

# Research Administration Update



Wednesday, January 31 , 2018

Lazare Auditorium (S1-607)  
1:00 - 2:00 pm

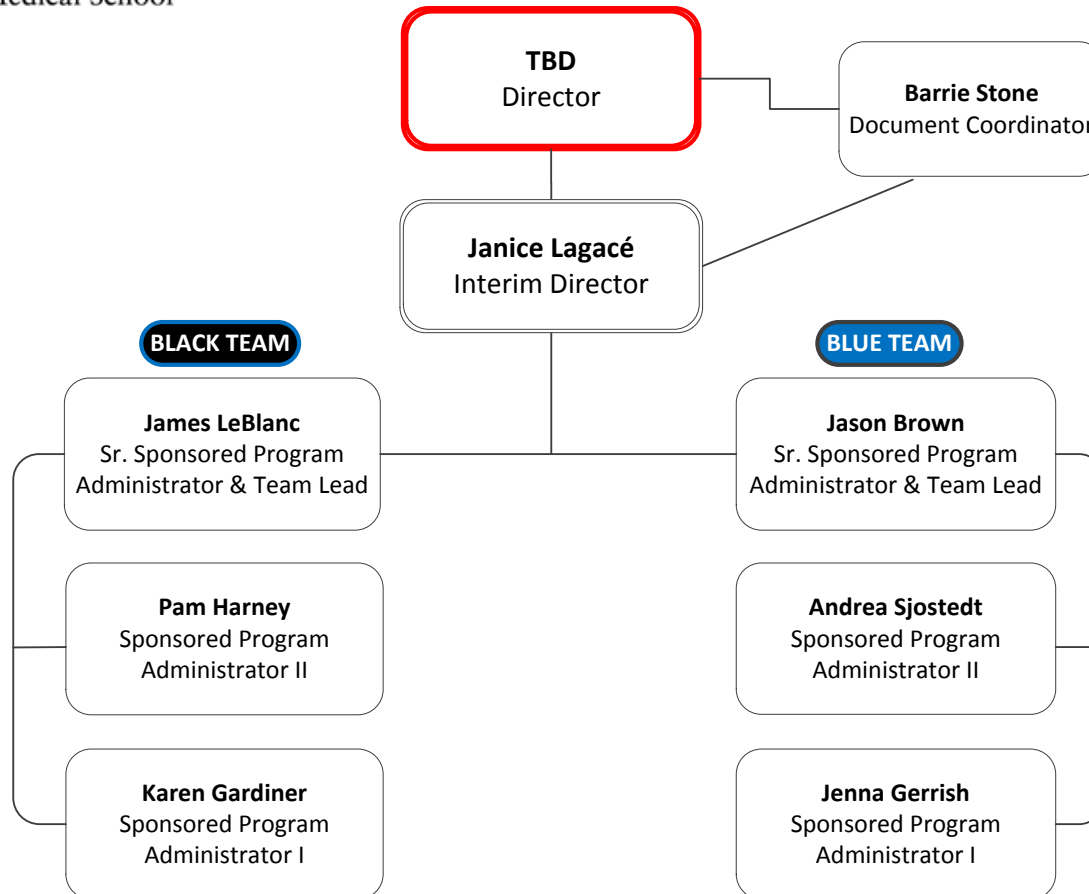


# Agenda

- OSP Updates
  - OSP Staffing
  - Indirect Waiver requests/Cost Share approvals
  - Other AOR related changes
  - Change in IDP language
  - Proposal Information Worksheet
- NIH Updates
  - NOT-OD-17-062 FORMS-E
  - NOT-GM-18-011 MIRA R35 Letter of Support
  - NOT-OD-18-107 Enforcement of Closeout Policy
- Proposal & Progress Report Statistics

# OSP Updates

## Office of Sponsored Programs



- Indirect Waivers & Cost Share Approvals
  - PI requests Department Chair Approval
  - Submit to Interim Director Janice Lagacé
  - OSP will consult with RAC Subcommittee Chair  
Dr. Catarina Kiefe MD, PhD



Reminder that all IDC waivers will have a direct impact on the allocation to Departments

# OSP Updates

- Cayuse Proposals – Adding the AOR


<b>1. TYPE OF SUBMISSION</b> <input type="radio"/> Pre-application <input type="radio"/> Application <input type="radio"/> Changed/Corrected Application	<b>4. a. Federal Identifier</b> <input type="text"/>	<b>b. Agency Routing Number</b> <input type="text"/> <b>c. Previous Grants.gov Tracking ID</b> <input type="text"/>
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**5. APPLICANT INFORMATION**  

Legal Name: <input type="text" value="University of Massachusetts Medical School"/>	Organizational DUNS: <input type="text" value="603847393"/>
Department: <input type="text"/>	Division: <input type="text"/>
Street1: <input type="text" value="55 Lake Avenue North"/>	Street2: <input type="text"/>
City: <input type="text" value="Worcester"/>	County/Parish: <input type="text" value="Worcester"/>
State/Province: <input type="text" value="Massachusetts"/>	Zip/Postal Code: <input type="text" value="01655-0002"/>
Country: <input type="text" value="United States of America"/>	

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Person to be contacted on matters involving this application 

Prefix: <input type="text"/>	First Name: <input type="text"/>	Middle Name: <input type="text"/>	Last Name: <input type="text"/>	Suffix: <input type="text"/>
Position/Title: <input type="text"/>				
Street1: <input type="text"/>				
City: <input type="text"/>				
State/Province: <input type="text" value="Please Select..."/>				
Country: <input type="text" value="Please Select..."/>				
Street2: <input type="text"/>				
County/Parish: <input type="text"/>				
Zip/Postal Code: <input type="text"/>				
Phone Number: <input type="text"/>		Fax Number: <input type="text"/>		Email: <input type="text"/>


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<b>6. EMPLOYER IDENTIFICATION NUMBER(EIN) or (TIN):</b> <input type="text" value="1-043167352-A1"/>	<b>7. TYPE OF APPLICANT:</b> <input type="text" value="H: Public/State Controlled Institution of Higher Education"/> Other (Specify): <input type="text"/> <b>Small Business Organization Type</b> <input type="checkbox"/> Women Owned <input type="checkbox"/> Socially and Economically Disadvantaged
<b>8. TYPE OF APPLICATION:</b> <input type="radio"/> New <input type="radio"/> Resubmission <input type="radio"/> Renewal <input type="radio"/> Continuation <input type="radio"/> Revision	

# OSP Updates

- Cayuse Proposals – Adding the AOR

Secure | <https://umassmed.cayuse424.com/1/listPeopleToAutofill.do?subsessionId=0&role=ac&contactNumber=&listType...>


 **Add Applicant Contact to Proposal** Close

eRA Role Filter: Any/all (unfiltered) ?

