U.S. Department of Health & Human Services



# **CSR Advisory Council Update**

**September 21, 2020** 

Noni Byrnes, Ph.D. Director Center for Scientific Review

# **Welcome: CSR Advisory Council Members**



Jinming Gao, Ph.D. Professor of Pharmacology and Otolaryngology University of Texas Southwestern Medical Center



### Alfred George, M.D.

Magerstadt Professor and Chair Department of Pharmacology Northwestern University



Yasmin Hurd, Ph.D.

Deanna Kroetz, Ph.D.

Professor Psychiatry, Neuroscience, Pharmacology and System Therapeutics Mount Sinai School of Medicine



Professor **Bioengineering and Therapeutic Sciences** University of California, San Francisco



#### José López, M.D.

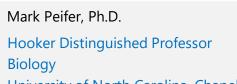
Professor Hematology University of Washington



Scott Miller, Ph.D. Irénée Dupont Professor Chemistry Yale University

Tonya Palermo, Ph.D. Professor and Associate Director Anesthesiology and Pain Medicine University of Washington

Biology



University of North Carolina, Chapel Hill



Julie Price, Ph.D. **Professor And Investigator** Radiology and Biomedical Imaging Harvard Medical School



Elizabeth Villa, Ph.D. Assistant Professor **Biological Sciences** University of California, San Diego

#### **NOT ATTENDING**



Denise Wilfley, Ph.D. Scott Rudolph University Professor Psychiatry, Pediatrics, Psychological and Brain Sciences Washington University at St. Louis



# Welcome...CSR Advisory Council Ad Hocs



### Narasimhan Rajaram, Ph.D.

Associate Professor Department of Biomedical Engineering University of Arkansas at Fayetteville



### Alexis Stranahan, Ph.D.

Associate Professor Department of Neuroscience and Regenerative Medicine Medical College of Georgia, Augusta University



### Leadership & Management Transitions [Since March 2020]



Acting Division Director (effective 10/26/20) Division of Neuroscience, Development and Aging Delia Olufokunbi Sam



IRG Chief Bioengineering Sciences and Technologies Vinod Charles



**IRG Chief** 

Immunology Audrey Lau



IRG Chief Biological Chemistry and Macromolecular Biophysics James Mack



Acting IRG Chief Musculoskeletal, Oral and Skin Sciences Dr. Katherine Malinda

- Referral Officers



Alok Mulky



Rojas





Sudha Veeraraghavan

Wei-Qin Zhao



Beres

**Chief of Staff** Amy Wernimont

#### **Reviewer Training Coordinator**

**Tasmeen Weik** 









## **CSR response to COVID-19 pandemic**

- **Ahead of the curve:** Acquisition of FedRAMP-certified Zoom platform, 650 licenses in preparation for an emergency. Tested the platform to prepare for adaptation in early/mid 2019
- Most advanced **telework** policy at NIH enabled 100% of CSR workforce to be virtual with 100% productivity immediately. All **review meetings virtual** with very short notice, relevant security and integrity in place
- April Review Matters blog on Zoom security to address community concerns re: Zoom-bombing, etc.

#### May 29, 2020 Vol. LXXII, No. 11

**NIH** RECORD



#### IN THIS ISSUE

NHLBI's Childs on Front Lines of Covid-19 Health Crisis Medical Research Scholars Shelter in Place at NIH OER Adapts to Fresh Challenges

of Pandemic

#### CSR's Outlaw Credited with Quick Conversion to Virtuality

CURRENT ISSUE

PAST ISSUES



HOME

KUDOS

"While many investigators have had to shutter their labs due to this public health emergency, the research enterprise will spring back," noted Dr. Kristin Kramer, communications director at the Center for Scientific Review.

SUBSCRIBE

FEEDBACK

"Key to seeing that happens without additional delays is that review of the roughly 27,000 applications NIH receives each council round continues. CSR handles the review of about 75 percent of NIH grant applications, amounting to 62,000 per year and about 20,000 per council

#### **Review Matters**

Security of Our Virtual Peer Review Meetings



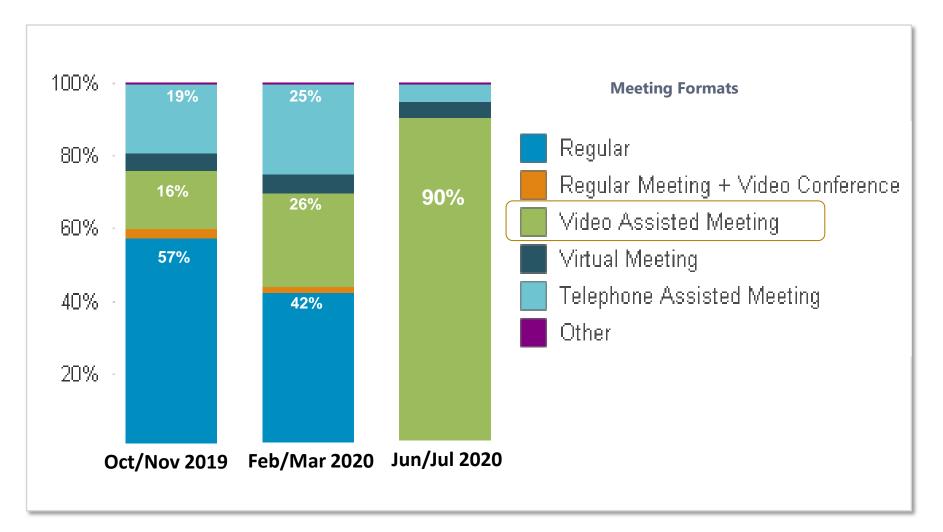
Dipak Bhattacharyya Chief Information Officer April 15, 2020

