



Diabetes Canada

2023 Research Competition Guide

Our vision

To create a world free of the effects of diabetes.

Our mission

Improve the quality of life of those diagnosed with diabetes

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Disclaimer

The 2023 Research Competition Guide supersedes all previous Diabetes Canada and Canadian Diabetes Association grants and awards guides and applications. Applicants should always refer to the latest version. Diabetes Canada may, without notice, alter the programs or terms of an award. Any major changes will be announced immediately on the [Diabetes Canada research website](#) and on the funding opportunity page on [ResearchNet](#). Diabetes Canada reserves the right to interpret these guidelines and policies. Applicants should contact research@diabetes.ca for clarification, as required.

Diabetes Canada will accept and review applications in both official languages.

Diabetes Canada reserves the right to reject incomplete applications without appeal. It is the responsibility of the applicant to ensure the application is complete prior to submission.

Contacts

For information regarding research programs, governing policies, and application submissions, including Common CV, please contact:

Research & Science, Diabetes Canada
Email: research@diabetes.ca

For technical support related to ResearchNet, please contact:

ResearchNet Support
Telephone: 613-954-1968, Toll Free: 1-888-603-4178
Email: support@cihr-irsc.gc.ca

Deadlines

Application submissions must be made online through [ResearchNet](#). ResearchNet is a secure internet portal which allows the applicant to electronically submit grant applications and obtain funding-related information.

All application submissions are due online on [ResearchNet](#) by June 30, 2023, 8:00 p.m. EDT. Additional time allowances will not be granted for any reason.

Notices of Decision will be shared in mid-December 2023. Funding is projected to be disbursed starting in January 2024.

1.0 Funding Opportunity

1.1 Overview

Diabetes Canada is proud to be a leading supporter of diabetes research in Canada. The End Diabetes Fund supports biomedical, clinical, health services, and population health research in diabetes and diabetes related complications to develop solutions aimed at the prevention, treatment, management, and finding a cure(s) for people living with diabetes.

For the 2023 research funding competition, Diabetes Canada will be awarding approximately **20 End Diabetes 2023 Awards**. Each of the 20 awards commits a **\$100,000 operating grant annually for three years (\$300,000 total)** to support excellent research projects that enhance our understanding of diabetes and its prevention, treatment, management, and cure.

Each application goes through a rigorous peer review process. A multidisciplinary review panel, consisting of scientific and clinical experts in the diabetes field, along with persons affected by diabetes (PAD) (including family/caregivers) will be assembled. Funding decisions are made based on the scientific review process and the expert recommendations of Diabetes Canada's National Research Council (NRC).

1.2 Objective

The objective of the End Diabetes 2023 Awards are:

1. To support researchers in the discovery of biomedical, clinical, health services, and/or population health factors that lead to the onset and progression of all types of diabetes and related complications.
2. To develop solutions aimed at the prevention, management, and finding a cure(s) for diabetes and its complications.
3. To address challenges in diabetes health services, and design and implement solutions that improve healthcare delivery, health policies, and access to care for all communities and populations affected by diabetes.

1.3 How to Apply

Application submissions must be made online through [ResearchNet](#). ResearchNet is a secure internet portal which allows the applicant to electronically submit grant applications and obtain funding-related information.

To begin your application:

1. Log into ResearchNet: <https://www.researchnet-recherchenet.ca/>
2. From the home screen select Find Funding Opportunities (upper left-hand menu)
3. When the menu expands select Apply for Funding
4. In the list of opportunities, navigate to **Operating Grant - End Diabetes 2023 Award**
5. Select the Apply to this Opportunity link

6. Please ensure you also review the Funding Opportunity Details link for full details on the 2023 application criteria and policies.

Please note that all attachments must be uploaded in PDF format.

2.0 End Diabetes 2023 Award Eligibility and Assessment Criteria

- a. **Description:** Diabetes Canada offers support for research projects designed to enhance our knowledge of the prevention, etiology, management, and cure of all types of diabetes and related complications; including population health, health services, diabetes education, community, and practice-based research.
- b. **Eligibility:** The Nominated Principal Applicant must be an independent researcher. The Nominated Principal Applicant and Co-Applicant(s) must have an academic or research appointment with an eligible Canadian institution.

The Nominated Principal Applicant on an End Diabetes 2023 Award is not eligible to apply for or hold more than one research funding award from Diabetes Canada at any time as the principal applicant. Partnered grants awarded through another funder are not included in this limit.

If, at the time of applying, the applicant does not have an independent faculty position (due to a requirement by their institution that he/she must secure independent peer-reviewed operating grant funding prior to the position being finalized), then a detailed letter from the department Chair or Dean providing details regarding the faculty position must be included in the application. Failure to provide this letter will result in the application being declined. Diabetes Canada reserves the right to request additional information to clarify the position offered.. Diabetes Canada reserves the right to request additional information to confirm independence. See [definitions](#) for details.

- c. **Assessment Criteria:**

All applications are reviewed by two peer-review committee members from the diabetes research community and, whenever deemed appropriate by the Chair and Vice-Chair where additional expertise is required, a third reviewer. Applications are also reviewed by a person affected by diabetes (PAD), who will review from the unique lens of lived experience.

Scientific Review Criteria:

Scientific reviewers conduct a thorough written review and score the application based on the following criteria:

1. **Rationale:** Is the study well justified? Are the preliminary data compelling?
2. **Team and Environment:** Are appropriate team members included? Is suitable expertise available, particularly to support an early career researcher or a researcher branching to a new topic? Is the research environment supportive?
3. **Methods:** Is the study well outlined and reasonable for the budget/timeline? Are the aims co-dependent or independent? Are contingency plans provided where appropriate? Are patient engagement and knowledge translation plans provided?
4. **Impact:** Is the relevance to diabetes and its prevention, causes, management and cure significant?

