





# **Being a Peer Reviewer**

## A Guide for Patient Partners on Peer Review Panels

Peer review is a collaborative process in which a multi-disciplinary group of experts critically evaluate applications for research or award grant funding. It may also be utilized to adjudicate abstracts, presentations, or workshop submissions for a conference or event.

TRANSFORM HF and TRCHR include patient partners as members of their review panels, to contribute their lived experience as cardiac patients or caregivers to the decision-making process. Experience as a researcher is not required for people with lived experience (PWLE or PLEX) to meaningfully participate in the peer review process. If you have been selected to participate as a member of a peer review panel for a grant or award competition, this guide will orient you to the peer review process and provide tips for how to constructively review funding applications.

For a visual and detailed overview of the TRANSFORM HF Peer Review Process, be sure to check out our infographic **here**. It provides a clear, easy-to-follow breakdown of each stage in the process.

## **Peer Review Process: Patient Partner Role**

#### WHAT TO EXPECT

- Patient partner reviewers have the same status and weight of decision-making as other reviewers on the peer review panel.
- Patient partners reviewers contribute:
  - Their own experience of heart failure (HF) and health care
  - The perspective of patients who may benefit from or be the users of the research outcome or award
  - Their experience as patient partners in clinical or research projects
  - Their other life experience and expertise.
- A patient partner may be the only reviewer that has experience of the condition or intervention that is the subject of a research proposal, or knowledge of the practical reality for patients or health care providers who are the target users of a solution or intervention.
- Patient partners are not expected to be an expert in the technical or clinical aspects of research study design.
- Patient partners are expected to review the applications assigned, evaluate them against the criteria to the best of their knowledge and experience, and contribute fully to the discussions during the peer review panel.
- The contact for any questions during the peer review process is the Director of TRANSFORM HF.

### **ACTIONS TO TAKE**

Before agreeing to be a peer reviewer, you should confirm:

- How many applications will be assigned for your review?
- What is the expected time commitment?
- · What compensation is being offered?
- When will you receive the applications?
- What are the deadlines to submit your scores and comments?
- How and when are you expected to participate in peer review panel meetings?

Complete relevant <u>Canadian Institutes for</u> <u>Health Research (CIHR)</u> training before your first participation in a peer review panel:

- Bias in peer review
- Sex and Gender Training Modules

Consider other training on peer review:

 <u>People with Lived Experience in Peer</u>
 <u>Review course</u>, Kidney Foundation of
 Canada et al

## **Confidentiality in Peer Review**

#### MAINTAINING CONFIDENTIALITY

- Applications, documentation and information provided to peer reviewers for the funding competition must be treated as confidential, and only used to review applications and make funding decisions for that competition.
- Documentation is to be stored in a secure folder to prevent unauthorized access. Access to the shared folder will be provided, along with instructions on how to access the shared folder.
- The identities of peer reviewers on a panel are confidential, and applicants are not informed who assessed their application.
- Peer reviewers, including patient partner reviewers, may seek clarification about the peer review process from the Director, but must score applications and develop comments independently.
- Discussions at peer review panels are confidential during and following the review panel process.
- Comments on an application by peer reviewers are anonymized and transmitted to the applicant without attribution to individual reviewers.

#### **ACTIONS TO TAKE**

- Read and sign the Confidentiality Form and return it to the Director.
- Maintain indefinitely the confidentiality of the peer review process, the applications you reviewed, and the deliberations of the peer review panel.

## **Conflict of Interest in Peer Review**

### **DECLARING CONFLICTS OF INTEREST**

- The integrity of the peer review process depends on ensuring that reviewers do not have a real or perceived conflict of interest with any of the applications they are reviewing and scoring.
- During the orientation, all reviewers will be asked to declare if they have a conflict of interest with any of the applicants/applications.
- Assignment of applications to reviewers is determined in light of declared conflicts. Any reviewer with a declared conflict will be recused from scoring that application.
- During peer review panel meetings, conflicted reviewers are excluded from discussion regarding any application with which they have a conflict of interest. In virtual meetings, reviewers with a conflict may be moved into another "meeting room" during the discussion of the application.
- Conflict of interest for patient partner reviewers may arise if they are:
  - Named or intending to work as a patient partner on an application for funding in this competition.
  - Previously or currently engaged as a patient partner with the principal/co-investigator/co-applicant's other research project(s).
  - A clinical patient of the principal or co-investigator.
  - Unable to be objective about an application for any reason, including their own lived experience.
- All conflicts of interest are documented and shared with all reviewers.

