National Institutes of Health
Office of Extramural Research

Enhancing Peer Review Survey Results Report



New Resubmission Policy

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Executive Summary

In 2014, NIH announced an updated resubmission policy affecting applications submitted for due dates after April 16, 2014. Under the updated policy, following an unsuccessful resubmission (A1) application, applicants could submit the same idea as a new (A0) application for the next appropriate due date. The policy notice stated that NIH would not assess the similarity of the science in the new (A0) application to any previously reviewed submission when accepting an application for review. Questions in Phase III of the Enhancing Peer Review surveys assessed the opinions of recent NIH grant applicants, reviewers, Scientific Review Officers (SROs), Program Officers (POs), and advisory council members about the new resubmission policy.

When asked whether the new submission policy helped, had no effect, or hindered the NIH peer review process, applicants responded most often (40%) that the new submission policy helped the NIH peer review process and least often (8%) that the new resubmission policy hindered the peer review process. Similarly, POs, reviewers, and advisory council members responded favorably about the policy with more than a third of each group (36%, 36%, and 37% respectively) responding that the new resubmission policy helped the peer review process. SROs responded least often (19%) that the new application resubmission policy helped the NIH peer review process; 42% of SROs who responded indicated that the policy hindered the peer review process.

All respondents who rated the new resubmission policy as helping or hindering the NIH peer review process were asked to explain in an open-ended comment. These responses were coded qualitatively to identify recurrent themes. The most common theme found among responses explaining how the new resubmission policy helped the NIH peer review process was that the policy afforded additional chances for meritorious grant applications that were not funded to be considered anew, particularly applications that missed the payline during periods of budget constraints.

In all respondent groups, the majority of comments (63% of applicants, 67% of reviewers, 87% of SROs, 72% of POs, and 62% advisory council members) describing how the new policy hindered the NIH peer review process stated that the new policy hindered peer review because it increased the overall number of applications submitted and/or increased review burden. Other prevalent themes included that the new policy failed to correct problems with the previous resubmission policy, and the new policy did not allow for consideration of reviewer comments from previous unsuccessful application submissions.

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Report on the Results of the Enhancing Peer Review Surveys: Phase III

New Resubmission Policy

In 2014, NIH announced a change in policy on application submissions. Under the new policy, following an unsuccessful resubmission (A1) application, applicants are permitted to submit the same idea as a new (A0) application for the next appropriate due date. NIH no longer assesses the similarity of the science in the new (A0) application to any previously reviewed submission when accepting an application for review.

The new policy was implemented in direct response to feedback NIH received from the biomedical research community following a previous policy change in application submissions made during the Enhancing Peer Review initiative. At that time, NIH reduced the number of allowable resubmission applications from two to one (NOT-OD-09-003; NOT-HS-10-002), and stipulated that any subsequent submission for that project must demonstrate significant changes in scientific direction compared to the previous submissions. This single resubmission policy was implemented to address concerns among members of the research community about the tendency for resubmission applications to be scored more favorably, in essence creating a queue for meritorious applications before success in funding. However, during the ensuing period of tight funding, the single resubmission policy caused many meritorious research applications to become ineligible for additional submissions; many investigators were forced to propose substantial changes to productive research programs solely to comply with the policy. Concerns were raised that New Investigators were disproportionately affected because new research directions could be difficult during this phase in their careers.

Applicants and Reviewers

Questions posed to applicants and reviewers on the Phase III Enhancing Peer Review Surveys questioned how the new resubmission policy affected the NIH peer review process. Forty percent of applicants and 36% of reviewers responded that the new resubmission policy helped the NIH peer review process. Reviewers responded significantly more often (12%) than applicants (8%) that the new resubmission policy hindered the NIH peer review process.

Approximately half of applicants and reviewers (52% and 48%, respectively) who entered open-ended comments describing how the new resubmission policy helped peer review stated that the new policy offered additional opportunities for consideration of applications that were meritorious but not funded due to reasons outside of their control, such as budget constraints.

Of the applicants and reviewers who entered comments describing how the new policy hindered the peer review process, a majority (63% and 67%, respectively) stated that the new resubmission policy increased the number of application submissions and/or burdened the review process.