Scientific reviewers will also evaluate the proposed budget for appropriateness and feasibility. The expectation of the proposed budget is that it is fully justified and takes into consideration the needs of the research project and any anticipated changes in requirements over the term of the grant. If the work proposed is not feasible given the \$100K/year budget, the application will not be considered for funding.

There are two scientific review committees: Committee I will review applications focused on biomedical research, and Committee II will review applications focused on clinical, health services, and population health research. Scientific reviewers are assigned to applications based on their area of expertise, and with consideration of any real or perceived conflicts of interest.

Prior to the review committee meeting, reviewers will submit their scores to Diabetes Canada via ResearchNet. Only applications competitive for funding will be discussed at the review committee meeting. After a detailed discussion, a consensus rating will be negotiated, around which each member scores, with the exception of the Chair and Co-Chair. The average of all scores allows for a ranking of applicants, and the top scoring applications are funded.

Persons Affected by Diabetes (PAD) Reviewers Criteria:

People affected by diabetes (PAD) reviewers will conduct a written review and score the application from the unique lens of lived experience. PAD reviewers will be asked to review only the lay abstract (250 words), patient engagement and knowledge mobilization plan (500 words), and research impact for PADs (250 words) sections of the application. PAD reviewers will write a review and score the application based on the following criteria:

1. **Patient Engagement and Knowledge Mobilization Plan:** Are PAD partners integrated where appropriate into the research plan? Does the proposed research meaningfully engage PADs? Is there a plan in place for knowledge translation where appropriate that considers PADs?
2. **Research Impact for Persons Affected by Diabetes:** Is the relevance to diabetes and its prevention, causes, management and cure significant? Will this study potentially make a significant impact for people living with diabetes? Would funding this research contribute to enhancing equity, diversity and inclusion in diabetes research?

There are two PAD review panels: Panel I will review applications focused on biomedical research, and Panel II will review applications focused on clinical, health services, and population health research. PAD review assignments will consider any real or perceived conflicts of interest.

PAD reviewers will submit a written review and numeric score to Diabetes Canada via ResearchNet. Diabetes Canada is committed to incorporating PAD expertise in research review and intends to use the information learned in the 2023 program to incorporate PAD reviewer score in funding decisions in 2024.

- d. Funding Level and Duration of Support:** The maximum amount that can be requested is \$100,000 annually for a period of up to three years, with no renewals. The final budget and duration of the award is at the discretion of the review committees and the NRC, and subject to the availability of funds.

The second and third years of funding are contingent upon the receipt of an annual progress report by November of each year, and of Diabetes Canada's review and approval of this report. The progress report is to be submitted as per the instructions on the [Progress & Report Submission](#) section of the Diabetes Canada website.

- e. Termination of Award:** If, at any time during the tenure of the award, the Nominated Principal Applicant resigns or is terminated from their position, Diabetes Canada must be notified in writing within 2 weeks. If a Nominated Principal Applicant is unable to continue their research, the grant may be transferred to a Co-Applicant who is already listed on the research application. See [6.10 Transfer of Grants](#) for details.
- f. Location of Training and International Candidates:** These awards are normally held at Canadian institutions, however, if there is adequate scientific justification, Canadian citizens and permanent residents may apply for awards to be held outside Canada. Candidates who are not Canadian citizens or permanent residents may only apply for awards to be held in Canada. Foreign candidates are responsible for obtaining all relevant documents from a Canadian Embassy prior to taking up the award (e.g., entry visa, student visa, or work permit).
- g. Co-Funding Opportunities:** Applicants should indicate their consent to be considered for partnership opportunities between Diabetes Canada and like-minded organizations through co-funding opportunities that may arise during the year of their application submission. Applicants who do not provide consent will not be considered for co-funding opportunities.

3.0 IDEA, Sex and Gender-Based and Race and Ethnicity-Based Analysis and Reporting

Diabetes Canada is committed to advancing inclusion, diversity, equity, and accessibility (IDEA) in health research. **Inclusion** is defined as the practice ensuring that all individuals are valued and respected for their contributions and are equally supported. **Diversity** is defined as differences in race, colour, place of origin, religion, immigrant and newcomer status, ethnic origin, ability, sex, sexual orientation, gender identity, gender expression and age. **Equity** is defined as the removal of systemic barriers and biases, enabling all individuals to have equal opportunity to access and benefit from the research, as well as engage and participate in the research. **Accessibility** is defined as when the needs of all people are specifically considered, and products, services, and facilities are built so that they can be used by people of all abilities and demographics.

Sex and Gender-Based and Race and Ethnicity-Based Analysis and Reporting acknowledges and examines the biological and social differences that can affect the risk of developing certain diseases, individual response to medical treatments, accessing health-related resources and care, and impact quality of life and daily activities. Integrating this analysis into research design and practices has the potential to create more rigorous and inclusive health research that is more applicable and accessible to everyone.

Diabetes Canada is committed to achieving more inclusive, diverse, equitable, and accessible diabetes research, including through the integration of IDEA principles and sex and gender-based and race and ethnicity-based analysis and reporting in diabetes research. **Applicants are required to integrate this into their research design and practices where appropriate.** Any application that does not incorporate IDEA principles, sex and gender-based and race and ethnicity-based analysis and reporting must provide a rationale for why it would not be relevant to the research.

