



Australian Government

National Health and Medical Research Council



NHMRC Special Initiative in Mental Health Peer Review Guidelines

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1. INTRODUCTION

The National Health and Medical Research Council (NHMRC) is responsible for managing the Australian Government's investment in health and medical research in a manner consistent with Commonwealth legislation, guidelines and policies. NHMRC has a responsibility to ensure taxpayers' funds are invested appropriately to support the best health and medical research. Expert peer review assists us in fulfilling this responsibility.

This guide outlines the overarching principles and obligations under which the Special Initiative in Mental Health (SIMH) peer review process operates, including:

- obligations in accordance with legislation, guidelines and policies
- how to declare and manage conflicts of interest, and
- standards and best practice for the conduct of peer review.

NHMRC will advise the sector of any change to the peer review process via its communications such as, NHMRC's website and newsletter.

This guide should be read in conjunction with the:

- SIMH Guidelines which set out the rules, objectives and other considerations relevant to NHMRC funding.
- [*Policy on the Disclosure of Interests requirements for prospective and appointed NHMRC committee members*](#) (Section 39 Committees). This Policy outlines peer reviewers' responsibilities in order to ensure all disclosures of interests are addressed in a rigorous and transparent way throughout the period of a peer reviewer's participation in NHMRC Committees.

2. PRINCIPLES, CONDUCT AND OBLIGATIONS DURING PEER REVIEW

The peer review process requires all applications to be reviewed by individuals with appropriate expertise. This carries an obligation on the part of peer reviewers to act in good faith, in the best interests of NHMRC and the research community and in accordance with NHMRC policies (outlined below).

2.1 NHMRC's Principles of Peer Review

NHMRC's Principles of Peer Review (the Principles) are high-level, guiding statements that underpin all NHMRC's peer review processes, and include:

- **Fairness.** Peer review processes are fair and seen to be fair by all.
- **Transparency.** Applies to all stages of peer review.
- **Independence.** Peer reviewers provide independent advice. There is also independent oversight of peer review processes by independent Chairs and Observers.
- **Appropriateness and balance.** There is appropriate experience, expertise and representation of peer reviewers assessing applications.
- **Research community participation.** Persons holding taxpayer-funded grants should willingly

make themselves available to participate in peer review processes, whenever possible, in accordance with the obligations in the Funding Agreement.

- **Confidentiality.** Participants respect that confidentiality is important to the fairness and robustness of peer review.
- **Impartiality.** Peer review is objective and impartial, with appropriate processes in place to manage disclosures of interest.
- **Quality and excellence.** NHMRC will continue to introduce evidence-based improvements into its processes to achieve the highest quality decision-making through peer review.

Additional details underpinning the Principles can be found at [Appendix A](#).

2.2 The Australian Code for the Responsible Conduct of Research

The [Australian Code for the Responsible Conduct of Research](#) (the Code) requires researchers participating in peer review do so in a way that is ‘fair, rigorous and timely and maintains the confidentiality of the content’.

The Code is supported by additional supplementary guidance, including [Peer Review: A guide supporting the Australian Code for the Responsible Conduct of Research](#).

2.3 Disclosures of Interest

2.3.1 What is an interest?

NHMRC is committed to ensuring that interests¹ of any kind are dealt with consistently, transparently and with rigour, in accordance with Part 5, section 42A of the *National Health and Medical Research Council Act 1992* (NHMRC Act) and sections 16A and 16B of the *Public Governance, Performance and Accountability Rule 2014*² (made under the subsection 29(2) of the *Public Governance, Performance and Accountability Rule 2013* (PGPA Act)).

In particular, under:

- subsection 42A(3) of the NHMRC Act, peer reviewers of Council and Committees must “give to the CEO a written statement of any interest the peer reviewer has that may relate to the activity of the Council or Committee” before starting to hold office. “Interest” is defined in section 4 of the NHMRC Act as meaning “any direct or indirect, pecuniary or non-pecuniary interest.”
- section 29 of the PGPA Act, “an official... who has a material personal interest that relates to the affairs of the entity must disclose details of the interest”. This obligation (unlike the obligation in subsection 42A(3) of the NHMRC Act) is ongoing and not limited to a particular point in time.

For the purposes of this document, the terms “material personal interest” and “interest” are regarded as interchangeable, and whilst the term “interest/s” has been used for ease of reading, this policy includes guidance on each.

Although many positives may emerge from collaborations and partnerships with industry, there is potential for conflicts of interest to arise. These conflicts may arise from competing commitments and Financial Interests that may, or may not be perceived to affect scientific endeavours.

¹ An “Interest” is defined in section 4 of the NHMRC Act as meaning “any direct or indirect, pecuniary or non-pecuniary, interest”. Under section 29 of the *Public Governance, Performance and Accountability Act 2013* (PGPA Act), “an official ... who has a material personal interest that relates to the affairs of the entity must disclose details of the interest”.

² Made under subsection 29(2) of the PGPA Act.

2.3.2 What is a Conflict of Interest (CoI)?

A CoI exists when there is a divergence between professional responsibilities (as a peer reviewer) and personal interests. Such conflicts have the potential to lead to biased advice affecting objectivity and impartiality. By managing any conflict, NHMRC maintains the integrity in its processes in the assessment of scientific and technical merit of the application.

For NHMRC peer review purposes, interests may fall into the broad domains of:

- Involvement with the application under review
- Working relationships
- Professional relationships and associations
- Social relationships or associations
- Collaborations
- Teaching or supervisory relationships
- Financial relationships or interests
- Other relevant interests or relationships

For further information peer reviewers should consult the NHMRC [*Policy on the Disclosure of Interests Requirements for Prospective and Appointed NHMRC Committee Members*](#) (Section 39 Committees).

Researchers frequently have a CoI 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 consideration. An individual researcher should therefore expect to be conflicted from time to time, be ready to acknowledge the conflict and make disclosures as appropriate.

An outline of potential CoI situations and guidance is provided for peer reviewers at [Appendix B](#).

2.3.3 Disclosure of Interests in the Peer Review Process

Peer reviewers must identify and disclose interests they may have with any of the Chief Investigators (CIs) and Associate Investigators (AIs) on applications they will be reviewing. After appointment as a peer reviewer, but before assessing any applications, peer reviewers are required to disclose their interests in writing.

While disclosures of interest must be declared at the beginning of the peer review process, new or previously unrecognised disclosures of interest must be declared at any stage of the peer review process. Declarations must include details that substantiate when collaborations occurred (i.e. month and year). NHMRC will use these details to verify and determine the level of conflict.

Any peer reviewer who has an interest that is determined by NHMRC to have a 'high' CoI will not be able to participate in the review of that application. However, they can provide scientific advice at the request of the Chair.

2.3.4 Failure to disclose an interest

A failure to disclose an interest without a reasonable excuse will result in the termination of the peer reviewer's appointment under section 44B of the NHMRC Act (section 44B also covers failure to comply with section 29 of the PGPA Act).

It is important for peer reviewers to inform NHMRC of any circumstances which may constitute an interest, at any point during the peer review process. Accordingly, peer reviewers are encouraged to consult the Secretariat if they are uncertain about any disclosure of interest matter.