CSR will conduct all summer peer review meetings using one of three platforms – 1) video; 2) telephone; 3) web-based discussion. A majority will take place using the Zoom video platform. We want to provide information about how we are maintaining the security and confidentiality of our review meetings.

The Zoom video platform that we are using is not the same as that used by schools or by you at home. Instead, we are using a FedRAMP-certified version of Zoom within the zoomgov.com domain. It meets requirements for other agencies that handle very sensitive information, including the Department of Homeland Security. FedRAMP certification means, for reviewers, the platform can be used without risking installation of malware and, for applicants, meetings remain confidential. Key features include:



### CSR held 600+ Zoom review meetings [Mar-Aug 2020] >1000 additional planned Sept 2020-Mar 2021







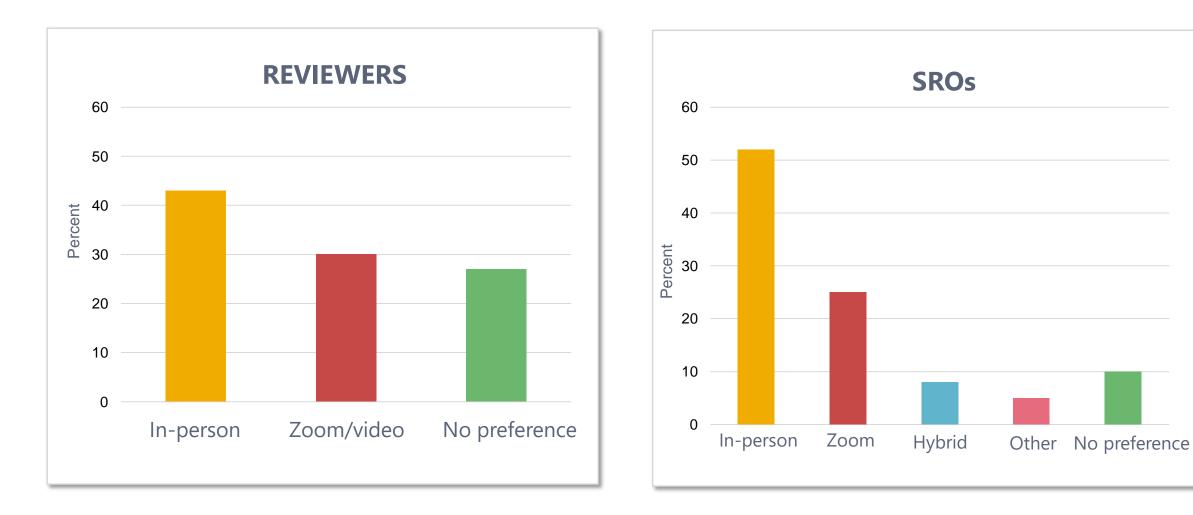






# **REVIEWER and SRO Meeting Format Preference**

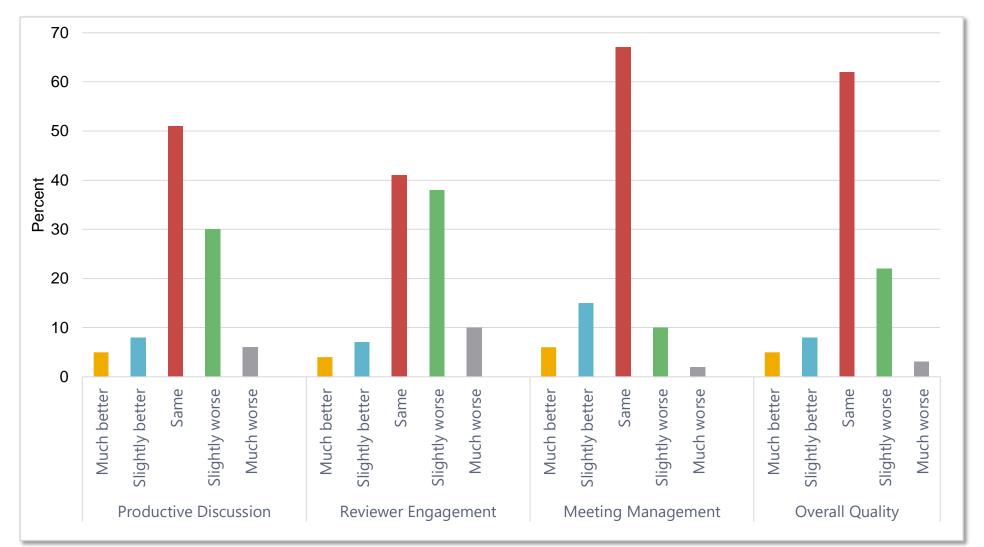
**Zoom Compared to In-Person** 





# **REVIEWER Impressions: Quality of Review**

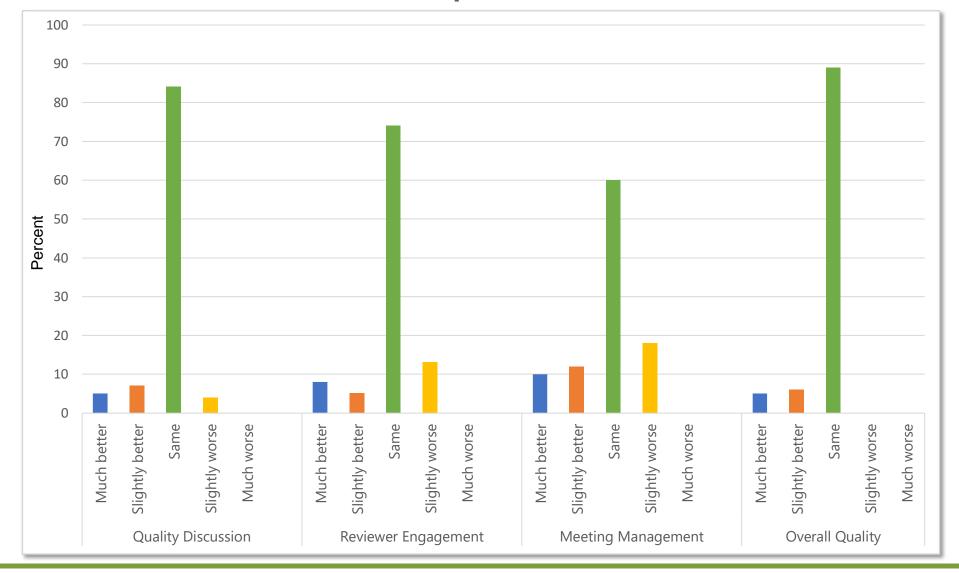
**Zoom Compared to In-Person** 





# **SRO Impressions: Quality of Review**

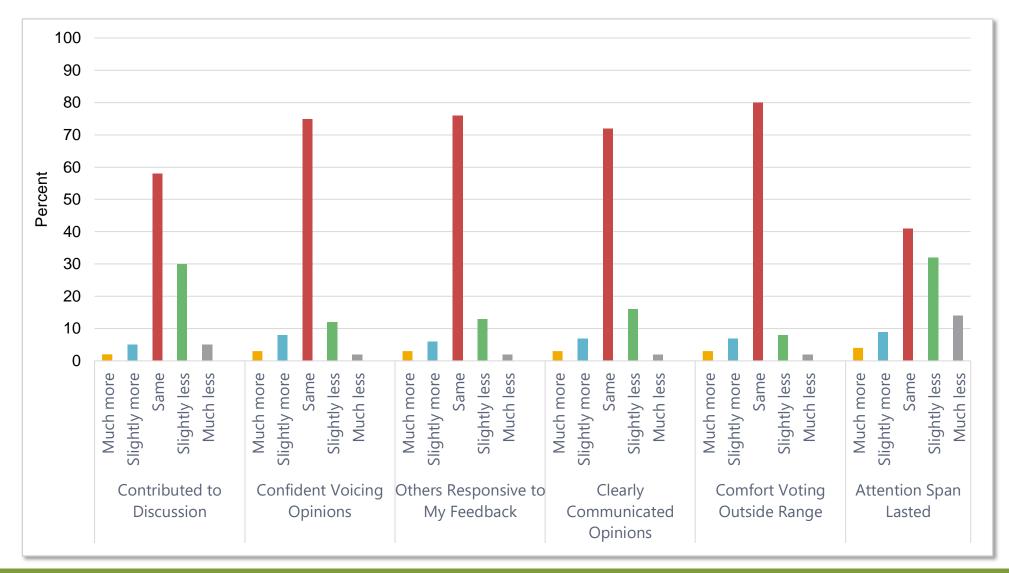
**Zoom Compared to In-Person** 





# **REVIEWER Experience: Participation**

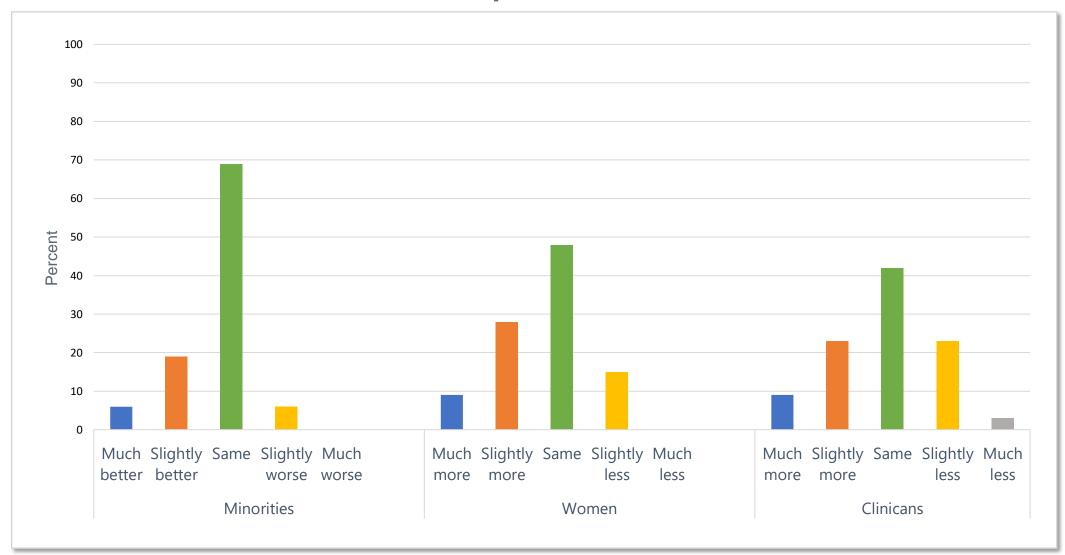
