PROGRAM CONTACT: (Privileged Communication)   *Release Date:*   **02/23/2022**
LYNDON JOSEPH   *Revised Date:*
301-496-6926
josephlj@mail.nih.gov

Principal Investigator	*Application Number:* **1 K76 AG074920-01A1** *Formerly:* **1K76AG074920-01**

VINCENZO, JENNIFER LYNN

Applicant Organization: UNIV OF ARKANSAS FOR MED SCIS

Review Group:	**ZAG1 ZIJ-6 (M1)** **National Institute on Aging Special Emphasis Panel** **2022 Beeson Review**		
Meeting Date:	**02/08/2022**	*RFA/PA:*	**AG21-020**
Council:	**MAY 2022**	*PCC:*	**4AGERLJ**
Requested Start:	**07/01/2022**		

Project Title:	**Developing and testing implementation strategies to support the STEADI for falls risk management in outpatient rehabilitation**
SRG Action:	**Impact Score:13**
Next Steps:	**Visit https://grants.nih.gov/grants/next_steps.htm**
Human Subjects:	**30-Human subjects involved - Certified, no SRG concerns**
Animal Subjects:	**10-No live vertebrate animals involved for competing appl.**
Gender:	**1A-Both genders, scientifically acceptable**
Minority:	**1A-Minorities and non-minorities, scientifically acceptable**
Age:	**3A-No children included, scientifically acceptable**

Project Year	Direct Costs Requested	Estimated Total Cost
1	168,236	181,695
2	201,221	217,319
3	224,993	242,992
4	224,602	242,570
5	170,021	183,623
TOTAL	**989,073**	**1,068,199**

ADMINISTRATIVE BUDGET NOTE: The budget shown is the requested budget and has not been adjusted to reflect any recommendations made by reviewers. If an award is planned, the costs will be calculated by Institute grants management staff based on the recommendations outlined below in the COMMITTEE BUDGET RECOMMENDATIONS section.

RESUME AND SUMMARY OF DISCUSSION: This application resubmitted to the NIA in response to the RFA-AG-21-020 "Paul Beeson Emerging Leaders Career Development Award in Aging" by the University of Arkansas for Medical Sciences (UAMS), Arkansas, AR, on behalf of the Principal Investigator (PI), Dr. Jennifer Vincenzo, requests five years of support. The PI is a well-trained geriatric physical therapist and is currently an Associate Professor in the Department of Physical Therapy. She also holds a Master's degree in Public Health and PhD in Kinesiology. Dr. Vincenzo proposes to identify clinic-, provider-, and patient-level barriers to and facilitators of implementing STEADI (Stopping Elderly Accidents, Deaths, and Injuries) in rehab and develop implementation strategies to support the adoption of STEADI in rehab. The PI will also pilot test the impact of implementation strategies for STEADI in rehab on implementation outcomes and exploratory clinical outcomes. This is an excellent innovative application of high significance given the significant morbidity associated with falls in older adults. Dr. Vincenzo is an outstanding and productive investigator with 26 publications, 7 of which as first author. She has a track record of institutional funding, including KL2, and has demonstrated leadership potential at national and local level. The Career Development Plan (CDP) is well-developed and is aligned with four career objective and research trajectories. The PI will obtain training in implementation sciences, mixed methods research to integrate qualitative and quantitative data, leadership through the Tideswell program, and geriatric research. She proposes a good combination of coursework, experiential learning, one-on-one mentoring, workshops, and participation in conferences. The Research Plan (RP) is based on the PI's prior work, well-described and is supported with strong preliminary data. The proposed implementation science approach and the use of mixed methodology is well-justified. Dr. Vincenzo has been very responsive to the previous critiques, and provided clarification on publications, sample size, and qualitative methodology. The multidisciplinary mentorship team led by Dr. Curran, letters of support, environment, and institutional commitment to the candidate are also outstanding. Despite a few minor concerns, this outstanding application from a very strong candidate was supported with a high level of enthusiasm.

TRAINING IN THE RESPONSIBLE CONDUCT OF RESEARCH: Acceptable. The planned activities satisfy the requirement for training in the responsible conduct of research.

