

EVALUATION GUIDE

CLINICAL ACADEMIC CENTRES EXTERNAL EVALUATION AND FUNDING 2022

1. Introduction

The first Clinical Academic Centre (CAC) in Portugal was created in 2009. Subsequently, from 2015 to 2021, nine CAC, located in different Regions of Portugal, have been created.

CAC were created as integrated structures of assistance, teaching, clinical and translational research, involving at least one Healthcare Unit, one University with a Medical School and Research Centres, public or private. CAC might constitute a non-profit Association for legal purposes, or constitute a Consortium and be represented by all the entities that compose it. The Decree-Law nº 61/2018, issued on August 3, stated the legal framework for the CAC. Among many other aspects, this piece of legislation also included the main outline of the assessment/evaluation process of the CAC.

The 2022 CAC External Evaluation will include all CAC that have been approved by the Government and that have applied to the 2022 CAC External Evaluation and Funding call, until the closing date of the applications period.

The current document discusses that main outline and then presents the general aspects of the process, as well as the criteria for assessment.

The translation of the acronyms used in this document are as follows:

ACSS - *Administração Central do Sistema de Saúde* (Central Administration of the Health System);

AICIB – *Agência de Investigação Clínica e Inovação Biomédica* (Agency for Clinical Research and Biomedical Innovation);

A3ES – *Agência de Avaliação e Acreditação do Ensino Superior* (Agency for Assessment and Accreditation of Higher Education);

CAC – *Centros Académicos Clínicos* (Clinical Academic Centres);

CNCAC - *Conselho Nacional dos Centros Académicos Clínicos* (National Council of the Clinical Academic Centres);

DGS - *Direcção-Geral da Saúde* (Directorate-General of Health);

FCT - *Fundação para a Ciência e a Tecnologia, I.P.* (Foundation for Science and Technology).

2. Context and rationale of the Clinical Academic Centres' Evaluation and Funding Program

The Portuguese Foundation for Science and Technology (FCT), the Portuguese National Research Funding Organization for all areas of knowledge, delegated to the Agency for Clinical Research and Biomedical Innovation (AICIB) the implementation of the evaluation of the national Clinical Academic Centres (CAC), according to the Decree-Law n.º 61/2018, of August 3, which establishes the legal regime applicable to the CAC.

The evaluation of the CAC is defined in article 22º of the Decree-Law nº 61/2018, which states that: “The activity of Clinical Academic Centres is externally assessed in accordance with the principles of quality, impartiality, transparency and independence, and will take into account the results of the evaluation or creditation of each of the institutions that constitute the Clinical Academic Centres in the fields of research, clinical practice, and teaching, respectively carried out by *Fundação para a Ciência e a Tecnologia*, I. P. (FCT), or an Agency indicated by FCT, by the *Administração Central do Sistema de Saúde*, I. P. (ACSS), and by the *Agência de Avaliação e Acreditação do Ensino Superior* (A3ES) or by the *Direção-Geral da Saúde* (DGS), under the coordination of FCT or an Agency indicated by FCT, jointly with ACSS, in close articulation with A3ES and DGS, upon consultation with the *Conselho Nacional dos Centros Académicos Clínicos* (CNCAC).”

CAC have as their main objective the advancement and application of knowledge and scientific evidence to improve the care provided to the population, aiming at:

- a) The effective use of synergies in the various areas of activity and enhancing the sharing of highly qualified and specialized human resources, stimulating the rationalization and maximization of the use of human, financial and technological resources made available to the institutions that constitute the CAC;
- b) The introduction of innovative programs and strategic partnerships that enable qualitative advances in care, teaching, clinical research and translation activities, while also contributing to the diversification and expansion of the funding sources for these activities;
- c) The promotion of a common culture focused on scientific and clinical excellence in an international context, both at the human resources and the material resources

levels, ensuring the combination of basic and translational research, clinical services and health education that are needed to achieve significant improvements in health care;

d) Focusing of the activity in the improvement of the quality of health care provided to the populations, based on an adequate response to their different needs.