IDEA in research may include:

- Consideration of sex, as a biological variable, included in the research design methods, analysis, and interpretation, and/or dissemination of findings.
- Consideration of gender, as a socio-cultural factor, included in the research design methods, analysis, and interpretation, and/or dissemination of findings.
- Diversity considerations (e.g., conditions, expressions and experiences of different groups identified by age, education, sexual orientation, parental status/responsibility, immigration status, Indigenous status, religion, disability, language, race, place of origin, ethnicity, culture, socioeconomic status and other attributes) included in the research design methods, analysis, and interpretation, and/or dissemination of findings.
- Describe why specific diversity or identity factors were selected for inclusion and analysis in the research (e.g., race, immigration or newcomer status).
- Describe the process of developing and maintaining a respectful relationship with the intended study population.

Resources:

- CIHR, [“How to integrate sex and gender into research”](#) for guidelines, tools, and resources to help researchers and better account for sex and gender in all pillars of health research.
- Government of Canada, [“Best Practices in Equity, Diversity and Inclusion”](#)
- CIHR, [“Equity, Diversity and Inclusion in the Research System”](#)
- CIHR, [“Equity, diversity and inclusion resources”](#)
- CMAJ, [“Guidance on the reporting of race and ethnicity in research articles”](#) for guidance for reporting race and ethnicity in research manuscripts.
- CIHI, [“Guidance on the Use of Standards for Race-Based and Indigenous Identity Data Collection and Health Reporting in Canada”](#) for standards for collecting race-based and Indigenous identity data in health research.

All applicants are strongly encouraged to complete the [CIHR Institute of Gender and Health online training modules](#) and the [CIHR Unconscious Bias Training Module](#).

4.0 Patient Engagement and Knowledge Translation Plan

When submitting your application online in [ResearchNet](#), you are required to include a **plan for patient engagement and knowledge translation (500 words or less)**. Separately, the application requires you to include an impact statement for persons affected by diabetes, by answering the question **“How will the completion of this project impact persons affected by diabetes?” (250 words or less)**. Please draft this in language suitable for non-scientific readers.

Engaging people with lived experience in Diabetes Canada’s research program is part of a multi-phase initiative to ensure that the research being conducted is relevant and valuable to the patients that it affects, and to ensure that people affected by diabetes (PADs) are included in all of Diabetes Canada’s mission activities. This section of the application will be reviewed by both the scientific reviewers and the PAD reviewers. If patient engagement or knowledge translation is not appropriate for your proposed project, this must be well justified.

Patient engagement in research is about meaningful inclusion and collaboration – “nothing about us, without us”. Patients and persons affected by diabetes can be actively engaged in research governance, priority setting, developing research questions, and even performing certain parts of the research itself. Patient partners can also collaborate with the research team to summarize or share the results with target audiences (especially other patients) and with policy makers or other decision makers who may apply the results in a health or community setting.

Notably, not all research proposals may lend themselves easily to all components of engagement. For example, research proposals in biomedical science may be less amenable to frequent engagement throughout the full research process. In these cases, applicants should, at a

minimum, present a dissemination or knowledge translation plan that incorporates meaningful patient engagement in how research findings and milestones will be disseminated to the public.

Levels of Patient Engagement:

Diabetes Canada's offers the following guidance related to patient engagement planning. Applicants are also encouraged to review the [CIHR Strategy for Patient-Oriented Research - Patient Engagement Framework](#).

Patient engagement in all pillars of health research may occur at multiple levels*. Your patient engagement plan should demonstrate how you plan to include patients at the most appropriate level(s) for your research.

- **Inform/Knowledge Translation:** Provide information, listen, and answer questions honestly through orientation and information sessions, and/or media campaigns in an open atmosphere for sharing (ex. consider patients and caregivers in your information dissemination plans, education opportunities).
- **Consult:** Seek patient input on an ad hoc basis while conducting research through quantitative, qualitative, or mixed research methods (ex. focus groups, priority setting activities, surveys, patient as research subject or participant).
- **Involve:** Work with patients as standing members of an advisory group (ex. working groups and patient story sharing).
- **Collaborate:** Partner equally with patients as team members (ex. patients as research partners, or members of research steering committee).
- **Empower:** Patients lead research activities and researcher supports patient decision-making (ex. patient or community steering committee, patients as principal investigators).

**Adapted from 'level of patient and researcher engagement in health research', Manafo, Petermann, Mason-Lai, and Vandall-Walker (2018).*

Researchers should consider the questions below when describing their patient engagement plan.

- Is the patient engagement plan appropriate for this study design?
- Is the patient engagement process and role expectations clear?
- Is support available for the patient throughout the engagement process?
- Are the method(s) for engaging patients appropriate?
- Are the method(s) for engaging patients feasible?
- Does the plan demonstrate how the patient's role and contributions will have a direct impact on research outcomes, if any?
- Does the research consider the environmental, economic, or cultural factors that may impact the patient experience and process of patient engagement?

- Is the patient engagement plan mutually beneficial for both researchers and patients? (ex. both perceive improved research/value added)
- Does the proposed budget consider remuneration for patient partners?

Goals of Patient Engagement:

Patient engagement in research is ultimately aimed at achieving benefits that matter to patients:

- Improved health
- Improved access to the health care system
- The right treatment at the right time
- Being an active and informed partner in health care
- Quality of life that is tied to patient-oriented outcomes
- Contribute to improving the cost effectiveness of the health care system

Examples of Patient Engagement:

Diabetes Canada offers the following examples of ways to incorporate engagement in each pillar of health research, where relevant and appropriate to the proposed research process. Note that these examples are not intended to be prescriptive or exhaustive. Applicants can choose to include some, but not all, activities and are encouraged to include additional innovative approaches not described here.