2.4 Freedom of Information (Fol)

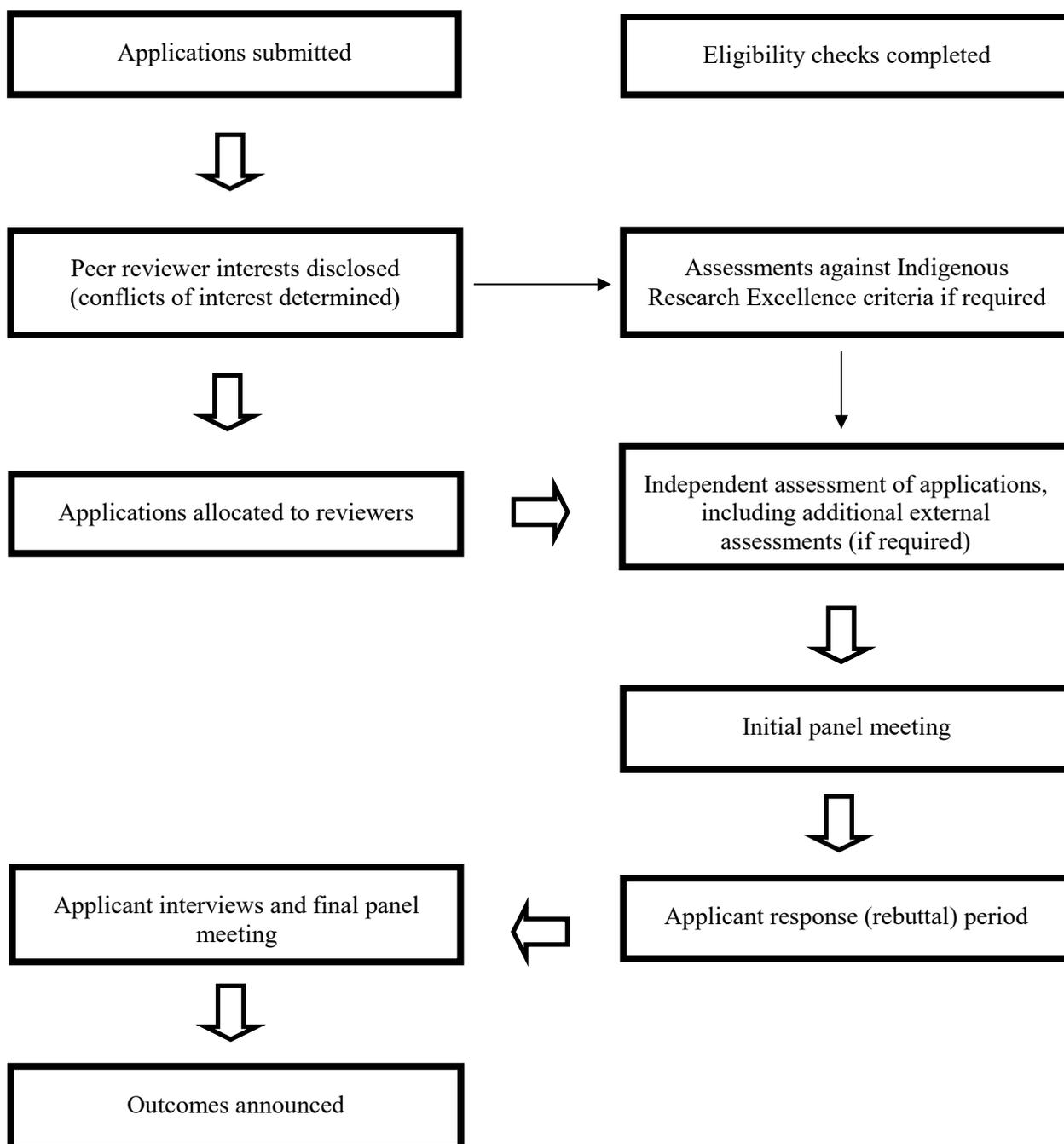
NHMRC is subject to the *Freedom of Information Act 1982* which provides a statutory right for an individual to seek access to documents. If documents that deal with peer review fall within the scope of a request, the FOI process includes consultation and exemptions. NHMRC endeavours to protect the identity of peer reviewers assigned to a particular application.

2.5 Complaints

NHMRC deals with any complaints, objections and requests for clarification on the peer review process. NHMRC may contact peer reviewers and/or Chairs involved to obtain additional information on particular application/s. Further information about the NHMRC complaints process can be found on the [NHMRC website](#).

3. SIMH PEER REVIEW PROCESS

3.1 Overview of the SIMH peer review process



Date*	Activity
5:00 pm (ACT Local Time) 15 July 2020	Deadline for SIMH application submission
July 2020	Application eligibility review and confirmation
August 2020	All reviewers disclose interests and suitability against applications
August 2020	Indigenous assessments obtained (if required)
August 2020	Allocation of applications
August 2020	All reviewers review applications against SIMH assessment criteria for each allocated application
August 2020	Additional external assessment obtained (if required)
September 2020	Initial Panel meeting
October 2020	Applicant Response Period
November 2020	Final Panel Meeting and Applicant Interviews
February 2021*	Notification of outcomes

*Date is indicative and subject to change.

Further information on the steps outlined in this process is provided in section 3.3 *Reviewing SIMH applications*.

3.2 Roles and responsibilities

The roles and responsibilities of those participating in the SIMH peer review process are identified in the table below.

SIMH Peer Review Participants Table

Roles	Responsibilities
Panel Chair (Chair)	<p>The Chair's role is to ensure NHMRC's procedures are adhered to and that fair and equitable consideration is given to every application being discussed at the panel meeting.</p> <p>Chairs do not assess applications, however they must manage the process of peer review in accordance with this Guide.</p> <p>Prior to the panel meeting Chairs need to:</p> <ol style="list-style-type: none"> 1. familiarise themselves with this document and other material as identified by NHMRC staff 2. identify and advise NHMRC of all interests they have with applications assigned to their panel, and 3. familiarise themselves with ALL the applications assigned to their panel, excluding those for which they have been determined to have a high CoI. <p>During the panel meeting Chairs will:</p>

	<ul style="list-style-type: none"> • take appropriate action for each CoI • keep discussions on time and focused • ensure NHMRC procedures are followed • assist all reviewers with their duties and in understanding what is expected of them • promote good engagement by reviewers in all discussions • ensure that all peer reviewers consider ‘relative to opportunity’, including career disruptions, when discussing applications • ensure the discussion leads to an outcome where the applications are appropriately considered against the SIMH assessment criteria and associated category descriptors (<u>Appendices C and D</u>). • ensure the panel consistently considers the assessment against the Indigenous Research Excellence Criteria for applications with an Aboriginal and Torres Strait Islander health focus • ensure reviewers are satisfied with the consistency and appropriateness of discussions for each application • record and notify NHMRC of any requests for clarification or advice • prepare a report on the initial panel discussion from peer reviewers and consumer and carer reviewers, including questions for rebuttal for the applicants, and • approve relevant Meeting Attendance Record sheets.
<p>Panel Membership</p>	<p>The peer review panel will be comprised of peer reviewers, who will review the scientific and health services aspects of an application while the consumer and carer reviewers will assess an application from a consumer and carer perspective in relation to consumer and/or community participation.</p>
<p>Peer reviewers</p>	<p>Prior to the initial panel meeting, peer reviewers need to:</p> <ul style="list-style-type: none"> • familiarise themselves with this Guide and other material as identified by NHMRC staff • identify and advise NHMRC of all interests they have with applications assigned to their panel • provide a fair and impartial assessment against the SIMH assessment criteria and associated category descriptors (<u>Appendices C and D</u>) for each non-conflicted application assigned, in a timely manner • assess track record by taking into consideration research achievements ‘relative to opportunity’, including any career disruptions, where applicable • consider the assessment against the Indigenous Research Excellence Criteria (<u>Appendix E</u>) provided for applications with an Aboriginal and Torres Strait Islander focus, and

	<ul style="list-style-type: none"> • prepare a report (including questions) in a written document to be collated by NHMRC to be discussed at the initial panel meeting within the prescribed timeframe. <p>During the initial panel meeting, peer reviewers will:</p> <ul style="list-style-type: none"> • disclose interests they have with other peer reviewers • prepare for and participate in the discussion for each application where they have no high CoI. <p>Prior to the final panel meeting and applicant interview:</p> <ul style="list-style-type: none"> • review the applicant response • formulate questions to be addressed by the applicants at interview. <p>Pre-interview:</p> <ul style="list-style-type: none"> • discuss, with the panel, any other additional questions or concerns to be addressed by the applicants at interview <p>Applicant interview:</p> <ul style="list-style-type: none"> • where requested, lead the discussion/interview on the competitiveness of the application and the significance and merit of the proposed research against the aims, objectives and SIMH assessment criteria <p>Post interview discussion and scoring:</p> <ul style="list-style-type: none"> • where requested: <ul style="list-style-type: none"> ○ provide detailed advice to the panel of any applications that have claimed a career disruption ○ lead the review and discussion of applicant responses ○ lead the discussion of the appropriateness of the proposed budget • Score applications against the assessment criteria
<p>Consumer and Carer Reviewers</p>	<p>The peer review panel may include consumer and carers who have direct knowledge of the lived experience of mental health.</p> <p>The Consumer and Carer Reviewers will:</p> <ul style="list-style-type: none"> • identify and advise the NHMRC of all real and potential CoIs they have with applications • review all applications proceeding to peer review • comment on the strengths and weaknesses of the application against specific consumer and carer assessment criteria and provide indicative scores against the relevant assessment criteria • formulate any questions to be asked of the applicant team to clarify any concerns about consumer and/or community participation, and • actively participate in the panel discussion and applicant interview.

<p>External Assessors</p>	<p>External assessments may be sought for additional expertise, if required.</p> <p>Prior to the panel meeting:</p> <ul style="list-style-type: none"> • identify and advise the NHMRC of all real and potential CoIs they have with applications • assess the allocated applications against the SIMH assessment criteria and associated category descriptors (Attachments C and D), and • prepare a report (including questions) in a written document to be collated by NHMRC to be discussed at the initial panel meeting within the prescribed timeframe.
<p>Senior NHMRC Staff</p>	<p>NHMRC staff with appropriate expertise may be involved in:</p> <ul style="list-style-type: none"> • reviewing allocation of applications and peer reviewers to panels • assisting and advising on the peer review process.
<p>NHMRC Staff</p>	<p>Under direction from the CEO, NHMRC staff will be responsible for overall administration of the peer review process and for the conduct of specific activities.</p> <p>Prior to the initial panel meeting, NHMRC staff will:</p> <ul style="list-style-type: none"> • invite individuals to participate as peer reviewers or as a Chair • determine whether disclosed interests pose a conflict and the level of that conflict. • act as the first point of contact for peer reviewers • provide briefings to peer reviewers • determine eligibility of applications, and • assign applications to peer reviewers. <p>At the panel meeting NHMRC staff will:</p> <ul style="list-style-type: none"> • assist the Chair in running the discussions • implement appropriate management plans for peer reviewers with ‘high’ interests or conflicts with applications and ensure that all participants (including community observers) are aware of disclosed interests • ensure that all peer reviewers are provided with the necessary information to review each application • maintain scoring records for each application • act as the first point of contact for peer reviewers and community observers, and • seek feedback from Chairs, peer reviewers and community observers on improvements for future processes.

