Dementia Research Team Grants Round

Peer Review Guidelines
For Funding Commencing in 2015

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# Overview of the Peer Review Process

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<tr>
<th>Application Stage</th>
<th>Timeframe</th>
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<tbody>
<tr>
<td>Applications close</td>
<td>8 October 2014</td>
</tr>
<tr>
<td>Grants Review Panel (GRP) members to declare Conflicts of Interest and Spokesperson Suitability</td>
<td>October</td>
</tr>
<tr>
<td>Applications allocated to Primary (1SP) and Secondary (2SP) Spokespersons</td>
<td>October – November</td>
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<tr>
<td>Spokespersons to complete initial assessments and provide initial scores</td>
<td>November – December</td>
</tr>
<tr>
<td>Spokespersons Reports provided to applicants</td>
<td>January 2015</td>
</tr>
<tr>
<td>Applicants submit Applicant Response (&quot;rebuttal&quot;) to Spokespersons Reports</td>
<td>January</td>
</tr>
<tr>
<td>Spokespersons revise scores considering Applicant Response and Indigenous Assessor Report (if applicable). Not For Further Consideration (NFFC) list is produced.</td>
<td>January - February</td>
</tr>
<tr>
<td>GRP members consider NFFC list</td>
<td>February</td>
</tr>
<tr>
<td>GRP members review all applications not on the NFFC list leading up to the GRP meeting</td>
<td>February</td>
</tr>
<tr>
<td>GRP meeting</td>
<td>March</td>
</tr>
<tr>
<td>Applications recommended for funding are provided to the Minister for Health for approval</td>
<td>March</td>
</tr>
</tbody>
</table>
ACRONYMS

1SP Primary Spokesperson
2SP Secondary Spokesperson
AI Associate Investigator
CI Chief Investigator
CoI Conflict of Interest
DRC Direct Research Costs
GRP Grant Review Panel
IAR Indigenous Assessor Report
NHMRC National Health and Medical Research Council
PSP Personnel Support Package

1. ABOUT THIS DOCUMENT

This document describes the key steps and procedures involved in peer reviewing Dementia Research Team Grant applications. It provides assistance to members of the Grant Review Panel (GRP) and applicants.

These guidelines complement the NHMRC Funding Rules and The 2014 Dementia Research Team Grants Scheme Specific Information for funding commencing in 2015, which contain essential information about the objectives of the scheme, eligibility and funding rules, the application process and other relevant matters.

It is important that the guidelines be read in conjunction with the 2014 Dementia Research Team Grants Advice and Instructions to Applicants for funding commencing in 2015. Both documents can be found at https://www.nhmrc.gov.au/grants/apply-funding/dementia-research-team-grants.

2. DESCRIPTION AND OBJECTIVES OF THE SCHEME

2.1 Description

Subject to the receipt of competitive applications, the number of applications to receive funding will be the top ranked application in each of the five areas under the priority framework for dementia research as described in Attachment A. The five areas are:

Primary Prevention to prevent the disease from developing
1) Research into origins of dementia and related neurodegenerative disease
2) Research into disease mechanisms and models

Secondary Prevention and treatment for people developing dementia
3) Disease definitions and diagnosis research
4) Treatment and prevention research
Quality of Life and Care
5) Health and social care research

2.2 Scheme Objectives
The primary objective of the Dementia Research Team Grants scheme is to support the conduct and development of innovative, high quality, collaborative research under the dementia research priority framework (Attachment A).

Other objectives of the Dementia Research Team Grants scheme are to:
- promote effective translation of research into health policy and/or practice;
- provide opportunities to expand and improve collaborations between research teams; and
- foster and build capacity in the health and medical research workforce.

Applications need to address areas of research under the priority framework such as primary prevention to prevent dementia disease from developing, secondary prevention and treatment for people developing dementia or research improving quality of life and care for people with dementia and their carers.

Applicants are encouraged to attract researchers into dementia research from other fields such as neurobiology, immunology, chemistry, bioengineering, information and communications technology, genomics, epidemiology and cell and vascular biology.

Teams may be a single physical entity or institute, or be a geographically disparate network linking across more than one institution. Teams are encouraged to collaborate with, and participate in, international research studies.

2.3 Duration and Funding
For a single application, funding may be requested up to $6.5 million, with funding to be awarded for a period of five years.

In order to be funded, applicants will need to demonstrate in their grant proposal that the research projects are not being funded through other schemes.

3. CONFIDENTIALITY AND PRIVACY

Panel members are reminded of the importance of confidentiality and privacy. Disclosure of information about applications and some aspects of peer review processes, for example the identity of members and Spokespersons, details of GRP discussion and scoring, may potentially have damaging consequences (such as adversely impacting on intellectual property rights and professional reputations). It is a legislated responsibility of all NHMRC staff and Committee members not to disclose to any person confidential information to which they become privy as a result of the exercise of their responsibilities to the NHMRC. Information contained in applications is regarded as confidential unless otherwise indicated and will be received and treated as confidential by the NHMRC.

Documents containing personal information are handled and protected in accordance with the provisions of the Privacy Act 1988 (the Act), which sets standards for the collection, storage, use and disclosure of, and access to, personal information. Personal information is disclosed only with permission of the individual to whom it relates or where the Act allows.

Applicants must not directly contact GRP members in relation to their application, or the peer
review process. If they do so, GRP members must inform NHMRC, and NHMRC may exclude their application from further consideration. All applicants are to direct any queries regarding their application(s), to their Administering Institution’s Research Administration Office in the first instance.

Similarly, GRP members must not contact applicants.

4. ROLES AND RESPONSIBILITIES

A GRP will be established to review grant applications. The panel will consist of national and international panel members with expertise in the field of dementia. The composition of the GRP will reflect the number and subject matter of the applications being assessed. Geographical spread, gender balance and institutional representation are also considered prior to the finalisation of panel membership.

The peer review process requires applications to be reviewed by people with expertise in a particular field. Conflicts of Interest’s (COIs) in the research area are common and it is important that they are disclosed and dealt with properly. Conflicts of interest declared by peer review participants will be managed according to the guidelines provided at Attachment B.

The roles and responsibilities for those participating in the Dementia Research Team Grants peer review process are identified in the Peer Review Participants table below. Applications will be reviewed against the Assessment Criteria presented in Attachment C, in line with the Category Descriptors provided at Attachment D. Where applicable, applications relating to Indigenous health will additionally be assessed against the Indigenous Criteria outlined in Attachment G.

Following the peer review process, participants in the peer review process will be publicly acknowledged on the NHMRC website without reference to the specific application(s) that they assessed. The identity of assessors (including GRP members, Chairs and Assistant Chairs as well as Indigenous research experts) is confidential and will not be revealed to the applicant at any time.

GRP members are appointed based on advice from NHMRC Internal Experts and should currently hold, or have held, a health or medical research grant obtained through a nationally or internationally competitive peer review process.

In the event that a GRP member withdraws from the peer review process, the NHMRC will, if time permits, replace them with another member possessing appropriate expertise relevant to the GRP. If a replacement member cannot be found, NHMRC will reallocate the applications ensuring that the expertise required for each application is appropriately represented.

