THE DEPARTMENT OF FOREIGN AFFAIRS AND TRADE (DFAT) STRONGER SYSTEMS FOR HEALTH SECURITY SCHEME-SPECIFIC PEER REVIEW GUIDELINES

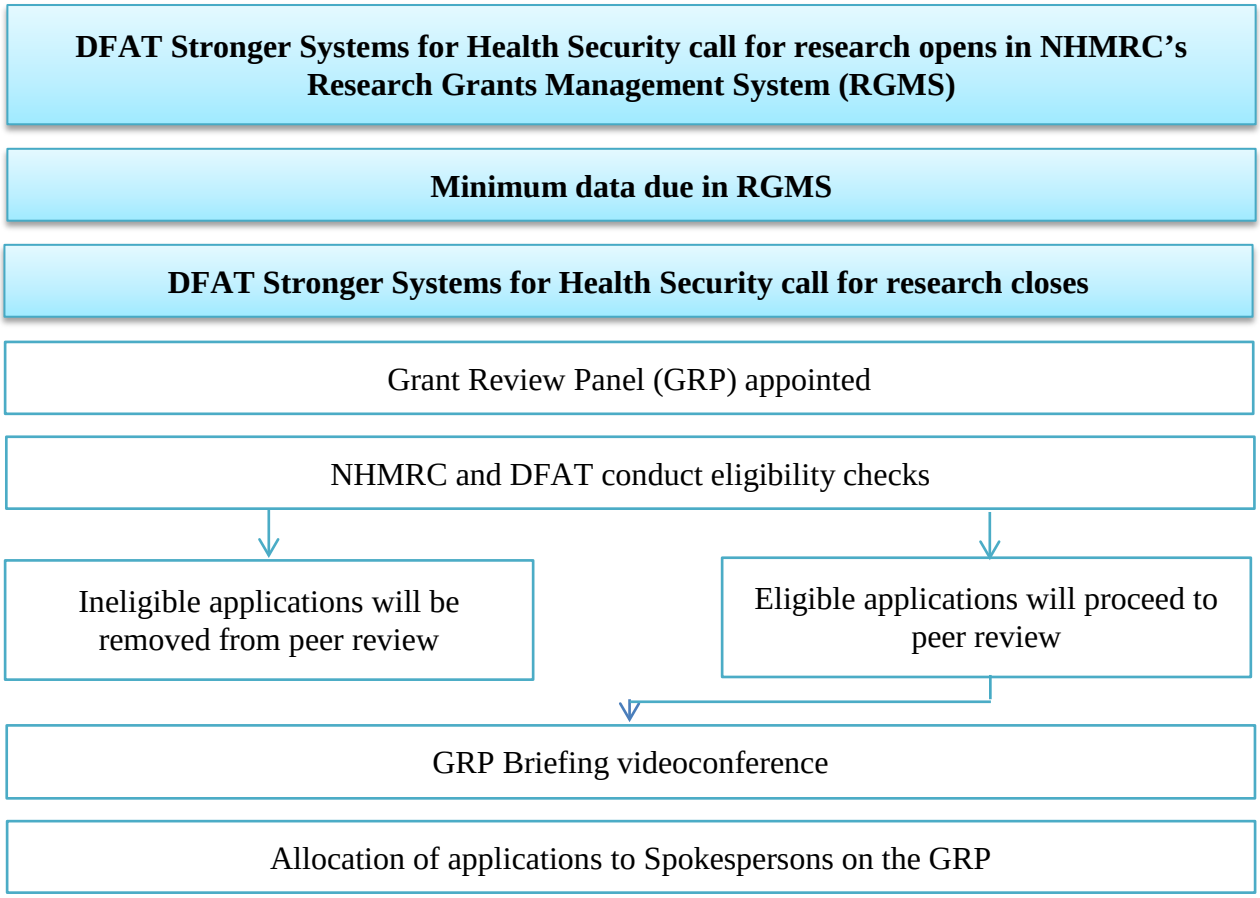
The following sections describe the specific processes, timelines and expectations that apply to the peer review of the DFAT Stronger Systems for Health Security applications.

These scheme-specific guidelines complement and must be read in conjunction with the following supporting documents:

- the *Guide to NHMRC Peer Review 2017*
- the *NHMRC Funding Rules 2017*
- the *Stronger Systems for Health Security Competitive Grant Guidelines*
- the *NHMRC Advice and Instructions to Applicants 2017*
- the *Stronger Systems for Health Security scheme-specific Advice and Instructions to Applicants*

It is recommended that you read the *Guide to NHMRC Peer Review* before reading these scheme-specific guidelines.