Inform/Knowledge Translation

Consider patients/persons affected by diabetes in your information dissemination plans and educational opportunities. This could include:

- Share information on your project via **website/mail-out**, identifying for patients the key research objectives, milestones, and outcomes of the project in lay language.
- **Press release and publications** about the project provided to patient-centered groups.
- **Presentation** to patient group by research team at milestone intervals of project completion, giving patients the opportunity to learn more and ask questions about the outcomes of the research project.

Consult

Seek input from persons affected by diabetes to inform new research priorities, questions, outcomes, and areas and methods of evaluation. This could include:

- Conduct a **focus group or interviews** to facilitate open discussions between patients and researchers, to address a specific research decision (e.g., “how will we evaluate success in this project?”) or build the research project priorities/objectives (e.g., “what would be most impactful to you as someone affected by diabetes?”).
- Provide a **survey** to obtain individual feedback and perspectives from a wide, diverse patient audience, to support project evaluation.
- Hold a **public meeting** in which patients are invited to witness how decisions are made within the research team, and give the opportunity to ask questions and provide comments around research decisions.

Involve

- Host a **workshop** to encourage small group discussion, brainstorming, varying perspectives, and debate, to help build the research project or address a research decision.
- Invite patients to **share their stories** together and identify common themes, to ensure that the outcomes important to patients are supported and measured in the project.
- Conduct **Deliberative Polling®** to guide research decisions: patients are polled at the very beginning of the activity, and then following the activity, to see whether opinions change as a result of information sharing and deliberation.

Collaborate

- Form a **patient advisory group** that meets regularly to help inform, provide insight, and provide different perspectives around important research decisions.
- Invite patients to **observe and analyze existing research/healthcare services** to provide their perspective on gaps and potential areas of improvement, which can be used to inform research decisions
- Work with patients to **co-develop tools and products** specifically for persons affected by diabetes, as part of the research project

Empower

- Accept **patient decision making** which permits patient partners to collaboratively make research decisions that are acceptable to all involved, and gives researchers a deeper understanding of patient perspective, concerns, and reasoning.
- Recruit a **patient steering committee** to facilitate highly focused dialogue and decision making on key research decisions, and provide a report back to the researchers,
- Engage in **patient-led research** by employing a patient as a co-investigator on the research project and have them conduct research and/or make key research decisions.

If deemed appropriate, patient partners may be included as a team member in the application in the role of collaborator.

Resources:

Parts of this document have been adapted, with thanks, from the following resources. Visit each site to learn more about patient engagement strategies and methods.

- [Strategy for Patient-Oriented Research - Patient Engagement Framework \(CIHR\)](#)
- [Methods of Patient and Public Engagement \(Centre for Healthcare Innovation\)](#)

5.0 Peer Review Process

All recipients of End Diabetes 2023 Awards are committed to serving at least a one-year term as a peer reviewer.

Conflict of Interest and Confidentiality

All reviewers will be required to read and agree to Diabetes Canada's Conflict of Interest and Confidentiality policies before beginning their reviews. Diabetes Canada considers that a conflict of interest exists when the reviewers personal or financial interests affect, or may be perceived to affect, their objectivity. These policies have been developed by Diabetes Canada to ensure the effective management of real or perceived conflicts of interest in the review process and to ensure that all applicant and reviewer information is kept confidential, to ultimately encourage a culture of trust and transparency in the research funding process.

Relevance Review

Diabetes Canada staff (and external partners for co-funding opportunities) will review all submitted applications prior to reviewer assignment to ensure that applications are in alignment with the objectives and research areas of the funding opportunity. Research funding applications that are not deemed relevant to the call will be withdrawn from the competition.

Please note, Diabetes Canada rejects incomplete applications without appeal. It is the responsibility of the applicant to ensure the application is complete prior to submission.

Review of Applications – Scientific Review Committee

The research competition review committees are volunteer committees. Each peer-review committee member has demonstrated scientific expertise in diabetes or a related area. Appointment of committee members takes into consideration required expertise, regional distribution, gender, and language skills to ensure a fair and balanced review process. Members are appointed for a one-year term. Any reviewer who is a Co-Applicant or Collaborator on an End Diabetes 2023 Award application may not be present when their application is being assessed and must recuse themselves from the discussion.

Applications are reviewed by two committee members and, whenever deemed appropriate by the Co-Chairs, one reader, when additional expertise is required. Each reviewer conducts a written review and rates the application based on the **Peer-Review Criteria** in section [2.0 End Diabetes 2023 Award Eligibility and Assessment Criteria](#).

There are two scientific review committees: Committee I will review applications focused on biomedical research, and Committee II will review applications focused on clinical, health services, and population health research. Scientific reviewers are assigned to applications based on their area of expertise, and with consideration of any real or perceived conflicts of interest.

Prior to the committee meeting, reviewers will submit their scores to Diabetes Canada via ResearchNet. After a detailed discussion, a consensus rating will be negotiated, around which each member scores, with the exception of the Chair and Co-Chair. The average of all scores allows for a ranking of applicants and the top scoring applications are funded.

Review of Applications – Persons Affected by Diabetes (PAD) Review Committee

Each PAD committee member is a person with lived experience with diabetes, either as a person living with diabetes or as a family member or caregiver for someone living with diabetes.

Applications are reviewed by one PAD reviewer. Each reviewer conducts a written review and scores the application based on the **Persons Affected by Diabetes (PAD) Reviewers Criteria** in section [2.0 End Diabetes 2023 Award Eligibility and Assessment Criteria](#).

There are two PAD review panels: Panel I will review applications focused on biomedical research, and Panel II will review applications focused on clinical, health services, and population health research. PAD review assignments will consider any real or perceived conflicts of interest.