No GRP Chair or panel member will be a chief investigator on an application being reviewed by the panel. In addition, the Chair will not participate in scoring. A Chair’s role is to ensure that NHMRC’s procedures are adhered to and that fair and equitable consideration is given to every application being reviewed at the GRP meeting.
## 4.1 Peer Review Participants

<table>
<thead>
<tr>
<th>Role</th>
<th>Responsibility</th>
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<tbody>
<tr>
<td><strong>Chairs</strong></td>
<td>The Chair’s role is to ensure NHMRC’s procedures are adhered to and that a fair and equitable consideration is given to every application being reviewed at the GRP meeting. Chairs are appointed to be independent of the review of research proposals and must manage the process of peer review in accordance with these guidelines. Chairs will:</td>
</tr>
<tr>
<td></td>
<td><strong>Prior to the GRP meeting:</strong></td>
</tr>
<tr>
<td></td>
<td>• identify and advise NHMRC of all real or potential conflicts of interest (CoI) they have with applications to be reviewed by the GRP (Attachment B); and</td>
</tr>
<tr>
<td></td>
<td>• familiarise themselves with all of the applications being considered by the GRP.</td>
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<td></td>
<td><strong>During the GRP meeting:</strong></td>
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<tr>
<td></td>
<td>• ask members to declare any strong associations between panel members (e.g. current and previous collaborations) in order that other panel members are aware of these associations;</td>
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<tr>
<td></td>
<td>• keep discussions on time and focused;</td>
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<td></td>
<td>• ensure procedures are followed;</td>
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<tr>
<td></td>
<td>• assist members with their duties and understanding what is expected of them;</td>
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<tr>
<td></td>
<td>• take appropriate action for declared CoIs;</td>
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<td></td>
<td>• promote good engagement by Spokespersons in all discussions;</td>
</tr>
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<td></td>
<td>• ensure all discussions of research and translation achievement are considered relative to opportunity;</td>
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<tr>
<td></td>
<td>• ensure the discussion leads to an outcome where a Category Score which aligns with the category descriptors is determined for the application; and</td>
</tr>
<tr>
<td></td>
<td>• endorse recommended budgets as an accurate record of panel discussion.</td>
</tr>
<tr>
<td><strong>Assistant Chairs</strong></td>
<td>The Assistant Chair will:</td>
</tr>
<tr>
<td>(NHMRC Internal Experts)</td>
<td>• act as Chair for applications where the Chair is unavailable or has a declared CoI;</td>
</tr>
<tr>
<td></td>
<td>• identify and advise NHMRC of all real or potential CoI they have with applications to be reviewed by their panel;</td>
</tr>
<tr>
<td></td>
<td>• familiarise themselves with all of the applications being considered by the GRP;</td>
</tr>
<tr>
<td></td>
<td>• record key points provided by the Spokespersons regarding an application’s strengths and weaknesses and other issues pertinent to each application during the panel discussion;</td>
</tr>
<tr>
<td></td>
<td>• record reasons for adjusting the proposed budget; and</td>
</tr>
<tr>
<td></td>
<td>• ensure all budget discussions are consistent for all applications and</td>
</tr>
</tbody>
</table>
Panel Members

Panel members will:

- identify and advise NHMRC of all real or potential CoIs they have with applications on their GRP;
- be fair, impartial and scientific;
- read all applications to be assessed by the GRP, including the Spokespersons Reports and Applicant Responses;
- confirm the inclusion of applications on the Not For Further Consideration (NFFC) list;
- be prepared to participate in panel discussion for each application including budget discussions where applicable; and
- be prepared to score assessment criteria (*Attachment C*) and vote on each application.

Primary Spokesperson (1SP)

Prior to the GRP meeting:

- indicate whether the application fits under the priority framework for dementia and which of the five areas it primarily addresses;
- score the application against the assessment criteria using the category descriptors (*Attachment D*) and provide these scores and comments (including questions) for rebuttal by the applicant within the prescribed timeframe;
- familiarise themselves with the proposed budget (*Attachment E*);
- following consideration of the Applicant Response and Indigenous Assessor Report (if applicable), re-score the application within the prescribed timeframes; and
- prepare speaking notes for each application assigned to them as 1SP.

At the GRP meeting:

- lead the discussion using prepared notes;
- ensure that the Applicant Response and Indigenous Assessor Report (if applicable) are considered;
- advise the panel of any applications that have claimed a career disruption;
- provide final scores against each assessment criterion using category descriptors; and
- (if required) lead the discussion on the appropriateness, or otherwise, of the requested budget.

Secondary Spokesperson (2SP)

Prior to the GRP meeting:

- indicate whether the application fits under the priority framework for dementia and which of the five areas it primarily addresses;
- score the application against the assessment criteria and provide these scores and comments (including questions) for rebuttal by the applicant within the prescribed timeframe;
- familiarise themselves with the proposed budget;
- following consideration of the Applicant Response and Indigenous Assessor Report (if applicable), re-score the application within the prescribed timeframes; and
- prepare speaking notes for each application assigned to them as 2SP.

**At the GRP meeting:**
- add to 1SP comments referring to prepared notes;
- refer to the Applicant Response; and
- provide final scores against each assessment criterion using category descriptors.

| NHMRC Senior Research Scientists | NHMRC staff with extensive research expertise will be involved in:
|----------------------------------|--------------------------------------------------
|                                  | • establishing the grant review panels;
|                                  | • allocating applications to panels and Spokespersons; and
|                                  | • assisting and advising on the GRP process. |

| NHMRC Staff Secretariat          | NHMRC staff assigned to each panel will:
|----------------------------------|--------------------------------------------------
|                                  | • act as the first point of contact for GRP members;
|                                  | • approach potential GRP members, on advice from NHMRC Senior staff;
|                                  | • provide the following administrative support and advice to the Chair, Assistant Chair and members:
|                                  |   o facilitate access to applications;
|                                  |   o maintain accurate records of CoI;
|                                  |   o ensure that the Chair is aware of all CoI declared by members; and
|                                  |   o provide advice on the treatment of declared CoI;
|                                  | • facilitate the sending of Spokespersons Reports and Indigenous Assessor Reports (if applicable) to the applicants once the assessment process has been finalised;
|                                  | • facilitate applicant access to Spokespersons Reports;
|                                  | • prepare the list of NFFC applications;
|                                  | • ensure the declared CoIs of the Assistant Chair and Panel members is signed off by the Chair and declared CoIs of the Chair is signed off by the CEO or delegate before the commencement of the panel meeting;
|                                  | • prepare the order of assessment of applications during the GRP meeting;
|                                  | • record the outcome of GRP discussion; and
|                                  | • record and notify NHMRC Senior staff of any requests for clarification or advice.

| Community                        | NHMRC invites respected members of the general community to sit in on the
| Observers | GRP meetings to observe that NHMRC policy and procedures are being adhered to. The Observers assist NHMRC in ensuring that the assessment of all applications is fair, equitable and impartial. Observers will be briefed on GRP procedures prior to the GRP meeting. They will not participate in the discussion of any application. During GRP discussions independent Observers will:  
- monitor the procedural aspects of the GRPs; and  
- provide feedback to NHMRC on the consistency of procedures across all GRPs. Observers are subject to the same CoI requirements as the GRP panellists. The Chairs must make sure that Observers are fully aware of the names and affiliations of the Chief Investigators (CIs) of applications under discussion. Observers may raise issues of a general nature with NHMRC staff. |

4.2 Remuneration  
NHMRC appreciates the time commitment made by all GRP members. Sitting Fees will be paid to members appointed by the NHMRC, upon attendance at the recommendations meeting, unless they are employed within the Commonwealth, State or Territory Governments on a full-time basis.

5. THE PEER REVIEW PROCESS  
The NHMRC peer review is designed to provide a rigorous, fair, transparent and consistent assessment of the merits of each application in keeping with the *Australian Code for the Responsible Conduct of Research* (available at: www.nhmrc.gov.au/publications/synopses/r39syn.htm).

5.1 Before the GRP Meeting  
Once panel membership has been finalised, the following processes occur:

| Step A. Panel members identify Conflict of Interests |

As panel members are invited to participate on a panel, they will be provided access to the Snapshot Summary Report of each application assigned to the GRP, and will declare their conflicts of interest (CoI) in accordance with NHMRC guidelines provided at *Attachment B*. Panel members will also be asked to identify applications for which they have the relevant expertise (or lack thereof) to review as the 1SP or 2SP.  

Members will be given access to the full application only if they have no or a low CoI. Where panel members declare that they have a high CoI they will not be granted access to the full details of the application.  

Some members may have a CoI for which they require a ruling. In this instance NHMRC will assess the information in the declaration and specify a particular level of participation in RGMS. Members are requested to ensure they include sufficient detail in their declaration to ensure an accurate CoI assessment can be made by NHMRC staff. Important details include:
• In the case of collaborations and relationships (e.g. publications, grants, etc.), did these activities occur 5 or more years ago, or are they more recent?
• What is/was the extent of the collaborations (e.g. frequent direct interaction or only familiarity with an individual through a common institution)?
• Is the collaboration (e.g. publications, grants, etc.), with a Chief Investigator, or an Associate Investigator?

The answers to these questions will help NHMRC to assess CoI: NHMRC’s peer review processes are more rigorous if experts are not unnecessarily excluded from the assessment process due to ambiguity arising from excessively brief CoI declarations.

