
NIH – What is New? What is Coming Soon?

Norka Ruiz Bravo, PhD

Deputy Director for Extramural Research, NIH

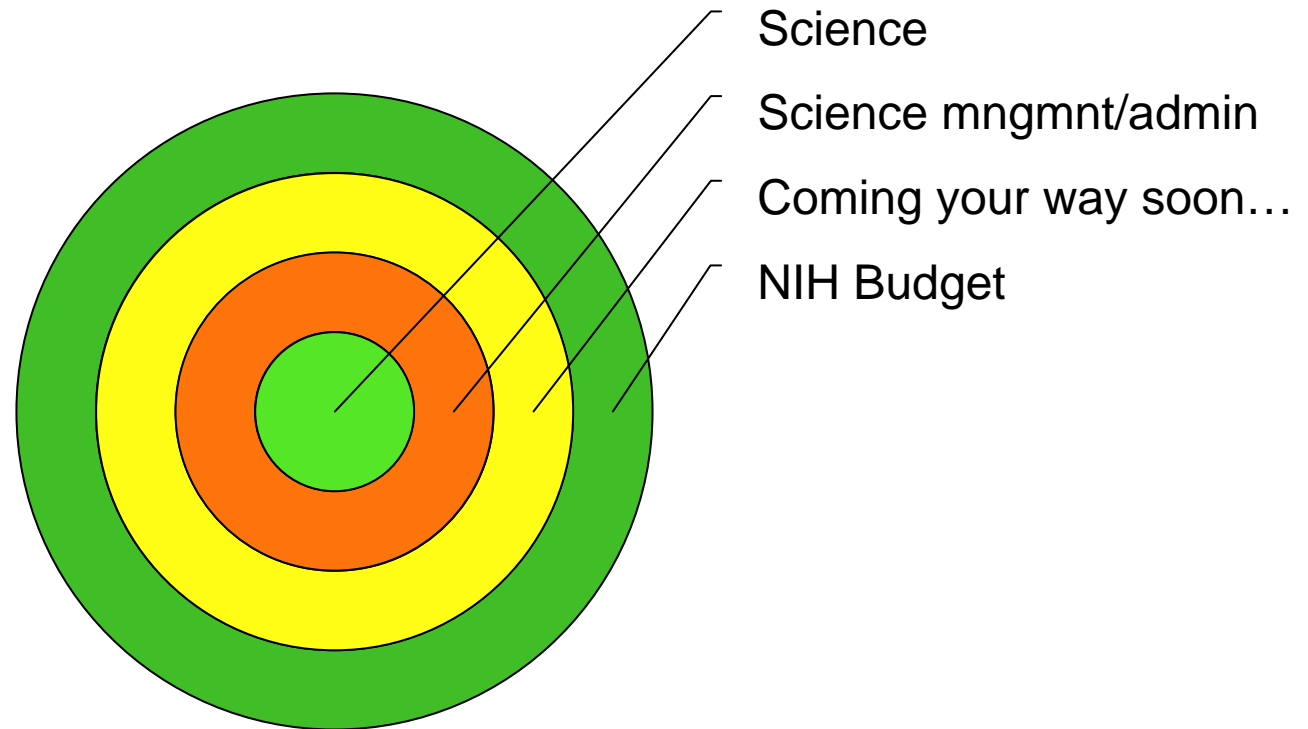
Bioengineering Research Partnership

Fifth Annual Grantees Meeting

15 August 2005



Today's conversation – What is new? What is coming soon?



Part 1 - Science – What is new?

What is coming your way?

