New Zealand Government
Te Kāwanatanga o Aotearoa

hrc nz Health Research Council of New Zealand
Te Kaunihera Rangahau Hauora o Aotearoa

2027 Pacific Health Project Full Application Guidelines

Use with the 2027 Pacific Health Project Full Application Form

Table of Contents

1

Part 1: The Health Research Council 2027 Pacific Health Projects – key information and requirements 5

1.1 Description 5
1.2 Health research priorities 5
1.3 The Science Investment Plan and Pillar Investment Plans (NEW) 6
1.4 HRC Requirements 6
1.5 Changes this year 7
1.6 Project Value 8
1.7 Project Categories 8
1.8 Eligibility 8
1.9 Key Dates 9
Submission deadline 9
Application compliance 9
Commencement date 9
1.10 Application process overview 10
1.11 Grant reporting 10

Part 2: General information on how to submit an application to the 2027 Project Grant round 11

2.1 Preparation 11
HRC Gateway account 11
Before submitting an application 11
Application Forms 12
Host organisations 12
Consents necessary to carry out research 12
2.2 Writing your application 12
General formatting 12
Application formatting compliance 13
2.3 Allowed changes between the Expression of Interest and Full application stage 13
2.4 Privacy provisions 14
Statistical and reporting purposes 14
Personal information 14
Public announcements 14
Official Information Act 14
2.5 Additional eligibility requirements 14
Eligibility restrictions on publicly funded research 14
Trusted Research Guidance 15

2.6 False or misleading information 15
2.7 Enquiries 15

Part 3: Instructions on completing and submitting your application to the 2027 Pacific Health Project Grant round 16

3.1 The Project Full application 16
3.2 The Project Full application form 16
Alignment with health research priorities 17
Healthy People and a Thriving Society Pillar Investment Plan outcomes 17
The six HPTS outcomes in the Pillar Investment Plan are as follows: 17
3.3 Module 1: General information 18
Research title 18
Lay summary 18
Commencement date 18
Support personnel 18
First named investigator (confirmed at the Project EOI stage) 18
Named investigators 19
3.4 Module 2: Research 21
Section 2A: Summary of proposed research (1-page limit) 21
Section 2B: Description of proposed research (10-page limit, excluding references) 21
Rationale for research 21
Research design and methods 22
Expertise and track record of the research team 23
3.5 Module 3: References 24
3.6 Module 4: Contract information and Budget 24
3.7 Module 5: New Zealand Standard CV 30
3.8 Module 6: Research classification 30
Australian and New Zealand Standard Research Classification (ANZSRC) 30
Keywords 30
Mapping category 30

Appendix 1: Proposals including randomised controlled trials (RCTs) 32

Appendix 2: Pacific Health Project application assessment process 33
1.Overview 33
Two-stage process 33
2.Assessment of Project EOI applications (complete) 33
2.1 Assessing committee membership 33
2.2 Scoring criteria 34
2.2 EOI application results 34
3.Assessment of Project Full applications 34

© 2026 Health Research Council of New Zealand. All rights reserved.

3.1 Assessing committee membership 34
3.2 Assessing committee pre-meeting procedure 34
3.3 Full assessing committee meeting procedure 35
3.4 Assessing committee meeting scoring criteria: Pacific Health Project category 36
3.6 Recommendation of fundable applications 36
3.7 Funding decisions – HRC Council 37
3.8 Feedback to applicants 37
4.Conflict of interest 37
Appendix 3: Scoring criteria and anchor point descriptors 38
Appendix 4: Applicant rebuttal: Project Full stage 40
Appendix 5: Full assessing committee review summary 41

© 2026 Health Research Council of New Zealand. All rights reserved.

Part 1: The Health Research Council 2027 Pacific Health Projects – key information and requirements

Part 1 sets out the requirements for the Project grant in the **Pacific Health** category, including:

- information about the grant, including the maximum value and duration
- information about HRC's requirements
- eligibility criteria that applicants must meet
- an overview of the application process and requirements, including key dates
- an overview of the assessment process and assessment criteria.

Parts 2 and 3 contain instructions for applicants on submitting an application, including administrative requirements and how to demonstrate that the requirements for funding are met.

1.1 Description

The Health Research Council (HRC) offers funding of $400,000 per year up to a total of $1,200,000 for research projects that have the potential to vastly improve the health of New Zealanders. Projects can cover a diverse range of areas, including biomedical, public health, clinical, Māori-focused, and Pacific health research.

1.2 Health research priorities

New Zealand's investment in health research must contribute to achieving the goals of the health system and the innovation, technology and science system. The HRC is the principal government funder of health research.

For the health system, the Government is committed to improving health outcomes by providing New Zealanders with timely access to high-quality health services.[1] A key focus for the science system is to harness the benefits of research and innovation to drive economic transformation. The Government wants to ensure that the research it funds is progressing its priorities, and that it has a clear pathway to translate new ideas into successful commercial enterprise.[2] Therefore, it is important for researchers and research organisations to identify how research to be funded by the HRC will add value and contribute to these goals and wider system performance.

Applicants should clearly articulate in the most relevant sections of your application if your research aligns with one or more of the priorities outlined below.

In this funding round, Council will **prioritise opportunities to invest** in research that:

- Priority 1: maximises benefit for healthcare delivery, such as:
    - new models of care and treatments
    - improved effectiveness and efficiency
    - innovation and technology in healthcare, and/or
- Priority 2: contributes to achievement of the health and/or mental health and addiction targets,[3] and/or

[1] Letters of expectations for health statutory entities | Ministry of Health NZ; https://www.hrc.govt.nz/resources/hrc-research-investment-plan

[2] https://www.mbie.govt.nz/dmsdocument/32023-science-investment-plan-2026-2036;

[3] The five health targets are: faster cancer treatment; improved immunisation for children; shorter stays in emergency departments; shorter wait times for first specialist assessment; and shorter wait times for elective treatment.

© 2026 Health Research Council of New Zealand. All rights reserved.

- Priority 3: enhances the development of clinician-researchers,[4] and/or
- Priority 4: demonstrates a pathway to commercialisation and / or
- Priority 5: supports high-quality clinical trials, including those with a particular focus on cancer and/or blood cancers.

When the HRC Council decides which applications to fund, its final funding decisions will be informed by the assessing committee recommendations, the balance of investments across our portfolios, and consideration of alignment with HRC priorities. Council's **funding decisions will align with the priorities outlined below to the greatest extent possible**, subject to the proposals submitted in a particular funding round.

Applicants should ensure that they refer to the most up-to-date information on Government science investment priorities when preparing their application. Information on these priorities, including updates as further information becomes available, will be provided on the HRC website (www.hrc.govt.nz) and HRC Gateway.

Further information about the HRC's research priorities is in the HRC's Research Investment Plan 2026/27 (pages 3-5).[5]

1.3 The Science Investment Plan and Pillar Investment Plans (NEW)

In June 2026, the Government published the Science Investment Plan 2026-2036 that sets the long-term direction for public science investment in New Zealand, including health research. This direction has been further refined in the Government's four Pillar Investment Plans,[6] published in October 2026, which identify priority outcomes and investment intentions for each pillar.

All public investments in science, innovation and technology are expected to align with the priorities and outcomes outlined in the Pillar Investment Plans.

Council will consider the Science Investment Plan 2026-2036 and the outcomes identified in the Healthy People and a Thriving Society (HPTS) PIP[7], in making HRC investment and funding decisions. This will include consideration of how proposed investments contribute to the six outcome areas identified in the HPTS PIP.

Applicants are required to select which **one** of the six outcome areas in the HPTS PIP their application best aligns with, if applicable (see section 3.2 in this document).

1.4 HRC Requirements

All HRC investment must have a clear line of sight to improving health outcomes for all New Zealanders.

HRC-funded research must meet the following requirements:

1. Research must be focused on health and improving health outcomes and/or the health system, where health outcomes are defined as:
    a. absence or reduction of disease, symptoms or morbidity, and/or
    b. timely access to quality healthcare, for all New Zealanders, including strengthening prevention of disease and injury, earlier diagnosis, earlier patient-

---

The five mental health and addiction targets are: faster access to specialist mental health and addiction services; faster access to primary mental health and addiction services; shorter mental health and addiction-related stays in emergency departments; increased mental health and addiction workforce development; and strengthened focus on prevention and early intervention.

[4] A clinician-researcher conducts research and provides clinical services in any setting, under formal work arrangement and is eligible to undertake clinical practice in New Zealand either under the Health Practitioners Competence Act 2003, through registration with the relevant responsible authority, or as a member of Allied Health Aotearoa New Zealand.

[5] https://www.hrc.govt.nz/resources/hrc-research-investment-plan

[6] Pillar Investment Plans 2026–2031 | Ministry of Business, Innovation & Employment

[7] Healthy People and a Thriving Society - Pillar summary

© 2026 Health Research Council of New Zealand. All rights reserved.

specific (precision) intervention, and new and improved models of care, or medicines, treatments and cures, and/or

c. longer life expectancy, and/or

d. improved quality of life.

2. Research into the causes of ill health, or the determinants of health (e.g., environmental, socio-economic, cultural, and behavioural factors) must demonstrate a pathway to improvements in health outcomes and/or the health system (as defined above).

3. The research proposal provides an evidence base when describing areas of high health need and population groups with high health need.[8]

Council makes final decisions on funding, informed by the assessing committee recommendations and taking into consideration the HRC priorities, the Science Investment Plan and Pillar Investment Plans, and the balance of investments across our portfolio.

Please carefully read the 'out of scope' guidance below before preparing your application.

Out of scope for the 2027 Project Grants

This round, the HRC is **NOT** intending to invest in:

- evaluations with a sole focus on audits, surveys, and needs assessments undertaken as part of routine operational practice or as part of a government organisation's performance, accountability, or monitoring activities
- research that describes a health need or community with high health need without providing a clear evidence-base for that need[9]
- research that duplicates research already undertaken overseas (without articulating the additional value of undertaking it in New Zealand)
- social science research that focuses exclusively on determinants of health (e.g. environmental, socio-economic, cultural or behavioural factors) except where it demonstrates a pathway to improvements in health outcomes and/or the health system (see HRC requirements)
- basic research that focuses exclusively on mechanistic pathways except where it demonstrates a pathway to improvements in health outcomes and/or the health system (see HRC requirements).

1.5 Changes this year

The HRC has made changes to the application and assessment processes for the Project Grants. Please carefully read these guidelines to ensure your application aligns with the requirements for this round.