1 OVERVIEW OF THE PEER REVIEW PROCESS



Peer Review Process

GRP members to declare Conflicts of Interest in RGMS

Spokespersons scores applications

Not for Further Consideration (NFFC) process

GRP meeting

NHMRC provides to DFAT a final ranked list of applications based on the GRP's final scores

2 ROLES AND RESPONSIBILITIES

The roles and responsibilities of those participating in the DFAT Stronger Systems for Health Security peer review process are identified in the Peer Review Participants table below. These take precedence over the general descriptions in *section 6* of the *Guide to NHMRC Peer Review 2017*.

DFAT Stronger Systems for Health Security Peer Review Participants Table

Role	Responsibilities
GRP Chair	GRP Chairs are appointed to be independent of the review of applications and to manage the process of peer review in accordance with the approved guidelines. The primary duties and responsibilities of the GRP Chair are to ensure NHMRC's procedures are adhered to and that a fair and equitable consideration is given to every application being reviewed by the GRP. Chairs will: Prior to the GRP meeting: • familiarise themselves with documentation relevant to the funding scheme • identify and advise NHMRC of all real or potential CoIs they have with applications assigned to the GRP, and • familiarise themselves with ALL applications being considered by the GRP. At the GRP meeting: • ask members to declare any associations between panel members • keep discussion on time and focused on the assessment process • ensure procedures are followed • ensure appropriate action is taken in relation to declared CoIs promote good engagement by Spokespersons and GRP members • ensure that where appropriate all members consider 'relative to opportunity' and 'career disruption' when

	discussing track record • ensure consistency across reviews of applications, and • assist GRP members in fulfilling their duties and responsibilities.
GRP Assistant Chair	The primary duties and responsibilities of the Assistant Chair include: Prior to the GRP meeting: • familiarise themselves with documentation relevant to the funding scheme • identify and advise NHMRC of all real or perceived CoI they may have with applications to be reviewed by the GRP, and • identify applications for which career disruptions have been submitted. At the GRP meeting: • note the discussed strengths and weaknesses of the application • record details of recommended budgets, and reasons for adjusting the proposed budgets, if applicable, and • ensure that budget discussions are consistent for all applications and inform the Chair if inconsistencies arise.
GRP Member	GRP Members are expected to review all applications with which they are not conflicted. The primary duties and responsibilities of a GRP member include**:** Prior to the GRP meeting: • identify and advise all real or potential CoIs they have with the applications to be reviewed • indicate which applications they have the expertise to review • review the allocated applications against the assessment criteria • ensure that relative to opportunity considerations and career disruptions highlighted in the application are considered • provide assessments that are accurate and honest, and where all claims are capable of being verified (providing citations where appropriate) • score the applications using the category descriptors as a benchmark and, if required prepare a report in RGMS within the prescribed timeframe, and • familiarise themselves with each application, that will be assessed by the GRP (excluding those for which they have a CoI). At the GRP meeting: • provide a fair, impartial and scientific assessment of applications against each assessment criterion

	• act as a Spokesperson for applications in their field of expertise that have been allocated to them • prepare for and participate in panel discussion for each application to the best of their ability • provide a score against each of the assessment criterion for each application reviewed by the GRP, and participate in discussions on the appropriateness of the grant application budget if relevant. GRP members will be assigned as Spokesperson to some applications. The Spokesperson roles require greater analysis and preparation, and are described in the following sections.
Primary Spokesperson (1SP)	The Primary Spokesperson will: • Prior to the GRP meeting: review the allocated applications against the assessment criteria • assess any claims for Career Disruption according to requirements • score the applications using the category descriptors as a guide in RGMS within the prescribed timeframe • prepare speaking notes for the GRP for each application assigned as 1SP • rigorously assess the proposed budget to ensure that Personal Support Packages (PSPs), Direct Research Costs (DRCs) and equipment requests are appropriate for the project and fully justified, and • prepare a recommendation for the GRP to either: o leave the requested budget intact o modify the budget, or o seek clarification from the panel members regarding specific budget request. At the GRP meeting: • provide detailed advice to the panel of any applications that have claimed a career disruption • lead the discussion using prepared notes • provide final scores for allocated applications based on discussions, and • be prepared to discuss the appropriateness or otherwise, of the requested budget to ensure it is appropriate for the project and fully justified.
Secondary Spokesperson (2SP)	The Secondary Spokesperson will: Prior to the GRP meeting: • review the allocated applications against the assessment criteria • score the applications using the category descriptors as a guide in RGMS within the prescribed timeframe • prepare speaking notes for each application assigned to them as 2SP • rigorously assess the proposed budget to ensure that PSPs,

	DRCs and equipment requests are appropriate for the project and fully justified, and
	• prepare a recommendation for the GRP to either:
	  o leave the requested budget intact
	  o modify the budget, or
	  o seek clarification from the panel members regarding specific budget request.
	
	At the GRP meeting:
	• add to the 1SP comments and discussion with reference to prepared notes
	• provide final scores for allocated applications based on discussions, and
	• be prepared to assist the 1SP in discussion on the appropriateness or otherwise, of the requested budget with reference to the individual elements of the budget ensuring PSPs, DRCs and equipment requests are appropriate for the project and fully justified.