Panel members are asked to notify the GRP Secretariat immediately if a CoI is identified later in the process. It is important that all CoIs are declared early; CoIs that are not declared until the GRP meeting can cause delays.

Panel members are required to review and confirm all NHMRC CoI rulings in advance of the panels meeting.

Step B. Allocate Spokespersons

Taking into account CoIs and Spokesperson Suitability, Primary (1SP) and Secondary (2SP) Spokespersons will be allocated to each application by NHMRC Senior staff. Upon accessing the full applications, the Spokespersons should confirm whether they have CoIs not previously evident.

Step C. Indigenous health expert provides Indigenous Assessor Report

Applications relating specifically to Aboriginal or Torres Strait Islander people or health issues will be identified based on information entered by the applicant into the application. A specifically selected Indigenous health expert will be involved in assessing Indigenous health applications against the Indigenous Criteria (Attachment G).

An Indigenous health expert will be asked to prepare an Indigenous Assessor Report for any applications. NHMRC will ask that the Indigenous Assessor Reports be provided to NHMRC in time for these reports to be distributed to Spokespersons.

Spokespersons will take the Indigenous Assessor Reports into consideration when assessing applications.

Step D. Spokespersons provide assessments and initial scores

The 1SP and 2SP assess the application against the assessment criteria (Attachment C) and score them using the category descriptors (Attachment D).

When preparing comments and questions for the applicants, Spokespersons should consider the following:
• be clear and concise to avoid misleading the applicant;
• not provide an opportunity for the applicant to modify the research plan in any major way;
• not provide arbitrary or irrelevant commentary of the application;
• do not identify the identity of 1SP and 2SP, or the members of the GRP who will peer review the application; and
• do not prioritise questions to the applicant, except to identify whether the issue is of major or minor significance (i.e. refrain from numbering questions).

Spokespersons, through the Spokespersons Report, may seek to:
• ask additional questions that may assist the GRP’s understanding of the application;
• gain further justification of any perceived weaknesses in the project;
• clarify relationships with other applications, funding sources and existing grants held, or to be held by the applicants so a view can be formed on the value for money the application offers; and
• give the applicant the opportunity to explain any identified issues or problems with their track record, or where relevant, the composition of the proposed research team.

**Assessment of Track Record**

All assessments of Track Record should be reviewed relative to opportunity and where relevant should take into consideration any career disruptions. Further details of track record assessment are outlined below.

**Track Record**

The quality and capability of the team (all CI(s) and other key personnel listed on the application), relative to opportunity, should be assessed when considering track record.

Aspects of track record to consider include:

a) the record of achievement of the team, including translation of research findings into practice, where applicable;

b) appropriateness of the teams expertise to undertake the proposed research; and

c) the national and/or international reputation of the team in their field/s relative to opportunity.

Peer reviewers’ consideration of relative to opportunity may take into account the amount of time spent as an active researcher; career disruption; available resources; clinical, administrative or teaching workload; relocation of an applicant and his/her research laboratory or clinical practice setting; restrictions on publication associated with time spent working in other sectors (e.g., industry, policy and government) and the typical performance of researchers in the research field in question.

Assessment relative to opportunity reflects NHMRC’s aim that assessment processes accurately measure an applicant’s track record relative to stage of career, including consideration as to whether productivity and contribution is commensurate with the opportunities available to the applicant.

**Career Disruption**

Career disruption represents a separate category within the assessment of relative to opportunity, and includes pregnancy; major illness; and carer responsibilities including parental leave. Employment outside the research sector including time spent working in industry; clinical, administrative or teaching workload; relocation of laboratory or clinical practice setting or other similar circumstances that impact upon research productivity are not considered to be career disruption and are considered under relative to opportunity.
Use of Impact Factors and other metrics

Peer reviewers should take into account their expert knowledge of their field of research, as well as the citation and publication practices of that field when assessing the publication component of an applicant’s track record. Track record assessment should take into account the overall impact, quality and contribution to the field of all of the published journal articles from the grant applicant, not just the standing of the journal in which those articles are published. NHMRC encourages the publication of articles in high-impact journals, but warns against using the overall impact of all publications in a journal as a proxy measure for the impact of individual published outputs. It is not appropriate to use publication and citation metrics such as Journal Impact Factors, *Excellence in Research for Australia* (ERA) Ranked Journal List or h-index when assessing applications as these can potentially be misleading when applied to the peer review of publication outputs of individuals, and may also not be relevant to the project under consideration. More information on this topic can be found at: [http://www.nhmrc.gov.au/_files_nhmrc/file/about/senior_staff/articles/journal_impact_factors.pdf](http://www.nhmrc.gov.au/_files_nhmrc/file/about/senior_staff/articles/journal_impact_factors.pdf)

Step E. Applicants respond to Spokespersons Reports

Applicants are given the opportunity to submit a written response to the Spokespersons Report. The Applicant Response is limited to two A4 pages and should address the questions raised and is not an opportunity to modify the proposed research plan. Each applicant team will be provided with a de-identified Spokespersons Report that contains 1SP and 2SP comments (without scores). NHMRC aims to provide applicants with up to 7 calendar days (inclusive of weekends) to submit a response to the Spokespersons Report. Applicant responses to Spokespersons Reports will be made available to Spokespersons and other GRP members without a high CoI.

Step F. Spokespersons reassessment of applications

Once the Applicant Responses have been submitted, the 1SP and 2SP for each application will consider the research proposal in conjunction with the Spokespersons Report and Indigenous Assessor Report (if applicable). The 1SP and 2SP will then be asked to revisit their scores and may rescore the application against the assessment criteria.

Step G. Generation and confirmation of the Not For Further Consideration (NFFC) list

Panel members will be provided with a list of applications (adjusted for CoIs) that have been assessed to be among the least competitive of applications based on scores provided by the 1SP and 2SP.

It is important to note that applications on the NFFC list are subject to CoI considerations, as are all applications, and therefore should not be discussed between members. Once the NFFC list has been finalized, the GRP secretariat will release a running order for the GRP meeting. The process allows the GRP to focus on the most competitive applications at their meeting.

Step H. GRP members review all applications allocated to the panel before the meeting

GRP members are expected to read all applications allocated to the panel for which they do not have a high CoI, and which are not on the NFFC list, so that they may contribute to discussions at the GRP meeting. All members should also be prepared to provide scores for each of these applications at the GRP meeting.
5.2 At the GRP Meeting

Declaration of inter-relationships

When GRP members meet for the first time, during their introductions, members will be asked to declare any relationships with other panel members including:

- current collaborations and previous collaborations;
- former student/teacher/mentoring relationships;
- common employment/institutional relationships; and
- other relationships that may, or be seen to, impair fair and impartial judgment.

This information is sought for the benefit of panel members, who may raise any concerns arising from declarations with NHMRC staff.

Step 1. Chair to announce the application (Suggested time limit – 2 minutes)

1.1. The Chair will announce the application to be discussed including the title, institution, and CI and AI names.

1.2. The Chair will identify any members who have previously identified a CoI with the application. Those members with a high CoI will be asked to not participate in the discussion of that application. The Chair will also invite members to declare any late CoIs with the application.

   If a member declares a new CoI, or wishes to discuss any concerns related to an existing CoI, the matter will be recorded and the Chair will determine if the member can participate in assessment. This decision making can take extra time so it is important that all CoI are declared and decided upon well in advance of the meeting.

1.3. The Chair will then announce the names of the Spokespersons. If a CoI is declared at the GRP meeting by a Primary or Secondary Spokesperson, which prevents them from participating in the assessment of the application, a new Primary or Secondary Spokesperson will be assigned to the application and the scores from the initial Spokesperson will be discarded.

Step 2. The 1SP to comment on the application - (Suggested time limit – 6 minutes)

The 1SP will:

2.1. Outline the nature of the career disruption(s) (where applicable).

2.2. Provide a concise summary of the proposed project and discuss the application’s strengths and weaknesses against the five assessment criteria taking into consideration the Indigenous Assessor Report (if applicable). The 1SP will assume that GRP members are familiar with documentation relating to the application.

2.3. Comment on the applicant’s response to the Spokespersons Report and whether the questions were suitably addressed.

2.4. Ensure that relevant considerations (e.g. track record relative to opportunity, career disruptions) are taken into account.

