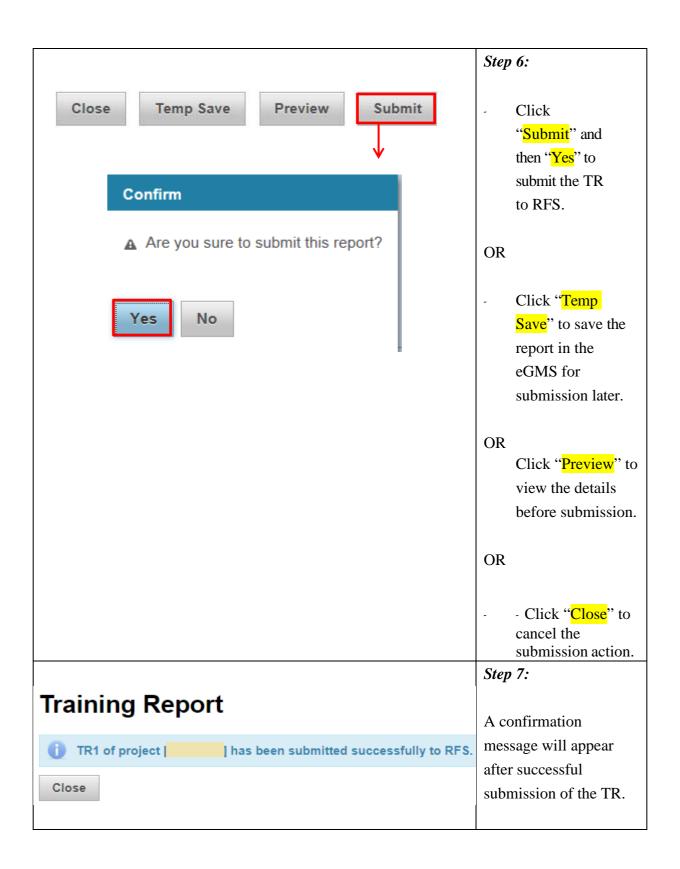


Submission of Training Report

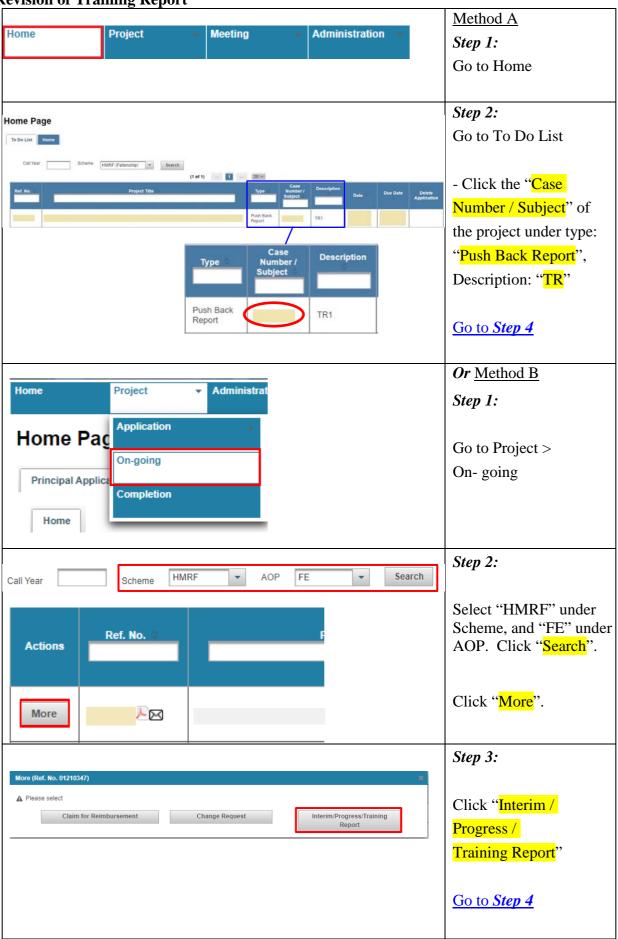


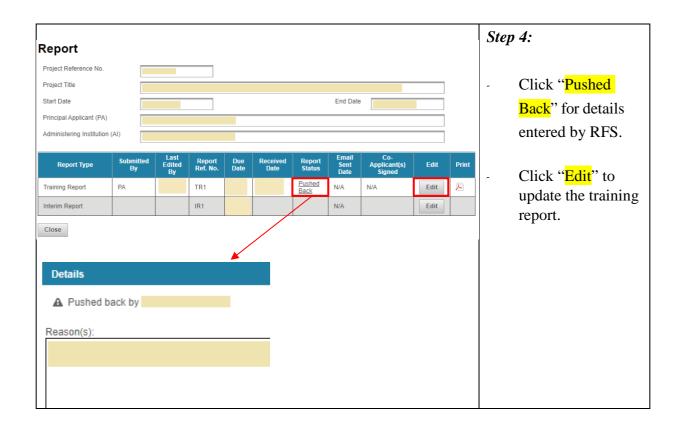


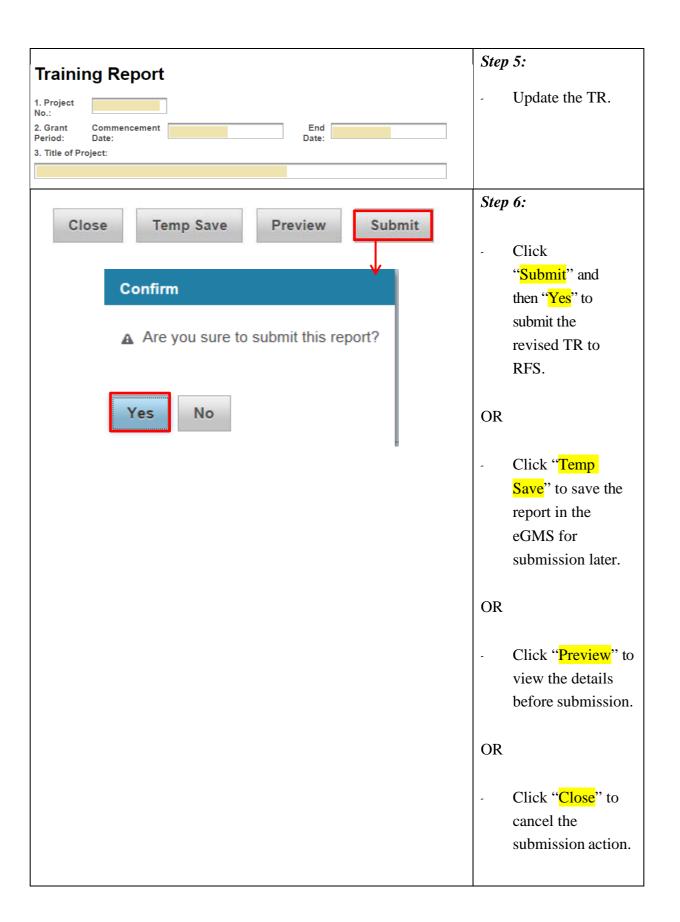
Training Repo	ort	Step 5:
1. Project No.:		
2. Grant Commencer	nent End	
Period: Date:	Date:	 Confirm the
3. Title of Project:		details of the
		project.
4. Applications / Affiliation	ns	
	ntor (Any changes in the mentor must be approved by the Secretariat in advance.)	
Fellowship Applicant / Mento		
Prof PA UniC	The University C	
Testing 2	The University C	
5. Training Programme		
	nmo	
5.1 Details of Training Program	nme	
Title of the Programme	Testing 1	
Training Institution/Organisation	Something different here	
Training Period	from 2022-11-02 to 2023-10-06	
Duration	11 Month(s) 5 Day(s)	
	(7, 7,7)	
5.2 Objectives of Training Prog	gramme	
Арр	proved Aims/Objectives Estimated completion (%)	C1-4-41
		- Complete the
	0	TR.
Add		
5.3 Training Programme:		
0.00		
6. Signatures of Ment	tor	
	equired to sign the Report. By signing this Training Report, the fellowship	
mentor acknowledges that and the maximum file size	she/he agrees with the information contained herein (in PDF format only is 1MB).	
	•	- Click "Browse" to
Brow	Se Delete	attach the
		supplementary
		information, if any.
		information, if any.
Attachment (if any, in	PDF format only and the maximum file size is 1.5MB):	
Brows	se Delete	



