INVESTIGATOR GRANTS

2019 PEER REVIEW GUIDELINES

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1 INTRODUCTION

The National Health and Medical Research Council (NHMRC) is responsible for managing the Australian Government’s investment in health and medical research in a manner consistent with Commonwealth legislation and guidelines. 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 Investigator Grants peer review process operates, including:

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

This guide should be read in conjunction with the:

- Investigator Grants 2019 Guidelines, which set out the rules, objectives and other considerations relevant to NHMRC funding.

2 PRINCIPLES, CONDUCT AND OBLIGATIONS DURING PEER REVIEW

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

2.1 NHMRC’s Principles of Peer Review

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

- **Fairness.** Peer review processes are fair and seen to be fair by all.
- **Transparency.** Applies to all stages of peer review.
- **Independence.** Peer reviewers provide independent advice. There is also independent oversight of peer review processes by independent Chairs and Observers.
- ** Appropriateness and balance.** There is appropriate experience, expertise and representation of peer reviewers assessing applications.
- **Research community participation.** Persons holding taxpayer-funded grants should willingly make themselves available to participate in peer review processes, whenever possible.
- **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 real and perceived CoI.
- **Quality and excellence.** NHMRC will continue to introduce evidence-based improvements into its processes to achieve the highest quality decision-making through peer review.
2.2 The Australian Code for the Responsible Conduct of Research

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


2.3 Disclosure of interests

NHMRC is committed to ensuring that interests\(^1\) of any kind are dealt with consistently, transparently and with rigour, in accordance with Part 5, section 42A of the National Health and Medical Research Council Act 1992 (NHMRC Act), sections 16A and 16B of the Public Governance, Performance and Accountability Rule 2014\(^2\) and the NHMRC’s Privacy Policy.

This is to ensure that where a material personal interest arises, the individual will not be in a position to influence, or perceive to influence, the proper performance of the participant’s responsibilities to NHMRC. The perception of an interest is as important as any actual interest.

2.3.1 What is a Conflict of Interest (CoI)?

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

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

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

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

\(^2\) Made under subsection 29(2) of the PGPA Act.
Researchers frequently have a CoI that cannot be avoided. Decision making processes in research often need expert advice, and the pool of experts in a field can be so small that all the experts have some link with the matter under consideration. An individual researcher should therefore expect to be conflicted from time to time, be ready to acknowledge the conflict and make disclosures as appropriate.

An outline of potential CoI situations is provided for peer reviewers at Attachment B.

### 2.3.2 Failure to declare an interest

The NHMRC Act requires interests to be identified and specifies the courses of action that apply when this requirement has not been met.

- Section 42A of the NHMRC Act requires members to disclose interests in matters being considered.
- Paragraph Section 44B(3)(b) requires the Minister or the CEO to terminate the appointment of a member for failing to comply, without reasonable excuse, with the disclosure of interest requirements outlined in the NHMRC Act.

It is important for participants to inform NHMRC of any circumstances which may constitute an interest, at any point during the peer review process.

### 2.4 Research integrity issues

The scrutiny of an application during peer review can sometimes identify possible research integrity issues (e.g. concerns about possible plagiarism, inconsistencies in the presentation of data, inaccuracies in the presentation of track record information). Where such concerns arise, peer reviewers should raise these issues separately from the peer review process. Advice about how to do this is provided at Attachment C. Peer reviewers should not discuss their concerns with other assessors, as this may affect the impartiality of the review.

Where a peer reviewer identifies possible issues about research integrity, these are managed by NHMRC through a separate process. 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 policy on misconduct related to NHMRC funding (the Misconduct Policy) available on the NHMRC website at: [https://nhmrc.gov.au/about-us/publications/nhmrc-policy-misconduct](https://nhmrc.gov.au/about-us/publications/nhmrc-policy-misconduct).

#### 2.4.1 Contact between peer reviewers and applicants

Reviewers directly engaged with the peer review of an application must not contact applicants about their application. Similarly, applicants are not allowed to make contact or attempt to influence anyone who is directly engaged with the peer review of their application. When a reviewer contacts an applicant, the consequences may be removal of the reviewer from the process, and potential exclusion from future NHMRC peer review. When an applicant contacts a reviewer, consequences could include exclusion of an application/s from consideration. In either case, contact between applicants and reviewers may raise concerns about research integrity and NHMRC may refer such concerns to the relevant Administering Institution.
2.5 Freedom of Information

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

2.6 Complaints

NHMRC deals with any complaints, objections and requests for clarification on the peer review process that may be received from applicants. As part of these dealings, 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 at: [https://nhmrc.gov.au/about-us/publications/nhmrc-complaints-policy](https://nhmrc.gov.au/about-us/publications/nhmrc-complaints-policy).

3 INVESTIGATOR GRANTS PEER REVIEW PROCESS

3.1 Overview of the Investigator Grants peer review process

- Applications submitted
- Eligibility checks completed
- CoIs and peer reviewer suitability declared for all applications
- Assessments against Indigenous Research Excellence criteria obtained
- Assessments completed
- Provisional ranked lists provided to panels
- Nomination of applications for discussion at Panel Assessment Confirmation meeting
- Panel Assessment Confirmation meeting held (if required)
- Outcomes announced
### Indicative Timeline

<table>
<thead>
<tr>
<th>Date</th>
<th>Activity</th>
</tr>
</thead>
<tbody>
<tr>
<td>6 February 2019</td>
<td>Deadline for Investigator Grant application submission</td>
</tr>
<tr>
<td>Mid-Late February 2019</td>
<td>Peer reviewers declare Conflicts of Interest (CoI) and suitability against applications</td>
</tr>
<tr>
<td>Late February – Mid March 2019</td>
<td>Assessments against Indigenous Research Excellence criteria obtained</td>
</tr>
<tr>
<td>Mid-March 2019</td>
<td>Allocation of applications and members to panels (of approx. 5 members and 30 applications)</td>
</tr>
<tr>
<td>Late March – Mid April 2019</td>
<td>Peer reviewers review applications and submit scores against Investigator Grant Assessment Criteria</td>
</tr>
<tr>
<td>Early May 2019</td>
<td>Provisional ranked lists distributed to panels</td>
</tr>
<tr>
<td>Mid-May 2019</td>
<td>Nomination of applications for discussion at Panel Assessment Confirmation meeting due</td>
</tr>
<tr>
<td>Late May – Early June 2019</td>
<td>Panel assessment confirmation meeting held (if required)</td>
</tr>
<tr>
<td>Late 2019</td>
<td>Notification of outcomes</td>
</tr>
</tbody>
</table>

### 3.2 Roles and responsibilities

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

#### Investigator Grants peer review participants table

<table>
<thead>
<tr>
<th>Roles</th>
<th>Responsibilities</th>
</tr>
</thead>
<tbody>
<tr>
<td>Panel Chair (Chair)</td>
<td>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.</td>
</tr>
<tr>
<td></td>
<td>Chairs are independent of the review of applications, and must manage the process of peer review in accordance with this Guide.</td>
</tr>
<tr>
<td></td>
<td>Prior to the Panel Assessment Confirmation meeting the Chair will:</td>
</tr>
<tr>
<td></td>
<td>• familiarise themselves with this document and other material as identified by NHMRC staff</td>
</tr>
<tr>
<td></td>
<td>• identify and advise NHMRC of all real or perceived CoIs they have with applications assigned to their panels</td>
</tr>
<tr>
<td></td>
<td>• familiarise themselves with ALL the applications to be considered by their panels, excluding those for which they have declared a high CoI.</td>
</tr>
<tr>
<td></td>
<td>During the Panel Assessment Confirmation meeting the Chair will:</td>
</tr>
<tr>
<td></td>
<td>• take appropriate action for each declared CoI</td>
</tr>
<tr>
<td></td>
<td>• keep discussions on time and focused</td>
</tr>
<tr>
<td></td>
<td>• ensure NHMRC procedures are followed</td>
</tr>
<tr>
<td></td>
<td>• assist peer reviewers with their duties and in understanding what is expected of them</td>
</tr>
<tr>
<td></td>
<td>• promote good engagement by peer reviewers in all discussions</td>
</tr>
<tr>
<td></td>
<td>• ensure that all peer reviewers consider ‘relative to opportunity’,</td>
</tr>
</tbody>
</table>
including career disruptions, when discussing applications

- ensure the discussion leads to an outcome where the applications are appropriately considered against the Investigator Grant Assessment Criteria (assessment criteria) using the Investigator Grant Category Descriptors (category descriptors)
- ensure the panel consistently considers the assessment against the Indigenous Research Excellence Criteria for applications with an Aboriginal and Torres Strait Islander health focus
- ensure peer reviewers are satisfied with the consistency and appropriateness of discussions for each application
- ensure peer reviewers are satisfied with the meeting’s deliberations
- record and notify NHMRC of any requests for clarification or advice
- approve the Meeting Attendance Record sheet.

### Peer Reviewers

Prior to the panel meeting peer reviewers will:

- familiarise themselves with this Guide and other material as identified by NHMRC staff
- identify and advise NHMRC of all real or perceived CoIs they have with applications assigned to their panel
- provide a fair and impartial assessment against the Investigator Grant assessment criteria for each application assigned to them where no high CoI exists, in a timely manner
- ensure their assessment of track record takes into consideration research achievements ‘relative to opportunity’, including any career disruptions, where applicable
- consider the assessment against the Indigenous Research Excellence Criteria provided for applications with an Aboriginal and Torres Strait Islander health focus
- review scores from panel members for all applications allocated to them
- nominate applications for discussion by exception at the Panel Assessment Confirmation meeting, where necessary.

