



# Partnership Projects 2021 Peer Review Guidelines

---

<b>Opening date:</b>	13 January 2021
----------------------	-----------------

---

<b>Closing date and time:</b>	17.00 ACT local time on 01 December 2021
-------------------------------	--

---

<b>Commonwealth policy entity:</b>	National Health and Medical Research Council (NHMRC)
------------------------------------	--

---

<b>RGMS assistance and enquiries:</b>	<p>NHMRC Research Help Centre</p> <p>Phone: 1800 500 983 (+61 2 6217 9451 for international callers)</p> <p>Email: <a href="mailto:help@nhmrc.gov.au">help@nhmrc.gov.au</a></p> <p>Note: NHMRC's Research Help Centre aims to provide a reply to all requests for general assistance within two working days. This timeframe may be delayed during peak periods or for more detailed requests for assistance.</p>
---------------------------------------	---

---

<b>Partnership Project enquiries:</b>	Email: <a href="mailto:partnership.projects@nhmrc.gov.au">partnership.projects@nhmrc.gov.au</a>
---------------------------------------	---

---

## Contents

<b>Partnership Projects 2021 Peer Review Guidelines</b> .....	<b>1</b>
<b>1 INTRODUCTION</b> .....	<b>4</b>
<b>2 KEY CHANGES</b> .....	<b>4</b>
<b>3 PRINCIPLES, CONDUCT AND OBLIGATIONS DURING PEER REVIEW</b> .....	<b>5</b>
<b>3.1 NHMRC’s Principles of Peer Review</b> .....	<b>5</b>
<b>3.2 The Australian Code for the Responsible Conduct of Research</b> .....	<b>5</b>
<b>3.3 Disclosures of Interest</b> .....	<b>5</b>
<b>3.3.1 What is an interest?</b> .....	<b>5</b>
<b>3.3.2 What is a Conflict of Interest (CoI)?</b> .....	<b>6</b>
<b>3.3.3 Disclosure of Interests in the Peer Review Process</b> .....	<b>6</b>
<b>3.3.4 Failure to disclose an interest</b> .....	<b>6</b>
<b>3.4 Freedom of Information (FoI)</b> .....	<b>6</b>
<b>3.5 Complaints</b> .....	<b>6</b>
<b>4 PARTNERSHIP PROJECTS 2021 PEER REVIEW PROCESS</b> .....	<b>7</b>
<b>4.1 Overview of the Partnership Projects 2021 peer review process</b> .....	<b>7</b>
<b>4.2 Roles and responsibilities</b> .....	<b>8</b>
<b>4.3 Reviewing Partnership Projects 2021 applications</b> .....	<b>13</b>
<b>4.3.1 Identification of applications with an Aboriginal and Torres Strait Islander health focus</b> .....	<b>13</b>
<b>4.3.2 Receipt and initial processing of applications</b> .....	<b>13</b>
<b>4.3.3 Disclosure of interests and peer reviewer suitability</b> .....	<b>13</b>
<b>4.3.4 Establishment of panels and assignment of applications to peer reviewers</b> .....	<b>13</b>
<b>4.3.5 Briefing</b> .....	<b>13</b>
<b>4.3.6 Assessment of applications</b> .....	<b>14</b>
<b>4.3.6.1 Relative to opportunity and career disruption</b> .....	<b>14</b>
<b>4.3.6.2 Mitigating unconscious gender bias in peer review</b> .....	<b>14</b>
<b>4.3.6.3 Industry-relevant experience</b> .....	<b>15</b>
<b>4.3.6.4 Use of Impact Factors and other metrics</b> .....	<b>15</b>
<b>4.3.6.5 Enhancing reproducibility and applicability of research outcomes</b> .....	<b>15</b>
<b>4.3.6.6 Research Integrity Issues</b> .....	<b>16</b>
<b>4.3.6.7 Contact between peer reviewers and applicants</b> .....	<b>16</b>
<b>4.3.7 Initial assessments</b> .....	<b>16</b>
<b>4.3.8 Applications requiring further discussion identified</b> .....	<b>16</b>
<b>4.3.9 Panel meetings</b> .....	<b>17</b>
<b>4.3.9.1 Panel meeting process</b> .....	<b>17</b>
<b>4.3.10 Reconciliation</b> .....	<b>20</b>

4.3.11	Finalise feedback to applicants.....	20
4.3.12	Quorum.....	20
4.3.13	Principles for setting conditions of funding for NHMRC grants .....	20
4.3.14	Documentation .....	20
4.3.15	Funding Recommendation .....	21
4.3.16	Notification of Outcomes.....	21
<b>Appendix A – Understanding the Principles of Peer Review .....</b>		<b>22</b>
<b>Appendix B – Guidance for Declaring and Assessing Disclosures of Interest .....</b>		<b>24</b>
<b>Appendix C – Partnership Project Assessment Criteria.....</b>		<b>28</b>
<b>Appendix D – Partnership Projects 2021 Category Descriptors.....</b>		<b>31</b>
<b>Appendix E – Indigenous Research Excellence Criteria.....</b>		<b>38</b>
<b>Appendix F – Guidance for assessing applications against the Indigenous Research Excellence Criteria.....</b>		<b>39</b>
<b>Appendix G – Assessment Dos and Don’ts.....</b>		<b>40</b>
<b>Appendix H – NHMRC Relative to Opportunity and Career Disruption Policy.....</b>		<b>41</b>
<b>Appendix I – Guide to Evaluating Industry-Relevant Experience .....</b>		<b>43</b>

# 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 Partnership Project peer review process operates, including:

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

NHMRC will publicly notify the sector of any change in peer review process via its communications, such as through NHMRC's website and newsletters.

This guide should be read in conjunction with the:

- *Partnership Projects 2021 Guidelines*, available on [GrantConnect](#), 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 KEY CHANGES

NHMRC recognises the potential impacts of the COVID-19 pandemic on Australia's health and medical research community and has updated assessment processes to reflect these impacts.

Peer reviewers must follow these updated processes:

- In track record assessment, peer reviewers must consider COVID-19 related circumstances, as outlined by applicants, as part of career disruptions or other relative to opportunity considerations under the provisions of NHMRC's Relative to Opportunity Policy.
- Peer reviewers should note that applicants have been advised that they may include information on any potential significant and long term impacts of the COVID-19 pandemic on their proposed research, and proposals for managing such risks, as part of their research risk management plan within the grant proposal.
- Peer reviewers are not to let the potential impacts of the COVID-19 pandemic on the proposed research affect the assessment of the research proposal of an application (e.g. the feasibility of accessing certain patient or population groups with social distancing restrictions in place).
- Peer reviewers must note that changes to the research proposal of a funded application, necessitated by the impacts of the COVID-19 pandemic (e.g. the commencement of a project needs to be delayed by six months until COVID-19 restrictions are eased) will be considered through NHMRC's Postaward management and grant variations processes. Such considerations do not form part of the peer review assessment of the proposal, particularly given that the long term impacts of the pandemic are still unknown.

Peer reviewers should note the following significant changes for the Partnership Projects 2021 grant opportunity:

- NHMRC Relative to Opportunity policy ([Appendix H](#)) – Guidance on the typical circumstances considered under Relative to Opportunity has been clarified.
- The Partnership Projects 2021 grant opportunity will have three Peer Review Cycles.

## 3 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).

### 3.1 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](#).

### 3.2 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](#).

### 3.3 Disclosures of Interest

#### 3.3.1 What is an interest?

NHMRC is committed to ensuring that interests of any kind are dealt with consistently, transparently and with rigour, in accordance with sections 16A and 16B of the *Public Governance, Performance and Accountability Rule 2014* (made under the subsection 29(2) of the *Public Governance, Performance and Accountability Rule 2013* (PGPA Act)).

In particular, under section 29 of the PGPA Act, "an official of a Commonwealth entity who has a material personal interest that relates to the affairs of the entity must disclose details of the interest". This obligation 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.

### 3.3.2 What is a Conflict of Interest (Col)?

A Col 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 of 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 Col 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 Col situations and guidance is provided for peer reviewers at [Appendix B](#).

### 3.3.3 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 interests must be disclosed at the beginning of the peer review process, new or previously unrecognised interests must be disclosed 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 be a 'high' Col will not be able to participate in the review of that application. However, they can provide scientific advice at the request of the Chair or NHMRC.