2.4. Not make reference to the budget at this stage.
Step 3. The 2SP to comment on the application – *(Suggested time limit – 4 minutes)*

The 2SP will:
3.1. Briefly highlight their agreement/disagreement with the 1SP.
3.2. Not make reference to the budget at this stage.

Step 4. Full panel discussion – *(Suggested time limit – 10 minutes)*

The application will then be open to the panel for general discussion. GRP members have an opportunity to ask questions of both Spokespersons, discuss the strengths and weaknesses of the application and ensure that relevant considerations are taken into account. The Chair must ensure adequate review of the application occurs and that all members get a fair opportunity to comment and no member exerts undue influence over others.

Step 5. Scoring by panel members (Suggested time limit – 5 minutes)

5.1. Following the panel’s discussion, the Chair will ask the Spokespersons to confirm their criteria scores against the assessment criteria.

5.2. The Chair will then ask if any GRP member intends to score two or more away from any of the 1SP’s five criterion scores. The GRP member must declare this to the GRP and provide a brief justification, which will be recorded by the NHMRC secretariat.

5.3. All GRP members without a high CoI, excluding the Chair and Assistant Chair will then score the application. All scoring GRP members will announce their score using the seven-point scale for each of the five assessment criteria. Collation of members’ scores will be managed by the GRP Secretariat. At the completion of scoring, the GRP secretariat will announce the following results to the GRP:

- **Rating** – this will be determined by the mean of each voting member’s score and is recorded to three decimal places, and
- **Category** – this will be determined from the calculated rating according to the following table.

<table>
<thead>
<tr>
<th>Rating Range</th>
<th>Deemed Category</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.001 - 1.500</td>
<td>deemed as Category 1</td>
</tr>
<tr>
<td>1.501 - 2.500</td>
<td>deemed as Category 2</td>
</tr>
<tr>
<td>2.501 - 3.500</td>
<td>deemed as Category 3</td>
</tr>
<tr>
<td>3.501 - 4.500</td>
<td>deemed as Category 4</td>
</tr>
<tr>
<td>4.501 - 5.500</td>
<td>deemed as Category 5</td>
</tr>
<tr>
<td>5.501 - 6.500</td>
<td>deemed as Category 6</td>
</tr>
<tr>
<td>6.501 - 7.000</td>
<td>deemed as Category 7</td>
</tr>
</tbody>
</table>

The Chair, Assistant Chair and NHMRC Secretariat will record these scores. Where members are uncertain or have concerns regarding the final score, the Chair should invite further discussion. If any member still disagrees with the outcome, members will be invited to re-score for that application.

A quorum must be present for scoring to occur. For the purposes of GRP meetings a quorum is one
member more than half the total number of voting members on the GRP. NHMRC will endeavour
to identify, prior to GRP meeting, those applications that do not have a quorum.

**Step 6. Discussion of Proposed Budget (Suggested time limit – 5 minutes)**

6.1. All applications with a budget of greater than $6.5m will be reduced to $6.5m (the maximum
allowed) or below.

6.2. The GRP will consider the elements of the requested budget, including justification, and provide
advice on an appropriate budget for the application if it considers the requested budget to be
excessive.

6.3. NHMRC staff will record budget recommendations as agreed to by the panel and signed by the
Chair. NHMRC staff will record the reason for the difference between the recommended and
requested budget.

6.4. NHMRC reserves the right to amend the budget recommended by the GRP for any
application.

**Step 7. Review of applications**

7.1. Where a GRP member believes an application has been reviewed in an inconsistent manner,
initially they should raise the matter with NHMRC staff. NHMRC staff would then provide the
information to the Chair, while maintaining the confidentiality of the GRP member. Re-
assessment of the application by the panel at the next opportunity within the agenda will then
take place.

7.2. NHMRC will ensure that conflicts of interest are addressed prior to details of the
application and the circumstances of concern being outlined to the panel.

**5.3 After the GRP Meeting**

After the GRP meetings conclude the following procedures occur:

1) *Funding recommendations* – Office of NHMRC will review the ranked list of applications and
determine which applications will be recommended for funding and progress funding
recommendations through approval processes.

2) *Funding announcements* – Subsequent to Ministerial approval, applicants and RAOs will be
advised of the outcome of applications.

3) *Preparation of GRP Assessment Summary* - Applicants who were not on NFFC list will receive a
GRP Assessment Summary (Attachment H) following the announcement of outcomes. The GRP
Assessment Summary will indicate panel scores against the assessment criteria and mean scores of
each criterion for each category.

**5.4 Retention of GRP Documentation**

GRP members must retain their speaking notes and any other notes they make of the peer review
process until the outcomes of the panel’s deliberations are finalised and preserved in accordance
with normal administrative practices. This is when the final ranked list has been determined. After
this time, notes, both hard copy and electronic, should be disposed of appropriately. GRP members
should be aware that NHMRC may request a GRP member to comment on issues raised by an
applicant in a complaint to the NHMRC at any time.
ATTACHMENT A: Priority Framework for Dementia Research

The following priority framework for dementia research has been developed based on national and international strategies. The framework covers primary prevention, secondary prevention and quality of life and care. Possible areas of research focus are outlined under this framework.

Primary Prevention to prevent the disease from developing
Research into the fundamental causes of dementia disease, the factors that determine people’s risk and resilience and trigger events.

1. Research into origins of dementia and related neurodegenerative disease, for example:
   a. A focus on uncovering new genetic, epigenetic and environmental risk factors for neurodegenerative diseases and their interplay.
   b. A better understanding of the normal ageing process and how this relates to the development and progression of neurodegenerative diseases

2. Research into disease mechanisms and models: Research to understand the underlying disease mechanisms and thereby underpin development of new diagnostic and therapeutic approaches, as well as appropriate time-windows for intervention. Research could include, for example:
   a. Novel cell based and animal models that accurately represent key elements of the disease process, and that take into account factors such as the progressive nature of disease, comorbidities, gender and ageing.
   b. Elucidation of the biological and environmental basis of behavioural and psychological basis of neurodegenerative disease.

Secondary Prevention and treatment for people developing dementia
Research targeting early diagnosis, early intervention and new treatments including through development of new therapeutic approaches.

3. Disease definitions and diagnosis research, for example:
   a. Refinement and updating of the current diagnostic criteria including various forms and subtypes of disease (including stages before clinical symptoms occur) to allow earlier and accurate detection.
   b. New biomarkers that seek to provide link between human and animal based studies, as well as measures of disease progression, prognosis and treatment effects.

4. Treatment and prevention research: Enhance progress in identifying new targets and developing drugs and treatments. Research could include, for example;
   a. Studies to further develop psychosocial interventions and promotion of social inclusion and carer involvement.
   b. Establishment of cohorts of patients with preclinical disease for future testing of interventions
   c. Promotion of regenerative strategies and development of novel systems for delivery and targeting of drugs and biologicals.
   d. Emphasis on understanding the most beneficial time-window for treatment efficacy.

Quality of Life and Care
Research to improve the quality of life for those with dementia and their carers. Health and aged care systems research to inform policy and enable the healthcare system to deal more effectively and efficiently with the rising number of individuals with dementia.
5. **Health and social care research**: Evaluate the equity of access to and the effectiveness and cost effectiveness of pathways to diagnosis, treatment, care and support for neurodegenerative disease. Research could include, for example;
   
a. Improved outcome measures that reflect better patient and carer perspectives are necessary in research.
   b. Assisted living technologies to address the needs of patients and their carers.
   c. Research to inform palliative and end of life care.
   d. Research that takes into account the social, economic and cultural impacts and complex consequences of dementia.
ATTACHMENT B: Guideline for Managing Conflicts of Interest in NHMRC Peer Review

Definition
The Australian National Audit Office (ANAO) defines a Conflict of Interest (CoI) as arising ‘…in any situation where personal, financial or other interest has the potential to compromise, or have the appearance of compromising, professional judgement and the ability to make unbiased decisions…’.

Introduction
(Source: Australian Code for the Responsible Conduct of Research, S7)

A CoI exists where there is a divergence between the individual interests of a person and their professional responsibilities such that an independent observer might reasonably conclude that the professional actions of that person are unduly influenced by their own interests.

Conflicts of Interest (CoI) in the research area are common and it is important that they are disclosed and dealt with properly. CoIs have the potential to compromise judgments and decisions that should be made impartially. Such compromise could undermine community trust in research.