**Zoom Compared to In-Person** 





### **SRO Experience: Ease of Reviewer Recruitment**

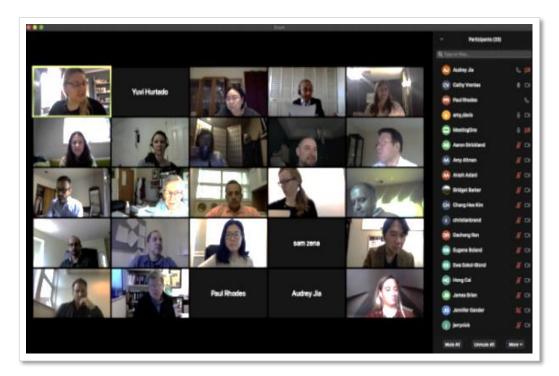
**Zoom Compared to In-Person** 



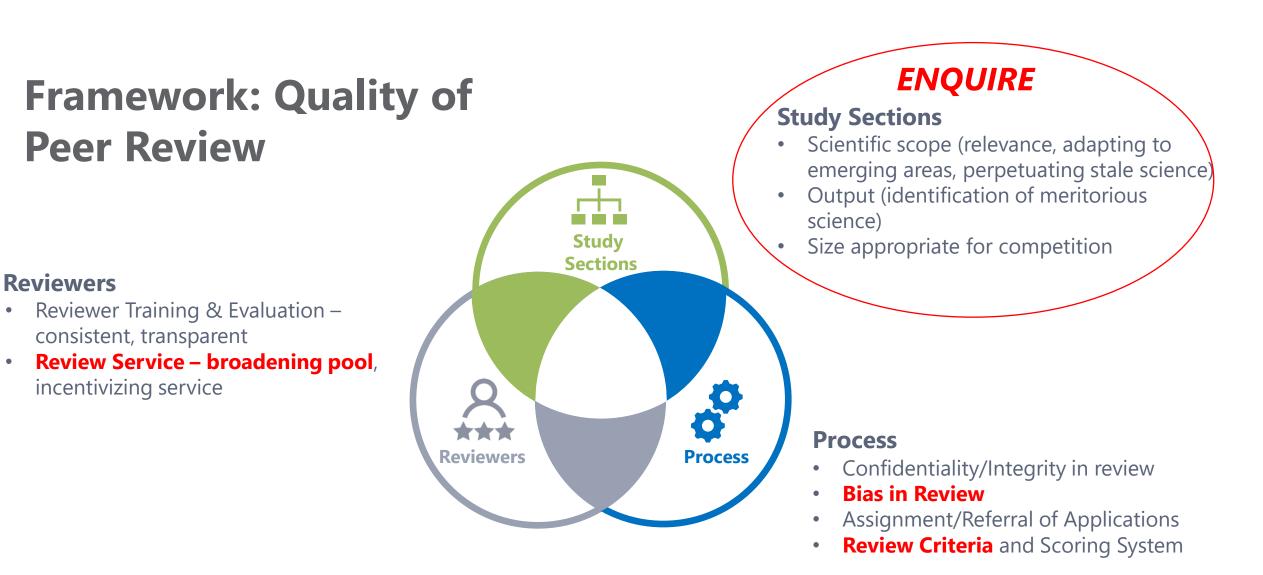


## **Post-pandemic: Future of peer review meetings?**

- Forced Experiment
  - Zoom vs. older Cisco platform easier to use
  - Socialization, lowered resistance among staff, reviewers
- Data-driven decisions about the future
  - Objective data re: scoring, recruitment, diversity
  - Reviewer/staff surveys re: experience, discussion quality
- Environmental and fiscal considerations balanced with primary goal to maintain or improve quality of the NIH review process
- Unlikely to go back to the way it was if safe, then some hybrid reality (1-2 times/year virtual)