### 3.3.4 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.

## 3.4 Freedom of Information (Fol)

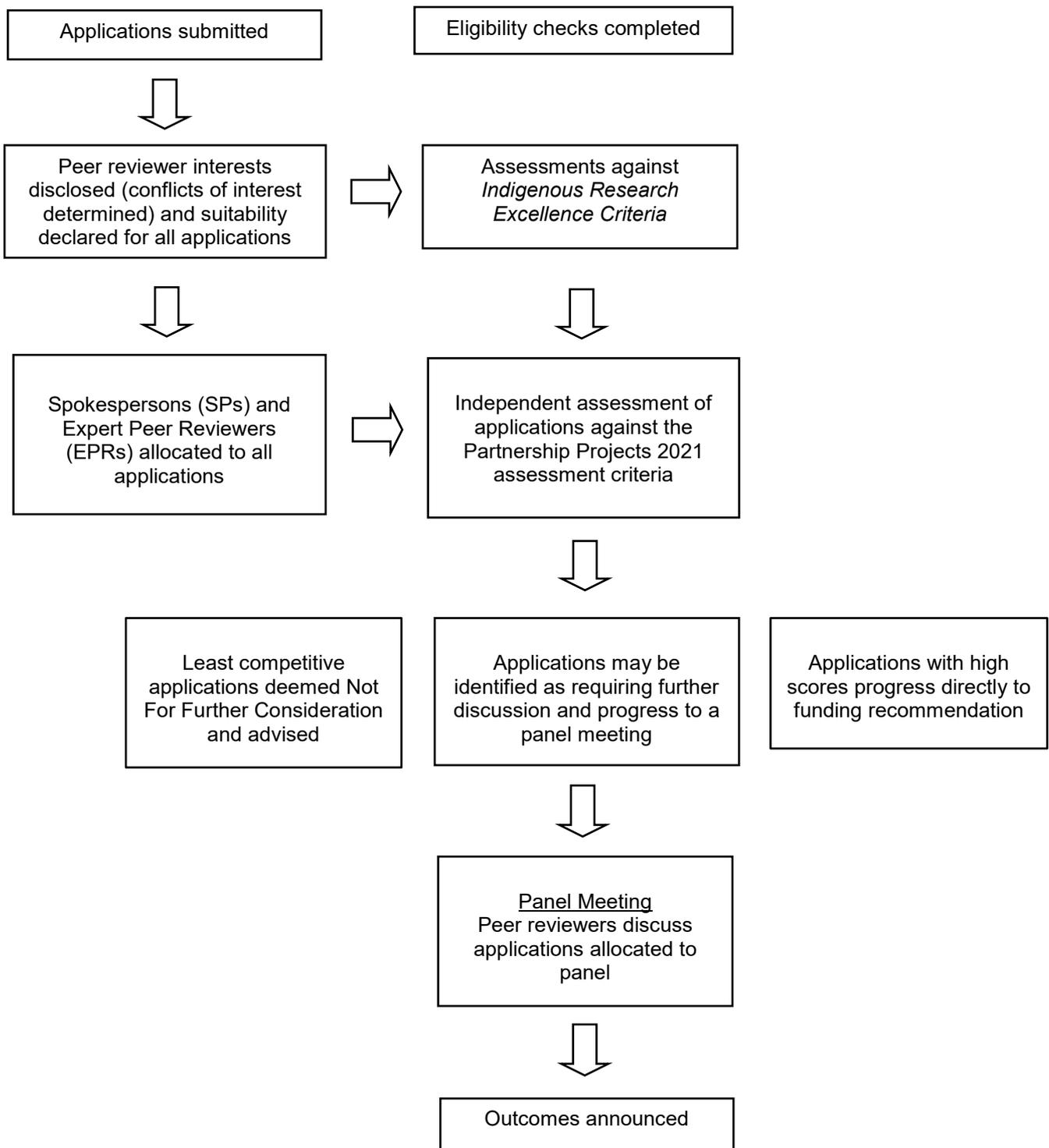
NHMRC is subject to the *Freedom of Information Act 1982* which provides a statutory right for an individual to seek access to documents. If documents that deal with peer review fall within the scope of a request, the Fol process includes consultation and exemptions. NHMRC endeavours to protect the identity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

## 3.5 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](#).

## 4 PARTNERSHIP PROJECTS 2021 PEER REVIEW PROCESS

### 4.1 Overview of the Partnership Projects 2021 peer review process



PRC 1	PRC 2	PRC 3	Activity
7 April 2021	12 August 2021	1 December 2021	Deadline for Partnership Projects 2021 application submission (5:00pm ACT local time)
April 2021	August 2021	December 2021	Application eligibility review and confirmation
April 2021	August 2021	December 2021	Peer reviewers disclose interests and suitability against applications
April/May 2021	Aug/Sept 2021	January 2022	Allocation of applications to peer reviewers
May 2021	September 2021	Jan/Feb 2022	Assessments against the <i>Indigenous Research Excellence Criteria</i> obtained
May 2021	September 2021	January 2022	Initial panel briefing
June 2021	October 2021	February 2022	Peer reviewers review applications and submit scores against Partnership Project 2021 assessment criteria for each allocated application
20-21 July 2021	16-17 November 2021	22-23 March 2022	Panel meeting
September 2021	January 2022	July 2022	Notification of outcomes*

\*Dates are indicative and subject to change.

Further information on the steps outlined in this process is provided in section 4.3 *Reviewing Partnership Projects 2021 applications*.

## 4.2 Roles and responsibilities

The roles and responsibilities of those participating in the Partnership Projects 2021 peer review process are identified in the table below.

### Partnership Projects 2021 Peer Review Participants Table

Roles	Responsibilities
<b>Chair</b>	<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 but manage the process of peer review in accordance with this Guide.</p> <p>Prior to the panel meeting Chairs need to:</p> <ul style="list-style-type: none"> <li>• familiarise themselves with this document and other material as identified by NHMRC staff</li> <li>• identify and advise NHMRC of all interests they have with applications assigned to their panel</li> <li>• familiarise themselves with ALL the applications assigned to their panel, excluding those for which they have been determined to have a high Col, and</li> <li>• assist peer reviewers with their duties and in understanding what is expected of them.</li> </ul> <p>During the panel meeting Chairs will:</p> <ul style="list-style-type: none"> <li>• take appropriate action for each Col</li> </ul>

	<ul style="list-style-type: none"> <li>• keep discussions on time and focused</li> <li>• ensure NHMRC procedures are followed</li> <li>• promote good engagement by peer reviewers in all discussions</li> <li>• ensure that all peer reviewers consider 'relative to opportunity', including career disruptions, when discussing applications</li> <li>• ensure that any discussion and assessment is based on the Partnership Projects 2021 assessment criteria and associated category descriptors (<a href="#">Appendices C and D</a>)</li> <li>• ensure the panel consistently considers the assessment against the <i>Indigenous Research Excellence Criteria</i> for applications with an Aboriginal and Torres Strait Islander health focus</li> <li>• ensure peer reviewers are satisfied with the consistency and appropriateness of discussions for each application</li> <li>• record and notify NHMRC of any requests for clarification or advice, and</li> <li>• approve Meeting Attendance Record sheets</li> <li>• prepare a report on the effectiveness with which the panel performed its duties in consultation with the Assistant Chair.</li> </ul> <p>Chairs may need to:</p> <ul style="list-style-type: none"> <li>• fulfil the duties and responsibilities of a peer reviewer where required (e.g. to meet quorum requirements of the panel when assessing particular applications) – in such an instance a substitute Chair will be identified for relevant applications.</li> </ul>
<p><b>Assistant Chair</b></p>	<p>Prior to the panel meeting Assistant Chairs need to :</p> <ul style="list-style-type: none"> <li>• familiarise themselves with this document and other material as identified by NHMRC staff</li> <li>• identify and advise NHMRC of all interests they may have with applications to be reviewed by the panel</li> <li>• familiarise themselves with all applications being considered by the panel</li> <li>• rigorously assess the proposed budgets for high scoring applications identified in the initial assessments that do not require discussion at the panel meeting</li> <li>• consider comments and advice from Spokespersons and Expert Peer Reviewers and the Direct Research Costs Guidelines on the NHMRC website when assessing budget requests</li> <li>• liaise with the relevant Spokesperson and recommend appropriate reductions where the proposed budget is in excess of that required to accomplish the research objectives</li> <li>• consider the relevance and justification for the in-kind support and the Partner Contribution Guidelines at <a href="#">Appendix E</a> of the Partnership Projects 2021 Guidelines when assessing budgets.</li> </ul> <p>During the panel meeting Assistant Chairs will:</p> <ul style="list-style-type: none"> <li>• note the strengths and weaknesses of the application while discussion by the panel is underway</li> <li>• facilitate the panel discussions of application budgets and record a comprehensive rationale for proposed budget review (if relevant)</li> <li>• record budget changes and panel justification for adjusting the proposed budgets</li> </ul>