<p>Indigenous health research peer reviewers</p>	<p>Indigenous health research peer reviewers will review how well each application addresses NHMRC’s Indigenous Research Excellence Criteria (Appendix E).</p> <p>Indigenous health research external assessors will not participate in scoring. They will act as external experts and provide guiding comments to the peer reviewers relating to the Indigenous Research Excellence Criteria.</p>
<p>Community Observers</p>	<p>At the panel meeting, observers will:</p> <ul style="list-style-type: none"> • identify and advise the Chair of all interests they have with applications to be discussed • monitor the procedural aspects of the meeting, and • provide feedback to NHMRC on the consistency of procedures across meetings. <p>Observers may raise issues of a general nature for advice or action as appropriate with NHMRC staff.</p> <p>Observers are subject to the same disclosure of interest requirements as peer reviewers. Where a high CoI exists, the observer will not observe discussions of the respective application(s).</p>

3.3 Reviewing SIMH applications

All SIMH applications are assessed against the *SIMH Assessment Criteria* and the associated *Category Descriptors* at [Appendices C and D](#). Applications that are accepted by NHMRC as relating to the improvement of Aboriginal and Torres Strait Islander health (see section 3.3.1) are also assessed against the *Indigenous Research Excellence Criteria* as set out at [Appendix E](#).

3.3.1 Identification of applications with an Aboriginal and Torres Strait Islander health focus

Applications relating specifically to Aboriginal and Torres Strait Islander people’s health will be identified by information provided in the application. Researchers with Aboriginal and Torres Strait Islander health expertise will check whether these applications have at least 20% of their research effort and/or capacity building focused on Aboriginal and Torres Strait Islander health.

For applications confirmed as relating specifically to Aboriginal and Torres Strait Islander health research, NHMRC will endeavour to obtain at least one external assessment against the *Indigenous Research Excellence Criteria* ([Appendix E](#)) from an assessor with expertise in Aboriginal and Torres Strait Islander health. For further information on assessing applications that have a focus on the health of Indigenous Australians, see *Guidance for Assessing applications against the Indigenous Research Excellence Criteria* at [Appendix F](#).

The assessment against the *Indigenous Research Excellence Criteria* will be considered by peer reviewers when scoring the assessment criteria at [Appendix C](#).

3.3.2 Receipt and initial processing of applications

NHMRC staff will verify that SIMH applications meet eligibility criteria. Applicants will be advised if their application is ineligible. However, in some instances these applications will remain in the peer review process until their ineligibility is confirmed. Eligibility rulings may be made at any point in the peer review process.

3.3.3 Disclosure of interests

Peer reviewers will be provided with an overview of applications via email, and will need to disclose their interests in accordance with the guidelines provided at *Section 2.3* and Attachment B.

Some peer reviewers may have a disclosure of interest for which they require a decision. For these, NHMRC will assess the information provided by the peer reviewer and specify in NHMRC's granting system a level of peer review participation for the peer reviewer.

Taking into account potential CoIs and suitability, peer reviewers will be assigned to applications.

3.3.4 Briefing

NHMRC will provide briefing material that will provide peer reviewers, and consumer and carer reviewers further details on their duties and responsibilities associated with the SIMH peer review process. This will be made available to peer reviewers, and consumer and carer reviewers prior to assessing applications. Further information may be provided as necessary throughout the peer review process.

3.3.5 Assessment of applications

Peer reviewers, and consumer and carer reviewers will be given access to applications (where no high COI exists) and will be required to assess and provide their written assessor reports to NHMRC. Peer reviewers will assess all applications assigned to them against the assessment criteria, using the category descriptors, taking into account career disruptions and other 'relative to opportunity' considerations (Appendix G), where applicable. Consumer and carer reviewers will comment on the strength and weaknesses of an application against relevant assessment criteria from a consumer and carer perspective and provide indicative scores against the relevant assessment criteria (Appendix D).

When preparing the written assessor report, peer reviewers should:

- provide an analysis of the strengths and weaknesses of the application against the assessment criteria listed in section 6 of the SIMH Grant Guidelines
- pose any questions they wish to raise at the initial panel meeting

Peer reviewers are not to discuss applications with other peer reviewers, except at the panel meeting. This is to ensure peer reviewers provide independent assessments.

Peer reviewers must ensure their initial review is completed by the nominated due date. If peer reviewers are unable to meet this requirement, they must contact NHMRC promptly to discuss alternative arrangements.

External Assessors provide expert advice to the PRP members on how well the applicant has addressed the assessment criteria in a specific field of research and its weaknesses, and may also focus on aspects of the application that require further clarification.

Potential External Assessors will be asked to identify any CoI prior to gaining access to the full application. If the nominated External Assessor has declared low or no conflict, they will be provided access to the full application.

External assessors will provide a written report of their assessment of the application against the assessment criteria.

The written assessor reports will be discussed during the initial panel meeting via videoconference and will be provided as a consolidated report to applicants for rebuttal.

After the applicant response period the panel will reconvene for an interview meeting for a final review of the applications.

For all applications, the following should be considered during the initial review and at the panel interview meeting.

3.3.5.1 Relative to opportunity and career disruption

Panel members must take into account productivity relative to opportunity and, where applicable, career disruption considerations in the assessment of all applications. This reflects NHMRC's policy that assessment processes should accurately assess an applicant's track record and associated productivity relative to stage of career, including consideration as to whether productivity and contribution are commensurate with the opportunities available to the applicant. To assist peer reviewers with their assessment, further details regarding relative to opportunity and career disruptions are provided at [Appendix G](#).

3.3.5.2 Industry-relevant experience

Peer reviewers are to recognise an applicant's industry-relevant experience and outputs. To assist peer reviewers with their assessment, the *Guide to Evaluating Industry-Relevant Experience* is provided at [Appendix H](#).

3.3.5.3 Use of Impact Factors and other metrics

Peer reviewers are to 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 takes into account the overall impact, quality and contribution to the field of the published journal articles from the grant applicant, not just the standing of the journal in which those articles are published.

It is not appropriate to use publication metrics such as Journal Impact Factors.

The [San Francisco Declaration on Research Assessment](#) (DoRA) makes recommendations for improving the evaluation of research assessment. NHMRC is a signatory to DoRA and adheres to the recommendations outlined in DoRA for its peer review processes.

3.3.5.4 Enhancing reproducibility and applicability of research outcomes

Peer reviewers are required to consider the general strengths and weaknesses of the experimental design of the proposal to ensure robust and unbiased results. Assessment of the experimental design should include consideration of the following, as appropriate:

- scientific premise of the proposed research (i.e. how rigorous were previous experimental designs that form the basis for this proposal)
- techniques to be used
- details for appropriate blinding (during allocation, assessment and analysis)
- strategies for randomisation
- details and justification for control groups
- effect size and power calculations to determine the number of samples/subjects in the study (where appropriate)
- consideration of relevant experimental variables, and

- sex and gender elements of the research to maximise impact and any other considerations relevant to the field of research necessary to assess the rigour of the proposed design.

3.3.5.5 Research Integrity Issues

The peer review process can sometimes identify possible research integrity issues with applicants (e.g. concerns about possible plagiarism, inconsistencies in the presentation of data, inaccuracies in the presentation of track record information) or the behaviour of other peer reviewers. NHMRC has established specific processes for addressing research integrity concerns that arise in peer review. Peer reviewers must not discuss their concerns with other peer reviewers as this may jeopardise the fair assessment of an application. Instead, these issues should be raised with NHMRC separately from the peer review process. Advice about how to raise concerns and a description of how this process is managed is provided on the [NHMRC website](#).

Applications that are the subject of a research misconduct allegation will continue to progress through NHMRC peer review processes while any investigations are ongoing. NHMRC liaises with the institution regarding the outcome of any investigation and, if necessary, will take action under the *NHMRC Research Integrity and Misconduct Policy* available on the [NHMRC website](#).

3.3.5.6 Contact between peer reviewers and applicants

Peer reviewers must not contact applicants about their application under review. If this occurs, the peer reviewer may be removed from the process, and there is the potential for exclusion from future NHMRC peer review.

Where an applicant contacts a peer reviewer, the relevant application may be excluded from consideration.

In either case, contact between applicants and peer reviewers may raise concerns about research integrity and NHMRC may refer such concerns to the relevant Administering Institution.

3.3.6 Panel meetings

It is expected that all SIMH panel meetings (including applicant interview) will occur via videoconference and out of normal business hours to accommodate international time zones.

3.3.6.1 Discussion of applications at the initial panel meeting

Office of NHMRC will collate assessor reports and questions to be raised for each application into an agenda to be addressed at the initial panel meeting.

3.3.6.2 Initial Panel meeting process

The purpose of the panel meeting is not for individual peer reviewers to regress their scores to the panel mean. It is an opportunity to discuss divergent opinions or aspects of an application that a peer reviewer may have overlooked and adjust their scores as necessary. Peer reviewers should be able to justify how their scores align with the category descriptors.

