

DEPARTMENT OF HEALTH AND HUMAN SERVICES  
PUBLIC HEALTH SERVICE  
CENTERS FOR DISEASE CONTROL AND PREVENTION (CDC)  
NATIONAL CENTER FOR INJURY PREVENTION AND CONTROL  
INITIAL REVIEW GROUP  
SUMMARY OF MINUTES  
April 18-20, 2005

**I. CALL TO ORDER - PLENARY SESSION (OPEN TO THE PUBLIC)**

The, Chairperson, NCIPC Initial Review Group (IRG). Richard Mullins, M.D., Professor of Surgery, Department of Surgery and Chief, Trauma and Critical Care Section, Oregon Health and Science University, Portland, Oregon, called the meeting of the NCIPC IRG to order at 6:30 p.m. on Monday, April 18, 2005, at the Hilton Hotel, Atlanta, Georgia.

A. Attendance

IRG members present\*

Dr. Richard Mullins, Chair  
Dr. Michael Bowling  
Dr. Randal Ching  
Dr. Ann Coker (by phone)  
Dr. Carolyn Diguseppi  
Dr. Miguel Faria  
Dr. Jonathan Howland  
Dr. David Hoyt (by phone)  
Dr. Ronald Maio (by phone)  
Dr. James Malec  
Ms. Corrine Peek-Asa  
Dr. Michael Roberts (by phone)  
Dr. Gary Smith  
Dr. King Yang (by phone)  
Dr. Kathleen Zavela (by phone)  
Dr. Victoria Holt (by phone)

IRG members absent

Dr. John Fairbanks  
Dr. Carl Granger  
Dr. Keith Kaufman  
Dr. Victoria Philips  
Dr. Elizabeth Vera

\*See Attachment A for titles, affiliations, and terms of office of NCIPC IRG members present during the meeting.

Consultants to IRGRC

Almerigi, Jason  
Arbogast, Kristy  
Armour, Jody David \*\*  
Atnafou, Rebeka  
Bach, Joel  
Bingham, Raymond \*\*  
Blasier, Robert \*\*  
Bosworth, Kris \*\*  
Bowen, Natasha \*\*  
Brasel, Karen  
Brown, Gregory  
Casteel, Carri  
Chaffin, Mark  
Chapman, Mimi  
Chen, Wei  
Ching, Randal \*\*  
Chou, Li-Shan  
Coben, Jeff \*\*  
Cohen, Robert  
Coker, Ann  
Coleman, Loren  
Comstock, Dawn  
Cook, Sarah  
Curnan, Susan  
Dankwort, Juergen  
Decker, Michelle  
Degutis, Linda \*\*  
Dennerlein, Jack  
Diamond, Pamela  
Diguseppi, Carolyn  
Durant, Robert  
Dutton, Mary  
Eby, David \*\*  
Edlavitch, Stanley  
Ehrensaft, Miriam  
Elliott, Katherine  
Fabio, Anthony  
Fairbank, John  
Faria, Miguel  
Fincham, Francis D.  
Findley, Patricia \*\*

Fopiano, Joy \*\*  
Francescutti, Louis  
Fromm, Suzette  
Funk, Jeanne  
Gabriel, David  
Gerson, Lowell \*\*  
Goodwin DePerzcal, Maria  
Hadley, Susan  
Hamberger, Kevin  
Hashima, Patricia  
Haskett, Mary  
Hawkins, Darnell  
Henry, David \*\*  
Horodyski, Marybeth  
Houry, Debra  
Hoyt, Dan  
Hughes, Della  
Johnson, Rhonda  
Johnson, Sylvia \*\*  
Jones, Chester  
Kantor, Glenda  
Kaufman, Kenton  
Kent, Richard  
Kerk, Carter  
Keisling, Gary  
Kelder, Steven  
Kress, Tyler  
Langhinrichsen-Rohling,  
Jennifer  
Laplace, Michelle  
Lau, Ian  
Layne, Larry \*\*  
LeGrande, David \*\*  
Lichter, Erika  
Linares, Lourdes  
Loftin, Colin  
Lorber, Frederic  
Luedtke, Glenn Howard \*\*  
Lynch, James  
Macy, Rebecca  
McKay, Mary  
Mello, Michael \*\*

