

Appendix I Acronyms and abbreviations

AHC	Affordable Health Care
AMC	Amsterdam Medical Center
AUMC	Amsterdam University Medical Center
BD	Business Developer
CAB	Clinical Advisory Board
CGC	Cancer Genomics Center
CoRe	Community and Research
CPoC	Clinical Proof of Concept
CRUK	Cancer Research UK
ctDNA	circulating tumor DNA
EIR	Entrepreneur in Residence
Erasmus MC	Erasmus Medical Center
ERC	European Research Council
EZK	Economische Zaken en Klimaat (Dutch Ministry of Economic Affairs and Climate)
FKC	Fight Kids Cancer
Hubrecht	Hubrecht Institute of the KNAW
HNSCC	Head and Neck Cancer Squamous Cell Carcinoma
HTA	Health Technology Assessment
IAB	International Advisory Board
ICB	Immune Checkpoint Blockade
IE	Industry Engagement
iLTB	international Leukemia Target Board
IMI	Innovative Medicines Initiative
IP	Intellectual Property
I&T	Infrastructure and Technology
Jr OI	Junior Oncode Investigator
KWF	KWF Kankerbestrijding (Dutch Cancer Society)
LU	Leiden University
LUMC	Leiden University Medical Center
MB	Managing Board
MNP	Myeloproliferative neoplasm
NFU	Nederlandse Federatie van Universitair Medische Centra (Dutch Federation of University Medical Centers)
NGF	National Growth Fund
NKI	Netherlands Cancer Institute
NSCLC	Non Small Cell Lung Carcinoma
OAP	Oncode Accelerator Project
OBF	Oncology Bridge Fund
OCW	Onderwijs, Culutre en Wetenschap (Dutch Ministry of Education Culture and Science)
OEDES	Oncode Exploratory Development Expert Support
OI	Oncode Investigator
PE	Patient Engagement
RadboudUMC	Radboud University Medical Center
Radboud Uni	Radboud University
RMC	Research Management Committee
SB	Supervisory Board
SFS	Strategic Funding Support
SRL	Socially Responsible Licensing
Sr OI	Senior Oncode Investigator
TA	Technology Access
TechDev Fund	Technology Development Fund
TKI	Topconsortia for Knowledge and Innovation
YU/e	Technical University Eindhoven
UMCGG	University Medical Center Groningen
UMC Utrecht	University Medical Center Utrecht
VUmc	Free University Medical Center
VWS	Volksgezondheid, Welzijn en Sport (Dutch Ministry of Health, Welfare & Sport)

Appendix II Boards, teams, consultants and committees

GENERAL SUPPORT TEAM

COMMUNITY & RESEARCH SUPPORT TEAM

THE VALORIZATION SUPPORT TEAM

NETWORK OF CONSULTANTS

DRUG REPURPOSING ADVISORY BOARD

INTERNATIONAL ADVISORY BOARD

INTERNATIONAL REVIEW COMMITTEE

General Support Team

Elize Brolsma, *Project Communications Manager* (Lygature)
Dr. Alexander Duyndam, *Communications Manager* (Lygature)
Tracey Faase, *Financial Controller* (Lygature)
Denis Groot, *Financial Controller* (Lygature)
Soumela Kasperiouk, *Management Assistant*
Dr. Tale Sliedrecht, *Head of Strategy* (Lygature)

Community & Research Support Team

Dr. Ester Frische, *Head of Research and Community support*
Dr. Colette ten Hove, *Program Manager*
Vesna de Jong, *Digital Communications Manager* (Lygature)
Dr. Emanuela Lonardi, *Program Coordinator*
Bianca-Olivia Nita, *Project Communications Manager* (Lygature)
Marlinde Smit, *Program Manager* (Lygature)
Dr. Jacqueline Staring, *Program Manager* (Lygature)
Dr. Inga Tharun, *Program Manager* (Lygature)