The process for the initial panel meeting is as follows:

Declaration of inter-relationships

Suggested time limit: 10 minutes

When panel members (including the Chair and Secretariat) meet face-to-face for the first time, each panel member will be invited to briefly describe their expertise and previous peer review experience. During their introductions, members will be asked to declare any relationships with other panel

members including:

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

Application Review

Suggested time: 20 minutes per discussion point

A review of the application will be held focussing on the strengths and weaknesses identified by the initial written reviews. The indicative score provided by the consumer and carer reviewers will be taken into consideration for discussions on consumer and/or community participation. Discussion leads will be identified on the level of concern expressed on particular aspects within the assessor reports. Questions that remain unresolved at this meeting will be provided to the applicants, in a consolidated Panel Report.

3.3.7 Applicant Response to Panel Report

Applicants are given the opportunity to submit a written response to the Panel Report. The applicant's response is limited to no more than ten (10) A4 pages and should address the questions raised. It is not an opportunity to modify the proposed research plan, unless requested. Each Chief Investigator A (CIA) will be provided with the Panel Report which the panel's views, comments and questions are summarised. Applicants will have up to 19 calendar days (inclusive of weekends) to submit a response to the Panel Report. Applicant responses will be made available to the panel without a high CoI.

3.3.8 Panel Reassessment of Applications

Once Applicant Responses have been submitted the panel members will consider the research proposal in conjunction with the Panel Report Applicant Response and Aboriginal and Torres Strait Islander Assessor Report (if applicable). Panel members will be then asked to consider and submit to NHMRC any additional questions to be asked at the interview.

3.3.9 At Interview

Interview process (40-50 minutes)

Conflicted panel members will be excused from the interview. The panel will then hold a pre-interview review of the application, highlighting any issues to be addressed at interview.

The applicant team will be connected to the meeting.

The Chair will confirm the interview process and will ask the applicant team to briefly introduce themselves to the panel. The CIA is invited to provide a brief summary of the application. The panel will then address areas of the application requiring clarification, led by pre-determined panel members.

Panel members should ensure they:

- Elicit relevant information from applicants
- Are not verbally tough or argumentative with the applicant
- Allow applicants to present their case for award.

Applicants are provided with an opportunity to summarise their application and address any issues not already raised.

Once the applicant team has left the interview, the panel will consider the interview and application before scoring against each assessment criteria.

Scoring by panel members

Suggested time limit: 5 minutes

All panel members in the room, excluding the Chair and consumer and carer reviewers, must independently score the application through a secret ballot via email. All scoring panel members will provide scores against the five assessment criteria using the seven-point scale outlined in the *SIMH Category Descriptors (Appendix D)*, as a reference. While the category descriptors provide panel members with some benchmarks for appropriately scoring each application, it is not essential that all descriptors relating to a given score are met. Panel members should consider this and ensure the entire seven-point scale is considered when scoring applications.

At the completion of scoring, the panel secretariat will announce the following results:

1. Rating - the rating will be determined by including each panel member's score for each of the assessment criteria. The rating, as calculated arithmetically to three decimal places, will take account of the weighting of each criterion.
2. Category - this will be deemed, based on the calculated rating, as follows:

Rating range	Deemed category
1.001 - 1.500	1
1.501 - 2.500	2
2.501 - 3.500	3
3.501 - 4.500	4
4.501 - 5.500	5
5.501 - 6.500	6
6.501 - 7.000	7

Where panel members have concerns regarding the final score, the Chair should invite further discussion. If the panel collectively determines that reassessment is warranted, members will be invited to independently rescore that application. Panel members should not aim to achieve a consensus score, nor take into consideration the potential overall ranking or funding outcome of an application.

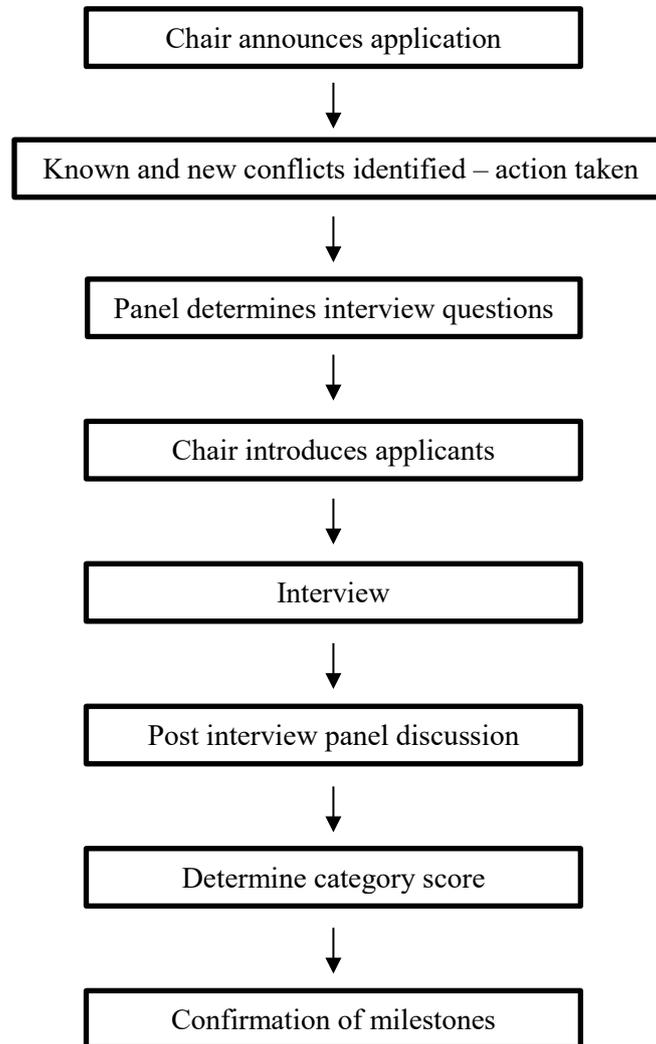
Confirmation of milestones (5 minutes)

With reference to the milestones in the timeline of the grant proposal and if applicable, identified in the Applicant Response, panel members will identify key milestones. Continued funding will be conditional upon successful completion of these key milestones.

Combination of applications

For applications submitted to this scheme, NHMRC may seek the panel's advice on whether applicant teams should combine their applications into a single endeavour in order to be considered for funding. If so, this would be identified as a condition of funding and may require further peer review.

Interview process summary



3.3.10 Quorum

A quorum is regarded as 50 percent plus one of the appointed panel members. If there is an uneven number of panel members, a majority is the next full number after 50 percent (e.g., seven in the case of 13 members). In situations where a number of members have a high CoI with an application, the scoring quorum cannot be less than one-third of the panel membership present at the meeting.

NHMRC will endeavour to identify, prior to panel meetings, those applications that do not have a scoring quorum and obtain a suitably qualified member from another panel to participate in panel discussion and to score that application.

3.3.11 Principles for setting conditions of funding for NHMRC grants

Setting a condition of funding (CoF) on a grant through the peer review process is, and should be, a rare event. When this does occur, the panel will use the principles set out below to decide the CoF. These principles aim to achieve a consistent approach, minimise the number of conditions set and

ensure conditions are unambiguous and able to be assessed.

CoFs relate to the awarding of funding, the continuation of funding or the level of funding. They do not relate to conditions which affect either eligibility to apply or subsequent peer review.

The principles are:

- NHMRC seeks to minimise the administrative burden on researchers and Administering Institutions.
- CoFs must not relate to the competitiveness of an application (e.g. project requires more community engagement); these issues should be considered during peer review and be reflected in the scores for the application.
- Any CoFs must be clear and measurable, so that the condition can be readily assessed as having been met.

3.3.12 Panel documentation

All reviewers 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. For panel meetings, this is when the final scores have been determined. After this time, both hard copy and electronic notes are to be disposed of appropriately.

3.3.13 Funding Recommendation

After the panel meeting/s, application scores from all panels are used to create a ranked list. This final ranked list will be used to prepare funding recommendations to NHMRC's Research Committee and Council for advice to the CEO, who will then make recommendations to the Minister for Health.

3.3.14 Notification of Outcomes

Applicants will be notified of the outcomes via NHMRC's granting system and their Administering Institution's Research Administration Officer.

Appendix A - Understanding the Principles of Peer Review

Fairness

- Peer review processes are designed to ensure that peer review is fair and seen to be fair by all involved.
- Peer reviewers have an obligation to ensure that each application is judged consistently and objectively on its own merits, against published assessment criteria. Peer reviewers must not introduce irrelevant issues into the assessment of an application.
- Applications will be subject to scrutiny and evaluation by individuals who have appropriate knowledge of the fields covered in the application.
- Peer reviewers should ensure that their assessments are accurate and that all statements are capable of being verified.
- Complaints processes are outlined on the NHMRC website. All complaints to NHMRC relating to the peer review process are dealt with independently and impartially.

