Responding to Grant Reviews

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Overview

- What is a Summary Statement?
  - What are the components?
- 16 Steps to responding
  - Interpreting the statement
  - Developing a response
  - Writing the 1 page response
  - An example

On First Receiving Your Score

- What does “unscored” mean?
- If it is scored, what is a “fundable” score?
- Either way:
  - Do not celebrate (yet)
  - Do not consider another career
  - Do not contact your project officer (yet)
  - Wait for your summary statement

What is a "Summary Statement?" (and how is it created?)

- Overall Impact Score
- Resume and Summary of Discussion (if scored)
- Description (provided by the applicant)
- Individual Critiques by each reviewer with a summary of overall impact and scores with bulleted strengths and weaknesses (minor, moderate and major) for:
    - Significance
    - Investigator(s)
    - Innovation
    - Approach
    - Environment

On Receiving and First Reading the Summary Statement:

1) Read it, then put it away for a few days……

2) Do not take it personally. This is about the" best science. It's NOT about you!

3) Share it with your mentor or an experienced colleague to get an independent (and more objective) read

4) Call with the Program Officer

(for scored and discussed applications only)

Once you have received your summary statement (for discussed applications only)…..

What were the principal concerns in the discussion of the grant?. This will help you to consider:

a) The meaning of the score- In addition to considering the percentile rank, was there enthusiasm for revising and resubmitting? Are you close, or is a major overhaul indicated.

b) If a revision is in order (which is most of the time), what should you emphasize or make sure to address in EXTENSIVE detail in your response?

5) Make an itemized and uncensored list of criticisms from each reviewer. **Check if for accuracy. Make sure that it is comprehensive.**

6) Prioritize: Once you have a list of the concerns, re-read the grant. Begin to identify those areas that are:

major effort : entirely revising the study question, redesigning the study, need for additional pilot data, or worse yet, figuring out how to address what might be a "fatal flaw" (work on this first!)

low effort : clarifications that can be done by simply revising text, adding a consultant or additional expertise, revising the list of measures, or redoing the statistical analysis plan

7) Group the comments into themes.

Similar concerns may be voiced by different reviewers. Also, some concerns may be overlapping and addressed by a common remedy.

8) Talk to mentors/experts/colleagues.

Senior mentors and colleagues have seen many, many reviews (including unfavorable ones), and also have acted as reviewers. They will be helpful in considering the gravity of the critiques and if there is a message "between the lines".

9) Consider altering aspects of the design—

is there something more elegant, rigorous, generalizable, etc.? Is it feasible?

10) Resist new <u>unrequested</u> changes

"If it isn't broken, don't fix it" . Changing something that was not identified as a problem is usually a mistake (unless it truly is a weakness that you missed first time around, and absolutely need to fix). This risks opening up a new opportunity for the reviewer to find a flaw that was not in the initial submission.

11) Do you need additional pilot data?

How will you get it? If possible it is always good practice to continue collecting pilot data while the grant is being reviewed, allowing for additional data to be provided in the revision. This is generally applauded by reviewers.

12) Start writing your reply to the reviewers early-

It will force you to see the work you need to do.

13) Take the perspective that the reviewer is always right

…..and should be acknowledged, thanked, and yes…. praised. In writing the response, recognize that the reviewer has generally spent hours reading and thinking about your grant and is essentially donating time to advance the quality of science in the field.

14) Select your battles VERY carefully.

In general, it is wise to use the review as a "blue print" for revision. If you do not agree with the critique and want to argue for not making a requested revision, make sure that you have extensive justification. Check with senior researchers and colleagues to make sure that you want to take this on.

14) Respond in detail, point by point to the itemized list of concerns.

This is your opportunity to show the reviewers how thoughtful, careful, and responsive you are.

Respond in detail to ALL critiques.

Then, make it easy for the reviewer to find your revision in the grant. This should be done by identifying the page number in your detailed response AND by changing text font (e.g., bolding) or by providing a vertical line in the margin that identifies those lines that have been revised.

15) Thank the reviewer for the "detailed review and constructive comments"

.....and any ways that the critique will result in improving the study. Remember, if the reviewer simply did not understand what you were trying to say, it is <u>your</u> problem....not the reviewer's.

16) Take the perspective of the reviewer:

When you have written and re-written the response and revised the grant, read the reviews one more time before submitting your revised application to make sure that you have responded to the spirit, intent, and specifics of the critique

We thank the reviewers for a very thoughtful and helpful review resulting in an improved application. We are encouraged that the committee concluded that only "minor concerns" were identified that "could be very easily addressed" and that "this was seen as a potentially very important project with a high probability of success." Reviewer concerns are summarized below in *italics*. Revisions in the text are also designated by *italics*.