DESCRIPTION (provided by applicant): Falls among adults ≥ 65 years are a leading cause of morbidity, mortality, and high healthcare costs. Clinical guidelines indicate that all healthcare providers should conduct annual falls prevention (FP) by screening all older adults and assessing and intervening for those at risk. FP efforts using CDC's STEADI (Stopping Elderly Accidents, Deaths, and Injuries) are used in primary care, but barriers limit uptake and sustainability. Physical therapists (PTs) are trained and qualified healthcare providers who can provide FP within their scope of practice and have more one-on-one time and frequent follow-up compared to primary care, positioning them to incorporate STEADI in outpatient rehab (rehab). Yet, studies indicate PTs are not providing FP to at-risk older adults in rehab. We will examine how to best support uptake of STEADI and address this gap through the following aims: (1) Identify clinic-, provider-, and patient-level barriers to and facilitators of implementing STEADI in rehab; (2) Develop implementation strategies to support the adoption of STEADI in rehab; (3) Pilot test the impact of implementation strategies for STEADI in rehab on implementation outcomes (clinic- and provider-level) and explore clinical outcomes. We will use innovative methods, including implementation science (IS) and mixed-methods approaches (Aims 1 and 3) and a stakeholder-driven evidence-based quality improvement (EBQI) process (Aim 2). Dr. Vincenzo's background, career development plan, and mentor support make her an excellent Beeson award candidate. She is an Associate Professor of Physical Therapy and Geriatrics, and a board-certified clinical specialist in geriatric physical therapy with an MPH and PhD in exercise science. She has been a leader in aging and FP research for the past 8 years. Her career development objectives complement the proposed research aims. She will obtain training, mentorship, and skills in IS, mixed methods research (used in IS), leadership, and geriatric research. The University of Arkansas for Medical Sciences (UAMS) is an ideal environment for her career development and research. UAMS and its Translational Research Institute (TRI) supported Dr. Vincenzo's career through a KL2 award

and will continue to provide training, equipment, consultation, and mentoring. The UAMS Center for Implementation Research, led by Geoffrey Curran, PhD (primary mentor), will support her career development and mentored research in IS. Jeanne Wei, MD, PhD (advisor), UAMS Institute on Aging executive director, will support development in geriatric research. Co-mentors Jonathan Bean, MD, MPH, and Jennifer Brach, PhD, PT, are experts in geriatric rehab and existing collaborators with Dr. Vincenzo. Dr. Vincenzo will also benefit from the expertise of STRIDE (Strategies to Reduce Injuries and Develop Confidence in Elders) study director Nancy Latham, PhD, PT (advisor). The research strategy, career development objectives, and mentoring plan support Dr. Vincenzo's goals of becoming a leader in aging research and independent investigator in IS and FP.

PUBLIC HEALTH RELEVANCE: Falls among older adults are a leading cause of disability, death, and high healthcare costs. This proposal addresses the National Institute on Aging and Healthy People 2030 objectives to develop strategies to reduce falls, their consequences, and fall-related deaths by developing and testing strategies to implement the CDC-developed STEADI (Stopping Elderly Accidents, Deaths, and Injuries) for falls prevention of all older adults attending outpatient rehabilitation. Our proposed research will investigate and test how best to incorporate falls prevention into outpatient physical therapy visits that many older adults already attend and, how to best help older individuals follow the recommendations they receive about how to prevent falls.

DISCLAIMER: Please note that the following critiques were prepared by the reviewers prior to the Study Section meeting and are provided in an essentially unedited form. While there is opportunity for the reviewers to update or revise their written evaluation, based upon the group's discussion, there is no guarantee that individual critiques have been updated subsequent to the discussion at the meeting. Therefore, the critiques may not fully reflect the final opinions of the individual reviewers at the close of group discussion or the final majority opinion of the group. Thus, the Resume and Summary of Discussion is the final word on what the reviewers actually considered critical at the meeting.

CRITIQUE 1:

Candidate: 1
Career Development Plan/Career Goals/Plan to Provide Mentoring: 2
Research Plan: 2
Mentor(s), Co-Mentor(s), Consultant(s), Collaborator(s): 1
Environment, Commitment to the Candidate: 3

Overall Impact:
This application is from an outstanding candidate. The candidate has had excellent research preparation and is demonstrating success as an investigator, as evidenced by grant funding, peer reviewed publications and presentations. The candidate is uniquely qualified to conduct the proposed research. The Career Development Plan (CDP) is well-aligned with the candidate's career goals and with the planned investigation. The mentorship team is outstanding and demonstrates commitment to the candidate. The planned investigation is innovative and of high significance. The proposed methodologies are appropriate and are rigorously described. The environment will facilitate the candidate's development and the proposed research. There are minor weaknesses that do not significantly diminish enthusiasm for this application.

