

Frequently Asked Questions (FAQs)

I2D Funding Scheme

Funding for development of a healthcare innovation to a commercialisable or clinical implementation endpoint

1. What are the main changes to the I2D funding quantum?

- Increased funding quantum from \$300,000 to \$400,000
- Increased funding duration from 12 months to 18 months

2. Are there any changes to the grant application process?

Grant application now requires submission of:

- Word document template for administrative information and a 3-page technical write-up for detailed information on the technology and development plan.
- Slide deck template (roughly 20 slides) for key project details. Slide deck can form the basis for presentation deck if applicant is shortlisted to present to the evaluation panel.

Note: Previously, I2D application was a word document with a 15-page write-up on the project details.

This change in application is intended to reduce the load and duplicative effort on applicants when applying for I2D and to encourage providing key information that is essential for the critical review and evaluation of the I2D application.

3. Are there any changes to the grant schedule?

There will be two grant calls per year (January and July, previously thrice a year). Applications will close on the 3rd week of each month (note that institutional dates may vary).

4. Are there any changes to the types of projects to supported

I2D has been broadened to support the development of healthcare innovations beyond those with strong commercial potential, to now also include innovations with strong clinical implementation potential. Going forward, innovations that demonstrates either strong commercial potential or strong clinical implementation potential can be considered for funding.

Our funding criteria has been updated accordingly to reflect this broadening of scope:

- Well defined unmet healthcare need
- Proven scientific merit with proof-of-concept data
- Detailed development plan highlighting future project work, milestones, endpoints and regulatory strategy
- Clear understanding of current clinical workflow and potential for eventual clinical adoption

- Potential for healthcare impact that results in new or change in clinical practice/guidelines and healthcare policy
- Clear and achievable commercial plan outlining the proposed route to market, competing technologies and potential industry partners

5. What has happened to the Innovation to industry (I2I) and Innovation to Start-up (I2Start) grant schemes?

I2I and I2START schemes are no longer open for applications. LeapX is similar to the previous I2I and I2START schemes, in that it is also a partnering scheme. However, LeapX is designed to support only late-stage projects and requires a minimum of 20% fresh cash funding from co-funding partner(s).

While partnership with other parties is not a requirement for I2D grant, it is encouraged if the partnership is able to accelerate development of the healthcare innovation.