During the Panel Assessment Confirmation meeting peer reviewers will:

- prepare for and participate in the discussion for each application nominated for discussion, where no high CoI exists.

### NHMRC Scientific Staff

NHMRC staff with doctoral degrees or extensive research experience may be involved in:

- reviewing allocation of applications and peer reviewers to panels
- assisting and advising on the peer review process.

### NHMRC Staff

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, including the following.

Prior to the Panel Assessment Confirmation meetings NHMRC staff will:

- approach potential peer reviewers and Chairs
- rule on level of declared CoIs
- act as the first point of contact for peer reviewers
- provide briefings to peer reviewers
- determine eligibility of applications
- assign applications and peer reviewers to the appropriate panel
- prepare provisional ranked lists for peer reviewer consideration.

At the Panel Assessment Confirmation meetings NHMRC staff will:
- support the operation of e-scoring in NHMRC’s Research Grants Management System (RGMS)
- assist the Chair in running the discussions
- manage the Col process, including maintaining accurate records, ensuring all participants (including community observers) are aware of all declared CoIs
- ensure that all peer reviewers are provided with the necessary information to review each application
- maintain scoring records for each application
- act as the first point of contact for peer reviewers and community observers
- seek feedback from Chairs, peer reviewers and community observers on improvements for processes.

<table>
<thead>
<tr>
<th>Indigenous Health Research Peer Reviewers</th>
<th>Applications nominated as Aboriginal and Torres Strait Islander health will be considered by an Indigenous Health Research peer reviewer with appropriate expertise in Aboriginal and Torres Strait Islander health. Indigenous Health Research peer reviewers will not participate in scoring. They will act as external experts and provide guiding comments to the peer reviewers. Indigenous Health Research peer reviewers may be invited to participate on grant review panels. In these instances, they may also provide an assessment against the Investigator Grant Assessment Criteria. Indigenous Health Research peer reviewers will:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>review how well each application addresses NHMRC’s <em>Indigenous Research Excellence Criteria</em> (Attachment D).</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Community Observers</th>
<th>Panels may have independent community observers present during Panel Assessment Confirmation meetings. NHMRC invites respected members of the general community to sit in on a proportion of the Panel Assessment Confirmation meetings to observe whether NHMRC policy and procedures are being adhered to. The observers assist NHMRC in ensuring that the assessment of all applications is fair, equitable and impartial. Observers will be briefed on procedures prior to the meeting. They will not participate in the discussion of any application, and will be identified and introduced by the Chair prior to the commencement of the videoconference/teleconference. At the Panel Assessment Confirmation meeting observers will:</th>
</tr>
</thead>
</table>
|                     | }
3.3 Reviewing Investigator Grant applications

All Investigator Grant applications are assessed against the Investigator Grant 2019 Assessment Criteria (Attachment E) and Investigator Grant 2019 Category Descriptors (Attachment F). Further guidance on assessing applications against the Investigator Grant assessment criteria is provided at Attachment G.

Applications that are accepted by NHMRC as relating to the improvement of Aboriginal and Torres Strait Islander health (see section 3.3.2) are also assessed against the Indigenous Research Excellence Criteria (Attachment D). Further guidance on assessing applications against the Indigenous Research Excellence Criteria is provided at Attachment H.

3.3.1 Receipt and initial processing of applications

NHMRC staff will verify that Investigator Grant applications meet eligibility criteria as outlined in the Investigator Grants 2019 Guidelines. Applications to Investigator Grants will be submitted in two categories, Emerging Leadership (EL) and Leadership (L), comprising five levels of salary, as set out in the table below:

<table>
<thead>
<tr>
<th>Category</th>
<th>Levels</th>
<th>RSP</th>
<th>Title</th>
</tr>
</thead>
<tbody>
<tr>
<td>Leadership</td>
<td>L3</td>
<td>LT4</td>
<td>NHMRC Leadership Fellow</td>
</tr>
<tr>
<td></td>
<td>L2</td>
<td>LT3</td>
<td>LT2</td>
</tr>
<tr>
<td></td>
<td>L1</td>
<td>LT1</td>
<td>LT1</td>
</tr>
<tr>
<td>Emerging Leadership</td>
<td>EL2</td>
<td>ELT2</td>
<td>NHMRC Emerging Leadership Fellow</td>
</tr>
<tr>
<td></td>
<td>EL1</td>
<td>ELT1</td>
<td></td>
</tr>
</tbody>
</table>

The EL Category is restricted to researchers who are ≤10 years post-PhD or equivalent and comprises
two salary levels (EL1 and EL2) with corresponding Research Support Packages (RSPs). The L Category comprises three salary levels (L1, L2 and L3) with four tiers of RSP (LT1, LT2, LT3 and LT4). The tier of RSP is not tied to the level of salary for Leadership Investigator Grants. A Statement of Expectations for each level of Investigator Grant is at Attachment I.

Applicants will be advised, via their RAO’s, if their application is ineligible. However, in some instances these applications will remain in the peer review process until their ineligibility is confirmed by NHMRC staff. Eligibility rulings may be made at any point in the peer review process.

3.3.2 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 confirm that 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 from a peer reviewer with expertise in Aboriginal and Torres Strait Islander health.

The assessment against the Indigenous Research Excellence Criteria will be considered by peer reviewers when scoring (Attachment D).

For further information see Guidance for Assessing applications against the Indigenous Research Excellence Criteria at Attachment H.

3.3.3 Establishment of grant review panels

The number of grant review panels (panels) formed will depend on the total number and type of applications received.

3.3.4 Assignment of applications to panels

Applications are allocated to a panel primarily based on the applicant’s nominated peer review areas. Allocation may also be informed by the proposed field of research and other key words entered into RGMS. Where the applicant has nominated a peer review area that is unlikely to provide appropriate expertise, NHMRC scientific staff will identify an appropriate panel to conduct the peer review.

3.3.5 Identification of CoIs and peer reviewer suitability

Peer reviewers will be provided with an overview of applications within RGMS and will declare their CoIs in accordance with the guidelines provided at section 2.3 and Attachment B.

Some peer reviewers may have a CoI for which they require a ruling. For these, NHMRC will assess the information in the declaration made by the peer reviewer and specify a level of peer review participation in RGMS.

Peer reviewers are required to include sufficient detail in their declaration to ensure an accurate CoI assessment can be made by NHMRC staff. If the Chair or a peer reviewer is uncomfortable with a ruling...
level, they can raise this with NHMRC staff and request a review.

CoIs are declared at the beginning of the peer review process. However, CoIs must be declared at any stage of the peer review process if new conflicts become apparent. Any reviewer who has a ‘high’ CoI will not be able to participate in the review of that application, but they can provide scientific advice, on request from the Chair, if required.

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

3.3.6 Allocation of peer reviewers to panels

Taking into account CoIs and peer reviewer suitability, NHMRC staff will assign peer reviewers to panels of approximately five members. It is expected each panel will be assigned approximately 30 applications; however this is subject to change, depending on the number and peer review area of applications.

3.3.7 Briefing

NHMRC will provide briefing material for peer review participants that will provide further detail on peer reviewer duties and the responsibilities associated with the Investigator Grant peer review process. This will be made available to peer reviewers prior to reviewing applications. Further information may be provided as necessary.

3.3.8 Assessment of applications

Peer reviewers will be given access to applications (where no high CoI exists) and will be required to review and subsequently enter their scores via RGMS. Peer reviewers will review and score all applications assigned to them against the assessment criteria, appropriate for the Leadership level, using the category descriptors, taking into account career disruptions and other ‘relative to opportunity’ considerations (Attachment J) where applicable.

Peer reviewers must ensure scores are completed within RGMS 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 should not discuss applications with other peer reviewers. This is to ensure peer reviewers provide completely independent scores.

Peer reviewers’ scores will be used to create provisional ranked lists of applications for each panel. These lists will be made available to peer reviewers prior to the Panel Assessment Confirmation meeting (tailored for CoIs).

For all applications, the following should be considered during the review and subsequent scoring, where applicable.

3.3.8.1 Relative to opportunity and career disruption

Panel members must take into account productivity relative to opportunity and, where applicable, career disruption considerations in the assessment of all applications. To assist peer reviewers with their assessment, further details regarding relative to opportunity and career disruptions are provided at Attachment J.
3.3.8.2 Industry-relevant experience


3.3.8.3 Use of Impact Factors and other metrics

Peer reviewers should draw on their expert knowledge of their field of research, as well as the citation and publication practices of that field, when assessing the publication component of an applicant’s track record. Track record assessment should take into account the overall impact, quality and contribution to the field of all of the published journal articles from the grant applicant, not just the standing of the journal in which those articles are published.

It is not appropriate to use journal based metrics such as Journal Impact Factors or the Excellence in Research for Australia (ERA) Ranked Journal List when assessing applications.

The San Francisco Declaration on Research Assessment (DoRA) makes recommendations for improving the evaluation of research assessment. NHMRC is a signatory of DoRA and adheres to the recommendations, as outlined in DoRA (https://sfdora.org/read/), for its peer review processes.

3.3.8.4 Enhancing reproducibility and applicability of research outcomes

As outlined in the Code, 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 scientific premise of the proposed research (i.e. how rigorous were previous experimental designs that form the basis for this proposal?), effect size and power calculations to determine the number of samples/subjects in the study (where appropriate), sex and gender elements of the research to maximise impact and any other considerations relevant to the field of research necessary to assess the rigour of the proposed design.