1. Candidate:
Strengths
- Highly qualified candidate with relevant prior research training and experience, including funded grant awards, peer reviewed publications and national presentations. She has demonstrated ability to move forward this line of research in productive ways. She has a track record of

leadership and appears to be developing on a trajectory to assume future more expansive leadership roles. She demonstrates commitment to a career as an aging-focused investigator and has the potential to make a significant positive impact through research.
- Outstanding preparation as an investigator, both during and since her doctoral program.
- Given her background in physical therapy, in conjunction with her doctoral and postdoctoral training, the candidate is uniquely qualified to address these research questions.
- Candidate is demonstrating effectiveness as an emerging leader in aging research, both locally and nationally.

Weaknesses
- None noted.

2. Career Development Plan/Career Goals & Objectives:
Strengths
- Well-conceptualized CDP that aligns well with the candidate's career objectives and the planned research trajectory. Clearly delineated goals and strategies for achieving them. Planned approach is feasible within the career development award period.

Weaknesses
- The leadership career development goal is rather non-specific. It would be helpful for the application to include more specific description of leadership goals, including desired skills as well as types of leadership roles that the candidate envisions for herself.

3. Research Plan:
Strengths
- The planned research for the Beeson award period builds well on the candidate's prior work and is a logical next step in this line of investigation. The approach is well-justified and will both advance the evidence and prepare the candidate for the next phase of research development.
- The planned implementation science approach is both well-justified and logical given the existing evidence in this area. The planned implementation science approach is highly rigorous.
- The proposed approach is innovative both in topic and in planned methodology.
- The area of investigation is of high significance given the incidence and significant morbidity associated with falls in older adults.
- The planned approach is based in well-accepted framework (CFIR) and is conceptualized via a detailed logic model.
- Rigorous and very clearly described research plan.
- Excellent application of mixed methodology approach, with a particular strength being description of how the qualitative and quantitative findings will be integrated.
- High likelihood that the findings from achieving the planned specific aims will inform design of the planned future hybrid effectiveness-implementation trial.

Weaknesses
- Successful completion of the study aims assumes that there will not be insurmountable barriers to integration of fall prevention into rehab care identified in Aim 1. Given the candidate's preliminary work in this arena, the likelihood that this will occur is low. However, this possibility should be addressed.

4. Mentor(s), Co-Mentor(s), Consultant(s), Collaborator(s):
Strengths
- Outstanding mentorship team that brings complementary expertise and experience in terms of content, methodology and success as funded investigators.
- Mentors demonstrate commitment to the candidate and the candidate's development as an investigator.
- Mentors have significant and relevant experience in mentoring career development awardees.

- Candidate has existing mentor/mentee relationships with both her primary mentor and the planned co-mentors.
- Strong letters from mentors/co-mentors demonstrating their commitment to the candidate.

Weaknesses
- None noted.

5. Environment and Institutional Commitment to the Candidate:
Strengths
- Outstanding environment with the relevant research resources to support the candidate's development as an investigator as well as the proposed investigation. The Facilities and Resources section identifies both the available resources as well as how they will specifically facilitate the proposed plan. Of particular note are the strengths in geriatrics, implementation science and translational research. The clinical settings (Rehabilitation Therapy Clinics) are also a strength as they will provide the relevant "laboratory" in which to conduct the research.
- Departmental letter does commit the requisite protected time (75%) as well as space and research assistants should the applicant be funded by the K76 mechanism. Departmental letter is highly enthusiastic about the candidate.

Weaknesses
- The Facilities and Resources section is missing a description of the applicant's home department, the Department of Physical Therapy and the Description of Institutional Environment only states that the candidate has an office, research space and administrative support from the Department of Physical Therapy. This begs the question of the extent to which the applicant's line of research is integrated with departmental priorities and resources.
- Concern that there does not appear to be departmental/institutional commitment to research time for the candidate, outside of the current KL2 or the successful funding of the K76, which leaves the impression that she will return to having a heavy teaching and administrative load if the K76 is not funded.

Study Timeline:
Strengths
- Study timeline aligns well with the research approach and the career development plan.

Weaknesses
- None noted.

Protections for Human Subjects:
Acceptable Risks and Adequate Protections.
- Thorough human subjects' protection plan for each of the 3 specific aims.

Inclusion Plans:
- Sex/Gender: Distribution justified scientifically.
- Race/Ethnicity: Distribution justified scientifically.
- Inclusion/Exclusion Based on Age: Distribution justified scientifically.
- Age distribution justified given focus on falls in older adults. Sex/gender and race/ethnicity well-justified, given the planned study design.