Revision of Training Report

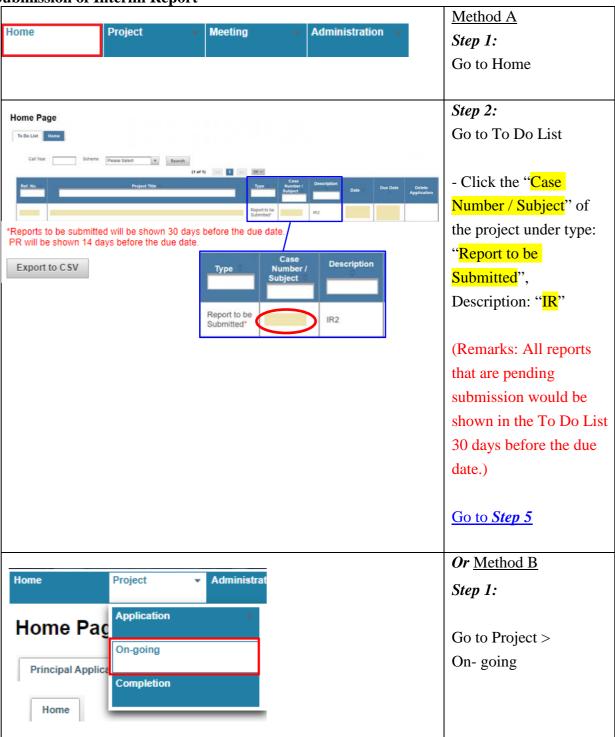


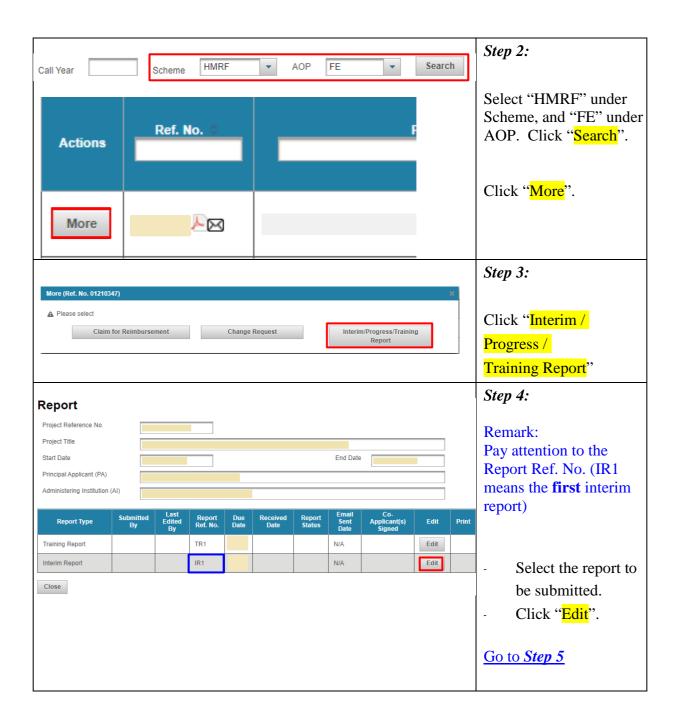


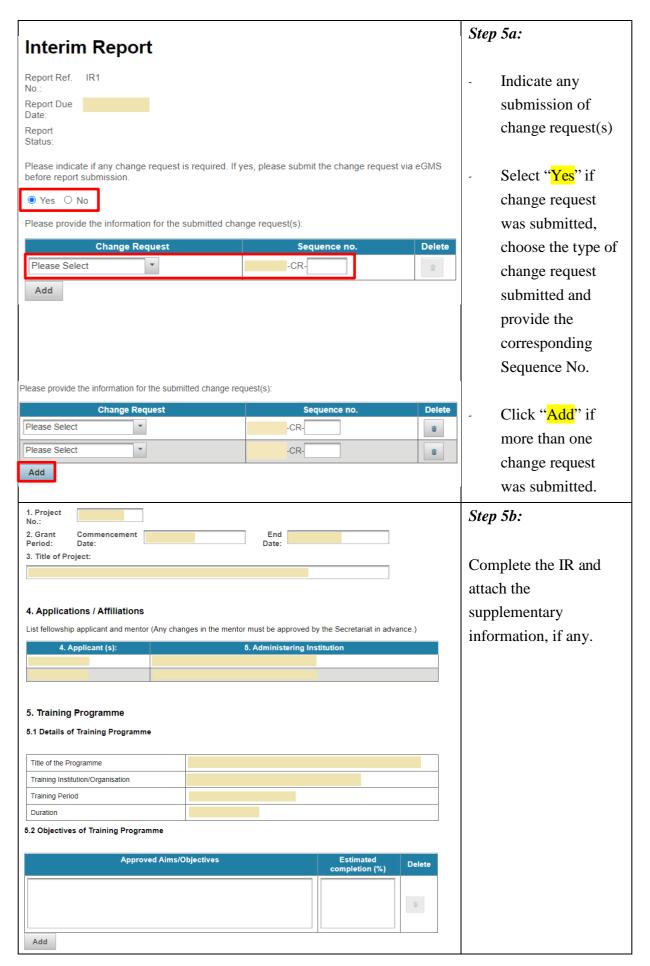


Training Report It is the project of the project o

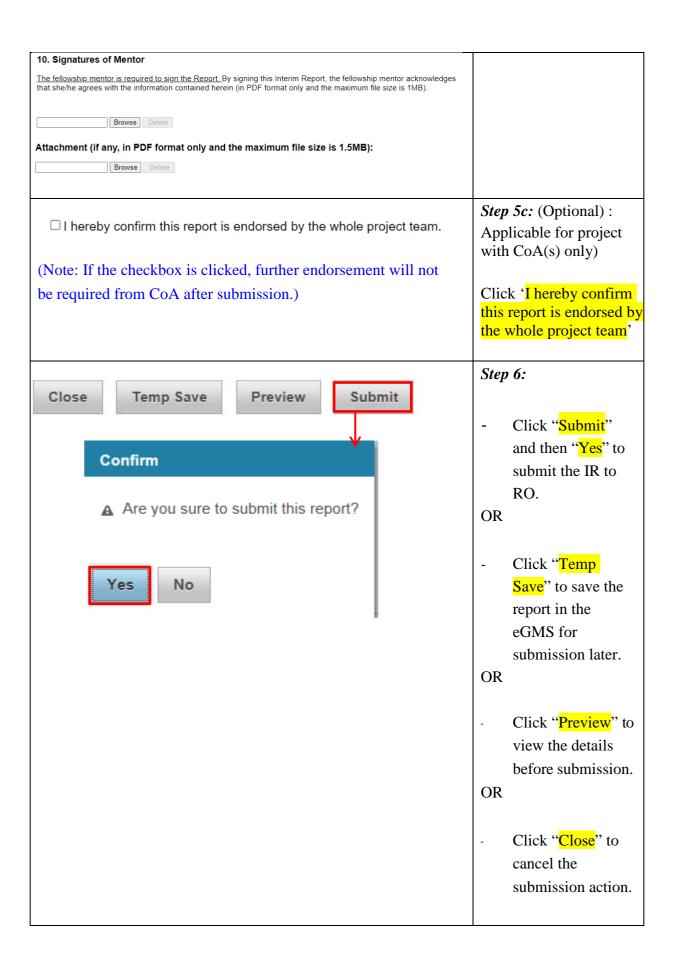
Submission of Interim Report

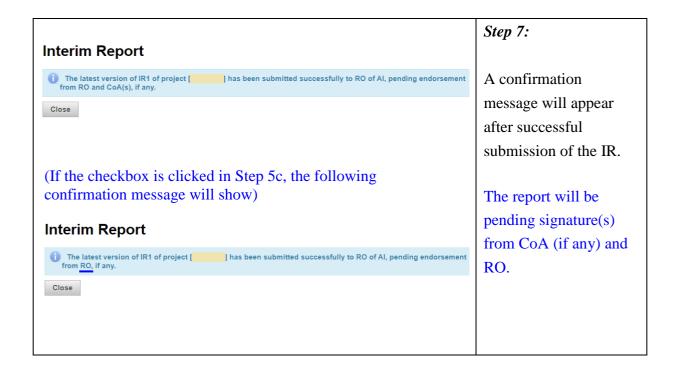




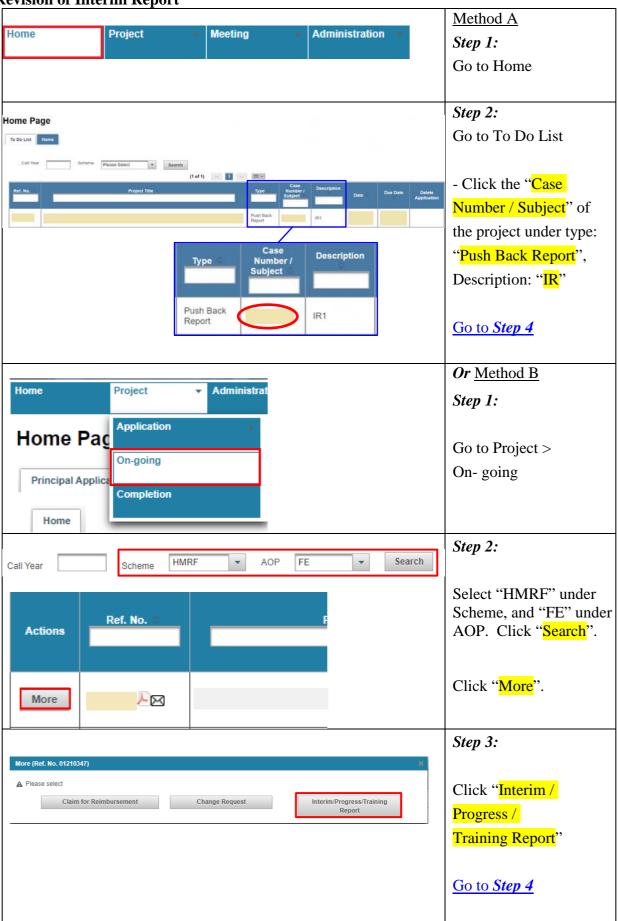


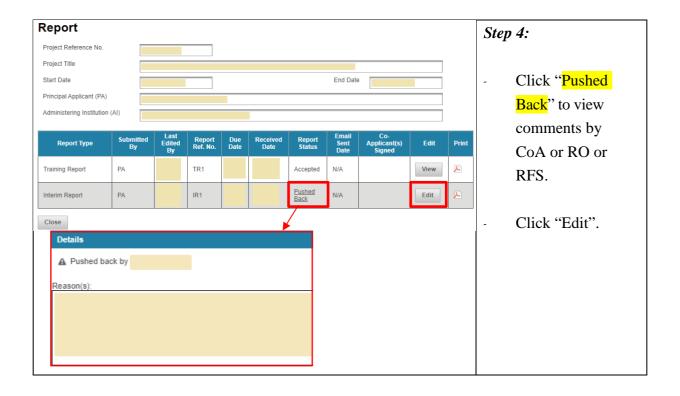
5.3 Training Programme:	
6. Research Project	
6.1. Aims/Objectives of the Research:	
List the main objectives as stated in the <u>approved proposal</u> Approval must be sought for any changes on the study objectives.	
Approved Aims/Objectives Estimated completion (%)	
Add	
6.2 Timetable of Work:	
Document the study progress according to the proposed timetable.	
6.3 Achievements/Major Findings of the Project so far:	
6.4. Project Team's Comments	
Describe the potential for further investigations or exploitation of results. May include reflection/feedback of investigators and/or any difficulties encountered during the course of project. Comment on the potential for current dissemination of research findings.	
7. Budget & Expenditure (attach a <u>certified Financial Statement</u> , in PDF format only and the maximum file size is 1.5MB):	
Remarks: Please submit a signed hardcopy to RFS. Attachments are optional, but they must be in PDF format if they are attached to the report. Browse Delete	
8. Publications, including in press	
Have any publications resulting directly from this research project been published? Yes No	
Patents and other Intellectual Property Rights	
Have any patents or other intellectual property rights resulting directly from this research project been produced? O Yes O No	