NHMRC Staff (Including Secretariat)	NHMRC staff will be responsible for overall administration of the peer review process and may be responsible for the conduct of the following activities in relation to the peer review process:
	
	• approach potential GRP members
	• provide the administrative support and policy advice to the GRP Chair and members, including:
	  o facilitating use of RGMS
	  o maintaining accurate records of CoI
	  o ensuring that the Chair are aware of all CoI declared by members, and
	  o providing advice on the treatment of declared CoI.
	• ensure that GRP members are provided with the necessary information to review each application
	• prepare a list Not for Further Consideration (NFFC) which determines the applications that will progress to full peer review, if required
	• prepare the order in which applications will be accessed during GRP meetings
	• maintain scoring records for each application
	• record outcomes of GRP discussions, and
	• act as the first point of contact for GRP members.

DFAT Staff	DFAT staff may contribute to the peer review process by recommending potential GRP members for NHMRC's consideration. DFAT staff with suitable expertise may also participate as GRP members.
NHMRC Senior Research Scientists	NHMRC Senior Research Scientists with doctoral degrees or extensive research expertise may be involved in: • assisting and advising on the peer review process, and • acting as an alternative independent chair when the GRP Chair have a CoI with the application under

	consideration.
Assigners Academy members	Members of the NHMRC Assigners Academy may support the peer review process by advising on potential GRP members if required.
Community Observer	NHMRC will invite a respected member of the general community to sit in on the GRP meeting to observe that NHMRC policy and procedures are being adhered to. The Observer assists NHMRC in ensuring that the assessment of all applications is fair, equitable and impartial. The Observer will be briefed on GRP procedures prior to the GRP meeting. They will not participate in the discussion of any applications, and will be identified by their name tag. At the GRP meeting: • identify and advise the Panel Chair of all real or potential conflicts they have with applications on the GRP • monitor the procedural aspects of the GRPs, and • provide feedback to NHMRC on the consistency of procedures across all GRPs. The Observer is subject to the same CoI requirements as the GRP members. Where a high CoI exists, the Observer will leave the room.

3 PEER REVIEW PROCESS

The NHMRC peer review process is designed to provide a rigorous, fair, transparent and consistent assessment of the merits of each application according to the *Australian Code for the Responsible Conduct of Research* to ensure that only the highest quality, value for money research is recommended for funding (*section 11.2* of the NHMRC Funding Rules 2017).

All applications are assessed against the assessment criteria as set out in the *Stronger Systems for Health Security Competitive Grant Guidelines***,** using the Category Descriptors at Attachment A.

Applications are assessed relative to opportunity taking into consideration any career disruptions (see section 6.2.1 of the *NHMRC Funding Rules 2017*).

An overview of the DFAT Stronger Systems for Health Security peer review process can be found at *section1*of this document. Further detail about each step is provided below.

3.1 Before the GRP Meeting

3.1.1 Receipt and Initial Processing of Applications

DFAT and NHMRC staff will verify that applications meet eligibility criteria. Applicants will be advised if their application is ineligible. Eligibility rulings may be made at any point in the peer review process.

3.1.2 Appointment of GRP and identification of Conflicts of Interest

NHMRC will establish a GRP and appoint members to provide assessments against submitted applications. Membership may include recommendations from DFAT.

Prior to the GRP meeting an induction session for all members will be conducted via videoconference. The induction session will provide an opportunity for members to ask questions and clarify any matters relating to the peer review process. Attendance is compulsory.

Panel members will be provided access, via RGMS, to the Snapshot Summary Report of each application assigned to the GRP, and will declare their CoIs in accordance with the guidance on the management of CoIs. Refer to *A Guide to NHMRC Peer Review*, *section 4.3*.

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

Some GRP members may have a CoI for which they require a ruling. In this instance, NHMRC staff will assess the information in the declaration and specify a particular level of participation. Members are requested to ensure they include sufficient detail in their declaration to ensure an accurate CoI assessment can be made by NHMRC staff. Important details include:

- In the case of collaborations and relationships (e.g. publications, grants, etc.), did these activities occur five or more years ago, or are they more recent?
- Is the collaboration (e.g. publications, grants, etc.), with a Chief Investigator, or an Associate Investigator?

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

CoIs must be declared at the beginning of the peer review process. However CoIs may be declared at any stage of the peer review process if new conflicts become apparent.

GRP members must not approach applicants, and should ensure that they cannot be identified by applicants at any point during the review process.

3.1.3 Allocation of Spokespersons

Panel members will indicate their ability to act as a Spokesperson on particular applications based on the closest match with their expertise. Taking into account CoI, NHMRC staff will assign each application a 1SP and 2SP. It is expected that each member of the GRP (apart from the Chair and Assistant Chair) will be allocated a similar proportion of applications as 1SP and 2SP.