Financial CoIs are foremost in the public mind but other conflicts of interest also occur in research, including personal, professional and institutional advantages.

The perception that a CoI exists is also a serious matter and raises concerns about the integrity of individuals or the management practices of the institution.

Researchers frequently have a conflict of interest that cannot be avoided. Decision making processes in research often need expert advice, and the pool of experts in a field can be so small that all the experts have some link with the matter under decision. An individual researcher should therefore expect to be conflicted from time to time, and be ready to acknowledge the conflict and make disclosures as appropriate.

Responsibilities of Peer Review Participants
For NHMRC peer review purposes, CoI may fall into the broad domains of:

- involvement with the application under review;
- collaborations;
- working relationships;
- professional relationships and interests;
- social relationships or interests;
- teaching or supervisory relationships;
- financial relationships or interests; and
- other interests or relationships.

The following Conflict of Interest Situations table outlines matters that may need to be considered when deciding where potential conflicts lie and provides some examples of specific situations where CoI in the peer review process applies.

The table is intended to be for guidance only. It is representative of CoI situations rather than definitive, as each situation is different and needs to be considered on its merits.

The table is provided to assist participants in the Peer Review process to identify the types of circumstances in which CoI might arise, but is not intended to be a checklist.
If you are invited to participate in a peer review process, and you think that you may have a CoI with an application you have been asked to review, when declaring your CoI, you should provide sufficient detail about the nature of the (perceived) conflict to enable NHMRC to promptly assess each case.

Your CoI declaration will enable NHMRC to determine:

- whether or not, after the conflict has been declared, you should be involved in the peer review process in relation to a particular application; and
- if you are to be involved, the scope of such involvement (e.g. provide a score or report but not be involved in further discussion or the final scoring/ranking of an application).

**Failure to Declare Conflicts of Interest**

*The National Health and Medical Research Council Act 1992 (NHMRC Act)* requires CoI to be identified and specifies the courses of action that apply when this requirement has not been met:

- Section 42A of the NHMRC Act requires members to disclose interests in matters being considered;
- Section 44B (3) requires the Minister or the CEO to terminate the appointment of a member for failing to comply with the requirements of the NHMRC Act.

It is therefore important for participants to inform the NHMRC of any circumstances which either constitute, may constitute, or could be seen to constitute a CoI.

**CONFLICT OF INTEREST - SITUATIONS**

**Please Note:** If you are uncertain about whether you have a CoI, please contact NHMRC staff immediately to seek their advice and guidance about your individual CoI issue.

In general the period to consider for these situations is whether they arose within the last five years. This would typically be the case for collaborative, working and professional situations, but you should also consider whether there is something that you know will be happening in the future that should be disclosed.
<table>
<thead>
<tr>
<th>Situations</th>
<th>Explanations and Examples</th>
<th>Indicative Ruling&lt;sup&gt;1&lt;/sup&gt;</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Contribution to the application under review</td>
<td>1.1. Are you a named participant on the application under review?</td>
<td>Yes = High Conflict</td>
</tr>
<tr>
<td></td>
<td>1.2. Have you had discussions or input into the design study or research proposal for this application?</td>
<td>Yes = High Conflict</td>
</tr>
<tr>
<td>2. Collaborations</td>
<td>2.1. Have you actively collaborated?</td>
<td>Yes = High Conflict</td>
</tr>
<tr>
<td></td>
<td>• publications – co-authorship</td>
<td></td>
</tr>
<tr>
<td></td>
<td>• pending applications</td>
<td></td>
</tr>
<tr>
<td></td>
<td>• existing grants (both with the NHMRC, other organisations, or funding sources)</td>
<td></td>
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<tr>
<td></td>
<td>2.2. Have you any indirect collaboration?</td>
<td>Yes = Requires a ruling</td>
</tr>
<tr>
<td></td>
<td>• a co-worker who is collaborating with the applicant</td>
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<tr>
<td></td>
<td>• member of a research /discussion group</td>
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<tr>
<td></td>
<td>• published together as authors of a multiple-authorship paper where involvement was minimal</td>
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<tr>
<td></td>
<td>• provided cells/animals to applicant(s) with/without financial gain/exchange</td>
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</tr>
<tr>
<td></td>
<td>2.3. Are you planning (or have been approached) to be involved in a future grant application or other future collaborative relationship with the applicant(s)?</td>
<td>Yes = Requires a ruling</td>
</tr>
<tr>
<td>3. Working relationship</td>
<td>3.1. Do you have the same employer/organisation?</td>
<td>Yes = Usually a high conflict</td>
</tr>
<tr>
<td></td>
<td>3.2. Are you working in the same department (or equivalent) within the organisation?</td>
<td>Yes = High Conflict</td>
</tr>
<tr>
<td></td>
<td>3.3. Do you work in the same locality but for a different employer/organisation?</td>
<td>Yes = Requires a ruling</td>
</tr>
<tr>
<td>4. Professional relationships and interests</td>
<td>Consider things such as:</td>
<td>Yes = requires a ruling</td>
</tr>
<tr>
<td></td>
<td>4.1. membership of scientific advisory or review boards, exam boards, trial committees</td>
<td></td>
</tr>
<tr>
<td></td>
<td>4.2. whether you, or your organisation is affiliated with the applicant(s) organisation (and vice versa)</td>
<td></td>
</tr>
<tr>
<td></td>
<td>4.3. whether you or your organisation have an affiliation/association with organisations such as pharmaceutical companies, tobacco companies, etc</td>
<td></td>
</tr>
</tbody>
</table>

<sup>1</sup> Rulings are indicative only. Experienced NHMRC staff will exercise judgement when deciding the level of conflict and, in doing so, will consider the particular circumstance of each potential conflict.
<table>
<thead>
<tr>
<th>Situations</th>
<th>Explanations and Examples</th>
<th>Indicative Ruling</th>
</tr>
</thead>
</table>
| 5. Social relationship and/or interests | Consider relationships such as:  
5.1 personal/social relationship between you, your partner or other member of your family and the applicant  
5.2 you have a personal/social relationship with the applicant’s partner or other member of their family | Yes = Usually high conflict |
| 6. Teaching or supervisory relationship | For undergraduate or post-graduate studies:  
6.1 you taught or supervised the applicant(s)  
6.2 you co-supervised or taught with the applicant(s)  
6.3 your own research was supervised by the applicants(s) | Yes = High Conflict |
| 7. Financial interest in the application | Consider such things such as:  
7.1 patents pending  
7.2 supply of goods and services  
7.3 improved access to facilities  
7.4 provision of cells/animals or similar to applicant(s) with financial gain/exchange  
7.5 whether you receive research funding or other support from a company, and the research you have been asked to review by NHMRC may impact upon that company | Yes = Usually high conflict or need for a ruling |
| 8. Other interests or situations | Also consider  
8.1 previous or pending disputes (may require consideration of events earlier than within the last five years) | Yes = High Conflict |
ATTACHMENT C: Assessment Criteria for Dementia Research Team Grants

Applications are assessed by peers. Applications will be assessed to ensure they represent value for money, fit under the dementia research framework as described at Attachment A, and meet the scheme objectives using the following Assessment Criteria, which will be weighted as indicated. In framing applications against the assessment criteria, applicants should consider how the proposal will address the associated points. Peer reviewers will use the category descriptors at Attachment D to score applications against each of the Assessment Criteria and identify those that best meet the schemes objectives.

1. Generate new knowledge that leads to improved health outcomes (25%)
   - clarity of research objectives, and theoretical concepts;
   - strengths and weaknesses of the research design(s), or the appropriateness and robustness of the proposed methodology/ies or appropriateness of the broader strategy of the research program;
   - feasibility of the proposed research;
   - aims and concepts of the research are innovative or pioneering on an international level, do not duplicate other funded projects and achieve worthwhile outcomes that would not occur without the grant; and
   - likelihood that significant new findings will be produced, and substantially advance knowledge in the field.

2. Record of Research and Translation Achievement - relative to opportunity (25%)
   Teams are required to outline past and/or proposed collaborative arrangements within the applicant team, and address the means whereby the collaborators will ensure the cohesive running of the research during its funding period.

