



Grant Awards and Peer Review Processes

Basic Principles

Restore's Scientific Advisory Committee (SAC) comprises independent research scientists and clinicians with an interest in applied basic sciences who have the expertise and experience to assess the fellowship applications that we receive. The Chair of the SAC will usually be a senior research scientist with expertise in the spheres of burns, wound research or basic sciences. SAC Committee members have an initial term of office of four years. They do not receive any payment and must abide by both our *Code of Conduct* and our *Conflicts of Interest Policy*.

The role of the SAC is to provide scientific guidance and support to Restore's Directors of Research and Clinical Studies and to advise and make recommendations to the Trustees with regard to the implementation of research projects and the award of research fellowships.

The Directors of Research and the Director of Clinical Studies aim to formulate a minimum of one research project each year as dictated by the progress of ongoing projects. These projects will focus on the principal areas of research funded by the charity. They must abide by the *Code of Conduct* and *Conflicts of Interest Policy*.

All applications will undergo internal and external peer review. The internal peer review panel (IPRP) comprises SAC members together with one lay member who is usually a Trustee. Its members rotate every three years, subject to re-election for an additional two year term. The IPRP will be responsible for reviewing project applications and making recommendations to the Trustees on the suitability and feasibility of each one in the context of Restore's scientific aims. If a Trustee is a member of the IPRP, he/she will not either act as Chair or apply for funding.

At least two appropriate external reviewers are selected by the Directors of Research and the Director of Clinical Studies with guidance from the SAC. The external reviewers are expected to provide an independent written appraisal of project applications in a manner similar to the IPRP. The review panels will include a significant number of non-beneficiaries.

Our project peer review process

The project plan and the assessment of this by the external reviewers are discussed by the IPRP who express their own views on the proposal and the external reviews and, by consensus, reach a decision for recommendation to the Trustees.

Project applications are not normally ranked, but those that have received uniformly low scores from all the external reviewers might not be discussed (or only briefly discussed) by the IPRP.

Referee scoring system

Research Projects

The IPRP and external reviewers are asked to review research project applications devised by the Fellows with the support of the Director(s) of Research and the Director of Clinical Studies as excellent, good, moderate or poor on the basis of:

- hypothesis: its originality and importance
- approach: clarity of the objectives, the appropriateness of the methodology and feasibility within the proposed timescale
- potential Impact: scientific and/or clinical
- relevance: to the prevention, cause, cure and/or treatment of burns, scarring and/or wounds

We also ask external reviewers to provide a short written critique of the proposed research project, including comments on the importance and originality of the research question, the clarity of the research objectives, the suitability of the methodology and whether the planned experiments are likely to yield decisive results.

The written reviews of referees are an important element in the decision making process, but are not the sole criterion for deciding the success or failure of an application. In practice, however, only applications that score uniformly highly are likely to be successful.

Feedback

We may provide feedback to both successful and unsuccessful applicants in the form of the reviewers' comments plus any relevant points arising from the committee discussions. Any feedback provided is at our sole discretion.

Peer review of ongoing projects

All initiated projects are critiqued in a continuous and transparent manner by Restore's Directors of Research and Director of Clinical Studies. Annual progress is appraised by the SAC in the form of submissions from the Fellow: a summary document of progress and a presentation to the SAC. Further indirect peer review is provided by prior mandatory supervisor review of: presentations at

national or international meetings; manuscripts and papers submitted to scientific journals; and the successful completion of a higher degree by the Fellow.

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