

**NATIONAL DEAFNESS AND OTHER COMMUNICATION DISORDERS
ADVISORY COUNCIL**

January 23, 2009

**National Institutes of Health
Bethesda, Maryland**

MINUTES

The National Deafness and Other Communication Disorders Advisory Council convened on January 23, 2009 in Building 31, Conference Room 10, National Institutes of Health (NIH), Bethesda, MD. Dr. James F. Battey, Jr., Director, National Institute on Deafness and Other Communication Disorders (NIDCD), served as Chairperson. In accordance with Public Law 92-463, the meeting was:

Closed: January 23, 2009: 8:30 a.m. to 10:50 a.m. for review of individual grant applications; and

Open: January 23, 2009: 10:50 a.m. to 2:00 p.m., for the review and discussion of program development needs and policy.

Council members in attendance:¹

Ms. Donna Bates Boucher
Dr. Margaretha Casselbrant
Dr. Karen Cruickshanks
Dr. Robert Davila
Dr. Albert Feng
Dr. Charles Greer
Dr. Jennifer Horner
Dr. Sharon Moss

Dr. Lorraine Ramig
Dr. Steven Rauch
Dr. Randall Reed
Dr. Mabel Rice
Dr. Allen Ryan
Dr. Anne Smith
Dr. William Yost

Council members absent:

Dr. Nathan Fischel-Ghodsian
Ms. Myrna Orleck-Aiello
Dr. Ernest Weymuller

¹For the record, it is noted that members absent themselves from the meeting when the Council is discussing applications (a) from their respective institutions or (b) in which a real or apparent conflict of interest might occur. This procedure applies only to individual discussion of an application and not to "en bloc" actions.

Ex-Officio Members Not Participating:

Dr. Lucille B. Beck
Dr. Michael E. Hoffer

The Council roster is found as Appendix 1.

Various members of the public, as well as NIDCD staff and other NIH staff, were in attendance during the open session of the Council meeting. A complete list of those present for all or part of the meeting is found in Appendix 2.

CLOSED SESSION

I. Call To Order and Opening Remarks Dr. James F. Battey, Jr.

The meeting was called to order by Dr. Battey, Director, NIDCD, who welcomed Dr. Robert Davila as a new member to the Council, and expressed appreciation to the entire Council for their service and advice. Dr. Robert Davila has been appointed to the Council and a more formal introduction to staff and other members of our audience is planned during the Open Session. Dr. Nathan Fischel-Ghodsian, Ms. Myrna Orleck-Aiello, Dr. Ernest Weymuller and Dr. Lucille Beck had scheduling conflicts which prevented them from attending this meeting.

II. Council Procedures Dr. Craig A. Jordan

Procedural Matters

Dr. Jordan discussed important procedural matters, including requirements imposed by the Government in the Sunshine Act and the Federal Advisory Committee Act. The necessity of members to avoid conflict of interest, or the appearance thereof, was stressed, as was the need to maintain confidentiality concerning the proceedings and materials related to the closed portion of the meeting. Dr. Jordan announced that the Council meeting would be closed for consideration of grant applications during the morning session, but would be open to the public at approximately 10:50 a.m.

III. Council Consideration of Pending Applications

The Council gave special attention to applications involving issues related to protection of human subjects, animal welfare, biohazards and/or women/minority/children representation in study populations as identified by the initial review groups. The Council individually discussed applications being considered for High Program Priority, from New Investigators, and whenever additional discussion was required.

A. Research Project Grant Awards

1. Consideration of Applications: On the Council's agenda was a total of 90 investigator-initiated research grant applications; 80 applications had primary assignment to NIDCD, in the amount of \$24.02 million first-year direct costs. It is anticipated that, of the applications competing at this Council, NIDCD will be able to award grants to R01 applications scoring up to the 20.9 percentile.