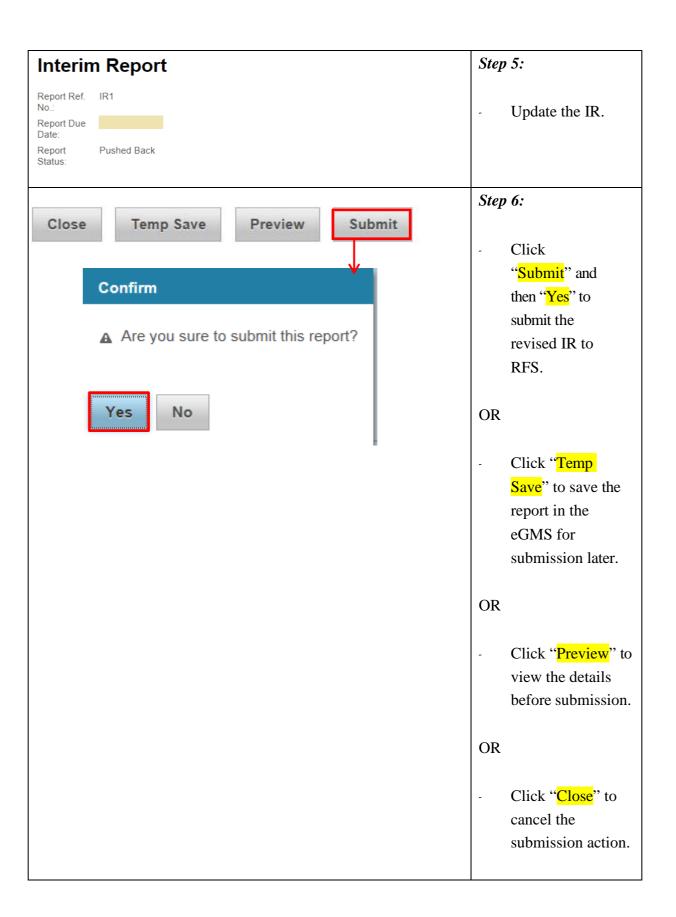




Revision of Interim Report







Interim Report



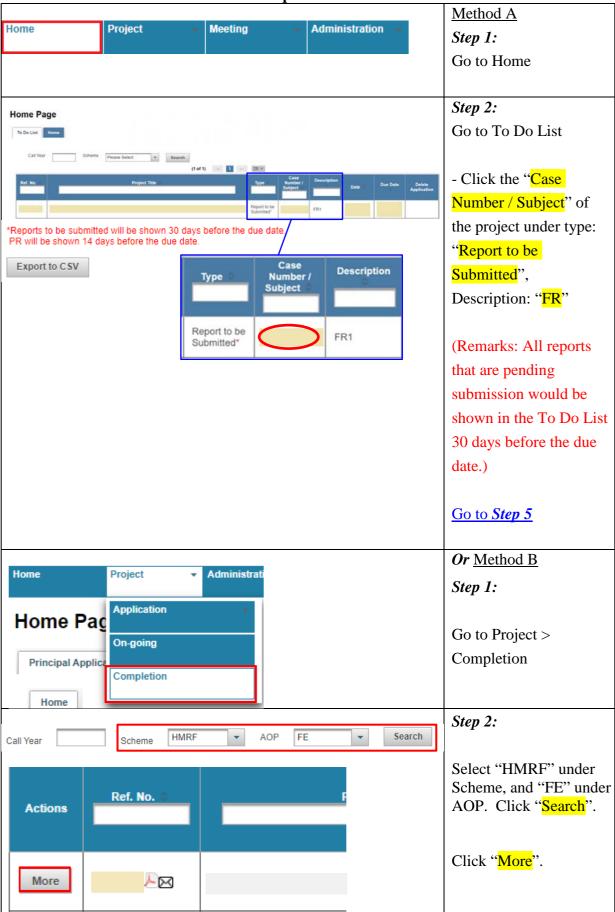
IR1 of project [08220067] was endorsed successfully.
IR1 of project [08220067] has been submitted successfully to RFS.

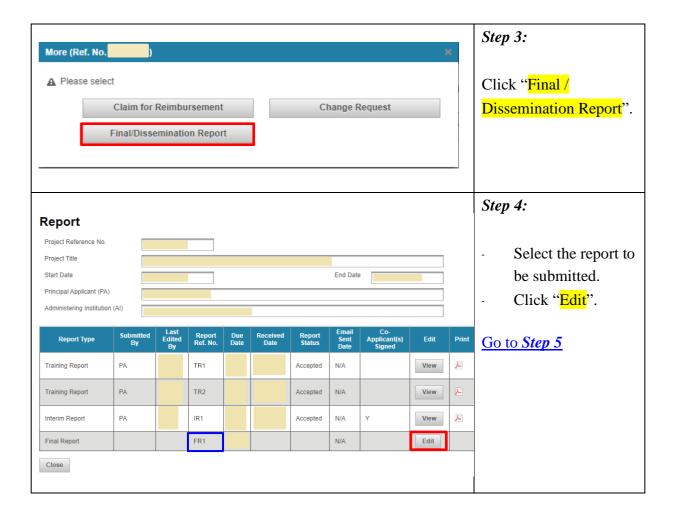
Close

Step 7:

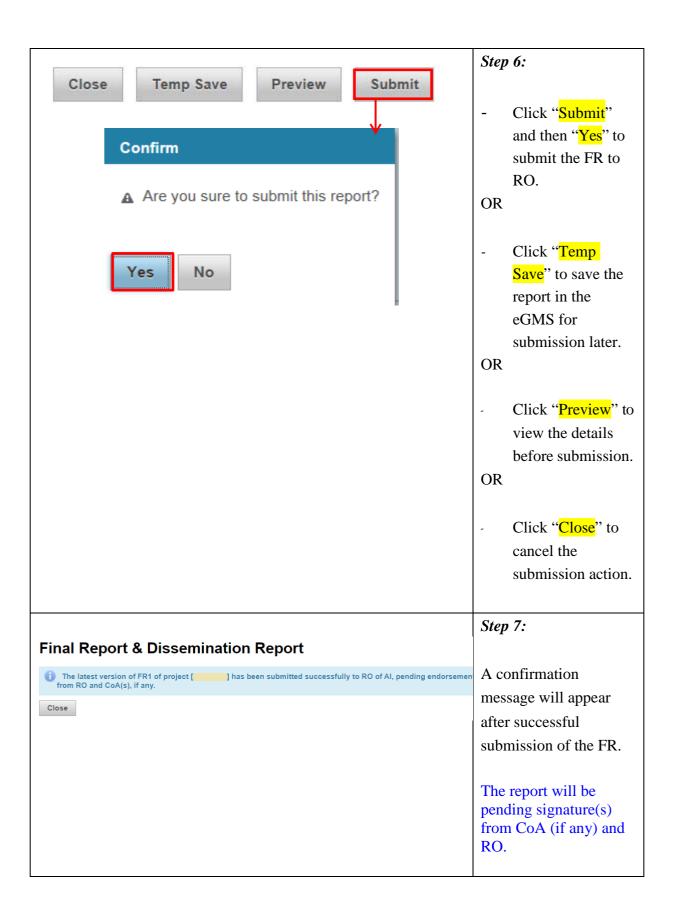
A confirmation message will appear after successful submission of the revised IR.