Transparency

- NHMRC will publish key dates, all relevant material for applicants and peer reviewers, and grant announcements on its website and/or via [GrantConnect](#).
- NHMRC publicly recognises the contribution of participants in the peer review process, through publishing their names on the NHMRC website.³

Independence

- The order of merit determined by peer review panels is not altered by NHMRC. However, additional applications may be funded 'below the funding line' in priority or strategic areas.
- Panel Chairs are independent and are not involved in the peer review of any application before that panel. Chairs act to ensure that NHMRC's processes are followed for each scheme, including adherence to the principles of this Guide.

Appropriateness and balance

- Peer reviewers are selected to meet the program's objectives and to ensure adequate expertise to assess the applications received.
- NHMRC endeavours to ensure that panels are constituted with an appropriate representation of gender, geography and large and small institutions.

Confidentiality

- NHMRC provides a process by which applications are considered by peer reviewers in-confidence. In addition NHMRC is bound by the provisions of the Privacy Act 1988 in relation to its collections and use of personal information, and by the commercial confidentiality requirements under section 80 of the NHMRC Act.

³ Such information will be in a form that prevents applicants determining which particular experts were involved in the review of their application.

- Peer reviewers are to treat applications in-confidence and must not disclose any matter regarding applications under review to people who are not part of the process.
- Any information or documents made available to peer reviewers in the peer review process are confidential and must not be used other than to fulfil their role.
- NHMRC is subject to the *Freedom of Information Act 1982* which provides a statutory right for an individual to seek access to documents. If documents that deal with peer review fall within the scope of a request, there is a process for consultation and there are exemptions from release. NHMRC will endeavour to protect the identity of peer reviewers assigned to a particular application.

Impartiality

- Peer reviewers must disclose all interests and matters that may, or may be perceived to, affect objectivity in considering particular applications.
- Panel members must disclose relationships with other members of the panel, or with grants being reviewed by other panel members, including:
 - research collaborations
 - student, teacher or mentoring relationships
 - employment arrangements
- any other relationship that may, or may be seen to, undermine fair and impartial judgement.
- Disclosures of interest are managed to ensure that no one with a high conflict is involved in decision making on relevant applications.

Quality and Excellence

- NHMRC will continue to introduce evidence-based improvements into its peer review processes.
- Any significant change will be developed in consultation with the research community and may involve piloting new processes.
- NHMRC will strive to introduce new technologies that are demonstrated to maximise the benefits of peer review and improve the efficiency and effectiveness of the process while minimising individual workloads.
- NHMRC will undertake post-program assessment of all its schemes with feedback from the sector.
- NHMRC will provide advice, training and feedback for peer reviewers new to NHMRC peer review.
- Where NHMRC finds peer reviewers to be substandard in their performance, NHMRC may provide such feedback directly to the peer reviewer or their institution.

Appendix B - Guidance for Declaring and Assessing Disclosures of Interest

Conflicts frequently are regarded as a positive indicator that peer reviewers are recognised leaders who:

- have expert advice or skills
- have been given professional opportunities
- have received government funding, and
- are supported by the companies working to raise the standard of individual and public health throughout Australia.

A disclosure of interest does not mean that a peer reviewer has engaged in an inappropriate activity. It is a collaboration which may, or could be perceived to, impact impartial peer review and thus needs to be disclosed and transparently managed (where necessary) to safeguard the integrity of the peer review process. It is the peer reviewer's responsibility to disclose all interests. Failure to do so without a reasonable excuse may result in the peer reviewer being removed from the panel in accordance with subsection 44B(3) of the NHMRC Act.

In determining if an interest is a conflict, peer reviewers should give consideration to the following values that underpin the robust nature of peer review:

- **Excellence through expert peer review:** The benefits of peer reviewers' expert advice need to be balanced with the risk of real and or perceived interests affecting an impartial review.
- **Significance:** Not all interests are equal. The type of interest needs to be considered in terms of its significance and time when it occurred.
- **Integrity through disclosure:** Peer review rests on the integrity of peer reviewers to disclose any interests and contribute to transparently managing any real or perceived conflicts in a rigorous way. The peer review system cannot be effective without trusting peer reviewers' integrity.

In determining if an interest is a 'High', 'Low', or 'No' CoI, the responsibility is on the peer reviewer to consider the specific circumstances of the situation. This includes:

- the interest's significance
- its impact on the impartiality of the reviewer, and
- maintaining the integrity of the peer review process.

Once a peer reviewer discloses a conflict they can detail a brief explanation of the disclosure of interest in NHMRC's granting system to enable accurate clarification for decisions. Wherever possible, peer reviewers are encouraged to provide sufficient detail in the explanation such as date (month and year) of collaborations. Disclosures of interest where appropriate are to be documented for conflicts with both CIs and AIs.

The written declaration of interest is retained for auditing purposes by NHMRC. The details below provide generalist examples but are not to be regarded as a prescriptive checklist

HIGH Interest

Situation		Example
Associated with Application and/or Chief Investigator (CI)	✓	Peer reviewer is a CI or AI on the application under review.
	✓	Peer reviewer has had discussions/significant input into the study design or research proposal of this application.
Collaborations	✓	Peer reviewer has collaborated, in a significant way, on publications within the last three calendar years (co-authorship), pending current-round applications, existing NHMRC or other grants.
	✓	There is a direct association/collaboration between the peer reviewer and a member of the CI team that may have, or may be perceived to have, a vested interest in this research.
Working relationships	✓	Peer reviewer has the same employer, is part of the same organisation, or is negotiating for employment at the applicant's institution, including: <ul style="list-style-type: none"> • in the same research field at an independent Medical Research Institute. • in the same Department or School of a university. • in the same Department of a hospital.
	✓	Peer reviewer is in a position of influence within an organisation, or with a pecuniary interest, e.g. Dean of Faculty or School/Institute Directors.
	✓	Peer reviewer would benefit if the proposal was successful as an associate of the same scientific advisory committee, review board, exam board, trial committee, Data and Safety Monitoring Board etc. For example, a board of the hospital in which the research would be conducted.
Professional relationships and interests	✓	Peer reviewer's organisation is affiliated or associated with organisations that may have, or may be perceived to have, vested interest in the research. For example, a pharmaceutical company has provided drugs for testing and therefore has a vested interest in the outcome.
Social relationship and / or interests	✓	The peer reviewer has a known personal/social/perceived relationship with a CI on the application.
Teaching or supervisory relationship	✓	Peer reviewer has taught or supervised the applicant for either undergraduate or postgraduate studies, co-supervised a CI, within the last three years.
Direct financial interest in the application	✓	Peer reviewer has the potential for financial gains if the application is successful, such as, benefits from: payments from resulting patents, supply of goods and services, access to facilities, and provision of cells/animals as part of the collaboration.
	✓	Peer reviewer receives research funding or other support from a company and the research proposal may involve collaboration/association with relevant company.

Other interests or situations	✓	Peer reviewer has had an ongoing scientific disagreement and/or dispute with the applicant/s. This may still be ruled high if the events in question occurred beyond the last three years.
	✓	The peer reviewer feels that there are other interests or situations not covered above that could influence/or be perceived to influence, the peer review process

LOW Interest

Situation		Example
Collaborations	✓	Peer reviewer and a CI on the application have collaborated more than three years ago.
	✓	Within the last three years the peer reviewer has published with the CI as part of a multi-author collaborative team (i.e. ≥ 10) where the peer reviewer did not have a major professional interactive role (i.e. the peer reviewer's role was a leadership role).
	✓	A co-worker is planning future collaborations with a CI.
	✓	Peer reviewer and a named AI on the application are actively or have previously collaborated within the last three years.
	✓	Without financial gain or exchange, a peer reviewer and a contributor of the research team have shared cells/animals/reagents/specialist expertise (biostatistician) etc. but have no other connection to each other.
	✓	Collaboration between a CI and the peer reviewer's research group.
	✓	Peer reviewer is considering/planning/or has planned a future collaboration with a CI on the application but have no current collaborations or joint applications.
Working relationships	✓	Peer reviewer has the same employer, is part of the same organisation or is negotiating employment at the applicant's institution
	✓	Peer reviewer and a CI work: <ul style="list-style-type: none"> at the same institution and do not know each other. in the same Faculty or College of a university but in different Schools or Departments and do not know each other. in the same organisation, but the peer reviewer or applicant holds an honorary appointment.
	✓	Peer reviewer and a CI work for two organisations that are affiliated but there is/are no direct association/collaboration.
	✓	Peer reviewer and a CI are on the same scientific advisory committee, review board, exam board, trial committee, Data and Safety Monitoring Board etc., but otherwise have no association that would constitute a High decision.