In addition to the specific principles to which they are engaged, according to the applicable legislation and those arising from the pursuit of their duties, CAC are governed by the following principles:

- a) Mobility and training of human resources;
- b) Co-responsibility for optimizing available resources and planning by objectives of programs and projects;
- c) Regular and independent scientific and technical monitoring and evaluation;
- d) Dissemination of scientific and technological culture;
- e) Adoption of international reference standards in the areas of clinical assistance and the promotion of scientific and technological development, through interdisciplinary cooperation at local, national and international levels.

The external evaluation of CACs aims to guarantee the performance assessment, the monitoring and the multi-annual funding of CAC as integrated structures of assistance, teaching and clinical and translational research. CACs must follow the principles of developing and valuing skills and capabilities, sharing and valuing resources, merit and quality, impartiality, transparency and independence.

The object of the evaluation is the result of the joint activity of the institutions that constitute the CAC and not just the sum of its parts.

The external evaluation of CACs focuses, namely, on the interinstitutional cooperation, transversal activities, common structures and the organization and management that supports the cooperation between the institutions that constitute the CAC in a given period. The external evaluation of CACs also focuses on proposals for the implementation of common structures, objectives, strategy, activity plan, organization and management that sustain this cooperation and activities for the coming 4 years.

I. Main general orientations for the CAC Evaluation 2022

1. Four overall quality grading levels

The overall quality of each CAC is to be **graded in 4 levels**, designated **Insufficient, Sufficient, Good and Very Good**, further described below. **Only the CAC with an overall grade of Sufficient or above** are considered eligible for funding, within the CAC Multiannual Funding Program.

2. Objectives and components of the funding to be awarded based on the evaluation

The main objectives of the funding to be awarded based on this evaluation are:

- a) Support the basis of interinstitutional cooperation, transversal activities, common structures and the organization and management that support the cooperation activities between the institutions that constitute the CAC;
- b) Support the development, internationalization and sustained and cooperative progress of high quality clinical and translational research and biomedical innovation activities;
- c) Promote research and development (R&D), innovation, and cooperation activities between health care units, scientific and academic institutions and other organizations working in this area;
- d) Enhance the potential of clinical research and translation to create added value for patients, for the health system and for higher education in the area of Health, with a view to continuous improvement and excellence in the provision of medical care;
- e) Stimulate, at the national level, biomedical innovation and knowledge economy activities in the Health sector;
- f) Stimulate forms of creation of qualified employment in areas of clinical research and translation, through incentives for institutions to hire, attract, develop and retain the best researchers and technicians in the Health area.

3. Three evaluation criteria, each one rated in integers 1 to 5

The evaluation criteria will be described in more detail below. They are to be applied to each CAC, considering the CAC’s activity since January 1, 2017 or from the date of its creation.

For introductory purposes, the **3 evaluation criteria** are summarized here as:

- Criterion A: Merit of the institutional articulation: merit and relevance of the scientific, technical and medical assistance activities resulting from the institutional articulation among the member institutions of each CAC;
- Criterion B: Valorisation of collaboration: adoption and implementation of forms of joint valorisation of medical, scientific and training/education activities in career progression in institutions belonging to each CAC;
- Criterion C: Collaborative organization: adoption and implementation of forms of collaborative organization among all institutions involved in each CAC, in a way that valorizes joint activities in clinical, scientific and training/education areas, and stimulates articulated ways resulting in qualified employment.

Each criterion has several requirements described in more detail in Appendix 1. For introductory purposes, the **number of requirements for each criterion** are described here:

- Criterion A: 7 requirements – A1, A2, A3, A4, A5, A6 and A7;
- Criterion B: 5 requirements - B1, B2, B3, B4 and B5;
- Criterion C: 6 requirements - C1, C2, C3, C4, C5 and C6.

The score of each requirement and criterion is given with integers 1 to 5 (being 5 the highest value). All requirements are graded 1 to 5.

The final score to each criterion is calculated based on the average rating of the respective requirements.

