

2024/25

Heart & Stroke

Postdoctoral Personnel Awards for Women's Heart and/or Brain Health

TABLE OF CONTENTS

A. GENEF	RAL INFORMATION	3
A.1	Objective	3
A.2	Funds Available and Requirement for Institutional Contribution	3
A.3	Application Submission Deadline	3
A.4	Incomplete/Unacceptable Applications	3
A.5	Competition Results	4
A.6	Non-Employee Status	4
A.7	Self-Identification Information	4
A.8	Communicating Research to the Public and Donors	4
A.9	Ethical Requirements for Conducting Research	4
A.10 Resea	Sex- and Gender-Based Analysis Plus (SGBA+), Equity, Diversity and Inclusion (EDI), and Ethical Con Irch Involving Indigenous Peoples (First Nations, Inuit and Métis)	
A.11	Patent Rights	5
A.12	Open Science and Open Access and Data Sharing Policy	5
A.13	Research Integrity Policy	5
A.14	Acknowledging Publications	6
A.15	Funding Availability	6
B. SPECIF	FIC PROGRAM INFORMATION	7
B.1	Eligibility Criteria	7
B.2	Tenure	7
В.З	Stipend and Allowances	7
B.4	Disclosure of Other Awards	7
B.5	Multiple Heart & Stroke Awards	8
B.6	Transfer of Award	8
B.7	Award Termination	8
B.8	Prolonged Absence from Work	8
B.9	Eligible Research Areas	8
B.10 Brain	How to Apply to the 2024/25 Heart & Stroke Postdoctoral Personnel Awards for Women's Heart Health	-
B.11	Submission Process and Checklist	11
B.12	Evaluation Criteria	11
B.13	Selection Committee and Lay Reviewers	13
B.14	Notification of Results and Award Commencement	13
B.15	Reporting: Financial, Progress and Final Reports	13
B.16	Contact Information	13
B.17	About Heart & Stroke	13

Overview Table – 2024/25 Heart & Stroke Postdoctoral Personnel Awards for Women's Heart and/or Brain Health					
Competition launch date	June 30, 2023				
Application deadline	September 8, 2023				
Award notification date	May 2024				
Award start date	July 1, 2024 to December 31, 2024				
Value	Heart & Stroke will contribute a maximum of \$60,000 (\$30,000 per year for up to two (2) years) per award recipient, and the host institution will contribute at least the same amount per year per award recipient				
Duration	Up to 2 years				
Application Process	See B.10 How to Apply				
Contact	Email: research@heartandstroke.ca				
All applicants are strongly encouraged to carefully read and follow the instructions and requirements outlined in this guideline document. The Guidelines are available in both English and French.					

A. GENERAL INFORMATION

A.1 Objective

As part of the commitment to transform women's heart and brain health, Heart & Stroke is launching the 2024/25 Heart & Stroke Postdoctoral Personnel Awards for Women's Heart and/or Brain Health. The objective of the competition is to increase the number of researchers and clinician-scientists in Canadian universities and research institutions devoted specifically to women's heart and/or brain health and, in so doing, expand research initiatives in this field. In the context of this award, heart and/or brain health research refers to research addressing heart conditions, stroke, and vascular cognitive impairment. The stipends awarded will enable Postdoctoral Fellows to pursue their program of research and engage with mentors as part of their training.

Women include cisgender and transgender women, and trans and non-binary people with shared health experiences but who may not identify as women.

A.2 Funds Available and Requirement for Institutional Contribution

Heart & Stroke is contributing a total of up to \$600,000 CAD for the 2024/25 Heart & Stroke Postdoctoral Personnel Awards for Women's Heart and/or Brain Health. For each successful Postdoctoral award recipient, Heart & Stroke will contribute a maximum of \$60,000 (\$30,000 per year for up to two (2) years), and the award recipient's institution will contribute at least the same amount per year. The maximum amount contributed by the award recipient's institution will be determined by the institutional stipend policy for postdoctoral or clinical fellows. Funds from the applicant's institution must come from non-Heart & Stroke related sources of funding. At the time of submission, the applicant's institution must provide a signature on the Signatures Page (see <u>B.10 How to Apply</u>) committing to the contribution per year should the applicant be successful. The institutional signature must be by an individual with signing authority for the institution.