B. Special Programs Actions

1. Institutional National Research Service Awards (T32): The Council recommended support of eight applications.
2. Research Scientists Development Award (K08): The Council recommended support of two applications.
3. Mentored Patient-Oriented Research Career Development Awards (K23): The Council recommended support of one application.
4. Mid-Career Investigator Award in Patient-Oriented Research (K24): The Council recommended support of one application.
5. Small Grants (R03): The Council recommended support of ten applications.
6. NIH Support for Conferences and Scientific Meetings (R13): The Council recommended support of two applications.
7. NIH Exploratory/Development Research Grant Award (R21): The Council recommended support of six applications.
8. Small Business Innovation Research Awards (SBIR): The Council recommended support for nine Phase I (R43) applications and one Phase II (R44) application.
9. DC-08-003 Special Topic Education Course: Exploring Auditory and Vestibular Biology (R25): The Council recommended support of one application.

OPEN SESSION

IV. Opening Remarks..... Dr. Battey

Dr. Battey welcomed additional staff and visitors to the Open Session of the meeting and introduced Dr. Robert Davila as a new member of the Council:

- **Dr. Robert Davila** currently serves as the President at Gallaudet University in Washington, DC. He received his Ph.D. in Educational Technology from Syracuse University. Dr. Davila is a nationally known deaf leader in the areas of education and rehabilitation. He has extensive experience in educating deaf persons and public service. Dr. Davila has represented the American people as the Assistant Secretary for Special Education and Rehabilitative Services, a member of the National Council on Disability, and in numerous efforts to promote programs and services for individuals with disabilities. He is a member of

various professional organizations and is the past vice president for the National Technical Institute for the Deaf. Dr. Davila has received multiple honors and awards. He has published various articles and books and been a keynote speaker nationally and internationally for education and rehabilitation of people with disabilities.

Consideration of Minutes of the Meeting of September 12, 2008

Dr. Battey called members' attention to the minutes of the September 12, 2008 meeting of the Advisory Council. The minutes were approved as written.

Confirmation of Dates for Future Council Meetings

Dates for the Council meetings through September 2010 have been established. A list of these meetings was distributed to the Council members and posted on the web site prior to this meeting. The next meeting of Council is scheduled for Friday, June 5, 2009, in Building 31, Conference Room 10 on the NIH campus, Bethesda, Maryland.

V. Report of the Director, NIDCD Dr. Battey

Budget Considerations:

Dr. Battey began his presentation with a breakdown of the FY 2009 Budget, as based on the President's Requested amount. He discussed how the \$276.2 million available for research project grants in the FY2009 Budget will be allocated. From this total, \$9.5 million is reserved for Small Business Research grants, \$1.2 million for administrative supplements, \$207.8 million for commitments to noncompeting grants, \$1.3 million for carryover commitments from prior Council meetings, and \$12.7 million for program requirements. Twenty percent of the remaining \$49.5 million is designated for High Program Priority (HPP). Consequently, there is \$39.6 million available for the initial payline across the year's three Council meetings. This should allow funding of applications up to the 20.9 percentile. The \$9.9 million for HPP applications will be available to support additional applications. A copy of the slides Dr. Battey used for his budget presentation is included in Appendix 3.

VI. Report of the Division of Scientific Programs Dr. Cooper

Dr. Cooper introduced two new staff members in the Division of Scientific Programs (DSP). Dr. Chia-Wen Ko joined the DSP as a Program Director in the area of statistics. Dr. Janet Cyr joined the DSP as a Program Director in the areas of training and Hearing & Balance.

Dr. Cooper turned the podium over to Dr. Sklare, Research Training Officer, DSP.

Dr. Sklare:

Dr. Sklare presented on A Network of NIDCD-sponsored Short-Term Research Traineeships for the Emerging Generation of Audiologists. Research on the measurement of hearing, the clinical assessment of hearing disorders and the nonmedical habilitation and rehabilitation of hearing is uniquely within the province of audiology. Yet, the profession of audiology has undergone a major transition in the U.S. with the professional doctorate (Au.D. degree) now the standard educational track for training of clinical audiologists and the near demise of the research doctorate. Few of the