- Trans-NIH
 - Roadmap (FY2004 -)
 - NIH Strategic Plan for Obesity Research (FY2005 -)
 - Neurosciences Blueprint (FY2006 -)
- Institute and Center specific initiatives

RFA's and PA's are posted in the NIH Guide for Grants & Contracts

<http://grants1.nih.gov/grants/guide/index.html>

Science - Themes of the Roadmap

**New Pathways
to Discovery**



**Research Teams
of the Future**

**Re-engineering the
Clinical Research
Enterprise**

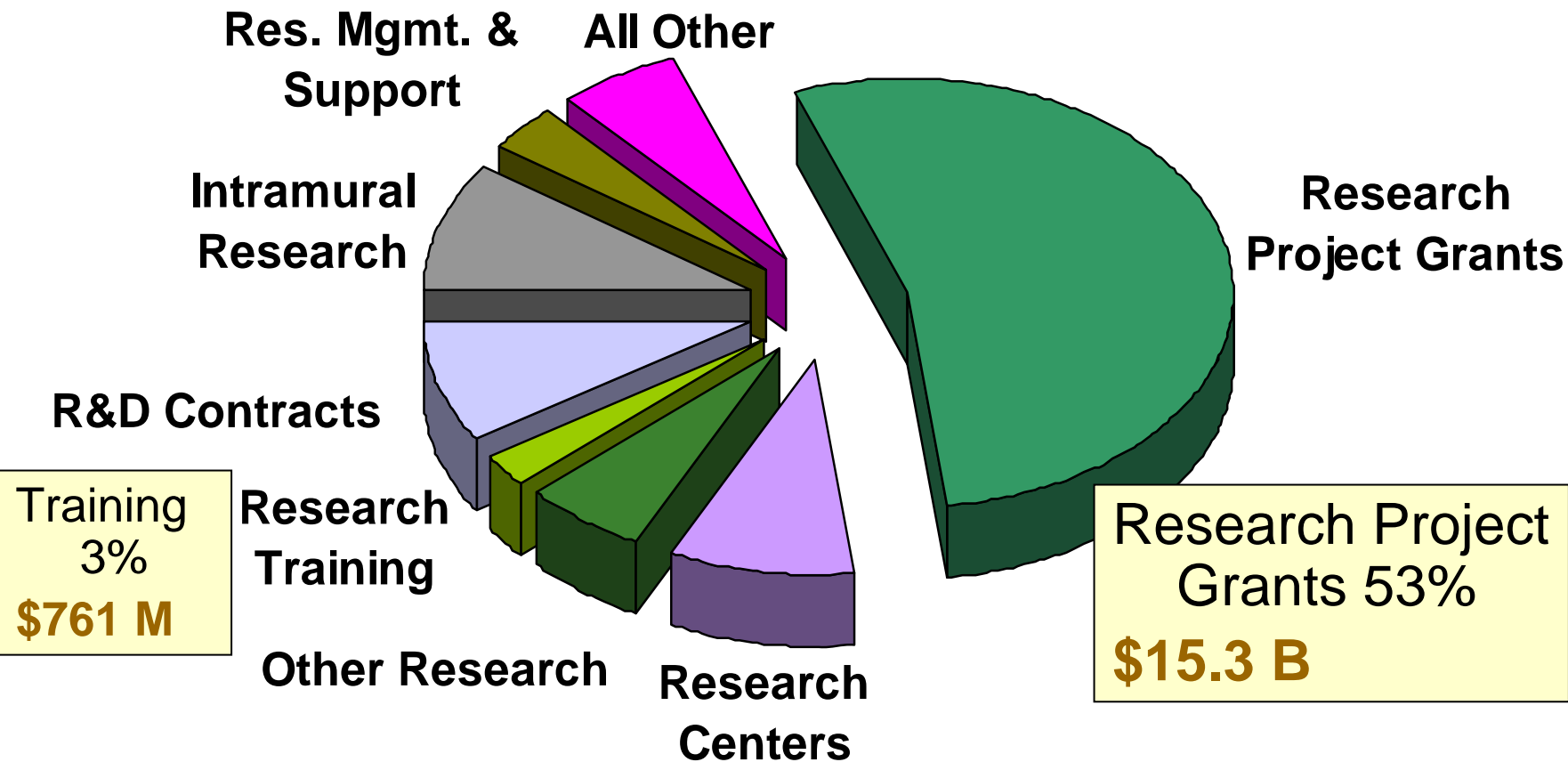
Science – New for Roadmap

- **Notice:** Intention to Re-issue NIH Roadmap RFA, “Training for a New Interdisciplinary Research Workforce”
- **Meeting:** NIH Director’s Pioneer Award Symposium
- **Meeting:** Information About the Upcoming Interdisciplinary Research Consortium Program of the NIH Roadmap
- **PAR:** Solicitation of Assays for High Throughput Screening (HTS) in the Molecular Libraries Screening Centers Network (MLSCN) (Re-issuance of PAR-05-060)
- **Notice:** Request for Information on the Plan to Recognize Multiple Principal Investigators on NIH Grants

<http://www.nihroadmap.nih.gov>

Part 2 – Budget – FY2005 Budget

\$28.59 Billion



Budget - FY2006 President's Request

- \$28.740 billion
 - ~ .5% increase over FY 2005
- Approximately 9,463 competing RPG awards
 - ~ 247 over FY 2005
- Major initiatives
 - NIH Roadmap
 - Biodefense
 - Neuroscience Blueprint
 - AIDS

Part 3 - Science Management and Administration

- Portfolio management and trans-NIH science investments