PAD reviewers will submit a numeric score to Diabetes Canada via ResearchNet, which will be shared with the review panel, but this numeric score will not directly impact fundability in 2023. Diabetes Canada is committed to incorporating PAD expertise in research review and intends to use the information learned in the 2023 program to incorporate PAD reviewer score in funding decisions in 2024.

Rank and Rating Scale

Descriptor	Range
Outstanding	4.50-4.99
Excellent	4.00-4.49
Very good	3.50-3.99
Good	3.00-3.49
Needs revision	2.50-2.99
Needs major revision	2.00-2.49
Seriously flawed	1.00-1.99
Unacceptable/ Rejected	0.00-0.99

6.0 Governing Policies

6.1 Application Submission Requirements

The Nominated Principal Applicant on an End Diabetes 2023 Award is not eligible to apply for or hold more than one research funding award from Diabetes Canada at any time. Partnered grants awarded through another funder are not included in this limit. There are no restrictions on the number of applications upon which an individual can be listed as a Co-Applicant or Collaborator.

An application must be submitted through the institution that will administer the funds.

All applications will require a 250-word (max.) project summary written in non-scientific language that includes a clear explanation of the research project and how it is relevant to diabetes. Please

ensure that the summary is written using simple language understandable by a general public audience. This project summary is reviewed by the PAD reviewers.

[Guide for writing an effective non-scientific summary.](#)

In order to ensure fairness and consistency, all word counts and page limitations for the appendices, CV, and list of co-investigators/collaborators will be strictly applied. Any submitted text or graphics exceeding that amount will be truncated and will not be sent to reviewers.

The following formatting requirements apply to all attachments and appendices:

- Use black type, 12-point Times New Roman font. Smaller text in tables, charts, figures, and graphs is acceptable, if it is legible when the page is viewed at 100%.
- Use a minimum of single line spacing.
- Margin sizes must be a minimum of 2 cm (3/4 inch) around the page.
- Follow the outline word limit/page limitations. Any submitted text or graphics exceeding the outlined word limit/page limitations will be truncated and will not be sent to reviewers.
- All attachments must be on a letter size document (21.25 X 27.5 cm / 8.5" X 11").
- Photo-reduce the supporting documents if the originals are larger than 21.25 X 27.5 cm / 8.5" X 11".

6.2 Definitions of Nominated Principal Applicant, Co-Applicant, and Collaborator

The Nominated Principal Applicant (i.e., Principal Investigator) directs the intellectual and scientific design of the research project and takes financial and project management responsibility for ensuring completion of the project within budget projections. The Nominated Principal Applicant must be an independent researcher. Nominated Principal Applicant and Co-Applicant(s) must have an academic or research appointment with an eligible Canadian institution. The signature for a Nominated Principal Applicant is not required. By submitting the application through ResearchNet, the Principal Applicant has already given legal consent.

Co-Applicants (i.e., Co-Investigators) make significant contributions to the intellectual and scientific direction of the research, project management, and may, with direction from the Nominated Principal Applicant, have some responsibility for financial aspects of the research activities. All Co-Applicants must sign the application and, in so doing, agree to abide by all policies laid out in the Research Competition Guide.

Post-doctoral fellows are not eligible to apply as a Nominated Principal Applicant or Co-Applicant on End Diabetes 2023 Award applications, but support of trainees is an allowable expense for the research initiative.

Collaborators are individuals who provide and may be reimbursed for expertise, services, materials, advice, etc. to facilitate completion of the proposed research activities. Collaborators must sign a letter of agreement briefly outlining the nature of the collaboration. Any patient partners who play a significant role in the research activities should be included in the application in the collaborator role.

6.3 Funding Period of Award

Funding decisions will be made in mid-December 2023 and Notice of Decision letters will be posted at that time. Funding is projected to be disbursed starting in January 2024.

Special requests for delayed starts due to extenuating circumstances may be granted on a case-by-case basis and should be made in writing to research@diabetes.ca. Diabetes Canada does not assume any financial obligation beyond the funding period specified in the notification letter.

Up to 15 per cent of annual funding may be carried over for use in the next funding year or for up to 6 months after the end date of the grant. Authorization for extensions to the funding period must be requested in writing to research@diabetes.ca.

6.4 Funding from Other Institutions

In the event that funding for the project submitted to Diabetes Canada is offered by another agency, the applicant must notify Diabetes Canada, in writing, within 2 weeks of receiving the offer. If the funding obtained is from a public granting agency (e.g., Tri-Council), and if the amount is equal to or greater than that requested from Diabetes Canada, then the applicant must accept funding from the public agency, and all remaining funding from the Diabetes Canada grant will be withdrawn.

6.5 Competition Results and Feedback

All applicants will receive notification through ResearchNet of final funding decisions. Successful applicants will be required to complete the Award Agreement form and email it to Diabetes Canada within one week of receiving notification. Failure to do so will be interpreted by Diabetes Canada as declining the award. Copies of written reviews will be available on ResearchNet. **Please note, the identity of reviewers is confidential and will not be disclosed.**

6.6 Annual Progress and Final Reports

Annual progress reports must be submitted by November of each subsequent year, following the process stated on the [Diabetes Canada website](#). After the last year of funding, a final report must be submitted within 6 months of the end date of the award, and a retrospective report is required 5 years after funding is completed. Failure to submit an annual progress report may jeopardize ongoing and future funding from Diabetes Canada.