90+ active Au.D. training programs nationwide provide in-depth research training. The NIDCD recognized the need to partner with the academic leadership of the field in the research training of the emerging generation of audiologists. It has established a network of short-term (2-3 month) summer research traineeships for Au.D. students at hearing research-intensive institutions funded by Ruth L. Kirschstein NRSA Short-Term Institutional Research Training Grants (T35). These T35 programs provide hands-on mentored experience in clinical or translational hearing research, enabling students to conduct a small-scale research project and encouraging them to develop research career trajectories through pursuing sustained programs of research training and career development. Three programs (Boys Town National Research Hospital, National Center for Rehabilitative Auditory Research, and Vanderbilt University) were funded in FY07; one program (Washington University School of Medicine) was funded in FY08. For FY09, NIDCD funded 18 traineeships at these four research centers. These student trainees came from a multitude of academic institutions nationwide. NIDCD also provides support to travel the T35 trainees to the springtime American Auditory Society (AAS) Meeting in Scottsdale, AZ. All FY08 trainees are slated to present posters at an upcoming AAS Meeting. This program has provided the profession of audiology with a national model for integration of research into clinical Au.D. training programs.

VII. Report of the Director, Division of Extramural Activities Dr. Jordan

Dr. Jordan presented the Report of the Director, Division of Extramural Activities.

Endorsement of Council Operating Procedures

Dr. Jordan called Council's attention to a copy of the Council Operating Procedures which had been provided to each member prior to the meeting. The Council Operating Procedures state those actions which Council empowers staff to take without specific prior Council approval. It is the NIDCD's practice to review the Council Operating Procedures annually at the January meeting of Council. There were no changes to the document this year. Dr. Jordan reviewed the document and it was endorsed unanimously for the current year; a copy is included in these minutes as Appendix 4.

Inclusion of Women and Minorities in Research Populations

On a biennial basis, the advisory councils of the Institutes comprising the National Institutes of Health (NIH) are asked by the Office of Research on Women's Health to review the procedures used by their respective institutes to implement the 1994 NIH guidelines for the inclusion of women and minorities in clinical research. The current report provides inclusion data for FY2007 and FY2008 and information about NIDCD staff efforts and responsibilities. The previous review was performed in 2007. In preparing for this meeting, Council was asked to review NIDCD implementation of the 1994 NIH Guidelines, and to certify NIDCD's compliance with them.

The report entitled "2009 Biennial Advisory Council Report Certifying Compliance with Inclusion Guidelines, NIDCD" and four appendices to this report, containing background material, summary data tables, etc., were e-mailed to Council members and posted on the Council website to allow time for their review prior to the meeting. Dr. Jordan led the discussion of these guidelines, after which a vote was taken, unanimously confirming NIDCD compliance.

Enhancing Peer Review at NIH: An Update

Dr. Jordan provided an update on the trans-NIH efforts for Enhancing Peer Review since the report provided at the May Council meeting. Beginning in September 2008, the implementation groups formed over the summer began a phased implementation of selected actions. The four implementation groups are focused on 1) Engage the Best Reviewers, 2) Improve the Quality & Transparency of Review, 3) Ensure Balanced & Fair Reviews Across Scientific Fields and Career Stages, and 4) Continuous Review of Peer Review. Additional detail was provided about the scope of the goals assigned to the four implementation groups. Dr. Jordan next presented details of specific communications and training efforts that have been accomplished in the past few months. Communication and training efforts have been targeted to both internal NIH audiences as well as external communities. Full details are available on the website for this trans-NIH activity at: <http://enhancing-peer-review.nih.gov/>.

The update was concluded by reviewing a number of implementation features that have recently been announced in the NIH Guide (NOT-OD-09-023 and 024) with specific impact on Council meetings in FY2010 and 2011.

January 2009 Receipt Dates (*for potential FY2010 funding*)

- Early Stage Investigator (ESI) and New Investigator Policy (*NOT-OD-09-013*)
- New NIH Policy on Resubmissions (*NOT-OD-09-003*)

May 2009 Review Meetings (*for potential FY2010 funding*)

- 9-Point Scoring System
- Enhanced Review Criteria
- Formatted Reviewer Critiques
- Scoring of Individual Review Criteria
- Clustering of New Investigator Applications During Review

January 2010 Receipt Dates (*for potential FY2011 funding*)

- Shorter Applications for R01s and Other Mechanisms
- Restructured Applications to Align with Review Criteria