 - Public Access Policy
 - Knowledge Management
 - OPASI
- Facilitating multidisciplinary collaborative research
- New Investigators

New Policy - Public Access to Publications Resulting from NIH-funded Research

NIH-funded investigators are requested to submit to the NIH National Library of Medicine's (NLM) PubMed Central (PMC) an electronic version of the author's final manuscript upon acceptance for publication, resulting from research supported, in whole or in part, with direct costs from NIH.

Effective May 2, 2005

NIH Guide, February 3, 2005

Why Public Access?

ARCHIVE Keep a central archive of NIH-funded research publications—for now and in the future, preserving vital medical research results and information for years to come.

ADVANCE SCIENCE Create an information resource that will make it easier for scientists to mine medical research publications, and for NIH to better manage its entire research investment.

ACCESS Provide electronic access to NIH-funded research publications for patients, families, health professionals, teachers, and students.

Public Access Policy – Update & Resources

- How are we doing so far?
- What will our next steps be?
- Submit your final, peer reviewed manuscript at <http://www.nihms.nih.gov/>

Public Access Policy Web site:

<http://www.nih.gov/about/publicaccess/index.htm>

The need for Knowledge Management...

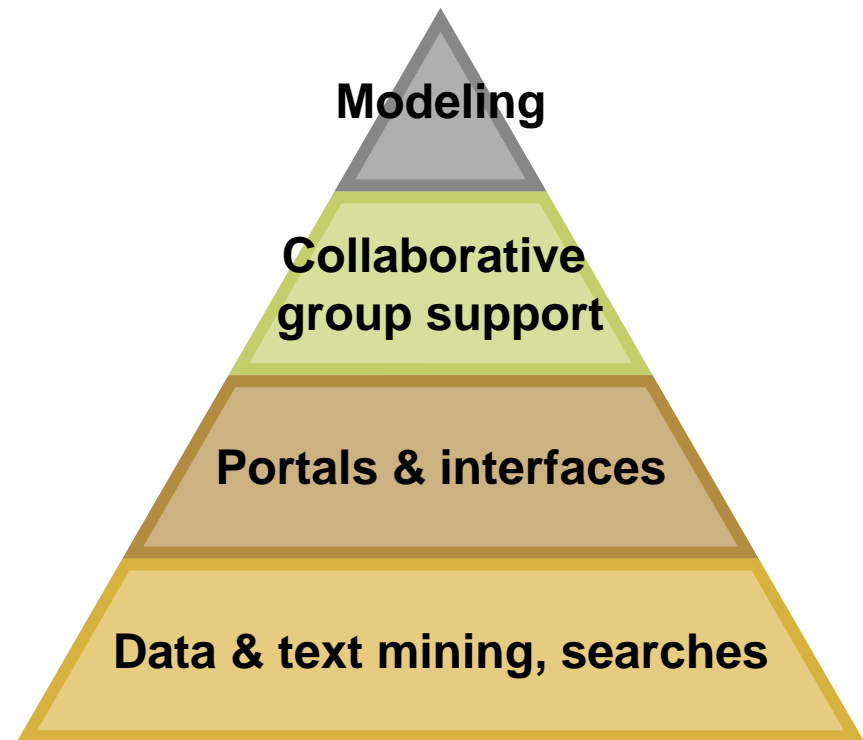


Knowledge Management – what are we talking about?