1) Differentiation from prior work and study timing. *"The additional research is justified (yet)…There will still be lessons learned from both the observational implementation of state dissemination and the current trial that could be fed into a dissemination trial."* The "current trial" is now complete and lessons learned from this RCT *are* being applied to the proposed study. The "statewide observational study" is in its last year and is in a single mental health system in an ethnically homogenous state. This application asks an *entirely different question*: In comparing two implementation processes (virtual learning collaboratives vs. training & technical assistance), which is most effective in implementing an evidence-based health promotion intervention in diverse mental health systems across the nation? We further clarify these points in section C.3 under "Prior Work".

2) Choice of Primary Outcomes. *"Somewhat limited primary outcomes that focus on successful engagement in the model, rather than on client primary outcomes or fidelity of implementation."* We have revised the application to explicitly reflect our multi-level outcome design by adding a third aim. We now have three aims, and three primary hypotheses and three primary outcomes: service-level (participation), implementation-level (organizational change), and participant-level (weight loss), and corresponding analytic plans (see Specific Aims, C.4, and C.10). In addition to assessing organizational change specific to adopting health promotion (H2), we also assess *program fidelity* (E3), as recommended. Finally we will explore the contribution of hypothesized factors in the mechanism of action of learning collaboratives (e.g. sharing of outcomes; leadership participation; use of quality improvement cycles) with respect to primary outcomes (see C.4, C.10.).

3) Adequacy of Statistical Power. "Sample size is calculated based on participant level data, as the primary outcome is participation/adequate exposure to the intervention. Given that the learning collaborative intervention being tested here is implemented at the site level, this should be considered in the power analysis as well." There are 2 levels at which we estimated power. At the participant level the power analysis now takes into account clustering effect at the site level. At the site level we have conducted a power analysis demonstrating we will have adequate power to detect a large effect size with respect to differences in program participation, which we believe to be necessary to justify the greater efforts and resources needed to conduct a learning collaborative compared to targeted technical assistance. (see revisions in C.10 under Aim 2).

4) Participant Data Limitations. "*Collecting patient level outcomes data in both arms of the study can be done at reasonable cost."* Participant outcome data will be collected in both arms, but will not include pursuing unengaged participants. The study aims and budget of this proposal are focused on implementation. We have conducted 2 prior RCTs obtaining full participant data proving effectiveness (see C.2).
5) Feasibility and Cost Data for the Intervention. "*There is no discussion of the costs associated with implementing either for exploration in this study or if it has been addressed in prior studies.*" We regret that a manuscript had not yet been published that now documents estimates of costs of providing In SHAPE. We also clarify our intent to measure costs associated with implementation (see C.10 under "Time and Costs").
6) Supervision. *"Lack of clarity over how the supervision for mentors will be handled".* We regret that our description of the supervision process was unclear. We have now clarified the supervision process under a new subheading and description: "*Health Mentor Training and Supervision"* (see Section C.5.a).
7) Choice of Study Design. *"Unclear why virtual learning collaborative is being tested against instruction alone. If evidence already suggests that learning collaborative is better than instruction alone, then the IA arm does not provide novel information." "RCT design while useful may not be ideal for the goals of the study."* We respectfully disagree that there is evidence that "a learning collaborative is better than instruction alone". As discussed in the proposal, we were unable to find *any* studies comparing the effectiveness of a learning collaborative to an alternative active implementation strategy. We have enhanced our justification for the selection of an RCT design (see Section D. Primary Study Limitations).
8) Comparison Intervention Model. "*It is not clear if the 'training only' model is in fact the standard model being evaluated".* We thank the reviewer for this critique and now more clearly characterize the comparison condition as training followed by time-limited technical assistance. Accordingly we have renamed the comparison condition to reflect this typical approach as "Training and Technical Assistance" or "T+TA" (see C.5.a).
9) Oversampling to Increase Minority Representation. *"Minority representation for the overall sample and areas around programs is modest; there is no particular plan to oversample sites with more minority representation."* In the revised proposal we now describe an explicit plan to oversample sites with greater representation of ethnic and racial minorities (see C.7. Eligibility).
We are grateful for the attention to detail by the reviewers that has resulted in major enhancements.

AFTER YOU SUMBIT IT…….

Take a break,
Get a life,
And prepare for your revision*

*Or decide if you will use some aspect of the grant in a new application.

QUESTIONS?

DISCUSSON