A.3 Application Submission Deadline

Applications must be submitted no later than **3:00 PM ET September 8, 2023** using <u>CIRCUlink</u> – Heart & Stroke's online research programs portal. <u>CIRCUlink</u> will not accept submissions after this deadline. There will be no appeal process for late or incomplete submissions. Please submit the application in the official language (English or French) of your choice.

A.4 Incomplete/Unacceptable Applications

All submissions are considered final. No alterations or changes will be accepted. Any incomplete applications, as noted in this guideline document, will not be admissible to the competition.

A.5 Competition Results

Official letters will be sent to all applicants by end of May 2024. A public announcement of the award recipients will be posted at a later date on the <u>Heart & Stroke Research</u> website.

A.6 Non-Employee Status

The granting of an award is deemed to establish neither an employer-employee relationship nor a partnership between Heart & Stroke and the award recipients.

A.7 Self-Identification Information

All applicants are required to complete the Self-Identification section in <u>CIRCUlink</u> when applying for funding; however, applicants may select "I prefer not to answer" for any or all of the questions, without consequences to the application. This self-identification information will be used by Heart & Stroke for statistical purposes only, and will NOT be shared with members of the Selection Committee or Lay Reviewers in an identifiable form. Self-identification statistics will always be reported in aggregate form to ensure confidentiality.

A.8 Communicating Research to the Public and Donors

Successful applicants need to be aware that the title of their proposed research and the lay summary could be placed into the public domain or included in Heart & Stroke's publications without notification. Applicants are cautioned not to disclose information in these sections that could endanger a proprietary position.

Raising funds to support research is difficult and more than ever funders need to let donors and the public know that their donations are being used to support world class research. As successful applicants are well-positioned to explain the role of research in increasing heart and/or brain health and reducing the burden of heart conditions, stroke and vascular cognitive impairment, they may be asked by Heart & Stroke to participate in interviews and meetings with donors to communicate the importance of research to donors and the public.

A.9 Ethical Requirements for Conducting Research

By signing and submitting applications to this competition, applicants and their supervisors undertake the responsibility to ensure any experimentation will be acceptable to the institution on ethical grounds and comply with the following guidelines and host institution research policies, as applicable:

- Tri-Council Policy Statement: Ethical Conduct for Research Involving Humans
- Good Clinical Practice (GCP)
- Good Laboratory Practice (GLP)
- Canadian Council on Animal Care
- Canadian Biosafety Standards and Guidelines
- <u>Guidelines for Human Pluripotent Stem Cell Research</u> (The institution must notify Heart & Stroke as to the results of the review by the CIHR Stem Cell Oversight Committee.)
- <u>TCPS2 (2022) Chapter 9: Research Involving the First Nations, Inuit, and Métis Peoples of Canada</u>

A.10 Sex- and Gender-Based Analysis Plus (SGBA+), Equity, Diversity and Inclusion (EDI), and Ethical Conduct of Research Involving Indigenous Peoples (First Nations, Inuit and Métis)

Heart & Stroke is committed to advancing SGBA+ and EDI towards enhancing the specificity, representativeness, rigour and transparency of research and sustaining positive change in the heart and/or brain research ecosystem. The applicants are therefore encouraged to become familiar with the principles of SGBA+, EDI, and the framework for ethical conduct of research involving Indigenous Peoples (First Nations, Inuit and Métis), with the goal of integrating such principles, if applicable, into future research practice and design.

- Government of Canada Best Practices in Equity, Diversity and Inclusion (EDI)
- <u>Guide on Equity, Diversity and Inclusion Terminology</u>

- <u>CIHR-ICRH Sex and Gender Training Module</u>
- Women's College Hospital Sex-Specific Analyses and Reporting in Clinical Trials
- TCPS2 (2022) Chapter 9: Research Involving the First Nations, Inuit, and Métis Peoples of Canada
- Heart & Stroke Glossary of SGBA+ and EDI Terminology
- Heart & Stroke List of SGBA+ and EDI E-Learning and Resources for Researchers

A.11 Patent Rights

Heart & Stroke has no intellectual property (IP) claims on the outputs of the funded research. However, institutions of funded award recipients are expected to have appropriate policies in place to protect the IP of the outputs that arise from the funded research.