VIII. Scientific Presentation.....Dr. John Brigande

Dr. Battey introduced Dr. John Brigande, Assistant Professor of Otolaryngology at the Oregon Hearing Research Center. Dr. Brigande accepted our invitation to discuss his research in a presentation entitled “Generation of Functional Auditory Hair Cells in the Mammalian Cochlea by *in utero* Gene Transfer.” The following is an abstract of Dr. Brigande’s presentation:

“Generation of Functional Auditory Hair Cells in the Mammalian Cochlea by *in utero* Gene Transfer”

Sensory hair cells in the mammalian cochlea convert mechanical stimuli into electrical impulses that subserve audition. Loss of hair cells and their innervating neurons is the most frequent cause of hearing impairment. Atonal homolog 1 (Atoh1, also known as Math1) is a basic helix-loop-helix transcription factor required for hair cell development and its misexpression *in vitro* and *in vivo* generates hair-cell-like cells. Atoh1-based gene therapy to ameliorate auditory and vestibular dysfunction has been proposed. However, the biophysical properties of putative hair cells induced by Atoh1 misexpression have not been characterized. We have shown that *in utero* gene transfer of Atoh1 produces functional supernumerary hair cells in the mouse cochlea. The induced hair cells display stereociliary bundles, attract neuronal processes, and express the ribbon synapse marker C-terminal binding protein 2 (Ctbp2). Moreover, the hair cells are capable of

mechanoelectrical transduction and display basolateral conductances with age-appropriate specializations. Our results demonstrate that manipulation of cell fate by transcription factor misexpression produces functional sensory cells in the postnatal mammalian cochlea. We anticipate that our *in utero* gene transfer paradigm will enable the design and validation of gene therapies to ameliorate hearing loss in mouse models of human deafness.

IX. Scientific Presentation..... Dr. Julius Fridriksson

Dr. Battey introduced Dr. Julius Fridriksson, Associate Professor of Speech & Hearing Sciences at the University of South Carolina. Dr. Fridriksson accepted our invitation to discuss his research in a presentation entitled “Measuring ‘Brain Fitness’ to Predict Recovery from Aphasia.” The following is an abstract of Dr. Fridriksson’s presentation:

“Measuring ‘Brain Fitness’ to Predict Recovery from Aphasia”

Stroke is the most common cause of adult disability in the United States. Aphasia, a disorder commonly associated with stroke, refers to a language impairment caused by damage to the left hemisphere language areas. Most patients with aphasia receive speech therapy aimed at improving language processing and reducing the effect of the disorder on everyday life. Although aphasia treatment is commonly administered in various health care settings, only minimal prognostic information is available.

Various factors such as time-post stroke, patients’ age, and size of the brain damage are thought to be related to treatment outcome. It seems straight forward that the extent of brain damage would be associated with treatment outcome – to support recovery, the remaining brain tissue would have to assume language function lost due to the stroke. However, the viability of the remaining tissue to take over lost function would also have to be crucial. The purpose of our research is to measure the viability (i.e. brain fitness) of intact brain tissue following stroke and understand how it relates to treatment outcome. We measure three factors as potential predictors of treatment success: cerebral perfusion, white matter integrity, and gliosis. In addition to understanding how these factors relate to treatment outcome, we also study where plastic changes associated with treatment success occur in the brain.

So far, 20 participants have been enrolled in the research with 17 completing all aspects of the study. At the end of the second year of this five-year project, our results suggest brain plasticity in the left frontal lobe is strongly associated with treatment success. That is, increased brain activation in this area strongly correlates with improved language processing in aphasia. These preliminary findings suggest that direct external stimulation of the left frontal lobe during speech therapy may further improve outcome.

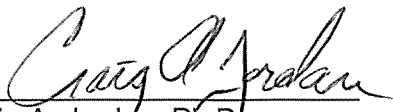
X. Adjournment: The meeting was adjourned at 2:00 p.m. on January 23, 2009.



XI. Certification of Minutes

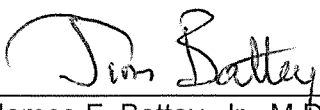
We certify that, to the best of our knowledge, the foregoing minutes and attachments are accurate and correct.²

3-18-09



Craig A. Jordan, Ph.D.
Executive Secretary
National Deafness and Other Communication
Disorders Advisory Council

March 18, 2009



James F. Battey, Jr., M.D., Ph.D.
Chairman
National Deafness and Other Communication
Disorders Advisory Council

Director
National Institute on Deafness and
Other Communication Disorders

Kristin Shazor
Program Analyst
NDCD Advisory Council

² These minutes will be formally considered by the NDCD Advisory Council at its next meeting; corrections or notations will be incorporated in the minutes of that meeting.

