



K.G. Jebsen centers for Translational Medical Research

Call 2021

Stiftelsen Kristian Gerhard Jebsen (SKGJ) hereby calls for proposals for *K.G. Jebsen Centers for Translational Medical research* at Norwegian medical faculties and university hospitals. The intention is to establish two new K.G. Jebsen Centers in 2022 that each may receive a maximum of 4.5 MNOK a year for a duration of five years.

The foundation's vision is to make a substantial difference to the development of Norwegian translational medical research aiming for the highest international level. The overall aim of this program is to facilitate the process in which important results as regards the pathogenesis of diseases, diagnostics and therapy lead to improved treatment of patients in the future. The new centers will form part of the foundation's program for translational medicine, which since 2011 has contributed to the establishment of 22 K.G. Jebsen Centers in the field of translational medical research.

Nomination

The program supports research that is in accordance with the host institutions' and the research milieus' own strategies and priorities. The foundation therefore invites Norwegian medical faculties and associated university hospitals to put forward a limited number of proposals from each geographic region (as listed in appendix 3 below). Within each region, the selection of applicants should be made after consultations between university hospital and medical faculty. Research groups that participate actively in already established Centers of Excellence, Centers of Innovation or K.G. Jebsen centers may apply only if the proposal fulfills certain conditions¹. Whether or not these conditions are adequately met will be subject to evaluation. It is a prerequisite for funding that the name of the foundation is attached to the center and its activities.

Please consult Appendices 1, 2, 3 and 4 for further details about the program and about how to apply.

Application deadline for centers starting within the first eight months of 2022 is **6 May 2021 at 12:00 (noon)**.

¹ These are that the research plan for the proposed K. G. Jebsen-center:

- Is identifiable as qualitatively distinct from the already established center.
- Clearly represents a translational approach and significant novelty.

Appendix 1 – About the program

A funding scheme for translational medical research

The program provides support for translational research only. The term "translation" has been subject to discussion and is not clear-cut. The commonly used NIH definition² dividing translational research into two broad areas has been criticized, both for being narrow and for describing translation as a one-way process. Rubin et.al. propose the following alternative definition (2010)³:

"Translational research fosters the multidirectional integration of basic research, patient-oriented research, and population-based research, with the long-term aim of improving the health of the public".

Creating bridges and movement between different kinds of research is seen as key. Three such bridges are described and exemplified:

- Between basic research and patient-oriented research, that leads to new or improved scientific understanding or standards of care (T1). Ex: drug development, pharmacogenomics, some studies of disease mechanisms and research into new areas such as genetics, genomics, and proteomics.
- Between patient-oriented research and population-based research that leads to better patient outcomes, the implementation of best practices, and improved health status in communities (T2). Ex: clinical epidemiology, health services (outcomes) research, and the newly developing methodology of community-based participatory research.
- Between population-based research and laboratory-based research to stimulate a robust scientific understanding of human health and disease (T3). This highlights, for instance, how research in populations informs hypotheses that can be tested in basic science laboratories and how biomarkers in animal models can translate into population-based screening tools. Ex: emerging disciplines such as molecular and genetic epidemiology.

The chosen approach to translation, be it the above mentioned or alternative approaches, must be outlined in each proposal for a K.G. Jebsen center. The proposal must be clearly goal-oriented, with an overriding patient-oriented perspective. In addition, to be translational in the context of a K.G. Jebsen center, the proposed research should in any case be both

- Multifaceted (involving a relevant mix of competences, methods and resources), and
- Integrating (including relevant measures for integration).

² NIH 2007: "Translational research" includes two areas of translation: One is the process of applying discoveries generated during research in the laboratory, and in preclinical studies, to the development of trials and studies in humans. The second area of translation concerns research aimed at enhancing the adoption of best practices in the community."