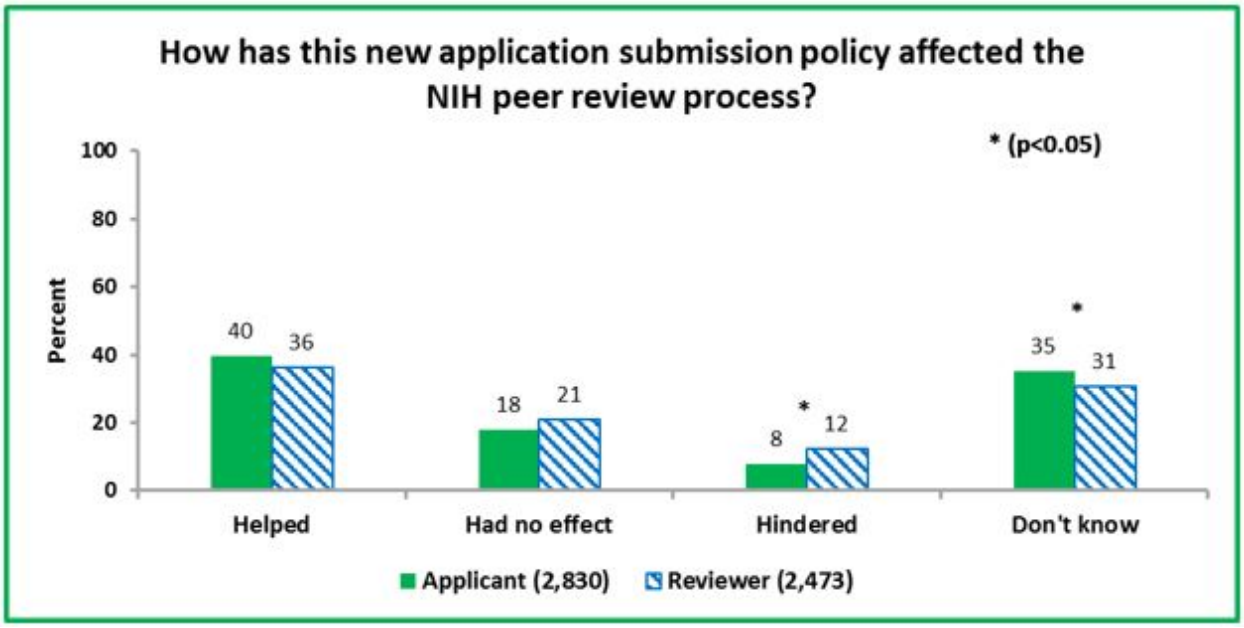

Figure 1. Applicant and reviewer responses about how the new resubmission policy affected the NIH peer review process were similar.

SROs and POs

POs responded significantly more often (36%) than SROs (19%) that the new resubmission policy helped the NIH peer review process. In contrast, significantly more SROs (42%) than POs (19%) responded that the new resubmission policy hindered the NIH peer review process. Almost half of POs (47%) and just over a third of SROs (38%) who entered open-ended comments describing how the new policy helped NIH's peer review process stated that it provided additional opportunities for good applications to be considered for funding. Another 28% of SROs' and 25% of POs' comments stated that the new policy corrected a problem created by the previous single resubmission policy. Many of these respondents specified that it is not feasible for scientists to change their research focus when their grant submissions are not successful. Others indicated that the new resubmission policy obviates the need for gaming of the system to make old applications look new.

The majority of SROs and POs (87% and 72%, respectively) who entered comments describing how the new resubmission policy hindered NIH's peer review policy indicated that the new policy increased the burden on review.