APPENDICES

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Roster
National Deafness and Other Communication Disorders Advisory Council

Chairperson
 James F Battey, Jr., M.D., Ph.D., Director
 National Institute on Deafness and Other Communication Disorders
 Bethesda, Maryland 20892

BATES-BOUCHER, Donna President Bates Group, Inc. Eight Hyde Park Circle Denver, CO	2009	GREER, Charles A., Ph.D. Professor of Neuroscience Department of Neurosurgery Yale University School of Medicine New Haven, CT	2011
CASSELBRANT, Margaretha L., M.D., Ph.D. Eberly Professor of Pediatric Otolaryngology Director, Division of Pediatric Otolaryngology Children's Hospital of Pittsburgh of UPMC University of Pittsburgh, School of Medicine Pittsburgh, PA	2010	HORNER, Jennifer J.D., Ph.D. Associate Dean for Research and Graduate Studies College of Health and Human Services Ohio University Athens, OH	2010
CRUICKSHANKS, Karen J., Ph.D. Professor Department of Ophthalmology and Visual Sciences University of Wisconsin School of Medicine and Public Health Madison, WI	2011	MOSS, Sharon E., Ph.D. Director Scientific Programs and Research Development Science and Research Unit American Speech-Language-Hearing Assoc. Rockville, MD	2012
DAVILA, Robert R., Ph.D. President Gallaudet University Washington, DC	2012	ORLECK-AIELLO, Myrna "Mo" CEO/President Abacus N Bytes, Inc. D/B/A TCS Associates Wheaton, MD	2009
FENG, Albert S., Ph.D., MS Professor Department of Molecular and Integrative Physiology University of Illinois Urbana-Champaign Urbana, IL	2011	RAMIG, Lorraine, Ph.D., CCC-SLP Professor Department of Speech Language Hearing Sciences University of Colorado, Boulder Boulder, CO	2010
FISCHER-GHODSIAN, Nathan, M.D. Professor Department of Pediatrics Cedars-Sinai Medical Center University of California, Los Angeles Los Angeles, CA	2009	RAUCH, Steven D., M.D. Professor Otolaryngology Department of Otology & Laryngology Harvard Medical School Massachusetts Eye and Ear Infirmary Boston, MA	2010

REED, Randall, Ph.D. 2011
Director, Center for Sensory Biology
Professor, Department of Molecular Biology
And Genetics
Department of Otolaryngology-HNS
Johns Hopkins School of Medicine
Baltimore, MD

HOFFER, Michael E., M.D.
Co-Director
Department of Defense Spatial Orientation Center
Department of Otolaryngology
Naval Medical Center
San Diego, CA

RICE, Mabel L., Ph.D. 2012
Fred and Virginia Merrill Distinguished
Professor of Advanced Studies
Department of Speech-Language-Hearing
The Merrill Advance Studies Center
University of Kansas
Lawrence, KS

LEAVITT, Michael O.
Secretary
Department of Health and
Human Services
Hubert H. Humphrey Building
Washington, DC

RYAN, Allen F., Ph.D. 2009
Professor of Surgery/Otolaryngology
Department of Surgery
University of California at San Diego
La Jolla, CA

KINGTON, Raynard S, M.D., Ph.D.
Acting Director
National Institutes of Health
Bethesda, MD 20892

EXECUTIVE SECRETARY

SMITH, Anne, Ph.D. 2012
Distinguished Professor
Department of Speech, Language
and Hearing Sciences
Purdue University
West Lafayette, IN

JORDAN, Craig A., Ph.D.
Director
Division of Extramural Research, NIDCD
Bethesda, MD

WEYMULLER, Ernest A., M.D. 2009
Chair and Professor
Department of Otolaryngology-HNS
University of Washington
School of Medicine
Seattle, WA