A.12 Open Science and Open Access and Data Sharing Policy

All award recipients are required to make their research outputs and findings (see below) publicly available as soon as possible but no later than twelve (12) months after research project completion or final publication. Only under exceptional circumstances, such as ongoing review of a final manuscript, will delays in data release beyond 12 months from completion of the project be acceptable. Award recipients should become familiar with the guiding principles that enable sharing data, information, tools and resources, and that respect Indigenous data governance and sovereignty.

- The <u>Roadmap for Open Science</u> outlines the principles governing the practice of making federal science freely available with minimal restrictions and with full respect for privacy, security, ethical considerations, and appropriate intellectual property protection.
- <u>FAIR: Findable, Accessible, Interoperable, and Reusable</u> are guiding principles to inform data management and stewardship of digital assets.
- <u>CARE (Collective Benefit, Authority to Control, Responsibility, Ethics</u>) are guiding principles for Indigenous Data Governance.
- First Nations <u>Principles of OCAP® (Ownership, Control, Access and Possession)</u> guide how First Nations' data should be collected, protected, used and shared.
- <u>ClinicalTrials.gov</u> is a database of privately and publicly-funded clinical trials around the world.
- <u>PROSPERO</u> is an international database of prospectively registered systematic reviews that have health-related outcomes.

Research outputs and findings may include peer-reviewed journal publications, research data, and the results of clinical trials that will not be published in peer-reviewed journals. Research findings may also be shared in ways that are culturally relevant and in formats that are functional, useful and practical to distinct needs of Indigenous (First Nations, Inuit and Métis) communities. Indigenous Peoples share some histories and concepts; however, each community has specific methods for knowledge synthesis, translation, and exchange. For Indigenous knowledge mobilization to be successful, <u>meaningful and culturally safe</u>, engagement with Indigenous communities is encouraged as they are best positioned to guide researchers towards the co-development of knowledge mobilization practices that work best for their communities.

A.13 Research Integrity Policy

The primary objective of the <u>Heart & Stroke Research Integrity Policy</u> is to protect and defend the integrity of the research process and to deal with allegations of scientific misconduct in a timely and transparent fashion. Data related to research by and with Indigenous Peoples (First Nations, Inuit, Métis), whose traditional and ancestral territories are in Canada, must be managed in accordance with data management principles developed and approved by those communities, and on the basis of free, prior and informed consent. This includes, but is not limited to, considerations of Indigenous data sovereignty, as well as data collection, ownership, protection, use, and sharing.

Responsibilities of researchers, institutions and Heart & Stroke with respect to research integrity are outlined in the <u>Heart & Stroke Framework: Responsible Conduct of Research.</u> Heart & Stroke defines research misconduct as actions that are inconsistent with "integrity" as defined in the <u>Tri-Agency Policy</u> <u>Framework for the Responsible Conduct of Research</u>, and that include breaches such as fabrication, falsification, destruction of research records, plagiarism, redundant publications or self-plagiarism, invalid

authorship, inadequate acknowledgement, and mismanagement of Conflict of Interest. Heart & Stroke will assess allegations of scientific misconduct in the following manner:

- Any allegation of scientific misconduct will be initially reviewed by Heart & Stroke to determine whether an investigation is warranted. If it is felt that an investigation is required, Heart & Stroke may request that this be conducted by the host institution of the individual considered to have performed the alleged misconduct. In allegations specifically related to the peer review process, the investigation may be conducted jointly by the institution and Heart & Stroke.
- Heart & Stroke will not act on verbal allegations of misconduct. All allegations must be submitted in writing. Although the confidentiality of persons who submit an allegation of scientific misconduct will be protected as much as possible, it must be recognized that due process will often result in the identity of this person being released to the investigating institution.
- The institution will be required to submit a written report upon conclusion of the investigation. This report will summarize the findings of the investigation and any future actions that will be undertaken by the institution as a result of the findings.
- Applicants must certify that all statements made (or answers provided) in the application are correct and complete. Any misrepresentation of these statements (or answers provided) may result in the cancellation of the award.
- In cases where misconduct is concluded to have occurred, Heart & Stroke may apply sanctions against the individual(s) implicated. These sanctions will range from a reprimand letter to a ban from applying for or holding Heart & Stroke funds for a set period of time.