Center for Scientific Review









### **ENQUIRE**

<ul> <li>Change in scientific guidelines</li> <li>Merge study sections</li> <li>Create new study sections</li> </ul>	Multiple Possible Actions Follow					
Create new study sections Process Overview for Each	Redistribute areas across study sections					
Process Overview for Each	Add emerging areas of science					
	Eliminate study sections					
c	Cluster Formation How? Determined by science, not management structure - 9-12 study sections in each cluster External Scientific Evaluation Panel Who? Scientifically broad, senior scientists provided with: • current scientific guidelines • sample abstracts & aims • data on workload trends, bibliometric output, ESI submission and success rates Asked: How well does the scope of the study sections align with the current state of the science? Internal Process Evaluation Panel Who? NIH extramural staff with broad perspective • workload data • scoring trends • survey feedback from reviewers & program officers • site-visit information on meeting function • External Scientific Working Group's report Asked: Does the study section function in a way that supports optimal identification of high-impascience? Approvals • Office of Extramural Research					







### **ENQUIRE 2019** Implementation – 42 study sections



Sid

Healthcare Delivery/Patient Outcomes – 9 study sections

GI, Renal, Endocrine, Metabolism – 11 study sections

*Functional/Cognitive Neuroscience – 12 study sections* 

Cardiac, Vascular, Hematology – 10 study sections

### **ENQUIRE 2020**

Ongoing: Basic Sciences (16 study sections)

Upcoming (2 clusters, each with 10-12 study sections): Epidemiological & Oncological Sciences



- Implementation delayed due to COVID-19 from June 5, 2020 to Oct 5, 2020 receipt dates
- New and restructured study section descriptions posted on the web
- Members being reassigned according to expertise need/scientific area realignment- Nov 2020
- **First study section meetings** of new/restructured committees in Feb 2021









### "Reviewer Bias" based on Topic Choice

	nceAd	lvances co	ntents <del>-</del> News <del>-</del>	Careers 🗸	Journals +		
SHARE (f) (j) (in) (c)	RESEARCH ARTICLE   SCIENTIFIC COMMUNITY         Topic choice contributes to the lower rate of NIH awards to African-American/black scientists         Travis A. Hoppe <sup>1,2</sup> , Aviva Litovitz <sup>1,2</sup> , Kristine A. Willis <sup>3,4</sup> , Rebecca A. Meseroll <sup>1,2</sup> , Matthew J. Perkins <sup>1,2</sup> , B. Ian Hutchins <sup>1,2</sup> ,         Science Advances 09 Oct 2019: Vol 5, no. 10, eaaw7238         Science Advances 09 Oct 2019: Vol 5, no. 10, eaaw7238						
	Article	Figures & Data	Info & Metrics	eLetters	🔁 PDF		

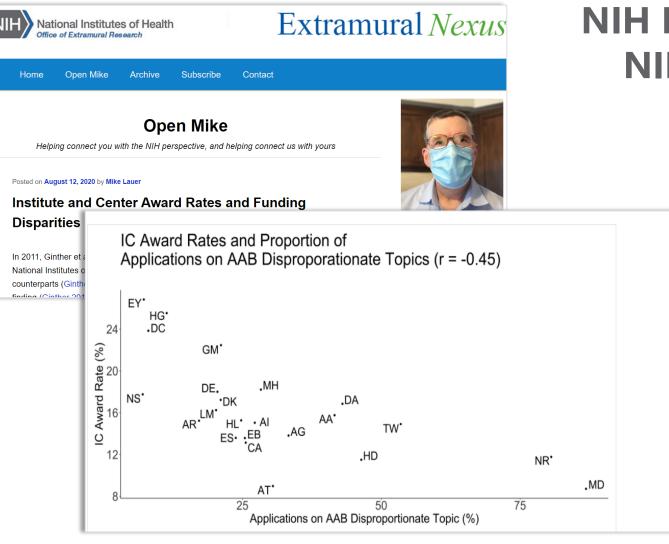
we analyzed six stages of the application process from 2011 to 2015 and found that disparate

"Our analysis shows that all three of the factors that underlie the funding gap...revolve around decisions made by reviewers." – Hoppe et al. (2019), Sci Adv.

### **Important Points to Note:**

- Award rates differ 4-fold across different topic clusters
- E.g. Cluster A (low award rate): child obesity intervention, physical activity, weight loss program....Cluster B (high award rate): corneal wound healing, ocular surface, cataract development...
- The science of high and low award rate topic clusters are generally not reviewed in the same study sections, so "reviewer bias" to explain differential award rates was puzzling