Submission of Final and Dissemination Report

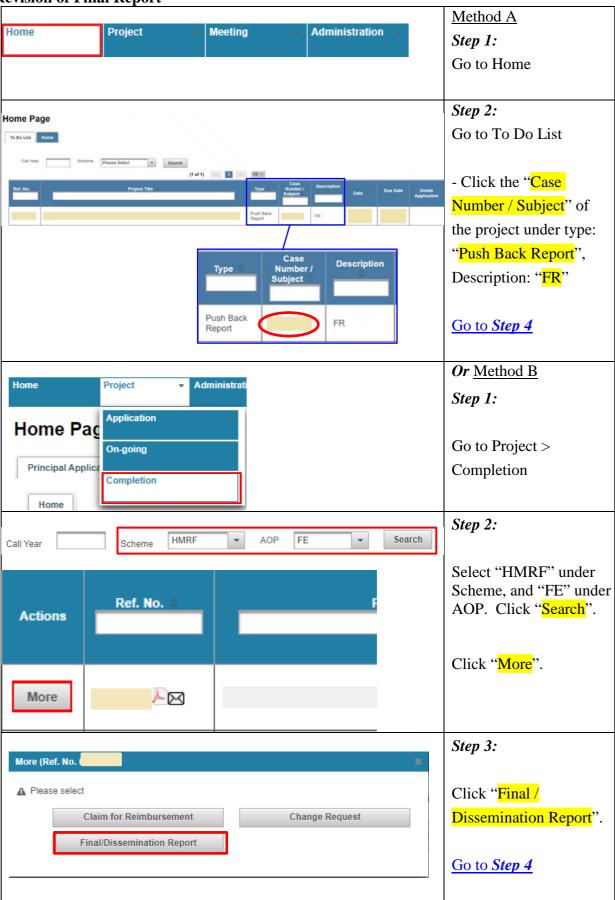


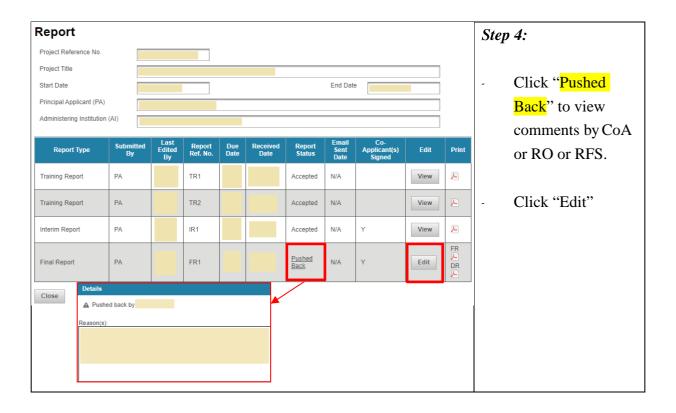


Final Report & Dissemination Report	Step 5:
Report Ref. No. FR1	
Project Reference No.	
Project Title	
Actual Start Date Actual End Date	
Report Status	
* Only PDF and MS Word files are allowed for final and dissemination report.	- Upload the
Upload Final Report	report(s).
Upload PDF file (in PDF format only and the maximum file size is 1.5MB)	
Browse Delete	(Note: Encrypted or
	protected PDF file
Upload Word file (in DOC / DOCX format only and the maximum file size is 1.5MB)	cannot be uploaded.)
Browse Delete	
Upload Dissemination Report	
Upload PDF file (in PDF format only and the maximum file size is 1.5MB)	
Browse Delete	
Upload Word file (in DOC / DOCX format only and the maximum file size is 1.5MB)	
Browse Delete	
Attachment (if any, in PDF format only and the maximum file size is 1.5MB):	
	- Attach
Browse Delete	supplementary
	documents, if
	any.