   Record of Achievement is also considered in terms of whether the previous research experience of applicants demonstrates that the team is capable of achieving the proposed project and/or ability to deliver the proposed project in terms of having the appropriate mix of research skills and experience. Record of Achievement may encompass the national and international standing of the applicants based upon their research achievements, relative to opportunity, including but not limited to:
   - research outputs – most recent significant publications; publications that illustrate innovation and significance to past accomplishments; impact or outcome of previous research achievements, including effects on health care practices or policy; awards or honours in recognition of achievements;
   - contribution to discipline or area – invitations to speak at international meetings, editorial appointments, specialist and high level health policy committee appointments; and
   - other research-related achievements, such as:
     - influence on clinical/health policy or practice, or provision of influential advice to health authorities and government; and
     - impacts on health via the broad dissemination of research outcomes; e.g. via mainstream media, the community or industry involvement.

   Record of Achievement is considered in relation to opportunity as described in Section A3.7 of the NHMRC Funding Rules.

3. Facilitate collaboration (20%)
   - likely effectiveness of working collaborations and intellectual exchange;
   - the relationship with other groups in the particular field of research; and
   - integration and cohesiveness of the team.

4. Promote effective transfer of research outcomes into health policy and/or practice (20%)
   - the quality of the plan for research translation;
• plans for promoting the team’s activities to the wider community, including where appropriate, for commercial gain; and
• the involvement of end-users and the wider community in the planning, implementation and uptake of the research program.

5. **Develop the health and medical research workforce by providing opportunities to advance the training of new researchers, particularly those with a capacity for independent research and future leadership roles (10%)**

• strategy to generate new researcher capability, mentoring and encouragement of further career development; and
• clarity of measures for integrating new researchers into the teams including mentoring strategies.
### ATTACHMENT D: Category Descriptors

The following category descriptors, which are weighted as indicated, are used to score an application against each of the assessment criteria. Applications falling into Categories 1-3 are not fundable. Categories 4-7 are potentially fundable, subject to the availability of resources.

<table>
<thead>
<tr>
<th>Category</th>
<th>Generate new knowledge that leads to improved health outcomes (25%)</th>
<th>Record of research and translation achievement – relative to opportunity (25%)</th>
<th>Facilitate Collaboration (20%)</th>
<th>Promote effective transfer of research outcomes into health policy and/or practice (20%)</th>
<th>Develop the health and medical research workforce (10%)</th>
</tr>
</thead>
</table>
| 7 Outstanding by International Standards | The proposal:  
- Has objectives that are well-defined, highly coherent and strongly developed  
- Is exemplary in design  
- Is state of the art in concept  
- Will be the subject of invited plenary presentations at international meetings, often with relevance across several fields  
- Is highly innovative and introduces advances in concept  
- Extensively expands the current research field | Relative to opportunity, the applicant(s):  
- Are generally the most outstanding researchers in the country for their peers/cohort  
- Have very strong records of other research–related achievements  
- Have strong international reputations or are well on the way to developing them  
- Hold leadership positions in highly regarded scientific or professional societies  
- Are highly recognised for their contribution to their field of research. | The proposal:  
- Would be highly effective in promoting working collaborations and intellectual exchange  
- Has very strong relationships with other researchers  
- Very high degree of team integration and cohesiveness. | The proposal:  
- Addresses an issue of utmost importance to human health  
- Will translate into fundamental outcomes in the science and/or practice of clinical medicine or public health or fundamental changes in health policy  
- The published research will be highly influential  
- Extensive involvement of end-users and the wider community. | The proposal:  
- Has a strong strategy to generate new researcher capability, mentoring and career development  
- Has impressive measures for integrating new researchers into teams. |
| 6 Excellent | The proposal:  
- Is clear in its intent and logical  
- Is appropriate for the experience level of the applicant and team  
- Is a near-flawless design  
- Is highly feasible  
- Could be the subject of invited plenary presentations at international and national | Relative to opportunity, the applicant(s):  
- Have a record of achievement that places them in the top 10-20% of peers/cohort  
- Are well recognised | The proposal:  
- Would be effective in promoting working collaborations and intellectual exchange  
- Has strong | The proposal:  
- Addresses an issue of major importance to human health  
- The published research should be highly influential  
- Extensive | The proposal:  
- Has a well-articulated strategy to generate new researcher capability, mentoring and career development |
| **meetings** | **Is innovative with respect to the question being addressed and the approach to it.** | **Significantly expands the current research field for their contribution to their field of research.** | **Has a growing international reputation.** | **Have established a position of leadership, or are emerging leaders, in their field.** | **Hold leadership positions in well regarded scientific or professional societies.** |
| **relationships with other researchers** | **Has a high degree of team integration and cohesiveness.** | **involvement of end-users and the wider community.** |
| **involvement of end-users and the wider community.** | **Has well-articulated measures for integrating new researchers into teams.** |

### 5 Very Good

| **The proposal:** | **Has clear objectives.** | **Will likely be successfully achieved.** | **Any reservations regarding study design are minor.** | **Could be the subject of invited plenary presentations at national specialty meetings.** | **Contains innovative ideas.** | **Expands the current research field.** |
| **Relative to opportunity, the applicant(s):** | **Have a record of achievement, that places them well above average for their peers/cohort.** | **Are well recognized for their contribution to their field of research.** | **Have a growing national reputation and their research appears frequently at national meetings.** | **The proposal:** | **Would be reasonably effective in promoting working collaborations and intellectual exchange.** | **Has good relationships with other researchers.** | **Has good team integration and cohesiveness.** |
| **The proposal:** | **Addresses an issue of considerable importance to human health.** | **The published research will be influential.** | **Some involvement of end-users and the wider community.** | **The proposal:** | **Has a persuasive strategy to generate new researcher capability, mentoring and career development.** | **Has articulated measures that should integrate new researchers into teams.** |

### 4 Good

| **The proposal:** | **Is sound in terms of its objectives.** | **May have some novel aspects, while others underpin or extend existing knowledge.** | **But has several areas of minor concern in the experimental design and/or its feasibility.** | **Relative to opportunity, the applicant(s):** | **Have a solid record of achievement.** | **Have made contributions to their field of research.** | **One or more of the CIs has an existing or emerging national reputation, albeit in a niche area.** | **The proposal:** | **Would have some effectiveness in promoting working collaborations and intellectual exchange.** | **Has relationships with other researchers.** | **Has a degree of team integration and cohesiveness.** |
| **The proposal:** | **Addresses an issue of some importance to human health.** | **The published research should be influential.** | **Some involvement of end-users and the wider community.** | **The proposal:** | **Has a strategy that should generate new researcher capability, mentoring and career development.** | **Has articulated measures that should integrate new researchers into teams.** | **The proposal:** | **Has a strategy that should generate new researcher capability, mentoring and career development.** | **Has articulated measures that should integrate new researchers into teams.** |
### 3 Marginal

<table>
<thead>
<tr>
<th>The proposal:</th>
<th>Relative to opportunity, the applicant team:</th>
<th>The proposal:</th>
<th>The proposal:</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Is satisfactory in terms of its objectives, but may not be successful with all of them</td>
<td>• Have a moderate record of achievement</td>
<td>• May be effective in promoting working collaborations and intellectual exchange</td>
<td>• Addresses an issue of some concern to human health</td>
</tr>
<tr>
<td>• Has relatively little novelty or innovation</td>
<td>• Members have published a number of works in a field relevant to this application in the last 5 years, but many have been less productive than might reasonably be expected</td>
<td>• Has some relationship with other researchers, although weak</td>
<td>• Published research may be influential.</td>
</tr>
<tr>
<td>• Has a number of areas of significant concern</td>
<td>• Is deficient in some areas of expertise that will be required to successfully complete the proposed research</td>
<td>• Has minimal team integration and cohesiveness.</td>
<td>• Little involvement of end-users and the wider community.</td>
</tr>
<tr>
<td>• Contains several study design problems or flaws.</td>
<td>• Members have limited track records in the field of the proposed research.</td>
<td></td>
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</tbody>
</table>