The final score of each CAC is obtained by:

$$\text{Final CAC score} = ((0.35 \times \text{Criterion A score (1-5)}) + (0.20 \times \text{Criterion B score (1-5)}) + (0.45 \times \text{Criterion C score (1-5)}))$$

To the quantitative final score corresponds a qualitative score as follows:

Quantitative	Qualitative	Description
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Classification	Classification	
4.3 – 5	Very Good	CAC with excellent institutional articulation, valuing collaboration and collaborative organization, recognized as an international reference in the advancement and application of knowledge and scientific evidence to the improvement of health care provided to the population.
3.4 – 4.2	Good	CAC with good institutional articulation, valorization of collaboration and collaborative organization, recognized for its quality at national and international level in the advancement and application of knowledge and scientific evidence to the improvement of health care provided to the population.
2.5 – 3.3	Sufficient	CAC with appropriate institutional articulation, valuing collaboration and collaborative organization and contributions to the advancement and application of knowledge and scientific evidence to improve health care provided to the population.
1 – 2.4	Insufficient	CAC with reduced institutional articulation, valorization of collaboration and collaborative organization and without relevant contributions for the advancement and application of knowledge and scientific evidence for the improvement of health care provided to the population, among other shortcomings.

4. Responsibilities of the panel members

4.1 The panel members should:

- a) Analyse the application forms and documentation sent by each CAC, prepare and be present during the public sessions and presential visits scheduled by AICIB;
- b) Be present in the entire duration of the necessary panel meetings scheduled by the Panel Chair;
- c) Apply the assessment criteria, comment and rate the criterion and requirements to the clinical and translational research, teaching and clinical activities developed by the CAC and to the respective objectives, strategies and activity plans for subsequent

- years, preparing the respective evaluation reports, which must be substantive and in accordance with the evaluation judgments, and include, where relevant, recommendations for the coming 4 years;
- d) The comments should be succinct but substantial and address the relative importance of each evaluation criterion and the extent to which the application meets the criterion. Suggestions and recommendations that might help the CAC team to carry out the activities and accomplish their objectives must also be provided;
 - e) Propose when deemed necessary (until the site visits to each CAC), to AICIB, the appointment of experts of recognized merit in the respective areas in order to complement the analyses made by the members of the Evaluation Panel;
 - f) Prepare one Evaluation Panel Report for each CAC (to be conveyed to the applicants) based on the Pre-Consensus reports and the panel meetings discussions, which must be substantive and substantiated with regard to the evaluation, and include, where relevant, recommendations for guidance for the following years;
 - g) Recommend, in a duly justified manner, the funding provided for each CAC or any modifications to the activity plan and/or to the proposed budget for the CAC;
 - h) Prepare a global report on the assessment process that includes, in addition to the results of the CAC evaluations, a general assessment of all CACs evaluated and prospects for their development, including, among others, the detection of strong and weak aspects and general recommendations for future guidance for the CACs, situations of conflicts of interest found and recommendations that can contribute to improving the assessment/evaluation process;
 - i) Appreciate the annual monitoring reports and the final activity report of each CAC.

Reviewers should avoid comments that provide a simple description or summary of the application; the use of the first person or equivalent: "I think..." or "This reviewer finds..."; asking questions, since the applicants will not be able to answer them; alternatively, panel members are advised to use expressions such as "The panel considers..." or "It is considered..."; always use dispassionate and analytical language: dismissive statements about the team, the proposed science or technology, the knowledge or the field concerned

must be avoided; evaluate the work that is being proposed, and not the work that they consider should have been proposed.

4.2 A Panel Coordinator will be invited to head the evaluation panel and will be responsible for the following tasks:

- a) Nominate a Lead Reviewer for each application responsible for the elaboration of the Pre-Consensus Report and the Evaluation Panel Report;
- b) Control the quality of the Pre-Consensus and Evaluation Panel Reports;
- c) Steer the panel meeting;
- d) Communicate the results of the panel meeting to the Board of Directors of AICIB;
- e) Keep the evaluation process within the defined timeframe and contact panel members in case of any delays;
- f) Support the AICIB team in the resolution of any Conflict of Interests identified during the evaluation process.

4.3 The evaluation carried out by the evaluation panel must be based on the:

- a) Analysis of the CAC applications;
- b) Information provided by each CAC during the respective public presentation and the respective interaction between the CAC and the evaluation panel;
- c) Information collected during the presential visits to the CAC.

5. Aspects to consider in rating the evaluation criteria

Consider the requirements for each of the 3 criterialisted in Appendix I.