[Show Recently Used](#)


**All 4064 Available Professional Profiles:**

- Aaker, Elizabeth - University of Massachusetts Medical School
- Abar, Beau - University of Massachusetts Medical School
- Abdel-Motal, Ussama M. - University of Massachusetts Medical School: Medicine
- Abdi, Reza - Brigham and Women's Hospital: Medicine
- Abel, Gregory A - Dana-Farber Cancer Institute
- Acar, Ceren - University of Massachusetts Medical School: Pulmonary
- Acharya, Jairaj - National Institutes of Health
- Acharya, Usha - University of Massachusetts Medical School: PGFE
- Adachi-Mejia, Anna - N/A
- Adair, Robin - University of Massachusetts Medical School
- Adams Jr., Spencer Todd - University of Massachusetts Medical School: Biochem
- Adams, Jena - Central MA Area Health Education Center: Central MA AHEC
- Adams, Jodi - University of Massachusetts Medical School
- Adams, Kenneth - HealthPartners Research Foundation: HealthPartners Research
- Adams, Michael - Georgetown University: Medicine
- Addis, Michael - Clark University : Psychology
- Adkins, Nicholas L. - University of Massachusetts Medical School: Molecular Me
- Adler, Ronald N. - University of Massachusetts Medical School
- Adler, Stuart - Virginia Commonwealth University: Pediatrics, Microbiology and M
- Adshead, Richard A. - University of Massachusetts Medical School: Microbiology



# OSP Updates

- Cayuse Proposals – Adding the AOR

 Add Applicant Contact to Proposal Close

Search eRA Role Filter: Administrative Official ▼ ?

[Show Recently Used](#)

**All 1 Available Professional Profile w/role *Administrative Official*:**

Lagace, Janice - University of Massachusetts Medical School: Office of Research ▲

 Add Applicant Contact

# OSP Updates

- Cayuse Proposals – AOR in Routing Chain



## Routing & Approval ?

### Routing Chain



Edit Chain?

#### Begin

☐

Pagoto, Sherry L - University of Massachusetts Medical School: Preventive & Behavioral Med.

☐

RFS, - University of Massachusetts Medical School: Office of Research

☐

Lagace, Janice - University of Massachusetts Medical School: Office of Research

#### End



An AOR is on the routing chain, but has not yet approved this proposal. The proposal will not be submittable until an AOR has approved the proposal.

### Routing History

username	person	type	date/time	comments
LagaceJ		Modify	2018-01-23 09:26	Auto-built chain at create time from PI

# OSP Updates

- PeopleSoft Proposal Routing Forms

If PI has not been added to the system, please use:

Report ID: UMGM7002  
Environment: Production

UNIVERSITY OF MASSACHUSETTS  
PROPOSAL ROUTING FORM

Page No: 1  
Run Date: 01/30/2018  
Run Time: 12:23:26\_PM

Proposal No. 000000000027943

Status: STSR - Submit for Approval

I. Principal Investigator Information

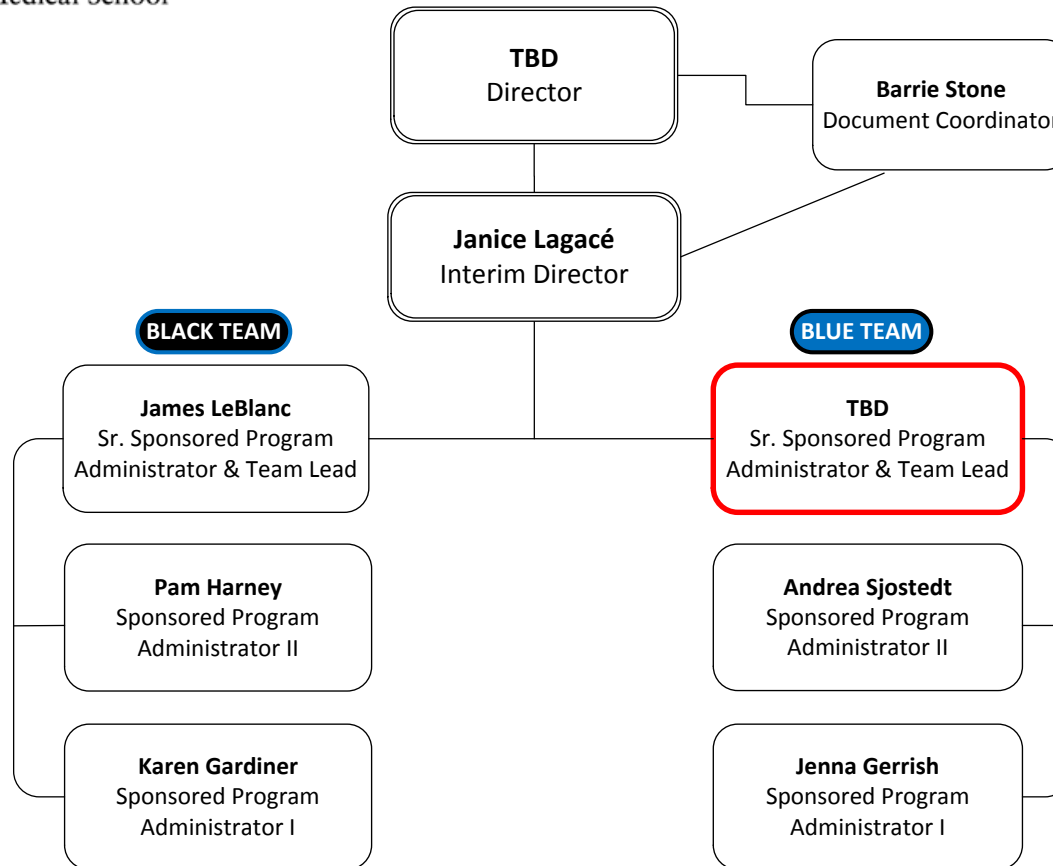
PI Name: Lagace, Janice E  
Department: W195000000 - Molecular Cell & Cancer Biolog  
PI Phone:  
PI Email:

