Department of Health and Human Services Part 1. Overview Information

	Particip	oating (Organization(s)
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National Institutes of Health (NIH (http://www.nih.gov))

Components of Participating Organizations

National Center for Complementary and Integrative Health (NCCIH (http://www.nccam.nih.gov))

National Cancer Institute (<u>NCI (http://www.nci.nih.gov/)</u>)
National Institute on Aging (<u>NIA (http://www.nia.nih.gov)</u>)
National Institute on Alcohol Abuse and Alcoholism (<u>NIAAA (http://www.niaaa.nih.gov)</u>)

National Institute on Drug Abuse (<u>NIDA (http://www.nida.nih.gov)</u>) National Institute of Dental and Craniofacial Research (<u>NIDCR (http://www.nidcr.nih.gov)</u>)

National Institute of Neurological Disorders and Stroke (NINDS (http://www.ninds.nih.gov))

National Institute of Nursing Research (NINR (http://www.ninr.nih.gov))

All applications to this funding opportunity announcement should fall within the mission of the Institutes/Centers. The following NIH Offices may cofund applications assigned to those Institutes/Centers.

Division of Program Coordination, Planning and Strategic Initiatives,

Office of Behavioral and Social Sciences Research (OBSSR (http://obssr.od.nih.gov))

Office of Research on Women's Health (ORWH (http://orwh.od.nih.gov))

Funding Opportunity Title

Mechanisms Underlying the Contribution of Sleep Disturbances to Pain (R21 Clinical Trial Optional)

Activity Code

R21 (//grants.nih.gov/grants/funding/ac_search_results.htm? text_curr=r21&Search.x=0&Search.y=0&Search_Type=Activity)

Exploratory/Developmental Research Grant

Announcement Type

New

Related Notices

None

Funding Opportunity

Announcement (FOA) Number

PA-19-201

Companion Funding Opportunity

PA-19-200 (https://grants.nih.gov/grants/guide/pa-files/pa-19-200.html), R01 (//grants.nih.gov/grants/funding/ac_search_results.htm? text_curr=r01&Search.x=0&Search_y=0&Search_Type=Activity) Research Project Grant

Number of Applications

See Section III. 3. Additional Information on Eligibility.

Catalog of Federal Domestic Assistance (CFDA) Number(s)

93.213; 93.393; 93.866; 93.273; 93.279; 93.121; 93.853; 93.361; 93.313

Funding Opportunity Purpose

The purpose of this FOA is to encourage mechanistic research to investigate the impact of sleep disturbances on pain. The mechanisms and processes underlying the contribution of sleep and sleep disturbances to pain perception and the development and maintenance of chronic pain may be very broad. This FOA encourages interdisciplinary research collaborations by experts from multiple fields—neuroscientists, psychologists, endocrinologists, immunologists, geneticists, pharmacologists, chemists, physicists, behavioral scientists, clinicians, caregivers, and others in relevant fields of inquiry. Applications proposing to study the impact of pain on sleep will be considered low priority and are unlikely to be funded under this FOA.

Key Dates

Posted Date

February 28, 2019

Open Date (Earliest Submission Date)

May 16, 2019

Letter of Intent Due Date(s)

Not Applicable.

Application Due Date(s)

Standard dates (//grants.nih.gov/grants/guide/url_redirect.htm?id=11111) apply, by 5:00 PM local time of applicant organization. All types of non-AIDS applications allowed for this funding opportunity announcement are due on these dates.

The first standard application due date for this FOA is June 16, 2019

Applicants are encouraged to apply early to allow adequate time to make any corrections to errors found in the application during the submission

	process by the due date.
AIDS Application Due Date(s)	Not Applicable.
Scientific Merit Review	Standard dates (//grants.nih.gov/grants/guide/url_redirect.htm?id=11113) (http://grants1.nih.gov/grants/funding/submissionschedule.htm#reviewandawa apply
Advisory Council Review	Standard dates (//grants.nih.gov/grants/guide/url_redirect.htm?id=11113) (http://grants1.nih.gov/grants/funding/submissionschedule.htm#reviewandawa apply
Earliest Start Date	Standard dates (//grants.nih.gov/grants/guide/url_redirect.htm?id=11113) apply
Expiration Date	May 8, 2022
Due Dates for E.O. 12372	Not Applicable

