

Overall scoring

Overall score:	
Merit (M) score	50%
Relevance & Potential Impact (RPI) score	50%

The expert review committee includes scientific (SR) and patient/survivor/caregiver (PSC) reviewers. Reviewers will use 2 rating scales to score applications. A Merit rating and a Relevance & Potential Impact (RPI) rating should be given on a scale of 0-5, to 1 decimal place.

Note: Initial/preliminary scores given during the review process may not be the final scores, as reviewers may need more information to evaluate certain aspects of an application. Reviewers are free to assess based on their own personal/intersectional expertise/experience and are expected to take the panel discussion into consideration and evaluate the application holistically to determine their final scores.

Score descriptions

Descriptor	Score range	Definition	Outcome	
Outstanding	4.5 - 5.0	All scoring criteria have been met and some exceeded. Each item has been appropriately and thoroughly addressed. Very minor improvements are recommended.	D : : : (
Excellent	4.0 - 4.5	The majority (>80%) of scoring criteria have been met and some exceeded. The majority of items have been appropriately addressed. Some minor changes are recommended.	Priority for funding	
Good	3.5 - 4.0	Many (60-80%) scoring criteria have been met. Most items have been appropriately addressed. There are <u>several minor or one moderate</u> areas for improvement, but no major weaknesses.	Fundable	
Fair	3.0 - 3.5	Some (40-60%) scoring criteria have been met. Some items have been addressed but there are notable gaps. There is at least one major weakness <u>or</u> many moderate weaknesses.		
Poor	2.0 - 3.0	Not enough (20-40%) scoring criteria have been met. Some items have been addressed but there are notable gaps. There is at least one major weakness and many moderate weaknesses.	Not fundable	
Incomplete	Below 2.0	Few (<20%) scoring criteria have been met. Multiple major weaknesses. The proposal needs significant development before being competitive in this program.		



Merit (M) rating scale

The **Merit** rating scale is to be used by reviewers to assess the merit of an applicant's proposed research project. The lists below show the criteria to be evaluated, and reviewers are asked to use these criteria to help them holistically assess each application. For example, minor or moderate weaknesses in some areas may be compensated for by strengths in other areas.

Reviewers are asked to use this scale to assess each application, assign a Merit score (0-5), and record this score in EGrAMS prior to and during the panel meeting

If any major weaknesses are identified, this rating should **not** be above 3.5.

Merit criteria Proposal – 60% of merit score	SR	PSC
The 'challenge' is clearly articulated.	✓	✓
 Scientific rationale and evidence for the proposed work is thorough, balanced and compelling (including preliminary data). 	√	
 Aims are clearly articulated, well-conceived and positioned to generate meaningful data/information that will support a solution to the challenge identified. 	√	
 Approach and methods are well-described and feasible (and ideally creative, innovative and/or novel). 	✓	
 Key milestones and timelines are clearly defined and realistic. There is a high likelihood that anticipated outcomes will be realized. 	√	√
 Feasibility of the project is well-articulated, including identification of potential challenges and how they will be addressed, mitigating strategies and alternative approaches. 	√	√
 The public summary is written in non-technical language and clearly describes the aim of the project and alignment with the CCS goals/priorities, methodology, relevance and the potential impact of the proposed project, methods and approach. 		\
 Sex, gender, and other dimensions of diversity/social determinants of health (e.g. race, ethnicity, education, economic status) and their intersectionalities are appropriately addressed and incorporated in the study design, methods, analysis, interpretation, and dissemination/implementation of findings/outcomes. 	√	<
 The data management plan, with consideration for the First Nations Principles of Ownership, Control, Access and Possession (OCAP) where relevant, is well described and will support future research and analysis (where permitted). 	√	√
 The term and amount of support requested is appropriate. Relevant costs are accounted for, including remuneration of team members (in line with <u>CCS policy</u>), where eligible. 	✓	√