The Valorization Team

Saharla Ahmed, *Business Development*
Ian Bell, *Head of Licensing & Business Development*
Dr. Shobhit Dhawan, *Fund Manager*
Alina Boca- Eichner, *Data Entry Operator*
Dr. Veerle Fleskens, *Business Development*
Amber Liu, *Business Development*
Dr. Yuva Oz, *Business Development*
Emil Pot, *Business Development*
Dr. Alexander Turkin, *Business Development*
Mariëlle Veldhuizen, *Paralegal, Valorization Coordinator*

Network of Consultants

Dr. Danny Burg (D2team), *Drug Development Specialist*
Dr. Geert Frederix (UMC Utrecht , THINC.), *Health Technology Assessment Specialist*
Dr. Ellen Hulskotte (Curare Consulting), *Clinical Trial Design Specialist*

Drug Repurposing Advisory Board

Prof. Mario van der Stelt (Leiden University)
Prof. Roderick Beijersbergen (NKI)
Dr. Paul Geurink (LUMC)
Saman Honarnejad (Pivot Park Screening Centre)
Ellen Hulskotte (CURARE consulting)
Prof. Wilbert Zwart (NKI)
Prof. Laura Heitman (Leiden University)

International Advisory Board

Teri Willey (Chair), Managing Director, Pathway to Cures Venture Fund
Prof. Vishva Dixit, Genentech
Prof. Clare Isacke, ICR London
Prof. Richard Marais, Director of the CRUK Manchester Institute
Prof. Alberto Bardelli, Department of Oncology, University of Torino
Prof. Sabine Tejpar, UZ Leuven
Prof. Paul Workman, ICR London

Independent Review Committee

Prof. Susan Gasser PhD (Chair), Director emeritus Friedrich Miescher Institute
Prof. Josep Tabernero MD PhD, Medical Oncologist, Head of Medical Oncology at Vall d'Hebron University Hospital and Director at Vall d'Hebron Institute of Oncology (VHIO)
Prof. Liesbeth de Vries MD PhD, Medical Oncologist, Department of Medical Oncology UMCG
Prof. Richard Marais PhD, Director of the CRUK Manchester Institute & Onco International Advisory Board member
Derek Waddell, Founder & CEO of 81C Limited
Prof. Ivan Dikic, MD PhD, Director Institute of Biochemistry II, Goethe University Frankfurt
Dr. Tim Wells, CSO Medicines for Malaria Ventures & Non-Executive Director at Kymab Ltd.

Appendix III Oncode in numbers

ONCODE COMMUNITY

ONCODE OUTPUT

CLINICAL PROOF-OF-CONCEPT PROJECTS

TECHNOLOGY DEVELOPMENT PROJECTS

EQUIPMENT & INFRASTRUCTURE FUNDED PROJECTS

MEETINGS

FOLLOW UP FUNDING ORIGINATING FROM BASE FUND RESEARCH

Oncode Community

Position	#	female/male/unknown
Oncode research community (31 Dec'22)	826	432/387/7
Oncode Senior Investigators	42	9/33
Oncode Junior Investigators	18	8/10
Oncode Post docs & Senior Scientists	249	115/130/4
Oncode PhD students	337	193/141/3
Oncode technicians & supporting staff	180	107/71/2
PhD defenses	59	32/26/1

Oncode Output

Publications	2022	Phase 1 total
Total publications	404	1670
Total primary publications ³	125	623
Agreements	2022	Phase 1 total
Non-disclosure agreements	64	349
Research agreements	27	141
Material transfer agreements	66	230
License agreements/options	3	37
Other	24	134
Invention Disclosures	2022	Phase 1 total
New invention disclosures	34	179
Legacy files	0	18
Non-Oncode	0	6
Active portfolio Dec 31	115	115
Patent portfolio	2022	Phase 1 total
Priority filings	13	71 (67 families)
PCT filings	13	49 (45 families)
National filings	39	59 (19 families)
Active portfolio Dec 31 2022	53 families	53 families
Oncode Bridge Fund Portfolio		
Single Cell Discoveries (2018)	Exit 2022	
Immagene (2020)		
Cyclomics (taken up as an Oncode portfolio spin-off in 2019)		
Oncosence (taken up as an Oncode portfolio spin-off in 2021)		
LaigoBio (2021)		
Simmunext (2022)		
Cell Control (2022)		

³ Primary publications are herein defined as peer reviewed publications with an OI as last and/or corresponding author.