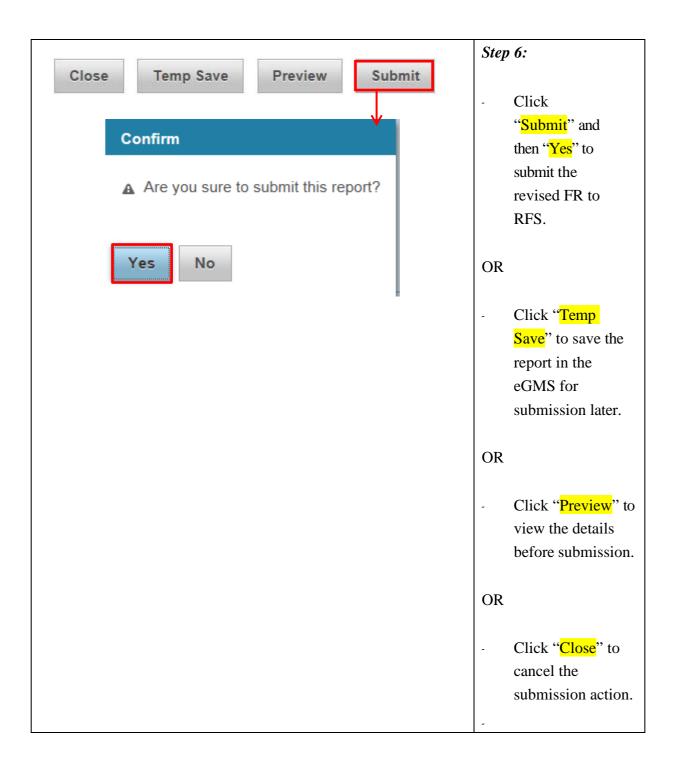


Revision of Final Report



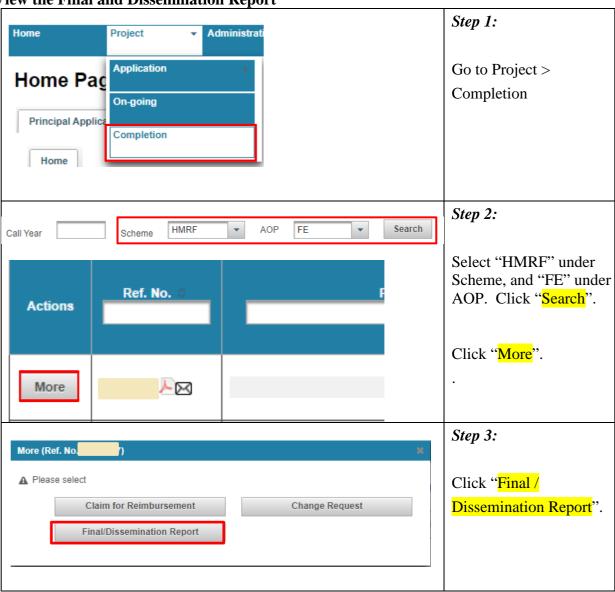


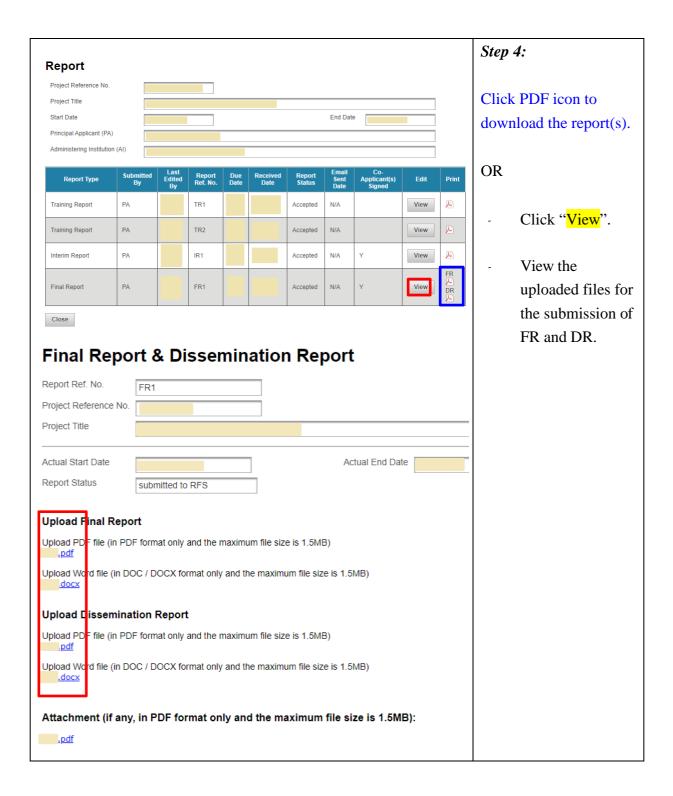
Final Report & Dissemina Report Ref. No. FR1 Project Reference No. Project Title Actual Start Date Report Status Pushed Back	Actual End Date	Step 5:	
* Only PDF and MS Word files are allowed for final	and dissemination report.		
Upload Final Report Upload PDF file (in PDF format only and the maximum		- Click " " to delete the old report(s))
Upload Dissemination Report Upload PDF file (in PDF format only and the maximum pdf Browse Delete	n file size is 1.5MB)	- Upload the revis	sed
Upload Word file (in DOC / DOCX format only and the	maximum file size is 1.5MB)		
Attachment (if any, in PDF format only and pdf Browse Delete	the maximum file size is 1.5MB):	- Delete and attach revised supplementary documents, if ar	ny.



Final Report & Dissemination Report | FR1 of project | has been submitted successfully to RFS. | | Close | Cl

View the Final and Dissemination Report





Submission of Outcome Evaluation Survey

(Function for Outcome Evaluation Survey will be activated by RFS in due course)

<u>Sample of email notification sent to FA for complete the outcome</u> evaluation survey

Subject: eGMS: Attn: (The Name of Fellowship Applicant) - Outcome evaluation survey of project funded by the Health and Medical Research Fund(Ref No) (2 years / 4 years) after project end date

Dear (The Name of Fellowship Applicant),

Outcome evaluation of projects funded by the Health and Medical Research (HMRF)

I am writing to invite you to complete the outcome evaluation survey of your project funded by the HMRF -

Reference No.: (Ref No)Project Title: (Project Title)

• Principal Applicant: (The Name of Fellowship Applicant)

Project Commencement Date: (Commencement Date)

• Project End Date: (End Date)

• Time point of this Outcome Evaluation Survey: (2 years / 4 years)

From 2023 onwards, Fellowship Applicants are required to complete outcome evaluation surveys at **two time points, i.e. 2 years and 4 years after the project end date**. This arrangement will allow more time for outcomes and impacts derived from the research findings and health promotion projects to accrue, especially policy impacts and behaviour/practice changes. Fellowship Applicants are advised to maintain records of evidence of impacts/outputs generated from the funded grants.

Please login to (eGMS URL) to complete the survey by (due date).

Access path: Project > Completion > More > Outcome Evaluation Survey

Importance of your reply

- 1. It is a **contractual requirement** that "The Fellowship Applicant and the Institution shall provide to the Government such information relating to the Project as the Government may reasonably request for the purpose of auditing and evaluating the Project." The Research Fund Secretariat **maintains the track records of grant applicants including completion of this survey for outcome evaluation**.
- Starting from 2023, approval for new funding will not be granted if the Fellowship Applicant has not submitted outstanding/overdue report(s)/certified financial statement(s) and audited account(s)/outcome evaluation surveys for his/her other grants supported by the HMRF.
- 3. The purpose of this evaluation is to provide a quantitative and qualitative assessment of the outputs and deliverables of projects supported with public money. The information provided will be invaluable in helping the Health Bureau determine among other things to what extent the research findings have contributed or may contribute to informing health policies and enhancing practice/changing behaviour, identifying knowledge gaps that may be worthy of further support, and whether the supported research represents good value for money.

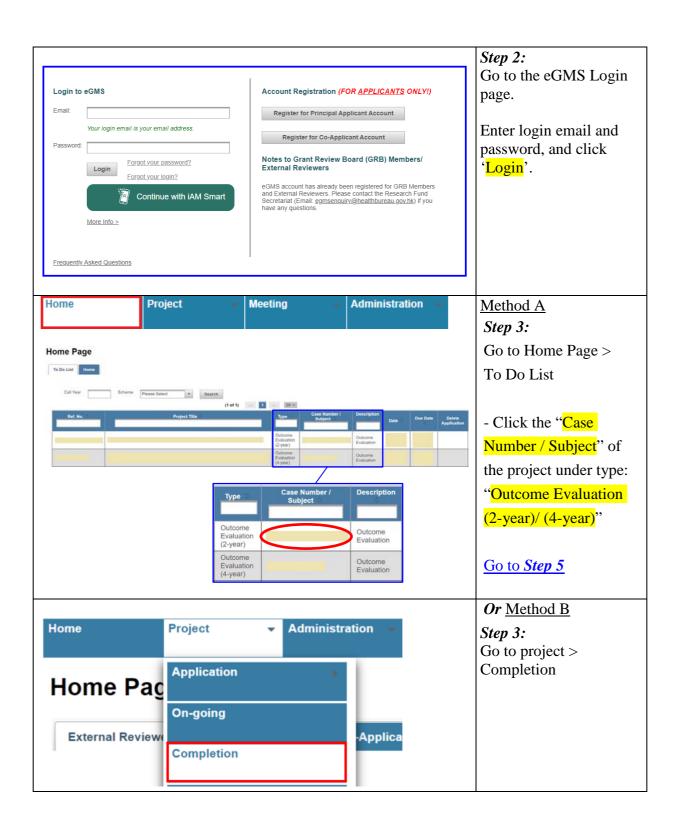
Should you have technical issues in completing this online survey, please email to us egmsenquiry@healthbureau.gov.hk.

