



**AUSTRALIAN  
CHIROPRACTORS  
ASSOCIATION**

# The Giles Medal

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ACA Limited

# Index

|   |           |
|---|-----------|
| <b>Introduction</b> .....   | <b>04</b> |
| Aim .....   | 04        |
| Background .....  | 04        |
| The Medal .....   | 04        |
| <b>Section one: Purpose and criteria</b> .....                              | <b>05</b> |
| Purpose .....   | 05        |
| Criteria .....  | 05        |
| <b>Section two: Giles Medal Scientific Advisory Committee (GMSAC)</b> ..... | <b>06</b> |
| Committee membership .....  | 06        |
| Conflicts of interest .....   | 06        |
| <b>Section three: Selection process and procedural governance</b> .....     | <b>07</b> |
| Selection and nomination process .....                                      | 07        |
| Procedural governance .....   | 07        |
| Recipient announcement .....  | 10        |
| <b>Attachment A: Giles Medal Nomination Form</b> .....                      | <b>11</b> |

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## Australian Chiropractors Association

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# The Giles Medal

## For Outstanding Research in Health Science



The Giles Medal is awarded by the Australian Chiropractors Association in recognition of excellence in healthcare research.

The award is made to an individual who has an outstanding and sustained track record in research that is of relevance to the practice of chiropractic.

The Medal is named in honour of Dr Lynton Giles, the first chiropractor in Australia to complete a PhD in a health science discipline, and who then made an exceptional contribution to our understanding of the significance of the spine in healthcare through his basic and clinical science research concerning the spine.

This recognition is intended to provide incentive for all those who aspire to excellence in healthcare research.

# Introduction

## Aim

It is the intention of the Australian Chiropractors Association (ACA) to support and encourage excellence in healthcare research.

The aim of the Giles Medal is to provide a research award in Australia that recognises and acknowledges research with a national and/or international impact on healthcare that has relevance to the practice of chiropractic. It will also highlight the opportunity to enhance healthcare as a researcher.

## Background

The naming of the ACA's highest and most prestigious award for scientific research the 'Giles Medal' serves to recognise the significant body of research published by Dr Lynton Giles, who undertook both basic science and clinical research of direct relevance to the practice of chiropractic.

Lynton Giles DC, MSc, PhD, was the first chiropractor in Australia to obtain a PhD. First graduating from Canadian Memorial Chiropractic College with highest honours, Dr Giles worked towards his MSc and PhD degrees at the University of Western Australia. Following this Dr Giles was asked to establish a Spinal Research Laboratory at Griffith University and later moved to Townsville and became Honorary Clinical Scientist at Townsville General Hospital where as CEO he helped to establish the National Unit for Multidisciplinary studies of Spinal Pain and later became its director. Dr Giles went on to become Adjunct Associate Professor at Townsville's James Cook University School of Public Health, Tropical Medicine and Rehabilitation Sciences until December 2014. During his career, Dr Giles contributed to six books concerning spinal anatomy and has 52 scientific peer reviewed journal publications.

Since the Giles Medal is the highest and most prestigious award given by the ACA for research, the Giles Medal will only be awarded on occasions when a suitable person has generated a body of research that meets the high standards and rigour expected from scientific research.

Consequently, only one medal will be awarded in any calendar year and it may not be awarded every year, but only on occasions that a suitable nominee has been recommended to the ACA President by the Giles Medal Scientific Advisor Committee (GMSAC).

## The Medal

The award is a unique bronze art medal designed and produced specifically for the ACA by Michael Meszaros OAM who is an internationally recognised sculptor and medallist and whose work has been responsible for the design and striking of prestigious medals for prestigious organisations such as the Victor Chang Cardiac Institute and The Australian Neuroscience

Society. The commissioning of such a high standard medallist to design and cast the medal reflects the excellence inherent in an award to be given for excellence in research.

The Giles lecture is an invited distinguished lecture given each year at the annual Research Symposium of the ACA Conference (See Giles Lecture). A recipient of the Giles Medal will be invited to give this distinguished lecture in the year of receiving the Giles Medal.

## Section One: Purpose and Criteria

### Purpose

The Giles Medal may be awarded to any person, from any health discipline, based anywhere in the world who has published a body of scientific peer reviewed research of relevance to healthcare and the practice of chiropractic.

The purpose of the Giles Medal is to acknowledge and recognise a person who has undertaken and published a body of research that has or is likely to significantly impact on our understanding of mechanisms that enable good health, contribute to the reliability and validity of patient assessment and or the treatment and management of patients.