6.7 Knowledge Translation

Diabetes Canada expects awardees to disseminate knowledge created from Diabetes Canada funding to various users (e.g., the public, health-care practitioners, the media, scientists, and policy makers) and facilitate their translation into improved health, more effective products or services, and/or a strengthened healthcare system. In all knowledge translation activities, ,

awardees must prominently acknowledge the support provided by Diabetes Canada and refer to themselves as recipients of the End Diabetes 2023 Award.

6.8 Media Relations

All recipients of the End Diabetes 2023 Award engaging in media-related activities related to the work supported by Diabetes Canada must advise and send copies of relevant materials, in advance of the release, to research@diabetes.ca. This does not apply to papers for presentations at various scientific meetings or when there is casual discussion with the news media on matters not related to Diabetes Canada awards.

6.9 Proprietary Rights

Diabetes Canada claims a proprietary rights interest in any patent rights or copyrights resulting from research supported by its funds of 20 per cent of the investigator's share that is in excess of \$25,000. Any question of the amount or extent of such interest is to be determined by agreement between the researcher and Diabetes Canada and in default of agreement by a sole arbitrator under the Ontario Arbitration Act. Diabetes Canada must be notified in writing upon receipt of patent rights or copyrights related to any research that it has funded.

6.10 Transfer of Grants

If a Nominated Principal Applicant is relocating from the institution where their grant was awarded, permission must be obtained from Diabetes Canada to transfer grant funding. In the event a grantee is unable to continue as the Nominated Principal Applicant at the institution administering the funds, it is the responsibility of the grantee/institution to provide an estimated Statement of Expenditures for the research project and submit it to the Diabetes Canada before the request can be considered. Diabetes Canada will make every effort to authorize the proposed change, but does reserve the right to terminate the grant. Should the grantee request to move equipment purchased with Diabetes Canada funding, the institution co-owning the equipment is encouraged to accede to such a request.

If a Nominated Principal Applicant is unable to continue their research, the grant may be transferred to a Co-Applicant who is already listed on the research application. Please note, transfers of End Diabetes 2023 Awards cannot be made to Collaborators or post-doctoral fellows. Also, transfers cannot be made outside of the country.

6.11 Parental Leave

Awardees must advise Diabetes Canada when applying to their institution for parental/maternity leave. Diabetes Canada will work with the awardee to determine the best approach for the parental leave, for example, pausing the grant or providing a no cost extension. A final Financial Report must be submitted no later than 6 months after the extended end date of the award.

6.12 Misrepresentation or Dishonesty

Misrepresentation of facts or academic dishonesty will result in disqualification of the application and possible suspension of the applicant from future Diabetes Canada research competitions.

7.0 Ethics Approval

All research funded by Diabetes Canada must conform to ethical standards. The responsibility for ethical conduct lies with the principal investigator of the research project and their institution, which must have the appropriate ethics committees in place to review and authorize research proposals. Award recipients must respect all relevant guidelines involving human subjects, animals, biohazards, or stem cells. For example:

- Canadian Biosafety Standard (CBS) 2nd Edition (2015). Public Health Agency of Canada
- Canadian Institutes of Health Research, Natural Sciences and Engineering Research Council of Canada, and Social Sciences and Humanities Research Council, Tri-Council Policy Statement: Ethical Conduct for Research Involving Humans, December 2018.
- Research involving laboratory animals must comply with the Guidelines of the Canadian Council on Animal Care
- Tri-Council Policy Statement: Ethical Conduct for Research Involving Humans, 2nd Edition (TCPS2), Chapter 12, Section F (2014)
- Research involving radioactive materials must comply with regulations of the Canadian Nuclear Safety Commission

8.0 Use of Award Funds

8.1 Budget Justification

Details need to be provided for the distribution of the award funds for the program of research. If part of the funding will be used to supplement salary, this must be clearly indicated. Each budget item must be explained and justified, providing sufficient detail for reviewers to assess whether the resources requested are appropriate. If the work proposed is not feasible given the \$100K/year budget, the application will be declined.

8.2 Administration of Funds

The institution administering the funding must have the necessary accounting systems and financial controls in place to hold funds in trust for the applicant. Payments will be distributed quarterly from Diabetes Canada to the administering institution. Award holders will, in turn, be paid by the institution in accordance with their policies.

8.3 Accountability and Auditing

Awardees and their institutions are at all times accountable for the use of Diabetes Canada funds in accordance with the policies set out by Diabetes Canada. Diabetes Canada reserves the right to audit any or all grants/awards funded in any given year.

Annual financial statements are due to Diabetes Canada by November of each year and should be completed on the Revenue Expense Report form. Diabetes Canada staff will forward this form to institution financial officers in September of each year, and they may be returned to research@diabetes.ca. Failure to submit the completed Revenue Expense Report form to Diabetes Canada will delay subsequent payments.

8.4 Eligible Expenses for Award Funds

- **Supplies and Materials:** All supplies and materials related to the research are considered eligible expenses.
- **Personnel:** Award funds may be used for salaries and benefit for support staff, technicians, graduate students, and post-doctoral fellows. Annual stipend levels for students and fellows must conform to the following funding levels: up to \$35,000 for doctoral students; and up to \$55,000 for post-doctoral fellows.
- **Reasonable compensation for patient partners in research project.**
- **Equipment:** Purchases of equipment up to \$20,000 per grant. The title to equipment purchased with Diabetes Canada funding will be given jointly to the grantee and the institution administering the funds.
Service contracts, common equipment usage fees, and glassware cleaning are eligible expenses in wet laboratories, while network and firewall expenses are eligible in research involving secure database applications.
- **Fieldwork Travel:** Fieldwork travel expenses must be clearly outlined and justified (e.g., for data collection or transportation of subjects).
- **Knowledge Translation:** Costs related to the dissemination of research to various users (see [Section 6.7](#) for details). Cost related to publishing research findings must not exceed \$3,000 per year. In all knowledge translation activities, awardees must prominently acknowledge the support provided by Diabetes Canada.
- **Publications:** Cost related to publishing research findings must not exceed \$3,000 per year.
- **Subject Payment:** A modest honorarium for subjects may be included in the budget and subjects can be reimbursed for expenses incurred as part of their participation in the research (e.g., travel, parking, food, or supplements).
- **Small Modifications to Budget:** A grantee is expected to use the money for the purposes outlined in the application. Small variations to the budget are considered acceptable; however, permission must be obtained from Diabetes Canada if the grantee makes significant changes to the budget (i.e., 25% or greater).