3.1.4 GRP Members Access Applications

All panel members will be provided with access to the full application where there is a no or low CoI. When accessing the full application, panel members should again check whether they have a CoI not previously evident.

GRP members who become aware of any previously undeclared CoI should contact the NHMRC secretariat immediately. The panel member will be required to delete or destroy any files in their possession pertaining to applications with which they have declared a late high CoI.

3.1.5 Spokespersons Provide Initial Scores

At this point the 1SP and 2SP will provide initial scores in RGMS against each criterion using the seven-point scale (Attachment A).

3.1.6 Removing Less Competitive Applications - Not For Further Consideration (NFFC)

The peer review process may include a step to identify applications that are less competitive than others against the assessment criteria. Applications deemed less competitive may be removed from further consideration based on initial scoring. This process is called the Not for Further Consideration (NFFC).

Should this step be used, the Spokespersons' scores will be used to determine the identification of applications considered to be the least competitive of those assessed the GRP.

An application may only be included on the NFFC list if the application has received a score from **both** the 1SP and 2SP. Up to the bottom 50% of applications may be included on the NFFC list.[1] NHMRC will review all applications appearing on the NFFC list to confirm that no applications have scores from the Spokespersons which are two or more points away from each other.

A NFFC list, tailored for conflicts of interest, will be provided to panel members before the GRP meeting. If a panel member feels strongly that an application warrants rescuing from the NFFC list (and should proceed to full review), they have an opportunity to nominate one application only for consideration by the panel. If a member would like to rescue an application, they should notify the NHMRC Secretariat via email within the given timeframe. Those applications remaining on the NFFC list will be removed from the list for detailed discussion at the GRP meeting.

If a late CoI is declared by the 1SP or 2SP for applications that appear on their NFFC list, a new 1SP or 2SP will be assigned to the application, and the application will be reviewed in detail by the panel. The scores from the conflicted Spokesperson/s will be discarded.

It is important to note that applications on the NFFC list are subject to CoI considerations, as are all applications, and therefore should not be discussed between members.

Once the NFFC list has been finalised, the GRP secretariat will release a running order for the GRP meeting.

Applications not appearing on the NFFC list will automatically proceed to full review.

3.2 At the GRP Meeting (Videoconference)

The GRP will meet via videoconference to review each application.

3.2.1 Declaration of inter-relationships - *(suggested time limit – 10 minutes)*

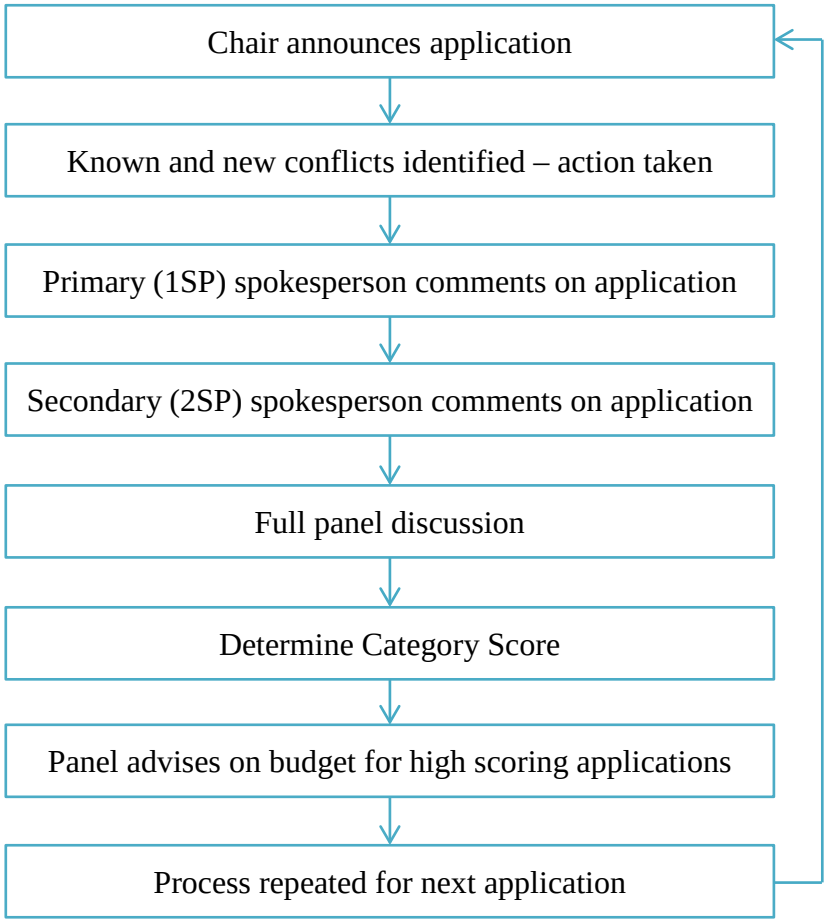
When all members connect, each panel member will be invited to briefly describe their expertise and previous experience sitting on any review panels. During their introductions, members will be asked to declare any relationships with other panel members including:

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

[1] Where the DFAT Stronger Systems for Health Security receives above 15 applications, a maximum of 15 high scoring applications will proceed to full review. Where the DFAT Stronger Systems for Health Security receives less than 15 applications, all applications will proceed to full review except for those that score a Category 3 or below after initial assessment.