Funding commitment⁴ obtained in period	2022	Phase 1 total
Total value secured funding (in cash) to OI labs <i>(in cash; public and private, incl. Oncode funding)</i>	€ 56,9M	€ 310,3M
Total contract value agreements involving industry	€ 5,0M	€ 54,7M
Total value secured industry contribution to OI labs <i>(in cash + in kind)</i>	€ 1,4M	€ 12,9M
Total value secured private funding to Oncode Institute, OI labs and Oncode spin-offs <i>(in cash; excluding funds from Oncode's core funders)</i>	€ 23,8M	€ 63,4M <i>(55,7% of total Oncode core funding)</i>

Communication

Website

- 38,918 visitors created 58,466 sessions, resulting in 130,182 page views

LinkedIn

- 6609 followers on December 31st, 2022
- 2108 new followers with a 5.69% engagement rate

Twitter

- 2474 followers on December 31st, 2022
- 498 new followers with a 4.57% engagement rate

Oncode Investigator Newsletter

- Avg Open Rate: 43,35%
- Avg Click Rate: 14.18%

Community Newsletter

- Avg Open Rate: 64.69%
- Avg Click Rate: 29.86%

⁴ To calculate committed funding, only funding is included for which all administrative obligations have been met, and access to the funds became available within the reported period.

Clinical Proof-of-Concept Projects update 2022

New CPoC Projects in 2022

No new CPoC projects were approved in 2022

CPoC Projects completed in 2022:

1. **Point-of-care monitoring of head and neck cancer treatment response and recurrence development using nanopore-based ctDNA consensus sequencing**
Oncode Investigator: Jeroen de Ridder (UMC Utrecht)
Clinicians: Stefan Willems, Lot Devriese, Manon Huibers, Lot Zuur (all UMC Utrecht)
2. **Head and neck cancer organoids and their potential to predict patient therapy response**
Oncode Investigator: Hans Clevers
Oncode Scientist: Else Driehuis (Hubrecht Institute, UMC Utrecht)
Clinicians: Lot Devriese, Stefan Willems, Remco de Bree (all UMC Utrecht)
3. **International concerted action to refer children with relapsed and refractory leukemia/lymphoma to the right precision medicines trials: A platform for rational treatment choice based on molecular profiling and drug sensitivity testing [Haem-Precision Study]**
Oncode Investigator: Monique den Boer (Princess Maxima Center)
Other investigators: Judith Boer, Olaf Heidenreich (all Princess Maxima Center)
Clinicians: Josef Vormoor, Peter Hoogerbrugge, Michel Zwaan (all Princess Maxima Center)
4. **Towards clinical implementation of the MeD-seq assay**
Oncode Investigator: Joost Gribnau (Erasmus MC)
Oncode researcher: Ruben Boers (Erasmus MC)
Other investigators: John Martens, Saskia Wilting (both Erasmus MC)
Clinicians: Stefan Sleijfer, Kees Verhoef (both Erasmus MC)

Technology Development Projects

New Technology Development Projects in 2022

1. **Live-cell screening for disruption of oncogenic condensates**
Main applicant: Boudewijn Burgering (UMC Utrecht)
Funds awarded: € 150K
2. **Targeting cancer cells with TCR-T cells against substitutant epitopes**
Main applicant: Reuven Agami (NKI)
Funds awarded: € 149K
3. **HTA for PRRT PARPi combination therapy of GEPNET patients**
Main applicant: Roland Kanaar (Erasmus MC)
Funds awarded: € 32K
4. **PK/PD experiments for the in vivo validation of the Rheostat switch platform**
Main applicant: Ton Schumacher (NKI)
Funds awarded: € 99K
5. **Remotely controlled T cell therapies for solid tumors**
Main applicant: Ton Schumacher (NKI)
Funds awarded: € 149K