6. Evaluation timeline

The evaluation timeline is established by the AICIB's Board of Directors and conveyed to the evaluation panel coordinator and members. The dates of the public sessions, presential visits to each CAC and final meeting of the evaluation panel are established in advance by AICIB, that carries out all logistic arrangements.

The deadlines for each step of the evaluation process (maximum number of days) are described in Appendix II. These deadlines can be adjusted when duly justified.

II. General evaluation scheme

For the 2022 evaluation there will be the following sequential phases of the evaluation process for each CAC:

- (1) Analysis of the CAC application;**
- (2) Public presentation;**
- (3) Site visits;**
- (4) Evaluation Panel meeting;**
- (5) Elaboration of the Evaluation Panel Reports with the collegial decision of the Evaluation Panel for each CAC, including the funding proposal and the panel's recommendations.**

All the members of the Evaluation Panel must participate in all phases of the evaluation, for each CAC, except in cases of *force majeure* or conflicts of interest.

All Panel Members must accept a Confidentiality Statement and declare Conflicts of Interest before receiving the CAC applications (see Appendix III).

All members of the Evaluation Panel will analyse the application of each CAC with the detail needed to have a well-informed opinion on its overall evaluation and to actively engage in the discussion with the other Panel Members, contributing to the collegial decision of the Panel, stated in a unique Evaluation Panel Report for each CAC (phase 5).

(1) Analysis of the CAC application

For each CAC, after the CAC application analysis, all members must upload their individual **evaluation reports**, in their respective private area of AICIB website. When all reports are uploaded, AICIB will make them available to the Panel Chair and Lead Reviewer (Panel Member appointed by the Panel Chair).

(2) Public Presentation

The Evaluation Panel prepares the online public presentation by collegially deciding the agenda, the list of questions to be made orally and identifying any complex question that needs to be sent in advance to the CAC Coordinator.

The agenda for the public presentation should be sent in advance to the CAC Coordinator together with any complex questions that may require information that may not be immediately available. Each public presentation will include: a brief presentation by the CAC Coordinator of the main lines of work, objectives and special aspects of the funding requested in the application, followed by answers to the specific questions of the Evaluation Panel. Key team members of the CAC should attend and be able to contribute to the answers whenever appropriate.

During the public presentation, Panel Members should address questions and take notes to have a well-informed opinion on its overall evaluation and to actively engage in the discussion and collegial decision of the Panel (phases 4 and 5).

(3) Site visits

An agenda for the site visits should be prepared and sent in advance to the CAC Coordinator together with any complex questions that may require information that may not be immediately available. Each site visit will include: a visit to the facilities with the participation of CAC key team members followed by the answers to the specific questions of the Evaluation Panel. A closed session of the Evaluation Panel will take place after the site visit to discuss and agree on the site visit outcomes.

Pre-Consensus Report

Based on the **individual evaluation reports** prepared after the **analysis of the CAC application**, public presentation and site visits the **Lead Reviewer** will prepare the **Pre-Consensus Report**. **Both scores and comments are critically important** since they are the starting point for the Panel discussion during the Panel meeting.

The **Pre-Consensus Reports** will be made available by AICIB to the Panel Members that have declared no conflict of interest. This information will allow Panel Members to prepare the

Panel meeting, where **the collegial final decision of the Evaluation Panel for each CAC is achieved.**

(4) Panel Meeting

During the Panel meeting **all applications shall be discussed.** The **application's final scores** for each criterion, as well as the **comments and recommendations to be conveyed to the applicants,** will be discussed and agreed by the Evaluation Panel and included in the **Evaluation Panel Report of each application.**

A **ranking list** and an **Evaluation Panel Report** for each application containing the funding proposal and the Panel's recommendations will be produced to be submitted to AICIB.

The Evaluation Panel Report is the only official document of the Evaluation Panel.

Preliminary Hearings

By Portuguese Law, after publication of the results of the evaluation, a "Preliminary Hearings" phase takes place, in which the same Evaluation Panel analyses the comments of the CAC to their evaluation.

