

Pre-Meeting Review

1-2 Months Prior to Mtg
3 Reviewers Assigned
Primary, Secondary, Tertiary



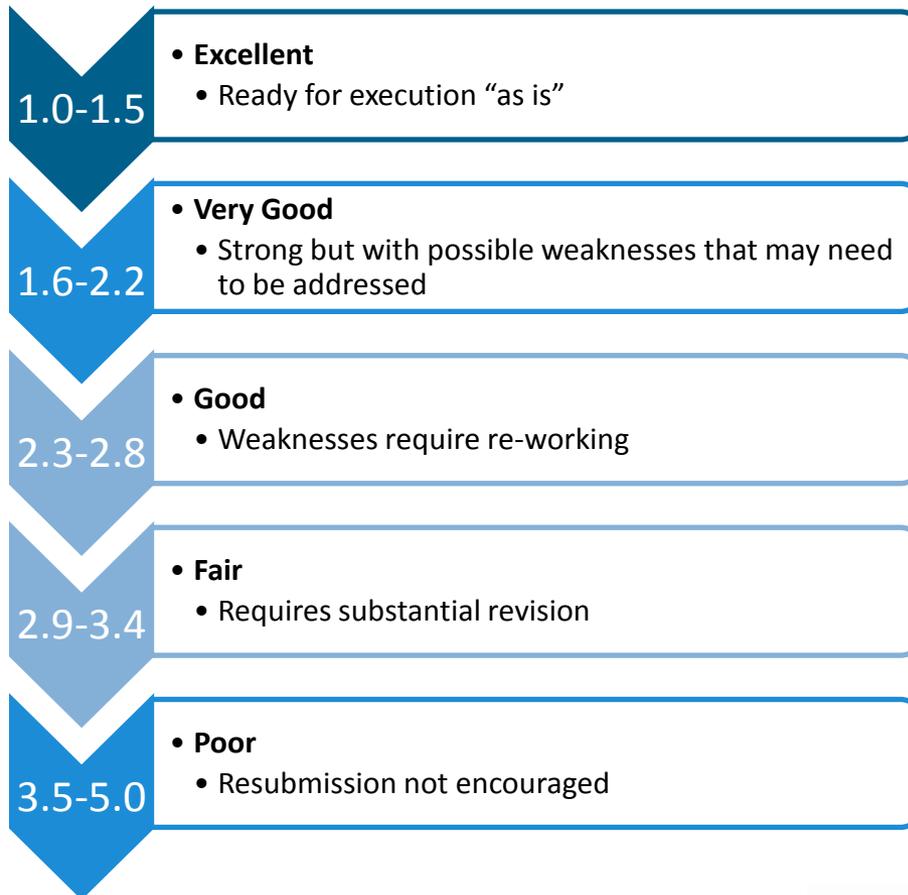
~2 Weeks Prior to Mtg
Reviews Due
(Including Prelim Scores)



Entire review committee
reads all applications prior
to meeting (...yea right)

Scoring Guide

Do comments support the score?



Indiv Reviewer Scoring Process

Four Criterion Scores (each rated on the 1.0-5.0 scale)

- 1. Significance of the Specific Aims Proposed.** (Does the proposed research support / advance the health and healthcare of Veterans? Address an important scientific question/area? Have potential for contribution to scientific literature? Address critical barriers to progress in the field?)
- 2. Impact / Innovation / Contribution to VHA.** (Does this project or the associated research program address a priority area for HSR&D and/or VHA? Challenge or re-direct current research models and/or intervention paradigms? Address novel concepts, methods, interventions and/or gaps in state-of-the-science? Indicate a connection/partnership with a relevant VA program?)
- 3. Approach.** (Is the overall research plan well-reasoned and appropriate to the aims of the project? Incorporate current scientific/theoretical bases? Use appropriate research design/methods for addressing the hypothesis/research question?)
- 4. Investigator Qualifications / Resources and Environment.** (Is the research team appropriate? Does it have a track record for success? Have the knowledge/background and resources (e.g., equipment, staff, mentorship for early stage investigators) to ensure timely and successful project completion? Capitalize on unique expertise or opportunity?)

Indiv Reviewer Scoring Process

Prelim Score (NOT an average of the four criterion scores)

	<u>Rev 1</u>	<u>Rev 2</u>	<u>Rev 3</u>
1. Significance	2.3	1.0	2.2
2. Impact / Innovation	2.0	1.6	2.2
3. Approach	3.0	4.0	3.0
4. Investigator/Environment	2.3	1.8	1.0
5. TOTAL SCORE	?	?	?

Indiv Reviewer Scoring Process

Other Areas (Comments, but not scored)

5. Feasibility.
6. Project Organization and Management.
7. Human Subject Protections.
8. Inclusion of Women and Minorities.
9. Response to Previous Review.
10. Budget.
11. Overall Impression.
12. Key Strengths.
13. Key Weaknesses.

WRITE UP SUMMARY of all 13 areas (3-4 Sentences)

PROVIDE OVERALL PRELIMINARY SCORE

Applications “Not Discussed”

Focus on “discussion ready” proposals that will benefit most from group discussion.