6. Identifying the optimal regulatory strategy and prepare for regulatory interactions (EMA or national) to repurpose and register Aclarubicin as an alternative treatment for relapsed AML
Main applicant: Sjaak Neefjes (LUMC)
Funds awarded: € 89K
7. PIC3BIO; Biodistribution, Biocompatibility and Biodegradability of Polyisocyanopeptide (PIC) Polymers
Main applicant: Carl Figdor (Radboud UMC)
Funds awarded: € 146K
8. Sturgeon, cancer classification from sparse methylation data
Main applicant: Jeroen de Ridder (UMC Utrecht)
Funds awarded: € 60K
9. Validating the GenomeTOX assay for genome-wide human-based toxicity testing
Main applicant: Ruben van Boxtel (PMC)
Funds awarded: € 71K
10. Combating Treg suppression to invigorate T cell responses in cancer
Main applicant: Monika Wolkers (Sanquin Research)
Funds awarded: €47K
11. Harnessing the T cell-mediated anti-tumor effects of taxanes to maximize TILs cytotoxicity
Main applicant: Jacco van Rheenen (NKI)
Funds awarded: € 141K

Technology Development Projects completed in 2022

1. Turning Mutations into Patient Specific Biomarkers to Guide Personalized Treatment of Ovarian Cancer
Main applicant: Jos Jonkers (NKI)
2. Preclinical proof-of-concept studies of advanced lipid metabolism inhibitors
Main applicant: Mario vd Stelt (Leiden University)
3. Establishing AGN192403 as a first-in-class, orally-available PD-1 inhibitor
Main applicant: Daniel Peeper (NKI)
4. Development and validation of the FUNsice, MUCE-seq and FACT technologies for rare single cell identification and analysis toward commercial application
Main applicant: Miao-Ping Chien (Erasmus MC)
5. HTA for PRRT PARPi combination therapy of GEPNET patients
Main applicant: Roland Kanaar (Erasmus MC)

Infrastructure & Technologies Projects

No Major investments were made through the I&T program in 2022.

Appendix IV OI Assessment & Selection - Terms of Reference

Terms of Reference

Oncode Investigator assessment and Selection procedure

1. Oncode Institute

1.1 Introduction

The Netherlands is a front runner in oncology research. Nevertheless, only a few Dutch research findings have served as a basis for new cancer diagnostics and treatments. Dutch research could and should be helping more patients. Oncode Institute was founded on the belief that a change to the oncological research ecosystem would be required to propel the Netherlands to a leading position in the translation of basic cancer research findings into results for patients.

Oncode institute (hereafter Oncode) was initiated in 2017 by an alliance of funders to bring innovations in basic cancer research to patients more efficiently and faster. The basic outline of this virtual institute is centered on three interconnected pillars: 1) provide academic freedom to some of the best and diverse cancer research groups in the country by providing substantial, unrestricted 'base' funding, and support (including financial) to enable the set-up of new technologies and infrastructures. 2) promote extensive interactions between these groups, with patients, clinicians and industry, to further stimulate innovations; 3) integrate all activities of the institute with professional and pro-active valorization efforts, to more quickly recognize the potential of breakthroughs in the labs for public benefit, and to enable their efficient translation to a form that will create that benefit.

More information can be found [here](#).

1.2 The Oncode Investigators

The Oncode research team comprises 61 Oncode Investigators (OIs) from 12 research institutions that bring expertise in the field of fundamental oncological research, united through a shared mission and strategy. After the initial recruitment of 43 research groups, 19 more were recruited in two open calls (one OI retired). The OIs have been selected on the basis of excellence, collaborative spirit, and complementarity to the Oncode research community.

Oncode provides its investigators with an annual base fund of €250k (€150k for Junior Investigators). The Oncode base funds are unrestricted and meant to promote innovative basic and pre-clinical research lines of high quality (high-risk/high-gain). In

return, Oncode has the right to valorize all research of a participating OI lab. In addition, OIs have access to Oncode's supplemental programmes and targeted funding. These are aimed at enhancing the research capacity and effectiveness of the Oncode research community by promoting collaboration, setting up shared infrastructures, valorization (e.g. through IP funds, clinical proof of concept funds) and internationalization. OIs retain full academic freedom to pursue their own scientific interest and are not required to restrict their research exclusively to the field of oncology.