The changes include:

- **(Continued from EOI stage)** A researcher cannot apply as the first named investigator (FNI) or co-FNI for a 2027 Project Grant if they are the current FNI or co-FNI on a Project or a Programme Grant awarded in the HRC's past two rounds, including Health Delivery Project Grants. The application's first named investigator and co-first named investigator eligibility was confirmed at the Project EOI stage. Changes to first named investigator and co-first named investigator are not permitted between EOI and Full stage. If you need to change FNI or Co-FNI due to unforeseen reasons, you must have written approval from HRC before any changes can be made.

[8] CO (24) 5: Needs-based Service Provision | Department of the Prime Minister and Cabinet (DPMC)

[9] CO (24) 5: Needs-based Service Provision | Department of the Prime Minister and Cabinet (DPMC)

© 2026 Health Research Council of New Zealand. All rights reserved.

- **(REINTRODUCTION)** External peer review and rebuttal will be part of the assessment of Full stage applications in addition to assessing committee review and discussion.
- **(NEW)** A field in the application form for applicants to select which one of the six outcomes in the Healthy People and a Thriving Society (HPTS) Pillar Investment Plan their application best aligns with**.**

1.6 Project Value

- The HRC expects to fund and encourages a range of grant durations and values.
- The HRC offers contracts worth $400,000 per year up to a total maximum of $1,200,000.
- Most projects have a term of 3 years with a budget of $1,200,000, but shorter contracts are offered pro rata (e.g. a 2-year project may have a budget of up to $800,000).
- You can negotiate terms of up to 5 years within the budget cap of $1,200,000.
- The budget cap for Full randomised controlled trial project applications is $1,440,000 if required and justified in the application (see requirement details in Appendix 1 of this document).
- The requested budget needs to be justified and reflect the activities being proposed.

1.7 Project Categories

When applying for a Project Grant, you need to select one of the following project categories:

- **Pacific Health:** Making significant improvements in, or developing knowledge contributing to, Pacific health outcomes.
- **General:** Supporting excellent ideas and innovations designed to improve health outcomes for New Zealanders.
- **Rangahau Hauora Māori:** Supporting Māori health research that contributes to Māori health gains, upholds rangatiratanga and utilises and advances Māori knowledge, resources, and people.

The same application cannot be submitted to different categories (i.e. you cannot submit the same application for both the Pacific Health category and the General category). The HRC does not provide advice on which Project category you should choose. You cannot change the Project category between the Expression of Interest (EOI) and Full stage application.

Note: The guidelines you are reading now apply to the **Pacific Health** Project category. If you are applying for a General Project or a Rangahau Hauora Māori Project, please use the specific General or Rangahau Hauora Māori Project Full Application Form and Guidelines, respectively.

1.8 Eligibility

You can only submit a Full application if you were invited from the EOI stage. The HRC Gateway has sent invitations to applicants and their host organisation's research office on 15 October 2026.

Eligibility at the EOI stage was confirmed based on the application's first named investigator and co-first named investigator. You **cannot** change the first named investigator and co-first named investigator between the EOI and full stage.

© 2026 Health Research Council of New Zealand. All rights reserved.

1.9 Key Dates

Event	Description	Date (1pm)
Project Full applications open date	Applicants who are eligible to submit a Full application are notified	15 October 2026
Project Full applications close date	Applicants must complete their Full application by this date via HRC Gateway	19 November 2026
Project Full applications assessment	Peer review	December 2026 – February 2027
	Applicant rebuttal	15 - 26 February 2027
	Applications reviewed by HRC assessing committees	March 2027
Results	Results available on Gateway	May 2027

Submission deadline

Please submit your application to HRC Gateway by **1pm on 19 November 2026.** Your application will not be accepted after 1pm unless you have **written** authorisation from the HRC.

Important note: Your application will be released to the HRC only after it has been approved by your host organisation's research office or equivalent. **You should submit your application before your host organisation's internal submission deadline**, which is usually several working days before the HRC closing date. If your host organisation does not have a research office, your application will be forwarded directly to the HRC.

Application compliance

The HRC will conduct a compliance check after the application submission deadline. You may be required to respond before **1 pm 10 December 2026**.

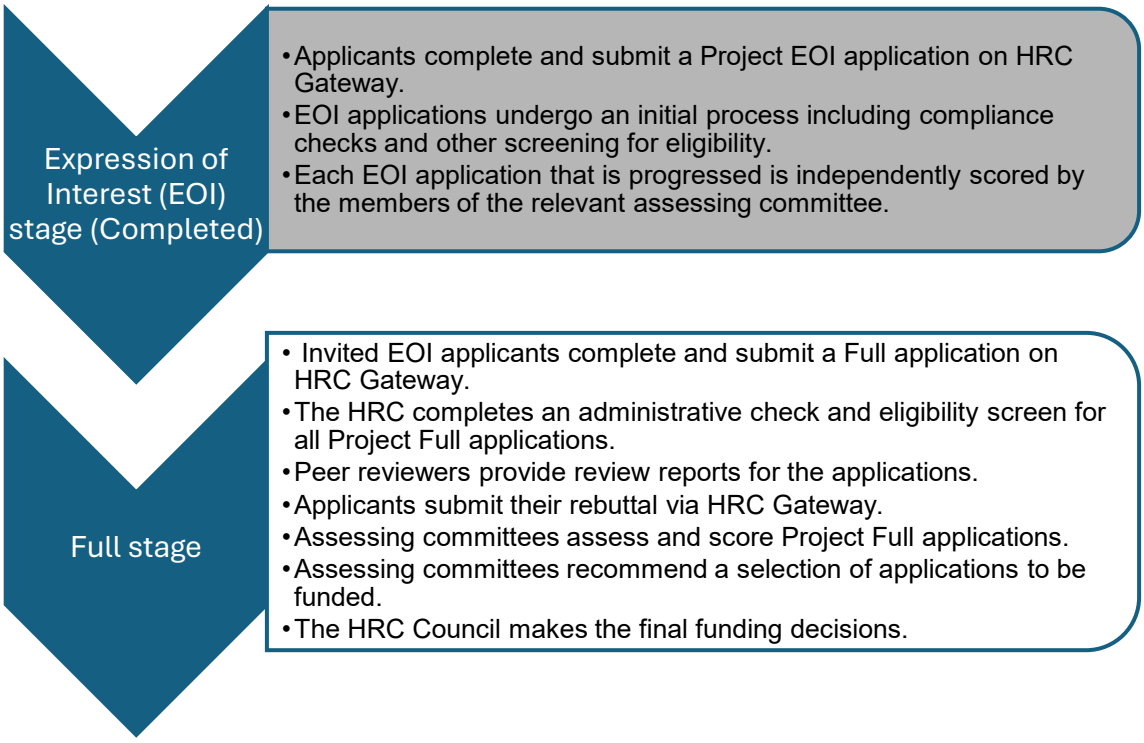
Commencement date

Your Project needs to start by **1 August 2027.**

© 2026 Health Research Council of New Zealand. All rights reserved.

1.10 Application process overview

Refer to Appendix 2 of this document for further information on the assessment process.



1.11 Grant reporting

All recipients of a Project Grant are required to submit annual progress reports and an end-of-contract report within three months of the contract end date.

© 2026 Health Research Council of New Zealand. All rights reserved.

Part 2: General information on how to submit an application to the 2027 Project Grant round

This section sets out general information for applicants to the 2027 Pacific Health Project Grant.

The information provided in this section includes:

- instructions for using HRC Gateway to submit an application
- formatting requirements for applications
- guidance about the privacy of application content
- contact information if you need assistance with your application.

Please follow the instructions set out in this section.

2.1 Preparation

HRC Gateway account

You will need an HRC Gateway account to apply for a Project Grant. Use your existing account or create a new one if you do not have one, via the following URL: https://gateway.hrc.govt.nz. If you have issues logging into your HRC Gateway account, contact info@hrc.govt.nz.

Note: All members of your research team must have an HRC Gateway user account so that their details can be included in the online form. Individual HRC Gateway accounts should be updated annually.

Before submitting an application

Before submitting an application, please read the following resources:

- 2027 Pacific Health Project Full Application Guidelines (this document)
- Science Investment Plan 2026–2036 | Ministry of Business, Innovation & Employment
- Pillar Investment Plans 2026–2031 | Ministry of Business, Innovation & Employment
- HRC Research Investment Plan
- HRC Research Ethics Guidelines
- Guidelines for Researchers on Health Research Involving Māori
- HRC Māori Health Advancement Guidelines and supporting resources
- Guidelines for Pacific Health Research
- HRC Research Impact Assessment Slideshow
- ARRIVE guidelines for animal research (if applicable)
- Government Policy Statement on Health (2024-2027)
- New Zealand Health Research Strategy (2017-2027)
- New Zealand Health Research Prioritisation Framework
- HRC Peer Review Manual (accessed via the 2027 Pacific Health Projects information page on HRC Gateway)

Click on the document name to access the file. These documents can also be found on HRC Gateway.

© 2026 Health Research Council of New Zealand. All rights reserved.

Application Forms

You will need to download and complete two different forms when submitting a Project Full application.

- 2027 Pacific Health Project Full Application Form (Microsoft Word template).
- 2027 Project Budget Form (Microsoft Excel template)

Note: If you are applying for a General or Rangahau Hauora Māori Project, please use the specific General or Rangahau Hauora Māori Project Full Application Form and Guidelines, respectively.

You can download the application form from the 2027 Pacific Health Project information page on HRC Gateway. Do not use any other templates; otherwise, your application will be withdrawn.

The application form should be completed in Microsoft Word. Once completed, upload these documents **as a PDF file** to HRC Gateway. The budget form should be completed in Microsoft Excel and uploaded in both **Excel (.xlsx)** and **PDF formats**. When converting your budget form into a PDF format, make sure all Excel spreadsheet tabs are included.

Host organisations

The host organisation is the organisation, institution or company that will be offered a contract with the HRC to deliver the activities described in your application if it is successful. The host organisation will be responsible for ensuring that the activities are completed according to the contract, the HRC Rules, and the HRC Project Grant requirements.

If your organisation has not previously received HRC funding as a host organisation and your application is successful, your organisation will need to provide some due diligence information before a contract can be offered. The HRC will provide relevant forms and instructions at that stage.

Consents necessary to carry out research

All Project applications approved by the HRC must identify and obtain all consents necessary to carry out the research (including but not limited to all biosafety, regulatory, human and animal ethical consents) at or prior to the time the consent is necessary.

For contract monitoring and HRC accountability reporting, if your research requires biosafety, regulatory, human or animal ethical consents, or clinical trial registration, these must be identified as separate Year 1 milestones, even if you expect to gain these consents before starting the proposed research.

Please refer to your institution's policies or the website of the Health and Disability Ethics Committees for further guidance.