	<ul style="list-style-type: none"> <li>ensure that budget discussions are consistent for all applications and inform the Chair if inconsistencies arise</li> <li>liaise with the Chair in preparing a report on the effectiveness with which the panel performed its duties.</li> </ul>
<b>Peer reviewers</b>	<p>Prior to the panel meeting, peer reviewers need to:</p> <ul style="list-style-type: none"> <li>familiarise themselves with this Guide and other material as identified by NHMRC staff</li> <li>identify and advise NHMRC of all interests they have with applications assigned to their panel</li> <li>provide a fair and impartial assessment against the Partnership Project assessment criteria and associated category descriptors (<u>Appendices C and D</u>) for each non-conflicted application assigned, in a timely manner</li> <li>assess track record by taking into consideration research achievements 'relative to opportunity', including any career disruptions, where applicable</li> <li>consider the assessment against the Indigenous Research Excellence Criteria (<u>Appendix E</u>) provided for applications with an Aboriginal and Torres Strait Islander health focus</li> </ul> <p>During the panel meeting, peer reviewers will:</p> <ul style="list-style-type: none"> <li>disclose interests they have with other peer reviewers</li> <li>prepare for and participate in the discussion for each application where they do not have a high CoI</li> <li>provide a score for each assessment criterion against the Category Descriptors for each application</li> <li>review discussions of applications to ensure equity between applications.</li> </ul>
<b>Primary Spokesperson (1SP)</b>	<p>Peer Reviewers may be appointed as Primary Spokesperson for applications allocated to the panel.</p> <p>Prior to the panel meeting the 1SP will:</p> <ul style="list-style-type: none"> <li>assess the allocated applications against the Partnership Project 2021 assessment criteria and associated category descriptors (<u>Appendices C and D</u>).</li> <li>assess track record by taking into consideration research achievements 'relative to opportunity', including any career disruptions, where applicable</li> <li>provide initial scores of the allocated application/s using the Category Descriptors as a guide</li> <li>provide initial comments which may be provided to the applicant as feedback</li> <li>prepare speaking notes to present the application at the panel meeting.</li> </ul> <p>At the panel meeting the 1SP will:</p> <ul style="list-style-type: none"> <li>lead the panel discussion on the competitiveness of the application and the significance and merit of the proposed research against the aims, objectives and assessment criteria</li> <li>provide detailed advice to the panel of career disruptions claimed</li> <li>ensure any productivity relative to opportunity considerations highlighted in the application are considered</li> <li>scrutinise the proposed budget to ensure that all requests are appropriate and fully justified</li> </ul>

	<ul style="list-style-type: none"> <li>• provide final scores against each assessment criterion based on panel discussions</li> <li>• if required assist the Secondary Spokesperson in discussion on the appropriateness, or otherwise, of the requested budget</li> <li>• provide detailed feedback reflecting panel discussions which will be provided to the applicant.</li> </ul>
<b>Secondary Spokesperson (2SP)</b>	<p>Peer reviewers may be appointed as Secondary Spokesperson for applications allocated to the panel.</p> <p>Prior to the panel meeting the 2SP will:</p> <ul style="list-style-type: none"> <li>• assess the allocated applications against the Partnership Project 2021 assessment criteria and associated category descriptors (<u>Appendices C and D</u>).</li> <li>• assess track record by taking into consideration research achievements ‘relative to opportunity’, including any career disruptions, where applicable</li> <li>• provide initial scores, comments and budget recommendations of the allocated applications using the category descriptors as a guide</li> <li>• rigorously assess the proposed budget to ensure that the budget requests are appropriate for the project and fully justified</li> <li>• prepare a recommendation for the panel to either: leave the requested budget intact, propose modifying the budget, or seek advice from the panel regarding specific budget requests.</li> </ul> <p>At the panel meeting the 2SP will:</p> <ul style="list-style-type: none"> <li>• support the application discussion on the competitiveness of the application and the significance and merit of the proposed research against the aims, objectives and assessment criteria</li> <li>• provide final scores against each assessment criterion based on panel discussions</li> <li>• if required, present an evaluation and lead the discussion of the appropriateness of the proposed budget</li> <li>• present a recommendation for the panel to either: leave the requested budget intact, propose modifying the budget, or seek advice from the panel regarding specific budget requests</li> <li>• prepare speaking notes to present the application at the panel meeting.</li> </ul>
<b>Expert Peer Reviewer (EPR)</b>	<p>Peer reviewers may be appointed as Expert Peer Reviewers for applications allocated to the panel. This role is only required as part of the initial assessment. EPRs will take on the same role as peer reviewers during the panel meeting.</p> <p>Prior to the panel meeting EPRs will:</p> <ul style="list-style-type: none"> <li>• assess the allocated applications against the Partnership Projects 2021 assessment criteria and associated category descriptors (<u>Appendices C and D</u>)</li> <li>• provide initial scores and comments on the allocated application using the category descriptors as a guide.</li> </ul> <p>At the panel meeting EPRs will:</p> <ul style="list-style-type: none"> <li>• support the 1SP and 2SP in discussion with reference to prepared notes.</li> </ul>
<b>NHMRC Staff</b>	<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 panel meeting, NHMRC staff will:</p>

	<ul style="list-style-type: none"> <li>• invite individuals to participate in the Partnership Project scheme peer review process as required</li> <li>• determine whether disclosed interests pose a conflict and the level of that conflict</li> <li>• act as the first point of contact for peer reviewers</li> <li>• provide briefings to peer reviewers</li> <li>• determine eligibility of applications</li> <li>• assign applications to appropriate peer reviewers, and</li> <li>• prepare provisional ranked lists for peer reviewers' consideration.</li> <li>• review peer reviewer written summaries for inappropriate comments.</li> </ul> <p>At the panel meeting NHMRC staff will:</p> <ul style="list-style-type: none"> <li>• support the operation of NHMRC's grant management system</li> <li>• assist the Chair in running the discussions</li> <li>• fulfil the role of Chair/Assistant Chair where required (e.g. where the Chair/Assistant Chair is deemed to have a high conflict of interest with an application)</li> <li>• 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</li> <li>• ensure that all peer reviewers are provided with the necessary information to review each application, and assisting and advising on the peer review process as required</li> <li>• maintain scoring records for each application</li> <li>• act as the first point of contact for peer reviewers and community observers, and</li> <li>• seek feedback from participants in the peer review process on improvements for future processes.</li> </ul>
<p><b>Indigenous health research peer reviewers</b></p>	<p>Indigenous health research peer reviewers will review how well each application addresses NHMRC's <i>Indigenous Research Excellence Criteria</i> (<a href="#">Appendix E</a>).</p> <p>Indigenous health research external peer reviewers will not participate in scoring. They will act as external experts and provide guiding comments to the peer reviewers relating to the <i>Indigenous Research Excellence Criteria</i>.</p>
<p><b>Community Observers</b></p>	<p>At the panel meeting, observers will:</p> <ul style="list-style-type: none"> <li>• identify and advise the Chair of all interests they have with applications to be discussed</li> <li>• monitor the procedural aspects of the meeting, and</li> <li>• provide feedback to NHMRC on the consistency of procedures across meetings.</li> </ul> <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 Col exists, the observer will not observe discussions of the respective application(s).</p>

## 4.3 Reviewing Partnership Projects 2021 applications

All Partnership Project applications are assessed against the Partnership Projects 2021 *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 4.3.1) are also assessed against the *Indigenous Research Excellence Criteria* as set out at [Appendix E](#).

### 4.3.1 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](#).

Applications for the Aboriginal and Torres Strait Islander Fetal Alcohol Spectrum Disorder (FASD) and Obesity Prevention Research Special Initiative (see section 2.3 of the *Partnership Projects 2021 Guidelines*) will be assessed by the panel using the same peer review process as all other Partnership Project applications.

### 4.3.2 Receipt and initial processing of applications

NHMRC staff will verify that Partnership Project 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.

### 4.3.3 Disclosure of interests and peer reviewer suitability

Peer reviewers will be provided with a summary of each application and disclose their interests within NHMRC's grant management system, in accordance with the guidelines provided at Section 3.3 and [Appendix B](#).

Some peer reviewers may have a disclosure of interest for which they require a decision. In this case, NHMRC will assess the information provided by the peer reviewer and provide a ruling on the level of Col.

Peer reviewers are also required to select their level of suitability for applications, based on the information available to them in the application summary.

### 4.3.4 Establishment of panels and assignment of applications to peer reviewers

Taking into account Cols and peer reviewer suitability, NHMRC staff will assign applications and peer reviewers to panels. The number of panels formed will depend on the total number and type of applications received.

### 4.3.5 Briefing

NHMRC will provide peer reviewers briefing material with further details on their duties and responsibilities in the Partnership Projects 2021 peer review process. This will be made available to peer reviewers prior to assessing applications. A briefing teleconference will also be held for panel members. Further information may be provided as necessary throughout the peer review process.

### 4.3.6 Assessment of applications

Applicants named as a Chief Investigator are not able to participate in the peer review process and cannot be a member of the Peer Review Panel (Panel) for the Peer Review Cycle in which they are an applicant.

Peer reviewers will be given access to applications (where no high Col exists) and will be required to assess and enter their scores in NHMRC's grant management system. 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 H](#)), where applicable.

To ensure they provide independent scores, peer reviewers are not to discuss applications with other peer reviewers, except at the panel meeting.

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

Peer reviewers' scores will be used to create a provisional ranked list of applications to determine applications that will not proceed to panel review.

#### 4.3.6.1 Relative to opportunity and career disruption

Peer reviewers 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 H](#).

#### 4.3.6.2 Mitigating unconscious gender bias in peer review

NHMRC is committed to addressing gender equality to promote fairness, transparency, equality and diversity in health and medical research. Fostering gender equality in peer review is a strategic objective, underpinned by NHMRC's *Gender Equality Strategy 2018–2021*.

Consistent with international practice and to ensure that NHMRC grant applications continue to receive objective and impartial assessments, NHMRC is raising peer reviewers' awareness of unconscious bias in the assessment process.

This is also consistent with the NHMRC document [Peer Review: A guide supporting the Australian Code for the Responsible Conduct of Research](#), which states that peer reviewers should be aware of how their own biases (conscious or unconscious) could affect the peer review process, including in relation to gender, ethnicity, nationality, institutional employer and research discipline).