In maintaining recognition of research involving the highest scientific standards, the Giles Medal may not be awarded every year.

### Criteria

The Giles Medal will be awarded on the basis of scientific peer reviewed publications that represent a body of research that 1) meets the criteria for the award 2) is considered by the Giles Medal Scientific Advisory Committee (GMSAC) to be both excellent in its scientific standing and outstanding in its potential and or actual impact on healthcare as judged by international standards.

The criteria for the awarding of the Giles Medal is that the awardee will have produced a body of scientific research that contributes to the:

- enhancement of knowledge and understanding of mechanisms that enable good health, and/or,
- reliability and validity of patient assessment or diagnosis and/or,
- efficacy of the treatment and management of patients.

The standing of this body of published research and its real or potential impact will be judged against international standards. These measures would normally include, but are not limited to, the ranking of the journals in which the work is published, journal citations, citation of the body of research in Cochrane systematic reviews, citation in clinical guidelines or codes of clinical practice endorsed by national government or regulatory bodies.

# Section Two: Giles Medal Scientific Advisory Committee (GMSAC)

## Committee membership

### Chair GMSAC: (Term ongoing)

The current chair of the Research Committee of the World Federation of Chiropractic (WFC) will be the Chair of the GMSAC.<sup>1</sup> In the event that the WFC Research Committee Chair is unable to Chair the GMSAC they will be asked to nominate a standing member of the Research Committee of the World Federation of Chiropractic to serve as Chair of the GMSAC.

### Standing members: (Term of appointment two years)

1. Two persons drawn from the Senior Editor/Editors in Chief<sup>2</sup> of the following peer reviewed journals of relevance to the practice of chiropractic. The Chiropractic Journal of Australia (CJA), Journal of Manipulative and Physiological Therapeutics (JMPT), Chiropractic and Manual Therapy (CM&T) and The Spine Journal<sup>3</sup>.
2. One active researcher (PhD or equivalent) holding appointment in an Australian University invited by the ACA CEO on advice from the current ACA Board member responsible for the ACA Research portfolio.

### Members at large (Occasional appointment)

1. One or more internationally recognised scientist as appropriate to the discipline(s) of research that have been undertaken by the nominee(s) in that year. The members at large are to be recruited to the GMSAC by the Chair of the GMSAC and to provide written advice to the Chair concerning the scientific merit of the body of research work.

## Conflicts of interest

If the Chair or any member of the GMSAC has a conflict of interest they must step aside and not participate in any recommendations or assessment for the Giles Medal award. Examples of such conflicts include family relative, employee/employer relationships, working in the same institute or holding office in the same organisation or society.

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1. The Chair of the WFC Research Committee is well placed to judge the standing of the research by the nominee in respect of international research relevant to the practice of chiropractic.
  2. Editors and Editors in Chief are well trained, experienced and have access to resources used to assess scientific peer reviewed publications. They are also aware of international standards and best practice.
  3. The Spine Journal is highly recommended, as it is the scientific journal of an organisation that has an international multidisciplinary membership including chiropractors.

# Section Three: Selection process and procedural governance

## Selection and nomination process

Any person who is eligible for the Giles Medal can be nominated. Self-nomination is not permitted.

An individual may only nominate one person in any year but may be a seconder on up to two nominations in any one year of the award of the Giles Medal.

The nominator and seconder are to complete each section of the 'Giles Medal Nomination Form'. It is up to the nominator and seconder to present a case that evidences why, in respect of the criteria for the award, the research is considered to be both excellent and outstanding by international standards. It is the responsibility of the nominator and seconder to:

1. Keep the nomination and supporting information in confidence, including from ACA office-bearers, ACA organisational and conference stakeholders, as well as the individual nominee for the award. The nominee is not to be made aware of the nomination.
2. Direct any request for assistance regarding any aspect of the nomination process or for the completion of the nomination form and its appendices to the office of the ACA CEO.
3. Personally complete all aspects of the nomination form, preparing related attachments and submitting the nomination documents by the due date. No late nominations will be considered for that year but may be considered for the following year.

## Procedural governance

In order to ensure the assessment of nominees for the Giles Medal follows procedures that meet the highest international standards, key steps will be undertaken to ensure procedural transparency and diligence. In order to achieve this;

### **The office of the CEO of the ACA will:**

1. Accept and provide advice regarding the nomination process.
2. Complete an independent assessment of nomination form content, satisfaction of eligibility criteria and determination of the nominee's good standing (scientifically, institutionally and within the general community).
3. Process and forward all appropriately completed nominations to the Chair of the GMSAC in confidence.