2.2 Writing your application

General formatting

Please write your application in a clear, concise manner with sufficient detail. The assessing committee reviewing your application includes a broad range of expertise. It is important that they can understand the scope and implications of your application.

Applications must be in English or te reo Māori; if in te reo Māori, a translation in English must also be provided (any translation will not be included in the page limit).

Please:

- use Arial 10-point type font or larger
- use default margins

© 2026 Health Research Council of New Zealand. All rights reserved.

- use single line spacing
- keep to the page limits.

Application formatting compliance

The HRC will not process your application if you do not use the correct HRC application forms or follow the stated page limit and font sizes/styles. Your application will be withdrawn.

Please avoid these common pitfalls:

1. Only submit your application using HRC Gateway. Do not send applications, supporting documents or any other digital files to the HRC via email or any other means.
2. If your host organisation has a research office (or equivalent), your application must be approved by the research office first. The application will then be released to the HRC. Please allow enough time for this approval process before the HRC's closing deadline. All queries regarding applications should be directed to the host's research office rather than to the HRC directly.
3. Ensure you complete all modules, including Module 1, which must be completed in HRC Gateway. Incomplete applications after the closing date will be considered withdrawn and deleted from HRC Gateway.
4. Do not include any additional material (e.g. slides, protocols) as 'supporting documents' on HRC Gateway, and avoid using hyperlinks in the application form. All additional material and hyperlinks will be removed from your application.

If you are new to the HRC application process and need assistance with using HRC Gateway, please contact your research office in first instance or the HRC. There are also helpful user guides available.

2.3 Allowed changes between the Expression of Interest and Full application stage

Please do not make any significant changes to the research team or research plans outlined in your Expression of Interest (EOI) form. Significant changes may result in your full application being disqualified. Slight modifications can be made to your research title and lay summary, please refer to section 3.3 for further information.

Changes to the research team

Changes to first named investigator and co-first named investigator are not permitted between EOI and Full stage. If you need to change FNI or Co-FNI due to unforeseen reasons, you must have written approval from HRC before any changes can be made.

You can add named investigators to the team at the Full stage, such as for additional statistical, methodological or cultural expertise.

You can replace an existing named investigator due to unforeseen circumstances.

Changes to FTE commitments

At the EOI stage, you have selected an FTE band for each named investigator:

- 3% - 10% (Low FTE)
- 11% - 40% (Medium FTE)
- 41% - 100% (High FTE)

At the Full stage, you will need to provide a defined FTE value for each named investigator (i.e. 15% FTE). This value should fall within the band that was selected in your Project EOI application.

© 2026 Health Research Council of New Zealand. All rights reserved.

Change request forms

If you wish to replace a named investigator or you wish to change FTE bands between the EOI and Full application stage. You must complete one of the change request forms below and submit it to the HRC via info@hrc.govt.nz by **1 pm 11 November 2026**. You do not need to complete a change request form to add named investigators.

- Project Change Request Form - Replace a Named Investigator
- Project Change Request Form - Change FTE

You can download the forms from the 2027 Pacific Health Projects information page on HRC Gateway. The HRC reserves the right to determine whether sufficient justification has been provided in the change request form. Unapproved changes to named investigators or FTE commitments will result in your Full application being withdrawn.

2.4 Privacy provisions

Statistical and reporting purposes

The information you provide will be used to assess your application. In a non-identifiable form, some information will be used for HRC's statistical and reporting purposes. The HRC stores all applications in a secure place, which may include the New Zealand Research Information System (NZRIS) curated by the Ministry of Business, Innovation and Employment (MBIE) with details provided by funders of the science sector.

Personal information

Personal information in your application will be available to members of the HRC assessing committees and to external reviewers reviewing your application.

Public announcements

The HRC publishes details of research contracts including named investigators, the host organisation, research title, lay summaries and funding awarded for public interest purposes and to meet the statutory requirements of the *Health Research Council Act 1990*. This may include publishing details on research activities you provide to the HRC in media releases, on the HRC website, in newsletters, and in publications and reporting.

Official Information Act

Official Information Act requests for information about an application or research contract, beyond information that has already been publicly disclosed, will be discussed with the host organisation and programme director before responding to the request. Where appropriate, the request may be transferred to the host organisation.

2.5 Additional eligibility requirements

Eligibility restrictions on publicly funded research

The HRC cannot accept applications made by a public service department, as listed in Schedule 2 of the Public Service Act 2020. Named investigators from these departments may not claim salary support.

As part of the New Zealand Government's broader response to Russia's invasion of Ukraine, a new eligibility criterion has been implemented for government research funding.

For proposals to be eligible, they must not benefit a Russian state institution (including but not limited to support for Russian military or security activity) or an organisation outside the government that may be perceived as contributing to the war effort.

This is not a broad ban on collaborations with individual Russian researchers. The focus is on ensuring that government funding does not support scientific research collaborations that could further Russia's ability to continue its aggression in Ukraine.

© 2026 Health Research Council of New Zealand. All rights reserved.

As a Crown agent, investing in health research for the public good with taxpayer funding, the HRC reserves the right to make ineligible any funding application that will benefit a state institution or other organisation identified for exclusion by the New Zealand Government.

Trusted Research Guidance

Please familiarise yourself with the Trusted Research Guidance for Institutions and Researchers. New Zealand has an open and collaborative research and innovation system and values academic freedom and research conducted independently by individuals and organisations. As part of preserving trust, the HRC screens proposals for risk related to sensitive technologies,[10] and may require funded projects to identify, mitigate, and monitor risks as part of the contractual conditions of the project.

2.6 False or misleading information

Once submitted to the HRC, a funding application is considered final and no changes will be permitted, although it may be withdrawn. The application is the primary source of information available for assessment. As such, it must contain all the information necessary for assessment without the need for further written explanation or reference to additional documentation at the assessing committee meeting. All subcontracts/memorandums of understanding (MOU) and letters of collaboration/support must be provided and uploaded to HRC Gateway before the application submission deadline; see Section 3.6 for more details.

All details in the application, particularly concerning any awarded grants, must be current and accurate at the time of application.

If an application contains false or misleading information, it may be excluded from any further consideration for funding.

If the HRC believes that omission or inclusion of misleading information is intentional, it may refer the matter to the host organisation for the situation to be addressed under the provisions of the organisational code of conduct. The HRC also reserves the right not to accept future applications from the relevant investigators and/or to pursue legal action if appropriate.

Examples of false or misleading information in an application include:

- violating the standard codes of scholarly conduct and ethical behaviour
- providing fictitious CVs or biographical sketches, including roles in previous research
- omitting advice of publications which have been retracted or are to be considered for retraction
- falsifying claims in publication records (such as describing a paper as accepted for publication when it has only been submitted).

2.7 Enquiries

If you have any questions about HRC applications, please contact your host organisation's research office.

You can contact the HRC at info@hrc.govt.nz if:

- your organisation does not have a research office
- your organisation's research office cannot assist you
- you have any technical difficulties (i.e. with HRC Gateway).

HRC Gateway will show the status of any application. Please do not contact the HRC for an update on your application status.

[10] Technologies become sensitive when they: are or could become dual-use i.e. have both a civil and military/security application; or, underpin or have the potential to underpin significant economic value for New Zealand.

© 2026 Health Research Council of New Zealand. All rights reserved.

Part 3: Instructions on completing and submitting your application to the 2027 Pacific Health Project Grant round

3.1 The Project Full application

A 2027 Pacific Health Project Full application form consists of six modules.

Module/Section	Action required
Module 1	Update in HRC Gateway
Module 2	Complete in the **2027 Pacific Health Project Full Application Form** (Microsoft Word template).
Module 3	Complete in the **2027 Pacific Health Project Full Application Form** (Microsoft Word template).
Module 4: Sections 4A-4C	Complete in the **2027 Pacific Health Project Full Application Form** (Microsoft Word template).
Module 4: Section 4D	Upload Letters of collaboration/support documents as separate PDF files to HRC Gateway
Module 4: Sections 4E-4G	Complete in **2027 Project Budget Form** (Microsoft Excel spreadsheet)
Module 5	Upload CVs as separate PDF files to HRC Gateway
Module 6	Complete in HRC Gateway

The application form should be completed in Microsoft Word. Once completed, upload these documents **as a PDF file** to HRC Gateway. The budget form should be completed in Microsoft Excel and uploaded in both **Excel (.xlsx)** and **PDF formats**. When converting your budget form into a PDF format, make sure **all Excel spreadsheet tabs** are included.

Before submitting your application, refer to the checklist in the application form to ensure all requirements have been met.

3.2 The Project Full application form

The **2027 Pacific Health Project Full Application Form** is compatible with most Windows PC and MAC computers. The form has default formatting that conforms to HRC requirements. Figures and tables are best pasted in from a draft document instead of created directly in the form.

Please:

- Use the original HRC document templates.
- Complete all sections following the instructions on the form and described in these guidelines.
- Enter the HRC reference ID# and first named investigator surname on the coversheet (HRC Gateway will remove the coversheet from the final system-generated PDF).
- Enter information only in the indicated form fields.
- Do not reformat module and section headings.
- Do not delete spreadsheet columns/shaded rows; you may insert more unshaded rows.

Note: By submitting an application on HRC Gateway, you confirm that your application complies with all requirements, including formatting requirements and page limits. The HRC will not accept changes after the closing date.

© 2026 Health Research Council of New Zealand. All rights reserved.

Alignment with health research priorities

In the application form's cover sheet, you will need to indicate if your application aligns with one or more of the Health Research Council priorities outlined in Section 1.2 (select all that apply). Applicants are encouraged to articulate how their research aligns with the chosen priorities, where applicable, within the appropriate sections of their application.

The five health research priorities are:

- Priority 1: maximises benefit for healthcare delivery, such as:
    - new models of care and treatments
    - improved effectiveness and efficiency
    - innovation and technology in healthcare, and/or
- Priority 2: contributes to achievement of the health and/or mental health and addiction targets,[11] and/or
- Priority 3: enhances the development of clinician-researchers,[12] and/or
- Priority 4: demonstrates a pathway to commercialisation and / or
- Priority 5: supports high-quality clinical trials, including those with a particular focus on cancer and/or blood cancers.

Healthy People and a Thriving Society Pillar Investment Plan outcomes

In the application form's cover sheet, you will need to select the **one outcome** from the Healthy People and a Thriving Society (HPTS) Pillar Investment Plan with which your application most closely aligns.

While research may contribute to multiple HPTS Pillar Investment Plan outcomes, applicants are required to select only the single most relevant outcome**.** An option of 'Not applicable' is available where applicants consider that their research does not align with any of the six outcomes.

