#### **Enhancing Peer Review**

The Study Section Chair as Effective Partner Role and Best Practices

toni scarpa

scarpat@csr.nih.gov 301-435-1109



**National Institutes of Health** 

**U.S. Department of Health and Human Services** 



#### **NIH Peer Review**

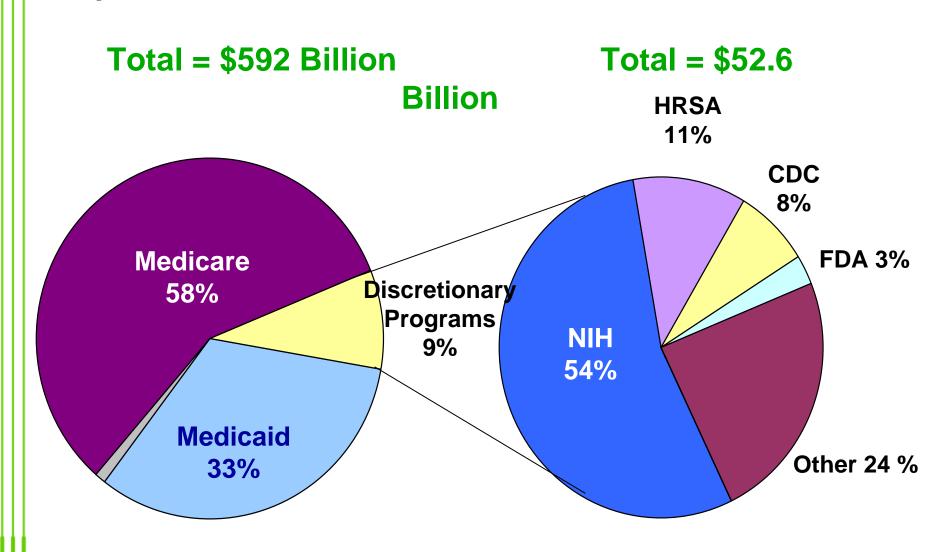
- > NIH and Peer Review at CSR
- > The Drivers for Change
- > CSR's Efforts to Enhance Peer Review
- ➤ The NIH Director's Peer Review New Initiatives
- Best Practices for Chairs



# **NIH and Peer Review at CSR**

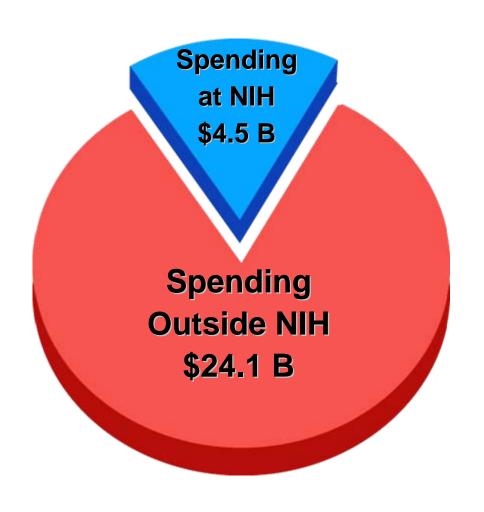


#### **Department of Health and Human Services**





# FY 2007 NIH Budget is \$28.6 Billion





#### The Fundamental Tenets for NIH

- 1. The only possible source for adequate support of our medical research is the taxing power of the federal government.
- 2. The federal government and politicians must assure complete freedom for individual scientists in developing and conducting their research work.
- 3. Reviews should be conducted by outside experts essentially without compensation.
- 4. Program management and review functions should be separated.



#### The Basic Operating Principles of NIH Peer Review

#### NIH has ownership of the process

 The Scientific Review Officer, a full time federal employee, nominates the review panel, assigns applications and is responsible for the meeting

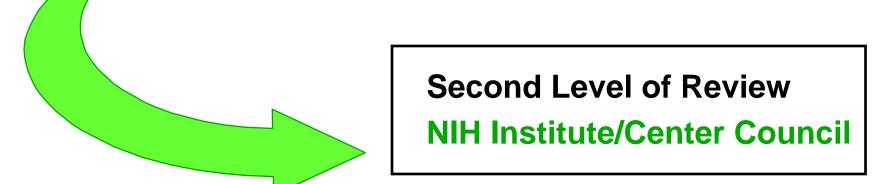
# The study section (review panel) has ownership of the science.

- Is composed by the best and experienced scientists in the field.
   Usually 20 are permanent members, serving 4 years 3 times/year and 10 are ad hoc
- Hundreds of study sections reviewing different biomedical behavioral science



## **Dual Review System for Grant Applications**

First Level of Review
Scientific Review Group (SRG)





#### **CSR Mission Statement**

To see that NIH grant applications receive fair, independent, expert, and timely reviews – free from inappropriate influences – so NIH can fund the most promising research.