### 2 Unsatisfactory

<table>
<thead>
<tr>
<th>The proposal:</th>
<th>Relative to opportunity, the applicant team:</th>
<th>The proposal:</th>
<th>The proposal:</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Provides a program of research which will at best, only incrementally advances current knowledge</td>
<td>• Has a weak record of achievement</td>
<td>• Raises doubts about its effectiveness in promoting working collaborations and intellectual exchange</td>
<td>• Has little by way of a strategy to generate new researcher capability, mentoring and career development</td>
</tr>
<tr>
<td>• Contains a research plan which does not seem to be feasible in several areas.</td>
<td>• Has not published more than a few works in relevant other fields of research</td>
<td>• Has little evidence of relationships with other researchers</td>
<td>• Has few measures to integrate new researchers into teams.</td>
</tr>
<tr>
<td></td>
<td>• Is heavily underpowered in terms of relevant expertise required to successfully complete the research program</td>
<td>• Has little or no evidence of team integration and cohesiveness.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Members have track records which do not relate well to the</td>
<td></td>
<td>• Virtually no involvement of end-users and the wider community.</td>
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</table>

### 1 Unsatisfactory

<table>
<thead>
<tr>
<th>The proposal:</th>
<th>Relative to opportunity, the applicant team:</th>
<th>The proposal:</th>
<th>The proposal:</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Provides a program of research which will at best, only incrementally advances current knowledge</td>
<td>• Has a weak record of achievement</td>
<td>• Raises doubts about its effectiveness in promoting working collaborations and intellectual exchange</td>
<td>• Has little by way of a strategy to generate new researcher capability, mentoring and career development</td>
</tr>
<tr>
<td></td>
<td>• Has not published more than a few works in relevant other fields of research</td>
<td>• Has little evidence of relationships with other researchers</td>
<td>• Has few measures to integrate new researchers into teams.</td>
</tr>
<tr>
<td></td>
<td>• Is heavily underpowered in terms of relevant expertise required to successfully complete the research program</td>
<td>• Has little or no evidence of team integration and cohesiveness.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Members have track records which do not relate well to the</td>
<td></td>
<td>• Virtually no involvement of end-users and the wider community.</td>
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<td></td>
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</tr>
<tr>
<td>Poor</td>
<td>The proposal:</td>
<td>Relative to opportunity, the applicant team:</td>
<td>The proposal:</td>
</tr>
<tr>
<td>------</td>
<td>---------------</td>
<td>-----------------------------------------------</td>
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</tr>
<tr>
<td></td>
<td>- Will not advance current knowledge in the field</td>
<td>- Would be unlikely to promote working collaborations and intellectual exchange</td>
<td>- Is not productive to any significant extent in relevant fields</td>
</tr>
<tr>
<td></td>
<td>- Raises major concerns about the feasibility of the research plan</td>
<td>- Has no evidence of relationships with other researchers</td>
<td>- Does not have the expertise or capacity to successfully complete more than a small fraction of the program of research</td>
</tr>
<tr>
<td></td>
<td>- Is not innovative or significant</td>
<td>- Has no evidence of team integration and cohesiveness.</td>
<td>- Members do not have relevant track records in the field of the proposed research.</td>
</tr>
<tr>
<td></td>
<td>- Contains a study design which is inadequate in a number of areas.</td>
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</tbody>
</table>
ATTACHMENT E: NHMRC Budget Guidelines for Research Support Grants

Introduction

NHMRC funds the direct costs of the research proposal based on advice from peer review. This document is designed to assist NHMRC grant applicants in identifying resources which can or cannot be funded using NHMRC funds, and to assist applicants in the preparation of the budget component of their grant application.

Level of funding

Applicants are advised to clearly justify the requested budget paying particular attention to any research cost(s) which may be specific to this field of research and specially needed for their application.

The GRP advises NHMRC of a budget for each application. The GRP’s recommendation is based on the budget requested by the applicant, the requirements of the proposal as assessed by the GRP and its knowledge of the costs associated with the research.

Grant applicants are required to:

- Make a case for NHMRC grant funding in accordance with the Scheme-Specific Information.
- Declare the sources, duration and level of funding already held for research.

Where co-funding has already been secured, applicants should indicate the components of the budget for which NHMRC support is being sought.

Budget considerations

There are three areas to consider when preparing a budget proposal:

1. Support for personnel engaged in the conduct of the research;
2. Direct research costs; and
3. Equipment costs necessary to conduct the research.

These and other budget considerations are discussed below.

Support for Personnel

Researchers who are not Australian citizens or permanent residents in Australia are eligible to apply for an NHMRC grant as CI B to J.

Associate Investigators are not permitted to draw salary from a NHMRC grant.

Casual computing and similar casual staff requirements, which will be contracted at hourly rates, should be included under DRCs.

Funds to support personnel are provided as Personnel Support Packages (PSPs). Requests for additional funds to cover salary or salary on costs for personnel are not to be included in either the salary or DRC sections of a budget application. The level of PSP requested in an application should match the roles and responsibilities of the position, rather than the expertise of a specific person whom the CIs may intend to appoint to the position. Information on PSP amounts can be

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Personnel Support Packages (PSPs) are designed to contribute to the full cost of salary. Administering Institutions should seek their own advice on any potential taxation implications.

All applicant CIs must indicate the proportion (%) of their research time that they will commit to NHMRC funded research for the currently submitted grant application. Further information on how to indicate the amount of time proposed to be devoted to the grant, should it be awarded, is provided in the *Advice and Instructions to Applicants* document.

Applicants may apply for a full PSP provided that 80% or more of the occupant’s time will be devoted to the Project.

An annual indexation will be applied to PSPs, based on the Australian Government Wage Cost Index (WCI).

**Direct Research Costs**


DRCs are available in multiples of $5,000. Individual items of equipment costing less than $10,000 must be requested as DRC.

All requests for funds must be fully justified, especially requests for:

- programming, preparation and data storage or the hire of external computer time. Funds will not be provided for the hire of computer time on a computer within the applicant's institution;
- covering the liability insurance for human clinical trials; and
- administrative charges associated with registration of clinical trials.

Salaries for personnel that are eligible to be funded as a PSP, and/or the gap between the PSPs contribution and actual salaries and on costs are not to be included as a DRC in application budgets.

**Travel, conference and publication costs**

When travel is integral to undertaking the research project, such as field work, research collaborations or use of facilities in other countries, this cost should be included in the grant application budget.

It is not possible to predict where and how knowledge translation and knowledge transfer will occur (because the research is yet to be undertaken). Thus, the cost of conference attendance and publications are not to be included as DRCs in grant application budgets.

**Using Research Facilities Biospecimen and Associated Data**

Requests for biospecimens and associated data must be fully justified in the DRC component of the application form.

The NHMRC will support the costs of biospecimens and associated data that are a direct requirement of the research project. Biospecimen and associated data costs must be based upon.
published cost recovery schedules of biobanks or similar accredited bodies (e.g. Pathology services). An indicative list of these is available below. Such costs will typically represent cost recovery for the costs of collection, processing, storage and distribution. Consideration for additional project development and management costs for utilising biospecimens and associated data may be requested.

Given the significant expansion in biobank activities in Australia in the last decade, any future proposal for prospective funding of a biobank must specify why the samples cannot already be sourced from an existing biobank. Any proposal to establish a new biospecimen collection should seek to use infrastructure or services provided by biobanks or similar accredited bodies. Comprehensive justification for not using one of these must be provided.

Following is an indicative list of Biobanks and services that provide services based upon international standards of best practice (ISBER):

- Cancer Institute NSW Biobanking Network - including: GynBioBank, Kolling Institute of Medical Research Neuroendocrine, Gynaecological, Breast and Upper GI Banks
- Genetic Repositories Australia (GRA) [http://www.neura.edu.au/GRA](http://www.neura.edu.au/GRA)
- Lowy Biorepository [http://biorepository.unsw.edu.au/](http://biorepository.unsw.edu.au/)
- NSW Children’s Hospital Network
- The Leukaemia and Lymphoma Tissue Bank A joint research initiative of ALLG and the Leukaemia Foundation email: allg_tissue_bank@health.qld.gov.au
- Victorian Cancer Biobank [www.viccancerbiobank.org.au](http://www.viccancerbiobank.org.au)
- WA Research Tissue Network (Operated by St John of God HealthCare)
- Westley Institute

Other Research Facilities

The costs of utilising the services of other research facilities can also be sought through DRCs. Examples of organisations that are included in this category include Australian based Non-Human Primate colonies, the Australian Twin Registry, Cell Bank Australia, the Trans-Tasman Radiation Oncology Group (TROG) and suppliers of clinical trials services. This list is illustrative and is by no means exhaustive.