The six HPTS outcomes in the Pillar Investment Plan are as follows:

- HPTS 1: Earlier intervention and disease prevention *(Research improves understanding of disease drivers, enabling earlier intervention, prevention and better long-term health outcomes).*
- HPTS 2: Longer, healthier and more productive lives *(Reduce the burden of high-prevalence physical and mental health conditions through fundamental, discovery and translation research).*
- HPTS 3: Biomedical innovation for health and prosperity *(Biomedical innovation strengthens pathways from discovery to diagnostics, therapeutics, clinical use and commercial growth).*
- HPTS 4: Improved societal resilience, equity and productivity *(Research strengthens social, education and workforce systems that support long-term wellbeing and prosperity).*
- HPTS 5: Smarter, more efficient health and social services *(Evidence supports better models of care, improving access, efficiency and health system performance).*
- HPTS 6: Human-centred health innovation *(Human-centred research improves safe, trusted and equitable adoption of new health technologies).*

[11] The five health targets are: faster cancer treatment; improved immunisation for children; shorter stays in emergency departments; shorter wait times for first specialist assessment; and shorter wait times for elective treatment.
The five mental health and addiction targets are: faster access to specialist mental health and addiction services; faster access to primary mental health and addiction services; shorter mental health and addiction-related stays in emergency departments; increased mental health and addiction workforce development; and strengthened focus on prevention and early intervention.

[12] A clinician-researcher conducts research and provides clinical services in any setting, under formal work arrangement and is eligible to undertake clinical practice in New Zealand either under the Health Practitioners Competence Act 2003, through registration with the relevant responsible authority, or as a member of Allied Health Aotearoa New Zealand.

© 2026 Health Research Council of New Zealand. All rights reserved.

The selections made by applicants may inform consideration of how proposed HRC investments contribute to the priorities and outcomes of the HPTS Pillar Investment Plan.

For more information see the Pillar Investment Plans 2026–2031 | Ministry of Business, Innovation & Employment.

3.3 Module 1: General information

Note: All named investigators must have an HRC Gateway account to be included in your application. They must have also signed in to HRC Gateway recently and completed an annual profile check and update before an application can be submitted. All named investigators must be added to your application on HRC Gateway.

Module 1 is completed in HRC Gateway, and most information will have been provided at the EOI stage. Most fields cannot be edited or updated. Update Module 1 in HRC Gateway to include the following information.

Research title

The research title should be succinct, written in plain language, and clearly describe the proposed research. The title must not exceed 80 characters, including spaces and punctuation (e.g. 'growth factors' contains 14 characters). Please use sentence case. The HRC reserves the right to amend the title of funded applications.

Lay summary

The lay summary must be 150 words or fewer and clearly state: 1) the purpose of the research and why it is needed; 2) how the research will be completed, including the research activities; and 3) anticipated contribution to improvements in health outcomes and/or the health system and value for money (being specific about the anticipated outcomes where possible).

If your proposal receives funding, your lay summary will be published on the HRC website to communicate to the public the aims, activities, impact and value of your research.

Please use plain language that can be easily understood by members of the public and avoid using technical terms, with any acronyms fully written out in the first instance. The HRC reserves the right to amend the lay summary of any HRC-funded research in terms of its readability for a lay audience.

Commencement date

Enter the proposed commencement date. Please note that the research activity must start by **1 August 2027**.

Support personnel

Examples of support personnel include individuals who will help you with the project application process (i.e. upload your application to HRC Gateway). Do not list named investigators, collaborators or your host organisation's research office staff. All support personnel need to have an HRC Gateway account to view and edit your application.

First named investigator (confirmed at the Project EOI stage)

Some of this information will be automatically populated from the first named investigator's profile in HRC Gateway (e.g. organisation and department). If the profile is not current, details must be updated. The details listed on the application will be automatically refreshed after the profile is updated. Click on the 'Update' button to enter and update the information requested.

The first named investigator is considered the first point of contact during the application and assessment process and will be understood to be acting for, and in concurrence with, the other named investigators. All correspondence for the application will be addressed to this

© 2026 Health Research Council of New Zealand. All rights reserved.

person and the host. Once an application is created, the first named investigator cannot be changed.

Information on ethnicity, gender and whether the researcher is a clinician (and is practising) is used for HRC information purposes only. Please note that ethnicity, iwi, clinician, or practising clinician are not required to be entered as these details will automatically populate from the individual's profile.

Named investigators

The research team from your EOI application should match the majority of the research team in your Full application. Therefore, you cannot make major changes for the named investigators at the Full stage without the HRC's permission. Refer to Section 2.3 for detailed guidance. A named investigator is an individual with a significant role in the design, conduct, or reporting of a research project**. All key team members** who contribute to the research, have a specific role and are named in the body of your application **must be added to this application on HRC Gateway** and will be included in Module 1. Each named investigator will need to sign in to HRC Gateway and check and update their details before applications are submitted. Click the 'Update' button to enter additional information as requested.

Under 'role type', you can assign a role to each individual as follows:

- Co-first named investigator (confirmed at the Project EOI stage): A co-principal investigator (or co-lead researcher) with joint overall responsibility for the project. This is confirmed at the EOI stage; you cannot change Co-FNI at the Full stage.
- Named investigator: A named investigator listed on the application, whose expertise and involvement are critical to the project's success.
- Student: A master's or PhD student named in the project application.
- Technician: An individual who will complete specific tasks that require technical knowledge and experience (e.g. those collecting participant data, processing and analysing samples, managing datasets, operating equipment, or providing biostatistical or cultural expertise).

Role in project should include brief information on what the named investigator will undertake in the activation activities (1-2 sentences maximum). It should be clear which individual(s) are contributing in a mentoring capacity.

Enter a defined FTE value for each named investigator. Use the FTE value for the first year of that investigator's involvement (from the budget spreadsheet).

A CV is required for all named investigators and must be uploaded into this section using the 'Upload CV' button. Please refer to section 3.7 for detailed guidance.

For named investigators not employed by the host organisation, a subcontracts/Memorandum of Understanding (MOU) **must be uploaded** in the supporting document section on Gateway. Please refer to section 3.6 for detailed guidance.

Information on ethnicity, gender and whether the researcher is a clinician (and is practicing) is used for HRC information purposes only. Please note ethnicity, iwi, clinician, or practising clinician are not required to be entered as these details will automatically populate from the individual's profile. All named investigators on successful applications may be cited by the HRC in its various communication channels.

Collaborators

Collaborators are individuals who are not named investigators (i.e. not listed as members of the research team) but who contribute in-kind or paid support to assist in conducting the research. Their involvement may include providing expertise, resources, or services to support research activities.

Collaborators do not need to be registered Gateway users. When adding collaborators, please update the person's title, name, organisation, country and support level. You will also need to provide brief details on the purpose of the collaboration.

© 2026 Health Research Council of New Zealand. All rights reserved.

A letter of support for each collaborator must be uploaded to HRC Gateway. Refer to Section 3.6 for detailed guidance.

Note: Applicants are required to add **ALL relevant team** members to HRC Gateway as named investigators or collaborators. The assessment of the expertise and track record of the research team will be based on the named investigators and collaborators added on Gateway. This information is also an important part of the HRC's conflict of interests management process and must be taken into serious consideration.

Research costs

Click the 'Update' button to enter the totals for staff costs, overhead, working expenses and the total cost of research. The totals entered must match the totals in the uploaded budget form.

Unacceptable peer reviewers

You can identify up to two individuals who are not acceptable as peer reviewers for the application. Click the 'Update' button to enter the name, organisation, and reason for exclusion.

Objectives and milestones

Objectives and milestones are assessed, included in a resulting research contract, and used for contract monitoring in progress and end of contract reports. Objectives and milestones must be measurable and achievable within the term of a contract.

Objectives

Briefly describe the intended objectives of your Project application. Objectives should relate to the overall goal or aim of the research. The HRC suggests a minimum of three objectives, with sufficient standalone operational detail and scientific information to assess your performance in subsequent years.

All objectives must be added before milestones can be added. There is no limit to the number of objectives and milestones.

Milestones

Provide key milestones that you aim to achieve by the end of each year of a resulting contract. Each milestone must relate to one or more of the objectives previously added.

Note: For contract monitoring and HRC accountability reporting, if your research requires biosafety, regulatory, human or animal ethical consents, or clinical trial registration, these must be identified as separate Year 1 milestones, even if you expect to gain these consents before starting the proposed research.

Please refer to your institution's policies or the website of the Health and Disability Ethics Committees for further guidance.

Example milestones:

Year	Milestone	Objective(s)
1	Gain animal ethics approval	Objective 1
1	Complete animal study, data collection, and analysis	Objective 1
1	Register clinical trial prospectively in ANZCTR	Objective 2
1	Gain ethics approval for clinical trial	Objective 2
2	Publish results of lab-based study	Objective 1
2	Recruit 200 participants to clinical trial	Objective 2

© 2026 Health Research Council of New Zealand. All rights reserved.

3	Complete recruitment to clinical trial (300 total)	Objective 2
3	Complete statistical analysis of clinical trial	Objective 2
4	Submit manuscript to NZMJ	All objectives

3.4 Module 2: Research

Note: you must use the section headings provided in the application form as they correspond to the score criteria that will be used by the assessing committee.

Your audience includes discipline-specific peer reviewers and a more broadly experienced assessing committee. Therefore, not all members will have specialist knowledge of your research topic. It is in your best interest to structure your writing clearly and logically. Ideally, seek feedback from a colleague outside your immediate research area. Please refer to Appendix 2 for the scoring criteria for these categories.

Using graphics and tables is an efficient use of space, it is best to copy and paste these from a separate Word document instead of creating them directly in the application form. Ensure font type and size are easily legible and any non-text content is compatible with PDF conversion software.

Section 2A: Summary of proposed research (1-page limit)

This section should clearly summarise the research proposal. Reviewers use this section to get an overview of your application and as a quick reference. Include all the important points of your application but keep this section to only **one page** long. The content should be similar to your EOI. You can add subheadings if required.

Section 2B: Description of proposed research (10-page limit, excluding references)

Rationale for research

All HRC-funded research must focus on health and improving health outcomes, align with HRC priorities, outlined in Section 1.2, to the greatest extent possible, and meet the requirements outlined in Section 1.4 of this document. You will need to clearly describe the health and health system issues that your research aims to address.

Demonstrate that you have adequately reviewed what is already known in the area and that there is a clear case for further research. For example, refer to systematic reviews or an otherwise robust demonstration of a research gap. If similar research has already been conducted overseas, clearly explain the additional value of conducting this research in New Zealand.

Include information that is essential for the reader to better appreciate or understand why your proposed research should be supported by government funding.