3.3.9 Nomination of applications for discussion at Panel Assessment Confirmation meeting

Once provisional ranked lists are provided to panels, peer reviewers will each be given the opportunity to nominate up to two applications for discussion at the Panel Assessment Confirmation meeting. Peer reviewers must outline their reason for nominating an application for discussion and what issues they would like to discuss with the panel. Peer reviewers will be required to submit their nominations to NHMRC by the nominated date. NHMRC will then circulate a list of applications nominated for discussion to peer reviewers in advance of the Panel Assessment Confirmation meeting. The nominated applications will be the only applications discussed by the panel. NHMRC may identify applications for discussion, or remove applications from the nomination process.

If the panel does not nominate any applications for discussion the Panel Assessment Confirmation meeting will not be required. NHMRC will confirm in writing that no meeting is required.
3.3.10 Panel Assessment Confirmation meetings and re-scoring of applications

It is expected that the Panel Assessment Confirmation meeting will occur by videoconference or teleconference.

NHMRC secretariat staff will coordinate the timing of their panel’s assessment confirmation meeting, as required.

The purpose of the Panel Assessment Confirmation 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 videoconference/teleconference is as follows:

1. The Chair will announce the application to be discussed, identifying any existing CoIs and asking peer reviewers to declare any new CoIs on which the panel will rule.
2. The peer reviewer who nominated the application will be invited to explain why that application was nominated, making clear the matters they would like to raise with the panel for discussion. If an application is nominated by NHMRC, the Chair will direct members to discuss the application as necessary.
3. Following the discussion of a nominated application, panel members will be given the opportunity to alter their score for each assessment criterion in RGMS. Panel members can choose not to change their score during the re-scoring process.

It is important that the panel consider the merits of each application up for discussion in relation to the assessment criteria, rather than whether the application is considered fundable.

3.3.11 Principles for setting conditions of funding for NHMRC grants

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

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

The principles are:

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

Peer reviewers must retain their speaking notes and any other notes they make of the peer review process until the outcomes of the panel’s deliberations are finalised. For panel meetings, this is when the final scores have been determined. After this time, both hard copy and electronic notes should be disposed of appropriately.

3.3.13 Funding recommendation

After the Panel Assessment Confirmation meetings, application scores from panels are used to create ranked lists.

Ranked lists will be used to prepare funding recommendations for NHMRC’s Research Committee, Council and CEO, who will then make recommendations to the Minister for Health.

3.3.14 Notification of outcomes

Feedback will be provided to all applicants in the form of an Application Assessment Summary. It will contain numerical information on the competitiveness of the application that will be drawn from the scores given by peer reviewers.
Attachment 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 honest and that all statements are capable of being verified.
- Complaints processes are outlined on the NHMRC website at: https://nhmrc.gov.au/about-us/publications/nhmrc-complaints-policy. 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 or via GrantConnect at https://www.grants.gov.au/.
- NHMRC publicly recognises the contribution of participants in the peer review process, through publishing their names on the NHMRC website.

Independence

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

Appropriateness and balance

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

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

- Peer reviewers are bound to act in accordance with the provisions of the Privacy Act 1988 and the confidentiality requirements under section 80 of the NHMRC Act. They must act 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 are confidential and must not be used other than to fulfil their role.
- NHMRC is subject to the Freedom of Information Act 1982 which provides a statutory right for an individual to seek access to documents. If documents that deal with peer review fall within the scope of a request, there is a process for consultation and there are exemptions from release. NHMRC will endeavour to protect the identity of peer reviewers assigned to a particular application.

Impartiality

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

Quality and Excellence

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

The following CoI Situations and Additional Guidance for Work and Professional CoI tables outline matters that may need to be considered when deciding the level of potential conflicts and provide some examples of specific situations where CoIs in the peer review process apply.

The tables are intended to be for guidance only. They are representative of CoI situations rather than definitive, as each situation is different and needs to be considered on its merits. The tables are provided to assist participants in the peer review process to identify the types of circumstances in which CoIs might arise, but are not intended to be checklists.

Note that CoIs relate to Chief Investigators – not Associate Investigators.

CoI situations requiring further clarification

<table>
<thead>
<tr>
<th>Situation</th>
<th>Explanations and examples</th>
<th>Conflict level*</th>
</tr>
</thead>
<tbody>
<tr>
<td>Application under review</td>
<td>You are a named participant on the application under review.</td>
<td>High</td>
</tr>
<tr>
<td></td>
<td>You have had discussions/input into the study design or research proposal of this application.</td>
<td>High</td>
</tr>
<tr>
<td>Collaborations</td>
<td>You have actively collaborated on publications (co-authorship), pending applications, existing NHMRC or other grants.</td>
<td>High</td>
</tr>
<tr>
<td></td>
<td>You have an indirect collaboration e.g. collaborating co-worker, member of a research or discussion group, co-author of a large multi-author paper where involvement was minimal, provided cells/animals etc. to applicants without financial gain or exchange.</td>
<td>Obtain a ruling from NHMRC</td>
</tr>
<tr>
<td></td>
<td>You are planning, or have been approached to be involved in a future grant application or other future collaborative relationship with this applicant(s).</td>
<td>Obtain a ruling from NHMRC</td>
</tr>
<tr>
<td>Working relationship</td>
<td>Please refer to Additional Guidance table below.</td>
<td></td>
</tr>
<tr>
<td>Professional relationships and interests</td>
<td>Please refer to Additional Guidance table below.</td>
<td></td>
</tr>
<tr>
<td>------------------------------------------</td>
<td>-------------------------------------------------</td>
<td></td>
</tr>
<tr>
<td>Social relationship and/or interests</td>
<td>There is a personal/social relationship between you, your partner or other member of your family and the applicant. Usually High, may need a ruling from NHMRC</td>
<td></td>
</tr>
<tr>
<td></td>
<td>You have a personal / social relationship with the applicant’s partner or other member of their family. Usually High, may need a ruling from NHMRC</td>
<td></td>
</tr>
<tr>
<td>Teaching or supervisory relationship</td>
<td>For either undergraduate or postgraduate studies, you have taught or supervised the applicant; you co-supervised the applicant; your own research was supervised by the applicant. High</td>
<td></td>
</tr>
<tr>
<td>Financial interest in the application</td>
<td>You have an associated patent pending; supply goods and services; improved access to facilities; provide cells/animals or similar to the applicant. Usually High, may need a ruling from NHMRC</td>
<td></td>
</tr>
<tr>
<td></td>
<td>You receive research funding or other support from a company and the research to be reviewed may impact upon the company. Usually High, may need a ruling from NHMRC</td>
<td></td>
</tr>
<tr>
<td>Other interests or situations</td>
<td>You have a previous or pending dispute (may require consideration of events earlier than the last five years). High</td>
<td></td>
</tr>
</tbody>
</table>

* Indicative only. Experienced NHMRC staff will exercise judgement when deciding the level of conflict and, in doing so, will consider the particular circumstance of each potential conflict.

**Additional Guidance for Work and Professional CoI**

<table>
<thead>
<tr>
<th>Situation</th>
<th>Explanations and examples</th>
<th>Conflict level*</th>
</tr>
</thead>
<tbody>
<tr>
<td>Working Relationship</td>
<td>You have the same employer or are part of the same organisation</td>
<td>High</td>
</tr>
<tr>
<td></td>
<td>Where a peer reviewer and an applicant work at the same independent Medical Research Institute (e.g. Baker Heart and Diabetes Institute, The Garvan)</td>
<td></td>
</tr>
<tr>
<td>Scenario</td>
<td>CoI Level</td>
<td></td>
</tr>
<tr>
<td>-------------------------------------------------------------------------</td>
<td>-----------</td>
<td></td>
</tr>
<tr>
<td>Institute of Medical Research etc.) or in the same University/ Hospital Department</td>
<td>High</td>
<td></td>
</tr>
<tr>
<td>Where a peer reviewer or applicant holds a position of influence within an organisation, or has a pecuniary interest, e.g. Dean of Faculty or School/ Institute Directors.</td>
<td>High</td>
<td></td>
</tr>
<tr>
<td>Where a peer reviewer and an applicant work for the same institution but at different campuses and do not know each other</td>
<td>Low</td>
<td></td>
</tr>
<tr>
<td>Where a peer reviewer and an applicant work in the same faculty but in different schools/departments and do not know each other.</td>
<td>Low</td>
<td></td>
</tr>
<tr>
<td>You are working in the same department (or equivalent) within an organisation</td>
<td>High - in most situations due to perceived CoI relating to potential financial benefit from showing favour towards application, and the likelihood that the peer reviewer and applicant know each other.</td>
<td>Low</td>
</tr>
<tr>
<td>You work in the same locality but for a different organisation, i.e. Where a peer reviewer works for a University and an applicant works for an affiliated Medical Research Institute (or vice versa), such as relationships between: • The University</td>
<td>High</td>
<td></td>
</tr>
<tr>
<td>When there is a direct association/collaboration between the peer reviewer and applicant, where the peer reviewer may have or may be perceived to have a vested interest in this research.</td>
<td>High</td>
<td></td>
</tr>
<tr>
<td>Where two organisations are affiliated but there is no direct association/collaboration between the peer reviewer and</td>
<td>Low</td>
<td></td>
</tr>
<tr>
<td>Professional relationships and interests</td>
<td>You are also a member of the same scientific advisory committee, review board, exam board, trial committee etc.</td>
<td>Where you hold a membership in which you may be perceived to have a vested interest, i.e. pecuniary or other direct interests with the proposed research, e.g. when another board/committee member is associated with the grant application (a member of the CI team or is Faculty/Department Head where the research is to be conducted.)</td>
</tr>
<tr>
<td>------------------------------------------</td>
<td>-------------------------------------------------------------------------------------------------</td>
<td>-------------------------------------------------------------------------------------------------</td>
</tr>
<tr>
<td></td>
<td>You or your organisation are affiliated with the applicant's organisation, i.e. where a peer reviewer and an applicant work for different organisations that have active/ongoing collaborations or affiliations, such as affiliations between: • The University of Melbourne and Walter and Eliza Hall Institute of Medical Research (WEHI); or • The University of New South Wales and The George Institute for Global Health.</td>
<td>Where two organisations are affiliated but there is no direct association/collaboration between applicant and peer reviewer (e.g. researcher)</td>
</tr>
<tr>
<td></td>
<td>applicant (e.g. researchers located at the University of Melbourne faculty that has no direct association/collaboration with applicant at WEHI).</td>
<td>Where there is a direct link/collaboration between the applicant and peer reviewer, in which the peer reviewer may have or may be perceived to have a vested interest in this research.</td>
</tr>
<tr>
<td>You or your organisation is affiliated or associated with organisations such as pharmaceutical companies, tobacco companies etc.</td>
<td>When you or your institution has an affiliation/association with the organisation(s) that may have or may be perceived to have vested interest in this research e.g. a pharmaceutical company that has provided drugs to the applicants for testing.</td>
<td>High</td>
</tr>
<tr>
<td>---</td>
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</tr>
<tr>
<td>When you or your 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, e.g. you are employed at a large institution in an area distant from the organisation(s) in question.</td>
<td>Low</td>
<td></td>
</tr>
</tbody>
</table>