Meyer, Aleta \*\*  
Michelson, James  
Miner, Michael  
Moracco, Kathryn \*\*  
Orcutt, Holly  
Orliss, Michael  
Orsay, Elizabeth  
Oshana, Domarina  
Peddle, Nancy  
Post, Lori  
Quaday, Sher  
Quick, Lucinda  
Rhodes, Nancy  
Rice, Thomas  
Ringwalt, Christopher  
Rodgers, Phillip Lee  
Rothman, Emily  
Scaffa, Marjorie  
Schnitzer, Patricia  
Schultheis, Maria  
Schumacher, Julie  
Schwebel, David  
Sell, Timothy  
Serina, Elaine  
Shader, Michael  
Shaffer, Barbara \*\*  
Sherer, Mark  
Smith, Emilie \*\*  
Sommers, Marilyn \*\*  
Songer, Thomas  
Street, Amy  
Swanik, Charles  
Taylor, Sandra E.  
Vogel, Juliet  
Waldo, Michael  
Washington, Gregory  
Weisleder, Pedro  
Weiss, Steven  
Wilson-Simmons, Renee  
Wintersteen, Matthew  
Yu, Bing  
Yung, Betty

\*Mail-in reviewers

\*\*Review conducted by conference call

B. Staff and Guests

In addition to IRG members and consultants, those present at the meeting also included CDC staff and other attendees (see Attachment B).

C. Open Session

The IRG met in a session that was open to the public to consider several agenda items (see Attachment C).

Dr. Mullins opened the meeting by welcoming IRG members and ad hoc reviewers and thanked all participants for their continued assistance with the peer review activities of NCIPC. He also commended and thanked each member of the support and program staff for their efficient management of the complicated logistics and arrangements for the meeting.

**PROGRAMMATIC PRESENTATION:** Dr. Arias, Acting Director, NCIPC welcomed and thanked everyone for their assistance with the review process. She provided an overview of NCIPC, whose mission is to work to reduce morbidity, disability, mortality, and costs associated with injury. Of the 10 leading causes of death in all age groups in 2001, Unintentional Injury (101,637) ranked fifth after Heart Disease (700,142), Malignant Neoplasms (553,768), Cerebrovascular Disease (163,538), and Chronic Respiratory Disease (123,013). The cost of injury is indicated in the following table:

	Percent Reporting Injury	Injury Expenditures (Billions)	Percent Expenditures from Injuries
<b>TOTAL</b>	16.3%	\$117.2	10.3%
<b>GENDER</b>			
<b>MALES</b>	17.3%	\$59.8	12.5%
<b>FEMALES</b>	15.4%	\$57.4	9.2%

The NCIPC budget has increased from approximately \$140 million in fiscal year (FY) 2001 to \$148 million in FY 2003. The budget was \$153,591 million in FY 2004 and is estimated to be \$153,879 million in FY 2005. In FY 2004, 87% of the budget was used to support extramural research and 13% intramural research. The 87% or \$127.1 million of extramural funding went to the following recipients.

RECIPIENTS	DOLLARS (millions)	PERCENTAGE
Universities	\$40.1	31.6%
Health Departments	\$56.7	44.7%
Medical Centers/Hospitals	\$3.2	2.5%
Community-Based Organizations	\$7.9	6.2%

National/International Organizations	\$5.0	4.0%
Interagency Agreements	\$4.8	3.8%
Others	\$9.2	7.3%

In FY 2003, the distribution of extramural research dollars by mechanism was \$41.2 million or 32% of the extramural budget.

MECHANISM	DOLLARS (millions)	PERCENTAGE
R01's	\$15.5	37.5%
Research Centers	\$12.1	29.4%
Research Contracts	\$ 3.1	7.6%
Research Cooperative Agreements	\$10.5	25.6%

For more information about developments at the NCIPC use the website: [www.cdc.gov/ncipc](http://www.cdc.gov/ncipc).