Alt Name: eddy, jenna  
Alt. Phone: 508/341-4405  
Alt. Email: jenna.eddy@umassmed.edu  
Requested Return Date: 02/01/2018

II. Proposal Information

# OSP Updates

## Office of Sponsored Programs



## Blue Team Administrators

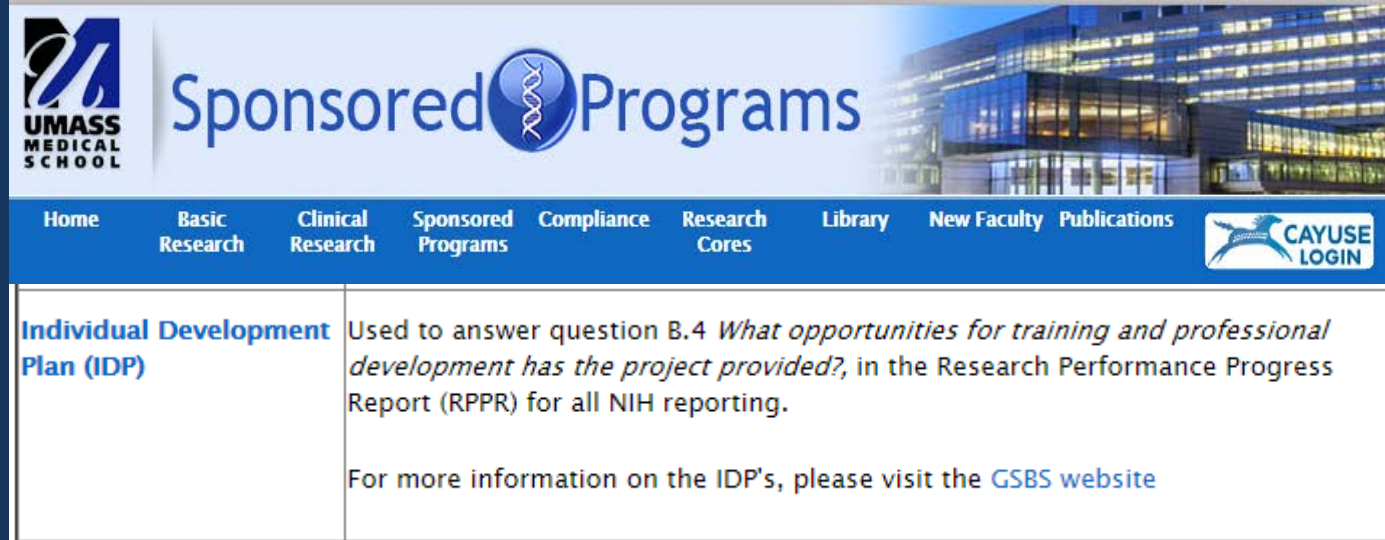
- All February Blue Team RPPR's should be routed to Jenna Gerrish.
- List Janice Lagacé as the AOR and Jason Brown as the SO.
- After 2/16/2018 contact Janice Lagacé or SPA II Andrea Sjostedt.

# OSP Updates

## Individual Development Plan

Revised language has been issued by the GSBS for responding to the IDP question:

*B.4 WHAT OPPORTUNITIES FOR TRAINING AND PROFESSIONAL DEVELOPMENT HAS THE PROJECT PROVIDED?*



The screenshot shows the 'Sponsored Programs' section of the UMASS Medical School website. The header includes the UMASS Medical School logo and the title 'Sponsored Programs' with a DNA helix icon. A navigation bar contains links for Home, Basic Research, Clinical Research, Sponsored Programs, Compliance, Research Cores, Library, New Faculty, and Publications. A 'CAYUSE LOGIN' button is also present. The main content area features a table with the following information:

<b>Individual Development Plan (IDP)</b>	<p>Used to answer question B.4 <i>What opportunities for training and professional development has the project provided?</i>, in the Research Performance Progress Report (RPPR) for all NIH reporting.</p> <p>For more information on the IDP's, please visit the <a href="https://www.umassmed.edu/research/funding/rfsform/">GSBS website</a></p>
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<https://www.umassmed.edu/research/funding/rfsform/>

## Individual Development Plan

UMass Medical School recognizes the critical importance of preparing our graduate students and postdoctoral scholars for success within a broad spectrum of scientific careers. All graduate students in year 3 and above are required to create an annual Individual Development Plan (IDP). The curriculum for graduate students now incorporates a course in the fall of the third year called Professionalism and Research Conduct (PARC) in which career planning and development and responsible conduct of research are taught. Included in the course is creation of the students' first IDP. Updates and re-evaluation are required and monitored by the Graduate School of Biomedical Sciences annually. All incoming postdocs receive training in how to create an IDP as part of the required onboarding course in Responsible Conduct of Research. All trainees at UMMS have the resources of the Office for Postdoctoral Scholars and the Center for Biomedical Career Development open to them. This includes one-on-one mentoring and/or problem solving, internal workshops and career exploration options, as well as series of external speakers who discuss career choices or who present lectures and/or workshops on a wide range of skills relevant to biomedical scientists.

# OSP Updates

## Proposal Information Worksheet

- Suggested by the Grants Focus Group
- Work group under the direction of Rik Madison
- Assist with capturing the required information when building a proposal



The screenshot shows the 'Sponsored Programs' website. The header includes the UMASS Medical School logo, the title 'Sponsored Programs' with a DNA helix icon, and a navigation bar with links: Home, Basic Research, Clinical Research, Sponsored Programs, Compliance, Research Cores, Library, New Faculty, and Publications. A 'CAYUSE LOGIN' button is also present. Below the navigation bar, a section titled 'Worksheets:' contains a table with three rows:

Worksheets:	
Internal Budget Worksheet FY18	
NIH Salary Cap Worksheet	
Proposal Information Worksheet	