2. Outline of the assessment process

2.1 Who will be assessed

To maintain the highest standard of research, Oncode will evaluate its OIs every 5 years. The current review is part of a selection process to determine which OIs will be invited to join the next 5 years of Oncode, starting September 2022. In total 45 OIs will be assessed, 39 senior OIs, and the 6 junior OIs that have been appointed in 2017. The assessment of the juniors includes the condition that their performance should justify their promotion to Senior OI.

The group of junior OIs appointed in 2019 will be assessed in a similar process to the current one but starting in 2023.

2.2 What will be assessed

OIs will be assessed on two criteria:

1. **Scientific excellence**
2. **Impact on Oncode**

Impact on Oncode's community and activities include: a) sharing/collaboration; b) valorisation; c) participation in Oncode (boards/committees).

The assessment will be based on:

- 1: **the Oncode Investigator assessment dossier including:**
 - 5 years progress report,
 - Narrative CV,
 - Appendix to CV.
- 2: **Overview of Oncode Community Activities**, pre-filled by Oncode staff and checked for completeness by the OI.

2.3 Assessment procedure

2.3.1 Scientific excellence

The *scientific excellence* of all OIs, including RMC members and scientific director, will be scored by a group of independent international reviewers. Senior OIs will be reviewed by three reviewers, junior OIs by five reviewers. Based on the scores and comments from the external reviewers, the RMC will give a final Science score and corresponding argumentation. The process will be monitored by at least one independent external party present during the discussions. Scoring criteria are detailed below.

2.3.2 Impact on Oncode

This section consists of three elements: collaboration, participation and valorization. Collaboration and participation will be assessed by the RMC, the valorization score will be provided by the valorization team (VT) complemented by 2 external reviewers. Both the RMC and VT will make their assessment based on 1) the assessment dossier and 2) the Oncode activities overview, the scoring criteria are detailed below.

The RMC will integrate all scores and review reports for valorization, participation and collaboration to distil an overall score per OI for 'Impact on Oncode'. The process will be monitored by at least one independent external party present at the discussions.

2.3.3 Outcome

The outcome of the assessment will be evaluated by the International Advisory Board (IAB), followed by evaluation by the Independent Review Committee (IRC). Based on the assessment outcome and the evaluations by the IAB and IRC, the MB will make the final decision for continuation of OIs for phase 2.

2.4 Assessment of the RMC members

The RMC members, except the scientific director, will be assessed by the IAB based on their full assessment dossiers, overview of activities, and review report for scientific excellence, as provided by the external reviewers. The IAB advice will be evaluated by the IRC. Oncode's Supervisory Board will decide on continuation of the scientific director into phase II based on the review reports.

2.5 Conflict of interest

The Oncode Conflict of Interest policy applies for all reviewers.

2.6 Review report and score

2.6.1 Scientific excellence

For each OI assigned to the external reviewer, we ask the reviewer to score the OI for scientific excellence, according to the scoring criteria described below, and substantiate the score for the following two categories:

1. **Past and present performance** (focus on previous 5y): To what extent has the work of the PI made transformative contributions to the field and/or are the current projects likely to be transformative upon successful completion? To what extent has (s)he been able to attract prestigious funding for his/her work? How do you rate the PI's indicators-of-excellence (papers, grants, prizes, prominent speaker invitations, panels etc)?
2. **Future promise**: To what extent do the plans of the PI show innovative research lines? To what extent do you consider the plans to be high-risk/high-gain? Is the PI likely to make transformative contributions in the next 5 years?

2.6.2 Impact on Oncode

Valorization score: the VT will review, as a team, the OIs for their valorisation activities and contribution based on data from the VT, assessment dossier and Overview of Oncode Community Activities. The VT will provide a review report including a score (excellent, good or poor) for each individual OI and a narrative substantiating the score in which the following two questions are addressed:

- 1) What is the number and quality of the output of the OI in terms of valorization?
- 2) What is the attitude of the OI towards valorization?

Parameters to include by the VT are: invention disclosure forms, patents filed, agreements entered into (associated €), spin-off companies formed, as well as softer metrics such as engagement with industry (eg. discussions with industry as part of marketing activities), clinical activities, open science and affordable health care activities. The overall assessment by the VT will be independently evaluated by two external valorization experts. The VT assessment report including the advice of those external experts will be submitted to the RMC.