Panel Members shall analyse the preliminary hearings submitted by the CAC and prepare the respective response in 15 working days. The analysis of the preliminary hearings is neither a second evaluation of the applications nor an additional opportunity for the CAC to present new information. It should only serve to identify any error(s) that may have occurred during the evaluation and that is/are addressed by the applicant. Any identified error should be corrected and, depending on its nature, the score may be changed accordingly or remain the same.

Complaints

After notification of the final decision, each CAC may submit a complaint addressed to the FCT Board of Directors within 15 working days. The CACs are notified of the final decision on the results of the complaint, within 30 working days.

III. Evaluation Forms (for each CAC)

For each CAC there is an Individual Evaluation Report Form to be filled in for phase (1) by all the Evaluation Panel Members, one Pre-Consensus Report Form to be filled in by the Lead-Reviewer and an Evaluation Panel Report Form to be filled in with contents collegially agreed by the Evaluation Panel (phase 5). All forms will be available to Panel Members in the private area of the AICIB website.

A. Individual Evaluation Report Form (phase 1)

01 Identification of Evaluation Panel member

1.1 Evaluation Panel member name

02 Identification of CAC

2.1 CAC name

03 Rating of evaluation criteria - Evaluation Phases

3.1 Phase 1 - Analysis of the CAC application

- Rating and Comments for evaluation criterion A, including major strengths and weaknesses;
- Rating and Comments for evaluation criterion B, including major strengths and weaknesses;
- Rating and Comments for evaluation criterion C, including major strengths and weaknesses;
- Make an overall comment on the proposal;

- Make a comment on the proposed budget (any suggested change to the budget must be properly justified);
- Provide, if necessary, confidential comments to the Evaluation Panel;
- Identify aspects to clarify during the public session and site visit.

B. Pre-Consensus Report Form and Evaluation Panel Report Form (phase 5)

01 Identification of CAC

1.1 CAC name

02 Rating of evaluation criteria

2.1 Collegial evaluation of the CAC:

- Rating (for each subcriterion) and comments for evaluation criterion A, including major strengths and weaknesses;
- Rating (for each subcriterion) and comments for evaluation criterion B, including major strengths and weaknesses;
- Rating (for each subcriterion) and comments for evaluation criterion C, including major strengths and weaknesses.

3. Overall quality grade

Grade the CAC according to the descriptions made at the section I of the Evaluation Guide and respecting the score formulas and the correspondence between quantitative and qualitative scores (**Insufficient, Sufficient, Good, Very Good**) mentioned in page 7.

4. Justifications, comments and recommendations

Justify in detail the 3 evaluation criteria ratings, as well as the overall qualitative grade, and provide **substantive comments and recommendations** regarding the CAC's activities and results. Reviewers should make a general assessment of the application, the CAC situation regarding the interinstitutional cooperation, transversal activities, common structures and the organization and management that supports the cooperation between the institutions

that constitute the CAC in a given period. The general assessment should also focus on the reasonability of funding, the proposed budget, the proposals for the implementation of common structures, as well as the objectives, strategy, activity plan, organization and management that sustain this cooperation and activities for the coming 4 years. Ethical concerns whenever applicable, and other aspects that may be considered relevant should also be mentioned.

Address strengths and weakness of the CAC as a whole and prospects for the development of CAC and, whenever applicable, comment on specific issues. Provide recommendations for future guidance, to support the basis of interinstitutional cooperation, transversal activities, common structures and the organization and management that support the cooperation and activities between the institutions that make up the CAC.

5. Recommendations for the multi-annual funding

Make and justify the proposal for funding. Multi-annual funding can be awarded to a CAC with the overall grade **Very Good**, **Good** or **Sufficient**. The Evaluation Panel makes a specific proposal taking into account the proposed budget, strategic and activity CAC plans, the results obtained in 2017-2022 and the detection of specific needs that support the interinstitutional cooperation, transversal activities, common structures and the organization and management that supports the cooperation and activities between the institutions that constitute the CAC. These may include:

- Contribution to the salary costs of a “multi-annual human resources hiring plan”, to be recruited by the CAC, in accordance with the legal terms in force and with a contribution rate to be defined by the FCT;
- Contribution for the modernization and training of health education in the graduate, postgraduate (including doctoral scholarships) and continuing education dimensions, taking advantage of the synergies that can be created with the education and training of current and future professionals from the Health Institutions that are part of the CACs;

- Support for the development of integrated actions that promote quality health care based on the contributions of basic and clinical health sciences and medical care services of the healthcare units;
- Support for actions that contribute to the development of innovative integrated care based on an increasing articulation between primary, hospital, continuous and palliative healthcare;
- Support for the development of collaborative education and research projects with reinforcement of national and international cooperation, maximizing the opportunities offered by the participation of the institutions that constitute the CAC in national and international research networks;
- Other possible support duly selected and justified by the Evaluation Panel, including for scientific equipment and infrastructure.

