

## Report on Research Compliance Volume 15, Number 1. January 31, 2018 Chastened NIH Hears from Next-Gen Working Group, Vows to Revise Focus, 'Rebuild Trust'

By Theresa Defino

The working group impaneled by NIH to rescue the agency's troubled efforts to help young and mid-career investigators likely won't be presenting recommendations until the end of this year. But members of the panel supporting the Next Generation Researchers Initiative (NGRI) are well on their way to building a consensus on the directions NIH should pursue after its disastrous rollout and quick recession of the previous program, called the grant support index (GSI).

And one thing working group members "hate" is the investigator designations NIH has established—early stage investigators (ESI) and the newly minted category of early established investigators (EEI) designations. These currently provide the foundation for how NIH is seeking to prioritize funding to certain investigators it considers "at risk."

The GSI was designed as a method to shift funds away from established and older principal investigators (PIs) by imposing a cap of three Ro1—basic research grants—on investigators who exceeded a certain GSI. The freed-up funds were then to be channeled to other, presumably younger, investigators (*RRC 6/17*, *p.* 1).

When announced in May, the GSI attracted both fierce supporters and opponents who agreed, whatever their positions, that NIH didn't seem to have fleshed out the concept. NIH was also assailed by its own external advisory groups. It pulled back from the GSI and established the working group, which has been meeting in private (*RRC 10/17*, *p. 4*). Through co-chair Larry Tabak, the group made its first public report to the Advisory Committee to the Director (ACD), which met Dec. 14-15 at NIH.

When members initially came together, they agreed to "shift away from relitigating specific approaches outlined by the GSI" to focus more on their charge, said Tabak, NIH's principal deputy director, during his Dec. 15 presentation.

"NIH recognizes, and we've said this formally to the [working group] and now I am saying it to all of you, that the rollout of the GSI policy was less than optimal," Tabak told the ACD members. "We have to own that. I think part of the reason we had so many emails per second was because of communications that could have been better. And I certainly take responsibility for that."

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