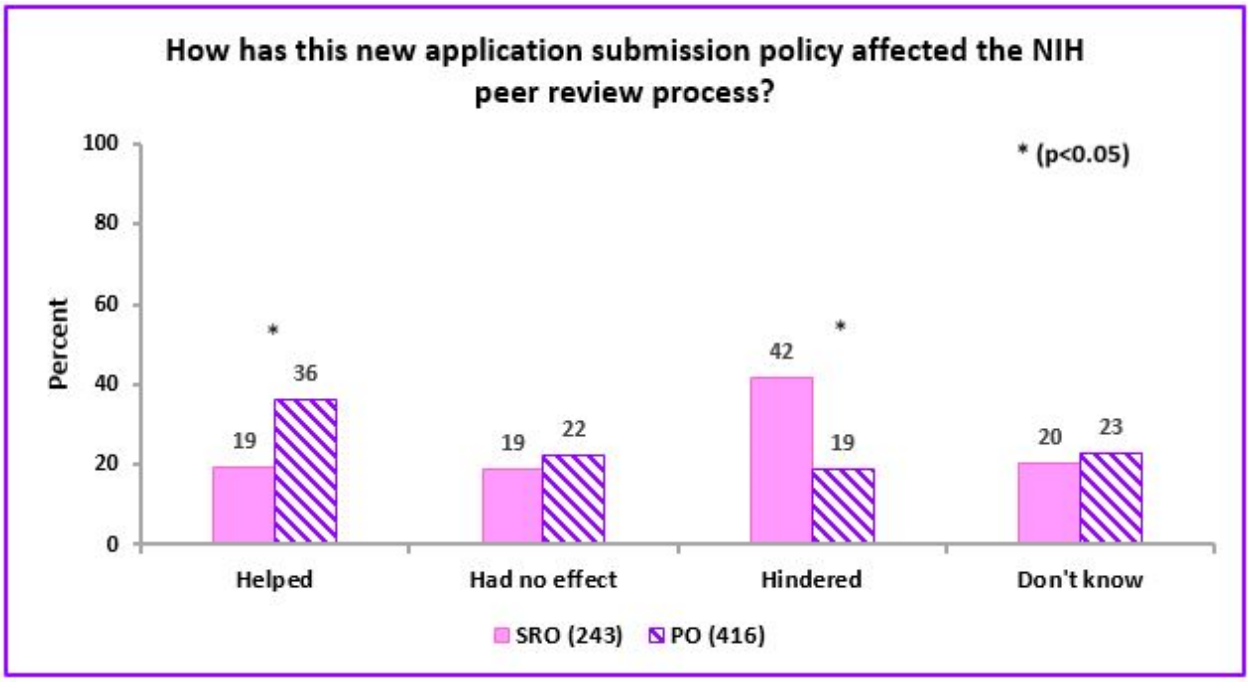

Figure 2. SRO and PO responses about how the new resubmission policy affected the NIH peer review process. SROs responded more often than POs that the new resubmission policy hindered the NIH peer review process whereas POs responded more often that the new resubmission policy helped the NIH peer review process.

Advisory Council

Overall, advisory council members expressed similar sentiments toward the new resubmission policy as applicants and reviewers, with more than a third (37%) indicating that the new policy helped the review process and 9% expressing that the new policy hindered the NIH peer review process.

Advisory council members who entered open-ended comments provided similar reasons for how the new resubmission policy has helped or hindered the NIH peer review process as the other survey respondents. The predominant reason stated for how the new policy helped peer review was that it provided additional opportunities for funding consideration of meritorious applications and the most common theme among comments describing how the new policy hindered the peer review process was that it increased review burden.