Required Application Instructions

It is critical that applicants follow the Research (R) Instructions in the <u>SF424 (R&R) Application Guide</u> (//grants.nih.gov/grants/guide/url_redirect.htm?id=12000), except where instructed to do otherwise (in this FOA or in a Notice from the <u>NIH Guide for Grants and Contracts (//grants.nih.gov/grants/guide/)</u>). Conformance to all requirements (both in the Application Guide and the FOA) is required and strictly enforced. Applicants must read and follow all application instructions in the Application Guide as well as any program-specific instructions noted in <u>Section IV</u>. When the program-specific instructions deviate from those in the Application Guide, follow the program-specific instructions. **Applications that do not comply with these instructions may be delayed or not accepted for review.**

There are several options available to submit your application through Grants.gov to NIH and Department of Health and Human Services partners. You **must** use one of these submission options to access the application forms for this opportunity.

1. Use the NIH ASSIST system to prepare, submit and track your application online.

Apply Online Using ASSIST

2. Use an institutional system-to-system (S2S) solution to prepare and submit your application to Grants.gov and eRA Commons (http://public.era.nih.gov/commons/) to track your application. Check with your institutional officials regarding availability.

3. Use <u>Grants.gov (http://www.grants.gov/web/grants/applicants/download-application-package.html#search=true&oppNum=PA-19-201)</u> Workspace to prepare and submit your application and <u>eRA Commons (http://public.era.nih.gov/commons/)</u> to track your application.

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Part 2. Full Text of Announcement

Section I. Funding Opportunity Description

Background

In 2014, The National Center for Complementary and Integrative Health (NCCIH) led a trans-NIH workshop on "Contribution of Sleep Disturbances to Chronic Pain" (https://nccih.nih.gov/news/events/telecon/sleep-pain/summary#execsumm (https://nccih.nih.gov/news/events/telecon/sleep-pain/summary)). Workshop participants concluded that evidence exists for an interaction between sleep and pain, but little is known about the mechanisms that underlie this interaction. To support research on this topic, in 2016, NCCIH, NIDA, NINDS, NINR, and NIAMS issued an FOA for Administrative Supplements for Research on Sleep Disturbances and Impact on Chronic Pain (https://grants.nih.gov/grants/guide/pa-files/PA-16-164.html) (https://grants.nih.gov/grants/guide/pa-files/PA-16-164.html (https://grants.nih.gov/grants/guide/pa-files/PA-16-164.html)). The purpose of this FOA is to further encourage additional mechanistic research to investigate the impact of sleep, and sleep disturbance on acute and chronic pain, and the transition from acute to chronic pain.

Chronic pain, in particular, is a major public health concern. It impacts over one third of the U.S. population, consumes substantial health care resources, and significantly reduces work productivity. The management of chronic pain has relied on opioids, which have significant risks for adverse events, and misuse. Sleep disorders commonly co-occur with chronic pain. There is not only substantial evidence that chronic pain states can disrupt sleep but, also, a growing evidence that sleep disturbances contribute to pain, and treatments of sleep disturbances can reduce pain. There is evidence suggesting sleep disturbances may increase acute pain sensitivity and, conversely, increased sleep time can reduce acute pain sensitivity. In addition, emerging evidence indicates that the presence of sleep disturbances may be one of several factors that predict the transition from acute to chronic pain. Furthermore, a meta - analysis of a few pilot studies of nonpharmacologic treatments of insomnia among chronic pain populations reported a small overall effect of reduced pain in the treatment groups relative to the control groups. But, more work is needed to validate these clinical findings. Successful management of pain, therefore, requires a better understanding of how sleep disturbances and their

associated biological mechanism, contribute to the chronic pain, including its transition from acute pain.