Resubmission:
- The applicant effectively addresses the prior reviewers' comments in the Introduction to the application and revised body of the application.

Training in the Responsible Conduct of Research:
Acceptable.
Format:

- Format, which is a combination of courses/seminars and mentored learning, is acceptable.

Subject Matter:
- Content is acceptable, addressing key topics in responsible conduct of research.

Faculty Participation:
- Mentors will be involved with ongoing instruction in responsible conduct of research.

Duration:
- Duration is acceptable, both of formal courses/seminars and of more informal learning opportunities.

Frequency:
- Frequency of coursework/seminars, refreshers and mentored learning is acceptable.

Budget and Period of Support:
Recommend as Requested.

CRITIQUE 2:

Candidate: 2
Career Development Plan/Career Goals/Plan to Provide Mentoring: 2
Research Plan: 3
Mentor(s), Co-Mentor(s), Consultant(s), Collaborator(s): 1
Environment, Commitment to the Candidate: 2

Overall Impact:
Dr. Vincenzo is an Associate Professor in the Department of Physical Therapy (PT) and Geriatrics at the University of Arkansas for Medical Sciences (UAMS). Her application and career goals focus on improving uptake and implementation of falls prevention (FP) for all older adults within the rehabilitation setting. This research seeks to enhance the use of the CDC's STEADI (Stopping Elderly Accidents, Deaths, and Injuries) by Physical Therapists. She will examine how to best support uptake of STEADI and address this gap through the following aims: (1) Identify clinic-, provider-, and patient-level barriers to and facilitators of implementing STEADI in rehab; (2) Develop implementation strategies to support the adoption of STEADI in rehab; (3) Pilot test the impact of implementation strategies for STEADI in rehab on implementation outcomes (clinic- and provider-level) and explore clinical outcomes. She will use innovative methods, including implementation science (IS) and mixed-methods approaches (Aims 1 and 3) and a stakeholder-driven evidence-based quality improvement (EBQI) process (Aim 2). This is an outstanding application, from an exceptional candidate who has great potential to influence the field of PT, falls prevention in older adults locally and nationally. This application generated enthusiastic discussion around next steps and how this FP approach may be expanded to Primary Care (to broaden pool of referred older adults to rehab) and sustainability.

1. Candidate:
Strengths
- Dr. Vincenzo is an Associate Professor of Physical Therapy and Geriatrics, and a board-certified clinical specialist in geriatric physical therapy with an MPH and PhD in exercise science.
- Candidate has been a leader in aging and FP research for the past 8 years.
- She is PI for 2 funded grants (Jr. Geriatric Faculty Development Grant, 2016-2017, and a KL2 from UAMS, 2019-2022), Co-I on 3 funded studies, and PI on 4 unfunded studies, including 2 with national task forces.
- The PI has conducted 2 studies on the CDC's STEADI falls prevention toolkit, proposed in this application.

- The PI has 26 peer-reviewed publications (7 first author, 4 second author), 5 manuscripts under review, and 47 peer reviewed conference or poster presentations, some with the Centers for Disease Control and Prevention (CDC) and National Council on Aging (NCOA).
- The PI received recognition in aging and FP on national, state, and local levels and has spoken nationally on topics regarding geriatrics, balance, FP, physical activity, and health promotion at over 34 invited speaking engagements.
- Impressive local, state, and national leadership trajectory.

Weaknesses
- Not provided.

2. Career Development Plan/Career Goals & Objectives:
Strengths
- Dr. Vincenzo's career development objectives complement the proposed research aims. She will obtain training, mentorship, and skills in implementation sciences (IS), mixed methods research (used in IS), leadership, and geriatric research.
- Detailed training plans, including involvement of each mentor and frequency of meetings. No concern about several mentors being remote. She has a track record of effectively collaborating despite the distance.
- Nicely outlined trajectory towards mentoring others towards the end of the award period.
- Goal is future R01 hybrid effectiveness-implementation type 3 cluster randomized clinical trial (RC.

Weaknesses
- Not provided.

3. Research Plan:
Strengths
- This application is very well-written. clearly defining S terms.
- Aims are logical and clearly justified to achieve the PI's goals.
- Significance and innovation are well outlined.
- Preliminary studies support current proposal.
- Figure 1 clearly outlines the Aims, integrating CFIR throughout.
- Sampling strategy is well-described.
- Excellent that patients and caregivers (at each site) will also be interviewed - how will they be selected (aside from receiving rehab at the facility)?
- Primary team and PI have experience with evidence-based QI (EBQI) and use of ERIC, for Aim 2.
- Table 4 is helpful, with concrete potential implementation strategies to support STEADI integration.
- Aim 3 is a 12-month implementation trial: IS methods are clearly written with rigorous description.