<https://www.umassmed.edu/research/funding/rfsform/>

# OSP Updates

## Proposal Information Worksheet

### 1. General Information

Proposal Information Worksheet	Administrative Use:	
This worksheet is a standardized form used to obtain and communicate essential information pertaining to the initiation of a proposal submission between the PI and Department Administration. Please complete as much information as known at this time and forward to the appropriate administrative contact in your department who is responsible for coordinating the application process.	Initial Notification (When/How):	
	Meeting/Forum and Date:	
	OSP Request Return Due Date:	
	Administrative Coordinator:	
	Proposal ID #:	Project ID #:
<b>General Information</b>		
Principal Investigator (PD/PI) Name: _____ Multi PD/PI: <input type="radio"/> Yes <input type="radio"/> No Are you the Contact PI: <input type="radio"/> Yes <input type="radio"/> No		
Other PD/PI Name(s): _____ Outside Contact(s): _____		
Sponsor: <input type="radio"/> NIH <input type="radio"/> CDC <input type="radio"/> HRSA <input type="radio"/> DOD <input type="radio"/> NSF <input type="radio"/> State <input type="radio"/> Non-Profit <input type="radio"/> Hughes <input type="radio"/> Industry <input type="radio"/> Subcontract (Other Institution is Prime)		
Other/Specify: _____		
Application in Response to a Specific Opportunity: <input type="radio"/> Yes <input type="radio"/> No PA/RFP/RFA# _____ Agency Due: _____ Date Time		
Award Type/Code: <input type="radio"/> R01 <input type="radio"/> R21 <input type="radio"/> R37 <input type="radio"/> K-Award <input type="radio"/> P01 <input type="radio"/> U19 <input type="radio"/> SBIR/STTR <input type="radio"/> Contract <input type="radio"/> Fellowship <input type="radio"/> Other/Specify:		
Application Type: <input type="radio"/> New <input type="radio"/> Resubmission (Include ID# _____) <input type="radio"/> Renewal <input type="radio"/> Revision <input type="radio"/> Continuation <input type="radio"/> Supplement <input type="radio"/> Transfer In		
<input type="radio"/> Other: _____		
Type of Submission: <input type="radio"/> Cayuse <input type="radio"/> Sponsor Website <input type="radio"/> Paper <input type="radio"/> Email/Electronic <input type="radio"/> Other/Specify: _____		
Provide a Quick/Nickname to refer to: _____		
Title if Known: _____		

# OSP Updates

## Proposal Information Worksheet

### 2. Budget/Personnel Information

#### Budget/Personnel Information

**Budget Type:** ☐ Modular ☐ Detailed ☐ No Budget Required ☐ Other: \_\_\_\_\_ **Project Start Date:** \_\_\_\_\_ **Number of Years:** \_\_\_\_\_

**Cost Sharing Requirements (Personnel or Other):** ☐ Yes ☐ No

If Yes, Provide Specifics: \_\_\_\_\_

**Target Amount:** Direct \$ \_\_\_\_\_ Total \$ \_\_\_\_\_ **Equipment:** ☐ Yes ☐ No \$ \_\_\_\_\_

**Item(s):** \_\_\_\_\_

**Other Budgetary Restrictions:** \_\_\_\_\_

**List Personnel/Effort and who's Key:**

1. _____	<b>Role:</b> PD/PI	<b>Effort:</b> _____ %	<b>Key:</b> <input type="radio"/> Yes <input type="radio"/> No	<b>Incl on SDFI:</b> <input type="radio"/> Yes <input type="radio"/> No
2. _____	<b>Role:</b> _____	<b>Effort:</b> _____ %	<b>Key:</b> <input type="radio"/> Yes <input type="radio"/> No	<b>Incl on SDFI:</b> <input type="radio"/> Yes <input type="radio"/> No
3. _____	<b>Role:</b> _____	<b>Effort:</b> _____ %	<b>Key:</b> <input type="radio"/> Yes <input type="radio"/> No	<b>Incl on SDFI:</b> <input type="radio"/> Yes <input type="radio"/> No
4. _____	<b>Role:</b> _____	<b>Effort:</b> _____ %	<b>Key:</b> <input type="radio"/> Yes <input type="radio"/> No	<b>Incl on SDFI:</b> <input type="radio"/> Yes <input type="radio"/> No
5. _____	<b>Role:</b> _____	<b>Effort:</b> _____ %	<b>Key:</b> <input type="radio"/> Yes <input type="radio"/> No	<b>Incl on SDFI:</b> <input type="radio"/> Yes <input type="radio"/> No
6. _____	<b>Role:</b> _____	<b>Effort:</b> _____ %	<b>Key:</b> <input type="radio"/> Yes <input type="radio"/> No	<b>Incl on SDFI:</b> <input type="radio"/> Yes <input type="radio"/> No
7. _____	<b>Role:</b> _____	<b>Effort:</b> _____ %	<b>Key:</b> <input type="radio"/> Yes <input type="radio"/> No	<b>Incl on SDFI:</b> <input type="radio"/> Yes <input type="radio"/> No

**Are there any Other Significant Contributors:** ☐ Yes ☐ No

If yes, list Name/Institution/Department: \_\_\_\_\_

**Are there Outgoing Sub-Recipients:** ☐ Yes ☐ No

If yes, List Who and Projected Amounts: \_\_\_\_\_

**Will project involve foreign travel and activities outside the US or partnerships with international collaborators:** ☐ Yes ☐ No

(if Yes, Contact Travel Office for approval)

# OSP Updates

## Proposal Information Worksheet - Three Areas

### 3. Certifications/Other

<u>Certifications/Other Information</u>			
Human Subjects:	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Pending	Protocol/Docket#: _____	Approval Date: _____ Expiration Date: _____
Code/Description: _____			
Clinical Trial:	<input type="radio"/> Yes <input type="radio"/> No	Phase III:	<input type="radio"/> Yes <input type="radio"/> No
Animal Subjects:	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Pending	Protocol/Docket#: _____	Approval Date: _____ Expiration Date: _____
Code/Description: _____			
Other Requirements/Certificates: _____			
Provide Key Words (up to 3): _____			

<https://www.umassmed.edu/research/funding/rfsform/>

## NOT-OD-17-062 Forms E

Use FORMS-D for...	Use FORMS-E for...
Applications submitted for due dates on or before January 24, 2018	Applications submitted for due dates on or after <b>January 25, 2018</b>
Applications submitted under <a href="#">NIH Late Policy</a> 2-week window of consideration for intended due dates on or before January 24, 2018	All application types (New, Resubmission, Renewal, Revision)
Applications submitted by February 7, 2018 under <a href="#">NIH Continuous Submission Policy</a> for January 7, 2018 AIDS intended due date	Applications submitted early for intended due dates on or after January 25, 2018

## NOT-OD-17-062 Forms E

Directly effects all February 5th submissions.

