

CSR News Flash

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Center for Scientific Review  
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## CSR's Acting Director Addresses Community Concerns



About 50 readers of the September 2011 issue of the Peer Review Notes responded to the request for input made by CSR's Acting Director Dr. Richard Nakamura. "I was impressed that so many took the time to share their concerns," he said.

"Most of their concerns dealt with policy issues that are larger than CSR," he said. "But I was grateful. Having just become CSR's Acting Director, their input will help keep me grounded as I lead CSR and discuss the larger NIH policy issues with my NIH colleagues."

Some of the most salient concerns are listed below with Dr. Nakamura's responses.

### Will Important Research Be Lost Now that NIH Has Eliminated A2 Applications?

A large percentage of those who wrote me were worried that this policy change is having a serious effect on very productive PIs with critical lines of research who could succeed if given one more chance. NIH is carefully looking at the data regarding the decision to limit the number of times an applicant can submit the same applications. An early look at the data indicates that the policy is achieving its primary goal of increasing the number of A0 applications that are funded. <http://nexus.od.nih.gov/all/?p=6722>. NIH also is also seeking additional data on the overall impact of this and other recent changes via external and internal surveys on the Enhancing NIH Peer Review changes. [See Q&A below.] We will continue to monitor data on this issue and keep you informed.

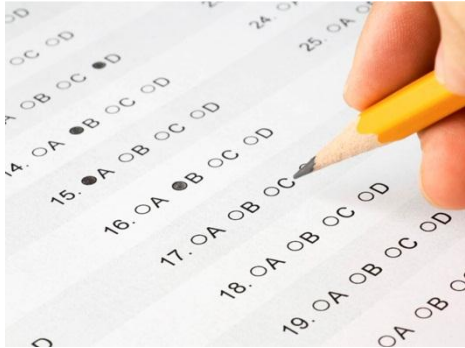
As a bit of background, I note that previously many applicants and reviewers complained about how few applications were funded the first time as A0s. At that time, most applications were funded as A1 or A2s and were queuing up much like airplanes around a gridlocked airport. This delay seemed unnecessary as data showed applications that initially scored in the top 20 percentile were eventually funded. The recent change therefore essentially eliminated what would have been A2s by funding them as A0s or A1s.

Because early stage and new investigators had the most difficulty waiting in the funding queue, NIH helped keep these critical researchers in the pipeline by eliminating A2s at the same time it made a commitment to fund an appropriate percentage of these applicants.

The recent fall of success rates has made the impact of the A2 policy change feel worse for some. Because of tighter budgets, many more worthy applications could not be funded whether or

not A2s were permitted. NIH shares community concerns about the effects of tight budgets, and it is actively seeking ideas on how it can better manage its limited resources. Dr. Sally Rockey Associate Director for Extramural Research asked for community suggestions on her blog on October 17, 2011: <http://1.usa.gov/vr4qk6>.

### **How Will You Know the Recent NIH Peer Review Enhancements Are Working?**



NIH has made a commitment to methodically assess the effectiveness of the recent peer review enhancements and continually assess our grant and peer review systems. I wholeheartedly support this approach, because I believe our decisions about future changes should be driven by the careful consideration of sound data.

Groups of applicants, reviewers and advisory council members, as well as NIH and CSR staff members were surveyed for input on the new critique templates, scoring system and other peer review changes made in May 2009.

In general, reviewers expressed a preference for the new peer review system over the old one. In terms of overall fairness and satisfaction, applicants rated the peer review system as fair or very fair most often and rated themselves as satisfied or very satisfied.

However, the surveys also identified problems that led NIH to act. For instance, critical feedback on the new bulleted critique templates led NIH to ask reviewers to be more specific in their critiques and to spell out in a paragraph the special factors that informed their Overall Impact score.

NIH is in the process of conducting a second set of external and internal stakeholder surveys to determine how well the new A2 policy, the shorter applications and other recent changes are achieving their goals. If you receive a survey, I encourage you to participate and help build our data on these important issues.

### **Why Prevent Reviewers Who Can't Attend the Whole Meeting from Voting?**

CSR created the rule for its review groups that prevents reviewers from scoring applications when they do not attend the full meeting because of scoring inconsistencies that could occur when so many reviewers came to their meetings late or left early. I gather that this policy has been helpful in keeping study section scores well calibrated.