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

Review of applications will take place via videoconference and will be conducted as follows:



3.2.2 Chair to announce the application - *(suggested time limit – 2 minutes)*

The Chair will announce the application to be discussed including the title, institutions, and the names of all applicants in the research team.

The Chair will then identify any members that have previously identified a CoI with an application. Those members with a high CoI will be asked to mute/disconnect from the meeting.

The Chair will also invite members to disclose if they have since identified an interest with the application. Where a member declares a new interest at the GRP meeting, the following process will take place:

a. The declaring member must disclose in detail, the nature and extent of the interest and how it relates to the work of the committee.
   i. If the panel determines that the interest is not a personal material interest, and no panel member objects to that determination, the member may remain in on the line.
   ii. If the panel determines that the interest is a personal material interest, the member must mute/disconnect from the meeting.

b. If the disclosing member is required for the assessment of the application for quorum or particular expertise, the panel can make a determination by majority vote that the disclosing member can participate and determine how that participation will occur. For example, the panel may decide that the disclosing member can answer questions, or contribute to the discussion of the application but not participate in the scoring, or that

they should not remain in the meeting or on the line.

c. If the interest is disclosed by the Chair, NHMRC Senior Research Scientists will make the final determination as to whether the interest is a personal material interest that precludes the Chair from involvement. The panel cannot be involved is this determination.
d. No application can proceed until all CoIs have been considered and dealt with appropriately.

If a CoI is declared at the GRP meeting by a Spokesperson, which prevents them from participating in the assessment of the application, a new Spokesperson will be assigned to the application. Discussion of the application will be moved to a later time to give the new Spokesperson/s time to prepare.

Once highly conflicted members have left the meeting, those with a low CoI are allowed to remain), the Chair will then identify the Spokespersons and ask them to begin the assessment discussion.

3.2.3 Primary spokesperson to comment on the application *(Suggested time limit- 5 minutes)*

The 1SP will:

1. Provide a concise summary of the application and discuss the strengths and weaknesses against the assessment criteria. The 1SP will assume that the GRP members are familiar with documentation relating to the application.
2. Ensure that relevant considerations (e.g. track record relative to opportunity, career disruptions) are taken into account.
3. Not make reference to the budget at this stage.

3.2.4 Secondary spokesperson to comment on the application *(Suggested time limit- 3 minutes)*

The 2SP will:

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

3.2.5 Full panel discussion *(Suggested time limit- 10 minutes)*

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

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

3.2.6 Scoring by members *(Suggested time limit- 5 minutes)*

Following the panel's discussion, the Chair will ask the SPs to provide their scores against the four criteria.

The Chair will then ask if any GRP member intends to score two or more away from any of the SPs' four criterion scores. The GRP member must declare this to the GRP and provide a brief justification, which will be recorded by the Secretariat.

All non-conflicted GRP members, excluding the Chair and Assistant Chair, will then confidentially score the application via RGMS Electronic Scoring (E-Scoring). All scoring GRP members will submit their score against each of the four Assessment Criteria using the *Category Descriptors* (Attachment A).

Collation of the members' scores will be managed by the Secretariat. At the completion of scoring, the Secretariat will announce the following results to the GRP:

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

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

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

3.2.7 Discussion of proposed budget *(Suggested time limit- 5 minutes)*

All applications that are deemed category 4 (3.501) or above will trigger a discussion of the proposed budget.

The Chair will facilitate the budget discussion to ensure applications are considered fairly and equitably. The 1SP must be prepared to discuss the proposed budget and comment on the appropriateness of the outlined costs and provide recommendations, if any. Other panel members may also provide relevant comments. Where the GRP deems that the proposed budget is in excess of that required to accomplish the research objectives, appropriate reductions may be recommended and reasons recorded by the Assistant Chair.

When reviewing the budget, GRP members will consider the elements of the budget, including the justification, and provide advice on an appropriate budget for the application. Refer to the *Budget Mechanism for funding commencing in 2018* and *section 8.3.2* of the *NHMRC Funding Rules*. The Assistant Chair and Secretariat will then record budget recommendations as agreed to by the panel. The rationale for differences between the recommended and requested budget will be annotated. The Chair will sign and verify that the budget recommendations have been recorded correctly.

DFAT reserves the right to amend the budgets recommended by the GRP for any grant.