* Indicative only. Experienced NHMRC staff will exercise judgement when deciding the level of conflict and, in doing so, will consider the particular circumstance of each potential conflict.
Attachment C. Concerns Arising During Peer Review about Possible Research Misconduct

This advice is for researchers or others who have become concerned during NHMRC peer review assessment that research misconduct may have occurred. It helps peer reviewers understand how to raise such concerns.

The Australian Code for the Responsible Conduct of Research (the Code) (https://nhmrc.gov.au/about-us/publications/australian-code-responsible-conduct-research-2007) aims to promote high quality conduct in research, and also sets out responsibilities for institutions and staff when research misconduct occurs. You should already be familiar with Part A of the Code, which describes the principles and practices for encouraging responsible conduct for researchers and institutions.

Your role in peer review

Peer review is central to NHMRC’s strategy of investing in high quality health and medical research, building research capacity and supporting the best research and researchers.

The Code describes peer review as the impartial and independent assessment of research by others in the same or a related field, and notes that peer review may play a role in drawing attention to deviations from the principles of the Code. Section 6.2 of the Code identifies the responsibilities of peer reviewers.

What should I do if I come across something that suggests research misconduct while reviewing a grant for NHMRC?

When you are undertaking peer review for NHMRC, you might have concerns, for example, about items in a publications list, or potentially false or misleading statements, diagrams or figures. You could also have concerns about the behaviour of other peer reviewers.

Re-familiarise yourself with the Code

The first step should be to re-read the Code to make sure that you are clear about what you believe is wrong. Definitions of research misconduct can be found on page 10.1.

Part A of the Code provides advice on how to manage research data and materials, how to publish and disseminate research findings (including proper attribution of authorship), how to collaborate across institutions, how to manage conflicts of interest as well as obligations in peer review.

The second step should be to read the Investigator Grants 2019 Guidelines that addresses issues about incomplete, false or misleading applications.

How should I report my concerns if I believe research misconduct may have occurred?

If you believe research misconduct may have occurred you should raise your concerns with NHMRC. The process depends on the peer review stage the application is at when your concerns arise:

- If Grant Review Panel meetings have not yet begun, you should contact the relevant secretariat using the funding program or panel-specific email address.
• If Grant Review Panel meetings are underway, you should raise the issue in a side discussion with the panel Chair, secretariat and/or the director of the relevant funding program.

Where appropriate, the relevant NHMRC director will then refer the matter to NHMRC’s Ethics and Integrity section, which will consider the concerns and, where appropriate, contact the research institution involved. It is important to note that NHMRC does not conduct its own investigation into allegations. As per the Code, this is the responsibility of the relevant institution. However, NHMRC will liaise with the institution regarding the outcome of any investigation and take any necessary precautionary or consequential actions under the NHMRC Policy on Misconduct Related to NHMRC Funding (https://nhmrc.gov.au/about-us/publications/nhmrc-policy-misconduct).

It is important that you document your concerns clearly and precisely to assist NHMRC in providing specific information to the relevant research institution.

**Should I raise these issues in my assessment report or in panel discussion?**

Peer reviewers must not share their concerns with other peer reviewers. As a peer reviewer, your assessment report or contribution to panel discussions should not refer to any concerns related to research integrity. Assessment comments can and should comment on or seek clarification on all aspects of the application without implying concerns with the integrity of the application or applicant. These concerns should be raised through a separate process while the application continues to progress through the peer review process. For example, as a peer reviewer it would be appropriate to query statistics in an application that appear to be incorrect. This gives the applicant an opportunity to clarify or correct the matter in schemes that allow for rebuttal. However, it is not appropriate in assessment reports to suggest that an apparent error or inconsistency is indicative of research misconduct.

The NHMRC Policy on Misconduct Related to NHMRC Funding (https://nhmrc.gov.au/about-us/publications/nhmrc-policy-misconduct) ensures that mechanisms are in place to consider any unresolved research misconduct allegations prior to the release of funding. For example, a condition could be placed on a grant preventing the commencement of funding until after the resolution of the matter, with funding potentially being withheld if research misconduct is proven.

Since allegations are investigated by institutions, NHMRC may need to provide written material on the nature of the concerns. We will not reveal your identity to the institution without your consent and will strive to maintain the anonymity of peer reviewers.

**What if I am still not satisfied?**

If you do not believe your concerns have been adequately dealt with through this process, you can raise your concerns with the Ethics and Integrity team by emailing integrity@nhmrc.gov.au who can provide you with further advice.
Attachment D. 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.

Panels will consider these in their overall assessment of the application, together with the scheme-specific assessment criteria.
Attachment E. Investigator Grant 2019 Assessment Criteria

Applications for Investigator Grants 2019 are assessed by peers on the extent to which they address the assessment criteria:

- Track record, relative to opportunity (70%)
- Knowledge Gain (30%).

Applications will be assessed against the category descriptors at Attachment F.

**Track Record** - NHMRC defines ‘Track Record’ for the Investigator Grant scheme as the value of an individual’s past research achievements, relative to opportunity, not prospective achievements, using evidence. Assessment of Track Record comprises peer reviewers’ consideration of:

- Publications (35%)
- Research Impact (20%)
- Leadership (15%).

**Knowledge Gain** - NHMRC defines ‘Knowledge Gain’ for the Investigator Grant scheme as the quality of the proposed research and significance of the knowledge gained. It incorporates theoretical concepts, hypothesis, research design, robustness and the extent to which the research findings will contribute to the research area and health outcomes (by advancing knowledge, practice or policy).

Applications are assessed relative to opportunity, taking into consideration any career disruptions, where applicable (see Attachment J).

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.
Attachment F. Investigator Grant 2019 Category Descriptors

The following category descriptors are used as a guide to scoring an application against each of the assessment criteria.

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

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

Assessing Aboriginal and Torres Strait Islander Contributions
It is recognised that Aboriginal and Torres Strait Islander applicants make additional valuable contributions to policy development, clinical/public health leadership and/or service delivery, community activities and linkages, and are often representatives on key committees. If applicable, these contributions should be considered when assessing research output and track record.
**Track Record, relative to opportunity (70%)**

**Publications (35%)**

Table 1. Publications

<table>
<thead>
<tr>
<th>Score</th>
<th>Performance Indicator</th>
<th>Category Descriptors</th>
</tr>
</thead>
</table>
| 7     | Exceptional           | Relative to opportunity (including career stage) and to their field of research, the applicant demonstrates:  
  • an **exceptional** record of publications in terms of quality and contribution to science |
| 6     | Outstanding           | Relative to opportunity (including career stage) and to their field of research, the applicant demonstrates:  
  • an **outstanding** record of publications in terms of quality and contribution to science |
| 5     | Excellent             | Relative to opportunity (including career stage) and to their field of research, the applicant demonstrates:  
  • an **excellent** record of publications in terms of quality and contribution to science |
| 4     | Very Good             | Relative to opportunity (including career stage) and to their field of research, the applicant demonstrates:  
  • a **very good** record of publications in terms of quality and contribution to science |
| 3     | Good                  | Relative to opportunity (including career stage) and to their field of research, the applicant demonstrates:  
  • a **good** record of publications in terms of quality and contribution to science |
| 2     | Satisfactory          | Relative to opportunity (including career stage) and to their field of research, the applicant demonstrates:  
  • a **satisfactory** record of publications in terms of quality and contribution to science |
| 1     | Weak or limited       | Relative to opportunity (including career stage) and to their field of research, the applicant demonstrates:  
  • a **weak or limited** record of publications in terms of quality and contribution to science |
## Research Impact (20%)