#### Peer reviewer participation in the online Harvard Implicit Association Test for gender and science

In support of the objective, NHMRC encourages peer reviewers to complete the online Harvard Implicit Association Test (IAT) for gender and science. The IAT for gender and science, used by several research funding agencies nationally and internationally, is designed to help participants identify any implicit associations they may have between gender and participation in a science career.

By completing the test, peer reviewers gain a better understanding and increased awareness of how unconscious attitudes may affect their decisions, which prepares them to carry out their duties to the high standards of fairness and rigour expected by NHMRC. Peer reviewers should continue to follow all peer review principles and processes outlined in these guidelines, ensuring that each application is accurately reviewed against the assessment criteria ([Appendix C](#)). NHMRC does not have access to, nor does it seek, peer reviewers' information and results for the IAT for gender and science in the peer review process.

Peer reviewers must also familiarise themselves with any additional materials provided by NHMRC about unconscious bias awareness and implicit associations for gender and science during the peer review process.

## Use of gender-neutral language

To reduce unconscious gender bias, NHMRC has strongly advised applicants to use gender-neutral language. This will limit the opportunity for unconscious gender bias to affect the assessment process.

NHMRC also encourages peer reviewers to use gender-neutral language in the assessment of applications. This means that during panel discussions or when preparing written material peer reviewers should:

- avoid the use of gendered pronouns such as he/she or her/his, and instead use gender-neutral alternatives such as CIA/CIB, CI last-name or plural pronouns (they/their) when referring to applicants.
- avoid the use of first names, and
- use gender-neutral nouns where appropriate e.g. parental leave rather than maternity/paternity leave.

The use of gender-neutral language in applications is encouraged, but does not form part of the assessment criteria and therefore should not influence your scoring of applications. Peer reviewers are required to consider the proposal on its merits, taking relative to opportunity considerations into account.

Where gender dimensions are important for the research being proposed, applicants have been advised they should be included in the application. Please refer to scheme-specific category descriptors for information on whether gender dimensions are to be considered as a part of assessment.

### 4.3.6.3 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 I](#).

### 4.3.6.4 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.

### 4.3.6.5 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.

#### **4.3.6.6 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 are 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](#).

#### **4.3.6.7 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.

#### **4.3.7 Initial assessments**

At the initial assessment stage each application is assigned to five peer reviewers, the Primary and Secondary Spokesperson and three Expert Peer Reviewers. Peer reviewers assigned as Spokespersons (SPs) and Expert Peer Reviewers (EPRs) for each application will consider the application in conjunction with any additional assessments e.g. the assessment against the *Indigenous Research Excellence Criteria*. They will be asked to assess the application against the assessment criteria and score it using the category descriptors. SPs and EPRs enter scores into NHMRC's granting system and comment on the requested budget. The 1SP is also required to provide comments in NHMRC's granting system against the assessment criteria to justify their evaluation.

The 1SP comments entered at this stage may be provided to an applicant. Peer reviewers must ensure their comments do not contain inappropriate or defamatory remarks. For further guidance on completing the assessment see [Appendix G](#).

#### **4.3.8 Applications requiring further discussion identified**

Following initial scoring of applications against the assessment criteria, the five initial scores will be used to calculate an initial rating. Applications that receive an overall score of 4.500 and below will be deemed least competitive and will not proceed to further peer review.

Applications that receive a minimum mean score of 5.000 in each criterion will be deemed high scoring applications and may exit the peer review process at this stage to be recommended for funding. If this occurs, budget comments from SPs and EPRs will be reviewed by the Assistant Chair. The Assistant Chair will consider elements of the budget, and the budget justification and provide advice on the appropriate final budget for the application. Where the SPs and EPRs deem the proposed budget is in excess of that required to accomplish the research objectives, appropriate reductions may be recommended. For further information refer to Direct Research Cost guidelines on the [NHMRC website](#).

The remaining applications will be considered for funding in overall score rank order and may be identified as requiring further discussion at a panel meeting. If no panel meeting is required, budgets will be considered as outlined above for high scoring applications and 1SP comments will be provided to the applicant as outlined at 4.3.7 above. Applications recommended for funding must achieve a minimum mean score of 4.000 in all four assessment criteria.

NHMRC may at its discretion identify applications for discussion at panel meetings.

When making budget recommendations, SPs and EPRs should consider whether the Partner Organisations that provide in-kind support have justified how the in-kind support is substantive, meaningful and relevant to the project. Partner Contribution Guidelines are available at [Appendix E](#) of the *Partnership Projects 2021 Guidelines*.

NHMRC will advise applicants if their application was found to be non-competitive and advise the panel which applications will be discussed at the panel meeting.

### **4.3.9 Panel meetings**

It is expected that Partnership Project panel meetings will occur via videoconference.

NHMRC staff will coordinate the timing of panel meetings.

#### **4.3.9.1 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 panel meeting is as follows:

##### **Declaration of inter-relationships**

Suggested time limit: 30 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.

For all applications proceeding to panel discussion the following will occur.

##### **Chair to announce the application**

Suggested time limit: 2 minutes

The Chair will announce the application to be discussed including the title, Administering Institution/s and the CIs.

The Chair will identify any panel members who have a previously identified Col with the application. Those members with a high Col will be asked to leave the room/temporarily blocked from the videoconference by the secretariat (the videoconference connection will remain active).

The Chair will invite panel members to disclose any late interests with the application. If a panel member discloses a new interest, or wishes to discuss any concerns related to an existing Col, the matter will be discussed with the panel. It is up to the remaining panel members to determine if the new interest constitutes a high Col and if the declaring panel member should leave the room/ be temporarily blocked from the videoconference by the secretariat. The details of the late interest will be recorded by NHMRC. As this decision making can take extra time, it is important that all interests are disclosed and decided upon well in advance of the meeting, where possible.

If an interest is disclosed at the panel meeting by a SP and it is determined to be a high Col, a new SP will be assigned to the application and the scores from the initial SP will be discarded. Discussion of the application will be moved to a later time where possible to give the new SP time to prepare.

Once highly conflicted members have been temporarily blocked from the videoconference by the secretariat, the

Chair will identify the 1SP and 2SP and announce the Spokesperson scores for each of the four assessment criteria.

### **1SP and 2SP to comment on the application**

Suggested time limit: 6 minutes (1SP) and 4 minutes (2SP)

The 1SP will:

- Provide a concise summary of the grant proposal and highlight its scientific strengths and weaknesses. The 1SP will assume that panel members are familiar with documentation relating to the application.
- Ensure that relevant considerations (e.g. Track Record Relative to Opportunity, Career Disruptions) are outlined in their discussion.
- Only make reference to the budget in relation to the feasibility of the research proposed under budget constraints.

The 2SP will:

- Briefly highlight their agreement/disagreement with the 1SP comments.
- Ensure that relevant considerations (e.g. Track Record Relative to Opportunity, Career Disruptions) are taken into account.
- Only make reference to the budget in relation to the feasibility of the research proposed under budget constraints.

### **Full panel discussion**

Suggested time limit: 8 minutes

The Chair will open discussion to the panel, including to the remaining Spokespersons (EPRs). Panel members have an opportunity to ask questions of Spokespersons and EPRs, 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, that all members have a fair opportunity to comment and that no member exerts undue influence over others.

### **Scoring by panel members**

Suggested time limit: 3 minutes

Following the panel's discussion, the Chair will ask the Primary and Secondary Spokespersons to confirm their four criterion scores noting that these may change as a result of the panel discussion.

The Chair will then ask if any member intends to score two or more away from the 1SP or 2SP criterion scores. If so, the panel member must declare this and provide a brief justification, which will be recorded by the secretariat.

All panel members in the room/videoconference, excluding the Chair and Assistant Chair, must independently score the application through e-scoring in NHMRC's grant management system. All scoring panel members will provide scores against the four assessment criteria using the seven-point scale outlined in the *Partnership Projects 2021 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 to three decimal places and will take account of the weighting of each criterion.
2. Category - this will be based on the calculated rating as follows:

Rating range	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

Applications recommended for funding must achieve minimum mean scores of 4.000 in all four assessment criteria.

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.

#### **Discussion of proposed budget**

Suggested time limit: 5 minutes

Applications that score Category 5 or above and that achieve minimum mean scores of 4.000 in all four assessment criteria will trigger a budget discussion. Exceptions include:

- Applications relating to Aboriginal and Torres Strait Islander health research which require a Category score of 4 or above. These applications must also achieve a minimum mean score of 4.000 in all four assessment criteria.
- Applications that address the Aboriginal and Torres Strait Islander FASD and Obesity Prevention Research Special Initiative which require a Category score of 4 or above.

Budget discussions should not commence until the NHMRC secretariat has announced the rating and category. Once the category has been announced, the secretariat will advise if the application may progress to budget discussion.

Budget discussions occur only where the 2SP has made a recommendation to discuss the budget. The Chair will facilitate the budget discussion to ensure applications are considered fairly and equitably. The 2SP will lead the budget discussion facilitated by the Assistant Chair, and comment on the appropriateness of the outlined costs and provide recommendations. The other SPs should be prepared to assist, if required. Other panel members may also provide relevant comments. Where the panel deems the proposed budget exceeds that required to accomplish the research objectives, appropriate reductions may be recommended and reasons recorded by the NHMRC secretariat. For further information refer to Direct Research Costs guidelines on the NHMRC website.