3.3 After the GRP Meeting

The following actions will occur after the GRP meeting concludes:

1) *Confirmation of final ranking* – NHMRC will discuss and confirm with DFAT the ranked list provided at the end of the panel meeting.
2) *Provision of funding recommendations* – Upon receipt of the assessment results from

NHMRC, the DFAT delegate will make the final decisions about which proposals to fund and to what value. For further information, refer to *section 6* of the *Stronger Systems for Health Security Competitive Grant Guidelines*.

3) *Announcement of outcomes* – DFAT will announce outcomes.
4) *Application Assessment Summary* – Applicants are entitled to request a written debriefing on the results of the assessment of their proposals once a Grant Agreement has been signed with the successful applicant/s. This debriefing will provide information on scores achieved against individual criterion. DFAT will not enter into discussion or communications on the content of the feedback provided.

3.4 Retention of GRP Documentation

GRP members are to retain their notes made during the peer review process for six months after the GRP meeting. After this date, both hard copy and electronic notes should be destroyed to ensure the maintenance of confidentiality. In exceptional circumstances, NHMRC may request a GRP member to comment on issues raised in a complaint.

Category Descriptors for Assessment Criteria – DFAT Stronger Systems For Health Security

	Likely impact of the research on improved health security in Southeast Asia and the Pacific (35%)	**Clear strategy to build research capacity in health security-related health systems and/or policy research (25%)**	**Rigour of proposal (20%)**	**Proven track record *relevant to objectives of the call* (20%)**
7 Outstanding by international standards	• Has a well-defined health systems and/or policy focus related to health security. • Clearly strongly articulates how the research will contribute to the evidence base for health security in the region. • Strongly demonstrates the need and demand for that evidence from end users. • Clearly highlights processes that engage with users in the design of the study and throughout the life of the project or that involve users as part of research teams in co-production of knowledge. • Persuasively articulates how the research is likely to impact and influence any relevant health security policies and practices, including clarity on who will benefit from the research, how they will benefit and what will be done to ensure that they can benefit. • Presents well-defined plans	• Clear and comprehensive plans and methodology to build health security research capacity (including capability, mentoring and career development) for male and female researchers in Southeast Asia and the Pacific, and junior researchers in Australia. • Research will be highly effective in promoting working collaborations and intellectual exchange between Australia and research institutions in the region. • Promotes highly effective mutually beneficial engagement by developing equitable, effective research partnerships with shared work based on common interests and agendas.	• Research objectives are well defined, coherent and realistic. • Proposal design is near flawless and will achieve objectives within stated timeframe and budget. • Plans for monitoring and evaluation of the research grant are well articulated. • Timeframes for demonstrating results are well defined. • Proposal persuasively addresses risks and their management, including any issues of sustainability. • Research adequately addresses gender issues and exhibits gender and socially inclusive research processes.	• Research institutions and the proposed team leader(s) have a proven record of previous Health Systems and/or Policy Research being effectively transferred into policy and/or practice in the region. • Evidence provided of previous highly effective engagement and communication processes with end users. • Lead researchers have a strong regional reputation for health systems and/or policy research, and/or health security related research and have proven influence in their field.

Category Descriptors for Assessment Criteria – DFAT Stronger Systems For Health Security

	for dissemination and advocacy for policy uptake and/or systems change. This will include details of how the research findings will be presented in an accessible format to key end users, including DFAT, and articulates ways in which this uptake might be monitored.			
6 Excellent	• Has a strong health systems and/or policy focus related to health security. • Soundly articulates how the research will contribute to the evidence base for health security in the region. • Soundly demonstrates the need and demand for that evidence from end users. • Strongly highlights processes that engage with users throughout the life of the project or that involve users as part of research teams in co-production of knowledge. • Effectively articulates how the research is likely to impact and influence any relevant health security policies and practices, including clarity on who will benefit from the research,	• Clear and strong plans and methodology to build health security research capacity (including capability, mentoring and career development) for male and female researchers in Southeast Asia and the Pacific, and junior researchers in Australia. • Research will be very effective in promoting working collaborations and intellectual exchange between Australia and research institutions in the region. • Promotes very effective mutually beneficial engagement by developing equitable, effective research partnerships with shared work based on common	• Research objectives are clearly defined and very coherent. • Proposal design is excellent and highly likely to achieve objectives within stated timeframe and budget. • Plans for monitoring and evaluation of the research grant are well articulated. • Timeframes for demonstrating results are clearly articulated. • Proposal effectively addresses risks and their management, including any issues of sustainability. • Research adequately addresses gender issues and exhibits gender and socially inclusive research processes.	• Research institutions and the proposed team leader(s) have a strong record of previous health systems and/or policy Research being effectively transferred into policy and/or practice in the region. • Evidence provided of previous reasonably effective engagement and communication processes with end users. • Lead researchers have a well-established regional reputation for health systems and/or policy research, and/or health security related research and have proven influence in their field.