### **The Chair of the GMSAC will:**

1. The Chair is a voting member of the committee and is the only member that may do so with the knowledge of the expertise and advice provided by the discipline experts the Chair seeks to review the nominations i.e. members at large as described above.
2. Receive eligible nominations in confidence from the office of the CEO.
3. Distribute the nomination and supporting documents, in confidence, to all GMSAC members.
4. Receive from each 'standing member' of the GMSAC. i) their respective assessment of the scientific standing, merit and relevance to the clinical practice of chiropractic, ii) provide a ranking, when there is more than one nominee considered to be of sufficient merit (by international standards) to be awarded the Giles Medal (Note a nominee may be 'eligible' but not considered by the GMSAC to be of sufficient merit at the time of the nomination) and iii) a recommendation for or against the award for that year. Only in unusual circumstances (such as a tied ranking) would the chair identify and promote discussion between the members of the GMSAC.
5. Receive advice about the international scientific standing of the nominee's body of research from the GMSAC 'members at large'.
6. In instances where there is not a two-thirds majority recommendation for the award (i.e. three out of four of the Chair and GMSAC standing members), and independent confirmation from the respective GMSAC member at large that the body of research and, in particular, the top five publications are of international standing, the award shall not be made in that year.
7. In normal circumstances the Chair then provides the details of the GMSAC membership, the results and any recommendation from the GMSAC for the award of the Giles Medal to the CEO of the ACA.

### **Role of the ACA Board:**

The ACA Board would receive the recommendation for the award of the Giles Medal from the Chair of the GMSAC through the CEO office.

The Board would be asked to ratify the GMSAC recommendation for the award of the Giles Medal. The ACA Board can decline the recommendation provided it is in accordance with the criteria that has been established to identify the good standing of nominees. Under normal circumstances, the routine initial background checks and criteria applied to assess a suitable nominees good standing would likely avoid this situation arising. In such an instance however, the ACA President would forward a written notification of the Board's decision to the Chair of the GMSAC providing details of the reason for declining the recommendation and include strong evidence to support the basis for this decision. In these circumstances the ACA Board and Chair must both agree that there are significant grounds for not proceeding with the recommendation based upon the accepted criteria used to identify a nominees good standing.

If no agreement is reached, the Chair and ACA Board must agree on an independent person to arbitrate the decision. The decision of the independent persons shall be the outcome. The independent person could be for example the president of the Australian Academy of Health and Medical Sciences.



In an instance when two or more persons are recommended for the Giles Medal by the GMSAC in any year, it is at the discretion of the ACA Board as to which of the recommended persons receives the Giles Medal in that year. The other recommended person would normally be considered for the award of the Giles Medal for the subsequent year. In a year where a single nominee is recommended, other nominees considered by the GMSAC to be of sufficient merit to be awarded the Giles Medal should be ranked by the GMSAC in order of meeting their merit. The names of any nominees determined by the GMSAC to be of sufficient merit for the award of the Giles Medal are to be considered and ranked again in each subsequent year for up to 2 years following their first nomination. In any situation where the medal was to be declined by the recommended nominee, this ranking would be used to present the medal to the next eligible recipient for that year.

### **Criteria for good standing of medal nominees:**

**Research:** Nominees are exempt if they have not met standards of research compatible and consistent with those as reported in the Australian Code for the Responsible Conduct of Research (2007) or their international equivalent where relevant. Evidenced compromise by a nominee of any of these standards will render the nominee ineligible for the Award of the Giles Medal.

**Criminal:** Nominees are exempt if they have any record related to criminal misconduct. Evidenced compromise by a nominee of any of these standards will render the nominee ineligible for the Award of the Giles Medal.

**Professional:** Nominees are exempt if they have any documented record that relates to professional misconduct. This includes any breach related to university code of conduct guidelines or any breach under regulatory board guidelines as a practitioner. Evidenced compromise by a nominee of any of these standards will render the nominee ineligible for the Award of the Giles Medal.

## **Management of Unsuccessful Nominations**

The nominators of an unsuccessful nominee are to be advised in writing by the ACA CEO, on behalf of the ACA Board, i) whether the nomination was eligible or not, and ii) in the instance the nomination was considered eligible but unsuccessful, that the nominator is welcome to make a resubmission of their previous nomination in future rounds of nominations. Furthermore, that this would normally require the provision of additional information to the initial nomination so that the resubmission is up to date at the time of its submission. This additional information should be reported as advice on a cover letter/ email when submitting the re-nomination that i) a previous nomination was made, ii) the year it was made, and iii) highlight what additional information and or amendments have been made in the subsequent nomination.