### Table 2. Reach and significance of the research impact (Emerging Leadership and Leadership) (7%)  

<table>
<thead>
<tr>
<th>Emerging Leadership Score</th>
<th>Category Descriptors</th>
<th>Leadership Score</th>
</tr>
</thead>
<tbody>
<tr>
<td>7</td>
<td>Knowledge:</td>
<td>an exceptional knowledge, health, economic and/or social impact</td>
</tr>
<tr>
<td></td>
<td>- a paradigm changing development that has led to (a) new knowledge within the field that is recognised across multiple countries, (b) significant influence beyond the specific field of research or (c) the development of a new field(s) of research that has been recognised across multiple countries/beneficiaries</td>
<td>7</td>
</tr>
<tr>
<td></td>
<td>Health</td>
<td>an outstanding knowledge, health, economic and/or social impact</td>
</tr>
<tr>
<td></td>
<td>- a paradigm changing development that has improved health or health systems, services, policy, programs or clinical practice that (a) had a significant impact on health with an extensive reach, (b) had a profound impact on health with a modest reach, (c) profoundly improved the health of Australia’s Indigenous people or (d) led to a significant, scalable and sustainable change in health systems and services in a large number of communities</td>
<td>6</td>
</tr>
<tr>
<td></td>
<td>Economic</td>
<td></td>
</tr>
<tr>
<td></td>
<td>- development of a service delivery or system change, prevention program, intervention, device, therapeutic or change in clinical practice that led to (a) the generation of significant commercial income or (b) a profound reduction in healthcare costs</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Social</td>
<td></td>
</tr>
<tr>
<td></td>
<td>- changes in policy that have had (a) a significant impact on the social well-being, equality or social inclusion of very large numbers of people at a national level or across multiple countries or (b) a profound impact on the social well-being of the end-user, public and community of a smaller number of individuals at a national level or across multiple countries</td>
<td></td>
</tr>
</tbody>
</table>

Note: Applicants do not need to demonstrate all types of research impact.

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1 For the assessment of research impact, different seven point scales are used for Emerging Leadership and Leadership applicants. This is to recognise that early and mid-career researchers will have had less time to accumulate research impact.
<table>
<thead>
<tr>
<th>Emerging Leadership Score</th>
<th>Category Descriptors</th>
<th>Leadership Score</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>7</strong></td>
<td>Knowledge:</td>
<td><strong>5</strong></td>
</tr>
<tr>
<td></td>
<td>- a major development that has led to (a) new knowledge within the field that is recognised nationally or across multiple countries, (b) a major influence beyond the specific field of research or (c) a major influence on the development of a new field(s) of research that has been recognised nationally or across multiple countries/beneficiaries</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Health</td>
<td></td>
</tr>
<tr>
<td></td>
<td>- an important development that has improved health or health systems, services, policy, programs or clinical practice that (a) had a major impact on health with an extensive reach, (b) had a significant impact on health with a modest reach, (c) led to a significant improvement in the health of Australia’s Indigenous people or (d) led to major scalable and sustainable change in health systems and services in a number of communities</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Economic</td>
<td></td>
</tr>
<tr>
<td></td>
<td>- development of a service delivery or system change, prevention program, intervention, device, therapeutic or change in clinical practice that led to (a) the generation of considerable commercial income or (b) a major reduction in healthcare costs</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Social</td>
<td></td>
</tr>
<tr>
<td></td>
<td>- changes in policy that have either had (a) a major impact on the social well-being, equality or social inclusion of very large numbers of people at a local, state/territory or national level or (b) a significant impact on the social well-being of the end-user, public and community of a smaller number of individuals at a local, state/territory or national level</td>
<td></td>
</tr>
<tr>
<td><strong>6</strong></td>
<td>Knowledge:</td>
<td><strong>4</strong></td>
</tr>
<tr>
<td></td>
<td>- a change that has led to (a) new knowledge within the field that is recognised nationally or across multiple countries, (b) had some influence beyond the specific field of research, or (c) some influence on the development of a new field(s) of research that has been recognised nationally or across multiple countries/beneficiaries</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Health</td>
<td></td>
</tr>
<tr>
<td></td>
<td>- an excellent knowledge, health, economic and/or social impact</td>
<td></td>
</tr>
<tr>
<td><strong>5</strong></td>
<td>Knowledge:</td>
<td><strong>3</strong></td>
</tr>
<tr>
<td></td>
<td>- a very good knowledge, health, economic and/or social impact</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Health</td>
<td></td>
</tr>
<tr>
<td></td>
<td>- an outstanding knowledge, health, economic and/or social impact</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Economic</td>
<td></td>
</tr>
<tr>
<td></td>
<td>- a good knowledge, health, economic and/or social impact</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Social</td>
<td></td>
</tr>
<tr>
<td></td>
<td>- an excellent knowledge, health, economic and/or social impact</td>
<td></td>
</tr>
<tr>
<td>Emerging Leadership Score</td>
<td>Category Descriptors</td>
<td>Leadership Score</td>
</tr>
<tr>
<td>---------------------------</td>
<td>-------------------------------------------------------------------------------------</td>
<td>------------------</td>
</tr>
<tr>
<td>4</td>
<td>a <strong>very good</strong> knowledge, health, economic and/or social impact &lt;br&gt;<strong>Health</strong> &lt;br&gt;• a development that has improved health or health systems, services, policy, programs or clinical practice that (a) had some impact on health with an extensive reach, (b) had a major impact on health with a modest reach, (c) led to a major improvement in the health of Australia’s Indigenous people, or (d) led to some scalable and sustainable change in health systems and services in a small number of communities &lt;br&gt;<strong>Economic</strong> &lt;br&gt;• development of a service delivery or system change, prevention program, intervention, device, therapeutic or change in clinical practice that led to (a) the generation of some commercial income or (b) some reduction in healthcare costs &lt;br&gt;<strong>Social</strong> &lt;br&gt;• changes in policy that have had (a) some impact on the social well-being, equality or social inclusion of very large numbers of people at a local, state/territory or national level or (b) an impact on the social well-being of the end-user, public and community of a smaller number of individuals at a local, state/territory or national level</td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>a <strong>good</strong> knowledge, health, economic and/or social impact &lt;br&gt;<strong>Health</strong> &lt;br&gt;• a development that has improved health or health systems, services, policy, programs or clinical practice that (a) had some impact on health with an extensive reach, (b) had a major impact on health with a modest reach, (c) led to a major improvement in the health of Australia’s Indigenous people, or (d) led to some scalable and sustainable change in health systems and services in a small number of communities &lt;br&gt;<strong>Economic</strong> &lt;br&gt;• development of a service delivery or system change, prevention program, intervention, device, therapeutic or change in clinical practice that led to (a) the generation of some commercial income or (b) some reduction in healthcare costs &lt;br&gt;<strong>Social</strong> &lt;br&gt;• changes in policy that have had (a) some impact on the social well-being, equality or social inclusion of very large numbers of people at a local, state/territory or national level or (b) an impact on the social well-being of the end-user, public and community of a smaller number of individuals at a local, state/territory or national level</td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>a <strong>satisfactory</strong> knowledge, health, economic and/or social impact &lt;br&gt;<strong>Health</strong> &lt;br&gt;• a development that has improved health or health systems, services, policy, programs or clinical practice that (a) had some impact on health with an extensive reach, (b) had a major impact on health with a modest reach, (c) led to a major improvement in the health of Australia’s Indigenous people, or (d) led to some scalable and sustainable change in health systems and services in a small number of communities &lt;br&gt;<strong>Economic</strong> &lt;br&gt;• development of a service delivery or system change, prevention program, intervention, device, therapeutic or change in clinical practice that led to (a) the generation of some commercial income or (b) some reduction in healthcare costs &lt;br&gt;<strong>Social</strong> &lt;br&gt;• changes in policy that have had (a) some impact on the social well-being, equality or social inclusion of very large numbers of people at a local, state/territory or national level or (b) an impact on the social well-being of the end-user, public and community of a smaller number of individuals at a local, state/territory or national level</td>
<td></td>
</tr>
<tr>
<td>1</td>
<td>a <strong>weak or limited</strong> knowledge, health, economic and/or social impact &lt;br&gt;<strong>Health</strong> &lt;br&gt;• a development that has improved health or health systems, services, policy, programs or clinical practice that (a) had some impact on health with an extensive reach, (b) had a major impact on health with a modest reach, (c) led to a major improvement in the health of Australia’s Indigenous people, or (d) led to some scalable and sustainable change in health systems and services in a small number of communities &lt;br&gt;<strong>Economic</strong> &lt;br&gt;• development of a service delivery or system change, prevention program, intervention, device, therapeutic or change in clinical practice that led to (a) the generation of some commercial income or (b) some reduction in healthcare costs &lt;br&gt;<strong>Social</strong> &lt;br&gt;• changes in policy that have had (a) some impact on the social well-being, equality or social inclusion of very large numbers of people at a local, state/territory or national level or (b) an impact on the social well-being of the end-user, public and community of a smaller number of individuals at a local, state/territory or national level</td>
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</table>
Table 3. Research Program’s contribution to the Research Impact (6%)