#### **CSR Peer Review: 2008**

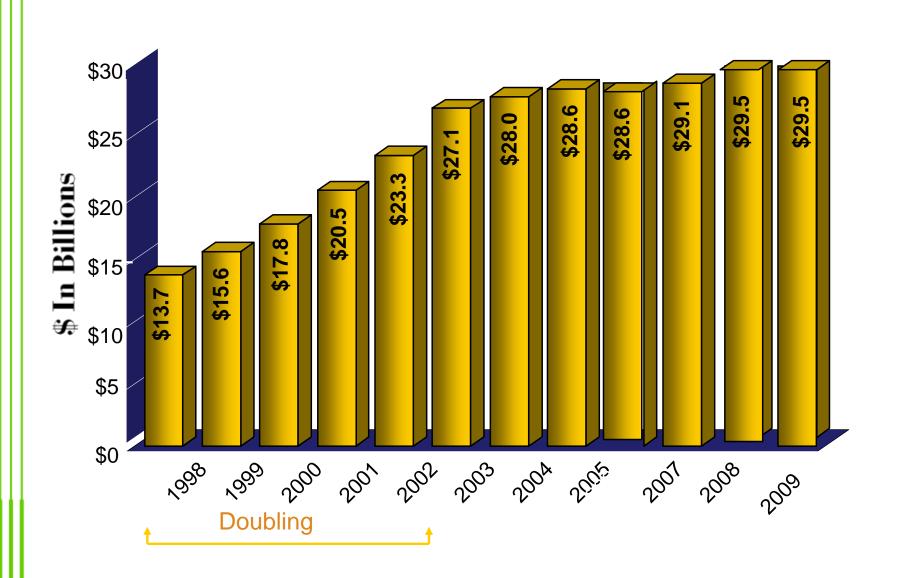
- 77,000 applications received
- 56,000 applications reviewed
- 16,000 reviewers
- 240 Scientific Review Officers
- 1,600 review meetings



# **The Drivers for Change**

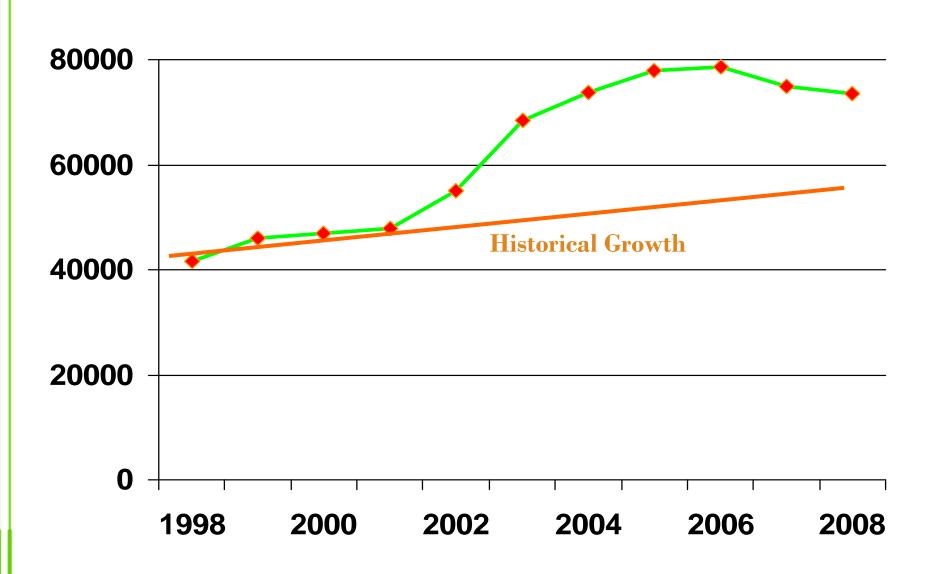


#### 1st Driver: The NIH Budget





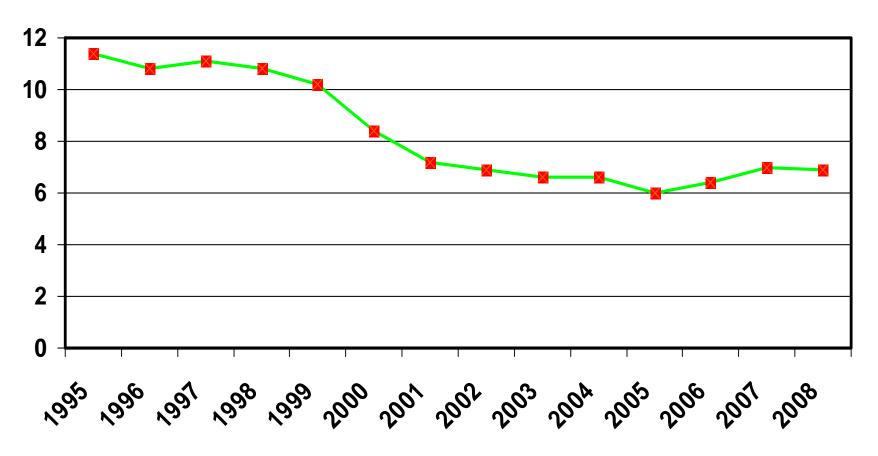
#### **2nd Driver: Number of Applications Submitted**