Professional relationships and interests	✓	Peer reviewer's organisation is affiliated with the CI's organisation.
	✓	Where two organisations are affiliated but there is no direct association/collaboration between the CI and peer reviewer and there is no other link that would constitute a 'High' decision.
	✓	When the peer reviewer's institution has an indirect affiliation/association with the organisation(s) that may have, or may be perceived to have, a vested interest in this research. For example, peer reviewer is employed at a large institution that does not have a direct research interest/association with the organisation(s) in question.
Social relationship and / or interests	✓	Peer reviewer's partner or an immediate family member have a known personal/social (non-work)/perceived relationship with a CI on the application, but the peer reviewer themselves does not have any link with the CI that would be perceived or constitute a 'High' decision.
Teaching or supervisory relationship	✓	Peer reviewer taught or supervised the applicant for either undergraduate or postgraduate studies, co-supervised a CI, or the peer reviewer's research was supervised by a CI, more than three years ago.
Financial interest in the application	✓	Peer reviewer has an associated patent pending; supplied goods and services, improved access to facilities, or provided cells/animals etc. to a named CI for either undergraduate or postgraduate studies.
	✓	Peer reviewer has intellectual property that is being commercialised by an affiliated institution. Peer reviewer has previously provided and/or received cells/animals to/from a CI on the application, but has no other financial interests directly relating to this application that would constitute a 'High' decision.
	✓	Peer reviewer receives research funding or other support from a company, and the research proposal may impact upon the company.
Other interests or situations	✓	Peer reviewer may, or may be perceived to be, biased in their review of the application. For example, peer reviewer is a lobbyist on a particular issue.

Appendix C - SIMH Assessment Criteria

Applications for the SIMH grant are assessed by peers against the assessment criteria listed below:

Criterion One

Generate new knowledge that leads to improved health outcomes (20%)

- 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 of the Centre
- feasibility of the proposed research
- aims and concepts of the research are innovative or pioneering on an international level
- likelihood that significant new findings will be produced and substantially advance knowledge in the field.

Criterion Two

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 Centre's activities to the wider community, including where appropriate, for commercial gain
- the involvement of end-users and the wider community in the planning, implementation and uptake of the research program.

Criterion Three

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 (20%)

- strategy to generate new researcher capability, mentoring and encouragement of further career development
- clarity of measures for integrating new researchers into the teams including mentoring strategies.

Criterion Four

Facilitate collaboration (20%)

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, including but not limited to:

- likely effectiveness of working collaborations and intellectual exchange
- the relationship with other groups in the particular field of research
- integration and cohesiveness of the team.

Criterion Five

Record of Research and Translation Achievement – relative to opportunity (20%)

Record of Achievement is considered in terms of whether the previous research experience of applicants demonstrates that the team is capable of achieving the proposed project and/or has the 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
- other research-related achievements, such as:
 - influence on clinical/health policy or practice, or provision of influential advice to health authorities and government
 - impacts on health via the broad dissemination of research outcomes e.g. via mainstream media, the community or industry involvement.

Appendix D - SIMH Category Descriptors

The following category descriptors, which are equally weighted, are used as a guide to score an application against each of the Assessment Criteria.

While the category descriptors provide peer reviewers with some benchmarks for appropriately scoring each application, **it is not essential that all descriptors relating to a given score are met.**

The category descriptors are a guide to a “best fit” outcome. Peer reviewers will consistently refer to these category descriptors to ensure thorough, equitable and transparent assessment of applications.

Assessing Aboriginal and Torres Strait Islander Contributions

It is recognised that Aboriginal and Torres Strait Islander applicants often make additional valuable contributions to policy development, clinical/public health leadership and/or service delivery, community activities and linkages, and are often representatives on key committees. If applicable, these contributions should be considered when assessing research output and track record.

Scientific assessment criteria

Category	<i>Generate new knowledge that leads to improved health outcomes</i>	<i>Promote effective transfer of research outcomes into health policy and/or practice</i>	<i>Develop the health and medical research workforce</i>	<i>Facilitate collaboration</i>	<i>Record of research and translation achievement – relative to opportunity</i>
7 Outstanding	<p>The flagship programs:</p> <ul style="list-style-type: none"> • have objectives that are well-defined, highly coherent and strongly developed • are exemplary in design • are state of the art in concept • will be the subject of invited plenary presentations at international meetings, often with relevance across several fields • are highly innovative and introduce advances in concept • are highly feasible. 	<p>The flagship programs:</p> <ul style="list-style-type: none"> • address one or more issues of utmost importance to mental health • have a high degree of involvement of end-users and the wider community in the planning, implementation and uptake of research • will translate into fundamental outcomes in the science and/or practice of clinical medicine, health services or public health, or fundamental changes in mental health policy • the published research will be highly influential in the promotion of change in mental health policy and/or practice. 	<p>The centre and its flagship programs:</p> <ul style="list-style-type: none"> • include a strong strategy to generate new researcher capability, mentoring and career development • include impressive measures for integrating new researchers into teams. 	<p>The centre and its flagship programs:</p> <ul style="list-style-type: none"> • have a clear and robust governance structure to support collaboration and outcomes • will be highly effective in promoting working collaborations, including facilitating intellectual exchange and co-design with a diverse range of stakeholders • have very strong relationships with other researchers, end-users and the wider community • have a very high degree of team integration and cohesiveness. 	<p>Relative to opportunity, the applicants:</p> <ul style="list-style-type: none"> • are generally the most outstanding translation-oriented researchers, policy makers, clinicians and/or professionals involved in mental health service delivery in the country • have very strong records of research, policy, clinical practice or service delivery achievements • have strong international reputations and/or are highly recognised locally for their contributions, including for promoting knowledge translation • hold leadership positions in highly regarded scientific, professional or community organisations.

Category	<i>Generate new knowledge that leads to improved health outcomes</i>	<i>Promote effective transfer of research outcomes into health policy and/or practice</i>	<i>Develop the health and medical research workforce</i>	<i>Facilitate collaboration</i>	<i>Record of research and translation achievement – relative to opportunity</i>
6 Excellent	<p>The flagship programs:</p> <ul style="list-style-type: none"> • are clear in intent and are logical • have an excellent design • are appropriate for the experience level of the applicant team • could be the subject of invited plenary presentations at international and national meetings • are innovative and introduce some advances in concept • are highly feasible. 	<p>The flagship programs:</p> <ul style="list-style-type: none"> • address one or more issues of major importance to mental health • have extensive involvement of end-users and the wider community in various aspects of the research • the published research should be very influential in the promotion of change in mental health policy and/or practice. 	<p>The centre and its flagship programs:</p> <ul style="list-style-type: none"> • include a well-articulated strategy to generate new researcher capability, mentoring and career development • include well-articulated measures for integrating new researchers into teams. 	<p>The centre and its flagship programs:</p> <ul style="list-style-type: none"> • have a clear governance structure to support collaboration and outcomes • will be effective in promoting working collaborations including facilitating intellectual exchange and co-design with a range of stakeholders • have strong relationships with other researchers and the wider community • have a high degree of team integration and cohesiveness. 	<p>Relative to opportunity, the applicants:</p> <ul style="list-style-type: none"> • have a record of translation-oriented achievements that place them in the top 10–20% of peers/cohort • have a growing international reputation or are well recognised locally for their contributions in relevant areas, including for promoting knowledge translation • have established a position of leadership, or are emerging leaders, in their field • hold leadership positions in well regarded scientific, professional or community organisations.
5 Very Good	<p>The flagship programs:</p> <ul style="list-style-type: none"> • have clear objectives • any reservations regarding study design are minor • can be the subject of invited plenary presentations at national specialty meetings • contain innovative ideas • will likely be successfully achieved. 	<p>The flagship programs:</p> <ul style="list-style-type: none"> • address an issue of considerable importance to mental health • will have relatively extensive involvement of end-users and the wider community • the published research will be influential in the promotion of change in mental health policy and/or practice. 	<p>The centre and its flagship programs:</p> <ul style="list-style-type: none"> • include a persuasive strategy to generate new researcher capability, mentoring and career development • include articulated measures for integrating new researchers into teams. 	<p>The centre and its flagship programs:</p> <ul style="list-style-type: none"> • have a governance structure to support collaboration and/or outcomes • will be reasonably effective in promoting working collaborations including intellectual exchange and working with stakeholders • have good relationships with other researchers, end-users and the wider community • have good team integration and cohesiveness. 	<p>Relative to opportunity, the applicants:</p> <ul style="list-style-type: none"> • have a record of translation-oriented achievements, that place them well above average for their peers/cohort • have a growing national reputation and/or are well recognised locally for their contributions, including for promoting knowledge translation.