A.14 Acknowledging Publications

All scientific communications and press releases related to the award must acknowledge the support of Heart & Stroke with the following wording:

"(Name of award recipient) is supported by a Postdoctoral Personnel Award from the Heart and Stroke Foundation of Canada".

Award recipients must also notify Heart & Stroke by email (<u>research@heartandstroke.ca</u>) of the publication date of any work (e.g., peer-reviewed articles, press releases, media interviews) arising from the funded research.

A.15 Funding Availability

Financial contributions for this initiative are subject to availability of funds. Should Heart & Stroke's funding levels not be available or decrease due to unforeseen circumstances, Heart & Stroke reserves the right to <u>reduce</u>, <u>defer or suspend financial contributions</u> to grants received as a result of this funding opportunity.

B. SPECIFIC PROGRAM INFORMATION

B.1 Eligibility Criteria

Applicants must meet the following criteria:

- a. Applicants must propose a research project that seeks to build knowledge on <u>women's heart</u> and/or brain health.
- b. The applicant's institution must provide a signature committing to contribute at least the same monetary amount per year as Heart & Stroke's contribution towards the postdoctoral stipend should the applicant be successful. The signature must be from an individual with signing authority for the institution. The applicant must upload the Signatures Page to <u>CIRCUlink</u> as part of the submission package (see <u>B.10 How to Apply</u>).
- c. Applicants must be Canadian citizens, permanent residents of Canada or Protected Persons under subsection 95(2) of the *Immigration and Refugee Protection Act* (Canada) as of the application deadline date.
- d. Applicants must hold or be completing either (i) a PhD or (ii) a regulated health professional degree.
- e. At the time of submission, applicants must either (i) have a position as a full-time Postdoctoral Fellow or Clinical Fellow at an <u>eligible Canadian institution</u>; or (ii) have applied for the position of full-time Postdoctoral Fellow or Clinical Fellow at an eligible Canadian institution with a start date of no later than December 31, 2024.
- f. Clinical Fellows must be in a research stream.
- g. Applicants may not hold, or be on leave from, an independent research position.
- h. Applicants must have an identified research supervisor based at an eligible Canadian institution where the research will be undertaken.
- i. Applicants must submit, from the institution, a <u>Statement of Acceptance</u> as written evidence of being accepted as a Postdoctoral Fellow or Clinical Fellow prior to funds being released.

B.2 Tenure

- a. The award normally commences on July 1, 2024 (but no later than December 31, 2024) for a period of up to 24 months. The term of the award will include reasonable holiday time according to the arrangement with the award recipient's supervisor and institution.
- b. Partial Postdoctoral Personnel Awards for less than one (1) year of funding are not available.
- c. The award recipient may be eligible for one (1) or two (2) years of funding.
- d. A written request for parental leave must be received by Heart & Stroke 90 days before the leave is due to begin and must include the expected date of return. The length of leave must be in keeping with the institutional policy. For further details, award recipients are encouraged to review the Heart & Stroke Grant Management Guidelines.
- e. The award recipient must notify Heart & Stroke if their Postdoctoral registration status changes (e.g., termination of employment, project change, etc.).

B.3 Stipend and Allowances

- a. Postdoctoral or Clinical Fellow award recipients may be awarded a maximum of \$60,000 CAD (\$30,000 per year for up to two (2) years), and at least the same amount from the host institution. The maximum amount contributed by the institution will be determined by the institutional stipend policy for postdoctoral students.
- b. These multi-year stipends may be used ONLY for salary support for the award recipient. No part of this stipend is to be used to support other direct or indirect costs associated with any research programs or operating grants.
- c. Applicants are expected to devote the majority of their time to the proposed research and training throughout the tenure of the award.

B.4 Disclosure of Other Awards

It is the responsibility of the award recipient and/or the supervisor to inform Heart & Stroke if they receive any other stipend award (i.e., NOT travel or poster awards) within 30 days of receiving notification of a successful Postdoctoral Personnel Award for Women's Heart and/or Brain Health, or at any time during the tenure of the award. Disclosure of alternate stipend awards must include the formal offer of the award(s), along with the terms and conditions. Award recipients may NOT hold another stipend award(s) for the same or higher value as the Postdoctoral Personnel Awards for Women's Heart and/or Brain Health. Should the award recipient hold or accept another award for less than \$60,000 CAD per year for two (2) years, top up funding is available under this program for the award recipient to reach a minimum of \$60,000 CAD per year for two (2) years. Heart & Stroke will contribute 50% of the top up amount and the host institution will contribute at least the same amount. For example, if the Postdoctoral student receives another stipend award valued at \$40,000 CAD per year for two (2) years, Heart & Stroke will provide a top up of \$10,000 CAD per year for two (2) years, and the institution will provide at least the same amount contributed by the institution will depend on the institutional policy for postdoctoral stipends.