There are now two Parent Opportunities for R01's & R21's

+	i PA-18-484	NIH Research Project Grant (Parent R01 Clinical Trial Not Allowed)	FORMS-E
+	i PA-18-345	NIH Research Project Grant (Parent R01 Clinical Trial Required)	FORMS-E

– Verify that you have chosen the correct PA

+	i PA-18-344	NIH Exploratory/Developmental Research Grant Program (Parent R21 Clinical Trial Required)	FORMS-E
+	i PA-18-489	NIH Exploratory/Developmental Research Grant Program (Parent R21 Clinical Trial Not Allowed)	FORMS-E

## NOT-OD-17-062 Forms E

- The most significant change with the new FORMS-E Application Package is the addition of a new PHS Human Subjects and Clinical Trials Information form.
- This form consolidates human subjects, inclusion enrollment, and clinical trial information previously collected across multiple agency forms.
- The information is collected at the study level.
- Allows for multiple studies.

# NIH Updates

## NOT-OD-17-062 Forms E

☒ **PHS Human Subjects and Clinical**

1

☐ **RR Subaward Budget Attachment**

1

☒ **PHS 398 Cover Page Supplement**

1  
2

☒ **PHS 398 Research Plan**

1


☒ **PHS Assignment Request**


1


**Proposal Summary**


Summary  
Documents


**Proposal Management**

 Permissions

 Routing & Approval

 Electronic Submission

 Proposal History

 Export


Add a record for each proposed Human Subject Study by selecting 'Add New Study' or 'Add New Delayed Onset Study' as appropriate. Delayed onset studies are those for which there is no well-defined plan for human subject involvement at the time of submission, per agency policies on Delayed Onset Studies. For delayed onset studies, you will provide the study name and a justification for omission of human subjects study information.

**Other Requested Information**

(no pdf) (no src)

**Study Record(s)**

Attach human study records using unique filenames.

#	Study Title	Is a Clinical Trial
1	<a href="#">LEAVE Safe with DOACs</a>	<input checked="" type="checkbox"/> 

**Delayed Onset Study(ies)**

#	Study Title	Anticipated Clinical Trial?	Justification
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# NIH Updates

## NOT-OD-17-062 Forms E

### Section 1 - Basic Information

1.1. \* Study Title (each study title must be unique)

LEAVE Safe with DOACs

1.2. \* Is this Study Exempt from Federal Regulations?

☐ Yes ☒ No

1.3. Exemption Number

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ 6 ☐ 7 ☐ 8

1.4. \* Clinical Trial Questionnaire

If the answers to all four questions below are yes, this study meets the definition of a Clinical Trial.

1.4.a. Does the study involve human participants?

☒ Yes ☐ No

1.4.b. Are the participants prospectively assigned to an intervention?

☒ Yes ☐ No

1.4.c. Is the study designed to evaluate the effect of the intervention on the participants?

☒ Yes ☐ No

1.4.d. Is the effect that will be evaluated a health-related, biomedical, or behavioral outcome?

☒ Yes ☐ No

1.5. Provide the ClinicalTrials.gov Identifier (e.g., NCT87654321) for this trial, if applicable

If there is not a related number, leave this field blank.  
Do not enter N/A.

# NIH Updates

## NOT-OD-17-062 Forms E

**Section 2 - Study Population Characteristics**

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2.1. Conditions or Focus of Study

X Anticoagulation in VTE Patients

Add New Condition

2.2. Eligibility Criteria

Inclusion:  
1. Age 18 years or older

2.3. Age Limits

Minimum Age   Maximum Age

2.4. Inclusion of Women, Minorities, and Children

Kapoor\_AHRQ\_LEAVE-Safe\_InclusionWomenMinoritiesChildren\_FINAL [pdf](#) (no src) 

Add Attachment Delete Attachment

2.5. Recruitment and Retention Plan

Kapoor\_AHRQ\_LEAVE-Safe\_RecruitmentRetention\_FINAL [pdf](#) (no src) 

Add Attachment Delete Attachment

2.6. Recruitment Status

2.7. Study Timeline

Kapoor\_AHRQ\_LEAVE-Safe\_StudyTimeline\_FINAL [pdf](#) (no src) 

Add Attachment Delete Attachment

2.8. Enrollment of First Subject

Be careful with any text box fields and avoid the use of symbols or character such as the < and >

## NOT-OD-17-062 Forms E – Helpful Links and Info

### G.500 - PHS Human Subjects and Clinical Trials Information



The PHS Human Subjects and Clinical Trials Information form is used to collect information on human subjects research, clinical research, and/or clinical trials, including study population characteristics, protection and monitoring plans, and a protocol synopsis.

This form accommodates the full spectrum of all types of clinical trials, including, but not limited to, behavioral, exploratory/development, mechanistic, pilot/feasibility, early phase, efficacy, effectiveness, group-randomized, and others.

Read all the instructions in the Funding Opportunity Announcement (FOA) before completing this form to ensure your application meets all IC-specific criteria. If you are proposing a clinical trial, make sure your FOA accepts clinical trials (i.e., 'clinical trial required' or 'clinical trial optional').

The PHS Human Subjects and Clinical Trials Information form, together with the rest of your application, should include sufficient information for the evaluation of the project, independent of any other documents (e.g., previous application). Be specific, describe each study clearly, and avoid redundancies. Be especially careful to avoid redundancies with your research strategy.



The image shows a stack of PHS Human Subjects and Clinical Trials Information forms. The top form is clearly visible and shows the title "PHS Human Subjects and Clinical Trials Information" at the top. Below the title, there are several sections with checkboxes and text boxes, including "Study Population Characteristics", "Protection and Monitoring Plans", and "Protocol Synopsis". The form is designed to collect detailed information about human subjects research and clinical trials.

## NOT-OD-17-062 Forms E – Helpful Links and Info

<https://grants.nih.gov/grants/how-to-apply-application-guide/forms-e/general/g.500-phs-human-subjects-and-clinical-trials-information.htm>

Please share this link with your PI's.