**CERTIFICATES OF APPRECIATION:** Dr. Arias and Dr. Mullins distributed Certificates of Appreciation to the following IRG members whose terms of appointment have ended. Recipients recognized and thanked were: Dr. Faria, Dr. Hoyt, Dr. Granger, and Dr. Yang.

**NCIPC EXTRAMURAL RESEARCH PROGRAM:** Dr. Rick Waxweiler, Associate Director for Extramural Research, thanked all present for their time and invaluable assistance with the peer review process. Dr. Waxweiler defined extramural research as public assistance provided to the injury prevention and control community to conduct research activities. The NCIPC uses three funding mechanisms: grants, cooperative agreements and contracts. Below is a table which highlights the major differences amongst the three mechanisms.

MECHANISM	NCIPC ROLE
Grant	Patron (assistance, encouragement)
Cooperative Agreement	Partner (assistance but substantial program involvement)
Contract	Purchaser (procurement)

In terms of the Injury Research Agenda for Grant Awards in FY 2002/2003, they were made in the following highest priority areas: Cross Cutting; Home & Community; Sports, Recreation & Exercise; Transportation; Intimate Partner Violence, Sexual Violence, Child Maltreatment; Suicide; Youth Violence; and Acute Care, Disability, Rehabilitation. For FY 2004, the topics of the Grant Program Announcements fell within similar highest priority areas.

In terms of the FY 2004 Program Announcement Requirements for Injury Control Research Centers (ICRC), there are 6 applications under consideration. Awards will be funded at \$905,000 per year. Research is 25% - 75% of the funding and includes research projects > \$25,000/year. Also, at least 80% of research funding must align with the Injury Research Agenda.

In terms of new funding for extramural research grants in FY 2003, the stats are:

<u>Program Area</u>	<u>#Applicants</u>	<u>#Grants Awarded</u>	<u>\$'s Awarded</u>
Acute Care	22	5	\$1,479,353
Biomechanics	24	1	\$ 240,770
Violence	31	4	\$1,145,813
Dissemination	10	2	\$ 447,076
Dissertation	3	2	\$ 30,435
New Investigator	20	6	\$ 594,626
Injury Center	1	1	\$ 899,614
<b>Total</b>	<b>111</b>	<b>21</b>	<b>\$4,837,687</b>

In terms of applications received and funding expectations for FY 2004, the stats are:

<b>PROGRAM AREA</b>	<b>#APPLICATIONS</b>	<b>\$\$ AVAILABLE</b>	<b>#AWARDS</b>
Acute Care	10	496,460	2
Violence	84	2,200,000	7-8
New Investigator	24	397,640	4
Biomechanics	19	994,100	3-4
Dissertation	4	59,646	3
Unintentional Injuries	28	795,280	3
Home Visitation	9	497,050	2
Youth Violence	15	994,100	2
Child Maltreatment	3	497,050	1
Media Violence	4	596,460	2
Efficacy of Fathers	6	497,050	1
Traumatic Brain Injury	11	298,230	2
Injury Control Centers	7	5,400,946	6
<b>TOTAL</b>	<b>224</b>	<b>\$13,824,012</b>	<b>38-40</b>

Note: There were 307 applications received of which 224 (73%) were found to be responsive.

For further NCIPC funding information go to: [www.cdc.gov/ncipc](http://www.cdc.gov/ncipc) and register under "what's new."

**OVERVIEW OF THE PEER REVIEW PROCESS:** Gwen Cattledge, Ph.D., M.S.E.H., Scientific Review Administrator and Deputy Associate Director for Science expressed her appreciation and that of NCIPC to all participants for taking time from their busy schedules to participate in the review of grant applications received in response to the program announcements. She presented details of the peer review policies and procedures to be followed by the various panels identified below beginning with a definition of the process. Peer review is a process that includes independent assessment of the scientific merit of research. Applications are reviewed by peers who are scientists with knowledge and expertise of the subject matter. Further, the process provides a written assessment of the application which is free of any real or

perceived conflict of interests through the summary statement.