B.5 Multiple Heart & Stroke Awards

Applicants may submit applications to multiple Heart & Stroke Personnel Awards, but they may not hold multiple Heart & Stroke Personnel Awards at one time. Award recipients of the 2024/25 Heart & Stroke Postdoctoral Personnel Awards for Women's Heart and/or Brain Health will not be eligible for the same award offered in future years.

B.6 Transfer of Award

Personnel Awards may not be assigned or transferred to another individual under any circumstances. Should the award recipients of Personnel Awards change supervisors, programs or institutions, they must notify Heart & Stroke who will determine on a case-by-case basis whether the award can be transferred to another supervisor, program or institution. The institution to which the award recipient is moving will be required to supply the same supporting documentation as was required in the original application.

B.7 Award Termination

When work under an award is complete, or if for any reason the work cannot be continued, the award will be closed. Any remaining funds will be frozen and cannot be reallocated to other uses. The institution will prepare a final <u>Financial Report</u> and return outstanding funds to Heart & Stroke.

B.8 Prolonged Absence from Work

The award or supervisor will notify Heart & Stroke of any causes (parental leave, medical leave, personal leave, vacation time, etc.) necessitating absence from work exceeding thirty (30) successive days. Continuation of the award will be evaluated on a case-by-case basis by the funding partners. Relevant institutional policies will also apply.

B.9 Eligible Research Areas

The award recipient must estimate the proportion of the proposed heart and/or brain research that falls under the four (4) health research themes as defined by CIHR.

Theme 1. Biomedical Research

Research with the goal of understanding normal and abnormal human function, at the molecular, cellular, organ system and whole-body levels, including the development of tools and techniques to be applied for this purpose; developing new therapies or devices which improve health or the quality of life of individuals, up to the point where they are tested on human subjects. Biomedical research may also include studies on human subjects that do not have a diagnostic or therapeutic orientation.

Theme 2. Clinical Research

Research with the goal of improving the diagnosis and treatment (including rehabilitation and palliation) of disease and injury; improving the health and quality of life of individuals as they pass through normal life stages. Clinical research usually encompasses research on, or for the treatment of, patients.

Theme 3. Health Services Research

Research with the goal of improving the efficiency and effectiveness of health professionals and the health care system, through changes to practice and policy. Health services research is a multidisciplinary field

of scientific investigation that studies how social factors, financing systems, organizational structures and processes, health technologies, and personal behaviours affect access to health care, the quality and cost of health care, and ultimately the health and well-being of all people in Canada.

Theme 4. Social, Cultural, Environmental, and Population Health Research

Research with the goal of improving the health of the Canadian population, or of defined sub-populations, through a better understanding of the ways in which social, cultural, environmental, occupational, and economic factors determine health status.

B.10 How to Apply to the 2024/25 Heart & Stroke Postdoctoral Personnel Awards for Women's Heart and/or Brain Health

Applications must be submitted online using <u>CIRCUlink</u> (Heart & Stroke's online research programs portal). <u>CIRCUlink</u> will not accept submissions after the deadline of **3:00 PM ET September 8, 2023.** Any applications attempted or submitted after the deadline will NOT be accepted. There will be no appeal process to late submissions. It is the applicant's responsibility to ensure that a fully completed application with all required signatures is submitted online via <u>CIRCUlink</u> prior to the deadline.

Once applicants login to <u>CIRCUlink</u>, they will see the components of the application laid out on a left-side menu. For some components applicants will type their responses directly into the web fields supplied (see <u>B.10.1</u>). For other components, applicants will use the ATTACHMENT LIST option to upload the required PDF attachments (see <u>B.10.2</u>). Content may be uploaded in stages on <u>CIRCUlink</u> and a "Save" button is available to record progress/updates. The "Submit" button at the end of the application will not be available until all required fields and forms have been filled in/uploaded.