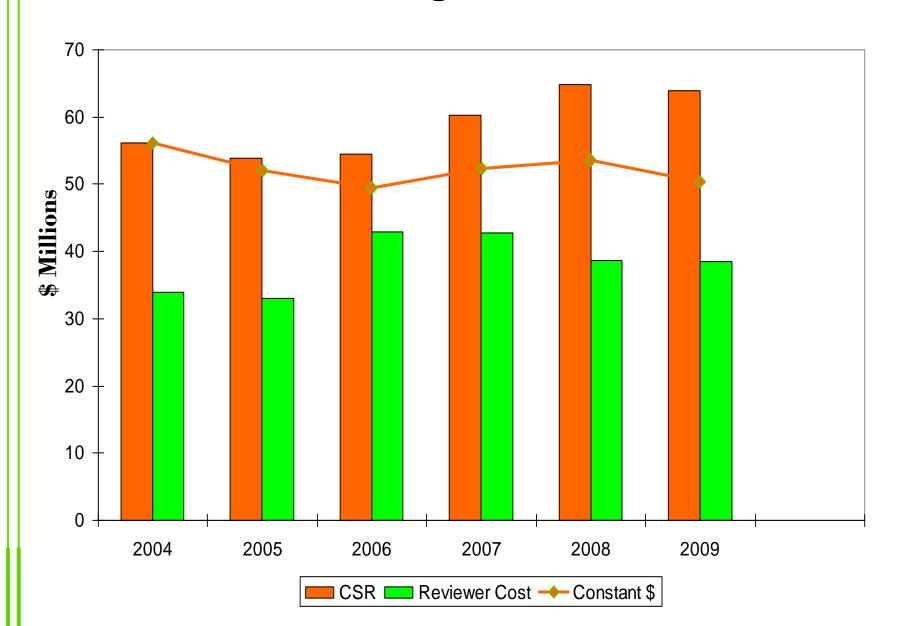
#### 3rd Driver: Reviewer's Load

Applications
Per Reviewer





# 4th Driver: CSR Budget





# **Annual Savings in Reviewers' Expenses Budget**

- Non-refundable tickets with one possible change
  - \$15 million
- 3,000 fewer reviewers
  - \$3 million
- 15% reviews using electronic platforms
  - \$5 million
- One meeting a year on the West Coast
  - \$1.8 million



#### **5th Driver: One Review Platform for 62 years**

The First NIH Study Section 
The Last NIH Study Section

1946 2008







**CSR's Efforts to Enhance Peer Review** 

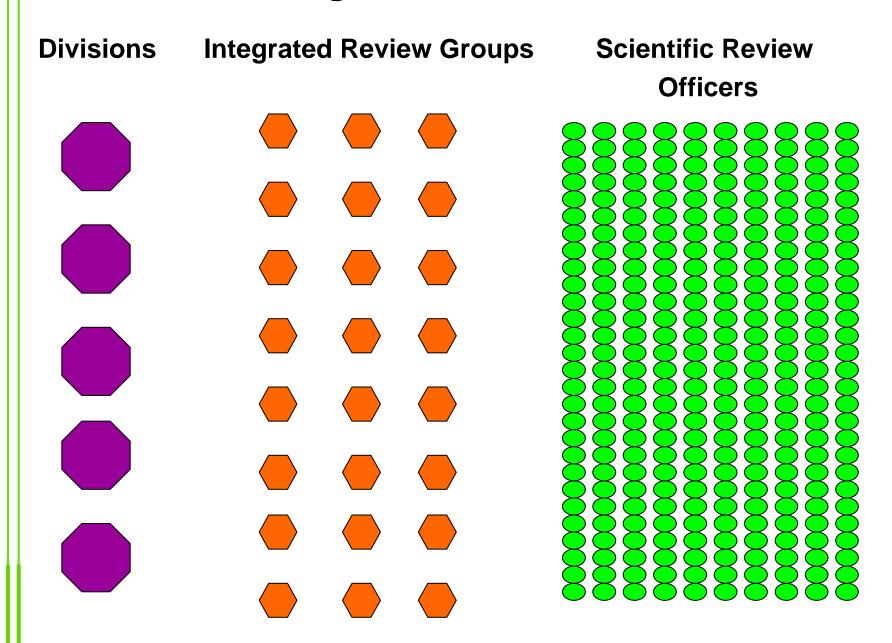


#### **CSR's Efforts to Enhance Peer Review**

- 1. CSR Reorganization
- 2. Recruiting CSR Staff
- 3. Revising of Study Section Guidelines
- 4. Improving Study Section Alignment and Performance
- 5. Assigning Application more Accurately and Efficiently
- 6. Shortening the Review Cycle
- 7. Advancing Additional Review Platforms and Processes
- 8. Recruiting the Best Reviewers