The peer review process is a two-step process; (a) Initial (*primary or scientific*) Review at which the application is evaluated for its scientific merit and a summary statement and priority score are produced; (b) Secondary Review at which the application is evaluated for its programmatic priorities and recommendations for funding in rank order or a justification for “skipping” a project are produced. More specifically, in the two-tiered peer review process, at the first or primary level, applications are assessed on *quality* and *productivity* based on the following criteria: Significance, Approach, Innovation, Environment, and Research capacity. At the secondary level, applications are assessed on *relevance* and *priority* in relation to research/programmatic agendas

The basics of the peer review process are:

- Program Announcement
- Use of Standard Scoring System
- Use of the PHS 398 Application Form
- Identify Conflict of Interests among Reviewers
- Assure Confidentiality
- Review applications individually for scientific merit
- Generate a summary statement

Ground rules to follow (*Peer Review Process*)

1. Review all applications for scientific merit.
2. Judge each application on its own merit.
3. Do not interject any outside knowledge into the process. Applications can only be evaluated on the written information provided.
4. Make sure the written critique reflects the priority score assigned to the application.
5. Do not discuss any information or research ideas that have been presented at the meeting outside of the panel room. Keep all information pertaining to the review strictly confidential, and leave all grant review material in the room when you leave to return home.
6. Sign the attendance sheet each day the panel meets.
7. Conflict of interest forms must be signed before meeting can convene.
8. Turn all cell phones and pagers to silent/vibrate.

**Streamline Review Process (Day 1):** This is a process by which non-competitive applications are initially screened by review panels and not subjected to a complete review. A major benefit is that more meeting time is available for discussion of competitive applications. The distinguishing features of the two types are:

- Competitive: The proposal has sufficient scientific merit to be considered for funding.
- Non-competitive: The proposal has sufficient scientific and technical weaknesses and concerns to preclude consideration for funding.

Reviewers were asked to grade applications and separate them into three groups based on an estimation of overall merit:

- A= competitive (priority score 100-249)
- B= possibly competitive (priority score 250-299)
- C= non-competitive (priority score 300-500)

All applications are subject to a brief review led by the Panel Chair. In this process, the primary reviewer makes a brief presentation (~2 minutes) and indicates a letter grade. The secondary reviewer adds any different but brief comments (~1 minute) and indicates a letter grade. The reader provides any additional relevant information and indicates a letter grade. A motion is made and a vote taken. Those applications judged to be non-competitive are not considered further. Reviewers are asked to insert a NR on the scoring sheet and turn it in along with written comments/disks to the staff. Applications considered competitive will proceed on to a full review. Any member has the privilege of asking that an application be fully reviewed; such requests will be honored. Additionally, reviewers can decide the next day to reverse their decision and conduct a full review on a previously streamlined application. An application is not to be streamlined if a reviewer has to be recused from the discussion. Reviewers will conduct the streamline process this evening to be followed by a comprehensive review of competitive applications beginning tomorrow morning.

**Full Review Process (DAY 2):** Applications that are considered competitive are discussed individually. Reviewers should begin their presentation by providing a tentative priority score. The primary reviewer is asked to briefly describe the specific aims and summarize the strengths and weaknesses of the application. This should take approximately 10 minutes. The secondary reviewer should provide about a 5-minute summation of any additional, significant issues not previously mentioned. The reader or tertiary reviewer is asked to add any new and relevant factors not already covered. Following these presentations, there will be an interactive panel discussion of the application for approximately 5 to 10 minutes. The Chair will then call for a motion, a second, discussion of the motion and vote. If an application is recommended, the budget is discussed. Budget modifications should be specific to enable recommended amounts to be more easily negotiated by staff. The next step is the assignment of a numerical priority score to each recommended application. As a final step, the panel is asked to agree on an appropriate code for the application. The codes relate to Human Subjects, Inclusion of Gender, Inclusion of Minorities, Inclusion of Children, and Animal Welfare. The coding system is explained in the Reviewer's Handbook. If an application is not recommended, codes and budget are not discussed. Reviewers fill in scoring sheet by inserting NR. Recommendations and priority scores should be based on merit and not be influenced by the availability of funds. Reviewers are asked to insert an R and a priority score or an NR on the scoring sheet and hand it in along with written comments/disks to the staff.