Given the paucity of research on the mechanisms on how sleep may impact pain, and how modulation of sleep mechanisms influences pain, through this FOA, researchers are encouraged to address this unmet need. Topics of interest relevant to this FAO include, but are not limited, to the following:

- The mechanisms by which changes in sleep may impact nociception
- The mechanisms by which hypothalamic neurons or other mechanisms involved in sleep regulation may affect nociceptive pathways
- The mechanisms by which brain regions associated with sleep dysregulation may contribute to pain
- The mechanisms by which deficient sleep or circadian dysregulation may impact central pain-modulatory processes
- Neural/glial mechanisms underlying the effect of sleep on the transition from acute to chronic pain
- The relationship between sleep and microbiome impacting pain and analgesia
- The mechanisms by which pharmacologic interventions for sleep may impact chronic pain
- The mechanisms by which nonpharmacologic or complementary and integrative health approaches for sleep regulation may impact chronic pain
- The mechanisms underlying comorbidity of sleep disturbances, pain, and psychiatric disorders such as depression, posttraumatic stress disorders, and other conditions
- The mechanisms by which complementary approaches, alone or in combination with medications, interact with sleep to increase or mitigate pain
- The impact of chronotype ("morningness" versus "eveningness") on perception of pain
- The impact of circadian misalignment ("social jet lag") on perception of pain
- The effect of comorbid conditions with sleep on pain
- The relationship between glymphatic function and pain

This FOA supports research in appropriate model organisms or human subjects. This FOA may support studies that are mechanistic clinical trials, which means that such studies meet the NIH definition of a clinical trial but are mechanistic in nature. Applications submitted should not include any specific aims that propose to measure the efficacy or effectiveness of any intervention. Investigators who wish to conduct studies with clinical endpoints as the primary outcomes should consider other NIH-issued FOAs specifically designed for efficacy or effectiveness studies. Applications proposing to study the impact of pain on sleep will be considered low priority and are unlikely to be funded under this FOA.

Applicants are strongly encouraged to contact the Scientific/Research Contacts from various NIH Institutes and Centers (ICs) listed in Section VII prior to submission to discuss IC program relevance.

Specific Areas of Research Interest

Below are the areas of research interest from the participating NIH ICs of this FOA:

National Center for Complementary and Integrative Health (NCCIH):

NCCIH supports research on the science and clinical applications of complementary and integrative health approaches in pain management and their contributions to reduce the current opioid epidemic. NCCIH is interested in applications that explore the mechanisms by which natural products (including botanicals, probiotics, dietary supplements, and special diets) and mind and body approaches (such as acupuncture, meditation, spinal manipulation, yoga, massage, hypnosis) modulate sleep in association with the regulation of pain perception and treatment responses.

National Cancer Institute (NCI):

Poor sleep is a known problem in cancer patients all along the cancer trajectory from diagnosis to end of life. A limited body of research suggests that sleep disturbances, primarily insomnia, can increase cancer patients' sensitivity to pain. Patients often report significantly disrupted sleep even when their pain is well controlled by opioids. NCI is interested in the broad topics (both pre-clinical and clinical) listed in this FOA within the context of cancer, and with a particular interest in the following cancer-specific pain conditions:

- Chemotherapy-induced peripheral neuropathy
- · Aromatase inhibitor arthralgias
- Metastatic bone pain
- Radiation-induced pain syndromes.

In addition, NCI is interested in the population of patients undergoing curative therapies, particularly those receiving neurotoxic agents and/or undergoing radiation therapy, and how these therapies impact the onset and duration of sleep disturbances and subsequent development of treatment-induced pain conditions.

National Institute on Drug Abuse (NIDA):

NIDA is interested in research in the following areas:

- The mechanisms by which opioids may affect sleep
- The mechanisms by which potential substances of abuse (e.g., nicotine, caffeine, cocaine) interact with sleep to increase or mitigate pain
- The impact of sleep on opioid use and misuse in people with chronic pain
- The opioid-sparing effects of improved sleep in people with chronic pain.

National Institute of Neurological Disorders and Stroke (NINDS):

NINDS is interested in research related to the neural mechanisms underlying the contribution of sleep disturbances to chronic pain. For applications submitted to this FOA that propose clinical trials, NINDS will support applications that propose human mechanistic trials/studies that meet NIH's definition of a clinical trial and that fall within the NINDS research priorities. Clinical trials designed to answer specific questions about the safety, tolerability, efficacy, effectiveness, clinical management, and/or implementation of pharmacologic, behavioral, biologic, surgical, or device (invasive or non-invasive) interventions will only be supported by NINDS if submitted to an NINDS clinical trials-specific FOA. A current list of active NINDS clinical trials FOAs is available at https://www.ninds.nih.gov/Current-Research/Research-Funded-NINDS/Clinical-Research).