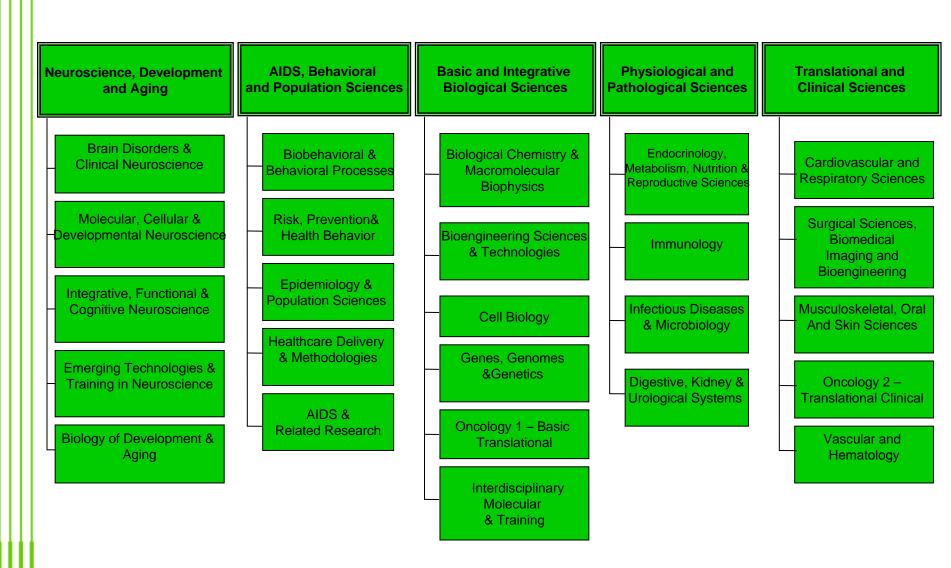


# 1. New CSR Organizational Structure





# 1. CSR Reorganization as of January 2009





# 2. Recruiting of Scientific Staff

- 0 3 Division Directors
- 0 6 Integrated Review Group Chiefs
- 0 20 Scientific Review Officers



## 3. Revising Study Section Guidelines

- Cellular Signaling and Regulatory Systems
- [Roster]
- The Cellular Signaling and Regulatory Systems (CSRS) study section reviews applications that
  focus on the initiation and execution of programs that control cellular homeostasis and
  physiology. A distinguishing characteristic of these applications is an emphasis on signaling
  networks and the coordination of processes related to cell proliferation, survival, and growth.
- Cell cycle regulation, mitosis, meiosis, checkpoint controls and regulation by ubiquitination
- Proteolytic mechanisms associated with cell cycle, senescence and death
- Programmed cell death and apoptosis, particularly their regulation in the context of stress, growth, and transformation.
- Proliferation and growth control by the nucleus; signaling pathways regulating transcription
- Integrative cell physiology, e.g., stress, clocks, cellular modeling; cell differentiation and transformation
- Basic studies of cytokine signaling
- Application of state-of-the-art technologies such as imaging and computational modeling of cellular signaling networks
- Study sections with most closely related areas of similar science listed in rank order are:
- Molecular and Integrative Signal Transduction
- Intercellular Interactions
- Membrane Biology and Protein Processing
- Molecular Genetics A
- Molecular Genetics B



#### 4. Improving Study Section Alignment & Performance

- Input from the community--ongoing
- Internal IRG reviews—every two years
- Open Houses—conducted in 2008
- Peer Review Advisory Council—twice yearly