## NOT-GM-18-011 MIRA R35 Letter of Support

- Letter of support from the institution's Authorized Organizational Representative (AOR) for submission of an application to PAR-17-094 "Maximizing Investigators' Research Award (R35)"
- Upload the Letter of Support to Section 9 of the Research Plan form
- Applications that omit this letter, or that do not indicate their acceptance of the conditions of an award, will be withdrawn without review.
- Contact our office if you need an example of the format

## NOT-OD-18-1017 Enforcement of Closeout Policy

- NIH recipients must submit within 120 days:
  - Final Federal Financial Report (FFR)
  - Final Research Performance Progress Report (F-RPPR)
  - Final Invention Statement
- Failure to submit timely reports may cause Unilateral Closeout resulting in:
  - corrective actions
  - withholding of further awards
  - suspension or termination

## NOT-OD-18-1017 Enforcement of Closeout Policy

**From:** Stone, Barrie  
**Sent:** Monday, January 29, 2018 11:06 AM  
**To:** Administrator & PI  
**Subject:** close out language sent to PI and Admin

**The Final Research Performance Progress Report (FRPPR)** is submitted through the Commons in a format similar to the annual Research Performance Progress Report (RPPR). Further guidance and screenshots can be found here: [https://era.nih.gov/erahelp/commons/Commons/status/closeout/Final\\_RPPR.htm](https://era.nih.gov/erahelp/commons/Commons/status/closeout/Final_RPPR.htm)

Please note that Section D.1 Participants is REQUIRED for the FRPPR. Your administrator, CC'ed on this email, should be able to assist in providing you the information and assistance needed to complete this section. Unlike the Annual Progress Report (RPPR), a FRPPR cannot be accessed by a delegate or routed to a delegate for assistance.

It must be completed under your Commons Account.

**Once the FRPPR is completed and no errors are found on validation it can be submitted directly to the NIH. It does not require routing to our office for review.**

**The Final Invention Statement** is also done electronically through the Commons. **There is no need to complete and submit a paper form.**

Please see attached guidance on submitting a Final Invention Statement through the Commons. The Final Invention statement does require verification and submission by the Office of Sponsored Programs. We will receive automatic notification directly from the Commons when your part has been completed.

**The Final Federal Financial Report** is uploaded and submitted by Grant Accounting. No action is required on your part.

If you have any questions, please do not hesitate to ask!

## NOT-OD-18-1017 Enforcement of Closeout Policy

**From:** [XXXXXXXX@od.nih.gov](mailto:XXXXXXXX@od.nih.gov)  
**Sent:** Monday, January 29, 2018 12:36 AM  
**To:** Research Funding <[ResearchFunding@umassmed.edu](mailto:ResearchFunding@umassmed.edu)>  
**Cc:** [XXXXXXXX@umassmed.edu](mailto:XXXXXXXX@umassmed.edu)  
**Subject:** CONTINUING FEDERAL NON-COMPLIANCE, Closeout of Grant 5R21NS095635-02

Dear Signing Official:

This is in follow up to our letters dated 09/06/2017 and 12/30/2017 regarding the closeout documents for the above referenced grant. In accepting the grant, your institution agreed to comply with our policies, including the requirement for submitting final reports in a timely manner. Despite our efforts, the following report, identified below, are now 30 days or more past due or the report submitted was unacceptable;

**Final Research Performance Progress Report (FRPPR):** An FRPPR is required, per section 8.6.2 of the NIH Grants Policy Statement. NIH requires submission of the FRPPR via the eRA Commons at <https://commons.era.nih.gov/commons>. Information on the FRPPR, including screenshots and an instruction guide, may be found at: <http://grants.nih.gov/grants/rppr/index.htm>

**Final Invention Statement (HHS 568):** The Final Invention Statement form is located at <http://grants.nih.gov/grants/forms.htm>

We are concerned that your institution has been unable to comply with the terms and conditions of the award by submitting the required closeout documents. As previously noted, failure to submit timely and accurate closeout documents may affect future funding to the organization. Additionally, without UNIV OF MASSACHUSETTS MED SCH WORCESTER's cooperation in submitting acceptable final reports, NIH may take unilateral action to close the grant as a measure of last resort, and may also take additional actions, including, but not limited to, enforcement actions that may affect future funding. Unilateral closeout is a measure of last resort.

Again, you are reminded that the immediate submission of these reports is imperative.

Please contact me if you have questions.

Sincerely,

|  
Grants Closeout Specialist

# PROPOSAL SUBMISSIONS TO OSP

## December 2016 – December 2017

	December 2016	January 2017	February 2017	March 2017	April 2017	May 2017	June 2017	July 2017	August 2017	September 2017	October 2017	November 2017	December 2017
Count	48	103	108	90	52	87	98	47	64	102	112	54	53
On Time	46%	53%	52%	55%	40%	46%	47%	57%	45%	52%	46%	48%	53%
Late	46%	41%	43%	44%	58%	54%	50%	34%	49%	45%	51%	50%	41%
After the fact	8%	5%	5%	1%	2%	0%	3%	9%	6%	3%	3%	2%	6%
Withdrawn	0%	1%	0%	0%	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)	33%	22%	28%	33%	44%	28%	36%	21%	34%	27%	36%	30%	25%

**On Time:** Received by OSP 5 business days prior to the requested return date.

**Late:** Received by OSP less than 5 business days prior to the requested return date.

**After the Fact:** Received by OSP after the requested return date.

**Expedited Request** Received by OSP with 3 business days or less to review before requested return date.

# PROPOSAL SUBMISSIONS TO OSP

## December 2016 – December 2017

PROPOSALS	2016	2017	Change
Count	48	53	+5
On Time	46%	53%	+7
Late	46%	41%	-5
After the fact	8%	6%	-2
Withdrawn	0%	0%	-
<b>Total</b>	<b>100%</b>	<b>100%</b>	-
Expedited Request (3 days or less)	33%	25%	-8

**On Time:** Received by OSP 5 business days prior to the requested return date.

**Late:** Received by OSP less than 5 business days prior to the requested return date.

**After the Fact:** Received by OSP after the requested return date.

**Expedited Request** Received by OSP with 3 business days or less to review before requested return date.

# PROGRESS REPORT SUBMISSIONS TO OSP

## December 2016 – December 2017

	December 2016	January 2017	February 2017	March 2017	April 2017	May 2017	June 2017	July 2017	August 2017	September 2017	October 2017	November 2017	December 2017
Count	35	43	38	59	50	51	49	30	23	34	23	34	36
On Time	63%	68%	58%	54%	62%	59%	63%	37%	52%	47%	61%	65%	56%
Late	37%	30%	39%	42%	32%	35%	29%	50%	39%	29%	26%	29%	36%
After the fact	0%	2%	3%	4%	6%	6%	8%	13%	9%	24%	13%	6%	8%
<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)	23%	21%	32%	25%	26%	22%	22%	40%	26%	24%	9%	21%	19%