<table>
<thead>
<tr>
<th>Score</th>
<th>Performance Indicator</th>
<th>Category Descriptors</th>
</tr>
</thead>
</table>
| 7     | Exceptional           | Relative to opportunity and to their field of research, there is robust verifiable evidence that the applicant’s research program made:  
- an **exceptional** contribution to the knowledge, health, economic and/or social impact |
| 6     | Outstanding           | Relative to opportunity and to their field of research, there is robust verifiable evidence that the applicant’s research program made:  
- an **outstanding** contribution to the knowledge, health, economic and/or social impact |
| 5     | Excellent             | Relative to opportunity and to their field of research, there is robust verifiable evidence that the applicant’s research program made:  
- an **excellent** contribution to the knowledge, health, economic and/or social impact |
| 4     | Very good             | Relative to opportunity and to their field of research, there is robust verifiable evidence that the applicant’s research program made:  
- a **very good** contribution to the knowledge, health, economic and/or social impact |
| 3     | Good                  | Relative to opportunity and to their field of research, there is robust verifiable evidence that the applicant’s research program made:  
- a **good** contribution to the knowledge, health, economic and/or social impact |
| 2     | Satisfactory          | Relative to opportunity and to their field of research, there is robust verifiable evidence that the applicant’s research program made:  
- a **satisfactory** contribution to the knowledge, health, economic and/or social impact |
| 1     | Weak, Limited or No   | Relative to opportunity and to their field of research, there is robust verifiable evidence that the applicant’s research program made:  
- a **weak, limited** or no contribution to the knowledge, health, economic and/or social impact |
Table 4. Applicant’s contribution to Research Program (7%)

<table>
<thead>
<tr>
<th>Score</th>
<th>Performance Indicator</th>
<th>Category Descriptors</th>
</tr>
</thead>
<tbody>
<tr>
<td>7</td>
<td>Exceptional</td>
<td>Relative to opportunity and to their field, there is robust verifiable evidence that the applicant made: • an exceptional contribution to the research program that led to a knowledge, health, economic and/or social impact</td>
</tr>
<tr>
<td>6</td>
<td>Outstanding</td>
<td>Relative to opportunity and to their field, there is robust verifiable evidence that the applicant made: • an outstanding contribution to the research program that led to a knowledge, health, economic and/or social impact</td>
</tr>
<tr>
<td>5</td>
<td>Excellent</td>
<td>Relative to opportunity and to their field, there is robust verifiable evidence that the applicant made: • an excellent contribution to the research program that led to a knowledge, health, economic and/or social impact</td>
</tr>
<tr>
<td>4</td>
<td>Very Good</td>
<td>Relative to opportunity and to their field, there is robust verifiable evidence that the applicant made: • a very good contribution to the research program that led to a knowledge, health, economic and/or social impact</td>
</tr>
<tr>
<td>3</td>
<td>Good</td>
<td>Relative to opportunity and to their field, there is robust verifiable evidence that the applicant made: • a good contribution to the research program that led to a knowledge, health, economic and/or social impact</td>
</tr>
<tr>
<td>2</td>
<td>Satisfactory</td>
<td>Relative to opportunity and to their field, there is robust verifiable evidence that the applicant made: • a satisfactory contribution to the research program that led to a knowledge, health, economic and/or social impact</td>
</tr>
<tr>
<td>1</td>
<td>Weak, Limited or No</td>
<td>Relative to opportunity and to their field, there is robust verifiable evidence that the applicant made: • a weak, limited or no contribution to the research program that led to a knowledge, health, economic and/or social impact</td>
</tr>
<tr>
<td>Score</td>
<td>Performance Indicator</td>
<td>Category Descriptors</td>
</tr>
<tr>
<td>-------</td>
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</tr>
</tbody>
</table>
| 7     | Exceptional           | Relative to opportunity (including career stage) and to their field of research, the applicant demonstrates **exceptional** performance in:  
  - supervision, mentoring, training and/or career development of staff and/or students within and/or beyond their research group  
  - experience and contribution to the peer review of publications and grant applications, nationally and/or internationally  
  - contribution to community engagement, public advocacy, government advisory boards or committees, professional societies at a local, national and/or international level  
  - non-research contribution(s) to department, centre, institute or organisation e.g. leadership or membership of committee  
  - conception and direction of a research project or program  
  - building and maintaining collaborative networks necessary to achieve research outcomes within and/or beyond institution. |
| 6     | Outstanding           | Relative to opportunity (including career stage) and to their field of research, the applicant demonstrates **outstanding** performance in:  
  - supervision, mentoring, training and/or career development of staff and/or students within and/or beyond their research group  
  - experience and contribution to the peer review of publications and grant applications, nationally and/or internationally  
  - contribution to community engagement, public advocacy, government advisory boards or committees, professional societies at a local, national and/or international level  
  - non-research contribution(s) to department, centre, institute or organisation e.g. leadership or membership of committee  
  - conception and direction of a research project or program  
  - building and maintaining collaborative networks necessary to achieve research outcomes within and/or beyond their institution. |
<table>
<thead>
<tr>
<th>Grade</th>
<th>Description</th>
<th>Performance Details</th>
</tr>
</thead>
<tbody>
<tr>
<td>5</td>
<td>Excellent</td>
<td>Relative to opportunity (including career stage) and to their field of research, the applicant demonstrates <strong>excellent</strong> performance in:&lt;br&gt;• supervision, mentoring, training and/or career development of staff and/or students within and/or beyond their research group&lt;br&gt;• experience and contribution to the peer review of publications and grant applications, nationally and/or internationally&lt;br&gt;• contribution to community engagement, public advocacy, government advisory boards or committees, professional societies at a local, national and/or international level&lt;br&gt;• non-research contribution(s) to department, centre, institute or organisation e.g. leadership or membership of committee&lt;br&gt;• conception and direction of a research project or program&lt;br&gt;• building and maintaining collaborative networks necessary to achieve research outcomes within and/or beyond their institution.</td>
</tr>
<tr>
<td>4</td>
<td>Very Good</td>
<td>Relative to opportunity (including career stage) and to their field of research, the applicant demonstrates <strong>very good</strong> performance in:&lt;br&gt;• supervision, mentoring, training and/or career development of staff and students within and/or beyond their research group&lt;br&gt;• experience and contribution to the peer review of publications and grant applications, nationally and/or internationally&lt;br&gt;• contribution to community engagement, public advocacy, government advisory boards or committees, professional societies at a local, national and/or international level&lt;br&gt;• non-research contribution(s) to department, centre, institute or organisation e.g. leadership or membership of committee&lt;br&gt;• conception and direction of a research project or program&lt;br&gt;• building and maintaining collaborative networks necessary to achieve research outcomes within and/or beyond their institution.</td>
</tr>
<tr>
<td>3</td>
<td>Good</td>
<td>Relative to opportunity (including career stage) and to their field of research, the applicant demonstrates <strong>good</strong> performance in:&lt;br&gt;• supervision, mentoring, training and/or career development of staff and/or students within and/or beyond their research group&lt;br&gt;• experience and contribution to the peer review of publications and grant applications, nationally and/or internationally&lt;br&gt;• contribution to community engagement, public advocacy, government advisory boards or committees, professional societies at a local, national and/or international level&lt;br&gt;• non-research contribution(s) to department, centre, institute or organisation e.g. leadership or membership of committee&lt;br&gt;• conception and direction of a research project or program&lt;br&gt;• building and maintaining collaborative networks necessary to achieve research outcomes within and/or beyond their institution.</td>
</tr>
</tbody>
</table>
| 2 | Satisfactory | Relative to opportunity (including career stage) and to their field of research, the applicant demonstrates **satisfactory** performance in:
- supervision, mentoring, training and/or career development of staff and/or students within and/or beyond their research group
- experience and contribution to the peer review of publications and grant applications, nationally and/or internationally
- contribution to community engagement, public advocacy, government advisory boards or committees, professional societies at a local, national and/or international level
- non-research contribution(s) to department, centre, institute or organisation e.g. leadership or membership of committee
- conception and direction of a research project or program
- building and maintaining collaborative networks necessary to achieve research outcomes within and/or beyond their institution. |
| 1 | Weak or limited | Relative to opportunity (including career stage) and to their field of research, the applicant demonstrates **weak or limited** performance in:
- supervision, mentoring, training and/or career development of staff and/or students within and/or beyond their research group
- experience and contribution to the peer review of publications and grant applications, nationally and/or internationally
- contribution to community engagement, public advocacy, government advisory boards or committees, professional societies at a local, national and/or international level
- non-research contribution(s) to department, centre, institute or organisation e.g. leadership or membership of committee
- conception and direction of a research project or program
- building and maintaining collaborative networks necessary to achieve research outcomes within and/or beyond their institution. |
### Knowledge Gain (30%)