Category Descriptors for Assessment Criteria – DFAT Stronger Systems For Health Security

	how they will benefit and what will be done to ensure that they can benefit. • Presents strong plans for dissemination and advocacy for policy uptake and/or systems change. This will include details of how the research findings will be presented in an accessible format to key end users, including DFAT, and articulates ways in which this uptake might be monitored.	interests and agendas.		
5 Very good	• Has a sound health systems and/or policy focus related to health security • Clearly articulates how the research will contribute to the evidence base for health security in the region • Clearly demonstrates the need and demand for that evidence from end users. • Soundly highlights processes that engage with users throughout the life of the project or that involve users as part of research teams in co-production of knowledge. • Clearly articulates how the research is likely to impact and influence any relevant	• Clear and sound plans and methodology to build health security research capacity (including capability, mentoring and career development) for male and female researchers in Southeast Asia and the Pacific, and junior researchers in Australia. • Research will be effective in promoting working collaborations and intellectual exchange between Australia and research institutions in the region. • Promotes effective mutually beneficial engagement by	• Research objectives are clearly defined and coherent. • Proposal design is raises a few minor concerns but is likely to achieve objectives within stated timeframe and budget. • Plans for monitoring and evaluation of the research grant are soundly articulated. • Timeframes for demonstrating results are soundly articulated. • Proposal appropriately addresses risks and their management, including any issues of sustainability. • Research adequately	• Research institutions and the proposed team leader(s) have a sound record of previous health systems and/or policy research being effectively transferred into policy and/or practice in the region. • Evidence provided of previous effective engagement and communication processes with end users. • Lead researchers have a sound regional reputation for health systems and/or policy research, and/or health security related research and have proven influence in their field.

Category Descriptors for Assessment Criteria – DFAT Stronger Systems For Health Security

	health security policies and practices, including clarity on who will benefit from the research, how they will benefit and what will be done to ensure that they can benefit. • Presents sound plans for dissemination and advocacy for policy uptake and/or systems change. This will include details of how the research findings will be presented in an accessible format to key end users, including DFAT, and articulates ways in which this uptake might be monitored.	developing equitable, effective research partnerships with shared work based on common interests and agendas.	appropriately addresses gender issues and exhibits gender and socially inclusive research processes.	
4 Good	• Has a satisfactory health systems and/or policy focus related to health security. • Satisfactorily articulates how the research will contribute to the evidence base for health security in the region. • Satisfactorily demonstrates the need and demand for that evidence from end users. • Satisfactorily highlights processes that engage with users in the design of the study and throughout the life of the project or that involve	• Satisfactory plans and methodology to build health security research capacity (including capability, mentoring and career development) for male and female researchers in Southeast Asia and the Pacific, and junior researchers in Australia. • Research promotes working collaborations and intellectual exchange between Australia and research institutions in the	• Research objectives are clearly defined and coherent. • Proposal design and likelihood of achieving objectives within stated timeframe and budget raises some concerns. • Plans for monitoring and evaluation of the research grant are satisfactorily articulated. • Timeframes for demonstrating results are satisfactorily articulated. • Proposal satisfactorily	• Research institutions and the proposed team leader(s) have a satisfactory record of previous health systems and/or policy research being effectively transferred into policy and/or practice in the region. • Evidence provided of previous engagement and communication processes with end users. • Lead researchers have a satisfactory regional reputation for health systems

Category Descriptors for Assessment Criteria – DFAT Stronger Systems For Health Security

	users as part of research teams in co-production of knowledge.Satisfactorily articulates how the research is likely to impact and influence any relevant health security policies and practices, including clarity on who will benefit from the research, how they will benefit and what will be done to ensure that they can benefit. • Presents satisfactory plans for dissemination and advocacy for policy uptake and/or systems change. This will include details of how the research findings will be presented in an accessible format to key end users, including DFAT, and articulates ways in which this uptake might be monitored.	region. • Promotes mutually beneficial engagement by developing equitable, effective research partnerships with shared work based on common interests and agendas.	addresses risks and their management, including any issues of sustainability. • Research satisfactorily addresses gender issues and exhibits gender and socially inclusive research processes.	and/or policy research, and/or health security related research and have influence in their field.
3 Marginal	• Has some health systems and/or policy focus related to health security. • Does not satisfactorily articulate how the research will contribute to the evidence base for health security in the region. • Unsatisfactorily demonstrates	• Plans and methodology to build health security research capacity (including capability, mentoring and career development) for male and female researchers in Southeast Asia and the Pacific, and junior researchers in Australia are	• Research objectives are not satisfactorily defined or coherent. • Proposal design and likelihood of achieving objectives within stated timeframe and budget raises several concerns. • Plans for monitoring and	• Research institutions and the proposed team leader(s) have an unsatisfactory record of previous health systems and/or policy research being effectively transferred into policy. and/or practice in the region • Some evidence provided of