#### **ACTIONS TO TAKE**

- Review the summaries of all applications and consider if you have any conflicts of interest.
- Declare any conflicts to the Director and the panel. If you are unsure whether you have a conflict, seek clarification from the Director.
- It is always best to disclose potential conflicts, to ensure everyone is aware and to determine if a conflict exists (or not).
- Maintain confidentiality regarding conflicts, along with all other deliberations and evaluations.

## **Evaluating & Scoring the Proposals**

### **Getting ready:**

- Ensure you can access the grant/award competition folder and documents.
- Review the original call for proposals and funding criteria here.
- Review the detailed evaluation criteria and scoring rubric for the grant/award competition. If you have questions, ask the Director.
- Refresh your understanding of relevant TRANSFORM HF goals and principles.
- Bring your patient partner perspective, knowledge of the issue addressed by the project and your other relevant experience and expertise to your assessment.
  - Begin by reading the lay summaries of all applications assigned to you. You may find it easier to assess and rank applications if you start with a familiar topic or one you have an interest in.

## **Evaluating each application against funding criteria:**

- Start with the lay summary, then read through the proposal.
- Review the descriptions of each scoring criteria element as set out in the marking rubric.
- Review the relevant section(s) of the application and assign notional scores that reflect how strong (or weak) the application is on that element.

## **Questions to Ask Yourself**

## **Alignment:**

 How well does the project align with TRANSFORM HF objectives?

## **Relevance and Potential Impact:**

- Does the project aim to answer an important question relevant to HF patients, providers and the health system?
- Does the project aim to achieve a goal that is new or novel?
- Will the project benefit HF patients, providers and/or health care delivery or system?

### **Quality of the Team:**

- Is there a mix of co-investigators/applicants from different institutions or specialties, diversity, PWLE and/or relevant communities that reflect TRANSFORM HF's members?
- Do the applicants have the expertise to successfully conduct the research?
- Is there a mix of experienced and early career researchers, trainees and patient partners/PWLE?
- How will the team access collaborators to support the work?

### **Research Methods:**

- Is the plan for collecting and analyzing research data appropriate? Will it obtain the results projected?
- Does the methodology include co-design with patients and/or users of the end product?
- Can you think of gaps or risks that have not been addressed?

## **Patient Engagement:**

- Are patient partners engaged on the team at the proposal stage?
- Is there a plan for meaningful ongoing engagement of patient partners/PWLE, including representation of demographic/socioeconomic/cultural/racial groups with lived experience relevant to the research?
- Is there a budget for <u>patient partner/PWLE</u> <u>expenses and compensation</u>?

### Feasibility and Budget:

- Are steps and milestones clearly articulated, logical and reasonable?
- Is it feasible to complete the project milestones in the timeline identified?
- Does the budget allocation align with the planned work, milestones and timelines?

#### **Providing constructive comments:**

- Constructive comments will note both the strengths or weaknesses/errors/omissions of the proposal, and what would make it stronger or more complete.
- Patient partner reviewers are well positioned to comment on the relevance of the proposal to patients, strengths or weaknesses of the patient engagement plan and budget, and on the plan to engage knowledge users of the research results, such as patients, caregivers, and health care providers.
- Comments should be consistent with the score you have assigned to that element of the application.
- For applications with weaknesses, indicate what you expected to see, what was unclear or missing from the application and/or how the application could be strengthened for future funding competitions.
- For good and high scoring applications, comment on what was good about it, and ways the researcher could make the proposal stronger or more complete.
- · Your comments should avoid:
  - Praising or criticizing the application without saying what would make it better.
  - Revealing personal or identifying information about yourself.
  - Referencing the score or rank of the application.