YOST, William A., Ph.D. 2011
Chair of Speech and Hearing Science
Department of Speech and Hearing Science
Arizona State University
Tempe, AZ

EX-OFFICIO MEMBERS:

BECK, Lucille B., Ph.D.
Director
Audiology & Speech Pathology Service (117A)
Department of Veterans Affairs
Washington, DC

Appendix 2

ATTENDANCE LIST

Other than Council members, attendees at the January 23, 2009 Council meeting included:

NIDCD Staff:

Office of Administration

Kerr, W. David, Executive Officer
Wysong, Chad, Deputy Executive Officer

Financial Management Branch

Rotariu, Mark, Chief

Science Policy and Planning Branch

Wong, Baldwin, Chief
Cole, Laura, Ph.D., Science Policy Analyst
Reuss, Andree, Management Intern

Office of Health Communication and Public Liaison

Blessing, Patricia, Chief

Division of Extramural Activities

Jordan, Craig A., Ph.D., Director
Stephenson, Nanette, Program Assistant

Grants Management Branch

Myers, Christopher, Chief
Dabney, Sherry, Grants Management Officer
Doan, Hoai, Grants Management Specialist
Garcia, Maria, Grants Management Specialist
Myrbeck, Eddie, Grants Management Specialist

Scientific Review Branch

Stick, Melissa, Ph.D., M.P.H., Chief
Livingston, Christine, Ph.D., Scientific Review Officer
Moore, Christopher, Ph.D., Scientific Review Officer
Singh, Sheo, Ph.D., Scientific Review Officer
Sullivan, Susan, Ph.D., Scientific Review Officer
Yang, Shiguang A., Ph.D., Scientific Review Officer

Division of Scientific Programs

Cooper, Judith, Ph.D., Director

Donahue, Amy, Ph.D., Deputy Director

Program Officers

Cyr, Janet, Ph.D., Training/Hearing and Balance

Davis, Barry, Ph.D., Smell and Taste Program

Freeman, Nancy, Ph.D., Hearing and Balance

Hoffman, Howard, M.A., Epidemiology and Statistics

Hughes, Gordon, M.D., Clinical Trials

Ko, Chia-Wen, Ph.D., Statistics

Miller, Roger, Ph.D., Neural Prosthesis

Platt, Christopher, Ph.D., Hearing and Balance

Sklare, Daniel A., Ph.D., Training Officer/Hearing and Balance

Watson, Bracie, Ph.D., Hearing and Balance

Division of Extramural Administrative Support, OER, NIH

Cotter, Shannon, Extramural Support Assistant

Holmes, Debbie, Extramural Support Assistant

Johnson, Barbara, Extramural Support Assistant

Center for Scientific Review, NIH

Etcheberrigaray, Rene, Ph.D., Director, Division of Neuroscience, Development and Aging

Melchior, Christine, Chief, Integrative Function & Cognitive Neuroscience IRG

Ni, Weijia, Ph.D., Scientific Review Officer

Ryan, Suzanne, Ph.D., Scientific Review Officer

Seitz, Sandra Melnick, Ph.D., Scientific Review Officer

Tian, Biao, Ph.D., Scientific Review Officer

Office of Director, NIH, and Others

Brigande, John, Ph.D., Assistant Professor, OHSU

Fridriksson, Julius, Ph.D., Associate Professor, USC

Pollick, Amy, Director Government Relations, Association for Psychological Science