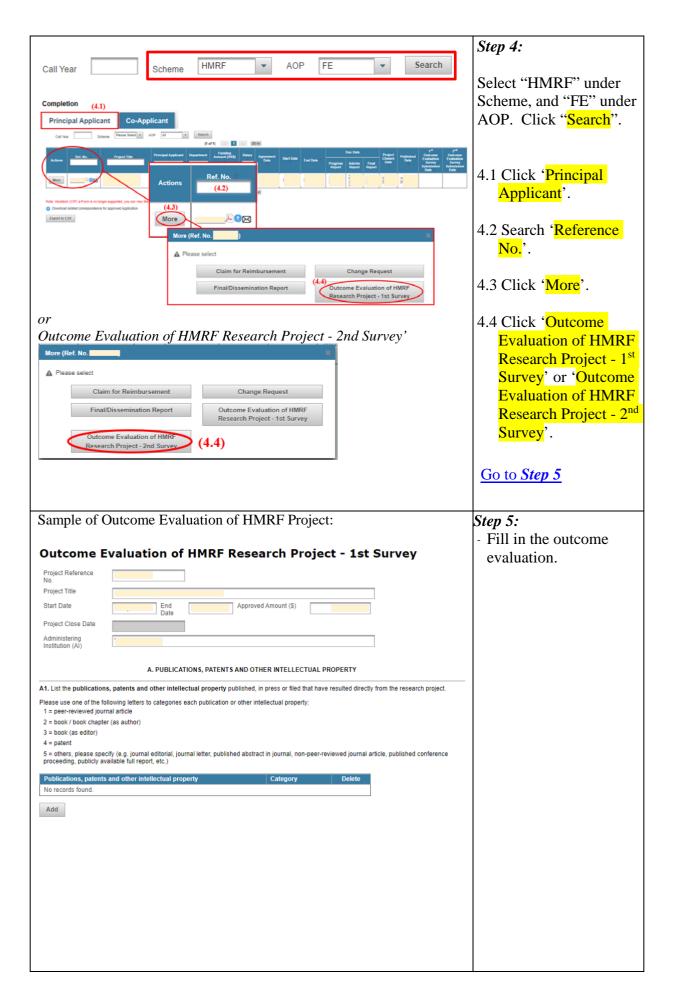
Thank you very much.

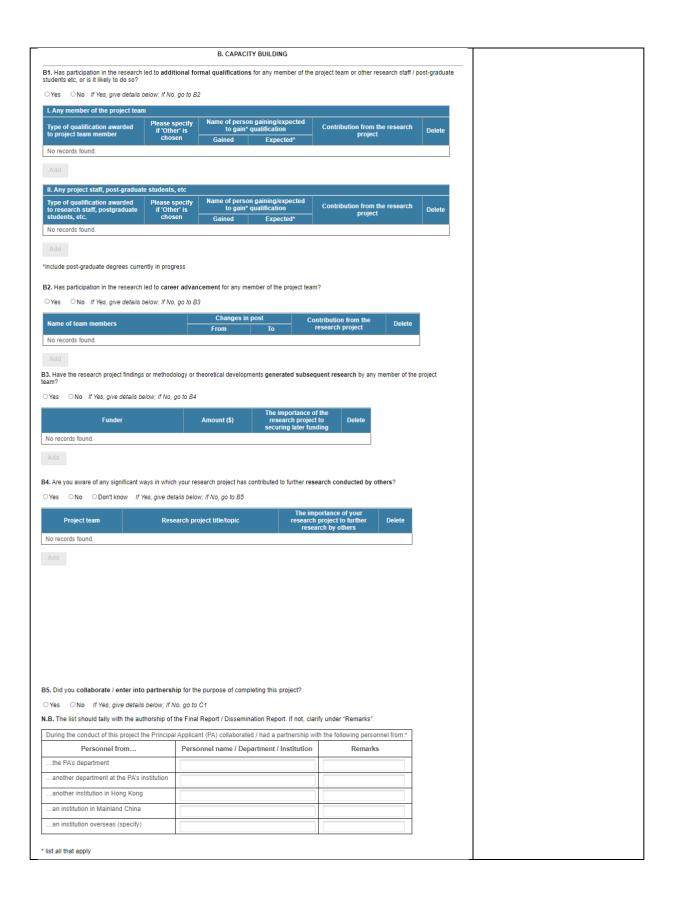
Step 1 :

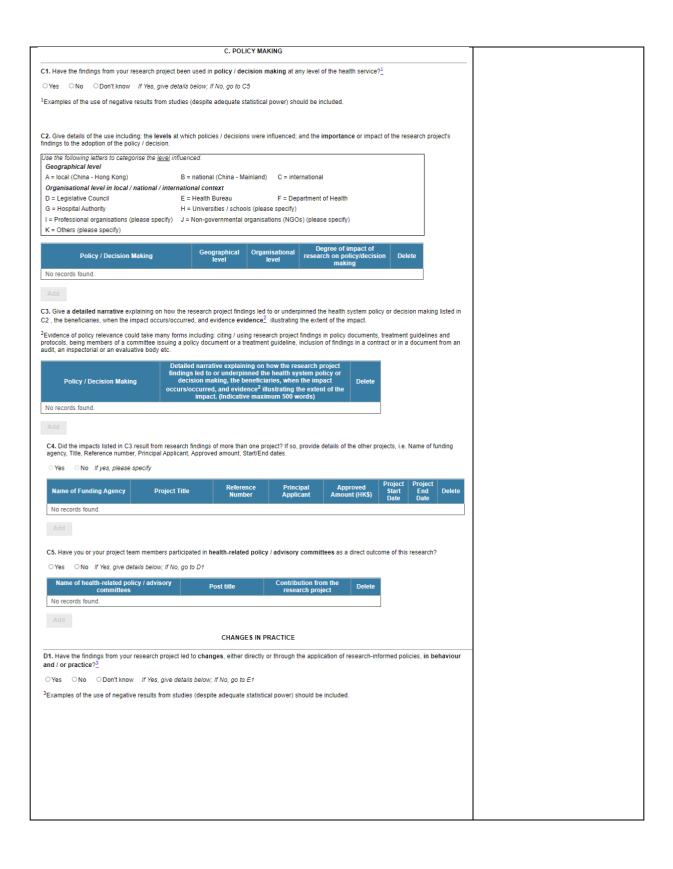
Email notification for complete the outcome evaluation survey will be received.

- Please click on the eGMS URL to go to the eGMS login page.