**Table 6. Knowledge Gain**

<table>
<thead>
<tr>
<th>Score</th>
<th>Performance Indicator</th>
<th>Category Descriptors</th>
</tr>
</thead>
</table>
| 7     | Exceptional            | The proposed research:  
- is supported by an extremely well justified and reasoned hypothesis/rationale  
- has a scientific framework, design, methods and analyses that are flawless, highly developed and highly appropriate  
- demonstrates to an extremely high level that it addresses an issue of critical importance to advance the research or health area (not prevalence or magnitude of the issue)  
- has or has access to exceptional technical resources, infrastructure, equipment and facilities, and if required, has access to additional expertise necessary to achieve proposed outcomes  
- will result in extremely significant and transformative changes/outcomes in the scientific knowledge, practice or policy underpinning human health issues  
- will lead to extremely significant research outputs (e.g. intellectual property, publications, policy advice, products, services, teaching aids, consulting, contract research, spin-offs, licensing)  
- would be extremely competitive with the best, similar research proposals internationally. |
| 6     | Outstanding            | The proposed research:  
- is supported by a very well justified and reasoned hypothesis/rationale  
- has a scientific framework, design, methods and analyses that are well developed and highly appropriate with only a few minor weaknesses  
- demonstrates to a very high level that it addresses an issue that is very important to advance the research or health area (not prevalence or magnitude of the issue)  
- has or has access to outstanding technical resources, infrastructure, equipment and facilities, and if required, has access to additional expertise necessary to achieve proposed outcomes  
- will result in very highly significant and substantial changes/outcomes in the scientific knowledge, practice or policy underpinning human health issues  
- will lead to very highly significant research outputs (e.g. intellectual property, publications, policy advice, products, services, teaching aids, consulting, contract research, spin-offs, licensing)  
- would be highly competitive with the best, similar research proposals internationally. |
<table>
<thead>
<tr>
<th>Score</th>
<th>Rating</th>
<th>Description</th>
</tr>
</thead>
</table>
| 5     | Excellent  | The proposed research:  
- is supported by a well justified and reasoned hypothesis/rationale  
- has a scientific framework, design, methods and analyses that are well developed and highly appropriate with several minor weaknesses  
- demonstrates to a high level that it addresses an issue that is of considerable importance to advance the research or health area (not prevalence or magnitude of the issue)  
- has or has access to excellent technical resources, infrastructure, equipment and facilities, and if required, has access to additional expertise necessary to achieve proposed outcomes  
- will result in highly significant and substantial changes/outcomes in the scientific knowledge, practice or policy underpinning human health issues  
- will lead to highly significant research outputs (e.g. intellectual property, publications, policy advice, products, services, teaching aids, consulting, contract research, spin-offs, licensing)  
- would be competitive with the best, similar research proposals internationally. |
| 4     | Very Good  | The proposed research:  
- is supported by a well justified and reasoned hypothesis/rationale  
- has a scientific framework, design, methods and analyses that are well developed and highly appropriate with a few minor concerns  
- demonstrates that it addresses an issue that is of importance to advance the research or health area (not prevalence or magnitude of the issue)  
- has or has access to very good technical resources, infrastructure, equipment and facilities, and if required, has access to additional expertise necessary to achieve proposed outcomes  
- is likely to result in significant and substantial changes/outcomes in the scientific knowledge, practice or policy underpinning human health issue  
- is likely to lead to significant research outputs (e.g. intellectual property, publications, policy advice, products, services, teaching aids, consulting, contract research, spin-offs, licensing)  
- would likely be competitive with high quality, similar research proposals internationally. |
| 3 | Good | The proposed research:  
|   |     | • is supported by a justified and sound hypothesis/rationale  
|   |     | • has a scientific framework, design, methods and analyses that are developed and appropriate with several minor concerns  
|   |     | • demonstrates that it is addressing an issue that is of some importance to advance the research or health area (not prevalence or magnitude of the issue)  
|   |     | • has or has access to good technical resources, infrastructure, equipment and facilities, and if required, has access to additional expertise necessary to achieve proposed outcomes  
|   |     | • could result in significant and substantial changes/outcomes in the scientific knowledge, practice or policy underpinning human health issues  
|   |     | • could lead to significant research outputs (e.g. intellectual property, publications, policy advice, products, services, teaching aids, consulting, contract research, spin-offs, licensing)  
|   |     | • would be somewhat competitive with high quality, similar research proposals internationally. |
| 2 | Satisfactory | The proposed research:  
|   |     | • is supported by a reasoned hypothesis/rationale  
|   |     | • has a scientific framework, design, methods and analyses that are generally sound but may lack clarity in some aspects and/or may contain notable weaknesses/concerns  
|   |     | • demonstrates that it is addressing an issue that is of marginal importance to advance the research or health area (not prevalence or magnitude of the issue)  
|   |     | • has or has access to some/most but not all of the technical resources, infrastructure, equipment and facilities, and if required, has access to additional expertise necessary to achieve proposed outcomes  
|   |     | • could result in appreciable improvements/outcomes in the scientific knowledge, practice or policy underpinning human health issues  
|   |     | • could lead to moderately significant research outputs (e.g. intellectual property, publications, policy advice, products, services, teaching aids, consulting, contract research, spin-offs, licensing)  
<p>|   |     | • would be marginally competitive with high quality, similar research proposals internationally. |</p>
<table>
<thead>
<tr>
<th>1</th>
<th>Marginal to Poor</th>
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<tbody>
<tr>
<td>The proposed research:</td>
<td></td>
</tr>
<tr>
<td>• has a weak hypothesis/rationale</td>
<td></td>
</tr>
<tr>
<td>• has a scientific framework, design, methods and analyses that have significant flaws and may contain major weaknesses</td>
<td></td>
</tr>
<tr>
<td>• demonstrates that it is addressing an issue of some concern to advance the research or health area (not prevalence or magnitude of the issue)</td>
<td></td>
</tr>
<tr>
<td>• does not have access to the technical resources, infrastructure, equipment and facilities or access to additional expertise necessary to achieve proposed outcomes (if required)</td>
<td></td>
</tr>
<tr>
<td>• is unlikely to result in improvements/outcomes in the scientific knowledge, practice or policy underpinning human health issues of significance</td>
<td></td>
</tr>
<tr>
<td>• is unlikely to lead to research outputs (e.g. intellectual property, publications, policy advice, products, services, teaching aids, consulting, contract research, spin-offs, licensing) of significance</td>
<td></td>
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<tr>
<td>• is unlikely to be competitive with similar research proposals internationally.</td>
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Attachment G. Guidance for Assessing Applications Against the Investigator Grant 2019 Assessment Criteria

Investigator Grants support the research program of outstanding investigators at all career stages. The assessment criteria for Investigator Grant applications are:

- Track record, relative to opportunity
  - Publications (35%)
  - Research Impact (20%)
  - Leadership (15%)
- Knowledge Gain (30%).

The following advice should be taken into consideration when assessing applications.

**Track Record (70%)**

NHMRC defines ‘Track Record’ for the Investigator Grant program as the value of an individual’s past research achievement, relative to opportunity, not prospective achievements, using evidence-based components. Assessment of Track Record comprises peer reviewers’ consideration of:

- Publications (35%)
- Research Impact (20%)
- Leadership (15%).

1. **Publications**

Assessment of publications will use a seven-point scoring system, supported by category descriptors. Peer reviewers will be required to form a judgement based on the applicant’s publications from the past 10 years (taking into account career disruptions) and the five best publications from those 10 years, as highlighted by the applicant.

Publications category descriptors are at Table 1 of Attachment F.

2. **Research Impact**

Assessment of an applicant’s research impact will be based on:

i. the reach and significance of their claimed research impact (7%)
ii. the contribution of their research program to the research impact (6%)
iii. the contribution of the applicant to the research program (7%).

These three components of research impact are assessed separately using three seven-point scoring systems supported by category descriptors at Tables 2, 3 and 4 of Attachment F.

For the assessment of ‘reach and significance’, the seven point scoring system is further divided for Emerging Leadership and Leadership applicants (Table 2 of Attachment F). This is to recognise that early and mid-career researchers will have had less time to accumulate research impact.

NHMRC defines the impact of research as the verifiable outcomes that research makes to knowledge, health, the economy and/or society. Impact is the effect of the research after it has been adopted, adapted for use, or used to inform further research.

Research impact is the verifiable outcomes from research and *not the prospective or anticipated effects of the research*. 


Research impact also includes research that leads to a decision not to use a particular diagnostic, treatment or health policy.

| Research Impact | The verifiable outcomes that research makes to knowledge, health, the economy and/or society. Impact is the effect of the research after it has been adopted, adapted for use, or used to inform further research. |
| Research Program | A cohesive body of research by the applicant, not limited to an individual case study (as used in a clinical context) or a single publication. It may be recent or in the past. |
| Research program’s contribution to the research impact | The degree to which the applicant’s research program was necessary to achieve the impact(s) (knowledge, health, economic, and/or social impact). |
| Applicant’s contribution to the research program | The level of the applicant’s contribution (e.g. leadership, intellectual and/or technical input) to the research program. |

**Figure 1: Key definitions for the assessment of Research Impact**

Peer reviewers should consider, based on the corroborating evidence provided:

- the reach of the research impact
- the significance of the research impact in:
  - informing knowledge to advance research
  - improving products, processes, behaviours/prevention, policies, practices
  - improving the nation’s economic performance
  - improving the health and well-being of the community.

For the purposes of assessing impact, NHMRC uses four specific descriptors:

- **Knowledge impact** – Research that has contributed to discoveries and/or demonstrable benefits emerging from adoption, adaption or use of the discovery to inform further research.
- **Health impact** – Research that has contributed to improvements in health through new therapeutics, diagnostics, or disease prevention; or by contributing to improvements in disease prevention, diagnosis and treatment, health policy, health systems, and quality of life.
- **Economic impact** – Research that has contributed to the nation’s economic performance by creating new industries, jobs and valuable products, and reducing health care costs. An economic impact may also contribute to social or health impacts, including human capital gains and the value of life and health.
- **Social impact** – Research that has contributed to improvements in the health of the society, including the well-being of the end user and the community. This may include improved ability to access health care services and to participate socially.

Peer reviewers should note that applicants can demonstrate the contribution of their research program within a single category of impact (knowledge, health, economic and social) or across multiple categories. If impacts are across multiple categories, the overall research impact score is determined holistically and
on balance across the different categories (it is not additive).

