

K.G. Jebsen centers for Translational Medical Research

Call 2017

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 centers will form part of the foundation's program for translational medicine which currently encompasses fourteen centers established in close cooperation with the medical academic milieus.

The foundation's vision is to make a substantial difference to the development of Norwegian research milieus 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.

Nomination

The program supports research that is in accordance with the host institutions' and the research milieus' own strategies and priorities. Norwegian medical faculties and associated university hospitals are therefore invited to nominate a limited number of strong research milieus from each geographic region (as listed in appendix 3 below), that can subsequently apply for funding. Within each region, the selection of applicants should be made after consultations between university hospital and medical faculty. K.G. Jebsen centers for medical research may be hosted by a medical faculty or a university hospital. 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 any new center and its activities.

Further information: Please consult Appendices 1 to 3 for further details about the program and how to apply.

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

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

Application deadline for centers starting within the first six months of 2018 is **3 April 2017 at 12:00 (noon)**.

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 center's 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

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>

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).

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, provided that 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.

A 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 project manager pursuant to the contract 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 high international standing is established and given an active role in the development of the center.

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 4-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, a project grant agreement will be entered into by the foundation and the host institution, in which their respective responsibilities will be detailed in full. There will be a mid-term evaluation of the center, in which preliminary results in relation to achieved goals and academic production, including joint authorship, will be evaluated. The importance of the achieved results in relation to the future design of health promoting measures and treatment of patients will also be evaluated. A positive evaluation may make extended support from the foundation possible - depending on the outcome of the evaluation and the foundations' own priorities.

Appendix 3 – How to apply

Norwegian medical faculties and associated university hospitals are invited to nominate a limited number of strong research milieus from each geographic region (as listed below), that can subsequently apply for funding for centers starting during the first six months of 2018.

Maximum number of proposals per region:

Region	Number of proposals	Eligible host institutions
Region south/east	6	University of Oslo and Oslo University Hospital
Region west	4	University of Bergen and Haukeland University Hospital
Region mid	4	NTNU and St Olavs hospital
Region north	3	University of Tromsø and UNN

Applications must contain the following:

- The research plan
- The budget sheet

Proposals must be written in English.

For each proposal, there must be 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.

Please send applications including enclosures as one (1) PDF file to **post@stiftkgj.no**.

Receipt of submitted applications will be confirmed by email.

Application deadline is 3 April 2017 at 12:00 (noon).

Evaluation criteria

The research groups' academic competence, their complementary contributions to the planned collaboration plus an evaluation of the academic quality and feasibility will form the basis for the expert evaluation carried out by the foundation. Merit will also be given to a clearly rooted international collaboration.

The evaluation shall focus on the scientific quality and scientific production including the 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 and analyses are appropriate for the aims of the proposed research

ENVIRONMENT: The extent to which the available resources, the institutional commitment, national and international collaborations and any other unique features, will contribute towards the success of the proposed research

INVESTIGATORS: The extent to which the Investigators' experience, track record, training, preliminary data/past progress will contribute towards the success of the center

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

- plans for long term funding and
- international cooperation

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