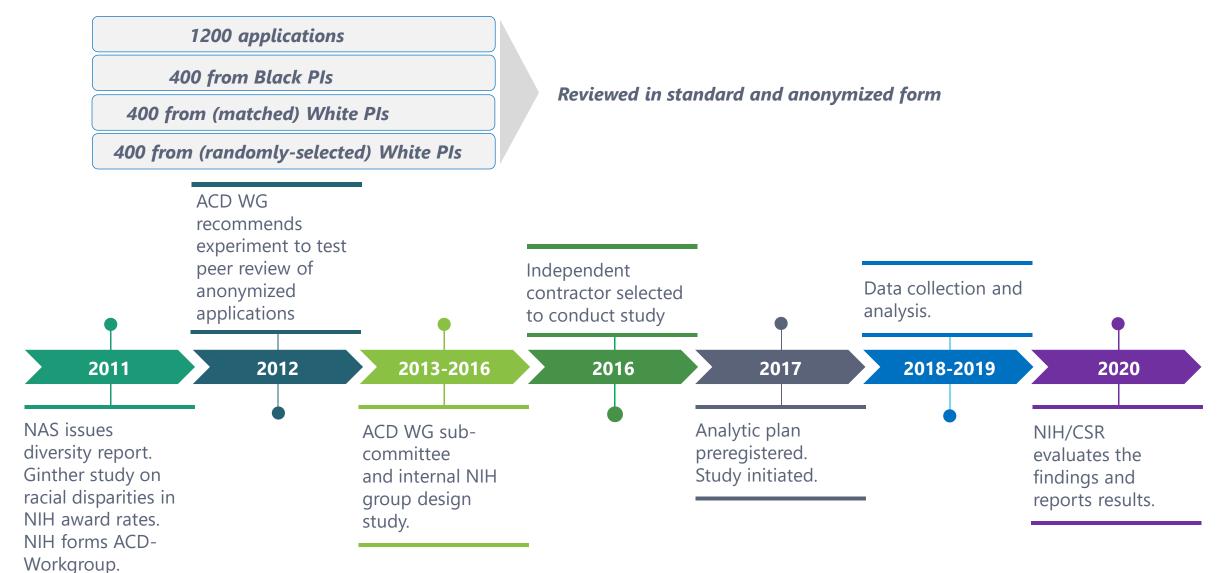
### NIH Reanalysis: Added in individual NIH IC award rate as a variable

IC Characteristic or Outcome	ICs Higher AAB PIs (N applications = 29,285)	All Other ICs (N applications = 128,120)			
PIAAB	3% (796)	1% (1478)			
Discussed	55% (15,980)	55% (70,369)			
Priority Score Median (25 <sup>th</sup> -75 <sup>th</sup> percentile)	36 (26-45)	36 (26-45)			
Score Mean (SD)	36 (13)	36 (13)			
Percentile Rank Median (25 <sup>th</sup> -75 <sup>th</sup> percentile)	27 (14-41)	27 (14-40)			
Percentile Rank Mean (SD)	28 (16)	27 (16)			
Funded	13% (3950)	17% (21,554)			
Funded if discussed (N=86,349)	25%	31%			

"These new analyses demonstrate ...... that <u>differential award rates, rather than decisions made by peer reviewers</u>, as indicated in <u>Hoppe</u>, were critical drivers of differences in funding outcomes for applications linked to different topics" - See Open Mike, Aug 12, 2020; Corrigendum submitted.



### **CSR's "Anonymization" Study**







### **Anonymization Study**

### **Main Results:**

- No effect on scores of Black applicants
- Worsens scores of White applicants (significant, small effect size)
- 20% of the time, reviewers could correctly identify the applicant

Publication ready, submitted/rejected without peer review by Sci Adv, preparing for submission elsewhere

### Three takeaways:

- Isolating the effect of race in the peer review process is challenging due to secondary, linked variables (e.g. institutional "prestige", investigator "pedigree", Matthew/halo effects, etc.) all tied to racial disparities in opportunity/access. Positive bias effects
- Implicit bias is in all of us, including the 18,000 CSR reviewers
- Anon study (post-submission redaction, mail reviews only, no meeting, no discussions, no final scores) <u>not the same</u> as carefully-designed, double-blinded review process





## Piloting Multi-Stage Partially Double-Blinded Review

CSR/Common Fund Collaboration (Fall 2020 transformative R01s)

### NIH Director's Transformative Research Award

#### Funding opportunities for exceptionally innovative and unconventional research projects



Part of the High-Risk, High-Reward Research program, the award supports individuals or teams proposing transformative projects that are inherently risky and untested but have the potential to create or overturn fundamental paradigms and may require very large budgets.

- Open to all career stages
- Open to individuals or teams
- No preliminary data required
- Flexible budgets
- Effort commensurate to project needs

- Self-redaction by investigators no identifiers/institutions
- Stage 1: **Editorial Board** reviews Specific Aims; selects top subset.
- Stage 2: **Subject matter experts** evaluate Specific Aims, Abstract, Research Strategy.
- Stage 3: **Editorial Board** selects top subset, gives prelim scores, followed by receiving full application with investigator info, meeting with discussion and final scores of all 5 criteria.
- Analysis by external contractor regarding process, outcomes, reviewers' ability to evaluate or identify the applicant, etc. will determine feasibility.