**On Time:** Received by OSP 5 business days prior to the requested return date.

**Late:** Received by OSP less than 5 business days prior to the requested return date.

**After the Fact:** Received by OSP after the requested return date.

**Expedited Request** Received by OSP with 3 business days or less to review before requested return date.

# PROGRESS REPORT SUBMISSIONS TO OSP

## December 2016 – December 2017

PROGRESS REPORTS	2016	2017	Change
Count	35	36	+1
On Time	63%	56%	-7
Late	37%	36%	-1
After the fact	0%	8%	+8
<b>Total</b>	<b>100%</b>	<b>100%</b>	-
Expedited Request (3 days or less)	23%	19%	-4

**On Time:** Received by OSP 5 business days prior to the requested return date.

**Late:** Received by OSP less than 5 business days prior to the requested return date.

**After the Fact:** Received by OSP after the requested return date.

**Expedited Request** Received by OSP with 3 business days or less to review before requested return date.

# APPENDIX

## NIH Forms E Human Subject Clinical Trial Forms

HS/CT Forms and Documents	Human Subjects, Exemption 4	Human Subjects, no Clinical Trial	Clinical Trial
Study Record Form	Required	Required	Required
Study Record Form: Section 1, 2, 3	Required	Required	Required
Study Record Form: Section 4-5	Do not complete	Do not complete	Required
Inclusion of Women, Minorities, & Children section 2.4	Required	Required	Required
Recruitment and Retention Plan section 2.5	Not required	Required if study involves human participants	Required
Study Timeline section 2.7	Not required	Required if study involves human participants	Required
Inclusion Enrollment Report	Not required	Required	Required
Protection of Human Subjects section 3.1	Not required	Required for all non-exempt research. For exempt, provide justification for exemption.	Required
Single IRB section 3.2	Required only for Multi-site study	Required only for Multi-site study	Required only for Multi-site study
Data and Safety Monitoring Plan section 3.3	Optional	Optional	Required
Overall Structure of the Study Team section 3.5	Optional	Optional	Required
Statistical Design and Power section 4.4	Do not include	Do not include	Required
FDA Regulated Intervention section 4.6A	Do not include	Do not include	Required for FDA-regulated intervention study
Dissemination Plan section 4.7	Do not include	Do not include	Required
Other Requested Information	Do not include	Do not include	As required by the FOA

## New NIH "FORMS-E" Grant Application Forms and Instructions Coming for Due Dates On or After January 25, 2018

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Notice Number: NOT-OD-17-062

### Key Dates

**Release Date:** April 27, 2017

### Related Announcements

[NOT-OD-18-004](#)

[NOT-OD-17-119](#)

[NOT-OD-17-114](#)

[NOT-OD-16-147](#)

[NOT-OD-17-043](#)

[NOT-OD-18-009](#)

### Issued by

National Institutes of Health ([NIH](#))

### Purpose

This notice informs the biomedical and health services research communities of changes to grant application form and application guide instructions for due dates on or after January 25, 2018.

### Focus of changes:

- Consolidation of human subjects, inclusion enrollment, and clinical trial information previously collected across multiple agency forms
- Expansion and use of discrete form fields for clinical trial information to
  - provide the level of information needed for peer review;
  - lead applicants through clinical trial information collection requirements;
  - present key information to reviewers and agency staff in a consistent format; and
  - align with ClinicalTrials.gov (where possible) and position us for future data exchange with ClinicalTrials.gov
- Incorporation of recent Grants.gov changes to R&R Budget and SBIR/STTR Information forms

These changes will be implemented with application form packages identified with a Competition ID of "FORMS-E" and associated application guide instructions. See [High-level Summary of Form Changes in FORMS-E Application Packages](#) for a full list of changes.

### Effective Date

Applicants must use FORMS-E application packages for due dates on or after January 25, 2018 and must use FORMS-D application packages for due dates on or before January 24, 2018. Applications submitted using the wrong forms for their intended due date will not be reviewed.

### Availability of FORMS-E Application Guides

Application guides for FORMS-E application packages will be posted to the [How to Apply - Application Guide](#) page no later than October 25, 2017.

### Availability of FORMS-E Application Packages

We will begin posting new funding opportunity announcements (FOAs) with FORMS-E application packages on October 25, 2017.

- New FOAs posted before October 25, 2017 with initial due dates on or after January 25, 2018 will be posted without application forms. Application packages will be added to these FOAs by November 10, 2017.

All [NIH "parent" announcements](#) that use standard due dates will be expired and reissued with new FOA numbers, FORMS-E application packages and instructions. The FORMS-E parent announcements will be posted no later than 60 days before their standard due date. For a transition period, both FORMS-D and FORMS-E parent announcements will be active. Applicants must choose the announcement with the appropriate application package for their due date (see table below).

All active FOAs with due dates both before and after January 25, 2018 will be updated to add FORMS-E application packages between October 25, 2017 and November 25, 2017. For a transition period, both FORMS-D and FORMS-E application packages will be active. Applicants must choose the appropriate application package for their due date when presented with both FORMS-D and FORMS-E application packages on the same FOA (see table below).

If your due date is...	You must use...
<p>On or before January 24, 2018, including:</p> <ul style="list-style-type: none"> <li>• Applications submitted for due dates on or before January 24, 2018</li> <li>• Applications submitted under <a href="#">NIH Late Policy</a> 2-week window of consideration for intended due dates on or before January 24, 2018</li> <li>• Applications submitted by February 7, 2018 under NIH <a href="#">Continuous Submission Policy</a> for January 7, 2018 AIDS intended due date</li> </ul>	FORMS-D application package
<p>On or after January 25, 2018, including:</p> <ul style="list-style-type: none"> <li>• Applications submitted for due dates on or after January 25, 2018</li> <li>• All application types (New, Resubmission, Renewal, Revision)</li> <li>• Applications submitted early for intended due dates on or after January 25, 2018</li> </ul>	FORMS-E application package

Additional guide notices for individual FOAs with unique due date considerations will be issued as needed and referenced in the Related Notices section of each FOA.

### **Form Update Timing for Administrative Supplement, Successor-in-Interest (Type 6) and Change of Institution (Type 7) Parent Announcements**

Parent announcements for administrative supplements and post award administrative actions (successor-in-interest and change of institution applications) do not have set due dates and, consequently, will follow a different timeline than other parent announcements.

The FOAs in the table below will be reissued with new FOA numbers, FORMS-E application packages and instructions on January 25, 2018. Applications started on or after January 25, 2018 must use the new FOAs and FORMS-E application packages.

These FOAs will expire on February 25, 2018 giving applicants one month to complete their initiated FORMS-D applications.