**Reach** is the extent, spread, breadth, and/or diversity of the beneficiaries of the impact, relative to the type of research impact.

**Significance** is the degree to which the impact has enabled, enriched, influenced, informed or changed the performance of policies, practices, products, services, culture, understanding, awareness or well-being of the beneficiaries (not the prevalence or magnitude of the issue).

A research program is a cohesive body of research by the applicant. It is not limited to an individual case study (as used in a clinical context) or a single publication. A research program may be recent or in the past. Applicants need to outline the research program with corroborating evidence that can be independently assessed by peer reviewers.

Peer reviewers should consider the degree to which the applicant’s research program was necessary to achieve the impact(s) (knowledge, health, economic, and/or social impact) based on robust and verifiable evidence. The relationship between the applicant’s research program (including related activities) and the impact may be foreseen or unforeseen, and may be an end product or demonstrated during the research process. Research impact examples may include the adoption or adaptation of existing research.

Relative to opportunity and to the applicant’s field of research, peer reviewers should consider the level of the applicant’s contribution (e.g. leadership, intellectual and/or technical input) to the research program based on robust and verifiable evidence.

Peer reviewers should also note that, for corroborating evidence, it is the quality of the evidence provided, not the quantity, that should be considered. Applicants only need to provide evidence sufficient and strong enough to verify the claims, not all evidence that may be on the public record. A poorly or non-corroborated research contribution should receive a score of one, in alignment with the category descriptors at Tables 2, 3 and 4 of Attachment F.

3. **Leadership**

For the assessment of Leadership, peer reviewers are required to review applicant outputs over the past 10 years (taking into account career disruptions) across each of the four Leadership elements:

- Research Mentoring
- Research Policy and Professional Leadership
- Institutional Leadership
- Research Programs and Team Leadership.

The assessment of Leadership will be against the category descriptors at Table 5 of Attachment F.

**Knowledge Gain (30%)**

NHMRC defines ‘Knowledge Gain’ for the Investigator Grant program as the quality of the proposed research and significance of the knowledge gained. It incorporates theoretical concepts, hypothesis, research design, robustness and the extent to which the research findings will contribute to the research area and health outcomes (by advancing knowledge, practice or policy).

For the assessment of ‘Knowledge Gain’ peer reviewers are to consider:

- the clarity and justification of the of the research hypotheses/rationale
- the strengths and weaknesses of the scientific framework, study design, methods and analyses
• whether the proposal tackles a major question addressing an issue of critical importance to advance the research or health area (not prevalence or magnitude of issue)
• the access to the technical resources, infrastructure, equipment and facilities, and if required, access to additional expertise necessary to achieve the proposed outcomes
• access to the technical resources required to achieve project outcomes
• the potential for significant and transformative changes/outcomes in the scientific knowledge, practice or policy underpinning human health issues
• the potential research outputs including: intellectual property, publications, policy advice, products, services, teaching aids, consulting, contract research, spin-offs, licensing etc.

The significance of the study is not a measure of the prevalence/incidence of the health issue (e.g. cancer versus sudden infant death syndrome) but the extent to which the study will address the health issue.

Applications are assessed relative to opportunity, taking into consideration any career disruptions, where applicable (see Attachment J).

Category descriptors for Knowledge Gain are at Table 6 of Attachment F.
Attachment H. Guidance for Assessing Applications Against the Indigenous Research Excellence Criteria

Panel members 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?

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 an 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 well-being?

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?

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?
Attachment I. Statement of Expectations

The Statement of Expectations outlines the baseline expectations of applicants within each level of Investigator Grant. Applicants who have never received an NHMRC Fellowship or Investigator Grant should refer to these expectations and apply at a level commensurate with their experience and profile. The descriptors provide a broad benchmark and it is not essential that all elements be met.

Leadership Level 3 (L3)
L3 Investigator Grant recipients will be leading international authorities in their research area with demonstrated:
- significant original contributions of major importance that have had a positive impact on health and medical research, the health system and/or the health of the population
- experience in leading a major independent research program(s) involving national and international collaborative networks
- national and international contributions through leadership in their scientific discipline (e.g. in research policy and on advisory committees)
- extensive supervision, mentoring and promotion of early and mid-career researchers
- significant leadership roles within their department, centre, institution or organisation, that extend beyond their research.

Leadership Level 2 (L2)
L2 Investigator Grant recipients will be leading national and rising international authorities in their research area with demonstrated:
- substantial and original contributions that are of major benefit to health and medical research, the health system and/or the health of the population
- experience in leading an independent research program(s) involving national collaborative networks
- national and possibly international contributions to their scientific discipline (e.g. research advisory boards, peer review)
- supervision, mentoring and promotion of early and mid-career researchers
- leadership roles within their department, centre, institution or organisation that extend beyond their research.

Leadership Level 1 (L1)
L1 Investigator Grant recipients will be national authorities in their research area with demonstrated:
- original contributions that are of major benefit to health and medical research, the health system and/or the health of the population
- ability to independently conceive and direct research programs, coordinate a team of researchers and generate national collaborations
- national contributions to their scientific discipline (e.g. public advocacy, peer review, research advisory boards or professional societies)
- supervision, mentoring and promotion of early and mid-career researchers
- contribution(s) within their department, centre, institute or organisation that extend beyond their research e.g. membership of regulatory or management committees.

Emerging Leadership Level 2 (EL2)
EL2 Investigator Grant recipients will be ≤10 years post-PhD (or equivalent) and recognised for their expertise in their research area with demonstrated:
- original contributions of influence in their field of expertise
• ability to contribute to the conception and direction of research projects, while developing independence
• experience in supervising a small research team
• national contributions to their scientific discipline (e.g. public advocacy, community leadership, peer review and professional societies)
• contributions within their department, centre, institution or organisation e.g. organising journal clubs, seminar series etc.

**Emerging Leadership Level 1 (EL1)**

EL1 Investigator Grant recipients will be ≤10 years post-PhD (or equivalent) and will be beginning to gain recognition in their research area with demonstrated:

• original contribution(s) in their field of expertise
• ability to contribute to the conception of research projects
• scientific contributions within their region, state or territory (e.g. community leadership, state level contribution to a professional society)
• limited but developing supervision of research staff and students
• contributions within their department, centre, institution or organisation e.g. organising journal clubs, seminar series etc.

Guidance on relationships between NHMRC Fellowship schemes and the Investigator Grant Levels is outlined in **Table 1** below.

**Table 1. Guidance on relationships between NHMRC Fellowship schemes and Investigator Grant Levels**

<table>
<thead>
<tr>
<th>Current NHMRC Fellowship</th>
<th>Corresponding Investigator Grant Level</th>
</tr>
</thead>
<tbody>
<tr>
<td>Senior Principal Research Fellowship Australia Fellowship</td>
<td>Leadership Level 3</td>
</tr>
<tr>
<td>Principal Research Fellowship Practitioner Fellowship Level 2</td>
<td>Leadership Level 2</td>
</tr>
<tr>
<td>Practitioner Fellowship Level 1</td>
<td>Leadership Level 1</td>
</tr>
<tr>
<td>Senior Research Fellowship Levels A and B</td>
<td></td>
</tr>
<tr>
<td>Career Development Fellowship Level 2</td>
<td></td>
</tr>
<tr>
<td>Career Development Fellowships Levels 1 and 2</td>
<td>Emerging Leadership Level 2</td>
</tr>
<tr>
<td>Translation of Research into Practice (TRIP) Fellowship</td>
<td></td>
</tr>
<tr>
<td>Early Career Fellowship Translation of Research into Practice (TRIP) Fellowship</td>
<td>Emerging Leadership Level 1</td>
</tr>
</tbody>
</table>
Attachment J. NHMRC Relative to Opportunity and Career Disruption Policy

Purpose

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

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

Policy approach

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

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

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

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

Relative to Opportunity considerations during peer review of applications for funding

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

- amount of time spent as an active researcher
- available resources, including situations where research is being conducted in remote or isolated communities
- building relationships of trust with Aboriginal and Torres Strait Islander communities over long periods that can impact on track record and productivity
• clinical, administrative or teaching workload
• relocation of an applicant and his/her research laboratory or clinical practice setting or other similar circumstances that impact on research productivity
• for Aboriginal and Torres Strait Islander applicants, community obligations including ‘sorry business’
• the typical performance of researchers in the research field in question
• research outputs and productivity noting time employed in other sectors. For example, there might be a reduction in publications when employed in sectors such as industry.
• carer responsibilities (that do not come under the Career Disruption Policy below).

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

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

• pregnancy
• major illness/injury
• carer responsibilities.

The period of career disruption may be used:
• to determine an applicant’s eligibility for an Emerging Leadership Investigator Grant
• to allow for the inclusion of additional track record information for assessment of an application
• for consideration by peer reviewers.

To be considered for the purposes of eligibility and peer review, a period of career disruption is defined as:
• a continuous absence from work for 90 calendar days or more, and/or
• continuous, long-term, part-time employment (with defined %FTE) due to circumstances classified as career disruption, with the absence amounting to a total of 90 calendar days or more.

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.

Implementation

Information on how applicants can demonstrate their track record, relative to opportunity, for the purposes of peer review is available in RGMS and in NHMRC’s Guide to Peer Review.

Information on how applicants can demonstrate that a career disruption(s) affects their eligibility to apply for an Emerging Leadership Investigator Grant is also available in RGMS and in the Investigator Grant Guidelines.

1For 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.