Category	<i>Generate new knowledge that leads to improved health outcomes</i>	<i>Promote effective transfer of research outcomes into health policy and/or practice</i>	<i>Develop the health and medical research workforce</i>	<i>Facilitate collaboration</i>	<i>Record of research and translation achievement – relative to opportunity</i>
4 Good	<p>The flagship programs:</p> <ul style="list-style-type: none"> • are sound in terms of their objectives • may have some novel aspects, while others underpin or extend existing knowledge • but have several areas of minor concern in the experimental design and/or feasibility. 	<p>The flagship programs:</p> <ul style="list-style-type: none"> • address an issue of some importance to mental health • have some involvement of end-users and the wider community • the published research may be influential in the promotion of change in mental health policy and/or practice. 	<p>The centre and its flagship programs:</p> <ul style="list-style-type: none"> • include a strategy that should generate new researcher capability, mentoring and career development • include articulated measures that should integrate new researchers into teams. 	<p>The centre and its flagship programs:</p> <ul style="list-style-type: none"> • have a governance structure to support collaboration • will have some effectiveness in promoting working collaborations and intellectual exchange • have positive relationships with other researchers, end-users and the wider community • have a degree of team integration and cohesiveness. 	<p>Relative to opportunity:</p> <ul style="list-style-type: none"> • the applicants have a solid record of translation-oriented achievements • one or more of the CIs has an existing or emerging national reputation, albeit in a niche area • the applicants have made contributions to mental health, including knowledge translation..
3 Marginal	<p>The flagship programs:</p> <ul style="list-style-type: none"> • are satisfactory in terms of their objectives, but may not be successful with all of them • contains some study design problems or flaws • have a number of areas of significant concern • have relatively little novelty or innovation. 	<p>The flagship programs:</p> <ul style="list-style-type: none"> • address an issue of some concern to mental health • have little involvement of end-users and the wider community • published research is unlikely to be influential in the promotion of change in mental health policy and/or practice. 	<p>The centre and its flagship programs:</p> <ul style="list-style-type: none"> • include a weak strategy to generate new researcher capability, mentoring and career development • include few measures to integrate new researchers into teams. 	<p>The centre and its flagship programs:</p> <ul style="list-style-type: none"> • have a weak or unclear governance structure • may be effective in promoting working collaborations and intellectual exchange • have some viable relationships with other researchers, end-users and the wider community, although weak • have minimal team integration and cohesiveness. 	<p>Relative to opportunity, the applicants:</p> <ul style="list-style-type: none"> • have a moderate record of translation-oriented achievements • lack some areas of expertise that will be required to successfully complete the programs • have limited track records in mental health research, policy or practice, including limited involvement in knowledge translation.

Category	<i>Generate new knowledge that leads to improved health outcomes</i>	<i>Promote effective transfer of research outcomes into health policy and/or practice</i>	<i>Develop the health and medical research workforce</i>	<i>Facilitate collaboration</i>	<i>Record of research and translation achievement – relative to opportunity</i>
2 Unsatisfactory	<p>The flagship programs:</p> <ul style="list-style-type: none"> • provide elements of research which will at best, only incrementally advance current knowledge • contain a study design which is inadequate in a number of areas • are not innovative or significant • contain a research plan which does not seem to be feasible in several areas. 	<p>The flagship programs:</p> <ul style="list-style-type: none"> • address an issue of only marginal concern to mental health • only follow behind previously well documented and studied concepts or previously well used approaches • published research is unlikely to be influential in the promotion of change in mental health policy and/or practice • there are concerns about successful completion • virtually no involvement of end-users and the wider community. 	<p>The centre and its flagship programs:</p> <ul style="list-style-type: none"> • do not articulate a viable strategy to generate new researcher capability, mentoring and career development • have few viable measures to integrate new researchers into teams. 	<p>The centre and its flagship programs:</p> <ul style="list-style-type: none"> • do not articulate a governance structure • raise doubts about their effectiveness in promoting working collaborations and intellectual exchange • have little evidence of relationships with other researchers, end-users and the wider community • have little or no evidence of team integration and cohesiveness. 	<p>Relative to opportunity, the applicants:</p> <ul style="list-style-type: none"> • have a weak record of translation-oriented achievements • have major gaps in relevant expertise required to successfully complete the programs • have track records which are not significantly translation-oriented.
1 Poor	<p>The flagship programs:</p> <ul style="list-style-type: none"> • will not advance current knowledge in the field • contain a study design which is inappropriate in most areas • are not innovative or significant • raise major concerns about the feasibility of the research plan. 	<p>The flagship programs:</p> <ul style="list-style-type: none"> • do not address an issue of concern to mental health • successful completion is unlikely • published research will not be influential in the promotion of change in mental health policy and/or practice • no involvement of end- users and the wider community. 	<p>The centre and its flagship programs:</p> <ul style="list-style-type: none"> • are unlikely to generate new researcher capability, mentoring and career development • have few if any measures to integrate new researchers into teams. 	<p>The centre and its flagship programs:</p> <ul style="list-style-type: none"> • have no evidence of a governance structure • will be unlikely to promote working collaborations and intellectual exchange • have no evidence of relationships with other researchers, end-users and the wider community • have no evidence of team integration and cohesiveness. 	<p>Relative to opportunity, the applicants:</p> <ul style="list-style-type: none"> • are not productive in a research translation sense to any significant extent in relevant fields • do not have the expertise or capacity to successfully complete more than a small fraction of the programs • do not have relevant translation-oriented track records in mental health.

Consumer and Carer assessment criteria

To assist the Consumer and Carer Reviewers with their assessment from a consumer and carer perspective the following set of category descriptors are provided.

While these category descriptors provide peer reviewers with an indicative benchmark, these scores will not be used to calculate a final score.

<i>Scoring Criteria Description</i>	<i>Involvement (30%)</i> What is the level of involvement of carers and consumers included in the research team?	<i>Consultation (30%)</i> What is the level of consultation with carers and consumers during the development of the research plan?	<i>Participation (40%)</i> What is the level of consumer and/or community participation in the proposed research?
7 Outstanding	Has a very high level of involvement by carers and consumers included in the research team.	Has demonstrated a very high level consultation with carers and consumers during the development of the research proposal.	Has a very high level of consumer and/or community participation.
6 Excellent	Has a high level of involvement by carers and consumers included in the research team.	Has demonstrated a high level consultation with carers and consumers during the development of the research proposal.	Has a high level consumer and/or community participation.
5 Very Good	Has a good level of involvement by carers and consumers included in the research team.	Has demonstrated a good level consultation with carers and consumers during the development of the research proposal.	Has a good level consumer and/or community participation.
4 Good	Some involvement of carers and consumers included in the research team.	Has a demonstrated a degree of consultation with carers and consumers during the development of the research proposal.	Has a degree of consumer and/or community participation.
3 Marginal	Minimal involvement of carers and consumers included in the research team.	Has minimal consultation with carers and consumers during the development of the research proposal.	Has minimal consumer and/or community participation.
2 Unsatisfactory	Little or no carers or consumers included in the research team.	Little or no consultation with carers and consumers during the development of the research proposal.	Little or no consumer and/or community participation.
1 Poor	No carers or consumers included in the research team.	No consultation with carers and consumers during the development of the research proposal.	No consumer and/or community participation.

Appendix E - Indigenous Research Excellence Criteria

To qualify as Aboriginal and Torres Strait Islander health research, at least 20% of the research effort and/or capacity building must relate to Aboriginal and Torres Strait Islander health.

Qualifying applications must address the NHMRC Indigenous Research Excellence Criteria as follows:

- Community engagement - the proposal demonstrates how the research and potential outcomes are a priority for Aboriginal and Torres Strait Islander communities with 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 - the potential health benefit of the project is demonstrated by addressing an important public health issue for Aboriginal and Torres Strait Islander people. This benefit can have a single focus or affect several areas, such as knowledge, finance and policy or quality of life. The benefit may be direct and immediate, or it can be indirect, gradual and considered.
- Sustainability and transferability - the proposal demonstrates 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 people, beyond the life of the project. This may be through sustainability in the project setting and/or transferability to other settings such as evidence based practice and/or policy. In considering this issue, the proposal should address the relationship between costs and benefits.
- Building capability - the proposal demonstrates how Aboriginal and Torres Strait Islander people, communities and researchers will develop relevant capabilities through partnerships and participation in the project.

Peer reviewers will consider these in their overall assessment of the application, when scoring the *Assessment Criteria* set out in [Attachment C](#).

Appendix F – Guidance for assessing applications against the Indigenous Research Excellence Criteria

Peer reviewers should consider the following when assessing applications that have a focus on the health of Indigenous Australians. The points below should be explicit throughout the application and not just addressed separately within the Indigenous criteria section.

Community Engagement

- Does the proposal clearly demonstrate a thorough and culturally appropriate level of engagement with the Aboriginal and Torres Strait Islander community or health services prior to submission of the application?
- Is there clear evidence that the level of engagement throughout the project will ensure the feasibility of the proposed study?
- Has the application demonstrated evidence that any of the methods, objectives or key elements of the proposed work have been formed, influenced or defined by the community?
- Were the Indigenous community instrumental in identifying and inviting further research into the health issue and will the research outcomes directly benefit the ‘named’ communities?
- Is there a history of working together with the ‘named’ communities e.g. co-development of the grant, involvement in pilot studies or how the ‘named’ communities will have input/control over the research process and outcomes across the life of the project?

Benefit

- Does the proposal clearly outline the potential health benefits (both intermediate and long term, direct and indirect) to Aboriginal and Torres Strait Islander people?
- Does the proposal demonstrate that the benefit(s) of the project have been determined or guided by Aboriginal and Torres Strait Islander people, communities or organisations themselves?

Sustainability and Transferability

- Does the proposal:
 - Provide a convincing argument that the outcomes will have a positive impact on the health of Aboriginal and Torres Strait Islander peoples, which can be maintained after the study has been completed?
 - Have relevance to other Indigenous communities?
 - Clearly plan for and articulate a clear approach to knowledge translation and exchange?
 - Demonstrate that the findings are likely to be taken up in health services and/or policy?
- Will the outcomes from the study make a lasting contribution to Aboriginal and Torres Strait Islander communities and their wellbeing?