Weaknesses
- Table 1 is useful: while this application focuses on uptake of STEADI by PT, ultimately, this might be best achieved collaboratively between PCP and PT. In this way, PCP may also refer more often to PT to enhance target population for STEADI.
- Are there other clinical outcomes to consider? TUG and 30 second chair stand are listed.
- Would be helpful to outline the demographics of target population in the clinics mentioned.

4. Mentor(s), Co-Mentor(s), Consultant(s), Collaborator(s):
Strengths
- The UAMS Center for Implementation Research, led by Dr. Geoffrey Curran (primary mentor), will support her career development and mentored research in IS. Expert in IS for > 20 years, has authored some of the most cited papers in the field.

- Dr. Jeanne Wei (advisor), UAMS Institute on Aging executive director, will support development in geriatric research.
- Co-mentors, Drs. Jonathan Bean, MD and Jennifer Brach, are experts in geriatric rehab and existing collaborators with Dr. Vincenzo. Both have K24 mentoring grants.
- Dr. Vincenzo will also benefit from the expertise of STRIDE (Strategies to Reduce Injuries and Develop Confidence in Elders) study director Nancy Latham, PhD, PT (advisor).
- Dr. Selig will collaborate with Dr. Vincenzo on the analysis of quantitative data with particular emphasis on Aim 3 analyses.
- Dr. Sexton has experience with data and software development to assist with the revisions to the electronic health record and collection of clinical data for Dr. Vincenzo's project to implement falls prevention as a standard of care in outpatient rehabilitation.
- Dr. Caulley has expertise in implementing STEADI in outpatient rehab settings.

Weaknesses
- None noted.

5. Environment and Institutional Commitment to the Candidate:
Strengths
- The UAMS is an ideal environment for her career development and research.
- UAMS and its Translational Research Institute (TRI) supported Dr. Vincenzo's career through a KL2 award and will continue to provide training, equipment, consultation, and mentoring.

Weaknesses
- Not provided.

Protections for Human Subjects:
Acceptable Risks and Adequate Protections.

Inclusion Plans:
- Sex/Gender: Distribution not justified scientifically.
- Race/Ethnicity: Distribution not justified scientifically.
- Inclusion/Exclusion Based on Age: Distribution justified scientifically.
- Would be helpful to include gender, race, ethnicity distribution that the clinics serve (where implementation of STEADI will occur).

Resubmission:
- Introduction and application were responsive to prior critiques.

Training in the Responsible Conduct of Research:
Acceptable.
Format:
- Acceptable.
Subject Matter:
- Acceptable.
Faculty Participation:
- Acceptable.
Duration:
- Acceptable.
Frequency:
- Acceptable.

Budget and Period of Support:
Recommend as Requested.
- Other Support not included in original submission.

CRITIQUE 3:

Candidate: 1
Career Development Plan/Career Goals/Plan to Provide Mentoring: 1
Research Plan: 2
Mentor(s), Co-Mentor(s), Consultant(s), Collaborator(s): 1
Environment, Commitment to the Candidate: 1

Overall Impact:
In this resubmitted application, Dr. Vincenzo addressed the limiting critiques of her prior application. Most notably, as a candidate, she addressed the concern regarding her experience as a PI by providing evidence of prior pilot grant funding and her KL2 award. In the Career Development Plan (CDP), she has listed five Objectives: 1) Obtain training in implementation science (IS) to translate research into feasible, acceptable, and impactful programs; 2) Obtain skills in MMR to integrate qualitative and quantitative data in IS; 3) Advance research leadership skills; 4) Expand knowledge in geriatric research and outlined her plan to take courses from other sources, outside her home institution. Many of the prior concerns in the research plan (RP) are now addressed and include: (1) a new publication and preliminary study regarding the acceptability of falls prevention in outpatient rehabilitation settings; (2) clarification of the STEADI intervention in outpatient rehabilitation settings; (3) sample size justifications for all aims; (4) alignment of study goals with implementation outcomes (no comparison group); (5) qualitative research methodology now included; and (6) exclusion of older adults with dementia with the inclusion of caregivers in the qualitative aims. The application also includes mentors' biosketches in the application, along with reference letters/letters of support from mentors and advisors. The applicant also has 3 manuscripts with the mentorship team.