#### 5. Assigning Applications Accurately and Efficiently

#### Retooled for electronic submission

• Applications are now submitted electronically

Assign applications using text fingerprinting, and text mining programs

**Full Implementation by early 2009** 



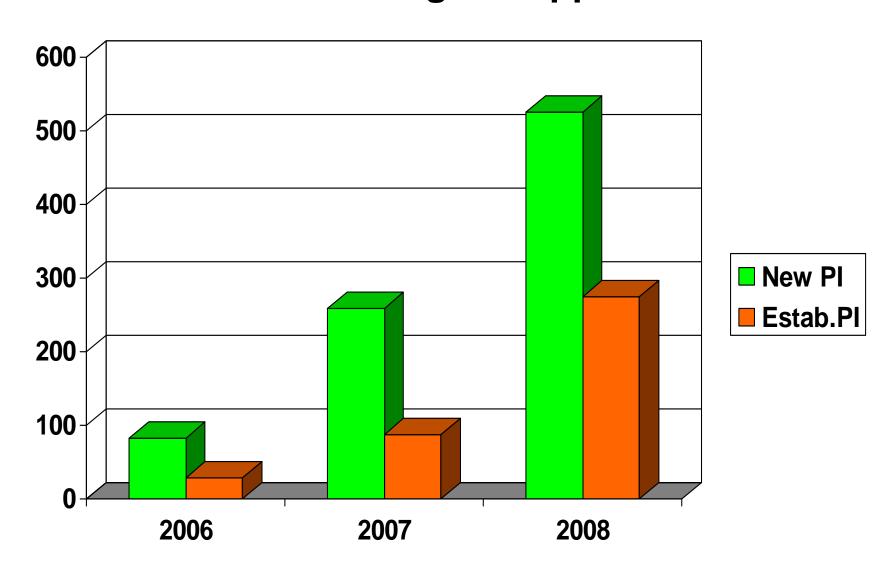
## 6. Shortening the Review Cycle

#### The Goal

 To provide applicants a review and score within 3 months of application submission. This will permit resubmission of applications (when doable and desirable) 4 months earlier than in the past.



# RO1 A1 Resubmission Within 4 Months of Original Application



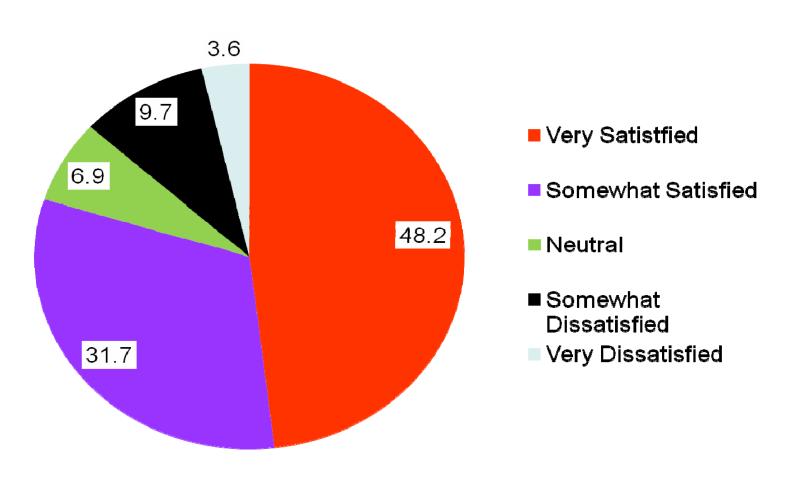


# 7. Advancing Additional Review Platforms and Processes

- Additional Review Platforms Help recruiting Reviewers
- Electronic review modes reduce travel
- Electronic Reviews
  - Telephone Enhanced Discussions
  - O Video Enhanced Discussions
  - O Asynchronous Electronic Discussions



# 7. Reviewer Satisfaction with AED Technology





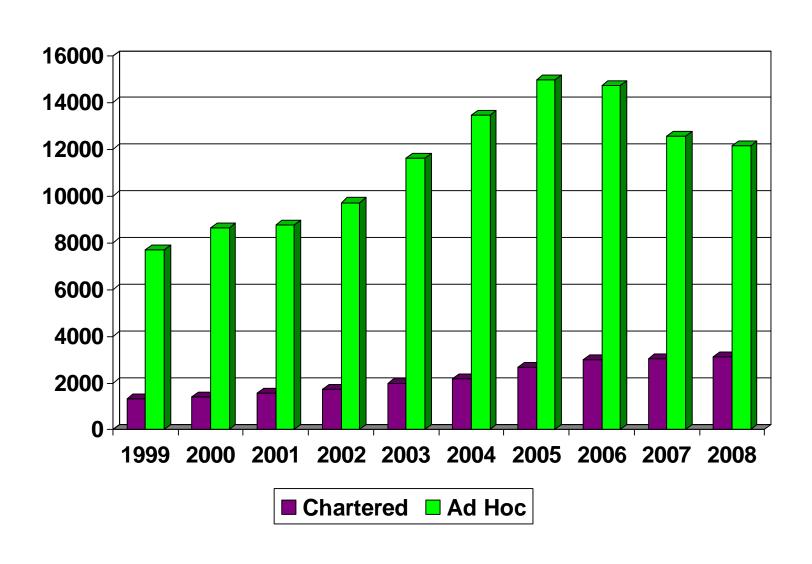
# 7. Cost Comparison of Review Platforms

	Teleph	AED	VED	Face to Face
\$ Cost/application	25	107	237	867
\$ Cost/reviewer	31	100	292	1767