Category Descriptors for Assessment Criteria – DFAT Stronger Systems For Health Security

	the need and demand for that evidence from end users. • Identifies some processes that engage with users in the design of the study and throughout the life of the project or that involve users as part of research teams in co-production of knowledge. Does not satisfactorily articulate how the research is likely to impact and influence any relevant health security policies and practices, including clarity on who will benefit from the research, how they will benefit and what will be done to ensure that they can benefit. • Presents some plans for dissemination and advocacy for policy uptake and/or systems change. This will include details of how the research findings will be presented in an accessible format to key end users, including DFAT, and articulates ways in which this uptake might be monitored.	not satisfactorily defined. • Research poorly promotes working collaborations and intellectual exchange between Australia and research institutions in the region. • Promotes some mutually beneficial engagement by developing equitable, effective research partnerships with shared work based on common interests and agendas.	evaluation of the research grant are poorly articulated. • Timeframes for demonstrating results are poorly articulated. • Proposal does not satisfactorily address risks and their management, including any issues of sustainability. • Research does not satisfactorily address gender issues and is unlikely to satisfactorily exhibit gender and socially inclusive research processes.	previous engagement and communication processes with end users. • Lead researchers have a unsatisfactory regional reputation for health systems and/or policy research, and/or health security related research and have some influence in their field.
2 Unsatisfactory	• Has a poor health systems and/or policy focus related to health security.	• Poorly defined plans and methodology to build health security research capacity	• Research objectives are poorly defined. • Proposal design and	• Research institutions and the proposed team leader(s) have a poor record of previous

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	• Poorly articulates how the research will contribute to the evidence base for health security in the region. • Poorly demonstrates the need and demand for that evidence from end users. • Identifies little or no processes that engage with users in the design of the study and throughout the life of the project or that involve users as part of research teams in co-production of knowledge. • Poorly articulates how the research is likely to impact and influence any relevant health security policies and practices, including clarity on who will benefit from the research, how they will benefit and what will be done to ensure that they can benefit. • Presents poor plans for dissemination and advocacy for policy uptake and/or systems change. This will include details of how the research findings will be presented in an accessible format to key end users,	(including capability, mentoring and career development) for male and female researchers in Southeast Asia and the Pacific, and junior researchers in Australia. • Research poorly promotes working collaborations and intellectual exchange between Australia and research institutions in the region. • Unlikely to promote mutually beneficial engagement by developing equitable, effective research partnerships with shared work based on common interests and agendas.	likelihood of achieving objectives within stated timeframe and budget raises several major concerns. • Plans for monitoring and evaluation of the research grant are poorly articulated. • Timeframes for demonstrating results are poorly articulated. • Proposal risks and their management, including any issues of sustainability are poorly addressed. • Research poorly addresses gender issues and is unlikely to exhibit gender and socially inclusive research processes.	health systems and/or policy research being effectively transferred into policy and/or practice in the region. • Little evidence provided of previous engagement and communication processes with end users. • Lead researchers have a poor regional reputation for health systems and/or policy research, and/or health security related research and have little influence in their field.

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	including DFAT, and articulates ways in which this uptake might be monitored.			
1 Poor	• Has no health systems and/or policy focus related to health security. • Does not articulate how the research will contribute to the evidence base for health security in the region. • Does not demonstrates the need and demand for that evidence from end users. • Does not demonstrate processes that engage with users in the design of the study and throughout the life of the project or that involve users as part of research teams in co-production of knowledge. • Does not demonstrate how the research is likely to impact and influence any relevant health security policies and practices, including clarity on who will benefit from the research, how they will benefit and what will be done to ensure that they can benefit. • Does not provide plans for dissemination and advocacy	• No plans or methodology to build health security research capacity (including capability, mentoring and career development) for male and female researchers in Southeast Asia and the Pacific, and junior researchers in Australia. • Research would not promote working collaborations and intellectual exchange between Australia and research institutions in the region. • Would not promote mutually beneficial engagement by developing equitable, effective research partnerships with shared work based on common interests and agendas.	• Research objectives are not defined or coherent. • Proposal design and likelihood of achieving objectives within stated timeframe is unlikely. • Plans for monitoring and evaluation of the research grant are not articulated. • Timeframes for demonstrating results are not articulated. • Proposal does not address risks and their management, including any issues of sustainability. • Research does not address gender issues and would not exhibit gender and socially inclusive research processes.	• Research institutions and the proposed team leader(s) does not have a proven record of previous health systems and/or policy research being effectively transferred into policy and/or practice in the region. • No evidence provided of previous engagement and communication processes with end users. • Lead researchers do not have a regional reputation for health systems and/or policy research, and/or health security related research and have not proven influence in their field.

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	for policy uptake and/or systems change. This will include details of how the research findings will be presented in an accessible format to key end users, including DFAT, and articulates ways in which this uptake might be monitored.			