A complete application must include the following components:

- Lay Summary of the Research, Mentorship & Training Plan, Personal Statement, Research Summary; added by applicant into fillable fields in <u>CIRCUlink</u>
- Academic Transcript(s), Applicant's Canadian Common CV, Certificate of Completion of SGBA+ Modules, Supervisor's Canadian Common CV; uploaded by applicant as PDF attachments in <u>CIRCUlink</u>
- Letters of Reference (2); emailed by referees to research@heartandstroke.ca

Should any significant changes occur from the time of submission to award notification, Heart & Stroke reserves the right to withdraw that application from the competition. Changes to a research topic beyond the broad fields of heart and/or brain research will need to be justified. Changes that impact eligibility status such as acceptance of another grant of equal or higher value or evidence of falsifying identity, will result in application withdrawal. Misrepresentation of any content by the applicant may result in cancellation of the award.

B.10.1 Applicants to add content to fillable CIRCUlink fields for the following components:

Lay Summary of the Research. In a maximum of 7,500 characters (English and French), the applicant should describe the proposed research. This summary should be written in non-scientific everyday language, at a level no greater than Grade 8, and suitable for a general audience (e.g., patient, caregiver, community member). More information on how to structure the lay summary is provided in CIRCUlink.

Mentorship & Training Plan. In a maximum 10,000 characters (English andFrench), the applicant and supervisor should develop a plan that overviews the research and academic training and mentorship environment for the applicant, including: (a) the commitment of the supervisor and institution to support the applicant's proposed research through the allocation of space, resources, programs, facilities and personnel; (b) technical and professional skills that the applicant will acquire during the tenure of the award and how these will support the applicant's career goals; (c) specific competencies around EDI and SGBA+ in women's heart and/or brain health that the applicant will acquire; and (d) the expected research milestones over the course of the award.

Personal Statement. In a maximum of 10,000 characters (English and French), applicants should outline the relevant experiences (lived, academic and/or community) that have led up to their current career goals in women's heart and/or brain health. Include any leaves of absence.

Research Summary. In a maximum of one and half 10,000 characters (English andFrench), including references, applicants should detail the rationale, hypothesis, objective(s), methodological approach (including sex and gender considerations in the research design), analysis and reporting, timeline, applicant's role, and the expected contributions (i.e. impacts and benefits) of the proposed research for women's heart and/or brain health.

B.10.2 Applicants to upload PDF attachment to CIRCUlink for the following components:

Attachments may be completed in English or French. All application attachments must be in PDF format, single-spaced using either 12-point Times New Roman or 11-point Arial font. Condensed type or spacing is not acceptable. Margins should be set at 1.87 cm (3/4 inch) all around. The deadline for submitting all attachments is September 8, 2023.

Applicant's Canadian Common CV (Heart & Stroke version only). The <u>Canadian Common CV (CCV)</u> allows researchers to enter their CV data once and output it in formats suitable for submission to CCV Network member organizations, including Heart & Stroke and CIHR. Applicants must login to the webbased form to enter their CV information directly online for the categories including, but not limited to: education, recognitions, employment, research funding history, activities (supervisory, mentoring, community and volunteer, knowledge and technology transfer, international collaboration), contributions (presentations, interview and media relations, publications, intellectual property). Please see the <u>CIHR</u> <u>Academic CCV</u> guide for tips on completing the CCV sections. Upon completing the CCV, output the form in the Heart & Stroke format.

Certificate of Completion of Sex and Gender Based Analysis Plus (SGBA+) Modules. Applicants must complete at least one <u>CIHR-ICRH Sex and Gender Training Module</u>, and submit the Certificate of Completion.

Proof of Citizenship: Applicants will be required to securely submit their valid proof of Canadian Citizenship, Permanent Resident or Protected Person document. The document must be uploaded in PDF format (unprotected) and the total size cannot exceed 30 MB. The following are the acceptable forms of proof:

- Certificate of Canadian Citizenship;
- Birth certificate/copy of an act issued by the proper provincial government authority;
- Valid passport;
- Permanent Resident Card;
- Form IMM 1000;
- Form IMM 5292;
- Letter received indicating a positive decision from the Immigration and Refugee Board;
- Verification of Status (VOS) document with positive Pre-Removal Risk Assessment (PRRA) decision from IRCC; or
- Temporary Resident Permit if you are a Protected Temporary Resident.