Appendix I

Criterion A: Merit of the institutional articulation

A1 - CAC scientific, technical and medical assistance activities resulting from the interinstitutional relationship of CAC members is of high quality and patient-centred, supported by appropriate performance indicators recognized at national and international level

A2 - CAC adopts international reference standards in the areas of scientific, technical and medical assistance activities and promotes development of scientific, technical and medical assistance activities, through interdisciplinary cooperation at local, national and international levels

A3 - CAC evaluates and monitors its quality, performance and results indicators

A4 - The institutions that constitute the CAC have a quality department and certification or accreditation of quality and safety attributed by a competent Institution

A5- CAC has a support structure for the researcher-initiated studies and for the commercial clinical trials

A6 - CAC develops collaborative scientific, technical and medical assistance projects with reinforcement of national and international cooperation, maximizing the opportunities offered by the participation of CAC members in national and international networks

A7 - Quality and impact assessment of five selected case studies describing specific impacts that have occurred during the assessment period (2017-2022), promoted/carried out by the interinstitutional cooperation between the institutions that constitute the CAC

Criterion B: Valorisation of collaboration

B1 - Allocation of dedicated time for training /education activities in the work schedule of CAC health professionals

B2 - Periodic evaluation reports of the training that is being carried out based on the time allocation for training /education activities

B3 - Allocation of dedicated time for scientific/research activities in the CAC health professionals work schedule

B4 - Periodic evaluation reports of the scientific/research activities that is being carried out based on the time allocation for scientific/research activities

B5 - Joint valorisation of medical, scientific and training/education activities in career progression and in reaching hierarchical positions in institutions belonging to the CAC

Criterion C: Collaborative organization

C1 - CAC interinstitutional collaboration, in following specific areas:

- Basic and translational research
- Clinical research
- Health care
- Higher education/training

C2 - CAC support structures for the interconnection of health care, training and research activities

C3 - Strategical plan focusing on objectives, common structures, organisation and management that support the CAC activities

C4 - CAC interinstitutional collaboration aiming to diversify funding sources and capacity to attract external competitive funding by national and international funding Agencies

C5 - Involvement of CAC professionals as a trainer or as a trainee in pre and postgraduate education

C6 - Involvement of patients and of the community in the CAC activity

Appendix II

Detailed sequential evaluation steps and deadlines

Step N.º	Detailed sequential evaluation steps	Who	Period* (working days)	Where
1	Publishing of the opening notice and the respective application forms	AICIB	At least 30 days before the application deadline	AICIB website
2	CAC application submission	CAC	30	Private area AICIB website
3	CAC submission of additional documents (if requested by AICIB)	CAC	10	Private area AICIB website
4	Analysis of the CAC applications and elaboration of the Individual Evaluation Report for each CAC (stage 1)	Evaluation Panel	Until the first CAC site visit	Private area AICIB website
5	Public presentation of the CAC followed by a discussion with the Evaluation Panel (by videoconference) (stage 2)	Evaluation Panel and CAC	1 to 2 hours for each CAC	Online
6	Site Visits, with the Evaluation Panel visiting each CAC (stage 3)	Evaluation Panel and CAC	3 hours for each CAC	CAC
7	Elaboration of the Pre-Consensus Report	Lead Reviewer	Up to the day after the CAC site visit	Private area AICIB website
8	Panel meeting and elaboration of the Evaluation Panel Report for each CAC (stage 4 and 5)	Evaluation Panel	Day after the last CAC site visit	To be defined by AICIB
9	Evaluation Panel Report sent to each CAC	AICIB	5 days after the provisional FCT evaluation and funding decision	Private area AICIB website
10	Submission of CAC preliminary hearings (if applicable)	CAC	10 days after reception of the Evaluation Panel Report	Private area AICIB website
11	Final Evaluation Panel Report (including the response to the preliminary hearings) and proposal of the funding acceptance term sent to each CAC	AICIB	5 days after the FCT evaluation and funding final decision	Private area AICIB website
12	CAC complaint (if applicable)	CAC	15 days after reception of the final evaluation and funding proposal	Private area AICIB website
13	CAC notification of the complaint decision (if applicable)	AICIB	30 days after reception of the complaint	Private area AICIB website
14	Signing of the funding acceptance term by each CAC	FCT/AICIB/CAC	15 days after the CAC acceptance of the funding terms	To be defined by AICIB/FCT
15	CAC annual monitoring reports	CAC	Until 31st march of each year	Private area AICIB website
16	Result of the CAC annual monitoring reports	AICIB	10 days after receiving the FCT decision	Private area AICIB website