FOA#	FOA Title
<a href="#">PA-16-285</a>	Change of Grantee Organization (Type 7 Parent)
<a href="#">PA-16-286</a>	Successor-in-Interest (Type 6 Parent)
<a href="#">PA-16-287</a>	Administrative Supplements to Existing NIH Grants and Cooperative Agreements (Admin Supp)
<a href="#">PA-16-288</a>	Research Supplements to Promote Diversity in Health-Related Research (Admin Supp)
<a href="#">PA-16-289</a>	Research Supplements to Promote Re-Entry into Biomedical and Behavioral Research Careers (Admin Supp)

### Applications Proposing Clinical Trials

As previously announced, all applications involving clinical trials must be submitted to FOAs specifically designed for clinical trials beginning with due dates on or after January 25, 2018 ([NOT-OD-16-147](#), [NOT-OD-17-043](#)).

We will take the following steps to accommodate this new policy:

- Issue new clinical trial FOAs with clinical trial-specific review criteria, FORMS-E application packages, and FORMS-E instructions for due dates on or after January 25, 2018
- Add a new "Clinical Trials" item to the table in Section II of all FOAs (just below "Application Types Allowed") which will include one of the following statements:
  - Only accepting applications that propose clinical trial(s)
  - Only accepting applications that do **not** propose clinical trials
  - Accepting applications that either propose or do not propose clinical trial(s)
- Expire existing (FORMS-D) clinical trial FOAs by January 24, 2018

### Resources:

- [High-level Summary of Form Changes in FORMS-E Application Packages](#)
- [Annotated Form Set for NIH Grant Applications](#)
- [Do I Have the Right Form Version For My Application?](#)
- [Application Forms, Form Updates, and Choosing the Correct Forms FAQs](#)

### Inquiries

Please direct all inquiries to:

NIH Grants Information

Email: [grantsinfo@od.nih.gov](mailto:grantsinfo@od.nih.gov) (preferred method of contact)

Telephone: 301-945-7573

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[Weekly TOC for this Announcement](#)  
[NIH Funding Opportunities and Notices](#)

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## Reminder of Required Letter of Support for PAR-17-094 "Maximizing Investigators' Research Award (R35)"

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Notice Number: NOT-GM-18-011

### Key Dates

**Release Date:** December 11, 2017

### Related Announcements

[PAR-17-094](#)

### Issued by

National Institute of General Medical Sciences ([NIGMS](#))

### Purpose

The purpose of this Notice is to remind applicants of the requirement for a letter of support from the institution's Authorized Organizational Representative (AOR) for submission of an application to [PAR-17-094](#) "Maximizing Investigators' Research Award (R35)".

### Part 2. Section IV.2. PHS 398 Research Plan

Note that a letter of support is required from the institution's Authorized Organizational Representative (AOR) indicating acceptance of the conditions of the MIRA as defined in the instructions for the Letter of Support attachment on the PHS 398 Research Plan form. PD/PIs are encouraged to work with their AOR to make sure this letter is included in this section of the application. Applications that omit this letter, or that do not indicate their acceptance of the conditions of an award, will be withdrawn without review.

### Inquiries

Please direct all inquiries to:

Vernon Anderson, Ph.D.

National Institute of General Medical Sciences (NIGMS)

Telephone: 301-594-3827

Email: [NIGMS EstPI MIRA@mail.nih.gov](mailto:NIGMS_EstPI_MIRA@mail.nih.gov)

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## NIH Enforcement of Closeout Policies

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Notice Number: NOT-OD-18-107

### Key Dates

**Release Date:** November 30, 2017

### Related Announcements

[NOT-OD-17-085](#)

[NOT-OD-17-022](#)

[NOT-OD-15-136](#)

[NOT-OD-15-135](#)

[NOT-OD-15-111](#)

[NOT-OD-14-084](#)

### Issued by

National Institutes of Health ([NIH](#))

### Purpose

The purpose of this Notice is to alert the NIH extramural community that NIH is strengthening enforcement of longstanding closeout requirements, outlined in the NIH Grants Policy Statement [Section 8.6](#), Closeout. NIH has consistently reminded recipients of their responsibility to submit timely, accurate final grant expenditure reports, and has communicated the critical need for recipients to reconcile cash transaction reports submitted to the HHS Payment Management System (PMS) with expenditure reports submitted to NIH. In order to fulfill agency requirements under the Grants Oversight and New Efficiency (GONE) Act and HHS grants policy, NIH will no longer delay the closeout of awards unless the recipient submits a prior approval request to the IC providing an acceptable written justification.. Without prior approval from the awarding IC, NIH will initiate unilateral closeout for all awards that fail to meet closeout requirements within 120 days as required by the NIH Grants Policy Statement (NIH GPS) Section 8.6. **See below for details.**

## Background

### Recipient Responsibilities

The requirement for timely closeout is generally a recipient responsibility. However, NIH may initiate unilateral closeout if a recipient does not provide timely, accurate closeout reports or does not respond timely to NIH requests to reconcile discrepancies in grant records.

NIH recipients must submit a Final Federal Financial Report (FFR), Final Research Performance Progress Report (F-RPPR), and Final Invention Statement and Certification (FIS) within 120 calendar days of the end of the period of performance (project period), as required in section [8.6](#) of the NIH GPS. The reports become overdue the day after the 120 calendar day period ends. Cash transaction data continues to be submitted directly to and processed by PMS. It is the recipient's responsibility to reconcile reports submitted to PMS and to the NIH awarding Institute or Center.

### NIH Actions

NIH is committed to addressing and reducing grant closeout delays and to enhance compliance with HHS regulations and policies, and the GONE Act. Therefore, NIH will strictly enforce its closeout policies. When recipients fail to submit timely reports, NIH will initiate unilateral closeout. It is important to note that for financial closeout, if a recipient fails to submit a final expenditure FFR, HHS policy directs NIH to close the grant using the last accepted Federal Cash Transaction Report's cash drawdown amount. This could be considered a debt or result in disallowed costs. In addition, failure to correct recurring reporting problems may

cause NIH to take one or more actions that may include, but are not limited to, corrective actions, withholding of further awards, suspension or termination.

## Inquiries

Please direct all inquiries to:

Division of Grants Policy  
Office of Policy for Extramural Research Administration  
Office of Extramural Research  
Telephone: 301-435-0949  
[GrantsPolicy@od.nih.gov](mailto:GrantsPolicy@od.nih.gov)

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