Process

CSR will launch bias awareness module for reviewers, SROs Spring 2021 (before summer 2021 meetings)

- Piloted in summer 2020 for NIGMS MIRA reviewers, SROs, POs collaboration between CSR, NIGMS, and NIH's COSWD
- Based on pilot feedback, CSR is designing multimedia, interactive module for reviewers and SROs – Planned launch: Apr/May 2021
  - Bias (including positive bias) awareness in self, in others
  - Case studies in review
  - Mitigation and bystander strategies in review

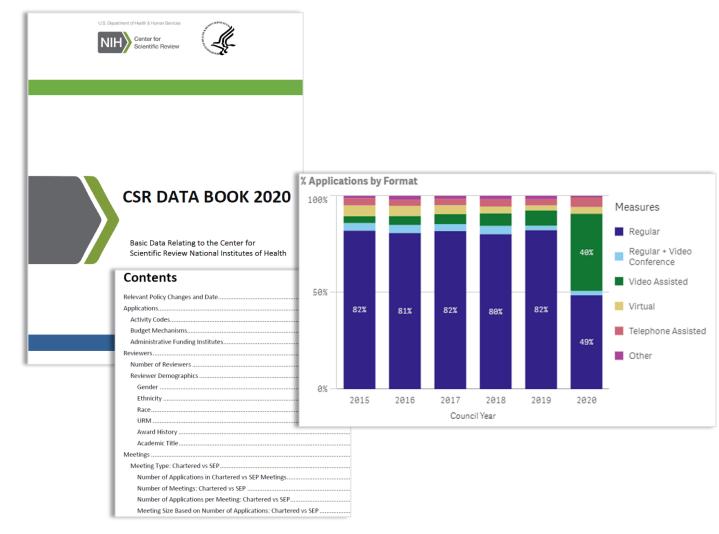
### Understand and Mitigate Potential Biases Maximizing Investigators' Research Award (MIRA)

SCIENCE WORKFORCE DIVERSITY, NIH OFFICE OF THE DIRECTOR NATIONAL INSTITUTE OF GENERAL MEDICAL SCIENCES CENTER FOR SCIENTIFIC REVIEW





## **Under Development: CSR Data Book**



- Dynamic, interactive site for public access to CSR peer review data
- Application numbers, meeting data, reviewer data, demographics, etc.
- Accuracy, Transparency, Accountability



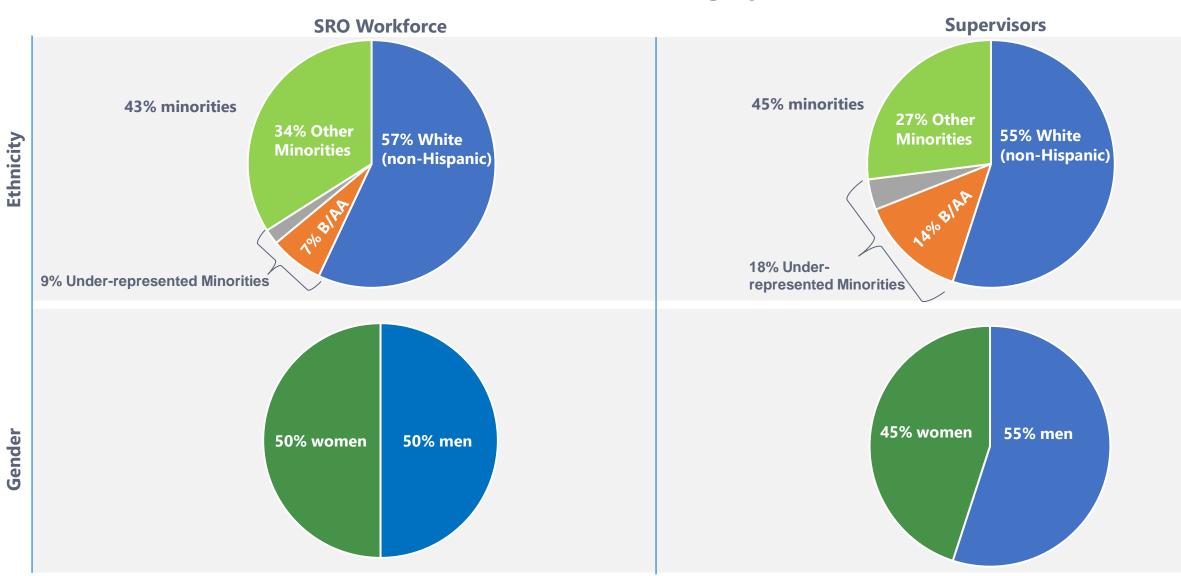
### Demographics, Career-Stage of CSR Reviewers 2020

	%	%F		%URM		% <b>B/AA</b>	
	2015	2020	2015	2020	2015	2020	
Applicants	33.5%	34.9%	7.8%	8.4%	2.3%	2.6%	
Study Section Members	40.2%	42.9%	11.2%	13.2%	4.1%	4.2%	
All Reviewers	34.2%	38.2%	7.4%	8.5%	2.0%	2.5%	

Professor		Asso	ciate	Assistant		
2015	2020	2015	2020	2015	2020	
55.5%	49.8%	29.1%	32.1%	6.3%	10.5%	



