



Murdoch Children's Research Institute (MCRI)

Data Request Review Form

Instructions for Reviewers

The role of the Sponsorship Committee and Sponsor-Investigator/Project Lead is to review the request against the assessment criteria outlined below and either approve or reject the application based on that criteria.

The Data Request must be reviewed and either accepted or rejected based on the following criteria¹:

- The value of the research proposal to medical science and/or patient care
- The ability of the proposed statistical analysis plan to meet the scientific objective of the research proposal
- Potential conflicts of interest that may impact on the research proposal and measures to manage these conflicts
- The qualifications and expertise of the research team to conduct the proposed research
- MCRI staff resources required to process the request
- Risk of participants being re-identified or their privacy and confidentiality being breached
- Failure of the data requestor to demonstrate data can be kept secure
- For data requesters who have successfully applied for other MCRI datasets; failure to abide by the terms of a previous data sharing use agreement
- Risk of datasets being used to misrepresent MCRI research or bring MCRI's scientific credibility into disrepute.

¹ 1 Based on the Wellcome Trust criteria used for requests made to <https://www.clinicalstudydatarequest.com>

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Data must be accessed/shared in accordance with the study's Data Sharing and Access requirements, including all relevant MCRI policies and procedures, the MCRI Data Sharing and Access SOP, and must also be consistent with the Protocol, Patient Information and Consent Form (PICF) and the terms of any funding, collaboration agreements or other legal agreements governing the project.

APPLICATION DETAILS

Name of Applicant:	
Applicant Affiliation:	
Name of Project/Study in which Data is being Requested:	

Part 1: To be completed by Sponsor-Investigator/Project Lead

REVIEW BY SPONSOR-INVESTIGATOR/PROJECT LEAD

Tick if review from Sponsor-Investigator is Not Applicable

Name of Sponsor-Investigator/Project Lead:	
Date Application/Request reviewed by Sponsor-Investigator/Project Lead:	
Are there any Conflicts of Interest (Col) with current or planned research activities within your group?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you approve the sharing/transfer of data?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If No, reason Application Rejected:	
Signature of Sponsor-Investigator/Project Lead:	
Date of Review:	

Part 2: To be completed by MCRI Sponsorship Committee

REVIEW BY MCRI SPONSORSHIP COMMITTEE

Date Application/Request reviewed by Committee:	
Was the proposal discussed with Sponsor-Investigator/Project Lead prior to the application form being submitted?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Outcome of Sponsorship Committee Review:	<input type="checkbox"/> Approved <i>Note: Approved applications issued to External Collaborators must be issued with a draft Data Transfer Agreement by the Legal Team.</i>
	<input type="checkbox"/> Rejected
If Rejected, reason application was Rejected:	
Additional Comments, if any:	
Date Applicant was notified of Outcome:	
Signature of Sponsorship Committee Representative	
Date of Review:	