Appendix III

Access to Proposals and Evaluation Forms and Procedures Regarding Confidentiality and Conflicts of Interest

Access to Proposals and Evaluation Forms

Each Evaluation Panel Member will have access to the CAC proposals and evaluation forms through a private area on the AICIB website (www.aicib.pt).

Confidentiality

The confidentiality of the CAC applications and the evaluation material and results must be protected. All members of the Evaluation Panel and external expert reviewers (proposed to AICIB by the Panel Chair in case a given expertise is missing from the Panel) are asked not to copy, quote or otherwise use material contained in the applications. They are also requested to sign a statement of confidentiality. The text to be signed by each Panel Member (or external reviewer) and sent to AICIB, is the following:

STATEMENT OF CONFIDENTIALITY

Thank you for participating in the evaluation of the Portuguese CAC organized by AICIB. The reader of this message pledges, on his/her honour, not to quote or use in any way, the contents of the applications, nor to make available, other than to AICIB or the Evaluation Panel, evaluation material and results.

CONFLICT OF INTEREST (COI)

Disqualifying Conflict of Interest

In case a disqualifying conflict of interest is identified, the Panel **Member cannot evaluate the respective application**. Panel Members are also not allowed to participate in the Panel meeting discussion of these applications. Circumstances that constitute a disqualifying conflict of interest are the following:

1. Personal or financial interest in the application's success;
2. Current or planned close scientific cooperation;
3. Research cooperation within the last three years, *e.g.* joint publications;
4. Researchers that have been a consultant to the CAC in the last 5 years;
5. First-degree relationships, domestic partnership or married to any team member of a CAC;
6. Affiliation or pending transfer to any of the Universities, Medical Schools, Research Centres or Health System institutions involved in the CAC;
7. Researchers who participate in University bodies or are active in a Council or a Supervisory/Advisory Board of any of the applying institutions.

Potential Conflict of Interest

In the case of a potential conflict of interest, the Panel Member should notify AICIB, that will decide if the conflict is considered as disqualifying. A potential conflict of interest exists, for example, in the following circumstances:

8. Relationships other than first-degree, marriage or domestic partnership and other personal ties or conflicts;
9. Preparation of an application or implementation of a project with a closely related research topic (competition);
10. Participating in an on-going scientific or inter-personal conflict with one or more institutions that constitute the CAC.

Before starting the evaluation of each application, and to access the evaluation form, each reviewer needs to complete a Col Declaration, as follows:

Conflict of Interest Declaration

Please state:

- No, I have no conflict
- Yes, I have a disqualifying conflict (see **Disqualifying Col**)
- It is possible that I have a conflict (see **Potential Col**)

In case of a disqualifying or potential Col, the Panel Member is asked to justify the situation. The **Panel Member** will not be able to proceed in case of a disqualifying conflict of interest. **In this case, the Panel Member is required to inform the Panel Chair and AICIB team of this situation**, so that the application may be reassigned.

Should a Conflict of Interest emerge for any Evaluation Panel Member, the Panel Chair should solve it (disqualifying Col: choose a different reviewer; potential Col: determine if it is disqualifying or if it is not a Col) supported by AICIB, and an explicit mention of it should be made in the Evaluation Panel Report.