Supervisor's Canadian Common CV (Heart & Stroke version only). Applicants are required to submit the supervisor's Canadian Common CV (CCV) as part of their application. This information will not be included in the Evaluation Criteria, but is requested so that the Selection Committee can gauge the alignment of a supervisor's research expertise with proposed research of the applicant. The <u>Canadian Common CV</u> (<u>CCV</u>) allows researchers to enter their CV data once and output it in formats suitable for submission to CCV Network member organizations, including Heart & Stroke and CIHR. Supervisors must use the webbased form to enter their CV information directly online for the categories including, but not limited to: education, recognitions, employment, research funding history, activities (supervisory, mentoring, community and volunteer, knowledge and technology transfer, international collaboration), contributions (presentations, interview and media relations, publications, intellectual property). Please see the <u>CIHR</u> <u>Academic CCV</u> guide for tips on completing the CCV sections. Upon completing the CCV, output the form in the Heart & Stroke format.

Signatures Page: Applicants are expected to download the Signatures Page from CIRCUlink and secure the required signatures (institutional signature, supervisor(s) signature, and applicant signature). The institutional signature must be by an individual with signing authority for the institution.

Referees to submit by email to Heart & Stroke

Two (2) Letters of Reference. The two (2) referees who are able to provide insight into the applicant's character and ability to pursue a career in research must email their letters of reference by September 8, 2023 directly to Heart & Stroke [research@heartandstroke.ca]. Please label the file and email subject as follows: Letter of Reference_LAST NAME, First Name of Applicant_Referee Initials_Date of Submission. Each letter of reference should be no more than two (2) pages (English and French). Both letters must be from an academic familiar with the applicant's work/research. Due to conflict of interest, letters of support from Heart & Stroke employees are not permitted.

B.11 Submission Process and Checklist

Applicants should use <u>CIRCUlink</u> to complete the application. Use the Application Checklist below to confirm that the relevant components have been completed and submitted. <u>CIRCUlink</u> also provides a similar checkbox to track the completion and/or submission of each section of the application with a green checkmark or red 'x'. Applications cannot be submitted in <u>CIRCUlink</u> until all sections are marked with a green checkmark. All submissions will be confirmed.

Complete ($$ or X)	Application Checklist	Mandatory
	Applicant to add content to CIRCUlink fields:	
	Lay Summary of the Research	Yes
	Mentorship & Training Plan	Yes
	Personal Statement	Yes
	Research Summary	Yes
	Applicant to upload PDF attachments to CIRCUlink:	
	Applicant's Canadian Common CV (Heart & Stroke Version)	Yes
	Certificate of Completion of Sex and Gender Based Analysis Plus (SGBA+) Module(s)	Yes
	Proof of Citizenship	Yes
	Supervisor's Canadian Common CV (Heart & Stroke Version)	Yes
	Signatures Page	Yes
	Referees to submit to research@heartandstroke.ca:	
	Letter of Reference #1	Yes
	Letter of Reference #2	Yes

B.12 Evaluation Criteria

The components noted below will be reviewed by the Selection Committee which will calculate an overall score for each applicant. The relative weight of each component is detailed below.

Adjudicated Components	Relative Weight			
Applicant's Canadian Common CV (Heart & Stroke version)	20 %			
Letters of Reference	20 %			
Mentorship & Training Plan	30 %			
Personal Statement	10 %			
Research Summary	20 %			
Should any significant changes occur from the time of submission to award notification, Heart & Stroke reserves the right to withdraw that application from the competition. Changes to a research topic beyond the broad fields of heart and/or brain research will need to be justified. Changes that impact eligibility status such as acceptance of				
another grant of equal or higher value or evidence of falsifying identity, will result in application withdrawal.				

APPLICANT'S CANADIAN COMMON CV (Heart & Stroke version) (20%)

Indicators of excellence include:

- academic record;
- type of degree program and courses pursued;
- relative standing (if available);
- recognitions, scholarships and awards;
- employment history;
- research funding history;
- activities (supervisory, mentoring, community and volunteer, knowledge and technology transfer, international collaboration); and
- contributions (publications, presentations, interview and media relations, intellectual property).

