# RIO TINTO CHILDREN'S DIABETES CENTRE

A Breakthrough T1D Centre of Excellence











## 2025 Seed Funding Grants - Call for Proposals Guide

Applications due 10 November 2025 at 5pm Australian WST.

The goal of the Rio Tinto Children's Diabetes Centre: A Breakthrough T1D Global Centre of Excellence in Diabetes Research (Global CoE) is to improve the lives of all young people living with diabetes, their families and community by bringing together research, education and clinical care. The Global CoE is supported by five national and global institutions/hospitals and is a world-leading initiative building on the excellent team, experience, and connections already in place among the Global CoE and partner sites.

The Global CoE, through its <u>Community Involvement Framework</u> and <u>Guidelines</u>, is committed to embedding lived experience within its programs of work to ensure meaningful research occurs that will directly benefit children and young people living with type 1 diabetes.

#### Summary

The Global CoE aims to encourage new and innovative research, researchers and translation ideas and projects. Seed funding grants are made possible through funding support by Rio Tinto, Telethon Trust and Breakthrough T1D, and are intended to generate pilot data to increase competitiveness and strengthen application for larger grants from sources such as Australia's National Health Medical Research Council and JDRF in future funding rounds. Applications are sought for projects that progress the goal of the Global CoE which is to improve the lives of children and families living with type 1 diabetes.

These grants are open for early to mid-career researchers\* (EMCRs) and allied Health Professionals, and the amount available per project funded is set at \$20,000 AUD (excl. GST). At least two seed funding grants may be awarded in this funding round; there is provision to award more grants based on proposal merit and the evaluation and recommendations of the Review Panel.

All projects will need well-defined deliverables and applicants must justify their requested budget against defined project costs, including participant reimbursement and community involvement, if applicable. If a proposal is successful, the investigator may receive the grant in two 'instalments' according to demonstrated achievement of scheduled deliverables. The planned duration of funded activities will be no more than 18 months.

<sup>\*</sup>The 'effective' number of years from the date that Doctorate of Philosophy (PhD) thesis was passed (not date of degree conferral)
Relative to Opportunity and once Career Disruptions are considered.

<sup>&</sup>quot;Early Career Researchers" are defined as having less than 7 years' postdoc.

<sup>&</sup>quot;Mid-Career Researchers" are defined as having less than 15 years' postdoc.

"Early Career Researchers" may include individuals with a University medical, allied health, nursing or relevant Biomedical Science degree plus three years full-time equivalent of active research. experience (the date the applicant achieved three years (full-time equivalent) research experience will be used as a "PhD pass date" equivalent).

#### **Advice**

Seed funding grants will be awarded to projects that address outcomes for type 1 diabetes (T1D) that contributes to at least one objective of the Global CoE:

- 1. To formulate a framework to develop, implement and evaluate models of care that lead to improved health outcomes and reduced burden for people living with T1D.
- 2. To promote effective transfer of research outcomes into health policy and/or practice.
- 3. To develop novel advanced economic frameworks that include the broad true costs of T1D to enhance access to novel therapies and shape policies.
- 4. To facilitate effective and cross disciplinary collaboration and partnerships with academia, industry, consumers, clinical organisations and key experts and stakeholders.

The project proposal should also include one or more of the following:

- Focus on new knowledge or technologies
- Promote effective translation of knowledge or technology into mainstream clinical practice
- Been conceived and driven by members of the community and/or has a clearly identified and involved consumer group
- A focus on an underserved or disadvantaged group.

The purpose of these grants is to fund either seed activities that will support early to mid-career researchers to either generate pilot data to strengthen a major competitive grant application; including proposals that seek to contribute to improving the likelihood of attracting future funding and/or creating discovery, commercialisation, and other translation or impact opportunities.

Seed funding grants can be used toward activities including, but not limited to:

- generating pilot data
- developing collaborations with other labs and institutes
- conducting community/stakeholder consultations
- protocol development,
- simulations to support study design
- development of a competitive project grant submission.

Awarded amounts cannot be used to cover general infrastructure costs (incl. on-costs).

#### Eligibility

- Applicants must include a Global GCoE Collaborator as a Co-Investigator, as listed in Attachment A.
- Lead applicant must be an EMCR as defined in the 'Summary' section (\*)
- Applicants must submit their proposal using the RTCDC GCoE Seed Funding Grant Application Form 2025 and follow the process as provided on this form. Only proposals using this form will be considered further.

#### **Application Review Process and Evaluation Criteria**

- A Grant Review Panel, that includes the GCoE Community Involvement Coordinator and a consumer representative, will review and evaluate the eligible applications.
- Applications will be assessed on 1) scientific merit & feasibility, 2) innovation, 3) potential impact, contribution and alignment to the overall objectives of the Global CoE 4) development benefits for lead investigator and 5) community participation, engagement and involvement as per the RTCDC GCoE Seed Funding Grant Scoring Guide 2025.
- The 2 highest ranked applications will be awarded up to \$20,000 AUD.

Additional grants may be awarded based on application merit.