For example:

- What is the significance of the health issue for New Zealand?
- What is the justification for taxpayer investment, i.e., will it deliver meaningful outcomes for New Zealand's health, social and/or economic benefit?
- What is the significance for Pacific health gains?
- Does the proposed research provide a clear evidence-base when describing areas of high health need and population groups with high health need?
- What is the significant/important gap in knowledge, policy, practice, or service delivery that your research will address?

© 2026 Health Research Council of New Zealand. All rights reserved.

- How does your proposed research build on existing knowledge and evidence, and how will it contribute to, extend, or align with, research currently being undertaken either nationally or internationally?

Research design and methods

Provide sufficient details so the assessing committee can review your scientific protocol, feasibility, appropriateness, robustness and innovativeness. Clearly state what will be done, how, by whom, where and when.

Consider the following when responding to this section:

- Subject recruitment and characteristics (including number, gender and ethnicity where relevant).
- Study methodology, and proposed methods of data collection and analysis. Where appropriate, provide power calculations, an estimate of the likely effect size and the sample size required to detect this (power analysis). The HRC recommends involving a statistician in this process.
- Timelines for your research. The HRC recommends that you consult with specialists, such as methodologists, statisticians and health economists before finalising your research design. Where possible, detail the validity of the proposed analyses and the feasibility of attaining the statistical power sought.
- Clinical trial applications should include a description of statistical guidelines for early termination and a description of data and safety monitoring arrangements, where appropriate (refer to Appendix 1 for more details).
- Basic science applications are encouraged to provide control data to help the assessing committee. In addition, please provide evidence that mouse models have been generated (even if not in-house) and are viable if transgenic/knock out mice.
- If your research is patent protected, provide the patent number and a summary of information available (if no technical information can be provided).

The HRC provides an independent data monitoring committee that has appropriate trial-specific expertise and follows best international practice if required. For general information on trial monitoring and the HRC Data Monitoring Core Committee (DMCC), see http://www.hrc.govt.nz/about-us/committees/data-monitoring-core-committee.

Research impact

Assessment of impact includes two components: 1) a **description** of how your research might be used and the anticipated benefits for Pacific communities and New Zealand; and 2) the **action plan** to maximise the use and benefits of the research. See the HRC's Research Impact Assessment slideshow for additional guidance on completing this section.[13]

What types of benefits are expected to arise from your research, and **who will benefit?**

This section should provide a realistic description of how research findings could contribute to improving Pacific health outcomes and/or the health system over time (a 'line of sight' or 'pathway' to impact). Importantly, it should also identify the more immediate benefits, and users of the research who will form a focal point for your action plan (below). The balance between describing short-term benefits and potential longer-term impact will be dependent on the specific research context, with emphasis on considerations within your sphere of influence throughout the life of the research project.

The HRC's Research Impact Assessment slideshow includes discussion of elements that should be covered in this section.

[13] Consult the HRC's Research Impact Assessment slideshow on the HRC website for further discussion on the types of benefits that can arise from health research, and where these benefits might be expected to occur along a pathway to impact.

© 2026 Health Research Council of New Zealand. All rights reserved.

What specific activities have been, or will be, undertaken, throughout the life of the research project to maximise the use and benefits of your research for Pacific communities?

Provide information on how the proposed research contributes to:

- Pacific health knowledge and the translation of knowledge into health gains
- the utilisation of Pacific health research and ethics processes
- the contribution to Pacific health research workforce development and leadership
- responsiveness to and partnership with Pacific stakeholders and communities.

Describe what targeted actions have been, or will be, taken to improve the likelihood of research uptake and impact, and to ensure that the next users or end users (identified in the previous section) can meaningfully contribute to, and/or benefit from, the research.[14] Describe other planned dissemination activities that are designed to reach broader audiences. Who can enable the uptake of your research, and how have they been involved in your research? Identify uncertainties to uptake, or systematic/institutional barriers, and your mitigation strategies (where relevant).

What elements of the **team's track record of knowledge transfer** provide confidence in the likelihood of research uptake? For example: existing links, relationships, or networks with relevant research next-users or end-users; demonstrable examples of knowledge mobilisation, or changes in health outcomes or societal impact generated from similar research. This component is considered relative to opportunity.

Expertise and track record of the research team

Provide evidence that your research team has the experience, qualifications, and infrastructure to deliver the research.

Clearly define the team's mix of expertise, appropriate networks and collaborations; history of productivity and delivery; and the appropriateness of the research environment/infrastructure to deliver the research and disseminate results.

Provide a justification for each member's role. Highlight important skills, expertise and previous collaborations in the team that would support delivery of the proposed research.

A CV must be provided on HRC Gateway for all named investigators to help the assessing committee determine whether their expertise is appropriate and necessary. The assessing committee will consider the FTE of senior investigators on each proposal and weight their scoring on the expertise and track record of the research team accordingly; i.e. high scores should not be allocated for a senior named investigator who has a small percentage FTE involvement in the research.

Describe any career disruptions, and their impact, that may be relevant to your career history. A career disruption is defined as a prolonged interruption to an applicant's capacity to work due to pregnancy, major illness/injury, parental leave, and/or carer responsibilities.

The HRC recognises that applicants with experience in sectors other than public sector research may have gained valuable expertise or produced outputs (e.g. patents) relevant to research translation, and this may have limited the applicant's opportunity to produce more traditional research outputs.

Note: Applicants are required to add **ALL** relevant team members to HRC Gateway as named investigators or collaborators. The assessment of the expertise and track record of the research team will be based on the named investigators and collaborators added on Gateway. This information is also an important part of the HRC's conflict of interests management process, and must be taken into serious consideration.

[14] Consult HRC Guidelines and funding rules for information on support of knowledge transfer activities and include these activities in objectives/milestones where appropriate. Progress against implementing the action plan will form part of the milestones HRC monitors with respect to contractual compliance and delivery.

© 2026 Health Research Council of New Zealand. All rights reserved.

3.5 Module 3: References

Start this section on a new page, there is no page limit.

Citations for key references in the text in Module 2 should be supplied. Details must include a **full list of all author(s)***,* title of article, journal, year, volume and page numbers. Endnote lists must be copied into a plain text editor before pasting it in this section. Place an asterisk beside named investigators' publications.

A glossary of Pacific terms used in the application with a brief translation can be included here.

3.6 Module 4: Contract information and Budget

Section 4A: Justification of expenses

Justification of research staff

Justify the role and FTE of the named investigators and any other research staff listed in Section 4E (Research Proposal Budget) and Section 4G (FTE Summary). Please include the following (if applicable):

- An explanation of each person's role (named or unnamed, funded or not funded by the proposal), who will be actively associated with the research. These may be research assistants, technicians, medical staff, interviewers and support staff or similar, whose names or position titles are listed in the budget under 'research staff' and who have specific FTE involvements. Time-only staff require clear justification.
- A justification for unnamed postdoctoral fellows. Named postdoctoral fellows should be included as named investigators and provide their CVs.
- Evidence that biostatisticians, data managers and health economists are integrated into the team as appropriate, e.g. sufficient FTE is allocated for each year of the contract.
- Whether a role is involved in mentoring junior team members.

Funding requests may be declined for roles that are not fully justified or are only described as a 'training opportunity'. It is your responsibility to ensure that no personnel in this section will exceed 100% FTE of their combined commitments during the term of the contract. The roles of students and casual staff should be justified in the next section, 'Justification of working expenses and casual staff'.

Justification of working expenses and casual staff

All items listed under 'Materials and research expenses' in the budget should be justified. Provide costs per item unit and full costs per item for the number of units requested. Costs associated with knowledge transfer activities can be included. Quotes must be provided to support discretionary costs, where available.

The assessing committee will consider the appropriateness of the budget and working expenses. If there are exceptional requests for working expenses, ensure they can clearly understand why the requested materials, travel, research tools or significant one-line items are necessary.

Justify the roles of students and casual staff so that the assessing committee can appreciate how these individuals are necessary for the proposed research. For students, stipends must be included at the per annum values approved by the HRC: $30,000 for PhD students, $20,000 for master's students and up to $7,500 for summer students, or pro-rata for part-time students.

Students should be named if they have been identified at the time of application, along with a description of how their expertise relates to their role. Unnamed students can be included in the application budget, e.g. "PhD student (not yet appointed)". Once you have appointed an unnamed student, please advise the HRC of the student's name and relevant expertise. If you include an unnamed student, you cannot include any information about your intention to

© 2026 Health Research Council of New Zealand. All rights reserved.

recruit and appoint a student with any particular expertise or other characteristic, such as ethnicity or gender. Any such detail on unnamed students is considered unjustified and will be disregarded in the assessment process.

It is your responsibility to ensure that students do not exceed 100% FTE on their combined commitments with the host organisation during the term of the contract.

Section 4B: Previous/current contracts and awards

Using the table provided, outline current and previous funding contracts from any agency that have been received in the last 5 years by **the first named investigator (and co-first named investigator if applicable) as principal investigator**. Copy the table and repeat for each received grant as required. This section provides the HRC reviewers and assessing committees with an overall summary of your abilities to secure funding for research.

For 'Nature of support', indicate whether the funding supports salaries only, working expenses only, both salary and working expenses, equipment, a junior research fellow, etc.

Note: You can replace the table with an Excel spreadsheet. If doing so, please use the same layout as the original table.

Section 4C: Other support

Programme applications related to this project

State if any named investigators on this Project application are also named investigators on an HRC Programme application. If this Project is a part of a Programme application, your Project application will be withdrawn if the related Programme is successfully funded. If there is a justification for why your Project application should not be withdrawn in these circumstances, provide it here.

Other research applications awaiting decisions

List any relevant research applications pending with other funders that might alter the project's budget. If applicable, indicate in the spaces provided any overlap (research, resources and personnel) that the listed application might have with this application. By providing this information, you agree that the HRC may seek clarification details from the other funders if required.

Co-funding

Provide details if you have approached other funders to co-fund this research. If applicable, detail the joint funding arrangements.

Financial or other interests

For the purposes of HRC processes, a financial interest is anything of economic value, including relationships with entities outside of the research host organisation. Examples of financial interests include positions such as consultant, director, officer, partner or manager of an entity (whether paid or unpaid), salaries, consulting income, honoraria, gifts, loans and travel payments. A financial conflict may compromise, or have the appearance of compromising, the individual's professional judgment in conducting, assessing or reporting research.

Examples of other interests include aligning with special interest groups seeking to advance or promote a particular worldview or policy.

Please disclose and provide details of any significant relationship to third parties (e.g. commercial sector entities contributing to project costs, equipment, staff joint appointments). Clearly describe how the current application relates to those relationships.