LETTERS OF REFERENCE (20%)

Indicators of excellence include:

• extent to which the referee can provide insight into the character and ability of the applicant to pursue a career in research.

MENTORSHIP AND TRAINING (30%)

Indicators of excellence include extent to which:

- the applicant's supervisor and institution can support the applicant's proposed research (e.g., space, resources, programs, facilities, personnel);
- the applicant will acquire specific knowledge and skills;
- the academic training environment aligns with the applicant's proposed research;
- the applicant will acquire specific competencies around EDI and SGBA+; and
- the appropriate resources, programs, technologies that are available for the applicant's proposed research and training.

PERSONAL STATEMENT (10%)

Indicators of excellence include extent to which applicant can demonstrate how the following have led to the proposed research and career goals:

- lived experience;
- community experience;
- work experience;
- leadership experience;
- involvement in academic life; and
- volunteerism/community outreach.

RESEARCH SUMMARY (20%)

Indicators of excellence include extent to which:

- the proposed research is creative, with a sound rationale, well-defined goals and objectives and a clear alignment with women's heart and/or brain health (i.e., heart conditions, stroke and vascular cognitive impairment);
- the approaches and methodologies proposed are appropriate to answer the research questions;
- sex- and gender-based analysis and reporting are integrated in the research design and analysis;
- the timelines are realistic for completing the proposed research; and
- the proposed research contributes to women's heart and/or brain-related knowledge, healthcare, health services or health outcomes.

Awards will be granted in a top-down rank, according to the following grading scheme. The overall score for each applicant will be scored on a scale from 0 to 100% and ranked from Outstanding (91-100%) to Excellent (81-90%) to Very Good (70-80%). The threshold for funding is 70%.

Overall Score	
Outstanding	91-100%
Excellent	81-90%
Very good	70-80%
Threshold for funding	70%

B.13 Selection Committee and Lay Reviewers

Applications will be adjudicated by a Selection Committee, composed of members from the Heart & Stroke <u>Scientific Review Committee</u> (SRC). The SRC includes over 180 members of the SRC which is overseen by the Executive Chair and Vice-Chair and comprises separate committees to ensure in-depth knowledge and expertise in areas relevant to the mandate of Heart & Stroke. The SRC Executive Chair and Vice-Chair are non-voting members. The Selection Committee may meet in person or virtually at the discretion of the SRC and Heart & Stroke. Lay Reviewers will also be incorporated into the selection process to increase accountability and transparency of the review process, and to ensure that the proposed research is aligned with the objectives of this funding competition. Lay Reviewers are voting members of the applicant's personal statement. In addition, if Lay Reviewers identify that a lay summary is not suitable for a general audience, the award recipient will be asked to revise and resubmit the lay summary. The Selection Committee and Lay reviewers must agree to respect the privacy, confidentiality and conflict of interest rules of Heart & Stroke.

B.14 Notification of Results and Award Commencement

All applicants will be notified of the results by end of May 2024. The award is scheduled to start on July 1, 2024, and no later than December 31, 2024.

B.15 Reporting: Financial, Progress and Final Reports

The award recipient's institution is required to submit (a) an annual consolidated Financial Report for the reporting period for the award recipient, (b) an annual Progress Report for the award recipient; and c) a Final Report for the award recipient. More information about these requirements will be provided in the letter of offer.

In addition, award recipients will be sent links to the report templates within the first year of award funding.

B.16 Contact Information

For any questions or concerns, the preferred form of communication is email. Your email will go to a research email inbox which is accessed by multiple research team members, and this form of communication is the best way to get a timely response.

Research Department Heart and Stroke Foundation of Canada Email: <u>research@heartandstroke.ca</u> Website: https://<u>www.heartandstroke.ca/what-we-do/research/for-researchers</u>

Please note this EMAIL ACCOUNT is only monitored from 9am-5pm ET, Monday to Friday.

B.17 About Heart & Stroke

Life. We don't want you to miss it. That's why Heart & Stroke leads the fight against heart disease and stroke. We must generate the next medical breakthroughs so people in Canada don't miss out on precious moments. Together, we are working to promote health, save lives and enhance recovery through research, health promotion and public policy.