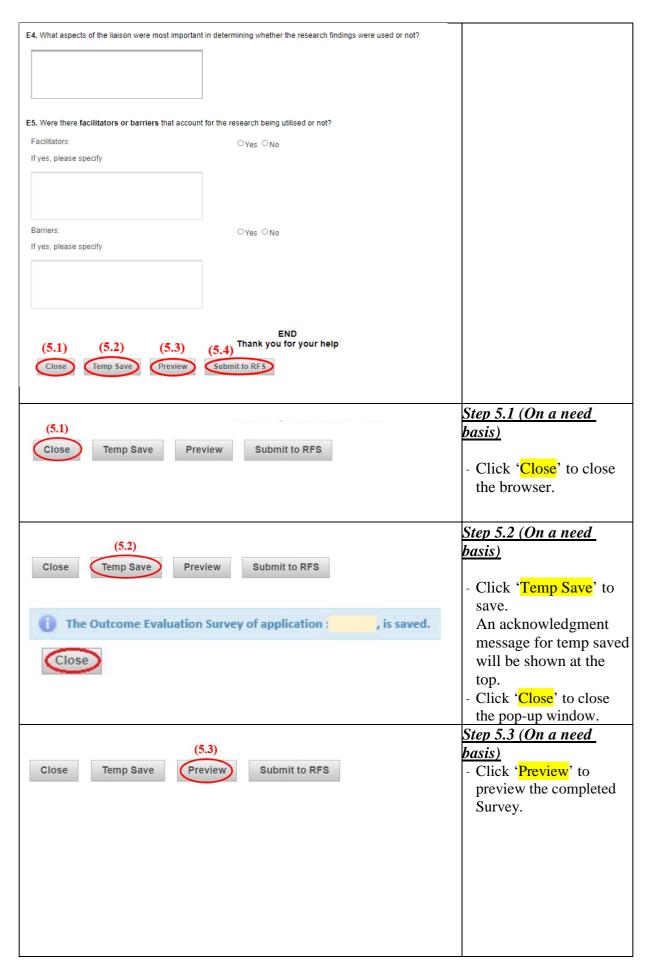


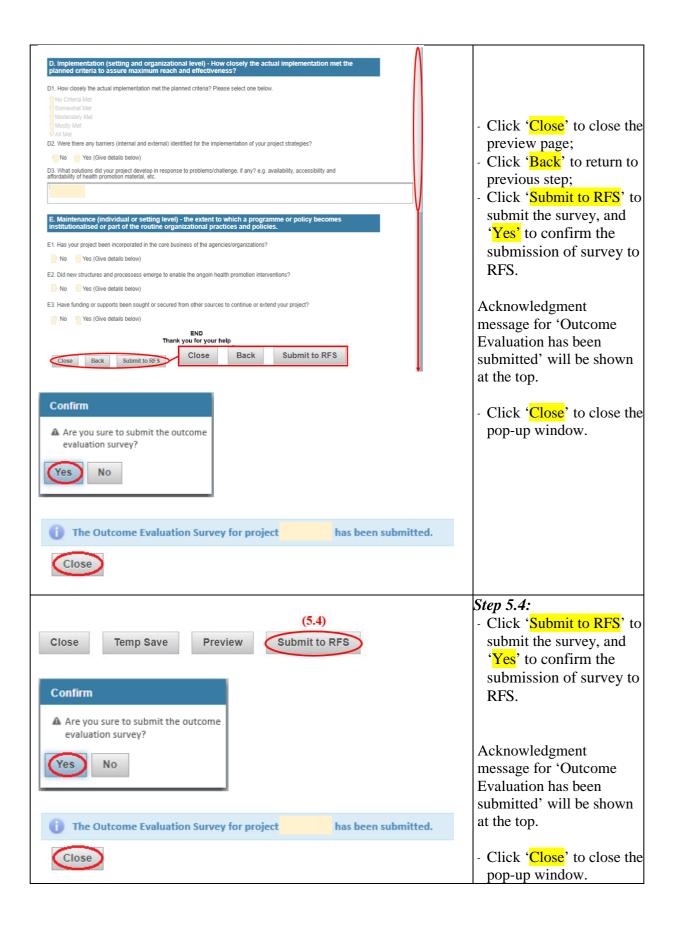






D2. Specify the research end use research project findings were in a			nged, the level at wh	ich any change occ	curred, and ho	ow important the		
Use the following letters to catego	orise the <u>level</u> and <u>res</u> e	earch end user in which i	behaviour and/or prac	ctice have changed	l.			
Geographical level A = local (China - Hong Kong)	B = 1	national (China - Mainlan	d) C = internation	ıal				
Organisational level in local /			u) 0 - internation	ui.				
D = Legislative Council		Health Bureau	F = Departmen	it of Health				
G = Hospital Authority I = Professional organisations (p		Universities / schools (ple Non-governmental organi		ase specify)				
K = Others (please specify)	icase specify) 0 = 1	von governmental organi	Salions (NGCs) (pice	ise specify				
Research end users								
L = Medical / allied health profes M = Health care managers/adm		ers						
N = Health service users / the w								
Behaviour / Practice	eographical Org	ganisational Resea	rch end Degree	of impact of rese	arch Dele	nto		
No records found.	level	level u	ser on b	ehavioural change	es Den			
Add								
D3. Give a detailed narrative exp	plaining how the resea	arch project findings led to	o or underpinned the	changes in behavio	our and/or pra	ictice listed in D2.		
he beneficiaries, when the impac								
Evidence of changes in behavious	ır and/or practice coul	d take many forms includ	ling: treatment guide	lines and protocols,	standard ope	erating procedures	ıs,	
a. 10,0 or one asers, etc.	Dotailed	I narrative explaining o	n how the research	project				
Behaviour / Practice	findings	s led to or underpinned or practice, the benefic	the changes in beh	haviour				
Benaviour / Practice		ccurred, and evidence4	illustrating the exte					
No records found.		impact. (Indicative ma	kimum 500 words)					
	D2 roout from	reh findings of w th	one project0 if	ovido detella -5#	other project	io Nama -f		
 Are the above impacts listed in nding agency, Title, Reference no 				ovide details of the	orner projects	, i.e. Name of		
Yes No If yes, please spe	ecify							
Name of Funding Agency	Project Title	Reference Number	Principal Applicant	Approved Amount (HK\$)	Project Start Date	Project End Delete Date		
No records found.					Date	Date		
							_	
	E. KNOW	LEDGE TRANSFER AN	D LONG-TERM IMPA	ACT				
State whether any of the follow	ing dissemination ac	tivities have been based	on or resulted directl	ly or indirectly from	the findings o	f this research	_	
oject.							۱	
Conformence (worket		issemination activities	ennakar erel '	or proceptation		0	4	
Conferences / workshops primari Conferences / workshops primari						○Yes ○No	4	
presentation)	y for practitioners / sei	rvice users (e.g. keynote,	speech, invited spea	.ker, oral or poster		○Yes ○No		
Media presentations (e.g. Press o	onferences / briefings	; Interview / article (news	papers, magazines, T	TV, radio, etc)		○Yes ○No		
Other (please specify)						○Yes ○No		
							_	
revious evaluations have suggest as in progress was a factor in sub			ial users of the resea	rch findings before	starting the pr	oject or while it		
2. Did you liaise with potential us	ers of the research f	indings						
before starting the project?		○Yes ○No						
f YES, with whom did you liaise?		- 100 - 110						
during the research project?		○Yes ○No						
If YES, with whom did you liaise?								
3. Was such liaison a factor in wh	ether the research find	dings were subsequently	utilised or not?					
○Yes ○No								
E4. What aspects of the lia	ison were most im	portant in determini	ng whether the re	esearch findings	were used	l or not?		





Sample of Research Project: Acknowledge Email to Principal Applicant: Step 6:

for submission of Outcome evaluation survey

Subject: [Acknowledgement] eGMS: Receipt of Outcome evaluation survey of project funded by the Health and Medical Research Fund (Ref No)

Dear (The Name of Fellowship Applicant),

This is to acknowledge receipt of the Outcome evaluation survey for the following project submitted via the electronic Grant Management System (eGMS):

- Reference No.: (Ref No)Project Title: (Project Title)
- Principal Applicant: (The Name of Fellowship Applicant)
- Project Commencement Date: (Commencement Date)
- Project End date: (End Date)
- Time point of this Outcome evaluation survey: (2 years / 4 years)

Thank you very much.

You will receive an email notification if you have submitted the Outcome evaluation survey.