- Carry Over: Up to 15% of the annual award fund budget may be carried over for use in the next grant year or for up to 6 months after the end date of the grant. A final Revenue Expense Report must be submitted no later than 6 months after this 6-month extension, at which time any unused funds must be returned to Diabetes Canada. Requests for approval of extenuating circumstances must be made in writing to research@diabetes.ca.
- Conference Travel: A maximum of \$3,000 per funding year can be used for conference and/or meeting-related travel. Any unspent conference travel funds from year 1 may be used in year 2 or year 3; otherwise, all conference travel funds must be spent in travel or used to fund the research without carry over.

8.5 Ineligible Expenses for Award Funds

Diabetes Canada reserves the right to request reimbursement of funds in the event that any of these expenses are incurred on a Diabetes Canada award.

- Indirect Costs: Administrative and indirect costs to institutions administering the funds (included but not limited to heating, lighting, infrastructure and space maintenance, ethics reviews, facilities for animals used in research, central research, and financial services, management of intellectual property, providing resources, such as library and computer information, environmental assessment, and safety compliance).
- Sabbatical Leave: Expenses incurred as a result of the award recipient taking sabbatical.
- Professional Training: Costs related to professional training or development (e.g., computer or language training).
- Membership Fees: Fees for professional associations or scientific societies.
- Citizenship Fees: Fees for post-doctoral fellows applying for citizenship.
- Cell Phone: Cell phone charges cannot be expensed unless clearly documented as a method of data collection.
- Investigator Salaries: Nominated Principal Applicant and/or Co-Applicant salaries.
- Overseas Funding: Diabetes Canada research funding is intended for research conducted in Canada; however, if an exceptional need for collaboration outside of Canada is identified, it should be addressed at the time of application in order to seek approval from the review committee and NRC.

9.0 ResearchNet Commonly Asked Questions

1. What is a CDA PIN and how does the Nominated Principal Applicant (NPA) or Co-Applicant register for a CDA PIN on ResearchNet?

In the “Identify Participants” task in ResearchNet, the Nominated Principal Applicant (NPA) and all Co-Applicants are required to have a PIN entered on their participant profile. This is a Diabetes Canada PIN (in ResearchNet called a “CDA PIN”) and is different and separate from a user’s CIHR PIN.

Co-Applicants are responsible for creating their own Diabetes Canada PIN and Diabetes Canada Common CV and sending them along with all other required information to the NPA. The NPA is responsible for entering that information into the application. For Collaborators, both the Diabetes Canada PIN and Common CV are optional.

NOTE: If an NPA or Co-Applicant has previously completed a ResearchNet application for Diabetes Canada funding in past years, their Diabetes Canada PIN from previous years should be used. If a user has an existing PIN, it will auto-populate in the PIN field upon login or can be found in the user’s ResearchNet Account Settings under “Funding Agency PIN” (CDA).

To Create a CDA PIN:

For NPAs, there will be an option beside PIN to “Register for a PIN”:



Complete the “Register for a PIN” online form and submit. On the confirmation page that opens, make note of the PIN (an email will be sent with the PIN as well). Return to the “Add/Edit Participants” task and enter the PIN in the PIN required field (you will no longer see the “Register for a PIN” link) and save the page. This will immediately validate the PIN and update the User Profile page under the ResearchNet Account Settings

Co-Applicants follow the procedure below to generate a Diabetes Canada PIN:

1. The Co-Applicant must have a ResearchNet account
2. If the Co-Applicant does not have a ResearchNet account, they can register here: <https://www.researchnet-recherchenet.ca/rnr16/LoginServlet>
3. The Co-Applicant must be logged into their ResearchNet account to apply for a Diabetes Canada PIN
4. Once logged in to ResearchNet, the Co-Applicant can navigate to the End Diabetes 2023 Award, or can paste this URL directly into their browser window: <https://www.researchnet-recherchenet.ca/rnr16/pinRequest.do?agency=xfC6hpcT2j5Bd5hBX3qfWQ..&language=E>
5. Complete the Diabetes Canada PIN Request form and submit

6. On the confirmation page, record the PIN
Or
7. Copy the PIN from the notification email
8. Send both the Diabetes Canada PIN and Common CV #, and all other relevant information, to the NPA

2. How does the Nominated Principal Applicant (NPA) or Co-Applicant create a Common CV?

1. Log in to the Common CV system: <https://ccv-cvc.ca/>
2. Select the required CV type for the Diabetes Canada application:

* Funding Source	DC-RESEARCHNET
* CV Type	CDA_Academic

3. Complete and submit the CV.
4. Note your submission confirmation number (also available under the “History” tab in the Common CV menu and in the header of the CV PDF).
5. Return to ResearchNet and validate the CCV confirmation number by entering the number in the CCV confirmation number textbox and clicking save. A green checkmark will appear next to the confirmation number textbox when it has been successfully validated. Co-Applicants should send their NPA their CCV confirmation number for the NPA to enter into their participant profile.