³ <http://www.ncbi.nlm.nih.gov/pmc/articles/PMC2829707/pdf/nihms172799.pdf>

Translation as requiring a mix of competences and methods

Each K.G. Jebsen-center must include researchers / research groups with complementary expertise and great potential in relation to translation. For translation between basic and patient-oriented research, for example, there should be a clear and functional cooperation between clinical research groups and lab-based research groups. At least one of the groups must have a clinical focus, be able to document substantial knowledge in the field and have access to a well-defined patient material relevant to the objectives of the proposed research.

In most cases, the methodological repertoire requires a mix of competences and collaboration over department, faculty or even university borders. Collaborations with research groups based at other faculties and university hospitals in Norway or abroad may be included as part of the center, if this entails genuine cooperation and complementary competence.

Translation as requiring integration and thus leadership

Translational research requires integration and thus appropriate measures for bridging across competences and traditional boundaries. Scientific leadership and the ability to lead across boundaries are key factors for success in this context.

Each K.G. Jebsen center is to be headed by a center leader with such capacity and high academic standing. The leader is to serve as PI pursuant to the grant agreement between the foundation and the host institution. The host institution must grant the center leader considerable independence in relation to scientific contexts as well as on questions involving the recruitment of staff to the center. In addition, sufficient administrative support must be made available. It is a prerequisite for funding that a scientific advisory board of internationally renowned researchers is established and given an active role in the development of the center, including strategic guidance on the center's major priority areas.

It is further expected that any commercial exploitation of results will be pursued and secured in line with the host institution's policy and national regulations.

Appendix 2 – Funding and grant agreement

A K.G. Jebsen center may be granted a maximum of 4.5 millions NOK a year for a 5-year period. The overall budget of each center should allow for the critical mass/level of research activity necessary to push medical research a significant step forward.

SKGJ funding should be seen as a contribution towards the realization of goals set by the host institutions' themselves. Therefore, the commitment of the host institution is highly relevant in the selection process. It is a prerequisite for funding, that the host institution commits substantial" fresh" resources in addition to resources currently available to the research groups. Any SKGJ contribution should be matched by resources from the research institutions at about the same level.

In the event a grant application is successful, the foundation and the host institution, will enter into a project grant agreement in which their respective responsibilities will be detailed in full,

Appendix 3 – Eligibility and how to apply

Eligibility

In addition to meet the technical requirements outlined in this call, proposals must meet all of the following criteria:

1. One dedicated principal investigator (PI) of high academic standing with proven leadership experience must lead each proposal.
2. The institution where the PI is employed must be the formal applicant and – in case of a successful application – host the new K.G. Jebsen Centre.
3. Eligible applicant institutions are as follows:
 - Universities: University of Bergen (UiB), Norwegian University of Science and Technology (NTNU), The Arctic University of Norway (UiT) and University of Oslo (UiO)
 - University hospitals: Universitetssykehuset i Nord Norge (UNN), Haukeland universitetssjukehus (HUS), St Olavs Hospital and Oslo universitetssykehus (OUS)
4. Resources at about the same level from the host institution and collaborating institutions must match any SKGJ funding.
5. The maximum number of proposals from each geographic region as listed below must not be exceeded

Maximum number of proposals per geographic region:

Region	Eligible host institutions	Maximum number of proposals
Region south-east	UiO and OUS	6
Region west	UiB and HUS	4
Region mid	NTNU and St Olavs Hospital	4
Region north	UiT and UNN	3

Proposals must be prepared according to the template provided. In addition, for each proposal, the following must be attached:

- The budget sheets
- A commitment letter from the host institution describing the nature and level of its contribution to the proposed center. The letter must be signed at the appropriate institutional level.
- In cases where institutions other than the host institution are expected to contribute with resources to the project, a letter signed at the appropriate level of the contributing institution should be included. The letter should describe the nature of the resources to be committed and confirm institutional support of the proposal and its budget.

How to submit

One copy of the proposal and the required attachments, compiled into one (1) PDF file, should be submitted to post@stiftkgj.no by **May 6, 2021 at 12 noon.**

Each applicant (PI) will receive an "acknowledgement of receipt" by e-mail shortly after the submission deadline.