## Scoring and ranking your applications:

- Be consistent in how you apply the scoring rubric.
- You may wish to assign notional scores and write your initial comments in a draft document, to finalize when you have reviewed all the applications assigned to you.
- If there is terminology you do not understand, you can use a dictionary or on-line search to get a definition.
- Do not research the topic of the application or applicants. It is the responsibility of the applicant to ensure their proposal is understandable to reviewers who may not be experts on the topic.
- Score on the basis of the application before you. If the application does not provide information demonstrating
  it meets a criteria (e.g., EDI considerations, patient engagement plan), review other sections that may address
  the criteria. Base your score on the information you find. If you cannot find the information, score as if that part
  of the criteria is not met. Failing to sufficiently address the criteria element should result in a lower score.
- Calculate the final score for each application, based on the method found in the marking rubric.
- Ask yourself if your final scores reflect how you would rank the applications, i.e., Does your "best" application have the highest score? Does an application you deem un-fundable have a low score?
- Ensure there is differentiation between your lowest and highest scores, so your fundable grants/awards are clearly ranked accordingly.

## **Peer Review Panel Decision Meeting**

- Be prepared to present a brief overview of the applications you evaluated to the panel, highlighting research goals, strengths and weaknesses you identified to facilitate discussion. Hint: Use the lay summary and your draft comments as notes.
- Remember that you represent the patient voice at the table and have a unique perspective to offer. Speak up!
- Listen carefully to other reviewers' comments about an application.
- Intervene constructively if you agree or disagree based on your review of the application.
- If you still have a question or concern about an application you scored after other reviewers have made their comments, pose the question to the group.
- Optional: Read the proposals you didn't review and note what is good/missing. This will help you follow the review panel discussion of those applications, is a learning opportunity, and may identify a concern you could raise in the discussion.

## **After the Peer Review Panel**

- Director will consolidate and anonymize panel comments and notify successful and unsuccessful applicants. Panel members will be informed once this is complete and notifications are public.
- Notice of the grants/awards will be posted to the TRANSFORM HF website and social media accounts.
- Director will send patient partners an evaluation form after the peer review process is complete. You may also contact the Director for guidance or to provide feedback on the process at any time during the process.
- When describing your patient partner work, you may include acting as a peer reviewer for a grant/award competition for TRANSFORM HF, without specifying which grant/award competition or referring to any of the applications you reviewed. E.g., Peer reviewer for TRANSFORM HF grant [or award] competition, 202X.

## **Glossary of Grant/Award Application Terms**

Principal Investigator (PI): lead researcher overseeing the project

Co-Principal Investigator(s) (Co-PI): co-lead researcher(s) overseeing the project

Co-Investigator: lead researcher on part of the research project

Co-Applicant: researcher who will participate in the proposed activities but not direct them

Collaborator: researcher who brings specific expertise to the study

Early Career Researcher: researcher within five years of their first independent research-related appointment

Highly Qualified Personnel: team member with a specialized skill set or experience, e.g., statistician

Patient or Person with lived experience (PWLE or PLEX): individuals with personal experience of a health issue and informal caregivers, including family and friends.

**Patient Partner:** patient, caregiver or person with lived experience who is contributing to the research project. Note that their role in an application may also be identified as: co-investigator, co-applicant, contributor, or knowledge user.

**Trainee:** a student (undergraduate, graduate or post-graduate) who works under the formal supervision of an independent researcher or faculty member.

**Tri-agency:** refers to Canada's three federal research funding bodies - Canadian Institutes of Health Research (CIHR), Social Sciences and Humanities Research Council (SSHRC), Natural Sciences and Engineering Council (NSERC).

## **Resources**

- CIHR training: Bias in Peer Review
- CIHR training: <u>Sex and Gender Training Modules</u>
- CIHR Best practices in equity, diversity and inclusion in research practice and design
- Canadian Cancer Society (CCS): CCS Patient/Survivor/Caregiver Reviewer Program
- CIHR: Glossary of Funding-Related Terms or Jargon Buster
- CIHR: Overview of Peer Review
- CIHR Institute of Musculoskeletal Health and Arthritis (CIHR-IMHA): <u>Engaging Patient Partners as Peer Reviewers of Grant Applications: Tips for Everyone Involved</u>
- <u>People with Lived Experience in Peer Review course</u>. This course is a collaborative effort between the Kidney Foundation of Canada, the Can-SOLVE CKD Network, the Canadian Nephrology Trials Network and the Canadian Donation and Transplantation Research Program.
- TRANSFORM HF's Peer Review Infographic
- TRANSFORM HF's Getting Oriented: A Guide for Patient Partners Engaging in a Research
- TRANSFORM HF's <u>Patient Recognition and Compensation Policy</u>