If you can identify financial or other interests in your funding application, outline the specific details of your proposed conflict management strategy. Assessing commercial links is not part of the HRC peer review process.

Section 4D: Letters of collaboration/support documents

© 2026 Health Research Council of New Zealand. All rights reserved.

Any additional documentation (including subcontracts/Memorandum of Understanding (MOU), letters of collaboration/support) should be uploaded as separate PDF files under 'Letters of collaboration/support documents' on HRC Gateway.

For named investigators not employed by the host organisation, a subcontracts/Memorandum of Understanding (MOU) is required; for each collaborator, a letter of support collaborator is required. Upload these documents to Section 4D on HRC Gateway before you submit your application to HRC.

If a PDF file includes a digital signature, please flatten the PDF before uploading it to HRC Gateway. This can be done by opening the PDF document and selecting the 'print to PDF' option.

HRC Gateway will automatically generate a list of uploaded documents.

A letter of collaboration should outline how the interested party intends to implement the findings of the research upon its completion, or provide material or actual support for the research, **not simply state that the research is necessary**. Please ensure that any organisation providing a letter of collaboration recognises their intended commitment to conduct the proposed research and the timeline of their involvement.

Your application should contain all the information necessary for assessment without the need to refer to additional documentation. Supplementary materials, such as slides, protocols, and other funding applications, should not be included. Any additional documents containing information beyond the main body of the application may be removed at HRC's discretion.

You can upload up to 15 letters of collaboration/support documents. Your uploaded documents will be added to the end of your application.

Section 4E: Research proposal budget

The budget spreadsheet in Section 4E can be used for different types of applications. Select 'Project' from the drop-down list. Further instructions are contained in the Notes tab of the file.

The guidelines below are a summary of the HRC's funding rules. For more information, please refer to the HRC Rules.

Budget calculations and spreadsheet

All calculations should be **GST exclusive and in whole dollar amounts**, i.e. no cents or decimals.

Section 4E includes the total research staff FTE and salary, total research working expenses, the host organisation's overhead rate, and the total cost of research. The spreadsheet automatically calculates these totals. Do not enter details into the shaded cells, as these are completed automatically. Insert more rows into the table, if required.

Note: Ensure the 'total cost of research' is within the budget limit outlined in **Section 1.6.**

FTE and Salary

Only enter **named investigators** and **contract research staff** employed or to be employed by the host organisation (including academics) in this section.

For each individual, specify their grade/level, FTE and salary; time only is permissible. The monetary value ($) should be the **actual** salary amount that the named staff member is expected to receive for their part of the research proposed each year.

The budget form does not accept FTE less than 3%. The HRC assessing committees do not favour listing numerous investigators with a very low FTE, and salary requests should only be for significant input and involvement in the project. Advisory groups of contributors, who have FTE commitments of less than 3%, may be justified and included as research working expenses ('advisory group fees').

© 2026 Health Research Council of New Zealand. All rights reserved.

Salary associated costs (i.e. the employer's contribution to approved superannuation schemes and accident compensation levies) should be entered in the 'Research working expenses' section.

Note: Overheads will be paid at a negotiated rate for each institution on all eligible contracts. Ensure these are included at application stage in the budget sheet and Module 1.

Materials and research expenses

The direct costs of the research include all the disbursements that can be identified, justified and charged to a contract. Estimates of costs should be expressed in current prices **exclusive of GST.**

Costs may include the following:

- Research consumables (these should be itemised at the current cost per unit and full cost for the number required).
- Other costs **directly** related to the research (e.g. telephone calls/communications, mail and freight).
- Computer-related license fees for research-specific software; access to High Performance Computing infrastructure (NeSI).
- Minor research equipment (to a total of $5,000).
- A proportionate part of new specialised equipment (equipment to be acquired) may be included and justified on research applications (upload any budgetary supportive documents separately on HRC Gateway as supporting documents).
- Depreciation on specialised equipment if your host organisation's auditors have certified that it will be excluded from your organisation's overhead rate. This cost must be justified in your application and supporting documentation should be uploaded to HRC Gateway. For all other equipment, depreciation and capital costs are included in your organisation's overhead rate.
- Expenses relating to research participants.
- Costs associated with knowledge transfer activities.
- Travel costs **directly** related to conducting the research. Contract funds may be used to assist with overseas travel provided the HRC is satisfied that this travel is directly relevant to conducting the research and that alternative funding sources are not available. This is not intended to relieve your host organisation of its obligation to assist with the costs of overseas travel by its employees.
- Disseminating research results. Contract funds can be used to pay fair and reasonable charges to publish HRC-sponsored research in journals, reports, monographs or books. Also, costs incurred from other forms of dissemination, such as meeting with community groups or conference dissemination, can be claimed if reasonable and justified.
- Conference allowance: the maximum allowance for conference attendance is $1,000 per annum per named investigator if **fully supported at 100% FTE** by the grant and must be fully justified. The allowance cannot be distributed proportionately between grants. This allowance is distinct from the cost to disseminate findings from this proposed research; this cost must also be fully justified. Fares and allowances should be calculated following the host organisation's regulations and scales.

Note: If you intend to ask the HRC's Data Monitoring Core Committee (DMCC) to monitor this study, there is no cost involved. However, your application must include adequate provision for statistical support to provide the DMCC with all data and analysis they request to carry out their monitoring including the preparation of biannual statistical reports. Also,

© 2026 Health Research Council of New Zealand. All rights reserved.

costs for members of the study team (including the study statistician) to attend the meetings need to be included in the application's budget. If you have any questions, please contact the DMCC secretary at dmcc@hrc.govt.nz.

Casual staff

Casual staff (those persons without an ongoing role or commitment to the research but providing one-off services to the research on a part-time, hourly or per diem basis, e.g. interviewers) should also be requested under 'Research working expenses'.

Postgraduate student costs

Costs for stipends can be requested for master's and PhD students under 'Research working expenses'. Stipends must be included at the HRC-approved rates (master's $20,000 per annum; PhD $30,000 per annum).

Both named and unnamed students can be included; in both cases, describe the student's research project/contribution to the research activity in Section 4A. Students should be named if they have been identified at the time of application. Unnamed students can be included in the application budget as e.g. "PhD student (not yet appointed)". The HRC must be advised of the student's name once appointed.

Funding for stipends will be conditional upon the host organisation arranging a tax-free stipend that satisfies the Inland Revenue Department and host organisation's rules.

Note: Students' fees and thesis costs cannot be claimed.

Subcontract/Memorandum of Understanding (MOU) budget

Subcontracted staff are those who are not employees of the host organisation. The salaries for these staff and all other expenses requested for the subcontract (e.g. working expenses) should be broken down into appropriate categories on a detailed subcontract/Memorandum of Understanding (MOU) between the host organisation and non-host organisation using 'Section 4F' of the budget spreadsheet.

Enter the subcontract/MOU total, **exclusive of GST**, under 'Subcontract MOU budget' for each year. The total figure should be all-inclusive, including overhead calculations for salaries.

Note: the HRC does not cover overheads for overseas-based organisations.

If a subcontract/MOU budget is more than $50,000, all expenses requested should be broken down into the appropriate categories in Section 4F of the budget spreadsheet (MOU budget).

Please provide MOUs for time-only subcontracted staff who are not employed by the host organisation. If MOUs cannot be provided by the application deadline, you can include a letter of support that describes the individual's role and level of involvement. If your application is successful, copies of MOUs that were not provided for any time-only individuals may be required at the contracting stage.

Please upload all MOUs and letters of support as separate PDF files on HRC Gateway. If the PDF file includes a digital signature, please flatten the PDF before uploading it to HRC Gateway. This can be done by opening the PDF document and selecting the 'print to PDF' option. Refer to 'Section 4D: Letters of collaboration/support documents' for further details.

Salary associated costs

Amounts requested for the employer's contribution to approved superannuation schemes and accident compensation levies for research staff should be entered in the 'research working expenses' section. Enter the amounts for each year separately in the budget form. The percentage rates for both ACC and superannuation for each individual (and justified in Section 4A where required, i.e. for non-standard rates).

© 2026 Health Research Council of New Zealand. All rights reserved.

International expenses

The HRC does not contribute to the overhead of overseas investigators. The total proportion of the contract budget allocated to overseas investigators must not exceed 20%.

Total cost of research

Enter the appropriate overhead rate (OHR) in the budget. Seek advice from your host organisation's research office on the costing of your application and the overhead rate negotiated with the HRC.

Note: Overheads will be paid at a negotiated rate for each institution on all eligible contracts. If your organisation does not have a negotiated overhead rate, please enter a rate that will cover business expenses not directly related to the cost of undertaking the proposed activity, e.g., office rental fees, power etc. Please contact the HRC if you are unsure of what an appropriate rate is.

After entering the appropriate overhead rate, the total cost of the research will be automatically calculated. Enter the staff costs, overheads, working expenses and total cost of research from the budget form into the HRC Gateway section named 'Research costs'.

Section 4F: Subcontract MOU budget

If a substantial proportion of the total budget is contained in a subcontract/MOU, the expenditure must be itemised in the same way as the overall research proposal budget (see above).

Use Section 4F to provide budget details for all MOUs requesting more than $50,000; add a copy of Section 4F for each subcontractor. Use the overhead rate for the subcontracted staff member's host organisation, not your host organisation. The total dollar amount for each year should then be entered under 'Working expenses – subcontracts' in Section 4E of the budget spreadsheet.

Upload a copy of the subcontract/MOU to HRC Gateway as a supporting document.

A CV must also be provided in Module 5 for all named investigators on MOUs to help the assessing committee determine whether their expertise is appropriate and necessary. Without this information, the assessing committee may not support the budget for the MOU. CVs are not needed for employees of commercial enterprises providing service for fees.

If there are no subcontracts/MOUs for this application, or none requesting more than $50,000, you can ignore Section 4F.

Section 4G: FTE summary

When completing this section, please:

- List the time involvement of **all** personnel (including those on a subcontract/MOU) in full-time equivalents, e.g. 10% FTE. Half percentages (e.g. 4.5%) are not allowed. Ensure the FTE figures match the budget, MOU budget sections (Sections 4F and 4G), and Module 1.
- Give all names. Unnamed positions can be indicated as 'technician', 'research nurse', 'postdoctoral fellow', etc.
- Indicate when named investigators are time-only (i.e. not receiving salary for their involvement in the project).
- Identify all postgraduate students by master's or PhD.

Note: For successful applications, host organisations will need to provide written confirmation that all research staff named and paid, in full or in part, from the funding provided will be given sufficient workload relief to fulfil the research contract objectives and milestones (principles of full cost funding).

