TTSH Community Fund

Centre for Healthcare Innovation
NHG Health

# NG TENG FONG HEALTHCARE INNOVATION PROGRAMME

## PILLAR B - TRACK 1: INNOVATION

## APPLICANT'S INFORMATION PACK

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## 1. BACKGROUND

1.1. The Ng Teng Fong (NTF) Healthcare Innovation Programme (HIP) was established through a generous gift from the family of the late Mr Ng Teng Fong to TTSH Community Fund.

## 2. OBJECTIVE

2.1. The objective of NTF HIP is to drive innovation in healthcare, to benefit and enhance the health of our patients and the population we serve.

2.2. The programme takes a broad perspective and multi-level approach to drive innovation. It supports proposals relating to:

a. Building leadership in healthcare innovation
b. Workforce transformation, through:
   - Care redesign (clinical / operational processes and models)
   - Use of automation / IT / robotics / products / devices
   - Job redesign
c. Use of different pedagogies for training and transforming our workforce.

2.3. Through these, the programme looks towards improving productivity, delivering value and meeting the needs of the future healthcare system.

## 3. FUNDING TRACKS

3.1 Funding opportunities are available through three tracks:

- Track 1: Innovation
- Track 2: Strategic Innovation
- Track 3: Strategic Research

3.2 All funded programmes and projects will need to demonstrate deliverables targeted at driving innovation through the approaches stated in Clause 2.

3.3 This information pack is applicable for applications under Track 1 Innovation. Track 1 supports innovation/ clinical research projects of up to $100,000 per project, including proposals for early prototyping/ Proof of Concept[1]/ Proof of Value[2] projects.

## 4. FUNDING CATEGORIES AND AWARD CAPS

4.1. It is recognised that the NTF HIP can cater to only a limited number of proposals, given the specific objectives of the programme, stringent criteria and limited funding. Whilst the programme intends to support deserving applicants as much as possible, it may not cover all expenses that may arise. Before making your application, please consider the award caps. Refer to **Table 1** for tracks, categories and award caps

[1] To test how an idea may work / look / feel like.

[2] To test for quantifiable value proposition including demonstration of efficacy of solution, assessment of risks and cost-benefit ratio, integration into workflow and workforce transformation etc.

## TABLE 1: FUNDING TRACKS, CATEGORIES AND AWARD CAPS

| Track | Category | Maximum Quantum ($) per Award |
|---|---|---|
| **(1) Innovation** | **Category 1: Innovation**<br>• **Care Redesign / Improvement** – Innovation and improvement initiatives in redesigning clinical / operational processes and models<br>• **Device Innovation** – Introduction, development or implementation of automation / IT / robotics / product / device in the delivery of care.<br>• **Job Redesign** – To enable healthcare professionals to achieve greater productivity (reduce cost and/or manpower savings) and transform their roles, so that they can effect new care processes and models. | Up to $100,000 for 2 years |
| | **Category 2: Clinical Research**<br>This programme supports projects with significant innovative component that have some or all of the following aspects:<br>• Direct application to the healthcare setting and the populations we serve<br>• A focus on population health outcomes / Health Services Outcomes Research<br>• Quality improvement sciences<br>• Prototypic technology with a clear role in innovative or redesigned healthcare systems and care paths<br><br>It will generally **not** support research that is not easily translatable, for example:<br>• Basic science research<br>• Trials on drugs which are not yet in the market<br>• Epidemiological research.<br><br>*Note: The projects can be implemented at institution level or through collaborative efforts with other institutions (local or international). The projects can also have synergistic antecedent funding to enable skills / leadership development of individuals in innovation, prior to implementation of a specified innovation or research project.* | |

## 5. GRANT CALLS

5.1. The funding opportunities for Track 1 Innovation: Category 1 and 2 will be made available to all TTSH employed staff through two competitive grant calls per year, during March to May and September to October of each year[3]. Do take note that the second grant call (September to October) is dependent on the availability of funds after the first grant call (March to April).

5.2. The grant calls are scheduled on very tight timelines due to multiple levels of review involved. Hence, the stipulated deadlines must be adhered to strictly, as there will be no extension of deadlines.

