

Title: 2021 Survey to Assess Meeting Format and Review Quality and Among NIH Grant Reviewers

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OMB#: 0925-0648, Exp., 05/2021

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As part of our continuous evaluation efforts, we would like to hear your opinions of your recent review meeting. Your identity will be kept private and only aggregate responses will be used in our reports.

1. Please select how much you agree or disagree with the following statements.

	Strongly agree	Agree	Somewhat agree	Neutral	Somewhat disagree	Disagree	Strongly disagree
The panel was able to prioritize applications according to their impact and scientific merit.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
The scientific discussion help the panel evaluate the applications being reviewed.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

2. Is this your first time participating in a review meeting for NIH (not including service as a mail reviewer)?

- ☐ No
☐ Yes
☐ Don't know

3. For the following items, please select how your virtual review meeting **compared** to your normal face-to-face meetings.

	Much better	Slightly better	About the same	Slightly worse	Much worse	Don't know/Not applicable
Overall quality of review	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Productivity of the discussions	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Level of reviewer engagement	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Meeting management	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

4. Please select how your virtual review meeting **compared** to your normal face-to-face meetings.

	Much more	Slightly more	About the same	Slightly less	Much less	Don't know/Not applicable
I contributed to the discussion.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I felt confident voicing my opinions.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I felt others were receptive and responsive to my feedback.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I was able to clearly communicate my opinions.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I felt comfortable voting outside the range.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
My attention span at the meeting lasted.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

5. Did you experience any technical difficulties with your virtual review meeting (e.g. audio, visual, connecting, etc.)?

- ☐ Yes
☐ No
☐ Don't know

6. Assuming no or minimal health risks from COVID-19, would you be more likely to participate in a review meeting if it was held face-to-face or over video/Zoom?

- ☐ Face-to-face
☐ Video/Zoom
☐ No preference

7. Approximately how many face-to-face review meetings have you participated in for NIH?

- ☐ 0
☐ 1
☐ 2-5
☐ 6-15
☐ 16+

8. In which U.S. timezone do you live?

- ☐ Eastern Time (ET)
☐ Central Time (CT)
☐ Mountain Time (MT)