Merit criteria	SR	PSC
 Team & environment - 40% of merit score Terms of Reference are well-defined and appropriate. Roles and responsibilities are clearly outlined, including time commitment and remuneration (where eligible). 	✓	√
 The qualifications and expertise of the investigator(s) and other team members are appropriate, particularly as they relate to the potential for (eventual) resolution of the identified challenge. Career stage and any career interruptions should be taken into consideration. If any gaps in expertise are identified, the proposal should include a clear plan for how these will be addressed. 	√	\
 The environment(s) where the research will take place is/are appropriate (e.g. contain the required equipment, expertise, and support, including any collaborations, when relevant). 	√	√
 Meaningful involvement has been demonstrated with <u>all</u> members of the research team in the development of the research proposal (described in the Terms of Reference). This includes (but is not limited to) trainees and end-users of the 'solution'. People with lived/living experience of cancer will be meaningfully engaged throughout the life of the research project (mandatory). 	√	√
 Accessibility, equity, diversity and inclusion principles are evident in team composition and recruitment processes. 	✓	\
 For applications involving First Nations, Inuit, and Metis Peoples, the Principal Investigator self-identifies as Indigenous, and/or the project involves meaningful participation and direction as determined by Indigenous organizations, groups, or individuals related to the project's focus area. Examples of Indigenous participation could include Elders, Knowledge Keepers, governments, health centres, or community organizations/groups related to the project's focus. 	✓	√

Note:

- Please be aware that the initial scores given during the review process may not be the final scores.
- The goal of varying types of reviewers is to bring multiple perspectives and balance to the review process. Guidance has been provided to indicate which criteria may be deemed most relevant by reviewer type, however reviewers are free to assess based on their own personal (and intersectional) expertise/experience and are expected to take into consideration the panel discussion in order to evaluate the application holistically to determine their final scores.



Relevance & Potential Impact rating scale

The Relevance & Potential Impact (RPI) rating scale is to be used by all reviewers to assess the relevance and potential impact of an application and applicant. The table below shows the criteria to be evaluated, and reviewers are asked to use these criteria to help them holistically assess each application. For example, weaknesses in some areas may be compensated for by strengths in other areas.

Reviewers are asked to use this scale to assess each application, assign a preliminary Relevance & Potential Impact score (0-5), and record this score in EGrAMS prior to and during the panel meeting.

If any major weaknesses are identified, this rating should **not** be above 3.5.

Relevance and Potential Impact criteria	SR	PSC
 The application describes and has a high potential to lead to improvements in the prevention, detection, treatment, and/or duration and quality of life for people affected by cancer, and/or equitable and timely access to cancer care (i.e. CCS Research Goals described in the RFA). 	✓	\
The proposed project demonstrates clear and/or compelling relevance to cancer.	✓	✓
 How and/or why the challenge is relevant and meaningful to people affected by cancer (or at risk, for prevention research) is clearly described. 	✓	√
 The proposed research acknowledges the burden of cancer on patients and their caregivers and considers the quality of life of study participants in tangible, measurable ways, where relevant. 	√	√
 The proposed research is creative, innovative and/or original (ideal). 	✓	√
The methods and approaches outlined in the knowledge translation and mobilization (KTM) plan are well-defined, feasible, integrated into the timeline and budget.	√	√
 The KTM plan involves the relevant interest holders from the outset to ensure the utility of the proposed solution to addressing the identified challenge. Public and/or patient engagement strategies are clearly evident. 	√	√
The potential impact (short, medium or long-term) of the proposed research on people at risk and/or affected by cancer is clearly described, relevant, compelling and realistic.	√	√
 The proposal clearly outlines how the research findings will be moved forward (e.g. through dissemination, implementation, further research) to facilitate next steps towards the anticipated impacts. 	√	√
Equitable access to and utilization of results are considered.	✓	✓

Note:

- Please be aware that the initial scores given during the review process may not be the final scores.
- The goal of varying types of reviewers is to **bring multiple perspectives** and balance to the review process. Guidance has been provided to indicate which criteria may be deemed most relevant by





reviewer type, however reviewers are free to assess based on their own personal (and intersectional) expertise/experience and are expected to take into consideration the panel discussion in order to **evaluate the application holistically** to determine their final scores.