## 6. GOVERNING POLICIES

6.1. The NTF HIP shall follow relevant NHG/TTSH framework, policies and procedures for the administration and management of awards for projects / programmes. There may also be certain aspects where TTSH Community Fund's prevailing guidelines would need to be strictly observed. These will include, but not limiting to, policies relating to funding components, reporting requirements, purchasing policies etc.

## 7. ELIGIBILITY

7.1. All TTSH employed staff may apply to NTF HIP.

7.2. Funding will also be applicable to non-staff (e.g. research collaborator, community partners, patients, caregivers, volunteers, students) if the fund recipient is part of a larger umbrella TTSH programme where a TTSH staff is the Project Lead / Principal Investigator. Project agreement[4] should establish if applicable.

## 8. PRE-APPLICATION CONSULTATION CLINIC

8.1. Applicants are strongly encouraged to attend NTF HIP clinics for proposal refinement before submission.

8.2. Weekly Thursday clinics are available for discussing project feasibility and alignment with funding objectives.

8.3. Schedule an appointment with Grants Management Office via FormSG.

## 9. APPLICATION PROCEDURE

9.1. Applicants are required to submit **all** of the following, except otherwise stated:

a. Application Form
b. Summary Profile of Application

[3] Period of grant call may subject to change.
[4] Do approach CRIO or CMTi for agreement related assistance.

c. Financial Implication ROI Form
d. CV(s) of the Project Team
e. Any other supporting documents (e.g. testimonials, or any other documents) which supports the application

9.2. Applicants are required to search on the Centre for Healthcare Innovation Learning & Development System (CHILD)[5] for similar innovation projects that have already been done. If there are similar projects found, we would strongly encourage the applicants to collaborate or adopt the existing solutions. If applicants wish to proceed with your projects, you would need to provide a justification as to why collaboration and/or adoption is not possible.

9.3. For all applications requesting for Research Assistant (RA), applicants are strongly encouraged to consult Clinical Research and Innovation Office (CRIO) for assessment of its scope and FTE . You should consult ahead of the submission deadline to ensure sufficient review time for review by CRIO.

9.4. [Category 2 - Clinical Research] Submission to NHG DSRB for ethics approval is **mandatory** for all research applications that will be involving patients, patient samples, patient records for NHG institutions at any point during the research project. Please ensure that the project title is the same for both the grant application form and the NHG DSRB ethics application form. Applications that will not be involving patients, patient samples, and patient records from NHG institutions will not be required to submit to NHG DSRB. You need not have submitted a DSRB application before applying to NTF HIP. However, you must obtain the DSRB approval (if required) before the commencement of the project.

9.5. For app-based or technology-based projects, it should demonstrate cluster-level buy-in and support, integration strategy with existing healthcare systems, long-term maintenance and support plans and sustainability beyond the funding period. Standalone solutions without integration capabilities will generally not be supported.

9.6. Please use the application form that is applicable to your proposal. If you are unsure, please contact the Grants Management Office.

9.7. All sections of the application form must be duly signed by the applicant and endorsed by respective Reporting Officer / Head of Department and your designated division endorser.

**9.8. Incomplete applications or applications submitted after the closing date and time will not be considered. You may not amend your applications, or submit additional information after the closing date and time (except in response to specific questions raised during the review period). Hence, please consider your application content carefully before submitting.**

[5] https://child.chi.sg/

## 10. BUDGETING

10.1. The fundable components are:

| Fundable | Non fundable (unless exceptional approval granted) |
|---|---|
| • Manpower services (excluding salaries of PI, Co-I & Collaborators)<br>  ○ Salaries offered to staffs should be reasonable, in line with local market benchmarks and comply with formal established pay scale of the respective Human Resource Departments<br>• Equipment and preventive maintenance (excluding laptops, PC, mobile phones, similar equipment already available)<br>• Consumables<br>• Other operating expenses: This includes expenses incurred for<br>  ○ Publication capped at $3,000 per project<br>  ○ Transport capped at $30 per trip. Transport claims by staff must be accordance to HR guidelines<br>  ○ Tests, laboratory services, data gathering services, statistical services, reimbursement of time and effort to research patients and any other expenses directly related to this project that does not fall under the manpower, equipment and consumables.<br>  ○ Costs for conferences for sharing purposes will be reviewed and capped by $1,000 per project for local conference only (subjected for approval and no overseas conference) | • Administrative support<br>• Refreshment<br>• Relocation<br>• Renovation<br>• Patenting expenses<br>• Overseas conference<br>• Overseas travel expenses<br>• Literature search & Journal subscription<br>• Contingency funds<br>• Celebratory events<br>• Any expenses incurred by Applicant's spouse / family<br>• Travel costs for collaborators and vendors<br>• Stationery and Printing<br>• Overhead expenses (unless specially provided for based on the nature of the research, subjected to approval)<br>• Locum support |