Please note: The reply to this call involves the recording and processing of personal data (such as name, address and CV). Such data will be processed pursuant to Norwegian law. The questions and any personal data requested are required to evaluate the application in accordance with the specifications of the call for proposal and will be processed solely for that purpose by SKGJ. The review process requires that personal information given in the proposal must be made available to external reviewers. All such experts are required to sign and adhere to a declaration of confidentiality in this regard.

Appendix 4 - Selection Process and Evaluation Criteria

The foundation's Advisory Committee (AC) will be responsible for the scientific review of proposals that meet the call requirements as put forward in Appendix 3. The review process will consist of two steps as follows:

Step one: Based upon the evaluation criteria set fourth for this call, the AC will select a limited number of proposals for further evaluation. The foundation will notify applicants of the decision at this point.

Step two: External experts of high international standing will be appointed to assess and rank the proposals selected for Step two. The AC will receive the expert committee's joint comments, ranking and recommendations. The PIs of each proposal will be invited to attend an interview, and to present their plans for building and leading a K.G. Jebsen Centre to the AC. In addition to the PI, one key researcher/clinician should attend the interview. Together the two participants must be able to account for the plans for translational research including any clinical trials that may be planned. It is highly recommended that the person attending alongside the PI is selected with this in mind. Interviews are scheduled to take place at Gardermoen on November 23, 2021

Based upon the information obtained during Step 1 and Step 2, the foundation's standing Advisory Committee will make their funding recommendation to the foundation board.

Submission deadlines and indicative timetable:

- January 2021: Call published
- May 6th, 2021: Submission deadline for proposals
- May 6th – early June Step 1 evaluation
- Mid-June 2021: Step 1 evaluation results announced
- August – December 2021 Step 2 evaluation
- January 2022: Board decision announced
- February 2022: Grant agreement preparations
- June – August 2022: Start-up of new K.G: Jebsen Centers

Evaluation criteria

Assessment of the academic quality and feasibility, including the selected research groups' academic competence and complementary contributions to the center, will form the basis for the expert evaluation to be carried out by the foundation.

Proposals must contribute to the overall aims of the programme. Successful proposals should display a clearly integrative approach to translation as well as competent scientific leadership by the PI. Merit will be given to a clearly rooted international collaboration.

The evaluation shall focus on the scientific quality of the proposal including plans for generation and pursuit of novel scientific ideas. The basic reference for the evaluation is:

SIGNIFICANCE: How may the proposed research activities contribute to translational medical research? Is there an identifiable potential to make a difference (impact on knowledge – and /or clinical practice)?

IMPACT: The potential impact of SKGJ funding in the context of the foundation's vision⁴. May the provision of SKGJ funding contribute substantially to the advancement of the research milieu towards the highest international standards?

FEASIBILITY: The extent to which the conceptual framework, design, methods, analyses are appropriate for the aims of the proposed research.

ENVIRONMENT: The extent to which the available resources, the institutional commitment, established collaborations and any other unique features, might contribute towards the success of the proposed research. What plans have been made to promote integration within the center?

INVESTIGATORS: The extent to which the Investigators' experience, track record, training, preliminary data/past progress will contribute towards the success of the center. How does the planned mixture of competencies and career stages commensurate with ambitious research goals?

SCIENTIFIC LEADERSHIP: The extent to which the need for long-term strategic leadership of the center is adequately addressed, including:

- The PIs proven track record as a scientific leader
- The PIs ambitions and plans for bridging competencies and boundaries
- Plans for long-term leadership and funding

INTERNATIONALISATION

How well does the proposal reflect a direction towards internationalization, for example by:

- Plans for obtaining international competitive funding (EU, NIH,..)
- Plans for international mobility of researchers

Are there adequate ambitions / plans for developing a center of high international standing in its field?

INNOVATION: The suitability of the described approach towards translation and innovation.

⁴ to make a substantial difference in the development of Norwegian medical research milieus aiming for the highest international level