Appendix 3

NIDCD Director's Report Slides

As Presented By

James F. Battey, Jr., M.D., Ph.D.
Director, NIDCD

NIDCD Advisory Council Meeting

January 23, 2009

National Institute on Deafness and Other Communication Disorders

**January 2009 Council
Budget Mechanism
(Dollars in thousands)**

<i>Budget Mechanism</i>	<u>FY 2008 Appropriation</u>		<u>President's Request</u>	
	<i>Number</i>	<i>Amount</i>	<i>Number</i>	<i>Amount</i>
Research Projects				
Noncompeting	627	\$202,995	634	\$205,980
Admin. Supplements	(18)	1,150	(18)	1,150
Competing	214	62,964	202	59,572
Subtotal	<u>841</u>	<u>267,109</u>	<u>836</u>	<u>266,702</u>
SBIR/STTR	<u>30</u>	<u>9,500</u>	<u>30</u>	<u>9,500</u>
Subtotal, RPG's	871	276,609	866	276,202
Research Centers	20	17,079	20	17,079
Other Research	<u>71</u>	<u>10,318</u>	<u>70</u>	<u>10,318</u>
Total Research Grants	962	304,006	956	303,599
Individual Training	152	5,720	151	5,720
Institutional Training	201	7,980	200	7,980
R & D Contracts	52	22,000	52	22,000
Intramural Research		35,831		36,868
Research Mgmt. & Support		18,601		18,880
NIH Roadmap		<u>0</u>		<u>0</u>
TOTAL		\$394,138		\$395,047

Note: FY 2008 excludes Supplemental Appropriation in the amount of \$2,096 thousand.

National Institute on Deafness and Other Communication Disorders

**January 2009 Council
Competing Research Project Grants
(Dollars in thousands)**

January Council Funds for FY 2009 Competing R01's
Assumes President's Budget Level
(\$ in thousands)

Total RPG Funds FY09 budget	\$276,202	
Less SBIR/STTR budget	-9,500	
Less Administrative Supplements budget	-1,150	
Less Noncompeting updated estimate	-207,800	
Less FY09 "Carryover" Commitments from prior Council meetings	-1,304	
Less FY09 Program Requirements	-12,650	
Plus FY08 funds	5,700	
	<hr/>	
<i>Total</i>	\$49,498	
	<u>20% HPP</u>	<u>80% Regular</u>
For FY 2009	\$9,900	\$39,598
Per Council Round	\$3,300	\$13,199

Appendix 4

Council Operating Procedures

Endorsed on January 23, 2009 at

NDCD Advisory Council Meeting

NDCD Advisory Council Operating Procedures

(As endorsed by Council January 23, 2009)

All research grant applications are taken to the National Deafness and Other Communication Disorders Advisory Council (NDCDAC) for second level review prior to possible funding actions. The Institute staff may take the following actions on existing grants without Council review. All actions shall be documented and presented to the Council for its information at the first appropriate opportunity.

1. Approval of New Principal Investigator or Program Director

Give approval of a new principal investigator or program director to continue an active grant at the grantee institution.

2. Replacement of Research Grant for Investigator Who Moves to a New Institution

Make research grant awards equal to the remaining committed support for continuing work under the same principal investigator when that principal investigator moves from one domestic institution to another. This provision will not be automatic, however. Staff may approve less than the remaining committed support and will in all cases carefully document the file with the rationale for the action.

3. Awards for Orderly Termination

Make appropriate awards for orderly termination of competing continuation applications which were not recommended for further consideration, or which received a score too low for payment; this procedure is to be used in those cases where sudden termination of the grant would cause a serious loss of scientific material or impose a hardship to already employed personnel. In such cases, (1) the grant usually should be for a period not to exceed twelve months; (2) careful review should be given to any unobligated balances and needs for salaries and consumable supplies; (3) usually no funds would be provided for additional equipment or travel; and (4) in the case of training grants, support would be provided for those trainees already in the program.

4. Awards for Interim Period Due to a Deferral

Make awards in an appropriate amount and for an appropriate interim period of time when a recommendation of deferral on a competing continuation application results in a loss of continuity of the active research or training program. Careful review should be given to the needs for personnel and consumable supplies; however, usually no funds would be provided for equipment or travel.

5. Supplemental Support to Existing Research and Training Awards

Provide additional support up to \$100,000 in direct costs per year to carry out the scientific, administrative and fiscal intent of the research or training award. The additional support may be necessary to: a) make NIH-wide diversity and re-entry supplement awards; b) provide administrative increases; c) cover unanticipated costs; or d) ensure effective operation of the recommended program. Increases greater than \$100,000 will be presented to the NDCD Advisory Council for approval before an award is made.

Institute staff may take the following actions without subsequent reporting to the Council.

1. Continuation of Grant in Temporary Absence of Principal Investigator or Program Director.

Give approval for continuation of grants in the temporary absence of the principal investigator or program director. Give approval for temporary/interim principal investigator or program director.

2. Extension of Project Period Dates

Take necessary action on extensions of project period end dates without additional funds.