© 2026 Health Research Council of New Zealand. All rights reserved.

3.7 Module 5: New Zealand Standard CV

Upload a CV for all named investigators. HRC Gateway will automatically compile CVs under Module 5 of your application.

CVs must be completed on the New Zealand Standard CV template. Please use the default font and stay within the page limits. The HRC will not accept any other forms of CV.

The information provided in your CV **must match** the information provided elsewhere in the application and in your HRC Gateway profile.

Your CV may indicate when career breaks (including pandemic-related disruptions) have taken place as your track record will be assessed relative to opportunity.

3.8 Module 6: Research classification

Required details must be entered in HRC Gateway.

Australian and New Zealand Standard Research Classification (ANZSRC)

Categorise the proposed research using the ANZSRC codes for the Fields of Research (FOR) and Socioeconomic Objective (SEO). Enter the percentage to the nearest 10% for each category to a total of 100%.

Keywords

Enter keywords that categorise the research.

Economic benefits

Briefly describe any potential economic benefits which may arise from your research. If you do not anticipate any direct economic benefits, please state this rather than leaving the field blank. The HRC's interpretation of economic benefits is broad and includes:

- contributing to maintaining a healthy and productive population
- contributing to an efficient and cost-effective health system, and
- value generated from IP and innovation.

Health issues

Enter the requested information on HRC Gateway. Select the health issue that best describes your research and, if required, one secondary health issue.

Mapping category

Select the category that best describes the starting point for your research. The following table provides a description of each category.

Mapping category	Description
Biomedical	
Gene	Research into the genetic basis of disease or identification of genes involved. Linkage analysis falls here and not under clinical studies.
Cell biology	Analysis of molecular-level interactions. This includes protein-protein interactions, determination of the function of genes involved in diseases, and whole cell studies (e.g. immunological studies, transfections, etc).
Physiology	All physiology and anatomy, including animal models of disease and studies on host-pathogen interactions.
Diagnostics	Innovations and the development/refinement of new or existing diagnostic tools.
Pharmaceuticals / treatments	The development of new pharmaceuticals (drug design and development), as well as new treatments for diseases (e.g. vaccines, other therapies).
Clinical	

© 2026 Health Research Council of New Zealand. All rights reserved.

Clinical studies	Research involving human subjects. This excludes research in which samples from human subjects are used for fundamental biomedical research, such as genetic linkage analyses.
Clinical trials	Randomised clinical trials usually randomised controlled clinical trials.
Health services	
Health economics	Research into the cost-effectiveness of treatments/services, etc.
Clinical services	This includes primary and secondary care services. Access to and appropriateness of services are also included, and safety of services and compensation. Macro-level analysis of health system changes falls into this area.
Public health	
Knowledge resources	All epidemiology, underpinning social science (qualitative and quantitative), development of tools and new methodologies, and development of indicators.
Risk factors	Research linking life experiences, behaviours, exposures etc. with health outcomes.
Interventions	Research that includes the design and evaluation of interventions.
At-risk populations	Includes research on specific population groups. These groups may be based on age, ethnicity, occupation, etc. Includes research using diagnostics in a particular group.
Community services	Research around community-run services and community groups, e.g. marae-based healthcare services.

© 2026 Health Research Council of New Zealand. All rights reserved.

Appendix 1: Proposals including randomised controlled trials (RCTs)

The Controlled Trials Assessing Committee (CTAC) is responsible for assessing randomised controlled trials (RCTs) across all disciplines, except for Pacific Projects and Rangahau Hauora Māori Projects which are assessed by the Pacific Projects Assessing Committee and Rangahau Hauora Assessing Committee, respectively. The purpose of establishing this committee was to ensure consistency in assessing RCTs and to improve the quality of HRC-funded RCTs. CTAC members are selected for their knowledge and experience of RCTs and have expertise in disciplines reflecting the nature of applications assigned to the committee. Members of the Data Monitoring Core Committee may also be represented on CTAC.

Generic weaknesses that have been highlighted by CTAC include issues with methodological quality and poor knowledge of clinical trial conduct. To improve the rigor and completeness of clinical trial proposals, please refer to the SPIRIT 2025 Statement when developing your trial protocols and applications.

In addition, consider all items on the SPIRIT checklist. Pay particular attention to the items listed in the Methods section (items 11-29). Addressing these can improve methodological quality and enhance knowledge of clinical trial conduct. Furthermore, consider designing phase III trials with 90% power to detect well-justified minimum important differences. Exceptions would include research questions of importance to New Zealanders that can only be addressed in New Zealand, and the trial size is limited by the pool of patients and the pressure for a timely answer.

Consider the broad expertise of their audience (CTAC) when describing your trial protocol. For example, when describing your sample size (SPIRIT item 19), justify all information in the calculation and clearly describe the minimum important difference and how this translates into meaningful clinical benefit.

A significant number of clinical trial research proposals request funding for the New Zealand arm of an international study. Clear administrative information relating to funding (SPIRIT item 7) is required in your application, including the status of all sources of funding and whether the proposal is dependent on international funding. Roles and responsibilities (SPIRIT item 3) should be explicitly stated in your application, including the specific role of the New Zealand investigator (e.g. as distinct from the site coordinator role) and any New Zealand-led trial components. Additionally, address New Zealand-specific health significance and impact on clinical care in New Zealand rather than replicating generic information from the international protocol.

Clinical trial registration

As part of our commitment to supporting best practice in clinical trials, the HRC is a signatory to the World Health Organization (WHO) Joint Statement on Public Disclosure of Results from Clinical Trials (the Joint Statement). The Joint Statement sets out policy and monitoring requirements for mandatory timeframes for prospective clinical trial registration and public disclosure of the results of clinical trial research.

The Joint Statement reflects the ethical and quality standards that must be met by HRC-funded clinical trials. This will enhance the evidence base for clinical medicine, both in New Zealand and internationally, while providing easily accessible information to the public, patients and their whānau.

The HRC's full policy statement on clinical trial transparency can be found here.

All RCTs funded by the HRC, either wholly or partly, are required to be registered on an established clinical trials registry (e.g. ANZCTR; Clinicaltrials.gov). Registration should be prospective and should be added to the application as a Year 1 milestone, even if you expect registration to be achieved before starting a resulting contract.

© 2026 Health Research Council of New Zealand. All rights reserved.

Appendix 2: Pacific Health Project application assessment process

1. Overview

Two-stage process

Project applications are evaluated through a two-stage process comprised of an Expression of interest (EOI) application followed by a Full application.

The process enables a wide range of applicants to submit an EOI application. From the pool of EOI applicants, a smaller group is invited to submit the longer, more detailed Full application.

The HRC uses a range of compliance and evaluation tools so that the number of applications at both EOI and Full stage is appropriate given the amount of funding available and the resource-intensive nature of high-quality scientific evaluation.

Peer review of EOI applications is provided by assessing committees convened by the HRC whose members are experts in relevant areas of research. Full applications undergo peer review by external experts (REINTRODUCED) and by the relevant assessing committee.

In the final stages of the process, assessing committees provide a list of recommendations for fundable applications to the HRC Council who make the final funding decisions, informed by the assessing committee recommendations, the balance of investments across our portfolios, and consideration of alignment with HRC priorities, and the outcomes in the Government's Healthy People and a Thriving Society Pillar Investment Plan.

Stage One: EOI application (completed)

The purpose of the EOI application stage is to identify which applicants will be invited to submit full applications in the second stage of the process.

Each EOI application that is progressed is independently scored by the members of the relevant HRC assessing committee, using assessment criteria (see Appendix 3). This scoring generates a ranked list of EOI applications, and the highly ranked applications are invited to submit full applications.

Stage Two: Full application

The purpose of the Full application is to demonstrate in greater depth the quality and scientific rigour of the research project, including the research rationale, design and methods, impact, Māori health advancement, the expertise and track record of the research team, and how the research aligns with HRC funding priorities for the round.

Full applications are reviewed initially by external peer reviewers and the primary Committee Reviewer 1 (a member of the relevant assessing committee). Applicants have the opportunity to submit a rebuttal of the external reviewer reports. Each application, with the reviewer reports and the applicant's rebuttal, is discussed at a meeting of the assessing committee and allocated an overall score and ranking (using the criteria in Section 3 of this appendix). Based on their discussion, the ranking and the total average score for each proposal, the assessing committee will recommend which applications are fundable to Council.

All assessing committees' recommendations of fundable applications are presented to the HRC Council who make the final funding decision. Council funding decisions are informed by the assessing committee recommendations, the balance of investments across our portfolios, and consideration of alignment with HRC priorities, and the outcomes in the Government's Thriving Society Pillar Investment Plan.

2. Assessment of Project EOI applications (complete)

2.1 Assessing committee membership

All Pacific Health Project applications will be assessed by a Pacific Health assessing committee. Assessing committee membership depends on the scope of the applications

© 2026 Health Research Council of New Zealand. All rights reserved.

received. The HRC seeks to match an assessing committee's expertise to the research fields of the applications they are considering, taking into account potential conflicts of interest (see Section 4 of this appendix).

2.2 Scoring criteria

Applications are scored on a 7-point word ladder using the following equally weighted criteria for the Pacific Health category. These are listed below with a full description in Appendix 3. Scores must be whole numbers.

Score	Criteria descriptor
7	Exceptional
6	Excellent
5	Very good
4	Good
3	Adequate
2	Unsatisfactory
1	Poor

Scoring criteria	Points	%score
Rationale for research	7	25%
Research design and methods	7	25%
Research impact	7	25%
Expertise and track record of the research team	7	25%
Total	28	**100%**

Each individual committee member scores the EOI applications assigned to their committee independently and submits their scores confidentially via HRC Gateway. Scores are then collated confidentially by the HRC staff to produce a ranked list across all committees assessing EOI applications.

Statistical normalisation will be applied to minimise the effect of scoring variation between committees (see Section 5 of this appendix).

2.2 EOI application results

The top-ranked applications are invited to the Full stage. Applications invited to the Full stage received an automatic e-mail from HRC Gateway when the Full stage opened on 15 October.

Applicants do not receive any committee feedback at this stage.

3. Assessment of Project Full applications

3.1 Assessing committee membership

All Pacific Health Project applications will be assessed by a Pacific Health assessing committee. The membership of the assessing committee required to assess Project Full applications may differ from the EOI assessing committee. The number of members on an assessing committee and their expertise will depend on the scope of the applications, taking into account conflicts of interest, in consultation with the committee chairs.[15]

3.2 Assessing committee pre-meeting procedure

Full applications are reviewed initially by external peer reviewers and the primary Committee Reviewer 1 (a member of the relevant assessing committee). Applicants have the opportunity to provide a rebuttal to reviewer reports. Each application, with the reviewer reports and the applicant's rebuttal is provided to the relevant assessing committee prior to the assessing committee meeting.