- **Definition** = formalization of the management of the enterprise's intellectual assets (human, organizational, relationship)
- **Definition** = distribution, access, and retrieval of unstructured information about “human experiences” between interdependent individuals or among members of a workgroup.
 - Involves identifying a group of people that have a need to share knowledge; developing technological support to enable sharing; and creating a process for transferring and disseminating that knowledge.

How does KM technology work?

- Depends – there are many tools for the various aspects/functions of KM and the kind of data (structured or unstructured): some NIH-relevant examples of KM functions to the right



Knowledge Management – how would NIH benefit from application of KM?

- Disease coding
 - Peer review
 - Referral and assignment of applications
 - Identification of peer reviewers
 - Portfolio analysis
 - Scientific trend analysis
 - Clinical relevance recognition tools
 - Need-to-know-based security screening
 - Clinical Center – clustering of clinical research
 - Office of Technology Transfer – patent and royalties management
-

Office of Portfolio Analysis and Strategic Initiatives (OPASI)

Function: Enhance the NIH priority-setting process while improving trans-agency coordination

Will be achieved through

- ❑ Sound decision-support systems
- ❑ Rigorous and uniform sources of evidence
- ❑ Broad public and scientific input

Will result in

- ❑ Identification of crosscutting research requiring common investment
 - ❑ Optimal balance between scientific opportunity and public health concerns
 - ❑ Enhanced accountability to Congress, scientists, patients, and the public
-

Facilitating Collaborative / Multidisciplinary Research

- Acknowledge multiple PI's in proposals and agency information systems
- Have stable and predictable support for research facilities and instrumentation independent of individual projects
- Support graduate and postdoctoral students with regard to salary, stipends, tuition, benefits, etc.
- Foster collaborations between universities, federal laboratories, and industry

Multiple PIs - Features

- Permit more than one Principal Investigator on grants, cooperative agreements and contracts
 - Named PIs responsible and accountable for the proper conduct of the project and requirements and reports
 - All Principal Investigators identified on notices of grant award and in NIH reports
- Encourage collaboration and interdisciplinary research
- Recognize the contributions of PIs and other Key Personnel on the project

NIH Request for Information (RFI)

- Coordinate with Office of Science and Technology Policy (OSTP) Request for Information
 - Probe level of support for overall concept of Multiple-PIs across all federal agencies
- NIH
 - Issued on July 29, 2005 in the NIH Guide
 - Collection of information through September 16, 2005
 - Collect input using structured website
 - Probe three issues
 - Interest in apportionment of award dollars to each PI
 - Value of NIH reports that rank medical school departments by number of awards and dollars – Impact of multiple-PI
 - Potential use of linked awards when PIs are at different institutions
 - Report on findings

New Investigators

Resources for New Investigators - Microsoft Internet Explorer

File Edit View Favorites Tools Help

NATIONAL INSTITUTES OF HEALTH
Office of Extramural Research

NIH Home
OER Home

Hide Graphics Search
Powered by Google Advanced Search

Resources for New Investigators

OER Home
Funding Opportunities
Applications & Forms
Awarded Grants
Grants Policy
eRA
About OER