Researchers should consult with research facilities to ensure that the services they are seeking DRC funding for can be provided and that the research budgets reflect these charges. Letters from research facilities confirming their collaboration should be included with the application to assist the Grant Review Panel in assessing the application.

Animal Agistment Costs

Requests for animal agistment costs must be fully justified in the DRC component of the
application form.

The NHMRC will support the costs of animal agistment that are a direct requirement of the research project. Animal agistment costs may include the costs of food and caging, and of experimental breeding, during the course of the project. For information on animal agistment costs, consult your Administering Institution. The purchase of animals should be included in DRC.

Funds will be provided for the full purchase price of non-human primates. Applicants should contact the relevant Australian non-human primate breeding colony to obtain information about the terms and conditions associated with the purchase of animals and agistment fees.

The NHMRC will not support infrastructure costs that should normally be provided by the Animal House of the host institution (such as administration or support of Animal House staff) regardless of whether or not the institution has its own Animal House.

**Equipment**

Where an applicant is requesting funding for an item of equipment, the equipment must be unique to the project and essential for the project to proceed. Equipment requests must not include the type of apparatus normally provided from institutional funds such as freezers, etc.

Applicants must provide details as to why the equipment is not being provided by their institution. For each item of equipment requested, a written quotation must be received and held with the Research Office of the Administering Institution and must be made available to the NHMRC on request.

The applicant must ensure the Administering Institution is prepared to meet all service and repair costs in relation to equipment awarded.

Funds will not be provided for the purchase of computers except where these are an integral component of a piece of laboratory equipment or are of a nature essential for work in the research field. For example: a computer which is dedicated to data collection from a mass spectrometer, or used for the manipulation of extensively large datasets (i.e. requiring special hardware) may be supported.

Individual items of equipment costing less than $10,000 must be requested as DRCs. Applicants may not seek funding for equipment totalling more than $80,000 for the entire period of the grant.

An annual indexation will be applied to equipment, based on the WCI.

**Medicare Claims**

The following information relates to health services NHMRC grant applications having clinical relevance in order to attract Medicare benefits.

Medicare is governed by the *Health Insurance Act 1973* which sets out the services attracting benefits. Sub-section 19(5) of the *Health Insurance Act 1973* provides that benefits are for where services are clinically relevant for the treatment of the patient. Clinical relevance is a matter of judgement for the patient's medical practitioner.

Where a range of services or tests are carried out by the patient’s medical practitioner as part of the deliberate management of the patient's health, Medicare rebates are payable.
However, a range of tests offered to a patient by a clinic for which there is no apparent clinical necessity, as determined by a medical practitioner, do not attract benefits.

In light of this information, Medicare rebates would not be available for patient visits to General Practitioners as part of a research project, where such visits would not be deemed clinically relevant for the treatment of the patient.

**Infrastructure, Indirect Costs and Institutional Overheads**

NHMRC does not fund:
- the indirect costs of research;
- research infrastructure;
- institutional overheads and administrative charges (levied to pay for institutional research);
- general infrastructure.

This policy applies regardless of whether the institution, department, unit or individual researcher is in receipt of any form of Commonwealth or State support for research infrastructure.

Research infrastructure includes facilities necessary to the research endeavour that a responsible institution with research as a part of its mission would be expected to supply as a prerequisite to its engagement in research, and includes:
- physical space and all the services associated with it;
- furniture for research staff;
- administrative services;
- office services and consumables that are not specific to the research project;
- laboratory services and consumables that are not specific to the research project;
- animal house facilities;
- computer networks and basic network utilities; and
- personal computers, related network peripherals and software needed for communicating, writing, and undertaking simple analyses.
SECTION A: APPLICATION INFORMATION

Discussion start time [ ] Discussion end time [ ] Applicant Name [ ] Application ID [ ]

SECTION B: CONFLICT OF INTEREST (COI) (These have been previously disclosed to the NHMRC)

Any NEW COI declared? (Enter Yes or No) [ ]

How many Panel Members LEFT THE ROOM? (Insert number.) [ ]

How many? (Insert number.) [ ]

How many Panel Members REMAINED IN THE ROOM? (Insert number.) [ ]

How many Panel Members PROVIDED SCORES? [ ]

High COI:
• Must leave room

Low COI
• Can participate in discussion
• May choose to provide scores

If a new COI is declared, but Panel Member(s) did not leave room, comment on reasons for remaining:

SECTION C: MANAGEMENT OF DISCUSSION

Use the rating scale below and assign a rating against each statement. (Enter a number in each box)

0 Not at all 1 Partially 2 Mostly 3 Fully

The Chair’s instructions on processes were aligned with instructions, briefing and policy

The Chair observed the time limit and controlled the direction and focus of discussion

The Chair ensured the discussion format was consistent across applications

The Chair ensured that other Panel Members had ample opportunity for input

The nominated Spokespersons led questioning in a constructive and equitable manner

Panel members’ behaviour indicated they understood their roles and responsibilities

Budget was discussed (where relevant) and reason for changes recorded.
SECTION D: DISCUSSION COVERAGE, FORMAT AND FOCUS AS PER POLICY

Panel Members contributed

Notes on content:
ATTACHMENT G: Additional Criteria for Indigenous Health Research Applications

Applicants are required to address the extent to which their application fulfils The Criteria for Health and Medical Research of Indigenous Australians (The Indigenous Criteria) in relation to research into the health of Indigenous Australians including documentation and other relevant written evidence where appropriate.

The Indigenous Criteria are:

Community engagement
Demonstrate how the project will have relevant community engagement by individuals, communities and/or organisations in conceptualisation, development and approval, data collection and management, analysis, report writing and dissemination of results.

Benefit
Demonstrate the potential health benefit of the project for Aboriginal and Torres Strait Islander peoples. Benefit need not necessarily be direct or immediate.

Sustainability and Transferability
Demonstrate how the results of the project have the potential to lead to achievable and effective contributions to health gain for Aboriginal and Torres Strait Islander peoples, beyond the life of the project. This may be through sustainability in the project setting and/or transferability to other settings. In considering this issue the proposal should address the relationship between costs and benefits.

Building capability
Demonstrate how Aboriginal communities, researchers and others will develop relevant capabilities through participation in the project.

Priority
Demonstrate how the research and potential outcomes are a priority for Aboriginal and Torres Strait Islander communities either at community, regional or national levels.

Significance
Demonstrate how the research addresses an important public health issue for Aboriginal and Torres Strait Islander peoples.
ATTACHMENT H: Template for GRP Assessment Summary

APP100xxxx Dementia Research Team Grants Review Panel Assessment Summary

Your 2014 Dementia Research Team Grants application was scored in Category X following its assessment by the Grant Review Panel (GRP).

Table 1 summarises the assessment of your application against the Dementia Research Team Grants assessment criteria. Table 2 summarises the proportion of 2014 Dementia Research Team Grants applications in each Category.

Table 1: Mean scores against the Dementia Research Team Grants assessment criteria. The Category is determined by adding weighted mean scores for all criteria.

<table>
<thead>
<tr>
<th>Criteria</th>
<th>Scores for APP10xxxxx</th>
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<tbody>
<tr>
<td>1 Generate new knowledge that leads to improved health outcomes (25%)</td>
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<tr>
<td>2 Record of research and translation achievement – relative to opportunity (25%)</td>
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<td>3 Facilitate collaboration (20%)</td>
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<tr>
<td>4 Promote effective transfer of research outcomes into health policy and/or practice (20%)</td>
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<td>5 Develop the health and medical research workforce (10%)</td>
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<tr>
<td>Overall Category</td>
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</table>

Table 2: The proportion of Dementia Research Team Grant applications in each category. This table includes all 2014 Dementia Research Team Grant applications that were fully assessed by the GRP (i.e. excluding applications deemed Not For Further Consideration after initial assessment). Mean scores ± 1 standard deviation) for each criterion are provided for each Category.

<table>
<thead>
<tr>
<th>Category</th>
<th>Number and Proportion (%) of applications in Category</th>
<th>Mean Generate new knowledge</th>
<th>Mean Record of research and translation achievement</th>
<th>Mean Facilitate collaboration</th>
<th>Mean Promote effective translation</th>
<th>Mean Develop health and medical workforce</th>
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