### **CSR Scientific Review Officer Demographics [June 2020]**







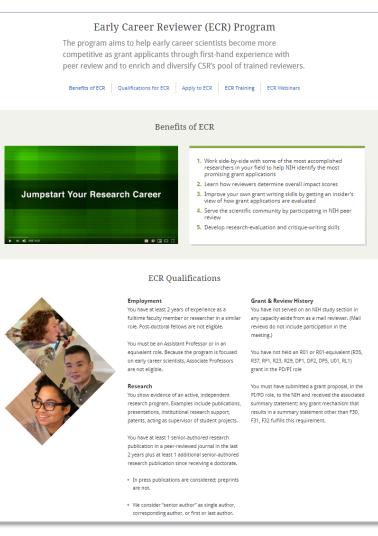
# **Broadening the Pool of Reviewers**





# **Broadening the Pool**

Early Career Reviewer Program Expanded



• Sept 2019 CSRAC Working Group Recommendations re: qualifications, usage, consistency, engagement

### • Sept – Dec 2019:

- Database revamped usable, trackable, accurate
- CSR SRO guidance developed
  - 2 ECRs/standing committee
  - 2 ECRs/SEP with >49 R01/R21
  - 1 ECR/SEP with 25-49 R01/R21
- 940 ECRs recruited in 2020, compared to 575 in 2019
- **ECR pool is more diverse**; 12.1% URM vs. 8.5% for all CSR reviewers in 2020





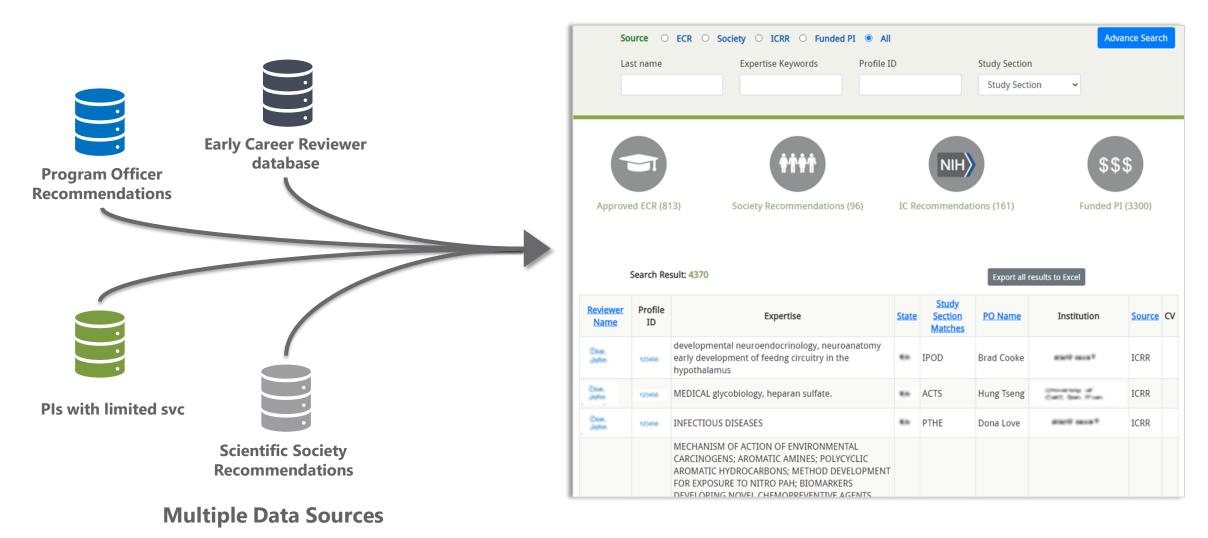


### **Broadening the Pool** The critical role of SROs

- Increased attention to diversity on Special Emphasis Panels (SEPs)
- Moving away from diversity as a "requirement" to recognition of the critical need for the NIH to hear diverse (race/ethnicity, gender, career-stage, scientific fields) perspectives to identify the best, most disruptive, novel science.
- Moving away from old habits of recruiting from the "mental rolodex" approach
- New and enhanced resources to make it easier for SROs to interrogate a broad pool of scientific expertise (CSR's Reviewer Finder Tool)



# Reviewers Broadening the Pool: Aug 2020 Launch of CSR Reviewer Finder



**One Interface – user-friendly for SROs** 



### Update: CSR AC Working Group on Simplifying Review Criteria [Jan 2020 – Mar 2020]

- 1. Reorganize the current five scored review criteria into three scored factors
- 2. Define each criterion and factor conceptually
- 3. Alter templates to focus reviewer attention on score driving factors
- 4. Clarify reviewer responsibility for evaluating the budget
- 5. Relieve reviewers of responsibility for most "additional review considerations"
- 6. Convene an additional workgroup for review criteria for clinical trials applications

Shared with NIH leadership – very well-received, go-ahead to convene CT WG Next steps forward with OER/ICs after CSRAC WG on Simplifying CT Review Criteria has a final report