## 11. REVIEW AND APPROVAL PROCESS

11.1. All completed applications will undergo a rigorous process of evaluation by the NTF HIP Innovation Review Panel and Management Committee.

11.2. It is important that you fill out the application accurately and with as much relevant information as possible to aid in the review of your application.

11.3. Applicants will need to state clearly the scope and deliverables in your applications, and relate to how it will fulfil the objective of the project. For example, it will be important to describe how the proposed innovative and improvement initiatives will lead to care delivery redesign, improved productivity and workforce transformation in the healthcare setting.

11.4. At any point in time, the Innovation Review Panel and/or Management Committee (through Grant Management Office) may direct questions to you and your HOD during the review process, and you will be asked to respond and/or submit additional information specific to the query. You must adhere to the deadlines given by the Panel or Committee to respond.

11.5. Applicants will also be provided with feedback where applicable, after the grant results are released.

11.6. Decision made by the Management Committee is final and no revisions will be made.

11.7. The review and approval process will take 5 to 6 months after the grant call closes. Please take this timeline into account when planning the timeline and deliverables of your application.

## 12. REQUIREMENT OF AWARDEES

12.1. The award is strictly non-transferable.

12.2. The award does not allow a change in project.

12.3. No replacements may be made if the applicant is unable to start the project. His/her replacement must submit a fresh application in the next grant call. However, exceptions to this (e.g. medical reasons, replacement of collaborators) may be considered on a case-by-case basis.

12.4. To ensure prudency in budgets proposals and allocation, successful applicants are required to utilise at least 80% of awarded amount in accordance to the projected milestones / budget breakdown. Applicants can only spend on items that have been approved.

12.5. Submission of formal grant variation requests for approvals are necessary for any intended adjustments to the budget allocation, duration of project, purchase of non-standard / unapproved items. Formal requests must be submitted at least 60 days in advance for processing.

12.6. Successful applicants are responsible to ensure DSRB approval (if applicable) has been obtained before the commencement of the project. NTF HIP will not undertake or be responsible for the DSRB submission or approval of applicant's project.

12.7. Successful applicants are responsible to adhere to all Singapore standard research regulations and guidelines that govern this project. The Project Lead/ Principal Investigator are also required to ensure that they are updated with the latest regulations and guidelines of Singapore that govern this project.

12.8. Successful applicants are required to sign a Letter of Acceptance.

12.9. Successful applicants will be required to submit progress reports and final report within the stipulated timeframes.

12.10. Upon completion of the project, successful applicants would be required to submit a copy of poster artwork summarising the outcomes and impact and to grant permission to CHILD administrative team to publish and store the material for viewing, downloading extraction of content in part of while and/or downloading purposes for users of CHILD and the public.

12.11. The outcomes of your programme may be subject to continuous tracking for at least 1 year after the end of programme.

12.12. 10% of total Awarded Amount shall be retained by CHI and will only be disbursed upon GMO's verification and satisfaction that all outstanding documentation and requirements have been fulfilled by the Recipient. Such documentation may include, but is not limited to, the Final Progress Report, Claim Forms, and any other materials or deliverables as determined by GMO in its sole discretion. GMO reserves the right

to withhold this retention amount indefinitely if the submitted documentation is deemed unsatisfactory or incomplete, and may cease any further disbursements.

12.13. NTF HIP reserves the right to withdraw all funding and suspend the period of the awarded programme funding indefinitely, should there be any form of non-compliance of NHG/TTSH/TTSH Community Fund relevant policies and guidelines, improper conduct, or unjustified utilisation of funds.