#### **Important dates**

| Stage  | Date                    |
|--|-------------------------|
| Grant round opens  | 29 September 2025       |
| Applications close 5pm Australian WST.                   | 10 November 2025        |
| Grant Review Panel assess and make recommendations       | December 2025 – January |
|  | 2026                    |
| Talent and Capacity Building Subcommittee consider Panel | By 31 January 2026      |
| recommendations.   |                         |
| Management Steering Group endorse recommendations        | By 31 January 2026      |
| Applicants notified of outcome.                          | By 31 January 2026      |

#### **Conditions of award**

- All awarded funds must comply with the Terms and Conditions of the award, including appropriate acknowledgement of the Global CoE in any grant outputs.
- All awarded funds must be expended within 18 months of receiving the award.
- Any funds not expended within 18 months must be returned to the Global CoE.
- Recipients will be required to demonstrate achievement of outcomes by providing:
  - Progress report 9 months from the acceptance of the award (at halfway point of the grant);
  - Presentation to Scientific Program Subcommittee at the end of the grant period on project outcomes.
  - Provide a short report at the end of the grant period (no more than 3 pages, with presentation slide deck as attachment) outlining how the funds were used, and outcomes relating to the agreed deliverables of the award.
- Recipients agree to meet with the GCoE Community Involvement Coordinator after grant is awarded, but prior to project commencing.

#### **Related Documents**

- RTCDC GCoE Seed Funding Grant Application Form 2025
- RTCDC GCoE Seed Funding Grant Scoring Guide 2025
- RTCDC GCoE Seed Funding Grants Terms and Conditions 2025
- RTCDC GCoE Seed Funding Grant Policy 2025
- RTCDC GCoE Community Involvement Framework 2022
- RTCDC GCoE Community Involvement Framework 2022

### ATTACHMENT A – ELIGIBLE COLLABORATORS AND SITES

| Name                     | Institution  |
|--------------------------|--|
| A/Prof Phil Bergman      | Monash Children's Hospital, Australia                |
| A/Prof Spiros Fourlanos  | Royal Melbourne Hospital/University of Sydney        |
| A/Prof Yvonne Zurynski   | Macquarie University, Australia                      |
| Dr Alicia Jenkins        | University of Sydney, Australia                      |
| Dr Amelia Harray         | The University of Western Australia                  |
| Dr Anthony Pease         | Monash University, Australia                         |
| Dr Anthony Russell       | Queensland Health, Australia                         |
| Dr Anthony Zimmermann    | North Adelaide Local Health Network, Australia       |
| Dr Aveni Haynes          | The Kids Research Institute Australia                |
| Dr Chetty Tarini         | Royal Hospital for Sick Children Edinburgh           |
| Dr Craig Taplin          | Perth Children's Hospital, Australia                 |
| Dr Daniel Tortorice      | College of the Holy Cross, USA                       |
| Dr Dessi Zaharieva       | Stanford University, USA                             |
| Dr Ella Zomer            | Monash University, Australia                         |
| Dr Emily Callander       | Monash University, Australia                         |
| Dr Gerry Fegan           | Fiona Stanley Hospital, Australia                    |
| Dr Helen Woodhead        | Sydney Children's Hospital Network, Australia        |
| Dr Jeffrey Cannon        | The Kids Research Institute Australia                |
| Dr Keely Bebbington      | The Kids Research Institute Australia                |
| Dr Ki wook Kim           | University of New South Wales                        |
| Dr Kristen Neville       | Sydney Children's Hospital Network, Australia        |
| Dr Kriti Joshi           | Children's Hospital Queensland                       |
| Dr Laurel Messer         | Barbara Davis Centre, University of Colorado, USA    |
| Dr Maddalena Ferranna    | The University of Southern California                |
| Dr Marie-Anne Burckhardt | University of Basel, Switzerland                     |
| Dr Martin de Bock        | University of Otago, New Zealand                     |
| Dr Mary Abraham          | The Kids Research Institute Australia                |
| Dr Megan Penno           | University of Adelaide                               |
| Dr Michael Huang         | Baker Heart and Diabetes Institute                   |
| Dr Rebecca Pedruzzi      | The Kids Research Institute Australia                |
| Dr Tarini Chetty         | NHS Lothian, Scotland                                |
| Dr Tony Huynh            | Queensland Health, Australia                         |
| Dr Vinutha Shetty        | Perth Children's Hospital, Australia                 |
| Helen Clapin             | The Kids Research Institute Australia                |
| Prof Ann Maguire         | The Children's Hospital at Westmead, Australia       |
| Prof David Bloom         | Harvard TH Chan School of Public health, USA         |
| Prof David Maahs         | Stanford University, USA                             |
| Prof David O'Neal        | University of Melbourne, Australia                   |
| Prof Elizabeth Davis     | The Kids Research Institute Australia                |
| Prof Jan Fairchild       | Women's and Children's Hospital, Adelaide, Australia |
| Prof Jeffrey Braithwaite | Macquarie University, Australia                      |
| Prof Jenny Couper        | University of Adelaide, Australia                    |

| Prof Mike Riddell    | York University, Canada                          |
|----------------------|--|
| Prof Paul Fournier   | University of Western Australia, Australia       |
| Prof Peter Adolfsson | University of Gothenburg, Sweden                 |
| Prof Peter Coleman   | Royal Melbourne Hospital/University of Melbourne |
| Prof Sophia Zoungas  | Monash University, Australia                     |
| Prof Tim Jones       | Perth Children's Hospital, Australia             |