National Institute of Nursing Research (NINR):

NINR is interested in the biological underpinnings by which sleep disturbances can exacerbate chronic pain. Areas of interest include, but are not limited to, the following:

- Genetic variations that alter sleep homeostasis in individuals suffering from chronic pain
- Mechanisms of lifestyle factors (e.g., diet, inactivity, sociocultural) that contribute to impaired sleep in individuals with pain
- How different forms of sleep disturbance (e.g., increased sleep latency) prolonged awakenings, are associated with pain.

National Institute of Dental and Craniofacial Research (NIDCR):

NIDCR is interested in mechanisms and processes underlying the contribution of sleep disturbances to

orofacial chronic pain development and maintenance in temporomandibular joint disorders, trigeminal neuropathies, burning mouth syndrome, oral cancer pain, and other conditions. Clinical trials designed to answer specific questions about the safety, tolerability, efficacy, effectiveness, clinical management, and/or implementation of pharmacologic, behavioral, biologic, surgical, or device interventions will only be supported by NIDCR if submitted to an NIDCR clinical trials-specific FOA (https://www.nidcr.nih.gov/research/clinical-trials)). Awardees will be required to comply with the NIDCR Clinical Terms of Award (https://www.nidcr.nih.gov/research/human-subjects-research/clinical-terms-of-award) for activities that involve human subjects.

Investigators are encouraged to contact NIDCR program staff to discuss potential research projects prior to application submission to determine alignment of the planned studies with priorities of the Institute mission and strategic plan.

National Institute on Aging (NIA):

NIA encourages applications that investigate the mechanisms underlying the contribution of sleep disturbances to pain in midlife or older age, particularly in older adults with neurodegenerative diseases or multiple morbidities.

National Institute on Alcohol Abuse and Alcoholism (NIAAA):

Humans and animal models have shown considerable evidences that acute and chronic alcohol consumption disrupts patterns of sleep. Studies revealed many reciprocal interactions between alcohol and sleep and chronic alcohol abuse leading to sleep disruptions, which lead to alcohol dependence. These sleep changes may persist for months or even years of abstinence, suggesting that alcohol abuse may have enduring effects on circadian and/or homeostatic sleep processes. Similarly, alcohol initially produces analgesia while chronic, escalating use increases pain sensitivity. The influence of alcohol use on sleep or pain has been studied to some extent. However, how alcohol use could regulate the interactions between sleep and pain have not been investigated. This is highly important as chronic pain and sleep problems largely coexist and alcohol use can influence both pathophysiological states. Therefore, NIAAA interest in this FOA includes, but is not limited to, the following research questions:

- Determination of the effects of sleep quality on pain and how alcohol use impacts these effects
- Understanding the mechanisms of alcohol-mediated sleep disorders and how pain impacts the effects of alcohol
- Investigations on persistent sleep problems on pain sensitivity in abstinence from alcohol use and as additional risk factor for relapse
- Identification of factors, including genetic variability and epigenetic modifications that may predispose to sleep problems affecting pain sensitivity, and how alcohol use might influence these genetic factors
- Investigations on these interactions across the lifespan, especially during prenatal and adolescence exposure and in an aging population where pain and sleep problems could be significantly influenced by alcohol use.

Office of Behavioral and Social Sciences Research (OBSSR):

OBSSR is interested in research that would investigate the behavioral and/or sociocultural mechanisms or modulators that regulate sleep (quality, quantity, etc.) and the effects on chronic pain. These can include but are not limited to lifestyle factors, e.g., diet, inactivity, sociocultural, socioeconomic, sleep hygiene, etc. Additionally, research that focuses on behavioral interventions for sleep deficiencies in the context of improving pain would also be of interest.