When making budget recommendations, panel members should consider whether the partners that provide in-kind support have justified how the in-kind support is substantive, meaningful and relevant to the project. Partner Contribution Guidelines are available at [Appendix E](#) of the *Partnership Projects 2021 Guidelines*.

NHMRC will record budget recommendations as agreed by the panel. NHMRC will check the budget recommendations to ensure the budgets have been recorded correctly and approved by the Chair.

NHMRC research staff may amend the budget recommended by the panel for any application, if necessary. NHMRC reserves the right to recommend funding levels which are less than those requested in the application and a duration of funding which differs from that requested.

### **4.3.10 Reconciliation**

At the end of the deliberations, a reconciliation of applications reviewed will take place. This process gives panel members a final opportunity to raise any concerns regarding applications that have been reviewed throughout the meeting.

Where a panel member believes an application may have been reviewed in an inconsistent manner, they should raise the matter with the panel Chair. NHMRC secretariat will ensure that members with high CoIs leave the meeting before any details of the application and the circumstances of concern are outlined to the panel. In the event that an application needs to be reassessed the application will be reopened for discussion and rescored by the panel at the next opportunity.

The Chair may also revisit budget discussions at the end of the meeting to ensure consistency was achieved.

### **4.3.11 Finalise feedback to applicants**

Panel members are requested to use this time to review initial comments made in relation to applications they have been assigned as 1SP. Where necessary, changes should be made to ensure the comments reflect the final scoring by the panel. Once finalised, these comments will be provided to applicants as feedback following outcome announcements. For further guidance on completing the assessment see [Appendix G](#).

### **4.3.12 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).

NHMRC will endeavour to identify, prior to panel meetings, those applications that do not have a scoring quorum and obtain a suitably qualified member i.e. the Chair, to participate in panel discussion and to score that application. In such an instance a substitute Chair will be identified for relevant applications.

However, in situations where a number of members have a high CoI with an application and a suitably qualified member(s) cannot be sourced, the scoring quorum cannot be less than one-third of the panel membership present at the meeting.

### **4.3.13 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 award 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.

### **4.3.14 Documentation**

Peer reviewers may be required to retain personal notes that they made during the peer review process for a certain period, and if so, these must be held securely and in accordance with reviewers' obligations of confidentiality. NHMRC will notify peer reviewers of any such requirements prior to the peer review process.

### **4.3.15 Funding Recommendation**

After the panel meeting/s, application scores 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.

### **4.3.16 Notification of Outcomes**

NHMRC will notify applicants and their Administering Institution's Research Administration Officer of grant application outcomes.

Feedback will be provided to all applicants in the form of an Application Assessment Summary including written feedback reflecting panel discussions. The Application Assessment Summary will contain numerical information on the competitiveness of the application that will be drawn from the scores given by peer reviewers.

## 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.<sup>1</sup>

### Independence

- The order of merit determined by peer reviewers is not altered by NHMRC. However, additional applications may be funded 'below the funding line' in priority or strategic areas.
- Chairs are independent and are not involved in the peer review of any application. 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 scheme's objectives and to ensure adequate expertise to assess the applications received.
- NHMRC endeavours to ensure that peer reviewers are selected with regard to 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.
- 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

---

<sup>1</sup> Such information will be in a form that prevents applicants determining which particular experts were involved in the review of their application.

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.
- Peer reviewers must disclose relationships with other members of the panel, and interests with applications being reviewed, 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 the assessment of 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-scheme 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 of interest 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 or relationship 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 peer review process 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 an interest they can provide an explanation of the interest in NHMRC's grant management system to enable a judgement of its significance. Wherever possible, peer reviewers are encouraged to provide sufficient detail in the explanation such as date (month and year) of collaborations. Disclosures of interest are to be documented for conflicts of interest with both CIs and AIs.

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

# HIGH Conflict of Interest

Situation		Example
<b>Associated with Application and/or Chief Investigator (CI)</b>	✓	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.
<b>Collaborations</b>	✓	Peer reviewer has collaborated, in a significant way, on publications within the last three calendar years (co-authorship), or on pending current-round applications, existing NHMRC grants or other grants.
	✓	There is an in/direct association/collaboration between the peer reviewer and a member of the CI team, such that the peer reviewer may have, or may be perceived to have, a vested interest in this research.
<b>Working relationships</b>	✓	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"> <li>in the same research field at an independent Medical Research Institute.</li> <li>in the same Department or School of a university.</li> <li>in the same Department of a hospital.</li> </ul>
	✓	Peer reviewer is in a position of influence within an organisation, or has a pecuniary interest, e.g. Dean of Faculty or School/Institute Directors.
	✓	Peer reviewer would benefit if the proposal was successful as an associate on 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.
<b>Professional relationships and interests</b>	✓	Peer reviewer's organisation is affiliated or associated with organisations that may have, or may be perceived to have, a vested interest in the research. for example, a pharmaceutical company, which has provided drugs for testing and therefore has a vested interest in the outcome.
<b>Social relationship and / or interests</b>	✓	The peer reviewer has a known personal/social/perceived relationship with a CI on the application.
<b>Teaching or supervisory relationship</b>	✓	Peer reviewer has taught or supervised the applicant for either undergraduate or postgraduate studies, or co-supervised a CI, within the last three years.
<b>Direct financial interest in the application</b>	✓	Peer reviewer has the potential for financial gain 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 that company.
<b>Other interests or situations</b>	✓	Peer reviewer has had an ongoing scientific disagreement and/or dispute with the applicant/s. This may still be ruled as a high CoI 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 Conflict of Interest

Situation		Example
<b>Collaborations</b>	✓	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 authors) where the peer reviewer did not interact or collaborate with the CI directly.
	✓	A co-worker is planning future collaborations with a CI.
	✓	Peer reviewer and a named AI on the application are actively collaborating 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 peer reviewer's colleague/research group and a CI, where the peer reviewer did not participate or have a perceived interest in the collaboration.
	✓	Peer reviewer is considering/planning/or has planned a future collaboration with a CI on the application but has no current collaborations or joint applications.
<b>Working relationships</b>	✓	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"> <li>at the same institution and do not know each other.</li> <li>in the same Faculty or College of a university but in different Schools or Departments and do not know each other.</li> <li>in the same organisation, but the peer reviewer or applicant holds an honorary appointment.</li> </ul>
	✓	Peer reviewer and a CI work for two organisations that are affiliated but there is 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.
<b>Professional relationships and interests</b>	✓	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.
<b>Social relationship and / or interests</b>	✓	Peer reviewer's partner or an immediate family member has 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.
<b>Teaching or supervisory relationship</b>	✓	Peer reviewer taught or supervised the applicant for either undergraduate or postgraduate studies, or co-supervised a CI, or the peer reviewer's research was supervised by a CI, more than three years ago.
<b>Financial interest in the application</b>	✓	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.
<b>Other interests or situations</b>	✓	Peer reviewer may be, or may be perceived to be biased in their review of the application. For example, peer reviewer is a lobbyist on an issue related to the application.

## Appendix C – Partnership Project Assessment Criteria

Applications for the Partnership Projects 2021 grant opportunity are assessed by peers against the assessment criteria listed below using the category descriptors at [Appendix D](#) as a guide.

- Track Records of the Chief Investigators, Partner Organisations and Partner Investigators, relative to opportunity (25%)
- Scientific Quality of the Proposal and Methodology (25%)
- Relevance and likelihood to influence health policy and practice (25%)
- Strength of Partnership (25%)

Applications are assessed relative to opportunity, taking into consideration any career disruptions, where applicable (see [Appendix H](#)).

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 will be considered when assessing research output and track record.

In addressing the assessment criteria, applicants should consider how the proposal addresses the associated points described below.

### Criterion One

#### **Track Records of the Chief Investigators, Partner Organisations and Partner Investigators, Relative to Opportunity (25%)**

##### **Chief Investigators**

It is expected that researchers named as Chief Investigators will have an excellent record of achievement and encompass a broad spectrum of achievements, including but not limited to:

- a record of having worked successfully with policy and/or practice organisations
- demonstrable effects of previous research on health care practices and policy
- other related service achievements (such as research development, health or clinical policy or practice and influential advice to health care authorities)
- books and other relevant forms such as government reports
- publications in peer-reviewed journals
- invitations to present work nationally or internationally.

A maximum of 10 Chief Investigators (CIA to CIJ) may be included in the application.

##### **Partner Organisations and Partner Investigators**

Partner Organisations and named Partner Investigators will be assessed by the PRP. Up to half of the criterion weighting will be determined by the experience and relevance of the Partner Organisation and Partner Investigators to the Research Proposal.

It is expected that Partner Organisations named on an application have:

- the capacity to use the findings to influence policy decision making and health system performance. This will be assessed by reference to, for example, the roles and/or areas of responsibility of the

organisation or the Partner Organisation's demonstrated record of achievement in effecting such changes

- experience and success in drafting health policy or delivering a health program or health service
- expectations that align with the goals of the Chief Investigator team.

The inclusion of at least one named Partner Investigator from each of the Partner Organisations is mandatory.

The assessment of these 'Partner Investigators' will be on the basis of:

- relevant experience and authority to support the partnership
- demonstrated evidence of leadership in the relevant field
- experience of translating research findings into policy and/or practice
- demonstrated evidence of successfully implementing change in a field relevant to the proposal.

