

Dutch Kidney Foundation Call for Pre-Proposals Collaboration Grant 2020

Information sheet 29 January 2020



The Dutch Kidney Foundation (DKF) Grant Requirements ('Subsidievoorwaarden Nierstichting Nederland') apply to all awarded DKF subsidies as well as all proposals for DKF subsidies. Applicability of general and other conditions of the applicant, the applicant's institute and of third parties is explicitly excluded.

Disclaimer

The execution of a DKF Call for proposals, selection of pre-proposals for full application and positive DKF grant award decisions are conditional on DKF revenues and budgetary means. The DKF explicitly reserves the right to cancel an initiated Call for proposals, to suspend a running procedure or to lower a grant amount in relation to earlier statements.

Grant

The Collaboration Grant is an initiative of the section Care & Innovation (C&I) of the Dutch Kidney Foundation (DKF). The advisory board for this call is the Scientific Board (Wetenschappelijke Raad, WR). The C&I Program Committee (PC) has decision authority.

Call and budget 2020

- Collaboration Grants are part of a Call for Pre-proposals. The deadline for pre-proposals is **Wednesday the 8th of April 2019, 23:59h** (digital).
- The deadline for full applications for selected pre-proposals is **Wednesday the 1st of July 2020, 23:59h** (digital).
- The total available budget for this Call is € 500.000 (1 Grant).

Scope

This call is open to all topics relevant to kidney patients and/or prevention of (progression of) chronic kidney disease (except renal cancer) and to all types of research ranging from basic to implementation and from behavioural to social to medical research, within the conditions of this grant.

Definitions

- **Behavioural and Social** sciences are broadly conceived. Examples of relevant disciplines include psychology, health care science, nursing science, sociology, sexuality studies, gerontology, social work research, cognitive science and public health research.
- **Medical** research encompasses the complete spectrum of medical kidney research from basic to clinical (applied, translational).
- An **Organisation** is defined as a university, UMC, research organisation, or hospital in the Netherlands. A UMC is regarded as a separate Organisation from the university it belongs to.
- A **Research Group** is a group of closely collaborating researchers within an Organisation, usually within a formal subdivision (e.g. department) of the Organisation.
- A **Participating Research Group** is a Research Group that is scheduled in the grant proposal to be financially supported by this grant or that contains one or more researchers that are scheduled to invest 4 hours or more per week in the project. A Participating Research Group is indispensable to realize the goals of the project. In a project, the Participating Research Groups work closely together to achieve the common project goal.
- An **Advising Research Group** is a Research Group that has an advisory role in the project and is not scheduled in the grant proposal to be financially supported by the grant.
- A Research Group in the grant proposal is either Participating or Advising.
- The **Project Team** of a project executes the project. The Project Team consists of a number of researchers from the Participating Research Groups.

Aim

To tackle a question that is important from the patient perspective in a strong collaboration between Medical and Behavioural / Social Research Groups. The patient perspective drives the project's subject matter, goal and approach. Projects aim at making a difference for patients.

- Solving questions from the **patient perspective**.
- Promoting strong and complementary **collaboration** between Medical and Behavioural / Social Research.
- Reaching more **translational impact** to improve the quality of life and quality of care of kidney patients and/or the prevention of (progression of) chronic kidney disease.

Research Theme Examples

- Access to prevention and care: e.g. transplantation and organ donation, lifestyle interventions.
- Adherence: e.g. post transplantation medication, blood pressure, diet and lifestyle interventions.
- Diversity: e.g. health care and ethnicity, patient choices, organ donation and ethnicity.
- Living with chronic kidney disease: e.g. fatigue, itch, passivity, adverse effects of medication or therapies, care burden on the patient's care givers and social network.
- Participation: e.g. depression and anxiety, social participation, employment.
- Societal context: e.g. composition of food products, organ donation and social media, financial incentives and organ donation, financial incentives and health care.
- Variation in prevention and care: e.g. 'postal code health care', medication schemes, therapy eligibility.

Applicant

Behavioural or social scientists with a strong track record can apply. The applicant is working within an organisation in the Netherlands.

Patient involvement

Patients must be involved in the early stages of a project proposal for participation and/or advice. A PI whose pre-proposal is accepted for full application must involve patients in the Project Team and/or must involve patients to advise about the project when writing the full proposal. A first step in establishing patient involvement is to contact the Dutch Kidney Patient Association (Nierpatiënten Vereniging Nederland), a local kidney patient association or an organization supporting patients with a specific kidney disease. Please take care contacting patient organizations and patients timely.