Candidate applications for “not discussed”

- Depending on workload, and with consensus of the panel, applications with an average preliminary score in the least meritorious 25-30%, including those with ...
- All preliminary scores are greater than 3.0
- 2 of the preliminary scores are greater than 3.0, and all reviewers agree “not to discuss”

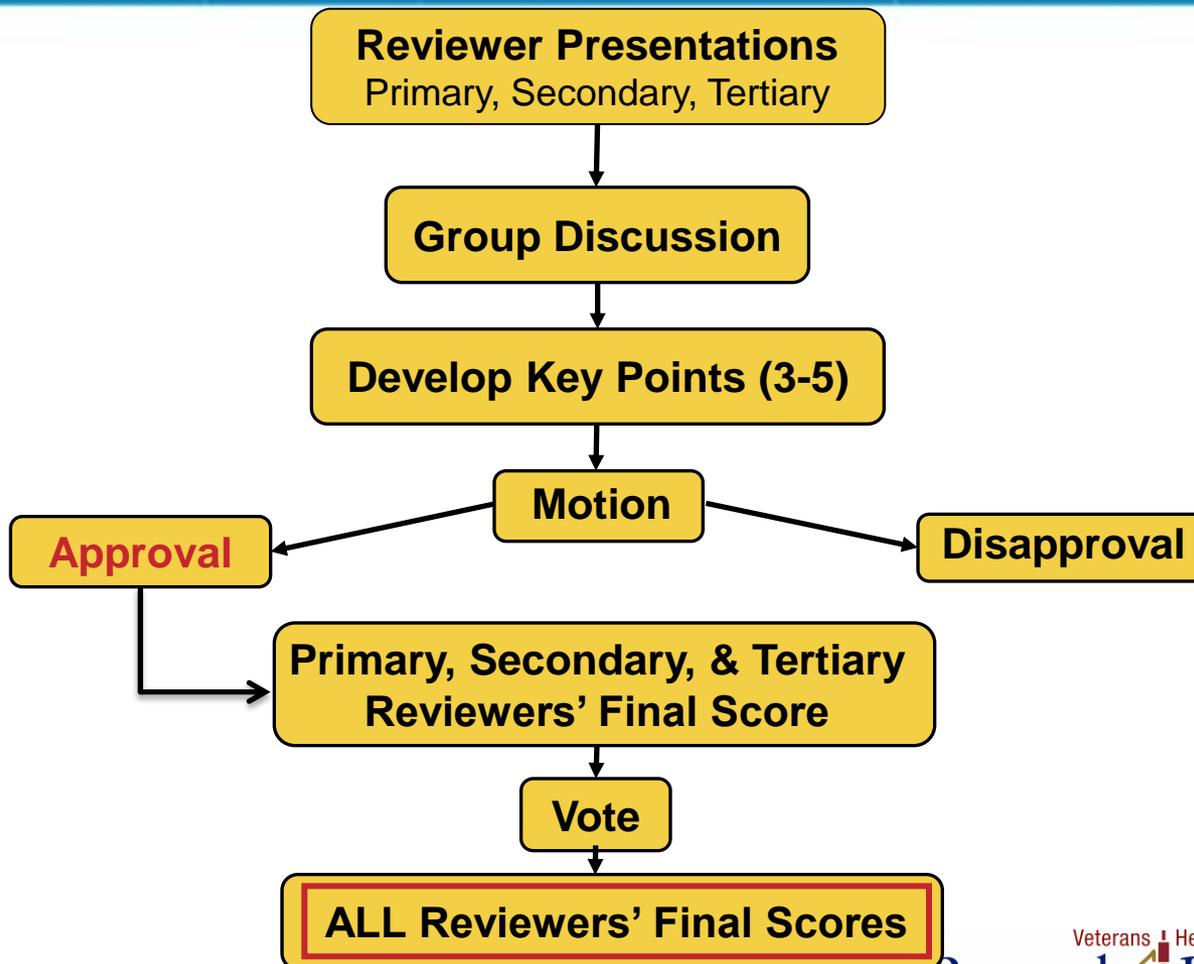
Application Discussion Time

20-25 minutes per proposal (IIRs)---SHORTER for PILOTS

Reviewer presentations: 10-12 minutes TOTAL

- **Primary** reviewers provide comments and a brief description of the study
- **Secondary** and **Tertiary** reviewers only add **NEW** comments and indicate general agreement or disagreement with the previous reviewer(s)

Overview of Group Review



FINAL PRIORITY SCORE (an avg of all voting members total score)

	<u>Rev 1</u>	<u>Rev 2</u>	<u>Rev 3</u>
1. Significance	2.3	1.0	2.2
2. Impact / Innovation	2.0	1.6	2.2
3. Approach	3.0	4.0	3.0
4. Investigator/Environment	2.3	1.8	1.0
5. TOTAL SCORE	?	?	?
6. OUR FINAL PRIORTIY SCORE : 304 (i.e. 3.04)			

Other Thoughts

- Build in some focus on implementation (some measures, subj feedback, etc. even if not a specific aim)
- On Health Care Cost Aims:
Know what you're doing (with experts on the team) or don't bother
- On Resubmissions:

The More Responsive to Review the Better