Partner Investigators can also be included as Chief Investigators at the discretion of the CIA. In these situations, the individual will be assessed against both the Chief Investigator and Partner Investigator criteria.

## **Criterion Two**

### **Scientific Quality of the Proposal and Methodology (25%)**

Assessment of scientific quality will include the following considerations:

- the clarity of hypotheses and objectives
- strengths and weaknesses of the experimental design and/or the appropriateness and the robustness of the proposed methodology
- feasibility
- demonstrated commitment to service delivery
- must be research focused on translating evidence into policy and practice or evaluating current policy and practice or evaluating current policy and practice and identifying gaps in knowledge.

## **Criterion Three**

### **Relevance<sup>1</sup> and Likelihood to Influence Health and Research Policy and Practice (25%)**

Assessment will focus on the extent to which the findings from the research are likely to make a significant contribution to influencing health and wellbeing through changes in the delivery, organisation and funding of services that affect health. This will include consideration of factors such as the extent to which:

- the aims and concepts of the project are innovative
- the project is likely to yield new methods and techniques for addressing issues
- the project has the potential to contribute significantly to health policy and decision making
- the capacity of the Partner Organisation(s) to use the findings to influence policy decision making and health system performance. This will be assessed by reference to, for example, the roles and/or areas

---

<sup>1</sup> Relevance is the extent to which the application addresses the needs of the health care system or an affected population.

of responsibility of the organisation or the Partner Organisation's demonstrated record of achievement in effecting such changes

- the application addresses issues which are of national or regional significance in improving health or health care.

#### **Criterion Four**

##### **Strength of Partnership (25%)**

Assessment will focus on the extent to which the application demonstrates the capacity to develop and/or sustain a strong partnership. Factors such as the following will be considered:

- evidence of co-development of the proposal
- the cash and/or in-kind commitment of the partner(s)
- the roles of staff in the Partner Organisation(s) or agencies in the research process
- previous evidence of effective working relationships with Partner Organisations
- the proposed governance or partnership arrangements
- shared decision making / leadership.

Applications should show how the team will foster and maintain a collaborative approach between the researchers and decision makers, over the course of the initiative.

In evaluating the strength of the partnership, applications will be assessed on the extent to which the proposal is achievable through the provision of skills, linkages, infrastructure and milestones. NHMRC will also take into account value for money in terms of justification for equipment and facilities and other items of expenditure to sustain the partnership.

## Appendix D – Partnership Projects 2021 Category Descriptors

The following table displays the category descriptors used to score an application against each of the four Assessment Criteria. Note that all criteria are of equal weighting. Peer Review Panel members will provide a score (1-7, whole numbers only), for each of the four criteria listed below, for each grant application.

It is recognised that Aboriginal and/or 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 will be considered when assessing research output and track record.

<b>Category</b>	<b>Track records of the Chief Investigators, Partner Organisations and Partner Investigators, relative to opportunity (25%)</b>	<b>Scientific quality of the proposal and methodology (25%)</b>	<b>Relevance and likelihood to influence health policy and practice (25%)</b>	<b>Strength of the partnership (25%)</b>
<p><b>7</b> <b>Outstanding by International Standards</b></p>	<p>The CI team:</p> <ul style="list-style-type: none"> <li>• has a record of achievement that places them in the top 10% of peers/cohort</li> <li>• demonstrate extensive experience and success in collaborative research, evaluation and implementation of evidence into health policy, health practice and/or service delivery</li> <li>• demonstrate extensive experience working in partnership with health service providers or health policy agencies</li> <li>• have been stellar, in terms of publications, and other recognition</li> <li>• have strong national and international reputations</li> <li>• hold leadership positions in highly regarded scientific or professional societies</li> <li>• have track records that are highly relevant to the proposed research</li> </ul> <p>The Partner Organisation(s):</p> <ul style="list-style-type: none"> <li>• is highly relevant to the proposed research</li> <li>• demonstrates extensive experience and success in drafting health policy or delivering a health program or health service</li> <li>• has strong national and international</li> </ul>	<p>The Research proposal:</p> <ul style="list-style-type: none"> <li>• objectives are well-defined, highly coherent and strongly developed</li> <li>• builds on knowledge gained through previous research</li> <li>• is a near flawless design</li> <li>• is without question highly feasible</li> <li>• introduces major advances in concept of translational research</li> <li>• includes rigorous translational research design</li> <li>• uses best practice in implementation science methods including: the use of theoretical frameworks, justifiable, robust measures for monitoring and evaluation; best practice models for changing practice and behaviour modification; rigorous engagement plans and identified champions; policy change and influencing mechanisms; and long-term sustainability strategies.</li> </ul>	<p>The proposed outcomes:</p> <ul style="list-style-type: none"> <li>• address one (or more) health issue(s) of national or regional significance</li> <li>• translate demonstrated knowledge</li> <li>• will translate into fundamental outcomes in the knowledge-base, policy and/or practice of clinical medicine, public health or fundamental changes in health policy</li> <li>• will be the subject of invited plenary presentations at national meetings</li> <li>• will almost certainly result in highly influential publications</li> <li>• most likely become highly integrated into a health system or clinical practice, with minimal ongoing follow-up</li> <li>• have a high likelihood of becoming a highly effective, generalisable model that will prove to be beneficial to the health system</li> <li>• will receive high-profile coverage from media and the public in general</li> <li>• will generate new researcher capability, mentoring and career development.</li> </ul>	<p>The proposed partnership:</p> <ul style="list-style-type: none"> <li>• demonstrates that a strong relationship between the researchers and Partner Organisation(s) already exists or will be developed</li> <li>• demonstrates existing shared governance and decision making capability.</li> <li>• can be used as an exemplar for what successful partnerships could achieve in terms of creating leaders, leverage, networking and delivering policy and practice developments in health</li> <li>• contributes to a high degree of team integration and cohesiveness</li> <li>• shows high probability for excellent collaborative gains in terms of skills and benefits to health in localised areas, Australia and internationally</li> <li>• is clearly evident from the conceptual stages of the proposal to the final application, as the partners are highly integrated into the proposal.</li> <li>• would see the partners involved at all stages of development in the proposal</li> <li>• is shown by shared policy/practice</li> </ul>

	<p>reputations</p> <ul style="list-style-type: none"> <li>• has clear expectations that align with the goals of the CI team</li> <li>• is highly likely to integrate outcomes into a health system or clinical practice, with minimal ongoing follow-up.</li> <li>• is well placed to engage support from stakeholders including end-users and the wider community, and facilitate high uptake at all levels.</li> </ul> <p>PI(s):</p> <ul style="list-style-type: none"> <li>• demonstrates extensive experience and success in drafting health policy or delivering a health program or health service</li> <li>• Demonstrates previous strong successful relationships with researchers.</li> </ul>			<p>goals and significant cash and in-kind resource contributions</p> <ul style="list-style-type: none"> <li>• illustrates capacity building, networking and infrastructure building activities that will extend beyond the life of the project.</li> </ul>
<p><b>6</b> <b>Excellent</b></p>	<p>The CI team:</p> <ul style="list-style-type: none"> <li>• has a record of achievement that places them in the top 10-20% of peers/cohort</li> <li>• are recognised for their experiences and successes in collaborative projects focussed on the design, research, evaluation and implementation of evidence into health policy, health practice and/or service delivery</li> <li>• demonstrate experience working in partnership with health service providers or health policy agencies</li> <li>• have track records that are very relevant to the proposed research</li> <li>• are well recognized for their contribution to their field of research</li> <li>• have established national and growing international reputations</li> <li>• have established positions of leadership, or are emerging leaders in their field</li> <li>• hold leadership positions in well regarded</li> </ul>	<p>The Research proposal:</p> <ul style="list-style-type: none"> <li>• has objectives that have clear intent and logic</li> <li>• is appropriate for the experience level of the applicant and team</li> <li>• is excellent in design</li> <li>• is highly feasible</li> <li>• is innovative with respect to the question being addressed and the approach to it</li> <li>• includes most aspects of research translation that will assist the project. These aspects may include: research design using implementation science frameworks, measures, monitoring and evaluation; models of change practice and behaviour modification; engagement plans and champions; policy change and influence; and long-term sustainability strategies.</li> </ul>	<p>The proposed outcomes:</p> <ul style="list-style-type: none"> <li>• addresses a health issue of major importance of national or regional significance</li> <li>• is likely to be integrated into a health system or clinical practice, with some level of follow-up, and is integrated into current practice behaviours</li> <li>• will be the subject of invited plenary presentations at national meetings</li> <li>• likely to result in highly influential publications</li> <li>• have a likelihood of becoming a highly effective, generalisable model that will prove to be beneficial to the health system</li> <li>• have high levels of engagement and support from stakeholders</li> <li>• have uptake at all levels and receive high-profile coverage from media and the public in general</li> <li>• contribute to a high degree of</li> </ul>	<p>The proposed partnership:</p> <ul style="list-style-type: none"> <li>• demonstrates that a relationship between the researchers and Partner Organisation(s) already exists or will be developed</li> <li>• demonstrates shared governance and decision making capability</li> <li>• is evident from the conceptual stages of the proposal to the final application, as the involvement of the partners are mostly integrated into the proposal. This proposal is therefore co-developed</li> <li>• shows that the project plan was developed by a collaborative process between the researchers and their decision making partners</li> <li>• is reflected in the likelihood that the project will build capacity to do or use research within the partner or the target decision making organisations</li> <li>• is shown by shared policy/practice</li> </ul>

