

# PEER REVIEW SCORING

- The AHA continually enhances and refines its peer review process to identify and fund the most meritorious research projects that support our mission: To be a relentless force for a world of longer, healthier lives.
- The AHA uses a 1-9 score scale to assess all proposals across the research portfolio. To judge the merit of an application, reviewers also comment on the criteria listed with the award program description.
- The AHA's move to the 1-9 scoring system was designed to encourage reliable scoring of applications. Peer reviewers who assign high ratings (scores of 1-2) to all applications diminish their ability to communicate the scientific impact of an individual application.
- All reviewers are expected to consider the rating guidance herein to improve the reliability of their scores, as well as their ability to communicate the scientific impact of the applications reviewed.

# SCORE SCALE

Score	Evaluation of Program Criteria Descriptions
1	Exceptional, <b>no weaknesses</b> on program criteria
2	Outstanding, <b>minor weaknesses</b> on program criteria
3	Excellent, <b>more strengths than weaknesses</b> on program criteria
4	Very Good, <b>moderate weaknesses</b> on program criteria
5	Good, <b>strengths and weaknesses are equivalent</b> on program criteria
6	Satisfactory, <b>weaknesses are slightly greater than strengths</b> on program criteria
7	Fair, <b>weaknesses are significantly greater than strengths</b> on program criteria
8	Marginal, <b>too many weaknesses</b> on program criteria
9	Poor, <b>little to no strengths</b> on program criteria

## Descriptors:

**Exceptional:** Brilliant – Remarkable - Unique

**Outstanding:** Superior – Advanced - Overarching

**Excellent:** First-rate – Admirable - Superb

**Very Good:** Valuable – Respectable - Beneficial

**Good:** Decent – Standard – Acceptable

**Satisfactory:** Suitable – Adequate – Status quo

**Fair:** Objective – Rational - Neutral

**Marginal:** Subpar – Minimal - Limited

**Poor:** Inadequate – Deficient – Insubstantial

# SCORING GUIDANCE

- To avoid clustering of scores, the FULL range of scores must be used – your critique and scores should reflect your preliminary calculated score.
- Applications should be evaluated independently of other assigned applications. In other words, do not compare applications &/or applicants to one another.
- **Best approach is to review each grant assuming each criterion will fall start at 5 “in the middle”, then adjust your scores for each criterion accordingly based on strengths and weaknesses discovered.**
- **AHA, like NIH, expects that scores of 1 or 9 will be used less frequently than the other scores. A score of 5 correlates to a good, medium-impact proposal and should be considered an average score.**
- Very few proposals discussed should ultimately end up with an overall score in the 1-2 range.

# SCORING GUIDANCE

- Reviewers whose evaluations or opinions of a proposal fall outside the range of those presented by the assigned reviewers and discussant(s) should ensure that their opinions are brought to the attention of the entire committee
- Reviewers should feel free to assign the score that they believe best represents the impact of the proposal, and not feel constrained to limit their scores to the upper half of the score range if they do not feel such a score is warranted
- Unconscious bias can significantly impact peer review scoring – please consider [our training](#) when evaluating proposals

# CREATING QUALITY CRITIQUES

## Do's

- ❑ Use the Critique Guide provided by AHA Peer Review Managers (also located in ProposalCentral)
- ❑ Address each peer review criterion with concise statements regarding the strengths and weaknesses
  - ❖ Ensure applicants can clearly understand the strengths and weaknesses you determined in the proposal.
- ❑ Contact Chairs or AHA staff for clarity
- ❑ Include basic comments with suggestions for improvement on the criteria that you scored unfavorably. In this competitive funding environment including singular strength comments are not the most informational source for these applicants.
  - ❖ **If you have scored an application in the 2 – 9 range, your critique must include sufficient statements to demonstrate the minor or major weaknesses/areas of improvement for the applicant.**

# CREATING QUALITY CRITIQUES

## Don'ts

- Use insulting or offensive language that detracts from the level of professionalism expected from fellow researchers (i.e. attributing an applicant's poor grammar to their race or using insulting colloquiums to describe specific areas of the proposal)
- Mention policy concerns (i.e. eligibility, overlapping award, etc.)
- Policy concerns are non-scorable factors
- For the non-scientist summary – avoid the statement “it aligns with the AHA Mission”. **You must explain if it was written so a lay person can understand it.**