

Report on Research Compliance Volume 15, Number 7. July 31, 2018 Next Gen Working Group Pondering Priority For New Category of 'At Risk' Investigators

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A panel studying ways NIH can support less-established researchers is floating the idea of expanding one group of researchers and creating a new category of "at-risk" investigators who would both be prioritized for agency funding. An at-risk investigator is defined as someone who "has not received funding on any major award/source of independent NIH funding in fiscal year 2018 or whose NIH funding will end in fiscal year 2018."

These are among the preliminary recommendations in the interim report the Next Generation Researchers Initiative Working Group presented to the Advisory Committee to the Director (ACD) of NIH at last month's meeting. Final recommendations are expected to be presented at the ACD's next meeting in December.

During the ACD meeting, held June 14–15, Michael Lauer, NIH's deputy director for extramural research, also described efforts NIH has undertaken in advance of the final working group report, including effectively utilizing a version of "at risk" investigators for the purposes of priority funding. Lauer said NIH also has refrained from using the early established investigator (EEI) "flag" as part of applications and reviews of potential awards. Other discussions at the ACD meeting addressed sexual harassment and a controversial alcohol study.

The working group is seeking to aid NIH following the failure of two previous related initiatives. In May 2017, NIH rolled out a "grant support index" that would have imposed a cap of three Ro1—basic research grants—on investigators who exceeded a certain GSI. The goal was to shift funds to less established and presumably younger, investigators (RRC 6/17, p. 1). While the GSI had some support, particularly among younger investigators, NIH backed off the proposal due to criticism from a variety of sources including members of its own advisory committees who said they had not been consulted (RRC 7/17, p. 1).

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