Not including honoraria for reviewers

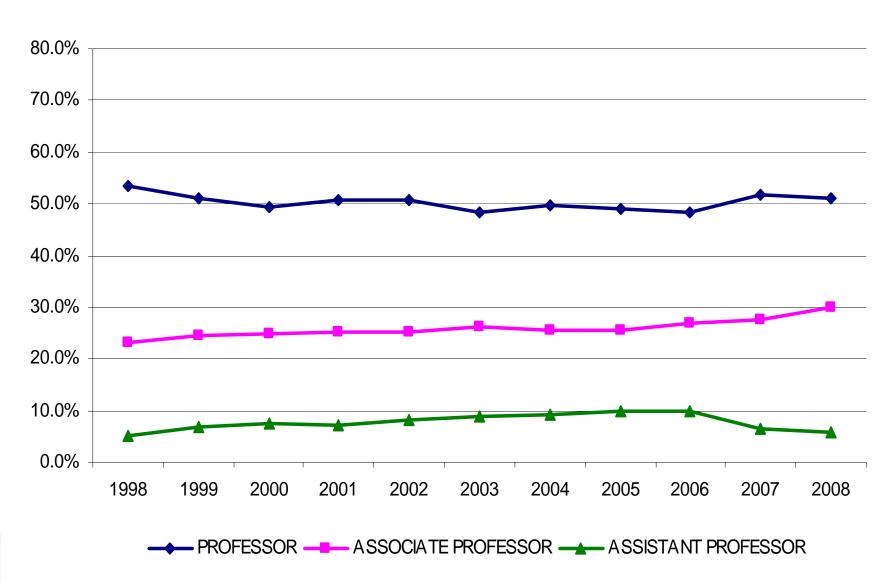


## 8. Recruiting the Best Reviewers





#### 8. Academic Rank of ALL CSR Reviewers



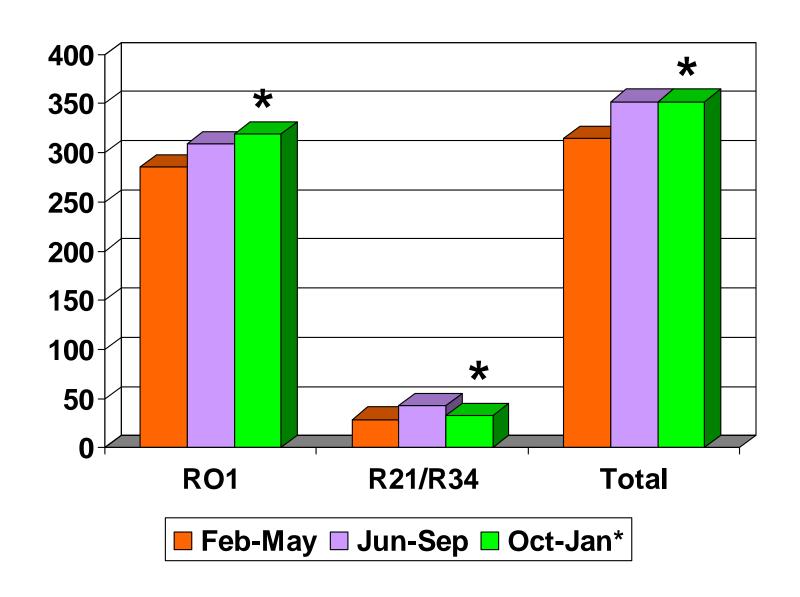


#### 8. Recruiting the Best Reviewers

- ✓ Move a meeting a year to the West Coast
- ✓ Additional review platforms
- ✓ Develop a national registry of volunteer reviewers
  - ✓ Searchable database with 4,000 reviewers
- ✓ Provide tangible rewards for reviewers
  - ✓ No submission deadlines for chartered members of study sections (effective February 2008).
- Provide flexible time for reviewers
  - ✓ Choice of 3 times/year for 4 years or 2 times/year for 6 years



#### 10. Applications Submitted Outside of Deadlines





#### 10. Expansion of No Submission Deadlines

#### Present (since Feb 2008)

Chartered Study Section Members

o CSR 3127

o Other ICs 1012 4,139

#### Planned for 2009

Frequent Reviewers\* 1323

BSC regular members 260

NAC members
 393
 1, 976

<sup>\* 6</sup> meetings/last 18 months



# The NIH Director's Peer Review Recommendations



#### **Major Complaints About NIH Peer Review**

- The process is too slow
- There are not enough senior/experienced reviewers
- The process favors predictable research instead of significant, innovative, or transformative research
- The time and effort required to write and review are a heavy burden on applicants and reviewers



#### **Corporate NIH Enhancing Peer Review**

Two advisory committees to the NIH Director

The Charge from Dr. Zerhouni:

"Fund the best science, by the best scientists, with the least administrative burden..."