	<p>scientific or professional societies.</p> <p>The Partner Organisation(s):</p> <ul style="list-style-type: none"> <li>• is highly relevant to the proposed research</li> <li>• demonstrates experience and success in drafting health policy or delivering a health program or health service</li> <li>• has strong national reputations.</li> <li>• has clear expectations that align with the goals of the CI team</li> <li>• is highly likely to integrate outcomes into a health system or clinical practice</li> <li>• is well placed to engage support from stakeholders including end-users and the wider community, and facilitate high uptake.</li> </ul> <p>PI(s):</p> <ul style="list-style-type: none"> <li>• demonstrates experience and success in drafting health policy or delivering a health program or health service</li> <li>• Demonstrates previous successful relationships with researchers.</li> </ul>		<p>involvement of end-users and the wider community</p> <ul style="list-style-type: none"> <li>• generate new researcher capability, mentoring and career development</li> <li>• contribute to translating knowledge and research output into practice in at least one area of health</li> <li>• will receive some accolades and recognition.</li> </ul>	<p>goals and appropriate cash and/or in-kind resource contributions</p> <ul style="list-style-type: none"> <li>• clearly illustrates how the systems established will contribute to a high probability of being sustainable</li> <li>• shows high probability for excellent collaborative gains in terms of skills and benefits to health in localised areas and Australia.</li> </ul>
--	---	--	--	--

<p><b>5</b> <b>Very Good</b></p>	<p>The CI team:</p> <ul style="list-style-type: none"> <li>• shows a record of achievement that places them well above average of their peers/cohort</li> <li>• are populated with some expertise in research translation in policy/practice/implementation, health systems and service delivery</li> <li>• have track records that are relevant to the proposed research</li> <li>• are recognized for their contribution to their field of research</li> <li>• members have growing national reputations and their research appears frequently at national meetings.</li> </ul> <p>The Partner Organisation(s):</p> <ul style="list-style-type: none"> <li>• is relevant to the proposed research</li> <li>• demonstrates experience and success in drafting health policy or delivering a health program or health service</li> <li>• has national and regional reputations</li> <li>• has expectations that align with the goals of the CI team</li> <li>• is likely to integrate outcomes into a health system or clinical practice</li> <li>• will have capacity to engage support from stakeholders including end-users and the wider community, and facilitate uptake.</li> </ul> <p>PI(s):</p> <ul style="list-style-type: none"> <li>• demonstrates experience and some success in drafting health policy or delivering a health program or health service</li> <li>• Demonstrates previous relationships with researchers.</li> </ul>	<p>The Research proposal:</p> <ul style="list-style-type: none"> <li>• has clear objectives</li> <li>• raises only minor concerns regarding study design</li> <li>• will likely be successfully achieved</li> <li>• contains at least one innovative idea</li> <li>• includes several aspects of research translation that will assist the project. These aspects may range from: research design using implementation science frameworks, measures, monitoring and evaluation; models of change practice and behaviour modification; engagement plans and champions; policy change and influence; and long-term sustainability strategies.</li> </ul>	<p>The proposed outcomes:</p> <ul style="list-style-type: none"> <li>• addresses a health issue of considerable significance</li> <li>• will most likely be integrated into clinical practice, at least in localised areas</li> <li>• could be the subject of invited plenary presentations at national specialty meetings</li> <li>• may result in influential publications</li> <li>• may become a highly effective, generalisable model that will prove to be beneficial to the localised health arenas</li> <li>• will be feasible, although ongoing support from stakeholders will be required to ensure sustainability</li> <li>• will have support from some stakeholders</li> <li>• will require ongoing resourcing to ensure that the project is managed effectively</li> <li>• will contribute to translating knowledge and research output into practice in at least one area of health.</li> </ul>	<p>The proposed partnership:</p> <ul style="list-style-type: none"> <li>• demonstrates that some relationship between the researchers and Partner Organisation(s) exists or will be developed</li> <li>• demonstrates potential shared governance and decision making capability</li> <li>• is evident in the final application, as the partners are involved in some key areas of the proposal, showing some co-development</li> <li>• shows good team integration and cohesiveness in terms of skills and experiences</li> <li>• is reflected in the likelihood that the project will build skills and capacity within the partner or the target organisations</li> <li>• shows some elements of shared policy/practice goals and resource contributions with an appropriate cash and/or in-kind balance</li> <li>• will grow and become sustainable if further resource commitments are found to embed the outcomes of the research for the long term</li> <li>• has articulated measures for integrating new researchers into teams</li> <li>• shows high probability for good collaborative gains in terms of skills and benefits to health in localised areas and some major centres in Australia.</li> </ul>
--------------------------------------	--	--	--	---

<p><b>4</b> <b>Good</b></p>	<p>The CI team:</p> <ul style="list-style-type: none"> <li>do show some expertise in research translation in policy/practice/implementation, health systems and service delivery</li> <li>have a solid record of achievement</li> <li>have track records that are relevant to the proposed research</li> <li>have made contributions to the field of the proposal</li> <li>have emerging national reputation albeit in a niche area.</li> </ul> <p>The Partner Organisation(s):</p> <ul style="list-style-type: none"> <li>is somewhat relevant to the proposed research</li> <li>demonstrates some experience and success in drafting health policy or delivering a health program or health service</li> <li>has a regional reputation</li> <li>has some expectations that align with the goals of the CI team</li> <li>may integrate outcomes into a health system or clinical practice will have some capacity to engage support from stakeholders including end-users and the wider community, and potentially facilitate uptake.</li> </ul> <p>PI(s):</p> <ul style="list-style-type: none"> <li>demonstrates experience in drafting health policy or delivering a health program or health service</li> <li>Demonstrates previous relationships with researchers.</li> </ul>	<p>The Research proposal:</p> <ul style="list-style-type: none"> <li>is sound in terms of its objectives</li> <li>contains several areas of concern in the study design</li> <li>raises some concerns about successful completion/feasibility</li> <li>includes a brief mention of at least one aspect of research translation that will assist the project. These aspects may include: research design using implementation science frameworks, measures, monitoring and evaluation; models of change practice and behaviour modification; engagement plans and champions; policy change and influence; and long-term sustainability strategies.</li> </ul>	<p>The proposed outcomes:</p> <ul style="list-style-type: none"> <li>address a health issue of some importance</li> <li>may have some novel aspects while others underpin or extend existing knowledge</li> <li>may result in some strong publications</li> <li>will most likely form a pilot study for implementation in the future</li> <li>will require significant support for its implementation</li> <li>will need regular relationship management of the stakeholders to ensure that the momentum of the project is kept up</li> <li>will involve end-users and the wider community, although it may not be highly generalisable</li> <li>will contribute to the knowledge base of the topic area.</li> </ul>	<p>The proposed partnership:</p> <ul style="list-style-type: none"> <li>demonstrates the potential of a relationship between the researchers and Partner Organisation(s) will exist</li> <li>Demonstrates some shared governance and decision making capability</li> <li>shows some team integration and cohesiveness in terms of skills and experiences</li> <li>would be reasonably effective in promoting working collaborations and intellectual exchanges</li> <li>is reflected in the likelihood that the project will build skills and capacity within the partner or the target organisations</li> <li>shows limited contributions in terms of cash/in-kind support</li> <li>may become sustainable if further resource commitments are found to embed the outcomes of the research for the long term</li> <li>has articulated measures for integrating new researchers into teams</li> <li>shows probability for some collaborative gains in terms of skills and benefits to health in localised areas and some major centres in Australia.</li> </ul>
---------------------------------	---	--	--	---