Any eligible resubmission if received by the due date in the year it has been resubmitted would normally be considered by the GMSAC in that round.

## Recipient announcement

The medal will normally be announced publically at the same time of the announcement of the Giles Lecture (see Giles Lecture). This would typically be August in any year but usually 3 months before the ACA Conference.

The Medal would normally be awarded at the ACA Conference Dinner. Should the recipient be unable to attend the Dinner an alternate suitable time and occasion, giving due recognition to the recipient and the intent of the Medal, would be determined by the President on advice from the CEO and the Executive of the Board of the ACA.

# Attachment A: Giles Medal Nomination Form

## Important Preamble

Please note the following conditions before you complete this nomination form. Failure to comply with these conditions may result in a nomination being ruled invalid.

1. All nominations and relevant supporting information must be kept in confidence, including from ACA office-bearers, ACA organisational and conference stakeholders and from the individual nominee for the award.
2. Any requests for any assistance toward completion of any aspect of the nomination process or nomination form and its appendices must only occur through the office of the ACA CEO.
3. Nominators must complete all aspects of the nomination form personally. This includes preparation of all related attachments.
4. Submission of the nomination documents occurs by the due date. Late nominations will not be considered for the current year but may be considered for the following year.

## Nominator Details

First name:  Last name:

Address:

State:  Postcode:  Country:

Email:

Qualifications:

Awards: Please specify year(s) awarded

Healthcare registration number:  Country:

Current appointments/professional roles:

**Declaration:** I  hereby declare that I do not have a personal or financial relationship with the nominee I have selected for the Giles Medal.

**Signature:**

**Date of birth:**

## Seconder Details

**First name:**

**Last name:**

**Address:**

**State:**

**Postcode:**

**Country:**

**Email:**

**Qualifications:**

**Awards:** Please specify year(s) awarded

**Healthcare registration number:**

**Country:**

**Current appointments/professional roles:**

**Declaration:** I  hereby declare that I do not have a personal or financial relationship with the nominee I have selected for the Giles Medal.

**Signature:**

**Date of birth:**

## Nominee Details

**First name:**  **Last name:**

**Address:**

**State:**  **Postcode:**  **Country:**

**Email:**

**Qualifications:**

**Awards:** Please specify year(s) awarded

**Healthcare registration number:**  **Country:**

**Current appointments/professional roles:**

There are 4 appendices to the nomination form. It is necessary to attach all appendices. The appendices should use 12-point times roman font, single-spaced and be formatted to A4 pages with 2cm margins top and bottom left and right.

## Appendix A - Case for the award

Please provide a narrative description of the research activities, achievements, direct outcomes and esteem measures that evidence the outstanding quality (by international standards) of the nominee's research and relevance to healthcare and or the practice of chiropractic. The narrative is to be written for the public (lay terms) and limited to a single page. You must address how the body of work impacts on one or more of the following criteria:

- enhancement of knowledge and understanding of mechanisms that enable good health,
- contribution to the reliability and validity of patient assessment or diagnosis and or
- improvement of the efficacy of the treatment and management of patients.

## Appendix B - Nominee's 5 best publications

For each of the 5 best publications a brief narrative of up to half a page that describes the significance of the specific work to health care and on what basis it is considered to be outstanding by international standards.

This would normally include indicators and esteem factors such as, but not limited to; i) International ranking of journal in which the paper is published, ii) citation in and high quality evidence ranking by a Cochrane systematic review, iii) cited in evidence/used to construct clinical guidelines or code of clinical practice endorsed by an international health advisory body (eg affiliation with world health organisation or like), national government or regulatory body, iv) primary evidence as to how the research changed practice, v) Citation of work in internationally recognised textbooks in the preclinical or clinical sciences.

## Appendix C – 5 best publications

Please provide an electronic (PDF) copy of each of the 5 best publications referred to in Appendix B.

## Appendix D – Full publications list

Please provide a complete list of all publications authored by the nominee as listed on Pubmed. This may also include additional information such as conference presentations, commentaries, books or book chapters.

## Office Use (Office of ACA CEO)

Confirmation of nominees registration:  Yes  No

Confirmation of nominees good institutional standing:  Yes  No

Name of contact person at institution:

Confirmation of nominees good public and professional standing:  Yes  No

Name of contact person and relevant background:

CEO office administrators name:

Signature:  Date: