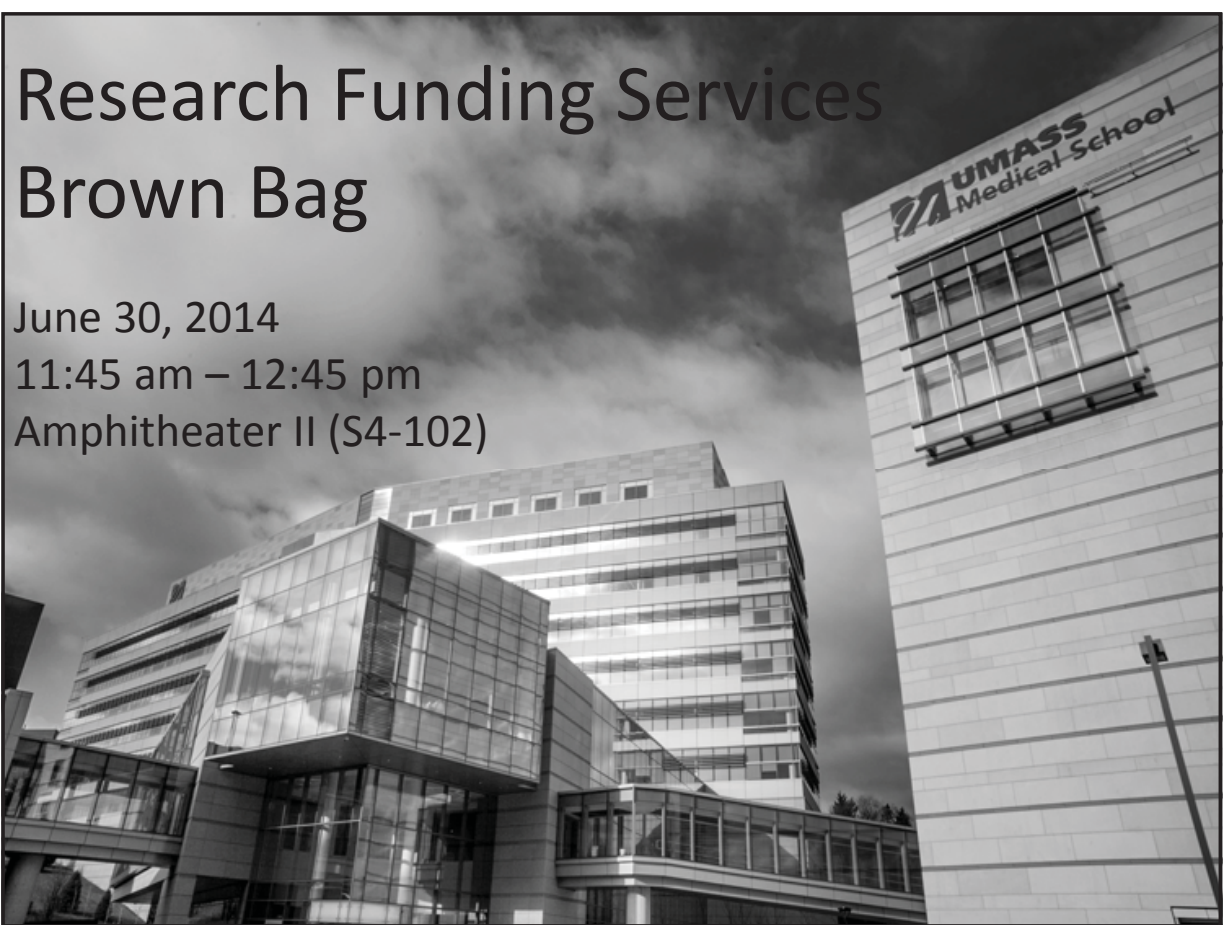


# Research Funding Services Brown Bag

June 30, 2014

11:45 am – 12:45 pm

Amphitheater II (S4-102)



## Agenda



- NIH New Biosketch format piloted
- NIH RPPR Update
- eRA Commons User ID for Graduate and Undergraduate Roles
- NIH Public Access Policy
- Uniform Guidance – Subrecipient F&A
- Updated UMMS F&A Rate Agreement
- FY 2015 Fringe Benefit Rates
- NIH IACUC Congruency Review
- Cayuse – Multi-Project Applications (ASSIST) Update
- Cayuse – Attachment Title Naming Issues; Multi-Project Applications
- SUMMIT – Pre-Award Dashboard
- SDFI Form Update
- New Sponsor Request Form (for PeopleSoft)
- Research Administration Training Program Upcoming Courses
- Proposal & Progress Report Statistics

- The NIH has initiated a second round of pilots to assess a planned modification of the NIH Biosketch.
- The new Biosketch format being piloted will extend the page limit from four to five pages and will allow researchers to describe up to five of their most significant contributions to science along with the historical background that framed their research in Section C.
- Currently, the use of the enhanced biosketch format is restricted to those RFAs included in the pilot.
- RFS is tracking RFAs and will notify respondents when the new format is applicable.
- The NIH believes that the modified biosketch will offer reviewers a better picture of a researcher's accomplishments and capabilities, and will help illuminate the downstream effects of scientific discovery.

<http://grants.nih.gov/grants/guide/notice-files/NOT-OD-14-091.html>

- NIH will require the Research Performance Progress Report (RPPR) for all type 5 non-SNAP progress reports submitted on or after October 17, 2014.
- NIH requires use of the RPPR module to submit progress reports for Streamlined Non-competing Award Process (SNAP), fellowship, and multi-year funded awards.
- NIH has piloted the use of the RPPR for non-snap type 5 awards since November 2013, and is now expanding the requirement to use the RPPR to all type 5 non-SNAP awards.
- Please contact RFS if you would like to schedule RPPR training for your unit.

<http://grants.nih.gov/grants/guide/notice-files/NOT-OD-14-092.html>

# NIH RPPR Implementation Timeline

SNAP and F RPPR - Pilot	⇒	April 2012
SNAP and F RPPR - Required	⇒	July 2013
Non-SNAP RPPR - Pilot	⇒	November 2013
Multi-Year Funded RPPR - Required	⇒	February 2014 (anticipated)
Non-SNAP RPPR - Required	⇒	October 2014
Fed-wide Final RPPR	⇒	TBD
SBIR/STTR Fast-Track Phase I RPPR (T-4)	⇒	TBD

## NOT-OD-13-097: eRA Commons User IDs for Individuals in Graduate and Undergraduate Project Roles

- As of October 18, 2013 a warning is generated when an RPPR is submitted that lists individuals in a graduate or undergraduate student role who have not established an eRA Commons ID.
- Beginning in October 2014, RPPRs lacking the eRA Commons ID for Graduate and Undergraduate Students will receive an error and the RPPR will not be accepted by the NIH without this information.

# NIH Public Access Policy

- NIH's Public Access Policy ensures that the public has access to peer-reviewed publications arising from NIH funded research. The full text of these publications is to be made freely available in the PubMed Central database in a manner consistent with copyright law.
- Publications reported in progress reports as arising from the award must be presented as the PDF publications report generated by My NCBI. This My NCBI report automatically indicates public access policy compliance.
- Guidance on how to run the My NCBI report is available at: [http://www.nlm.nih.gov/pubs/techbull/nd12/nd12\\_myncbi\\_pdf.html](http://www.nlm.nih.gov/pubs/techbull/nd12/nd12_myncbi_pdf.html)

## Uniform Guidance – Subrecipient F&A

- Awaiting agencies implementation of the OMB Uniform Guidance that consolidates previously applicable circulars (A-21, A-110, A-133)
- Implementation date is 12/26/2014
- For proposals that UMMS is currently submitting:
  - UMMS will continue to honor pass-through entities F&A rates negotiated by the subrecipient with the federal government, or
  - Allow the subrecipient to use a 10% Modified Total Direct Cost (MTDC) F&A rate in the absence of a federally negotiated rate for the subrecipient

## Updated F&A Rate Agreement on RFS Website

- Updated UMMS F&A Rate Agreement has a new effective date of 05/21/14
- No changes to existing F&A rates
- Only changes are to the fringe add-on rates for FY15
- RFS has updated Cayuse to reflect the new effective date of the rate agreement
- Please provide this updated agreement to collaborators requesting our F&A information

**To:** Department Heads, Department Administrators, Faculty and Staff  
(for internal distribution only)

**From:** Nancy E. Vasil, Associate Vice Chancellor for A&F

**Subject:** FY 2015 Fringe Benefit Rates

**Date:** June 30, 2014

Based on the Commonwealth's approval from the federal government for a fringe benefit rate of 29.16% for FY 2015, UMMS will adjust its fringe rates as follows effective July 1, 2014:

### Charge for School Employees Charged to Sponsored Grants & Contracts

Base rate (including health, terminal leave & retirement)	27.27%
Add-on for Dental Insurance (H&W)	0.95%
Add-on for Medicare & Unemployment Insurance	1.59%
Add-on for Workers Compensation	0.24%
Total	<u>30.05%</u>

### Charge for School Employees Not Charged to Sponsored Grants & Contracts

Base rate (including health, terminal leave & retirement)	28.00%
Add-on for Dental Insurance (H&W)	0.95%
Add-on for Medicare & Unemployment Insurance	1.59%
Add-on for Workers Compensation	0.24%
Total	<u>30.78%</u>

Please note that these rates apply to School employees only. Non-benefited and per diem employees will be assessed a fringe rate of 1.83% which represents Medicare, unemployment insurance and workers comp.

Please contact me with any questions.

## FY 2015 Fringe Benefit Rates

- Per NOT-OD-10-027, applicant organizations have the responsibility to ensure that the protocol approved by the IACUC is congruent with the proposed use of animals described in the Research Plan.
- Guidance on the Office of Research website explains the UMMS congruency procedure and how we will comply with this requirement.

<http://www.umassmed.edu/research/Protocol-Proposal-Congruency/>

## Cayuse 424 Multi-Project Applications (ASSIST Alternative)

- Cayuse – ASSIST Update
  - UMMS has successfully submitted multi-project applications using Cayuse and recommends using the Cayuse solution instead of ASSIST moving forward.
- Benefits of using Cayuse:
  - Cayuse will pre-populate data fields based on our Institutional info
  - Personnel and Institutional info for other collaborators can be pulled from existing data
  - Auto calculation of fringe/indirects
  - Ability to include indirects on the first \$25K of subcontracts
  - Provides a dynamic view of the cumulative budget (all components) prior to submission



## Cayuse 424 – Attachment Title Issues for Multi-Project Applications



- The total character limit for attachment titles in Multi-Project Applications is 50 characters. However, that includes all spaces, the four digit file extension (.pdf, etc.), as well as the 10 digit number appended by Cayuse 424. The result is that there is a 36 character limit for all attachment titles.
- Example:
- Original title:
  - “Summary Protection of Human Subjects P01 Stevens” = 48 characters
- Becomes:
  - “Summary Protection of Human Subjects P01 Stevens1018569706.pdf” = 62 characters
- Cayuse 424 does not currently validate for this character limit. The next release of their software will have validations in place to provide guidance on this issue. In the interim, it is vital that this character limit be observed – it will cause an error in the eRA Commons.

## SUMMIT Pre-Award Dashboard



- Pre-Award Dashboard – SUMMIT
  - For non-Cayuse proposals previously submitted that appear as “In Process” without a Date Submitted, use the RFS Submitted Proposal Form link to update the status.
  - Please note that this is not an electronic process. The form must be completed and submitted to RFS for updating.
- Job aid is available on Financial Services website at:
  - [http://inside.umassmed.edu/uploadedFiles/Pre%20Award%20Dashboard\\_040314.docx](http://inside.umassmed.edu/uploadedFiles/Pre%20Award%20Dashboard_040314.docx)

# SDFI Form Update



## University of Massachusetts Medical School Summary Disclosure of Financial Interests

UMMS Proposal ID# or  
UMMS Sponsor Award ID:

Completion of this form is **mandatory** for all proposals. This information is required to comply with the University of Massachusetts Medical School Policy for Promoting Objectivity in Biomedical Research and applicable federal and state laws and regulations regarding timely and proper disclosure of financial interests.

Principal Investigator Name: Last, First, MI

Principal Investigator Title:

Department:

Sponsor:

Project Start Date:

Project End Date:

Project Title:

A. The Project Principal Investigator is responsible for determining who meets the definition of an "Investigator" on their project and certifies that this form provides:

1. a complete disclosure of all Investigators responsible for the design, conduct, or reporting of activities associated with this project, and
2. an accurate report of the current state of the named Investigator's disclosure in the institution's electronic reporting system.

Principal Investigator agrees to update the UMMS COI system annually during the period of the award and within 30 days of discovering or acquiring a new Significant Financial Interest.

- Please use UMMS ID, not prime sponsor's ID on this form (updated form available on RFS website).
- Please do not pre-fill Investigator responses (Y/N) on the SDFI form (RFS cannot accept).

## New Sponsor Request Form

Please use this form to request the addition of a new sponsor to the PeopleSoft Grants Sponsor table. Please note that all fields must be completed for the form to be processed. The completed form should be submitted via email to Research Funding Services at [research.funding@umassmed.edu](mailto:research.funding@umassmed.edu). The completed form should also be included with the proposal routing packet.

Date:

### Requestor Information

First Name:

Last Name:

Phone:

E-Mail:

### New Sponsor Information

Full Legal Name:

Legal Address (no PO Box):

City:

State:

Zip Code:

Country:

Sponsor website:

Sponsor Contact Name:

Sponsor Contact Phone:

### Business Type (select one)

- ☐ Business/For Profit  
☐ Foundation/Charitable Trust  
☐ MA Local Government  
☐ MA State Government  
☐ Other University  
☐ Non-Profit/Business Related  
☐ Other Government Agency

### Other information (select all applicable)

- ☐ Federal sponsor  
☐ Foreign sponsor  
☐ Sponsor funds human subjects research

- Form should be used to request the addition of a new sponsor to PeopleSoft.
- Submit form via email to [research.funding@umassmed.edu](mailto:research.funding@umassmed.edu) and include a copy in the proposal routing packet.
- Form is available on RFS forms website.



# Research Administration Training Program

## Upcoming Courses - 2014



- **Admin. Management of Clinical Research (Elective)**  
09/24/14 9:00 – 11:00 Location – HR Training Room, South Street
- **Pre-Award II (Core)**  
10/08/14 8:30 – 12:30 Location – HR Training Room, South Street
- **Regulatory Compliance (Elective)**  
10/23/14 9:00 – 11:00 Location – University Campus, S1-608
- **Post-Award II (Core)**  
11/06/14 8:30 – 12:30 Location – HR Training Room, South Street

To register go to:

<http://i.umassmed.edu/Inside/registration/Register.aspx?pid=77>

# PROPOSAL SUBMISSIONS TO RFS

## May 2013 – May 2014



	May 2013	June 2013	July 2013	August 2013	September 2013	October 2013	November 2013	December 2013	January 2014	February 2014	March 2014	April 2014	May 2014
Count	82	99	100	70	91	110	86	74	147	93	71	70	110
On Time	56%	48%	44%	34%	54%	42%	37%	47%	44%	43%	44%	39%	43%
Late	39%	47%	48%	57%	42%	53%	58%	49%	51%	53%	56%	55%	49%
After the fact	5%	4%	8%	6%	4%	5%	5%	4%	5%	4%	0%	6%	8%
Withdrawn	0%	1%	0%	3%	0%	0%	0%	0%	0%	0%	0%	0%	0%
<b>Total</b>	<b>100%</b>	<b>100%</b>	<b>100%</b>	<b>100%</b>	<b>100%</b>	<b>100%</b>	<b>100%</b>	<b>100%</b>	<b>100%</b>	<b>100%</b>	<b>100%</b>	<b>100%</b>	<b>100%</b>
Expedited Request (3 days or less)	26%	30%	36%	37%	28%	33%	36%	30%	37%	40%	37%	44%	29%

On Time: Received by RFS 5 days prior to the requested return date.

Late: Received by RFS less than 5 days prior to the requested return date.

After the Fact: Received by RFS after the requested return date.

Expedited Request: Received by RFS with 3 days or less to review before requested return date.

# SUBMISSIONS TO RFS

## May 2013 to May 2014 Comparison



PROPOSALS	2013	2014	Change
Count	82	110	+28
On Time	56%	43%	-13
Late	39%	49%	+10
After the fact	5%	8%	+3
Withdrawn	0%	0%	-
<b>Total</b>	<b>100%</b>	<b>100%</b>	-
Expedited Request (3 days or less)	26%	29%	+3

On Time: Received by RFS 5 days prior to the requested return date.  
 Late: Received by RFS less than 5 days prior to the requested return date.  
 After the Fact: Received by RFS after the requested return date.  
 Expedited Request: Received by RFS with 3 days or less to review before requested return date.

# PROGRESS REPORT SUBMISSIONS TO RFS

## May 2013 – May 2014



	May 2013	June 2013	July 2013	August 2013	September 2013	October 2013	November 2013	December 2013	January 2014	February 2014	March 2014	April 2014	May 2014
Count	59	30	28	8	9	12	35	23	35	41	40	54	36
On Time	44%	44%	32%	38%	67%	42%	43%	30%	46%	42%	45%	36%	58%
Late	49%	53%	57%	12%	33%	25%	40%	44%	25%	36%	45%	44%	36%
After the fact	7%	3%	11%	50%	0%	33%	17%	26%	29%	22%	10%	20%	6%
<b>Total</b>	<b>100%</b>	<b>100%</b>	<b>100%</b>	<b>100%</b>	<b>100%</b>	<b>100%</b>	<b>100%</b>	<b>100%</b>	<b>100%</b>	<b>100%</b>	<b>100%</b>	<b>100%</b>	<b>100%</b>
Expedited Request (3 days or less)	22%	33%	46%	12%	22%	17%	29%	35%	14%	22%	33%	22%	31%

On Time: Received by RFS 5 days prior to the requested return date.  
 Late: Received by RFS less than 5 days prior to the requested return date.  
 After the Fact: Received by RFS after the requested return date.  
 Expedited Request: Received by RFS with 3 days or less to review before requested return date.

SUBMISSIONS TO RFS  
May 2013 to May 2014 Comparison



PROGRESS REPORTS	2013	2014	Change
Count	59	36	-23
On Time	44%	58%	+14
Late	49%	36%	-13
After the fact	7%	6%	-1
Withdrawn	0%	0%	-
<b>Total</b>	<b>100%</b>	<b>100%</b>	-
Expedited Request (3 days or less)	22%	31%	+9

On Time: Received by RFS 5 days prior to the requested return date.

Late: Received by RFS less than 5 days prior to the requested return date.

After the Fact: Received by RFS after the requested return date.

Expedited Request: Received by RFS with 3 days or less to review before requested return date.



**BIOGRAPHICAL SKETCH—Pilot Format (To Be Used for Specific FOAs only)**

Provide the following information for the Senior/key personnel and other significant contributors.  
Follow this format for each person. **DO NOT EXCEED FIVE PAGES.**

NAME	POSITION TITLE		
eRA COMMONS USER NAME (credential, e.g., agency login)			
EDUCATION/TRAINING ( <i>Begin with baccalaureate or other initial professional education, such as nursing, include postdoctoral training and residency training if applicable.</i> )			
INSTITUTION AND LOCATION	DEGREE (if applicable)	MM/YY	FIELD OF STUDY

**NOTE: The Biographical Sketch may not exceed five pages. Follow the formats and instructions below.**

**A. Personal Statement**

Briefly describe why you are well-suited for your role in the project described in this application. The relevant factors may include aspects of your training; your previous experimental work on this specific topic or related topics; your technical expertise; your collaborators or scientific environment; and your past performance in this or related fields (you may mention specific contributions to science that are not included in Section C). Also, you may identify up to four peer reviewed publications that specifically highlight your experience and qualifications for this project. If you wish to explain impediments to your past productivity, you may include a description of factors such as family care responsibilities, illness, disability, and active duty military service.

**B. Positions and Honors**

List in chronological order previous positions, concluding with the present position. List any honors. Include present membership on any Federal Government public advisory committee.

**C. Contributions to Science**

Briefly describe up to five of your most significant contributions to science. For each contribution, indicate the historical background that frames the scientific problem; the central finding(s); the influence of the finding(s) on the progress of science or the application of those finding(s) to health or technology; and your specific role in the described work. For each of these contributions, reference up to four peer-reviewed publications that are relevant to that contribution. The description of each contribution should be no longer than one half page including figures and citations. Please also provide a URL to a full list of your published work as found in a publicly available digital database such as PubMed or My Bibliography, which are maintained by the US National Library of Medicine.

**D. Research Support**

List both selected ongoing and completed research projects for the past three years (Federal or non-Federally-supported). *Begin with the projects that are most relevant to the research proposed in the application.* Briefly indicate the overall goals of the projects and responsibilities of the key person identified on the Biographical Sketch. Do not include number of person months or direct costs.





**BIOGRAPHICAL SKETCH—Pilot Format (To Be Used for Specific FOAs only)**

Provide the following information for the Senior/key personnel and other significant contributors.  
Follow this format for each person. **DO NOT EXCEED FIVE PAGES.**

NAME Hunt, Morgan Casey	POSITION TITLE Associate Professor of Psychology		
eRA COMMONS USER NAME (credential, e.g., agency login) huntmc			
EDUCATION/TRAINING <i>(Begin with baccalaureate or other initial professional education, such as nursing, include postdoctoral training and residency training if applicable.)</i>			
INSTITUTION AND LOCATION	DEGREE <i>(if applicable)</i>	MM/YY	FIELD OF STUDY
University of California, Berkeley	B.S.	05/90	Psychology
University of Vermont	Ph.D.	05/96	Experimental Psychology
University of California, Berkeley	Postdoctoral	08/98	Public Health and Epidemiology

**A. Personal Statement**

I have the expertise, leadership, training, expertise and motivation necessary to successfully carry out the proposed research project. I have a broad background in psychology, with specific training and expertise in ethnographic and survey research and secondary data analysis on psychological aspects of drug addiction. My research includes neuropsychological changes associated with addiction. As PI or co-Investigator on several university- and NIH-funded grants, I laid the groundwork for the proposed research by developing effective measures of disability, depression, and other psychosocial factors relevant to the aging substance abuser, and by establishing strong ties with community providers that will make it possible to recruit and track participants over time as documented in the following publications. In addition, I successfully administered the projects (e.g. staffing, research protections, budget), collaborated with other researchers, and produced several peer-reviewed publications from each project. As a result of these previous experiences, I am aware of the importance of frequent communication among project members and of constructing a realistic research plan, timeline, and budget. The current application builds logically on my prior work. During 2005-2006 my career was disrupted due to family obligations. However, upon returning to the field I immediately resumed my research projects and collaborations and successfully competed for NIH support.

1. Merrylye, R.J. & Hunt, M.C. (2004). Independent living, physical disability and substance abuse among the elderly. *Psychology and Aging*, 23(4), 10-22.
2. Hunt, M.C., Jensen, J.L. & Crenshaw, W. (2007). Substance abuse and mental health among community-dwelling elderly. *International Journal of Geriatric Psychiatry*, 24(9), 1124-1135.
3. Hunt, M.C., Wiechelt, S.A. & Merrylye, R. (2008). Predicting the substance-abuse treatment needs of an aging population. *American Journal of Public Health*, 45(2), 236-245. PMID: PMC9162292
4. Hunt, M.C., Newlin, D.B. & Fishbein, D. (2009). Brain imaging in methamphetamine abusers across the life-span. *Gerontology*, 46(3), 122-145.

**B. Positions and Honors****Positions and Employment**

1998-2000	Fellow, Division of Intramural Research, National Institute of Drug Abuse, Bethesda, MD
2000-2002	Lecturer, Department of Psychology, Middlebury College, Middlebury, VT
2001-	Consultant, Coastal Psychological Services, San Francisco, CA
2002-2005	Assistant Professor, Department of Psychology, Washington University, St. Louis, MO
2007-	Associate Professor, Department of Psychology, Washington University, St. Louis, MO

### **Other Experience and Professional Memberships**

1995-	Member, American Psychological Association
1998-	Member, Gerontological Society of America
1998-	Member, American Geriatrics Society
2000-	Associate Editor, Psychology and Aging
2003-	Board of Advisors, Senior Services of Eastern Missouri
2003-05	NIH Peer Review Committee: Psychobiology of Aging, ad hoc reviewer
2007-11	NIH Risk, Adult Addictions Study Section, member

### **Honors**

2003	Outstanding Young Faculty Award, Washington University, St. Louis, MO
2004	Excellence in Teaching, Washington University, St. Louis, MO
2009	Award for Best in Interdisciplinary Ethnography, International Ethnographic Society

### **C. Contributions to Science**

1. My early publications directly addressed the fact that substance abuse is often overlooked in older adults. However, because many older adults were raised during an era of increased drug and alcohol use, there are reasons to believe that this will become an increasing issue as the population ages. These publications found that older adults appear in a variety of primary care settings or seek mental health providers to deal with emerging addiction problems. These publications document this emerging problem but guide primary care providers and geriatric mental health providers to recognize symptoms, assess the nature of the problem and apply the necessary interventions. By providing evidence and simple clinical approaches, this body of work has changed the standards of care for addicted older adults and will continue to provide assistance in relevant medical settings well into the future. I served as the primary investigator or co-investigator in all of these studies.
  - a. Gryczynski, J., Shaft, B.M., Merrylye, R., & Hunt, M.C. (2002). Community based participatory research with late-life addicts. *American Journal of Alcohol and Drug Abuse*, 15(3), 222-238.
  - b. Shaft, B.M., Hunt, M.C., Merrylye, R., & Venturi, R. (2003). Policy implications of genetic transmission of alcohol and drug abuse in female nonusers. *International Journal of Drug Policy*, 30(5), 46-58.
  - c. Hunt, M.C., Marks, A.E., Shaft, B.M., Merrylye, R., & Jensen, J.L. (2004). Early-life family and community characteristics and late-life substance abuse. *Journal of Applied Gerontology*, 28(2), 26-37.
  - d. Hunt, M.C., Marks, A.E., Venturi, R., Crenshaw, W. & Ratonian, A. (2007). Community-based intervention strategies for reducing alcohol and drug abuse in the elderly. *Addiction*, 104(9), 1436-1606. PMCID: PMC9000292
2. In addition to the contributions described above, with a team of collaborators, I directly documented the effectiveness of various intervention models for older substance abusers and demonstrated the importance of social support networks. These studies emphasized contextual factors in the etiology and maintenance of addictive disorders and the disruptive potential of networks in substance abuse treatment. This body of work also discusses the prevalence of alcohol, amphetamine, and opioid abuse in older adults and how networking approaches can be used to mitigate the effects of these disorders.
  - a. Hunt, M.C., Merrylye, R. & Jensen, J.L. (2005). The effect of social support networks on morbidity among elderly substance abusers. *Journal of the American Geriatrics Society*, 57(4), 15-23.
  - b. Hunt, M.C., Pour, B., Marks, A.E., Merrylye, R. & Jensen, J.L. (2005). Aging out of methadone treatment. *American Journal of Alcohol and Drug Abuse*, 15(6), 134-149.
  - c. Merrylye, R. & Hunt, M.C. (2007). Randomized clinical trial of cotinine in older nicotine addicts. *Age and Ageing*, 38(2), 9-23. PMCID: PMC9002364
3. Methadone maintenance has been used to treat narcotics addicts for many years but I led research that has shown that over the long-term, those in methadone treatment view themselves negatively and they gradually begin to view treatment as an intrusion into normal life. Elderly narcotics users were shown in carefully constructed ethnographic studies to be especially responsive to tailored social support networks

that allow them to eventually reduce their maintenance doses and move into other forms of therapy. These studies also demonstrate the policy and commercial implications associated with these findings.

- a. Hunt, M.C. & Jensen, J.L. (2003). Morbidity among elderly substance abusers. *Journal of the Geriatrics*, 60(4), 45-61.
- b. Hunt, M.C. & Pour, B. (2004). Methadone treatment and personal assessment. *Journal Drug Abuse*, 45(5), 15-26.
- c. Merryly, R. & Hunt, M.C. (2005). The use of various nicotine delivery systems by older nicotine addicts. *Journal of Ageing*, 54(1), 24-41. PMID: PMC9112304
- d. Hunt, M.C., Jensen, J.L. & Merryly, R. (2008). *The aging addict: ethnographic profiles of the elderly drug user*. NY, NY: W. W. Norton & Company.

Complete List of Published Work in MyBibliography:

<http://www.ncbi.nlm.nih.gov/sites/myncbi/collections/public/1PgT7IEFIAJBtGMRDdWFmjWAO/?sort=date&direction=ascending>

## **D. Research Support**

### **Ongoing Research Support**

R01 DA942367-03                  Hunt (PI)    09/01/08-08/31/13  
Health trajectories and behavioral interventions among older substance abusers  
The goal of this study is to compare the effects of two substance abuse interventions on health outcomes in an urban population of older opiate addicts.  
Role: PI

R01 MH922731-05                  Merryly (PI)    12/15/07-11/30/12  
Physical disability, depression and substance abuse in the elderly  
The goal of this study is to identify disability and depression trajectories and demographic factors associated with substance abuse in an independently-living elderly population.  
Role: Co-Investigator

Faculty Resources Grant, Washington University    08/15/09-08/14/11  
Opiate Addiction Database  
The goal of this project is to create an integrated database of demographic, social and biomedical information for homeless opiate abusers in two urban Missouri locations, using a number of state and local data sources.

### **Completed Research Support**

K02 AG442898                          Hunt (PI)    02/01/02-01/31/05  
Drug Abuse in the Elderly  
Independent Scientist Award: to develop a drug addiction research program with a focus on substance abuse among the elderly.  
Role: PI

R21 AA998075                          Hunt (PI)    01/01/02-12/31/04  
Community-based intervention for alcohol abuse  
The goal of this project was to assess a community-based strategy for reducing alcohol abuse among older individuals.  
Role: PI



# UMMS – PHS PROTOCOL CONGRUENCY WEB PAGES



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- [Elements of Congruency Review](#)
- [Retrieving your Application from eRA Commons](#)
- [PI Congruency Tips](#)
- [Congruency FAQs](#)
- [IACUC Forms \(Intranet\)](#)



E-mail us your  
congruency  
questions

## PHS Protocol-Proposal Congruency

The principal funding source for live vertebrate animal research at the UMass Medical School is the U.S. Department of Health and Human Services (DHHS), primarily through the Public Health Service (PHS) and the National Institutes of Health (NIH). PHS/NIH funding accounts for the majority of all award dollars granted to UMMS. The NIH Grants Policy Statement requires the institution to verify, before award, that the institution's IACUC has reviewed and approved the animal work outlined in the proposal. Specifically, "It is an institutional responsibility to ensure that the research described in the application is congruent with any corresponding protocols approved by the IACUC." (NIH Policy Statement 10/13).

Therefore, a congruency review is required for all funding that uses live vertebrate animals to ensure that the work described in the proposal comports with an active, approved protocol.

Federal Congruency Resources:

4.1.1.2 Verification of IACUC Approval:

[http://grants.nih.gov/grants/policy/nihgps\\_2013/nihgps\\_ch4.htm#iacuc\\_approval\\_verification](http://grants.nih.gov/grants/policy/nihgps_2013/nihgps_ch4.htm#iacuc_approval_verification)

PHS Policy on Humane Care and Use of Laboratory Animals Frequency Asked Questions:

[http://grants.nih.gov/grants/olaw/faqs.htm#proto\\_10](http://grants.nih.gov/grants/olaw/faqs.htm#proto_10)

PHS Policy on Humane Care and Use of Laboratory Animals:

<http://grants.nih.gov/grants/olaw/references/phspol.htm>



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congruency  
questions




## Congruency Procedure

UMMS has developed a document entitled "Procedure for Addressing PHS Animal Protocol-Proposal Congruency Requirements at the UMass Medical School". Click the document title to open the file in a new browser tab.



# UMMS – PHS PROTOCOL CONGRUENCY WEB PAGES



University of  
Massachusetts  
UMASS Medical School




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E-mail us your congruency questions

## Retrieving your Application from the eRA Commons

To retrieve your e-Application, log into eRA Commons then Click on *Status* on the selection bar:

The Status screen will appear. Click on the List of Applications/Grants:

HomeAdminInstitution ProfilePersonal Profile**Status**RPPRIInternet Assisted ReviewxTrainAdmin SuppeRA Partners

Recent/Pending eSubmissionsList of Applications/GrantsSearch by Grants.gov Tracking Num

### Status

[Recent/Pending eSubmissions](#)

- Applications that require action (e.g., to view errors/warnings) prior to submission completion
- Applications that are available to view (during two business day correction window) prior to submission completion
- Applications that have been refused by Signing Official

[List of Applications/Grants](#)

- Funded Grants
- Successfully submitted applications, both paper and electronic
- Review assignment status, review results, summary statements, and Notices of Award
- Other Commons features (e.g., Just In Time, eSNAP, Closeout, Financial Status Report) for previously submitted applications/grants

Search by Grants.gov Tracking Num

- Enter the Grants.gov Tracking Number into the following box for easy access to a specific grant application

Grants.gov Tracking Number:

The screen below will appear. Depending on your application history, you may have to sort through multiple applications to select the appropriate project. Once, identified, click on the *Application ID* on the left:

## Status Result – General Search?

>>If your grant was not awarded, please do not use the MYPT link in the Action column to submit a Progress Report for Mult-Year Grant<<

Tips and Notes:

- PD/PI column shows Contact PI for multi-PI grants.

Application ID	Grants.gov Tracking#	Proposal Title	PD/PI Name	Application Status	Budget Start Date
TR01HL010101-01	GRANT12345678	Test Proposal	DOE, JOHN	Pending Council Review	04/01/2014

This will open the *Status Info* screen. On the right, under the section labeled *Other Relevant Documents*, you will find your e-Application:

## Status Information

General Grant Information		Other Relevant Documents
Status:	Scientific Review Group review completed. Council review pending. Refer any questions to the Program Official or Grants Management Specialist	<a href="#">e-Application</a>
Institution Name:	UNIV OF MASSACHUSETTS MED SCHOOL	<a href="#">eSubmission Cover Letter</a>
School Name:	SCHOOLS OF MEDICINE	<a href="#">Additions for Review (8 documents)</a>
School Category:	SCHOOLS OF MEDICINE	
Division Name:	NONE	
Department Name:	MEDICINE	
PI Name:	DOE, JOHN	
Application ID:	TR01HL010101-01	
		Correspondence
		Referral
		DateDescription

Click on the *e-Application* to open the pdf. This is the document that needs to be submitted for congruency review should your application be close to the fundable range.



# UMMS – PHS PROTOCOL CONGRUENCY WEB PAGES



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## PI Congruency Tips

PIs are advised to take the following steps after the submission of a research proposal (grant, award, contract, subaward, etc.) to facilitate timely congruency review.

1. If you receive a high priority score, RFS recommends consulting with your Program Officer to see whether you are within funding range. If you receive an indication that the application is potentially fundable, please conduct a review of your IACUC protocol(s) to confirm that all the studies in the proposal are included in an IACUC-approved protocol. The self-review should focus on the six areas identified in Section III.C.
2. If all proposed studies are not included in the IACUC protocol, modify the IACUC protocol, or submit a new protocol or early renewal, if necessary. Please plan ahead as IACUC requires about 3-4 weeks to approve a major amendment, or 4-8 weeks to approve a new protocols or renewal.
3. If the current protocol is set to expire before or within a few months of the award start date, it is advisable to submit a new protocol or an early renewal of the IACUC protocol.
4. A detailed description is not required for studies planned for years 4 and 5 of the grant or for alternative approaches to be taken if the planned studies are not successful. For this exception to the congruency requirement, OLAW/NIH has advised a brief description of such studies in lieu of a detailed experimental design in the IACUC protocol is acceptable. A detailed description of these studies with IACUC approval will be required prior to initiating them by amending or renewing the IACUC protocol.
5. **Studies conducted at outside or off-site institutions:** The UMMS PI should ensure that non-UMMS collaborators planning to conduct off-site live animal studies (via contract/subaward), or producing not off the shelf research reagents (e.g., antibody production) provide their approved IACUC protocol to the UMMS IACUC for review and approval. NIH requires that all external collaborators must have IACUC approvals from NIH assured entities. UMMS investigators must complete an off-site protocol form or amend their approved protocol by completing Form J.



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questions

## Congruency FAQs

1. Is it acceptable for institutions to ask each PI to confirm that all animal work described in the grant has been approved by the IACUC?
2. Why can't the study section review of the Vertebrate Animal Section fulfill the requirement for congruency review?
3. Is it better to have one IACUC protocol for each grant?
4. Is congruency with an IACUC-approved protocol necessary for the alternative methods?
5. Since the grants are typically approved for 5 years and the protocols are approved for 3 years, are the PIs required to include in the IACUC protocol experiments proposed to be performed in the 4th and 5th years?
6. Does the institution need to do a congruency review for external collaborators or service providers?

**Q1.** Is it acceptable for institutions to ask each PI to confirm that all animal work described in the grant has been approved by the IACUC?

**A.** OLAW/NIH discourages this practice as it places the institutions at significant risk, and some of the institutions who have used this practice have been required to return funds to NIH for non-compliance.

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**Q2.** Why can't the study section review of the Vertebrate Animal Section fulfill the requirement for congruency review?

**A.** Scientific review group (SRG) or study section is not intended to supersede or serve as a replacement for IACUC. SRG only verifies that the proposed use of animals is scientifically appropriate, whereas IACUC approval indicates that the protocol has been determined to confirm to the PHS policy.

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University of Massachusetts Medical School  
Summary Disclosure of Financial Interests

UMMS Proposal ID# or  
UMMS Sponsor Award ID:

Completion of this form is **mandatory** for all proposals. This information is required to comply with the University of Massachusetts Medical School Policy for Promoting Objectivity in Biomedical Research and applicable federal and state laws and regulations regarding timely and proper disclosure of financial interests.

Principal Investigator Name: Last, First, MI

Principal Investigator Title:

Department:

Sponsor:

Project Start Date:

Project End Date:

Project Title:

A. The Project Principal Investigator is responsible for determining who meets the definition of an "Investigator" on their project and certifies that this form provides:

1. a complete disclosure of all Investigators responsible for the design, conduct, or reporting of activities associated with this project, and
2. an accurate report of the current state of the named Investigator's disclosure in the institution's electronic reporting system.

Principal Investigator agrees to update the UMMS COI system annually during the period of the award and within 30 days of discovering or acquiring a new Significant Financial Interest.

**Principal Investigator Disclosure & Certification**

**Do you, your spouse/domestic partner or dependent children have any Significant Financial Interests (SFI) related to the Investigator's Institutional Responsibilities? Please answer below. (Reference definitions on the reverse side of this form).**

☐ Yes ☐ No If yes, investigator confirms the disclosure on the UMMS COI System (<http://coi.umassmemorial.org/coi/>) has been updated and is current.

Signature of Principal Investigator

Date

**Disclosures & Certifications for UMass Personnel Identified as "Investigators"**

B. For the purposes of this disclosure, **Investigator** is defined as any person, **regardless of title or position**, who is responsible for the design, conduct, or reporting of research, or proposed for such funding, which includes subawardees and may include consultants and unpaid collaborators.

By signing below each Investigator (1) certifies that this form provides an accurate report of whether there are any Significant Financial Interests related to their Institutional Responsibilities, and (2) acknowledges responsibility to provide a complete disclosure of all Significant Financial Interests reasonably related to their Institutional Responsibilities prior to award receipt, as those interests change, and on an annual basis during the project award period.

**Institutional Responsibilities** means an Investigator's professional responsibilities on behalf of the Institution, including activities such as research, teaching, clinical or other professional practice, academic activities, scholarly events, institutional committee memberships, and service on panels such as Institutional Review Boards or Data and Safety Monitoring Boards.

**Do you, your spouse/domestic partner or dependent children have any Significant Financial Interests (SFI) related to the Investigator's Institutional Responsibilities? Please answer below. (Reference definitions on the reverse side of this form).**

1. ☐ Yes ☐ No If yes, investigator confirms the disclosure on the UMMS COI System (<http://coi.umassmemorial.org/coi/>) has been updated and is current.

Disclosing Investigator:

Title:

Signature

Date

2. ☐ Yes ☐ No If yes, investigator confirms the disclosure on the UMMS COI System (<http://coi.umassmemorial.org/coi/>) has been updated and is current.

Disclosing Investigator:

Title:

Signature

Date

3. ☐ Yes ☐ No If yes, investigator confirms the disclosure on the UMMS COI System (<http://coi.umassmemorial.org/coi/>) has been updated and is current.

Disclosing Investigator:

Title:

Signature

Date

4. ☐ Yes ☐ No If yes, investigator confirms the disclosure on the UMMS COI System (<http://coi.umassmemorial.org/coi/>) has been updated and is current.

Disclosing Investigator:

Title:

Signature

Date

☐ (Check here if additional investigator disclosures are being submitted on the **Additional Signatures Page**)

C. ☐ Yes ☐ No Will **Non-University Investigators** be responsible with the PI or Co-PI for the design, conduct, or reporting of the activities associated with the project (e.g., subrecipients, consultants, collaborators, others with significant responsibilities)? If yes, UMMS must be assured that the Investigators' home institution(s) have policies that comply with the sponsor's regulations. Such assurance should be provided along with the participant's Letter of Intent/Commitment to the project at the submission stage.

If yes, please identify non-University Investigator type (check all that apply): ☐ Subrecipients ☐ Consultants ☐ Collaborators ☐ Others w/SFIs



# New Sponsor Request Form

*Please use this form to request the addition of a new sponsor to the PeopleSoft Grants Sponsor table. Please note that all fields must be completed for the form to be processed. The completed form should be submitted via email to Research Funding Services at [research.funding@umassmed.edu](mailto:research.funding@umassmed.edu). The completed form should also be included with the proposal routing packet.*

Office of Research  
55 Lake Avenue North  
Worcester, MA 01655-0002  
Phone: 508-856-2119  
Fax: 508-856-5004  
[www.umassmed.edu/research](http://www.umassmed.edu/research)

Date:

## Requestor Information

First Name:

Last Name:

Phone:

E-Mail:

## New Sponsor Information

Full Legal Name:

Legal Address (no PO Box):

City:

State:

Zip Code:

Country:

Sponsor website:

Sponsor Contact Name:

Sponsor Contact Phone:

## Business Type *(select one)*

- ☐ Business/For Profit
- ☐ Foundation/Charitable Trust
- ☐ MA Local Government
- ☐ MA State Government
- ☐ Other University
- ☐ Non-Profit/Business Related
- ☐ Other Government Agency

## Other Information *(select all applicable)*

- ☐ Federal sponsor
- ☐ Foreign sponsor
- ☐ Sponsor funds human subjects research





## ACRONYMS AND TERMS USED TODAY

**RFS BROWN BAG - 06/30/2014**

ACRONYM/TERM	DESCRIPTION
ASSIST (NIH)	Application Submission System & Interface for Submission Tracking
Biosketch (NIH)	Standardized biographical sketch form used by NIH to capture senior/key personnel and other significant contributors in the proposal. Captures Name, eRA Commons ID, Education/Training, Personal Statement, Positions/Honors, Selected Publications and Research Support
Cayuse 424	Cayuse is a web-based system for submission of applications via grants.gov.
Cayuse Multi-Project Applications (CMPA)	CMPA is the Cayuse system to system solution for the submission of NIH Multi-Project Applications to grants.gov. This solution works in parallel to NIH's ASSIST system.
Commons User ID	The Commons User ID is your logon to the eRA Commons system. If you do not have a Commons login, you can request one from RFS .
eRA Commons	The eRA Commons is NIH's online interface where signing officials, principal investigators, trainees and post-docs at institutions/organizations can access and share administrative information relating to research grants and process prior approval requests.
F&A; F&A Rate Agreement	F&A stands for Facilities and Administrative Costs. Also referred to as indirect costs and overhead. The F&A Rate Agreement is the federally negotiated rate agreement in place with government that allows us to charge the prescribed rates to the government.
IACUC Congruency	Process whereby UMMS verifies, before award, that our IACUC has reviewed and approved the animal work outlined in the proposal. NIH requires UMMS to ensure that the research described in the application is congruent with any corresponding protocols approved by the IACUC (NIH Policy Statement 10/13).
MyNCBI	Electronic publication resource that NIH has mandated be used to demonstrate compliance with the NIH Public Access Policy. My NCBI publications report resources are available at: <a href="http://www.ncbi.nlm.nih.gov/books/NBK53595/">http://www.ncbi.nlm.nih.gov/books/NBK53595/</a>
NIH	National Institutes of Health
RFA	Request for Applications
RFS	Research Funding Services
RPPR	Research Performance Progress Report. Progress reports are required annually to document grantee accomplishments and compliance with terms of award. They describe scientific progress, identify significant changes, report on personnel, and describe plans for the subsequent budget period or year. See <a href="http://grants.nih.gov/grants/rppr/">http://grants.nih.gov/grants/rppr/</a>
SBIR	Small Business Innovation Research Grants
SDFI	Summary Disclosure of Financial Interests Form. The RFS form used to disclose Significant Financial Interests at the proposal submission stage.
SNAP	Streamlined Non-Competing Award Process. Streamlined process that includes a number of provisions that modify annual progress reports, NoAs, and financial reports. Funds are automatically carried over and are available for expenditure during the entire project period. All NIH award notices identify whether the grant is subject to or excluded from SNAP.
STTR	Small Business Technology Transfer Grants
SUMMIT	SUMMIT is the UMass Medical School's web based reporting tool.
Uniform Guidance	Refers to the new OMB guidance on administrative requirements, cost principles and audit requirements for federal awards (which includes research grant awards) that will come into effect December 26, 2014. This guidance consolidates OMB Circulars A-21, A-87, A-110 and A-122 (which have been placed in 2 C.F.R. Parts 220, 225, 215 and 230); Circulars A-89, A-102 and A-133; and the guidance in Circular A-50 on Single Audit Act follow-up.