

American Society of Hematology

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Noni Byrnes, PhD Director, Center for Scientific Review National Institutes of Health 6701 Rockledge Drive MSC7768 Bethesda, MD 20892-7768

Submitted electronically via **RFI website**

Re: Request for Information on Proposed Simplified Review Framework for NIH Research Project Grant Applications (NOT-OD-23-034)

Dear Dr. Byrnes:

The American Society of Hematology (ASH) appreciates the opportunity to provide comments on this request for information (RFI) outlining a revised framework for evaluating and scoring peer review criteria for National Institutes of Health (NIH) research project grant (RPG) applications, including those for R01s, R03, R15s, R21s, and R34s. As many of our members submit RPGs, ASH commends NIH for re-examining the review process and looks forward to working closely with you to make further refinements to this process.

ASH represents more than 18,000 clinicians and scientists worldwide who are committed to the study and treatment of blood and blood-related diseases. These disorders encompass malignant hematologic disorders such as leukemia, lymphoma, and multiple myeloma, as well as non-malignant conditions such as sickle cell anemia, thalassemia, bone marrow failure, venous thromboembolism, and hemophilia. In addition, hematologists are pioneers in demonstrating the potential of treating various hematologic diseases and continue to be innovators in the field of stem cell biology, regenerative medicine, transfusion medicine, and gene therapy.

NIH states that its goal for these changes is to facilitate the mission of scientific peer review by allowing peer reviewers to refocus on the critical task of judging scientific merit and reducing bias to identify the highest impact research. Given the competitiveness of the NIH grant process, ASH welcomes NIH's focus on ensuring that the RPG review process recognizes the proposals with the greatest scientific merit, which is key to achieving NIH's mission.

ASH supports the proposal to eliminate the administrative questions included in the RPG. This change has the potential to allow reviewers' time to be spent evaluating the science, which is their area of expertise, rather than on budget and resources. However, our members correctly note that the administrative questions are not the main drivers of points for the final score, so this change may result in minimal improvement of the review process. Therefore, we urge NIH to evaluate over time whether this change meaningfully improves reviewers' focus on the scientific impact, research rigor, and feasibility of the proposed research.

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Executive Director Martha Liggett, Esq. We also urge NIH to implement a robust education process for study section members and believe the chair of the study section and scientific review officer (SRO) should play an active role in both educating and ensuring adherence to the new review criteria. Such an education process is critically needed, and the proposed changes offer an opportunity to provide direction and mentoring of study section reviewers. Currently, many study section members learn best practices in proposal review "on the job" as they participate in the process; an orientation and mentoring by the chair could improve the overall quality of the reviews provided, including bringing focus to the importance of scientific impact, research rigor and feasibility of the proposed research. It may take several review processes for the effect of these changes to be seen, but ASH members have noted that this may serve as a way to significantly improve the reviews put forward by study section members – especially, but not exclusively, by new members.

In the RFI, the current RPG scoring criteria are outlined: Significance, Investigators, Innovation, Approach, and Environment. The NIH is proposing to reorganize these criteria into three factors: (1) Importance of Research (Significance, Innovation), (2) Rigor and Feasibility (Approach), and (3) Expertise and Resources (Investigator, Environment). Should this change be implemented, only the first two factors will receive a numerical score. For Expertise and Resources, the investigator will be assessed in the context of the research proposed and rated as "fully capable" or "additional expertise/capability needed," and the environment will be rated as "appropriate" or "additional resources needed."

ASH supports the proposal to combine Significance and Innovation into one category (Importance of Research) and believes this will improve and simplify the review process. In fact, some ASH members have reported difficulty differentiating between the two since they are linked; highly innovative studies are likely to be highly significant. While the policy will reduce the weight in the score for "Expertise and Resources," it will not completely eliminate the bias that stems from the researcher's and institution's reputation. Furthermore, this change will not account for the diversity of the investigative team, which is essential to some applications. ASH urges NIH to explore how to better account for needed diversity. In summary, ASH supports the changes proposed to mitigate undue influence of the reputation of the institution or investigator submitting the application, but ASH is unsure how impactful these changes will be. For this reason, we recommend that NIH evaluate over time the impact of this change on the review process and consider additional changes if this does not work as intended.

ASH again thanks NIH for the opportunity to share these comments. Should you have any questions or require further information, please contact Suzanne Leous, ASH's Chief Policy Officer, at <u>sleous@hematology.org</u> or 202-292-0258, or Tracy Roades, ASH's Senior Manager, Legislative Advocacy, at <u>troades@hematology.org</u> or 202-292-0256.

Sincerely,

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Robert A. Brodsky, MD President