Building Capability

- Does the proposal outline how Aboriginal and Torres Strait Islander people and/or communities will benefit from capability development?

- Does the proposal outline how researchers and individuals/groups associated with the research project will develop capabilities that allow them to have a greater understanding/engagement of Aboriginal and Torres Strait Islander peoples?

Appendix G – NHMRC Relative to Opportunity and Career Disruption Policy

Purpose

The purpose of this document is to outline NHMRC's Relative to Opportunity Policy with respect to peer review and eligibility to apply for Emerging Leadership Investigator Grants.

NHMRC's objective is to support the best Australian health and medical research and the best researchers, at all career stages. NHMRC seeks to ensure that researchers with a variety of career experiences and those who have experienced pregnancy or a major illness/injury or have caring responsibilities, are not disadvantaged in applying for NHMRC grants.

Policy approach

NHMRC considers Relative to Opportunity to mean that assessment processes should accurately assess an applicant's track record and associated productivity relative to stage of career, including considering whether productivity and contribution are commensurate with the opportunities available to the applicant. It also means that applicants with career disruptions should not be disadvantaged (in terms of years since they received their PhD) when determining their eligibility for Emerging Leadership Investigator Grants and that their Career Disruptions should be considered when their applications are being peer reviewed.

In alignment with *NHMRC's Principles of Peer Review*, particularly the principles of fairness and transparency, the following additional principles further support this objective:

- **Research opportunity:** Researchers' outputs and outcomes should reflect their opportunities to advance their career and the research they conduct.
- **Fair access:** Researchers should have access to funding support available through NHMRC grant programs consistent with their experience and career stage.
- **Career diversity:** Researchers with career paths that include time spent outside of academia should not be disadvantaged. NHMRC recognises that time spent in sectors such as industry, may enhance research outcomes for both individuals and teams.

The above principles frame NHMRC's approach to the assessment of a researcher's track record during expert review of grant applications and eligibility of applicants applying for Emerging Leadership Investigator Grants. NHMRC expects that those who provide expert assessment during peer review will give clear and explicit attention to these principles to identify the highest quality research and researchers to be funded. NHMRC recognises that life circumstances can be very varied and therefore it is not possible to implement a formulaic approach to applying Relative to Opportunity and Career Disruption considerations during peer review.

Relative to Opportunity considerations during peer review of applications for funding

During peer review of applications, circumstances considered under the Relative to Opportunity Policy are:

- amount of time spent as an active researcher
- available resources, including situations where research is being conducted in remote or isolated communities
- building relationships of trust with Aboriginal and Torres Strait Islander communities over long periods that can impact on track record and productivity

- clinical, administrative or teaching workload
- relocation of an applicant and his/her research laboratory or clinical practice setting or other similar circumstances that impact on research productivity
- for Aboriginal and/or Torres Strait Islander applicants, community obligations including ‘sorry business’
- the typical performance of researchers in the research field in question
- research outputs and productivity noting time employed in other sectors. For example there might be a reduction in publications when employed in sectors such as industry
- carer responsibilities (that do not come under the Career Disruption policy below).

Career Disruption considerations during peer review and eligibility to apply for Emerging Leadership Investigator Grants

A Career Disruption is defined as a prolonged interruption to an applicant’s capacity to work, due to:

- pregnancy
- major illness/injury
- carer responsibilities.

The period of career disruption may be used:

- to determine an applicant’s eligibility for an Emerging Leadership Investigator Grant
- to allow for the inclusion of additional track record information for assessment of an application
- for consideration by peer reviewers

To be considered for the purposes of eligibility and peer review, a period of Career Disruption is defined as:

- a continuous absence from work for 90 calendar days or more, and/or
- continuous, long-term, part-time employment (with defined %FTE) due to circumstances classified as Career Disruption, with the absence amounting to a total of 90 calendar days or more.⁴

Career Disruption and eligibility to apply for Investigator Grants

A Career Disruption can affect an applicant’s eligibility to apply for an Emerging Leadership Investigator Grant. For such grants, the 10-year time limit on the number of years post-PhD may be extended commensurate with the period of the Career Disruption.

⁴ For example, an applicant who is employed at 0.8 FTE due to childcare responsibilities would need to continue this for at least 450 calendar days to achieve a Career Disruption of 90 calendar days.

Appendix H – Guide to Evaluating Industry-Relevant Experience

Principles

NHMRC is committed to ensuring that knowledge from health and medical research is translated through commercialisation (e.g. by pharmaceutical or medical devices companies), improvements to policy, health service delivery and clinical practice.

Therefore, as a complement to other measures of research excellence (e.g. publication and citation rates), NHMRC considers industry-relevant skills, experience and achievements in its assessment of applicants' track records.

These measures recognise that applicants who have invested their research time on technology transfer, commercialisation or collaborating with industry, may have gained highly valuable expertise or outputs relevant to research translation. However, NHMRC acknowledges that these researchers will necessarily have had fewer opportunities to produce traditional academic research outputs (e.g. peer reviewed publications).

Therefore, peer reviewers should:

- Appropriately recognise applicants' industry-relevant experiences and results
- Allow for the time applicants have spent in commercialisation/industry for "Relative to Opportunity" considerations.

Who might have industry experience or be preparing for industry experience?

Many applicants to NHMRC may have had industry experiences of various kinds. Examples include, but are not limited to:

1. Researchers who have left academia to pursue a full time career in industry (e.g. in pharmaceutical, biotechnology or start-up companies). In such instances, outputs must be assessed 'relative to opportunity', as there may have been restrictions in producing traditional research outputs (such as peer reviewed publications), but highly valuable expertise gained or outputs produced relevant to research translation (such as patents or new clinical guidelines).
2. Academic researchers whose work has a possible commercial focus. These researchers might not have yet entered into commercial agreements with industry and have chosen to forego or delay publication in order to protect or extend their intellectual property (IP).
3. Academic researchers who have translated their discovery into a collaborative agreement with industry. The researcher may be collaborating with the company in further research and development; may have a licensing agreement; or may have licensed or assigned their IP to the company. A researcher may ultimately leave the academic institution and become Chief Executive Officer, Chief Scientific Officer, Chief Technology Officer, Scientific Advisory Board Member or consultant for a start-up or other company, based on their experience.
4. Academic researchers who are actively collaborating with companies, for example by providing expert research services for fees. Publications of such work might be precluded or delayed according to contract arrangements. The specialised nature of this research might also restrict publication to specialised journals only, as opposed to generalist journals.

Relevant industry outputs

Level of experience/ output	IP	Collaboration with an industry partner	Established a start- up company	Product to market	Clinical trials or regulatory activities	Industry participation
Advanced	<ul style="list-style-type: none"> • Patent granted: consider the type of patent and where it is granted. It can be more difficult to be granted a patent in, for example, the US or Europe than in Australia, depending on the patent prosecution and regulatory regime of the intended market • National phase entry and prosecution or specified country application 	<ul style="list-style-type: none"> • Executed a licensing agreement with an established company • Significant research contract with an industry partner • Long term consultancy with an industry partner 	<ul style="list-style-type: none"> • Achieved successful exit (public market flotation, merger or acquisition) • Raised significant (>\$10m) funding from venture capital or other commercial sources (not grant funding bodies) • Chief Scientific Officer, Executive or non-executive role on company boards 	<ul style="list-style-type: none"> • Produce sales • Successful regulator submission to US Food and Drug Administration (FDA), European Medicines Agency, TGA etc. • Medical device premarket submission e.g. FDA 510(k) approved 	<ul style="list-style-type: none"> • Phase II or Phase III underway or completed 	<ul style="list-style-type: none"> • Major advisory or consultancy roles with international companies
Intermediate	<ul style="list-style-type: none"> • Patent Cooperation Treaty (PCT) or ‘international application’ • Provisional patent 	<ul style="list-style-type: none"> • Established a formal arrangement such as a consultancy or research contract and actively collaborating 	<ul style="list-style-type: none"> • Incorporated an entity and established a board • Has raised moderate (>\$1m) funding from commercial sources or government schemes that required industry co-participation (e.g. ARC Linkage, NHMRC Development Grant) 	<ul style="list-style-type: none"> • Generated regulatory standard data set • Successful regulatory submission to Therapeutic Goods Administration or European Conformity (CE) marking • Medical device: applications for pre-market approval 	<ul style="list-style-type: none"> • Phase I underway or completed • Protocol development • Patient recruitment 	<ul style="list-style-type: none"> • Advisory or consultancy role with a national company

Preliminary	<ul style="list-style-type: none"> • IP generated • Patent application lodged • Invention lodged with Disclosure/s with Technology Transfer/Commercialisation Office 	<ul style="list-style-type: none"> • Approached and in discussion with an industry partner under a non-disclosure agreement. No other formal contractual arrangements. 	<ul style="list-style-type: none"> • Negotiated licence to IP from the academic institution 	<ul style="list-style-type: none"> • Developed pre-good manufacturing practice (GMP) prototype and strong supporting data • Established quality systems 	<ul style="list-style-type: none"> • Drug candidate selected or Investigative New Drug application filed • Preclinical testing 	
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