**Recommendations:** Three recommendations available for this review were provided:

- Recommended for further consideration: Application satisfies published review criteria.
- Not recommended for further consideration: Application does not satisfy the review criteria.
- Application should be streamlined.

**Priority Scores:**

Adjectival Descriptor	Numeric Range
Outstanding	100-150
Excellent	150-200
Good	200-300
Acceptable	300-400
Marginal	400-500

Applications that score 3.6 to 5.0 do not go to Secondary Review.

**Minority Opinions:** If two or more panel members dissent from a majority motion, a minority report is required and is included in the summary statement.

**Summary Statements:** Following the review meeting, a summary statement is prepared for each application reviewed, as well as those that are streamlined. It includes the comments prepared by reviewers and any significant new issues raised during panel discussions. Summary statements are sent to applicants after the review process is complete. Reviewers are asked to carefully review their prepared comments, and modify them if needed as a result of the panel discussion, to ensure that accurate information is included in the summary statements. It is important that critical comments are specific to assist the applicant and that the written critique matches the priority score. If there are significant human subjects issues, it is important that that they are clearly spelled out in the section related to human subjects issues. If a proposal is in the fundable range, it will not be funded until human subjects issues are addressed and resolved. If serious dangers are noted in the human subjects component, reviewers can reject the proposal.

**Applications Received:** In response to the following Program Announcements (PA), XXX responsive applications were received. These were clustered by subject matter into nine groupings for purposes of review and a panel assigned to each. The violence-related applications (PA 05012) were divided into 2 panels because of the large numbers of applications received. Only 5 or 6 applications were received in response to PA's 05024 and 05029; a different teleconference panel reviewed the applications in the case of each of those two PA's.

- Program Announcement 05012: Grants for Violence related Injury Prevention: Suicidal Behavior, Child Maltreatment, Intimate Partner Violence, and Sexual Violence

- Program Announcement 05021: Grants for New Investigator Training Awards for Unintentional Injury, Violence-Related Injury, Biomechanics, and Acute Care, Disability and Rehabilitation-Related Research
- Program Announcement 05022: Grants to Prevent Unintentional injuries
- Program Announcement 05023: Grants for Traumatic Injury Biomechanics
- Program Announcement 05025: Grants for Dissertation Awards for Doctoral Candidates for Violence-Related and Unintentional Injury Prevention Research in Minority Communities
- Program Announcement 05017: Cooperative Agreement to Prevent Intimate Partner Violence
- Program Announcement 05018: Cooperative Agreement for National Academic Centers of Excellence
- Program Announcement 05024: Cooperative Agreement for Alcohol Impaired Driving
- Program Announcement 05029: Cooperative Agreement for Dissemination Research on Fall Prevention

**Attendance:** Reviewers were reminded to make sure to sign the attendance sheet each day of the meeting in order to receive an honorarium for each day attended.

**Confidentiality:** The importance of maintaining the confidentiality of all facets of the review process was stressed. This includes pre-meeting materials sent to reviewers and all meeting discussions and recommendations. It was pointed out that breaches of confidentiality can cause numerous problems that impact adversely on the credibility of the peer review process and invade the privacy of reviewer participants. The following points were highlighted:

- A statement of confidentiality
- Reviewer cooperation was requested in adhering to the following:
  - No discussion of review proceedings outside the panel room
  - No discussion with colleagues upon return home
  - No discussion with grant applicants after the meeting
  - Applications and other review-related documents are to be left in the meeting rooms at the conclusion of the review or shredded at home.

**Conflict-of-Interest (COI):** Reviewers were reminded of the need to absent (recuse) themselves from the meeting when applications from their own institutions are being discussed or if there are other apparent or real conflicts, such as applications from collaborators and recent former students. In cases of doubt, clarification should be obtained from the staff. The following additional points were highlighted:

- Each reviewer must sign the COI form in the meeting room before the review begins.
- Real or perceived COIs may arise during the meeting.
- Reviewers must recuse themselves from the meeting room during discussion of any application where a real or apparent COI exists.