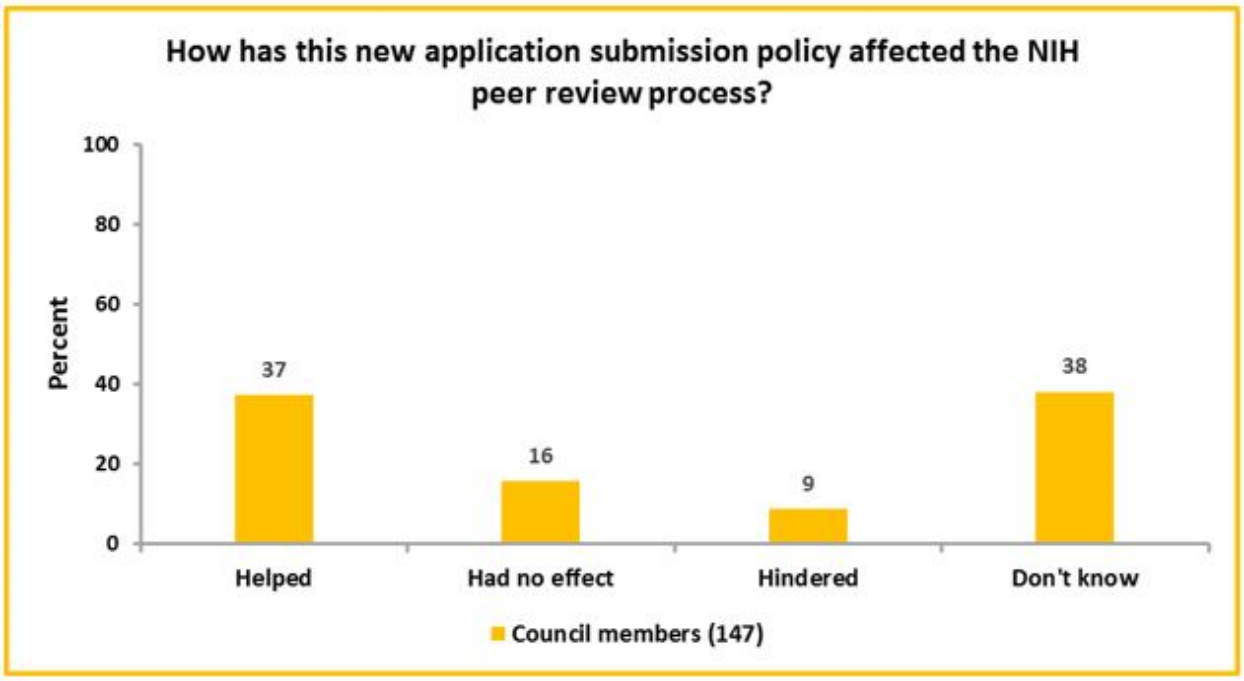

Figure 3. Advisory council responses pertaining to how the new resubmission policy affected the NIH peer review process were split. Over a third of respondents responded that the new submission policy helped the NIH peer review process, and another third responded that they did not know how it affected the peer review process.

Please describe briefly how the new resubmission policy has HELPED NIH's peer review process.	Applicant (761)	Reviewer (608)	SRO (40)	PO (137)	Council (44)
Allows applications that respond to multiple rounds of feedback from reviewers	19%	26%	8%	15%	18%
Additional opportunities for strong applications especially in times of budget constraints	52%	48%	38%	47%	61%
Corrects problems with previous policy; obviates need for gaming of system to make old applications look new	21%	20%	28%	25%	18%
Removes pressure on reviewers to consider that the review may be the last chance for an application	1%	7%	23%	9%	0%
Helpful for New or Early Stage Investigators	6%	5%	3%	9%	9%
Please describe briefly how the new resubmission policy has HINDERED NIH's peer review process.	**Applicant (209)**	**Reviewer (264)**	**SRO (97)**	**PO (79)**	**Council (13)**
Increased applications and/or review burden, decreasing overall quality of submissions/review	63%	67%	87%	72%	62%
Did not correct problems with previous policy change; Preferred A2/A3 policy	17%	18%	4%	5%	23%
Reviewers not aware of previous review comments or must disregard them; reduced opportunity for revision	10%	19%	10%	13%	15%

Table 1. Results from a qualitative analysis of open-ended comments about how the new resubmission policy helps or hinders NIH's peer review process. For respondents who rated the resubmission policy as helping the review process, the most prevalent reason given was that the new submission policy provides additional opportunities to strong applications, especially in times of budget constraints. Most respondents who rated the policy as hindering peer review commented that the new submission policy increased review burden due to the increased number of applications submitted.

Discussion

The results presented here suggest that the new application submission policy announced in 2014 allayed concerns from some stakeholder groups about the former single resubmission policy introduced in 2009. Applicants, reviewers, POs, and advisory council members responded more often that the new submission policy helped, rather than hindered, the NIH peer review process. However, SROs responded most often that the new submission policy hindered the peer review process, reflecting concerns among SROs that the new policy increased the number of applications and/or increased review burden. Other respondent groups voiced similar concerns, although to a lesser extent.