Reviewers

Reviewers (external peer reviewers and the primary committee reviewer (CR1)) score the full applications on a 7-point scale, provide comments, and ask questions for each of the following criteria:

[15] Managing the assessment process | Health Research Council of New Zealand

© 2026 Health Research Council of New Zealand. All rights reserved.

- Rationale for research
- Research design and methods
- Research impact
- Expertise and track record of the research team

The 7-point word ladder is used for the reviewer reports:

Score	Criteria descriptor
7	Exceptional
6	Excellent
5	Very good
4	Good
3	Adequate
2	Unsatisfactory
1	Poor

Scoring criteria	Points	%score
Rationale for research	7	25%
Research design and methods	7	25%
Research impact	7	25%
Expertise and track record of the research team	7	25%
Total	**28**	**100%**

Reviewer reports are available for applicants' rebuttals and are submitted on HRC Gateway. Both are sent to the assessing committee before the meeting. The HRC aims to obtain **3-4** reviewer reports for each project full application. Once the HRC has received 4 reviewer reports, any additional reports will be cancelled on the following basis: where a clear major conflict of interest exists, the report is of exceptionally poor quality, or the report was the last received by the HRC. A fifth reviewer report may be accepted if the reviewer's expertise was explicitly needed for a specific component of the research application (and a peer review report covering that component had yet to be secured). It is the HRC's role to coordinate and oversee all communications with the reviewers. Committee members and applicants should **not** contact reviewers.

The applicant rebuttal (see the rebuttal template in Appendix 4) is an opportunity for applicants to respond to comments or questions raised by the external reviewers. The rebuttal should address the main issues raised by the reviewers, remain objective and avoid emotional responses.

Applicants do not know who provided the external reviewer reports. However, this information is available to the assessing committee.

3.3 Full assessing committee meeting procedure

Each application will have an assigned committee reviewer whose role is to summarise how the application aligns with each score criterion. They will also use the committee's discussion to inform the application's review summary (written feedback to the applicants).

The assessing committee chairs are responsible for ensuring the committee's discussion is fair and balanced. General discussion by all assessing committee members is essential for a balanced committee opinion, not unduly influenced by one committee member and should not be cut short nor unduly extended.

Applications to be discussed by the assessing committee will be in random order, with 25-30 minutes of discussion time allocated to each application:

- declaration of conflicts of interest - 2 minutes
- committee reviewer (CR1 and CR2) comments - 10 minutes
- general discussion of the application - 15 minutes
- scoring – 1 minute
- committee reviewer notes Review Summary points - 2 minutes.

© 2026 Health Research Council of New Zealand. All rights reserved.

3.4 Assessing committee meeting scoring criteria: Pacific Health Project category

Project Full applications are scored on a 7-point word ladder using the following equally weighted criteria for the Pacific Health category. These are listed below with a full description in Appendix 3. The 7-point word ladder assists assessing committee members scoring according to the descriptors rather than other considerations such as success rates of applications. Reviewers may only allocate whole scores.

Score	Criteria descriptor
7	Exceptional
6	Excellent
5	Very good
4	Good
3	Adequate
2	Unsatisfactory
1	Poor

Scoring criteria	Points	%score
Rationale for research	7	25%
Research design and methods	7	25%
Research impact	7	25%
Expertise and track record of the research team	7	25%
Total	28	**100%**

The committee also takes into consideration and may make recommendations on:

- the appropriateness of the timeline for the proposed research
- the appropriateness of the milestones and objectives
- the appropriateness of the requested FTE involvement of the researchers and any direct costs requested, and
- the total cost of the research Project with respect to 'value for money'.

The HRC staff will inform the assessing committee on whether the application's budget aligns with HRC policy. However, it is the committee's responsibility to determine whether the budget is appropriate for the application.

The scores are submitted via HRC Gateway and collated confidentially by the HRC staff.

3.6 Recommendation of fundable applications

After scoring, HRC staff generate a ranked list of applications according to the total score.

The committee, noting conflicts of interest, then:

- identifies the applications assessed as not fundable, by starting at the bottom of the ranked list and going up the list based on quality
- identifies the applications assessed as fundable.

The fundable/not fundable line refers to the position in the ranked list of applications below which all applications are of insufficient quality that, irrespective of available budget, they should not be funded.

All Pacific Health Project Full applications deemed as fundable by the assessing committee are presented to the Council to make the final funding decisions. Pacific Health Project application funding is considered separate from the General Project and Rangahau Hauora Māori Project applications.

Note: Once the applications have been scored following discussion by the assessing committee, scores cannot be further reviewed or adjusted.

© 2026 Health Research Council of New Zealand. All rights reserved.

3.7 Funding decisions – HRC Council

Council makes final decisions on funding, informed by the assessing committee recommendations, the balance of investments across our portfolios, and consideration of alignment with HRC priorities, and the outcomes of the Healthy People and a Thriving Society Pillar Investment Plan. Council funding decisions will align with current HRC priorities to the greatest extent possible, subject to the proposals submitted in a particular funding round. (See sections 1.2 and 1.4.)

3.8 Feedback to applicants

Committee feedback is available for applicants at Full stage. Applicants can access their application outcome and the committee feedback at the conclusion of the Project funding round via HRC Gateway.

The primary assessing committee reviewer (CR1) writes a brief review summary of the assessing committee discussion for each of their assigned applications, (see the review summary template in Appendix 5). The intent of the review summary is to provide the applicant with a brief, balanced, objective statement of the committee's response to the research application.

Review summaries should be constructive and may include:

- key strengths of the application
- key areas for improvement and/or further consideration
- other comments (e.g. budgets, FTE, objectives).

Review summaries will not include details of specific scores or the identity of assessing committee members.

Individual outcomes will be available on HRC Gateway and will also be forwarded to the research office/host organisation of the applicant.

Please note: applications not discussed at an assessing committee meeting do not receive written feedback.

4. Conflict of interest

To minimise potential conflicts of interest, the HRC has specific guidance for assessing committee membership.

Anyone who is a **first named investigator, co-first named investigator** or a **named investigator** on an application should not sit on the committee that is reviewing their application. However, they may sit on or chair a different committee.

All assessing committee members are required to declare all potential conflicts of interest on HRC Gateway before they can access any application-related information. These declarations are then reviewed by HRC staff in accordance with the HRC Conflict of Interest Management Policy.

© 2026 Health Research Council of New Zealand. All rights reserved.

Appendix 3: Scoring criteria and anchor point descriptors

Criteria for assessing and scoring Project applications in the Pacific Health category by the assessing committee

The 7-point word ladder containing criteria descriptors is considered against each of the following assessment outlines below (listed A-D).

Notes:

- The 'Adequate' anchor point is 3 points.
- Applicants do not necessarily have to address all the points in the outlines below; they are included to help guide assessment under each of the scoring categories.

Score	Criteria descriptor
7	Exceptional
6	Excellent
5	Very good
4	Good
3	Adequate
2	Unsatisfactory
1	Poor

Scoring criteria	Points	%score
Rationale for research	7	25%
Research design and methods	7	25%
Research impact	7	25%
Expertise and track record of the research team	7	25%
Total	28	**100%**

A. Rationale for research

The research is important, worthwhile, and justifiable to New Zealand, with consideration to the international context, because it addresses some or all of the following:

- it addresses a significant health issue for New Zealand
- it provides clear justification for taxpayer investment based on potential health, social and/or economic benefits from the research proposed
- it has significance for Pacific health gains
- it provides a clear evidence-base when describing areas of high health need and population groups with high health need
- the aims, research questions and hypotheses build on existing knowledge and address a significant/important gap in knowledge, policy, practice, or service delivery need,
- the research is original and innovative.

© 2026 Health Research Council of New Zealand. All rights reserved.

B. Research design and methods

The study has been well designed to answer the research questions because it demonstrates some or all the following:

- comprehensive and feasible study design that is achievable within the timeframe
- appropriate study design to address the objectives of the research
- awareness of statistical considerations/technical or population issues/practicalities
- evidence of availability of materials/samples
- culturally appropriate methodology, including the utilisation of Pacific health research processes and ethics considerations
- plan for dissemination of results
- sound data management and data monitoring arrangements
- patient safety issues are well managed.

C. Research impact

The proposed research is likely to add value and benefit for Pacific communities and New Zealand because:

- Applicants have described a credible pathway for how their research will:
    - result in benefits or opportunities for future research in NZ, or
    - influence policy, practice, or health services or technologies in NZ, leading to improved health or economic impacts for Pacific communities.
- The research team is undertaking steps to maximise the likelihood of impact by:
    - contributing to the creation of Pacific health knowledge
    - contributing to the translation of findings into Pacific health gains
    - incorporating Pacific health research processes
    - incorporating Pacific ethics processes
    - contributing to building a highly skilled Pacific health research workforce
    - responding to the needs of, and working in partnership with, Pacific stakeholders and communities

D. Expertise and track record of the research team

The team, relative to opportunity, can achieve the proposed outcomes and impacts because they have demonstrated:

- appropriate qualifications and experience
- the right mix of expertise, experience and FTEs, including consideration of capacity building
- capability to perform research in current research environment
- networks/collaborations
- a history of productivity and delivery on previous research funding.

© 2026 Health Research Council of New Zealand. All rights reserved.

Appendix 4: Applicant rebuttal: Project Full stage

Applicant name		**HRC reference #**	
Research title			

Instructions (delete after reading): Project application rebuttal has a 2-page limit, which includes references. Do not change the default margins and font (size 11), although you should use bold and underlining for emphasis. Try to leave spaces to improve legibility. Please ensure you address all the issues raised by reviewers and remain objective in your response.

This form is provided on Gateway.

© 2026 Health Research Council of New Zealand. All rights reserved.

Appendix 5: Full assessing committee review summary

HRC reference #		Applicant surname	
Research title			
Host organisation			

Note to committee reviewers (CR): Carefully consider the information and wording provided below. This will be useful for both successful applicants (in helping to shape their research) and for unsuccessful applicants (in preparing future research applications). Comments should be clear and concise, reflect the committee's discussion, and fit on a single page. Aim for a total of 4-6 bullet points. (Please delete this text before you submit the completed form to the HRC.)

With regard to the criteria for assessing and scoring research applications:

1. The assessing committee noted the following key strengths of the application

2. The assessing committee noted the following aspects that could be improved and/or considered further

3. Other comments/suggestions (e.g. budgets, FTE, objectives)

© 2026 Health Research Council of New Zealand. All rights reserved.