

Summary of October GPAC Meeting

October 11, 2017; Med Sci I, Room 3114

1. Grant Review & Analysis HR Update

- The latest hire: Susan Sica – 50% grant review, 50% data analysis; formerly in Pathology.
- An office of 13 staff now

2. Streamlined Review

- Current status: 13 out 33 units (40%) are streamlined.
- The list of the twenty units that have not participated in the streamlined review was circulated to attendees. The listed units' representatives (if present) were asked to provide the following information:
 - Individual to make decision in the unit;
 - Anticipated date (no later than 11/30/2017); and
 - Needs.
- Heather will contact each unit's decision maker individually.
- Requests/Concerns expressed by attendees include
 - On-site walk-through;
 - Reading guidelines is time-consuming; and
 - Consistency of budget numbers (within applications; application vs. PAF).

3. General/Anecdotal Stories from the Trenches

- How much to justify in Budget Justification
 - One attendee reported an R01 was rejected due to the inclusion of methodology information in the justification. It was considered overstuffing.
- \$499,999 rule needs to be carefully evaluated and discussed with NIH if you have subawards of subawards – do the 2nd tier sub IDCs apply...
- Cuts in GSRA line
 - Clarification of 6 CMs being considered full-time at UM
 - The response may be institute dependent as it comes up infrequently.
- DoD prefers actual fringe benefits (vs. estimated)
- Maybe consider developing a checklist for DoD or DoEd?

4. NIH New Policy on K Awards

[NOT-OD-17-094](#)

For effort on a scope of work or aims not related to an existing K-award, K-award recipients may devote effort, with requested compensation, on Federal or non-Federal sources as the Program Director/Principal Investigator (PD/PI) or in another role (e.g., co-Investigator). This is only for projects that have distinct specific aims in the K-award and new project.

5. **ORSP Communication & Escalation**

Communication - three ways to communicate with ORSP

- PT requests ORSP action for immediate action (e.g., JIT, RPPR)
- Post a comment at eRPM as a heads-up tool
- Submission instructions on PAF

Escalation

- Call ORSP (supporting staff, PR, or managing PR)
- Follow expectations for a ½ life (contact, in two weeks contact again, one week, few days)
- Involve the Medical School to help advocate after first few contacts or if there is a true time constraint.

6. **Hospital Space**

Volunteers are needed to make a business case demonstrating no CDA approval is necessary for the use of hospital space on PAFs. Interested:

- Emily Hamilton
- Beck Youmans
- Amy Harms

7. **Funded/Unfunded List Update – please submit your F/NF reports on the even months.**