http://enhancing-peer-review.nih.gov



#### The Process

# Year-long Deliberative Effort Gathering Feedback & Input:

- Request for Information
- NIH Staff survey
- •IC White Papers
- •Internal Town Hall Meetings
- External Consultation Meetings
- Data Analysis
- •Internal and External Working Groups

#### Peer Review Oversight Committee (PROC) Established Working Groups:

1.Engage the Best Reviewers
2.Improve the Quality and
Transparency of Review
3.Ensure Balanced and Fair
Reviews Across Scientific Fields
and Career Stages 4.Continuous
Review of Peer Review

Diagnostic
June 2007 – Feb. 2008

Design Implementation Plan

March 2008 – June 2008

Begin Phased Implementation of Selected Actions

Identified Key
Recommendations



### **Summary of Recommendations**

#### Priority 1: Engage the Best Reviewers

Increase Flexibility to Better Accommodate Reviewers

Recruit Reviewers

Acknowledge Reviewers more formally

Compensate Reviewers Time and Effort

Improve Review Quality with Training

#### Priority 2: Improve the Quality & Transparency of Review

Modify Rating System to Focus on Specific Review Criteria

Align Summary Statement with Review Criteria

Shorten and Align Application with Review Criteria

Priority 4: Continuous Review of Peer Review

# Priority 3: Ensure Balanced & Fair Reviews Across Scientific Fields and Career

Support for Early Stage Investigators

Stages

Review of Established Investigators

Enhanced Review of Clinical Research

Expand Awards Encouraging "Transformative Research"

Reduce Need for Resubmissions



# **Enhancing Peer Review:**

- 1. Highly transformative research
- 2. Fund the best research earlier and reduce the burden
- 3. Improve quality and transparency of peer review
- 4. Recruit and retain the best reviewers
- 5. Train chairs and reviewers
- 6. Continuous evaluation of all aspects of peer review

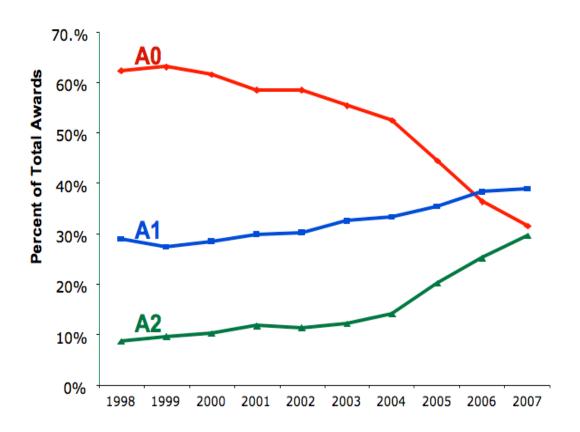


# 1. Review of Highly Transformative Research

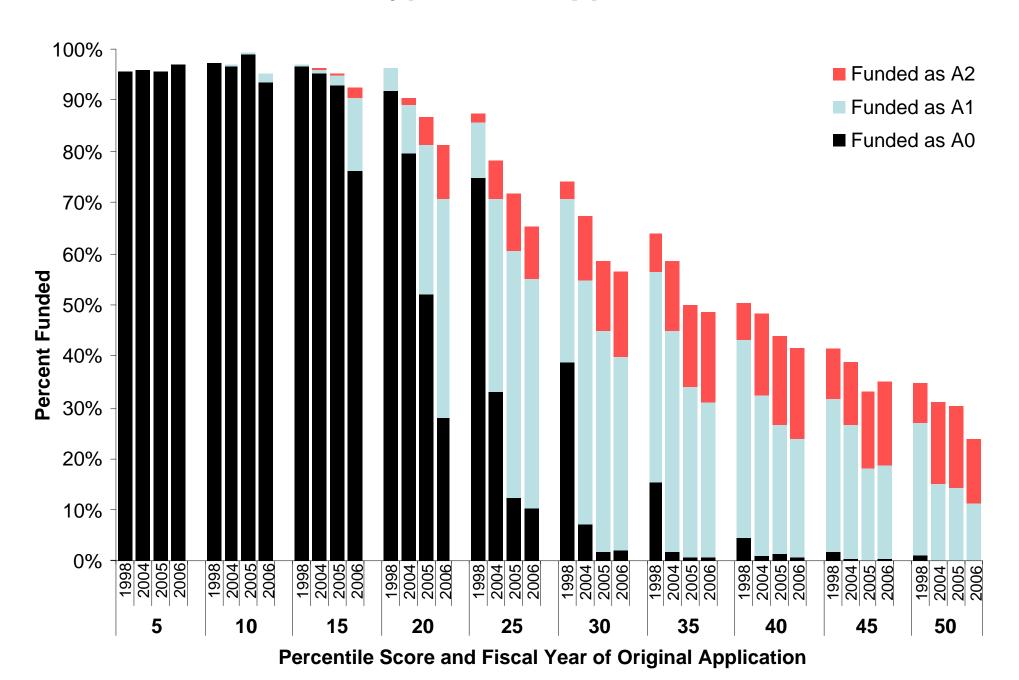
- OPASI Transformative RO1 (T-RO1)
  - Once a year, 5 years, \$20-\$40 million total budget
  - Deadline January 29, 2009
  - 8-page application
  - Editorial Board Review
    - Heavy triage based on innovation and potential science transformation by a small study section of distinguished, broad-science reviewers (the editors)
    - o Specific science reviewed by appropriate reviewers (the editorial board)
    - o Final ranking by the editors