Participation and Collaboration scores: the RMC will assess the OIs, excluding the RMC members and scientific director, for participation and collaboration based on the assessment dossier and Overview of Oncode Community Activities. OIs will receive separate scores including argumentation for *participation* and *collaboration*.

2.7 Scoring criteria

2.7.1 Scientific excellence

The reviewers will be asked to score the OIs according to the following criteria:

Senior PIs

Note: since PIs were selected to join OncoCode Institute based on prior excellence, we assume all of them are at least 'Good' and hence have not defined a category lower than 'middle tier'. If you feel a PI nonetheless should score lower, please indicate so in your accompanying report.

Overall: considering the past performance and future plans, is the senior PI:

1. Highest Top tier. Outstanding PI. Proven track record of (or potential for) equivalent of HHMI investigator/ERC-AdG awardee, would be worthy of getting recruited to your country's top institute. Extremely high potential for high impact innovations or break-through discoveries in the next 5 years.
2. Top tier. Excellent PI. Very strong track record, clear leader in his/her broader field (e.g. immuno-oncology, genomic instability, cancer biology, cancer genomics, etc) or someone who has a large impact on several fields with a specific technology or platform. Makes regular discoveries with high impact* (e.g. two or more in the past 5 years). Very strong recent indicators-of-excellence. High potential for high impact innovations or break-through discoveries in the next 5 years.
3. Sub-top tier. Very good PI. High quality science, competitive in his/her broader research field. Good recent indicators of excellence. Makes discoveries with high impact* occasionally (e.g. one in the past 5 years) but not frequently. Some potential for high impact innovations or break-through discoveries in the next 5 years.
4. Middle tier. Good PI. Good track record. No or a few recent good indicators-of-excellence. Solid science but no high impact* discoveries in the past 5 years. High impact innovations or break-through discoveries are not likely in the next 5 years.

Junior PIs

Overall: considering the past performance and future plans, is the junior PI:

1. Highest Top tier. Outstanding young PI. Proven track record of (or potential for) equivalent of HHMI early career / ERC-CoG awardee. Well on his/her way to become a prominent scientist impacting multiple broader research fields. Extremely high potential for high impact innovations or break-through discoveries in the next 5 years. Would be worthy of getting recruited to your country's top institute.

2. Top tier. Excellent young PI. Very strong track record, on his/her way to become a leader in his/her broader field (e.g. immuno-oncology, genomic instability, cancer biology, cancer genomics, etc etc) or someone who has a large impact on several fields with a specific technology or platform. Very strong indicators-of-excellence. High potential for high impact innovations or break-through discoveries in the next 5 years. Would have a good chance of getting a tenured position at a top institute in your country.

3. Sub-top tier. Very good young PI. High quality science, competitive in his/her broader research field. Good recent indicators of excellence. Some potential for high impact innovations or break-through discoveries in the next 5 years. Would be worthy of a tenured position at an excellent institute in your country, but may not make it at your country's top institute.

4. Middle tier. Good young PI, good track record. No or few recent good indicators-of-excellence. Solid science, middle of the pack in his/her broader research field. High impact innovations or break-through discoveries not likely in the next 5 years. Has a chance of getting tenure at an excellent institute in your country, but not certain.

**) Impact does not necessarily relate to impact factor of the journal the discovery was published in. Please consider how the findings impact on the broader research field(s).*

2.7.2 Impact on Oncode

Impact on Oncode will be evaluated based on the progress report and overview of Oncode contributions. The report details the narrative CV, non-scientific achievements, contribution to and benefit from Oncode, and an overview of indicators (patents, CPOC projects, collaborations, panel and committee memberships etc).

The Valorisation team and external valorisation experts will score:

Valorization:

- Excellent. Played a key role in starting an innovative company and/or in getting research findings into innovative (proof-of-concept) clinical trials and/or attracted substantial industry funding and/or created a substantial societal impact in another manner (e.g. open science, policy, communication to lay person/patient audiences).
- Good. Filed patents, and/or was involved in starting a company, and/or in developing (proof-of-concept) clinical trials, and/or attracted industry funding and/or created societal impact in another manner (e.g. open science, policy, communication to lay person/patient audiences). The major difference between 'good' vs 'excellent' is qualitative, not quantitative.