Criteria and Priorities

Pre-proposals and selection for full applications are assessed using the criteria listed below:

- Scientific quality
- Solving questions from the patient perspective
- Strong and complementary collaboration, (perspective for) a durable working relation
- Expected translational impact

Full proposals are assessed on collaboration, relevance and quality using the assessment criteria as listed below. A detailed description of the criteria can be found in the 'DKF Criteria Set' on our website for professionals. Furthermore, Collaboration projects fit in with '[Nierziekte de baas](#)', the joint Dutch renal strategic agenda for innovation and research (In English '[Beating kidney disease](#)'), and the [Dutch National Research Agenda](#).

Collaboration Call

- Solving questions from the patient perspective
- Strong and complementary collaboration, (perspective for) a durable working relation
- Expected translational impact

Relevance

- Innovative potential
- Cost-benefit

- Choice of target group(s) (if applicable)
- Knowledge transfer, implementation and follow-up

Quality

- Rationale and intervention
- Work plan
- Human studies (if applicable)
- Animal studies (if applicable)
- Approach and feasibility

Proposals are assessed on relevance and quality from the patient's perspective according to the following criteria:

- Relevance for (future) patients
- Patient reported outcome measures
- Feasibility and Risks
- Information and Support
- Patient participation
- Communication of results

Conditions

The DKF General Funding Requirements (*1 January 2017*) apply. Additional conditions are described below.

1. Collaboration

- The number of Participating Research Groups is at least two and at most four.
- The Project Team consists of researchers from Participating Research Groups. A project's set of Participating Research Groups consists of one or more Behavioural / Social Research Groups with one or more Medical Research Groups from one or more Organisations.
- The DKF requires a Consortium whose proposal is accepted for full application to start a collaboration with the Dutch Kidney Patient Association (Nierpatiëntenvereniging Nederland) aiming to involve patients during the set-up of the project.

2. Participation

- The applicant's working base is a research institute in the Netherlands.
- The project is executed in the Netherlands, parts of the research may be performed abroad.
- The DKF encourages cooperation with foreign research institutes.
- The project must have involvement of clinical nephrologists.
- The expertise of each Participating Research Group is indispensable to realize the research goals.

3. Grant

- Proposals submitted to this call can not be submitted in other DKF calls in the same calendar year. This applies to pre-proposals (whether they are selected for full application or not) as well as full applications.
- A Collaboration Grant awards up to € 500.000 for a research period of 3 up to 5 years. (Proposals for smaller projects can be submitted in the DKF Innovation Call, PhD Student Call and Kolff Call. Note that specific conditions apply.)
- A proposal may include a budget for extra expenses (outside the PFM lump sums for personnel years) for fees for patient representatives, equipment and consumables, and for outsourcing technical parts of the project. This budget for extra expenses must not exceed 20 percent of the total requested budget. The extra budget for outsourcing (as part of the budget for extra expenses) must not exceed 10 percent of the total requested budget. This budget for extra expenses and its motivation have to be specified on the application form. The total maximum budget for a Collaboration Grant remains € 500.000. The DKF will assess the proportionality of the extra budget proposed.
- The DKF encourages a Grant to be co-funded by other organisations and companies. In that case:
 - There are no (potential) conflicts between the conditions and requirements of this Grant and the conditions and requirements of the co-funder(s);
 - Co-funding is unconditional with respect to intellectual property rights and publication of results;
 - A contract for co-funding must be approved by the DKF.

4. Agreements, Data Sharing and Intellectual Property Rights

- After a Collaboration Grant has been awarded, the DKF decides on the structure of agreements depending on the project. For instance, the DKF may ask the participants to sign a Grant Agreement with the DKF and a Consortium Agreement between themselves. Templates for the agreements are then provided by the DKF. Factors in this decision are for instance the number and kinds of participating organisations.
- Project participants shall comply with the DKF Data Sharing Policy and GDPR. Participants must strive for rapid and wide availability without restrictions of research data resulting from research funded by the Innovation Grant. Data availability may be delayed as a consequence of procedures for protection of intellectual property rights (IPR).
- IPR protection is handled according to the ownership follows inventorship principle.
- IPR management must be conducted in collaboration with the DKF and the IPR departments of the participating research institutes. Innovation participants timely inform the DKF of any plans and activities regarding IPR protection and licensing or IPR transfer to third parties.
- The DKF will not develop an IPR portfolio.
- The DKF may challenge planned IPR protection or patent usage that it considers to be inhibiting or restraining scientific endeavour, renal research or advances in renal patient care/prevention of CKD.
- Project participants must timely report to the DKF any results that are of value for the communication of results of DKF projects: e.g. forthcoming publication in a prominent scientific journal, forthcoming publication of research results that have a high impact on patient care, etc.