- 2. Funding the best research earlier and reducing the burden on applicants, reviewers, institutions and NIH
  - More flexible deadlines
  - Abolish A2 applications



#### 2. Percent of Type 1 R01 Applications Funded





# 3. Improve Quality and Transparency of the Peer Review Process

#### May-July meetings 2009

- Shorten summary statements, follow template for each criteria
- Change the rating system
  - Use 1-9 integers
  - Score each criteria
  - Provide score for all applications (even those not discussed)

### Spring 2010

- Shorten applications, aligning with review criteria
  - Impact, investigator, innovation (if applicable), research strategy, facilities



## 3. New Scoring

	Overall Impact Score		Guidance on weighing strengths and weaknesses
High Impact	1	Exceptional	Strengths
	2	Outstanding	Strengths
	3	Excellent	
Moderate Impact	4	Very Good	
	5	Good	
	6	Satisfactory	
Low Impact	7	Fair	
	8	Marginal	Weaknesses
	9	Poor	

Non-numeric score options: NR = Not Recommended for Further Consideration, DF = Deferred, AB = Abstention, CF = Conflict, NP = Not Present.



#### 4. Recruit and Retain the Best Reviewers

- Flexibility to serve: option to decrease the commitment to twice yearly by serving 6 years
- Tangible rewards for reviewer service
- Improve quality with training
  - O All the SROs
  - O All Chair
  - Reviewers



# **Best Practices for Chairs**



# **Ownership**

#### Ownership of the Review

• The Process: NIH

• The Science: You and Study Section Members

#### Ownership of the Application

- OSR from receipt to posting of Critiques
- Institutes/Program after



# The SRO and the Program Officer

- The Scientific Review Officer (SRO)
  - 0 240 SROs in CSR
  - More Senior
  - More Uniformity
- Main Role of SRO
  - Nomination for Slates and Chair
  - Selection of Ad Hoc Reviewers
  - Assignment
  - Follow the law, the rules and the regulations
- The Program Officer
  - Role before and during review
  - Conflict
  - The Importance of Telephones and Microphones



#### **Best Practices of Effective Chairs**

- The Assignment for Chairs
- Before the Meeting
  - Possible Review Problems
  - Posting Critiques by the Deadline
  - No Corridor Discussion and Deals
- During the Meeting
  - Impact
  - Critique more than Mentoring
  - Consistency of Scores
  - Out of Range Scoring
  - Consensus should not be forced
  - Time Management
  - Inappropriate Statements
  - Recap and Summary



#### What You Could Tell in February-March

- Changes are coming for next meeting (May-June 2009):
- Scores 1-9 (integers only)
- Vote for each criteria
- Shorter Summary Statement, with boxes for each criteria
- Discussion of new investigators first
- Scores of individual criteria given to all applicants
- Most likely the order of discussion
- Changes occurring in 2010:
- Shorter application (12 page for RO1) designed to match scoring criteria



# **Enhancing Peer Review Training**

- CSR and NIH Review Staff
  - 6 face to face training sessions, January 2009
  - 6 face to face training sessions, April 2009
  - Continuous training

#### Chairs

- For Chairs appointed in 2008, sessions in January 2009
- For Chairs appointed in 2009, sessions in July 2009

#### Reviewers

- Training material (power point, interactive training, frequently asked question, mock study section video, etc) in April-May 2009
- Senior CSR staff at the first meeting in May-July 2009



#### **Useful Links**

- The major link, weekly updated <u>http://grants.nih.gov/grants/guide/notice-files/NOT-OD-09-</u> 023.html
- Recruitment of Chairs, Best practices
   http://cms.csr.nih.gov/CSRIRGReview/BBBPIRG/ChairSele
   ctionandOrientation.htm
- Early Stage Investigators
   http://grants.nih.gov/grants/guide/notice-files/NOT-OD-09-034.html
- New vs. revised application <a href="http://enhancing-peer-review.nih.gov/policy\_announcements.html">http://enhancing-peer-review.nih.gov/policy\_announcements.html</a>



## This is CSR

