**Attachment 1. Form for Peer Review Evaluation – Qualitative Questions for Reviewers**

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The public reporting burden of this collection of information is estimated to average 15 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. An agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a currently valid OMB control number. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to - CDC/ATSDR Reports Clearance Officer; 1600 Clifton Road NE, MS D-74, Atlanta, Georgia 30333 ATTN: PRA (0920-1050)

*Introduction*

The Centers for Disease Control and Prevention’s National Center for Injury Prevention and Control (NCIPC) Extramural Research Program Office (ERPO) is the focal point for the development, peer review, and post award management of extramural research awards for NCIPC, the CDC National Center for Environmental Health, and the Agency for Toxic Substances and Disease Registry. At CDC/ATSDR, extramural research applications typically undergo a sequential, 2-level peer review process. The first level or primary peer review is to evaluate the scientific and technical merit of research applications submitted in response to a Funding Opportunity Announcement. Primary peer review is a key step in assuring that CDC/ATSDR research grant applications receive a fair, unbiased review by experts with relevant knowledge. The second level or secondary peer review looks at the mission relevance and programmatic balance of the Center’s research portfolio in advancing CDC/ATSDR’s research agenda. The NCIPC ERPO needs your assistance in evaluating your participation in the primary peer review process for this fiscal year. As a reviewer, we value your opinion to assist us in making future improvements to the process.

*Survey*

Please complete the survey below, with respect to serving as a reviewer in the peer review process.

1. What was the format of the peer review meeting that you participated in?
2. In person
3. Teleconference

To what extent do you agree or disagree with the following statements:

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| 1. Preparation for the Peer Review Meeting | | | | | |
|  | **Strongly agree** | **Agree** | **Neither agree or disagree** | **Disagree** | **Strongly disagree** |
| 1. The materials for the review meeting (guidance and instruction, access to applications, etc.) were sent in a timely manner. |  |  |  |  |  |
| 1. The technical assistance provided by NCIPC ERPO staff was useful (e.g. teleconference training for reviewers, one-on-one consultation with staff, etc.). |  |  |  |  |  |
| 1. The instructions regarding the review process were clearly explained. |  |  |  |  |  |
| 1. Overall, I felt prepared to conduct my review and critique of the applications. |  |  |  |  |  |
| 1. Science Quality of the Peer Review Meeting | | | | | |
|  | **Strongly agree** | **Agree** | **Neither agree or disagree** | **Disagree** | **Strongly disagree** |
| 1. Panel members assigned to the applications were knowledgeable of the content area under review in the applications. |  |  |  |  |  |
| 1. The time allowed for discussion and deliberation on the scientific merit of each application was adequate. |  |  |  |  |  |
| 1. The deliberation of the panel resulted in a quality and robust discussion of the scientific merit of each application. |  |  |  |  |  |
| 1. The panel meeting was managed effectively for a fair and unbiased review of each application. |  |  |  |  |  |

Please rate each of the following aspects of the organization and satisfaction of the peer review meeting:

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| 1. Organization of the Peer Review Meeting | | | | | |
|  | **Very satisfied** | **Satisfied** | **Neither satisfied or dissatisfied** | **Dissatisfied** | **Very dissatisfied** |
| 1. Meeting location, meeting room, accommodations, amenities, etc., for in person meetings |  |  |  |  |  |
| 1. Sound quality and ease of use for teleconferences |  |  |  |  |  |
| 1. Meeting duration |  |  |  |  |  |
| 1. Scheduling logistics |  |  |  |  |  |
| 1. Travel process and scheduling (if applicable) |  |  |  |  |  |
| 1. Overall organization of the peer review meeting and process. |  |  |  |  |  |

1. How likely would you be to serve as a reviewer in the future?
2. Very likely
3. Somewhat likely
4. Not likely
5. What would you change about the review process?
6. In the space below, please share any additional feedback regarding the peer review meeting.

**Thank you very much for your responses!**