Statement of Commitment to New Investigators

New investigators are the innovators of the future – they bring fresh ideas and technologies to existing biomedical research problems, and they pioneer new areas of investigation. Entry of new investigators into the ranks of independent, NIH-funded researchers is essential to the health of this country's biomedical research enterprise. NIH's interest in the training and research funding of new investigators is understandably deep and longstanding. Over the years, special programs to assist new investigators in obtaining independent research funding have been created – for example the New Investigator Research Award (NIRA or R23), in 1977, and the First Independent Research Support and Transition (FIRST or R29) Award, which superseded the NIRA in 1986. Both of these special programs were discontinued because neither was able to significantly and positively affect the overall ability of new investigators to obtain independent research support (see [Report of the Working Group on New Investigators](#)). In spite of these and other efforts, the average age at which an investigator first obtains R01 funding has increased by five to six years (to 42 for PhD degree holders and 44 for MD and MD/PhD degree holders). In addition, although the overall numbers of new R01 investigators increased, the proportion of R01 grants going to new investigators has remained at approximately 6% of the total R01s awarded throughout the doubling of the NIH budget.

Currently, NIH encourages new investigators to self-identify by checking a box on the face page of their R01 applications so that they can be given special consideration. Applicants are instructed to focus more on the proposed approach than on the track record, and to expect less preliminary data than would be provided by an established investigator. At many NIH institutes and centers give new investigators special consideration in their selection for funding, and in some cases provide five years of funding at the NIH average duration for a grant.

We at NIH remain committed to identifying and attracting new independent biomedical researchers and will continue to explore ways to assist them. We cannot do it alone. Institutions – our partners in this venture – must continue to look for ways to reduce the duration of graduate and postdoctoral training, and to provide new investigators to complete successfully for extramural funding. I would welcome your ideas in this regard.

Norka Ruiz Bravo, PhD, Deputy Director for Extramural Research, NIH

History of Commitment to New Investigators

- [New Investigator Research Awards – June 3, 1977](#)
- [First Independent Research Support and Transition \(FIRST\) Award](#)
- [Report on the Workgroup on New Investigators](#)
- [Current Policies Related to New Investigators](#)
- [Transition of the FIRST Award to the R29 Award – December 19, 1997](#)

When applying for funding, applicants are considered new investigators if they have not previously served as the principal investigators (PI) on any Public Health Service grant other than a small grant (R03), an Academic Research Enhancement Award (R15), an exploratory/developmental grant (R21), or certain research career awards (K01, K08, and K12). Current or past recipients of Independent Scientist and Career Development awards (K02, K04) are not considered new investigators. (see <http://grants.nih.gov/grants/guide/notice-files/not97-231.html>)

Help with the Application Process

NIAID- National Institute of Allergy and Infectious Diseases

- [Who Can Qualify for an NIH Grant](#)
- [Overview of the Grant Application Process](#)
- [All about Grants Tutorial](#)

http://grants1.nih.gov/grants/new_investigators/index.htm

Part 4 - Coming your way soon...

- New process for reimbursement of NIH Peer Reviewers
 - What does each peer reviewer have to do?
 - Register w/ the US Treasury Central Contractor Registration (CCR)
 - You will need to obtain a Data Universal Numbering System (DUNS) number
 - Reimbursement will be made directly to your bank account
 - Effective for meetings that take place after 30 September 2005