## 13. MISCELLANEOUS

13.1. In accordance with The Personal Data Protection Act 2012 (PDPA), NTF HIP ensures your privacy and adhere by the PDPA. However, NTF HIP reserves the rights to share information on applicants' identity and details of your awards, in reports to the donor from time to time.

## 14. CONTACT INFORMATION

14.1. The NTF HIP is co-managed by the offices of Grant Management Office (Centre for Healthcare Innovation) and Development Fund. If you have any queries, or require help in filling out your application forms, kindly contact any of the following personnel for assistance.

**Yeo Wan Jun / Amber Ng / Tsai Pi Kuang**
Grants Management Office, Centre for Healthcare Innovation
Email: CHI.Grants.Mgmt.Office@nhghealth.com.sg

## FREQUENTLY ASKED QUESTIONS

### 1. Application process related questions:

**a) Who is eligible to apply for the grant?**
The applicant must be an employee of TTSH. Please refer to Clause 7 for more information.

**b) Where can I understand which category I should apply for?**
This will depend on your intentions and purposes of the application. Please refer to Clause 4 for more information. If you are unsure, please contact the Grant Management Office, Centre for Healthcare Innovation to clarify your doubts.

**c) Can I apply to more than one category per call?**
Yes, for applications that is discrete and different. You may not submit the same proposal to different categories.

**d) Can I apply without approaching CRIO (Clinical Research and Innovation Office) for review on request for Research Assistant?**
You are strongly encouraged to consult CRIO for an assessment on the scope and FTE request of the Research Assistant in your application.

**e) What is the total duration from the time of application to announcement of results?**
The results will be announced 5 to 6 months after the grant call closes. Please take this timeline into account when planning for your projects.

### 2. Funding related questions:

**a) How much funding will be awarded to me? Will I be fully funded?**
This will depend on the category in which you are applying for, as well as your budget proposal. The NTF HIP will review your application and budget proposal to decide on the quantum to award. Whilst the programme intends to support deserving applicants as much as possible, it may not cover all expenses that may arise. Should you have items that fall out of the list, it will be considered on a case by case basis. Please refer to Clause 4 and 9 for award caps, and fundable and non-fundable items as a guide.

**b) How will I receive the funding?**
The NTF HIP funding is administered on a reimbursement basis. Project expenses are to be paid by institution/ project team first before project teams submit claims for reimbursement.

**c) Must I use up all the funds that are awarded to me? By when must I finish using the funds?**
The funds awarded to you are based on your project scope, deliverables and milestones. You will be required to implement your project as in the approved timeline and budget. For project-based awards, you are required to spend at least 80% of the awarded funding by the end of your project duration. Should you incur savings, or

require changes to your approved budget expenditure, please inform the Grant Management Office.

**d) What does the 10% withholding policy of the project's total approved Awarded amount mean? (Refer to Clause 12.12)**

To encourage the timely submission of all required final reports and project documentation*, 10% of the approved Awarded amount will be withheld until all outstanding requirements have been satisfactorily fulfilled.

This means that:

- The project's final reimbursement claim will be withheld, up to 10% of the project's total approved budget.
- The withheld amount will only be released upon completion and submission of all required reporting and deliverables.

**Such documentation may include, but is not limited to, the Final Report, Claim Forms, and any other materials or deliverables as determined by the NTFHIP Secretariat Team (GMO) in its sole discretion.*

**3. ROI and Outcome related questions:**

**a) How should I derive the ROI when I have not started my project?**

The spreadsheet is designed for you to provide an estimation of potential savings, which would be understandable should there be any changes to the sum or category. This spreadsheet serves to provide reviewers a better view of the potential benefit(s) of your project based on the project objectives.

**b) In the event where I am unable to fill up the ROI/Outcome value due to the nature of my project, can I still submit?**

Yes, you may still submit. However, for the completeness of your application, please provide us the rationale on why you are unable to fill up the ROI/Outcome spreadsheet. You may indicate the rationale on the spreadsheet itself for us to note.

**c) Do I have to submit revision of ROI/Outcome spreadsheet, should there be any changes to it after project is awarded and in-progress?**

There is no need to submit amendment to revise ROI/Outcome spreadsheet (e.g. change the sum or add/remove certain section). We will be requesting the awardee to provide us the updated ROI/Outcome when the project is coming close to an end.