1. Candidate:
Strengths
- PhD in kinesiology and an Associate Professor within Department of Physical Therapy at University of Arkansas.
- Institutional KL2 award that serves as the foundation for this application.
- National awards and leadership in the APTA.
- Long-standing research focus in falls prevention efforts.
- 26 peer-reviewed manuscripts (7 first author and 4 second author).

Weaknesses
- None noted.

2. Career Development Plan/Career Goals & Objectives:
Strengths
- Clinical and research training enhance her background in PT and geriatrics.
- Methodology objectives appropriate for research plan and specific aims.
- Further leadership skill acquisition through the Tideswell program.

Weaknesses
- More emphasis may be needed in clinical trial design and implementation science to inform next steps with hybrid Type 3 cluster RCT.

3. Research Plan:
Strengths
- Preliminary data enhanced to support prior concerns of delivering falls prevention in outpatient rehab settings.
- Use of IS frameworks to develop and deliver the STEADI content in outpatient rehab settings.

- Improved sample size calculations for all aims, along with appropriate rationale.
- Qualitative research methodology now clearly outlines for Aims.

Weaknesses
- Provider engagement and adoption of STEADI in outpatient rehab may be limited during study period and not adopted longer term (minor concern that could be addressed in the next study).

4. Mentor(s), Co-Mentor(s), Consultant(s), Collaborator(s):
Strengths
- Diverse expertise on the transdisciplinary team of mentors and advisors.
- Strong primary mentor and mentorship team.
- Recent publications with mentorship team.

Weaknesses
- None noted.

5. Environment and Institutional Commitment to the Candidate:
Strengths
- Evidence of supportive institutional support.

Weaknesses
- None noted.

Protections for Human Subjects:
Acceptable Risks and Adequate Protections.

Inclusion Plans:
- Sex/Gender: Distribution justified scientifically.
- Race/Ethnicity: Distribution justified scientifically.
- Inclusion/Exclusion Based on Age: Distribution justified scientifically.

Resubmission:
- Comments adequately addresses, especially in research plan and approach.

Training in the Responsible Conduct of Research:
Acceptable.
Format:
- Didactic and in person training.

Subject Matter:
- Appropriate.

Faculty Participation:
- Appropriate.

Duration:
- 8 hours of training.

Frequency:
- Mandatory training for federal training grants.

Resource Sharing Plans:
Acceptable.

Budget and Period of Support:
Recommend as Requested.

THE FOLLOWING SECTIONS WERE PREPARED BY THE SCIENTIFIC REVIEW OFFICER TO SUMMARIZE THE OUTCOME OF DISCUSSIONS OF THE REVIEW COMMITTEE, OR REVIEWERS' WRITTEN CRITIQUES, ON THE FOLLOWING ISSUES:

PROTECTION OF HUMAN SUBJECTS: ACCEPTABLE. Potential risks and protection against risks, informed consent, etc. are adequately addressed.

INCLUSION OF WOMEN PLAN: ACCEPTABLE. It is anticipated that approximately 65% of participants involved in the proposed studies will be women.

INCLUSION OF MINORITIES PLAN: ACCEPTABLE. All possible racial and ethnic groups will be included in the proposed studies, including White, African American, Asian, and Hispanic individuals.

INCLUSION ACROSS THE LIFESPAN PLAN: ACCEPTABLE. Adult participants will be included in this study.

COMMITTEE BUDGET RECOMMENDATIONS: The budget was recommended as requested

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Footnotes for 1 K76 AG074920-01A1; PI Name: Vincenzo, Jennifer Lynn

NIH has modified its policy regarding the receipt of resubmissions (amended applications).See Guide Notice NOT-OD-18-197 at https://grants.nih.gov/grants/guide/notice-files/NOT-OD-18-197.html. The impact/priority score is calculated after discussion of an application by averaging the overall scores (1-9) given by all voting reviewers on the committee and multiplying by 10. The criterion scores are submitted prior to the meeting by the individual reviewers assigned to an application, and are not discussed specifically at the review meeting or calculated into the overall impact score. Some applications also receive a percentile ranking. For details on the review process, see http://grants.nih.gov/grants/peer_review_process.htm#scoring.

MEETING ROSTER

The roster for this review meeting is displayed as an aggregated roster that includes reviewers from multiple AG Special Emphasis Panels of the NIA SEP Aggregate roster for May 2022 Council for the 2022/05 council round.
This roster for AG is available [here](#).