5. Publications

- The DKF encourages research groups to implement and follow the ARRIVE (Animal Research: Reporting of In Vivo Experiments) guidelines in the design and reporting of animal research to increase its reproducibility and quality.
- The DKF supports and encourages Open Access publishing, preferably via the Gold Route which makes the final version of an article freely and permanently accessible for everyone, immediately after publication. More information can be found on openaccess.nl.

6. Symposia

The DKF strongly encourages project teams to organise symposia to strengthen cohesion and collaboration, to improve project impact and to promote dissemination, transdisciplinary exchange, communication and publicity of the results. Support for direct costs can be requested in the separate Consortium Meeting Grant. More information, incl. conditions that apply, can be found in the Infosheet Consortium Meetings.

Application and Assessment Procedure

More information on the assessment procedure can be found in the 'Info sheet Assessment Procedure Collaboration Grant'.

1. Application

- A Collaboration Grant funding round has a call for pre-proposals followed by full application upon invitation. Full application without pre-application is not admitted.
- Grant proposals are assessed by the DKF on complying with the conditions.
- Pre-applications, full applications and rebuttals are written in English, except for the section 'Patient Perspective' in the full application that is completed in Dutch. The most recent version of the relevant DKF form is used for submission.

2. Selection of Pre-proposals

WR members advise the DKF individually on selecting pre-proposals for submission of full proposals using the criteria mentioned in this information sheet. Sufficient project quality is conditional on selection for full application. In case of five or less pre-proposals, all are selected for full application. Otherwise, the selection model described below is followed.

The model is based on each WR member distributing an allotted number of points over the pre-proposals (0, 1, or 2 points per pre-proposal). The DKF selects for full application the first five pre-proposals from the resulting ranking.

- The number of points for each WR member equals the number of pre-proposals in which there is no (potential) conflict of interest. For a description of situations considered as (potential) conflict of interest, see 'Code of Conduct for the Granting Process' (version 27 June 2018).
- WR members assign 0,1 or 2 points to each pre-proposal (0 = poor/fair, 1 = good, 2 = very good/excellent). For a fair and balanced scheme, each WR member must assign exactly all his/her points.
- The DKF calculates for each pre-proposal its score as the sum of points, corrects these score for the possible maximum score of the pre-proposal and ranks the corrected scores.

Pre-proposals with a score of 0 are not selected, so a smaller selection than five is possible. In case of more pre-proposals ranking fifth, the PC decides on allowing for full application in consultation with the (vice-)chairs of the WR. The invitation for submitting a full proposal is non-binding.

3. Assessment of Full Proposals

Each full proposal for a large Kolff Grant is reviewed by at least two scientific reviewers and by a patient panel coordinated by the Dutch Kidney Patient Association. Possible conflicts of interest are to be avoided in appointing reviewers. The scientific reviewers assess the collaboration, relevance and scientific quality of the grant proposal according to the collaboration, relevance and quality criteria respectively. The patient reviewers assess the relevance and quality from the patient's perspective according to a specific set of criteria. Subsequently, two WR members provide a summarizing assessment of each full proposal based on the scientific and patient reviews.

A representative of the patient panel will be present at the WR meeting in order to put forward the patient views. After discussing the grant proposal, the participating board members will cast their votes in the form of three scores (1 to 10) for collaboration, relevance and quality each in anonymous form. WR members involved in a grant proposal under discussion are excluded from discussion and ranking of the proposal.

Individual scores of the board members are used to calculate a mean collaboration, relevance and quality score for each grant proposal. The final score of a grant proposal equals the average of the three scores. The final scores of all applications will be ranked in descending order. The PC takes the grant award decisions within the framework of the following rules.

- Grant proposals with a final score ≥ 7 are eligible for funding.
- If the total budget is insufficient for funding all applications with a final score ≥ 7 the final ranking order will be decisive.
- Grant proposals with a final score < 6 or a collaboration score < 6 or a quality score < 6 or a relevance score < 6 are not eligible for funding.
- If the total budget is larger than necessary for funding all applications with a final score \geq than 7, grant proposals with a final score ≥ 6 and < 7 will be eligible for funding.
- Grant award decisions are either positive or negative.

The DKF will inform applicants on the decision on their grant proposals within 6 weeks after the WR meeting.

Reporting

The project leader of a grant reports in compliance with the DKF General Requirements and the letter of awarding.

Information

More information can be found on our [website](#). For questions about this call please contact our Secretary Healthcare and Innovation, research@nierstichting.nl or +31(0)35 697 8015.