Respondents' concerns about increased peer review burden are corroborated by application submissions in FYs 2015 – 16. NIH reviewed more applications in the first full fiscal year (FY 2015) following implementation of the new submission policy than during each of FYs 2011 - 14. The number of peer reviewed applications increased by over 7,000 applications (10%) in FY 2015, and again by over 1,500 applications (2%) in FY 2016.

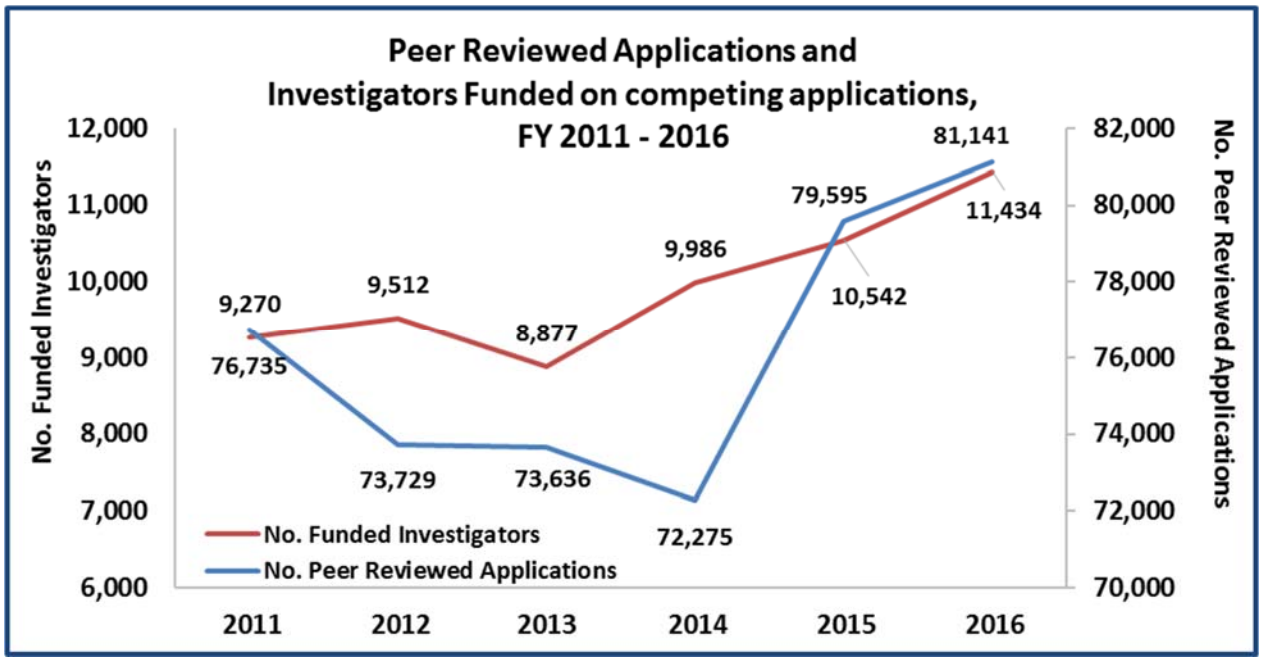

Figure 4. The number of funded investigators began to increase in FY 2014, whereas the number of applications peer reviewed by NIH was steady from FY 2011 to 2014, then increased in 2015 and 2016.

Among the respondent groups, applicants most often rated the new submission policy favorably (40%). These results may reflect the common perception expressed in open-ended comments that the new policy affords additional opportunities for meritorious applications to be considered for funding. Whether the policy ultimately affects the number of funded investigators remains to be seen; however, the number of funded investigators increased by 12% in 2014, 6% in FY 2015, and 8% in 2016. Thus, the trend toward increasing numbers of funded investigators began in 2014, and is not directly related to the numbers of applications peer reviewed. Thus, the numbers of funded investigators and resubmission applications may be only indirectly related.