Though reviewers have to be present throughout the meeting to vote, those who cannot make this commitment can still participate fully in the review of a subset of the applications (in person or by phone) and influence how the members vote even though they cannot vote themselves. Never underestimate the power of a well-articulated argument. It can sway a study section with a power not usually found in a single vote.

### **Can NIH Lift the Limit on the Number Publication Citations Allowed in the Biosketch?**

There is no absolute limit to the number of citations applicants can list in their biosketch except the overall four-page limit for the section itself. The Enhancing NIH Peer Review initiative led

NIH to create a suggested limit of 15 citations. The goal was to reduce reviewer burdens and to have more focused applications, with citations specifically related to the research proposed. Nonetheless, applicants can list more than 15 citations if they feel it would be to their advantage.

*Go to our Web site to view more of Dr. Nakamura's responses to your questions on the new scoring system, a requirement for NIH grantees to serve on study sections, and others.*  
<http://www.csr.nih.gov/news>.

### **How Well Is the New Scoring System Working?**

Of the reviewers [surveyed in 2010](#), 80 percent of them agreed or strongly agreed that the nine-point scoring scale was sufficient to communicate meaningful differences in the quality of the applications.

### **What Are You Doing to Improve Internet Connections at Meeting Hotels?**

We know how poor or nonexistent Internet service disrupt a meeting. We have taken a number of steps to address such problems. Not long ago we modified hotel contracts to clarify what is required in this area. Each hotel we use for a study section meeting is required to provide uninterrupted Internet connectivity in the meeting room for all attendees and for all days of the meeting at a minimum bandwidth of 54 MBs per second.

Unfortunately, some hotels promise more than they deliver. When this happens, we are committed to assessing the situation and determining if we will continue to use the hotel for future meetings.

To better address problems when they occur, we are providing new guidance to our staff so we may resolve difficulties faster than in the past. I have also asked our IT shop to work on an IT "crash cart" so we can work around problems we can't quickly solve.

### **Why Don't You Require NIH Grantees to Serve on Study Sections?**

NIH [notified](#) grantees last year that they were expected to serve on NIH peer review groups. Citing this expectation can be helpful in recruiting reviewers. However, instead of seeking a bigger stick, NIH has worked to offer more carrots to make service more appealing:

- Having study sections meet once a year on the West Coast, where many reviewers work.
- Using online, video and telepresence review platforms so we can recruit needed experts who are not willing to travel to face-to-face meetings.
- Allowing reviewers who have made substantial commitments to review to submit -- at anytime -- applications that otherwise would have standard due dates.
- Allowing reviewers to choose flexible terms of service – participating 3 times a year for 4 years or 2 times a year for 6 years.

In addition, we have enlisted university research deans and scientific societies to nominate volunteer reviewers to be included in the CSR National Registry of Volunteer Reviewers. This peer pressure has been very effective, and the registry has grown to include over 5,000 reviewers.

Together, these initiatives have significantly improved CSR's ability to engage much needed expertise for the applications we need to review.

### How Can I Become a Reviewer?



The Center for Scientific Review is always looking for qualified reviewers.

I'd encourage you to go online and [learn more](#) about the role of reviewers and the kinds of researchers we're seeking to recruit.

**There are three main ways to volunteer to become a CSR reviewer:**

1. **Apply to Join the Early Career Reviewer (ECR) Program** if you have an active independent research program and you haven't reviewed for NIH beyond doing one mail review. Learn more about the program by visiting the [ECR Web site](#).
2. **Contact Your Professional Society or Research Dean:** We have asked professional societies and university research deans to nominate volunteer reviewers to be included in the [CSR National Registry of Volunteer Reviewers](#), which our Scientific Review Officers use to identify highly qualified reviewers.

We encourage you to tell your professional society or your research dean that you are interested in being a reviewer and you would like to be added to the list of recommended reviewers. If your society or university has not yet participated, encourage it to contact CSR to learn how to become involved by sending an e-mail to [RecruitReviewers@csr.nih.gov](mailto:RecruitReviewers@csr.nih.gov).

3. **Contact a CSR Scientific Review Officer:** Another way to volunteer is to send your CV to the CSR Scientific Review Officer who oversees a review group that might use your expertise. You can find an appropriate review group or study section by going to our Review Group Descriptions Web site. Each study section description page has a link to a roster, which includes a link to the Scientific Review Officer:  
<http://cms.csr.nih.gov/PeerReviewMeetings/CSRIRGDescription/>.