This category also includes those who show clear interest in valorising their science whenever possible. (e.g. frequently seek interaction with their BD, volunteer to engage with lay/patient audiences, etc).

- Poor. No or little concrete affinity with valorisation or working with BD.

The RMC will score:

- **Participation** in Oncode events & Contribution to institute (panels, meeting organization, engagement activities, running facility, training and mentoring):
 - Excellent: e.g. very frequently involved in Oncode activities, takes initiative, very responsive to requests
 - Good: e.g. regularly involved in Oncode activities, passive contribution, responsive to requests
 - Poor: e.g. rarely involved in Oncode activities, relatively invisible, not very responsive to requests.
- **Collaboration** (career stage taken into account):
 - Excellent: Central figure, many high quality collaborations with OIs, also outside of the home institute. Is also involved in collaborations that strengthen the science of other Oncode PIs. His/her research/technologies clearly important for research or valorisation of a substantial number of OIs.
 - Good: Several new high quality collaborations with OIs, some also outside of the home institute.
 - Poor: Some collaborations, but mainly within home institute.

The RMC will give a final *Impact on Oncode* score and corresponding argumentation.

2.8 Final scoring Impact on Oncode (E = excellent; G = good; P = poor):

1. Top tier. E/E/E or E/E/G or E/G/G (irrespective of which category). Clearly a must-keep member of the community.
2. Upper middle tier. E/E/P or E/G/P or G/G/G (irrespective of which category). Good member of the community.
3. Lower middle tier. E/P/P or G/G/P (irrespective of which category). Somewhat contributing member of the community.
4. Low Tier. G/P/P or P/P/P (irrespective of which category). Does not contribute substantially to the community.

3. Selection

3.1 Selection process

Final scores, together with possible strategic considerations, will result in proposal for yes/no continuation of OIs for phase II, to be evaluated by the IAB. IAB advice will then be considered by IRC. The IRC will formulate a final advice to the MB for yes/no continuation of OIs for phase II, taking into account the RMC report and IAB advice. The MB will make the final decision.

3.2 Selection criteria*:

- | | |
|---|--------------------------|
| 1. Science score 4 AND/OR Impact score 4 | = not invited to phase 2 |
| 2. Science score 3 AND Contribution score 3 | = not invited to phase 2 |
| 3. Any other combination | = invited to phase 2 |

* *outcome selection criteria subject to change, depending on final phase 2 budget.*

4. External reviewers

Reviewers have been selected from a list compiled by the team of OIs, containing all of the suggestions provided by the individual OIs. The RMC has cross-checked the list, with particular focus on (1) the fit of each reviewer in the fields of expertise for which they were suggested, (2) any obvious conflict of interest with the Institute itself, (3) experience.

From this shortlist, candidates have been selected giving preference to reviewers clearly established in their field, that have been (where possible) suggested by more than one OI, whose contribution to the reviewing committee would ensure that the panel offers a good gender and expertise balance. Conflict of interest has been taken into consideration in all steps of the selection.

All reviewers have signed a confidentiality agreement, declared any impeding conflict of interest, and will receive a nominal financial refund of 100 euros per report reviewed.

5. Timelines

- August 31st: deadline assessment dossier
- December 3rd: Combined review report from the RMC to IAB
- Mid January: IAB meeting
- February 16: IRC meeting
- End of Feb: Advice IRC
- Early March: decision MB

6. Appeal procedure

- Lodge appeal to Oncode within 4 weeks after the decision has been communicated including reasons of objection
- Step 1: Complainant discusses with Head of the institute and one additional member of the MB, discussion focuses on the assessment and selection procedures
- Step 2: A committee will be tasked to determine if the procedure and the individual evaluation has been carried out carefully. The committee will give an advice to the MB.
- The committee will comprise of 1 IAB member, 1 SB member and an external reviewer

The appeal may be filed with Ester Frische, Head of Research & Community support (ester.frische@oncode.nl).