REVIEW PANEL	CHAIRPERSON	DESIGNATED FEDERAL OFFICIAL	SUBJECT MATTER EXPERT NCIPC	RECORDER
Violence (Panel A)	Dr. Kathy Zavela	Ms. Laurie Beck	N/A	Dr. Dennis Cain
Violence (Panel B)	Dr. Jonathan Howland	Ms. Sandy Coulberson	N/A	Ms. Cindy Kilgore
New Investigators	Dr. James Malec	Ms. Dionne White	N/A	Dr. Morris Faiman
Biomechanics	Dr. Gary Smith	Mr. Jason Rothbard	N/A	Dr. Sam Schwartz
Unintentional Injuries	Dr. Randy Ching	Ms. Angela Banks	N/A	Ms. Linda Wade
Dissertation Research	Dr. Victoria Phillips	Mr. Eben Ingram	N/A	Ms. Iris Lansing
Intimate Partner Violence	Dr. Richard Mullins	Ms. Cindy Whitt	Candace Jackson/Jennifer Wyatt	Ms. Suzanne McLean
<b>TELECONFERENCE REVIEWS</b>				
Alcohol Impaired Driving	Dr. Jonathan Howland	Ms. Jocelyn Wheaton	Caryll Reinhart/David Wallace	Dr. Sam Schwartz
Fall Prevention	Dr. Victoria Holt/Dr. Miguel Faria	Ms. Marci Feldman	Sandy Coulberson/Judy Stevens	Dr. Sam Schwartz

**Other:** Ms. Angela Fazah reminded reviewers to complete reimbursement forms to cover expenses and honoraria. Reviewers were reminded to sign the conflict of interest/confidentiality statement. At the evening's triage/streamlining session, the first order of business for each panel is to separate the competitive applications from the non-competitive ones. The full review of competitive applications begins at 8 a.m. the following morning.

**Comments from the Public:** The Chair solicited comments from members of the public. Hearing none, the session adjourned at 7:05 p.m.

## II. CALL TO ORDER - (CLOSED TO THE PUBLIC)

The closed session of the IRG meeting was called to order by the Chair, Dr. Mullins at 3:55 p.m. on Wednesday, April 20, 2005 at the Hilton Hotel in Atlanta.

**REVIEW OF ICRC APPLICATION:** One application was received in response to Program Announcement 04011: Grants for Injury Control Research Centers (ICRCs). The application was site visited by an IRG site visit team made up of IRG members and ad hoc reviewers.

**ICRC APPLICATION**

University of Iowa

**SITE VISIT DATE**

March 28 and 29, 2005

The report of the site visit team, along with the recommendations, was reviewed by the full committee (members present and connected via teleconference) and an appropriate recommendation adopted by formal motion and majority vote.

**PANEL REPORTS:** The Committee considered the reports presented by the Chairs of the nine panels. The reports were unanimously accepted by formal motion and vote. The following table presents the data on the applications evaluated at this meeting of the IRG.

PEER REVIEW PANEL	NUMBER FULL REVIEWS	NUMBER STREAMLINED
Violence Panel A (PA05012)	19	9
Violence Panel B (PA05012)	17	12
New Investigators (PA05021)	20	20
Biomechanics (PA05023)	14	9
Unintentional Injuries (PA05022)	11	10
Dissertations (PA05025)	8	1
Intimate Partner Vio. (PA05017)	8	7
Alcohol Imp. Driv. (PA05024)	3	2
Fall Prevention (PA05029)	3	3
<b>TOTALS</b>	<b>103</b>	<b>73</b>

During the meeting, IRG members recused themselves from the discussion of any application in which they or their institution had a vested interest in accordance with Department of Health and Human Services conflict of interest policies related to the research grant programs.

There being no further business to conduct, the meeting was adjourned at 4:45 p.m.

**I certify that, to the best of my knowledge, the foregoing summary is accurate and complete.**

\_\_\_\_\_  
Richard J. Mullins, M.D.

\_\_\_\_\_  
Date