<http://cms.csr.nih.gov/>

Coming soon – Electronic receipt of applications

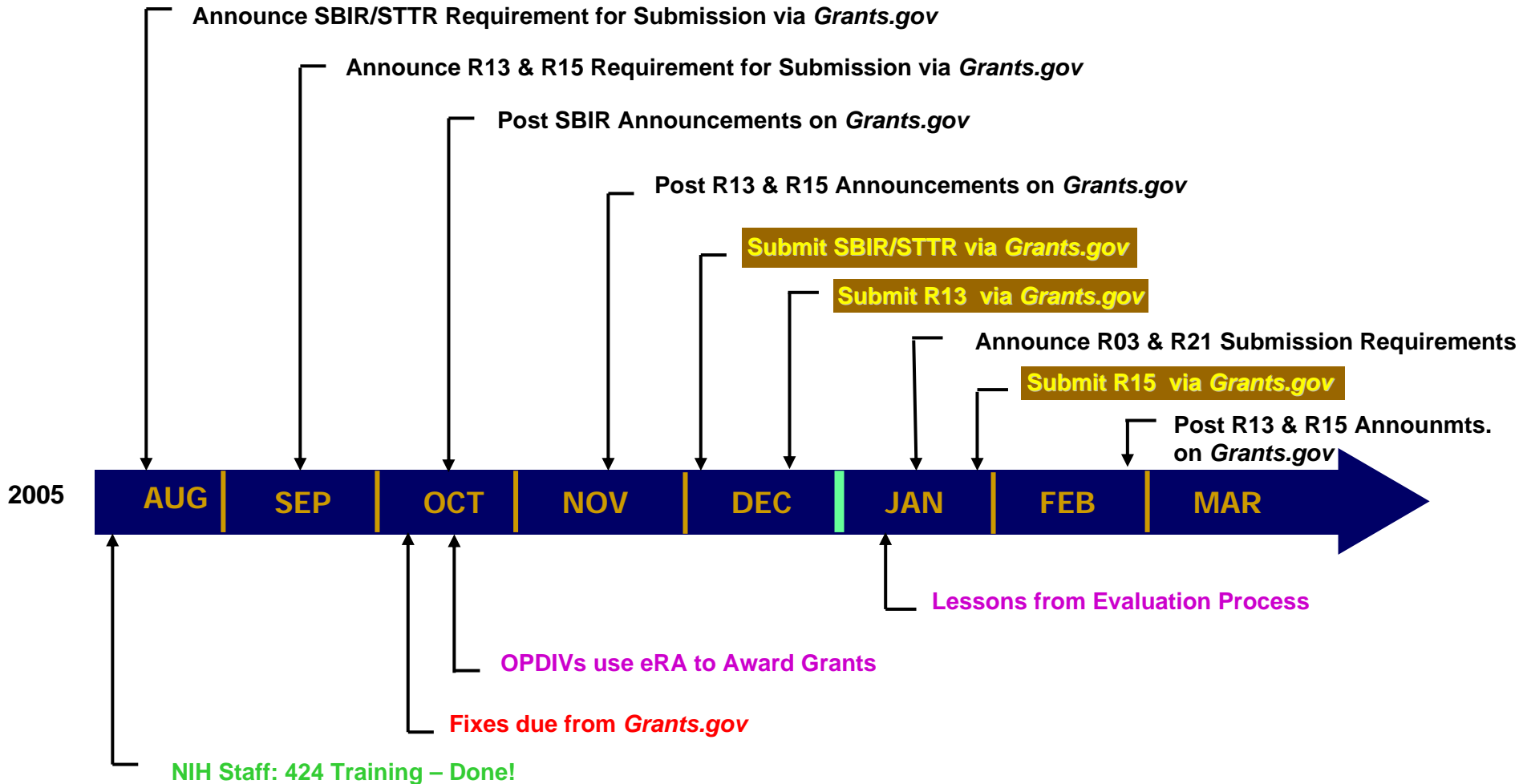
- And we want to do this because...???
- Creates a comprehensive repository of data that can be mined (KM and other tools)
- Facilitates achieving efficiencies to shorten the cycle from receipt of application to award
- Saves >200,000,000 pieces of paper/year (estimated) and countless hours of human effort
- “It’s the law...”
 - Paperwork Elimination Act (Public Law 105-277)
 - Public Law 106-107 and the President’s Management Agenda (mandates improving access to Federal grants via the Internet)

How will this work for me as PI or grantee institution?