<p><b>3</b> <b>Marginal</b></p>	<p>The CI team:</p> <ul style="list-style-type: none"> <li>members have published a number of works in a field relevant to this application in the last five years, but is less productive than might reasonably be expected</li> <li>show limited expertise in research translation in policy/practice/implementation, health systems and service delivery</li> <li>is deficient in some areas of expertise that will be required to successfully complete the proposed research</li> <li>members have limited track records in the field of the proposed research.</li> </ul>	<p>The Research proposal:</p> <ul style="list-style-type: none"> <li>is satisfactory in terms of its objectives but may not be successful with all of them</li> <li>contains several areas of significant concern in the study design</li> <li>raises several concerns about successful completion/feasibility</li> <li>is not particularly innovative or novel</li> <li>did not include any considerations into research translation strategies.</li> </ul>	<p>The proposed outcomes:</p> <ul style="list-style-type: none"> <li>addresses an issue of some importance to health</li> <li>may extend existing knowledge</li> <li>may result in some influential published research</li> <li>will most likely form a pilot study for implementation in the future</li> <li>will require significant work to engage stakeholders and ensure that the project is successful</li> <li>will require significant modifications to the framework to ensure that its aims are generalisable other areas of health</li> <li>has little involvement of end-users and the wider community.</li> </ul>	<p>The proposed partnership:</p> <ul style="list-style-type: none"> <li>shows minimal team integration and cohesiveness in terms of skills and experiences</li> <li>shows limited prospects for promoting working collaborations and intellectual exchanges</li> <li>will provide limited capacity building/career development opportunities</li> <li>shows limited contributions in terms of cash/in-kind support</li> <li>is most likely unsuitable to achieve the goals of this project</li> <li>shows minimal collaborative gains in terms of skills and benefits to health.</li> </ul>
<p><b>2</b> <b>Unsatisfactory</b></p>	<p>The CI team:</p> <ul style="list-style-type: none"> <li>have a weak record of achievement</li> <li>have not published more than a few works in relevant fields of research</li> <li>are heavily underpowered in terms of relevant expertise required to successfully complete the research program</li> <li>do not relate well to the proposed research.</li> </ul>	<p>The Research proposal:</p> <ul style="list-style-type: none"> <li>shows several unsatisfactory objectives and is likely to only achieve a few of the objectives</li> <li>contains many areas of significant concern in the study design</li> <li>contains a research plan which does not seem to be feasible in several areas</li> <li>only follows behind previously well documented and studied concepts or previously well used approaches</li> <li>does not include any considerations into research translation strategies.</li> </ul>	<p>The proposed outcomes:</p> <ul style="list-style-type: none"> <li>addresses an issue of only marginal concern to health</li> <li>provides a program of research which will at best, only incrementally advances current knowledge</li> <li>may result in published research that is unlikely to be influential</li> <li>may form a pilot study for a larger study in the future</li> <li>significant work will be required to engage stakeholders and to ensure that the project achieves some of its goals</li> <li>has virtually no involvement of end-users and the wider community.</li> </ul>	<p>The proposed partnership:</p> <ul style="list-style-type: none"> <li>is weak in terms of complementary of skills and experiences, and how it would contribute to the success of the project</li> <li>shows very limited prospects for promoting working collaborations and intellectual exchanges</li> <li>will provide virtually no capacity building/career development opportunities</li> <li>shows minimal contributions in terms of cash/in-kind support</li> <li>is most likely unsuitable to achieve the goals of this project</li> <li>shows minimal collaborative gains in terms of skills and benefits to health.</li> </ul>

<b>1</b> <b>Poor</b>	<p>The CI team:</p> <ul style="list-style-type: none"> <li>• is not productive to any significant extent in relevant fields</li> <li>• does not have the expertise or capacity to successfully complete more than a small fraction of the program of research</li> <li>• members do not have relevant track records in the field of the proposed research.</li> </ul>	<p>The Research proposal:</p> <ul style="list-style-type: none"> <li>• shows weak objectives and the methodology is unlikely to achieve them</li> <li>• contains a study design which is inadequate in a number of areas</li> <li>• raises major concerns about the feasibility of the research plan</li> <li>• is not innovative or significant</li> <li>• did not include any considerations into research translation strategies.</li> </ul>	<p>The proposed outcomes:</p> <ul style="list-style-type: none"> <li>• does not address an issue of concern to health</li> <li>• will not advance current knowledge in the field</li> <li>• is unlikely to result in any publications</li> <li>• has no involvement of end-users and the wider community.</li> </ul>	<p>The proposed partnership:</p> <ul style="list-style-type: none"> <li>• does not show complementarity of skills and experiences, and how it would contribute to the success of the project</li> <li>• does not show prospects for promoting working collaborations and intellectual exchanges</li> <li>• will not provide capacity building/career development opportunities</li> <li>• shows limited contributions in terms of cash/in-kind support</li> <li>• will not achieve the goals of this project</li> <li>• shows no collaborative gains in terms of skills and benefits to health.</li> </ul>
-------------------------	---	---	--	--

**Rating** - The final rating will be determined by calculating the average of each voting member's score for each of the four equally weighted assessment criteria. The final rating, as calculated to three decimal places, will then be used to determine the category.

**Category** - this will be determined based on the calculated rating, as follows:

Rating Range	Category
6.501 – 7.000	Category 7
5.501 – 6.500	Category 6
4.501 – 5.500	Category 5
3.501 – 4.500	Category 4
2.501 – 3.500	Category 3
1.501 – 2.500	Category 2
1.001 – 1.500	Category 1

## 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 [Appendix 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 – Assessment Dos and Don'ts

The table below provides further guidance to assist with preparing your assessment.

Do's	Don'ts
<b>General</b>	
<ul style="list-style-type: none"> <li>• Provide constructive feedback</li> <li>• Use the category descriptors associated with the assessment criteria and ensure they are addressed</li> <li>• Consider both the strengths and weaknesses for each Assessment Criterion</li> </ul> <p><i>Consider:</i></p> <ul style="list-style-type: none"> <li>• Any Career Disruptions in detail and understand the longer term impact these have on scientific output</li> <li>• Providing specific references if you think that the applicants have overlooked a relevant body of work</li> <li>• Whether the research team has the capability to deliver on the proposed research</li> <li>• The track record of all CIs, relative to opportunity (including career stage and/or career disruptions)</li> <li>• All aspects of the team's output, including publications, translation of findings into policy or practice</li> <li>• Citations of publications</li> <li>• Evidence of co-development of the proposal</li> <li>• The cash and/or in-kind commitment of the partner(s)</li> <li>• The roles of staff in the partner agency or agencies in the research process</li> <li>• Previous evidence of effective working relationships with partner organisations and</li> <li>• The proposed governance or partnership arrangements.</li> <li>• Whether the salary requests, other research costs and equipment costs are necessary and fully justified.</li> </ul>	<ul style="list-style-type: none"> <li>• Provide 'nil' comments</li> <li>• Provide inappropriate comments such as:               <ul style="list-style-type: none"> <li>○ "like all researchers at University X, the Chief Investigator (X) has a poor track record....." [note: other researchers of the University are irrelevant to the application]</li> <li>○ "writing could be improved and thus less irritating for the reader"</li> <li>○ "The applicant/institution already receives too much funding"</li> </ul> </li> <li>• Provide broad statements which suggest that the application is worthy or not worthy of funding</li> <li>• Bring into question the integrity of the research or researchers – any concerns regarding potential research misconduct must be raised with NHMRC separately</li> <li>• Question the eligibility of the applicant(s) and/or application – this should be raised with NHMRC separately</li> <li>• Provide scores</li> <li>• Consider that a topic is ineligible simply because the bulk of the work is being conducted in a particular setting (e.g. overseas).</li> <li>• Assess the CIA's track record only</li> <li>• Consider only individual aspects of a team member's track record</li> <li>• Dismiss career disruptions</li> <li>• Use journal impact factors or person-centric citation metrics such as the H-index</li> <li>• Simply 'average' the track record scores of the team</li> <li>• Penalize teams in which junior members are being mentored to contribute to the research</li> </ul>

## Appendix H – 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:

- NHMRC 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 schemes consistent with their experience and career stage.
- **Career diversity:** Researchers with career paths that include time spent outside 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 include, but are not limited to:

- 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 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)
- calamities, such as pandemics, bushfires or cyclones.

## 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.<sup>1</sup>

NOTE: For the purposes of peer review, circumstances not meeting the requirements for consideration under career disruption, may be considered under relative to opportunity.

## 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.

---

<sup>1</sup> 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 I – 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
<b>Advanced</b>	<ul style="list-style-type: none"> <li>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</li> <li>National phase entry and prosecution or specified country application</li> </ul>	<ul style="list-style-type: none"> <li>Executed a licensing agreement with an established company</li> <li>Significant research contract with an industry partner</li> <li>Long term consultancy with an industry partner</li> </ul>	<ul style="list-style-type: none"> <li>Achieved successful exit (public market flotation, merger or acquisition)</li> <li>Raised significant (&gt;\$10m) funding from venture capital or other commercial sources (not grant funding bodies)</li> <li>Chief Scientific Officer, Executive or non-executive role on company boards</li> </ul>	<ul style="list-style-type: none"> <li>Produce sales</li> <li>Successful regulator submission to US Food and Drug Administration (FDA), European Medicines Agency, TGA etc.</li> <li>Medical device premarket submission e.g. FDA 510(k) approved</li> </ul>	<ul style="list-style-type: none"> <li>Phase II or Phase III underway or completed</li> </ul>	<ul style="list-style-type: none"> <li>Major advisory or consultancy roles with international companies</li> </ul>
<b>Intermediate</b>	<ul style="list-style-type: none"> <li>Patent Cooperation Treaty (PCT) or 'international application'</li> <li>Provisional patent</li> </ul>	<ul style="list-style-type: none"> <li>Established a formal arrangement such as a consultancy or research contract and actively collaborating</li> </ul>	<ul style="list-style-type: none"> <li>Incorporated an entity and established a board</li> <li>Has raised moderate (&gt;\$1m) funding from commercial sources or government schemes that required industry co-participation (e.g. ARC Linkage, NHMRC Development Grant)</li> </ul>	<ul style="list-style-type: none"> <li>Generated regulatory standard data set</li> <li>Successful regulatory submission to Therapeutic Goods Administration or European Conformity (CE) marking</li> <li>Medical device: applications for pre-market approval</li> </ul>	<ul style="list-style-type: none"> <li>Phase I underway or completed</li> <li>Protocol development</li> <li>Patient recruitment</li> </ul>	<ul style="list-style-type: none"> <li>Advisory or consultancy role with a national company</li> </ul>

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