3. What sections are required in the Diabetes Canada format CV?

Once the applicant selects the funding source and CV type (as above), they should then click the “Load” button in the top right. This will show a list of sections to be completed as part of the Diabetes Canada CV. The sections marked with a red X are required.

Within the CV sections, there is the option for the applicant to list out their contributions and publications, but these are optional fields and the CV can be uploaded without including them. **A list of contribution and publications is a required component of the Diabetes Canada application.** Therefore, if the NPA or Co-Applicant(s) does not include their list of contributions and publications within their CV (i.e. by completing the relevant fields in the Diabetes Canada format CV), they must manually create this list and send it to the NPA to upload it as a PDF attachment in ResearchNet.

If manually creating this list, there is no word/page limit, but the key information for each contribution/publication should be included (i.e. title/journal/institute, publishing status, year, publisher, authors, and contribution role).

There is no maximum on the number of entries that can be added to these sections in CCV, however, contributions and publications before 2014 should not be included, where possible, unless the applicant feels they are relevant.

4. What is required for the “Roles and Responsibilities” information in ResearchNet?

This is a component of the ResearchNet application that the NPA completes, within the “Identify Participants” task. **One page (max.) for each role is required outlining the roles and responsibilities for the NPA and each Co-Applicant.** There should be a separate document for the NPA and a separate document for each Co-Applicant (i.e. if there is 1 NPA and 4 Co-Applicants, the NPA will be uploading a total of 5 documents – one document for each role).

All “Roles and Responsibilities” documents should be uploaded into ResearchNet within the relevant NPA’s or Co-Applicant’s profile under the “Identity Participants” task, “Attachments” subtask.

Nominated Principal Applicant/Candidate - Kelly Lang		
Document Type	Upload Date	* Actions
* Roles and Responsibilities <i>(required)</i>		Choose File No f

5. How many full publications can be included as PDF uploads with an application?

Each applicant may upload a **maximum of three (3) full publications** as part of their ResearchNet application. For example, a full journal article they authored, a complete report, the full content from an online resource they created, etc. The publication attachments may be uploaded within the “Enter Proposal Information” task or within the “Attach Other Application Materials” task in ResearchNet.

6. What are the required application components and page or word limits for each?

Identify Participants: Roles and Responsibilities

A **one-page max. document for each role** describing the roles and responsibilities of the Nominated Principal Applicant and Co-Applicant(s) must be submitted. There should be a one-page document for the NPA and a separate one-page document for each Co-Applicant.

Lay Abstract

The “Enter Proposal Information – Overview” task in ResearchNet includes a text box for a Lay Abstract. Diabetes Canada requests that the **Lay Abstract be no more than 250 words max.** Please ensure that the summary is written using simple language, understandable by a general public audience. This lay abstract is reviewed by persons affected by diabetes (PAD) reviewers

Research Proposal and Appendix

The “Enter Proposal Information – Attachments” task in ResearchNet is where the research proposal and appendix are attached.

The Research Proposal must not exceed five pages, not including references, tables, charts, figures, and photographs. Any additional proposal text exceeding five pages may not be reviewed.

The Research Proposal Appendix attachment must not exceed five pages. This attachment option is for relevant tables, charts, figures, photographs, and accompanying legends. You may also attach other types of supporting documents to the Proposal Information, such as Project References and Project Publications.

Summary of Research Proposal

The task in ResearchNet, “Complete Summary of Research Proposal”, allows the applicant to upload a proposal summary to a **maximum of one page**, and ResearchNet allows the applicant to preview the submission to ensure the content does not exceed one page. The format of this section’s text box allows for approximately 1,000 words for a research proposal summary.

Plan for Patient Engagement/Knowledge Translation

Engaging people with lived experience in Diabetes Canada’s research program is part of a multi-phase initiative to ensure that the research being conducted is relevant and valuable to the patients that it affects. The plan for patient engagement and knowledge translation should be a **maximum of 500 words**,

Research Impact for Persons Affected by Diabetes

The application requires you to include an impact statement for persons affected by diabetes, by answering the question “How will the completion of this project impact persons affected by diabetes?” Please draft this in language suitable for non-scientific readers and use a **maximum of 250 words**.

Summary of Progress

- **Renewal applications** - Applicants must summarize their progress under their most recent Diabetes Canada grant that is relevant to this application. Include a list of all publications that resulted from this Diabetes Canada funding. **One page maximum.**
- **New application submissions** - Applicants are encouraged to summarize any previous work relevant to this proposal. This section can also be used to present preliminary data. **One page maximum.**

Response to Reviewers (for resubmissions only):

If you have previously applied to Diabetes Canada for the same or similar research grant, and not been successful, the application is a resubmission. If the grant has changed, the applicant should address the rationale for the changes in this section. It is not necessary to attach the comments from the previous reviewers. **The response must be appended as one attachment, total maximum of two pages.**

Budget Information

The maximum requested amount cannot exceed \$100,000 per year for up to THREE (3) years. Please provide sufficient budget information for the project to a **maximum of 2 pages**.

Scientific reviewers will evaluate the proposed budget for appropriateness and feasibility. The expectation of the proposed budget is that it is fully justified and takes into consideration the needs of the research project and any anticipated changes in requirements over the term of the grant. If the work proposed is not feasible given the \$100K/year budget, the application will be declined.

Attach Other Application Materials

There is a separate task in ResearchNet “Attach Other Application Materials” where additional materials can be attached (i.e. letters from collaborators and patient partners, letters of support)

7. Are electronic signatures accepted for Co-Applicants on the Signature Pages that are uploaded into ResearchNet?

Yes. Electronic signatures are accepted.