- Download, complete and submit via Grants.gov
- Work w/ an SBIR service provider
- Become your own service provider by enabling your own system to interface with the NIH Competing Grants Process Interface

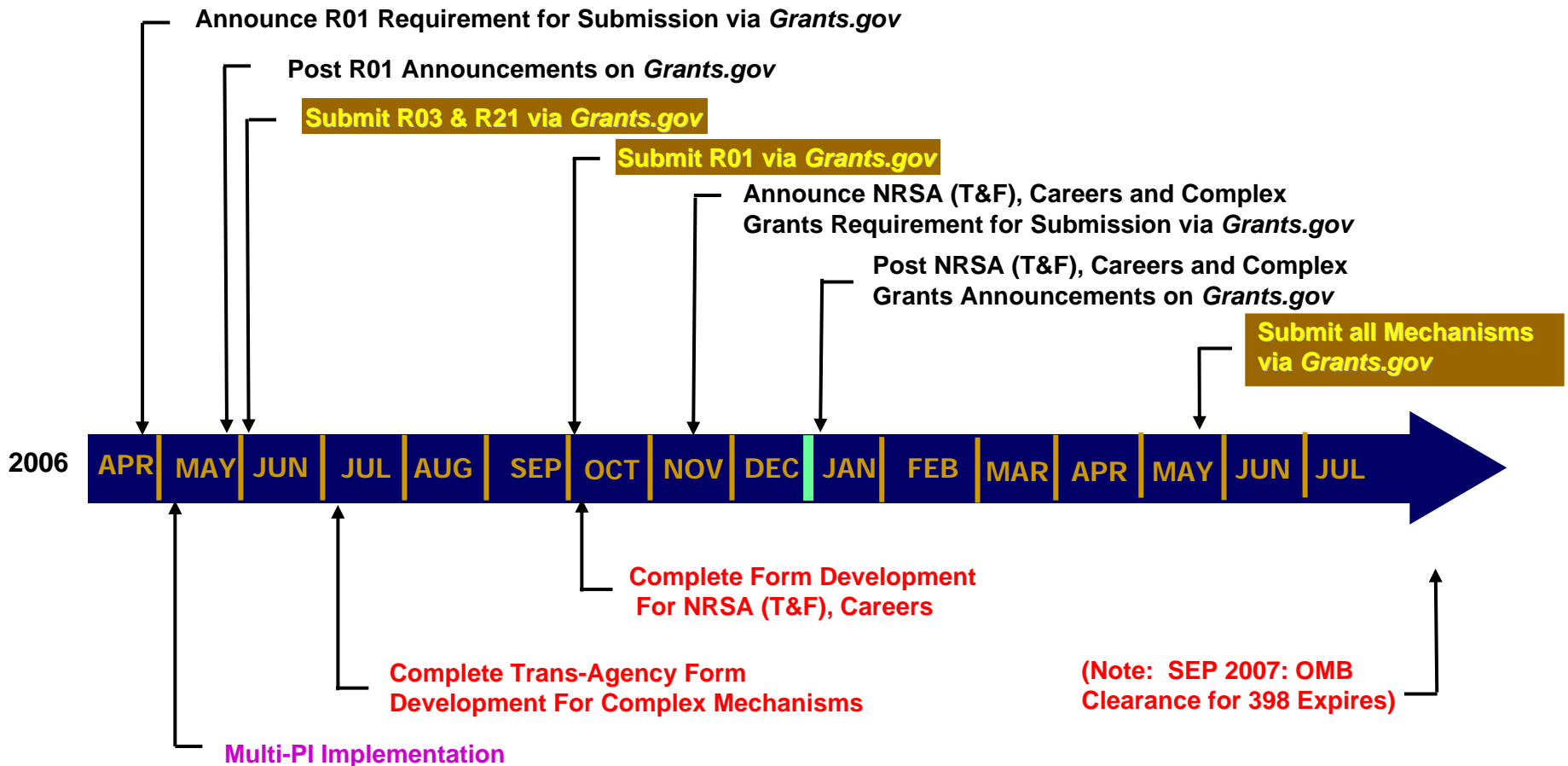
See if your institution is already registered in Commons (<http://era.nih.gov>)

Timeline: Submission of Grant Applications through *Grants.gov* Using 424 (R&R)



As of 15 August 2005

Timeline: Submission of Grant Applications through *Grants.gov* Using 424 (R&R) (Cont.)



Thank you very much for your attention...