Office of Research on Women's Health (ORWH):

Women have a higher prevalence of pain disorders and a greater sensitivity to pain, and therefore there is a crucial need to recruit women into pain-related clinical research in sufficient numbers to determine sex-specific responses as well as sex differences. Research also shows that women are more susceptible to sleep deficiency and sleep disorders than men based on biological differences and the societal and social expectations of women in the workplace and the home. ORWH therefore is interested in supporting research to address sex influences in basic, translational, interdisciplinary, behavioral, clinical, and/or health services research on pain and sleep neurobiology and pathology and how they might interact. As appropriate, projects will use both sexes to better understand the influence of sex as a variable in accordance with NIH policies on Consideration of Sex as a Biological Variable in NIH-funded Research and Enhancing Reproducibility through Rigor and Transparency.

See Section VIII. Other Information for award authorities and regulations.

Section II. Award Information

Section II. Award Information		
Funding Instrument	Grant: A support mechanism providing money, property, or both to an eligible entity to carry out an approved project or activity.	
Application Types Allowed	New Resubmission Revision	
	The <u>OER Glossary (//grants.nih.gov/grants/guide/url_redirect.htm?</u> <u>id=11116)</u> and the SF424 (R&R) Application Guide provide details on these application types.	
Clinical Trial?	Optional: Accepting applications that either propose or do not propose clinical trial(s)	
	Need help determining whether you are doing a clinical trial? (https://grants.nih.gov/grants/guide/url_redirect.htm?id=82370)	
Funds Available and Anticipated Number of Awards	The number of awards is contingent upon NIH appropriations and the submission of a sufficient number of meritorious applications.	
Award Budget	The combined budget for direct costs for the two-year project period may not exceed \$275,000. No more than \$200,000 may be requested in any single year.	
Award Project Period	The scope of the proposed project should determine the project period. The maximum project period is 2 years.	

NIH grants policies as described in the <u>NIH Grants Policy Statement</u> (<u>//grants.nih.gov/grants/guide/url_redirect.htm?id=11120</u>) will apply to the applications submitted and awards made from this FOA.

Section III. Eligibility Information

1. Eligible Applicants

Eligible Organizations

Higher Education Institutions

- Public/State Controlled Institutions of Higher Education
- Private Institutions of Higher Education

The following types of Higher Education Institutions are always encouraged to apply for NIH support as Public or Private Institutions of Higher Education:

- Hispanic-serving Institutions
- Historically Black Colleges and Universities (HBCUs)
- Tribally Controlled Colleges and Universities (TCCUs)
- Alaska Native and Native Hawaiian Serving Institutions
- Asian American Native American Pacific Islander Serving Institutions (AANAPISIs)

Nonprofits Other Than Institutions of Higher Education

- Nonprofits with 501(c)(3) IRS Status (Other than Institutions of Higher Education)
- Nonprofits without 501(c)(3) IRS Status (Other than Institutions of Higher Education)

For-Profit Organizations

- Small Businesses
- For-Profit Organizations (Other than Small Businesses)

Governments

- State Governments
- County Governments
- City or Township Governments
- Special District Governments
- Indian/Native American Tribal Governments (Federally Recognized)
- Indian/Native American Tribal Governments (Other than Federally Recognized)
- Eligible Agencies of the Federal Government
- U.S. Territory or Possession

Other

- Independent School Districts
- Public Housing Authorities/Indian Housing Authorities
- Native American Tribal Organizations (other than Federally recognized tribal governments)
- Faith-based or Community-based Organizations
- · Regional Organizations

Foreign Institutions

Non-domestic (non-U.S.) Entities (Foreign Institutions) are not eligible to apply.

Non-domestic (non-U.S.) components of U.S. Organizations are not eligible to apply.

Foreign components, as <u>defined in the NIH Grants Policy Statement</u> (//grants.nih.gov/grants/guide/url_redirect.htm?id=11118), **are** allowed.

Required Registrations Applicant Organizations

Applicant organizations must complete and maintain the following registrations as described in the SF 424 (R&R) Application Guide to be eligible to apply for or receive an award. All registrations must be completed prior to the application being submitted. Registration can take 6 weeks or more, so applicants should begin the registration process as soon as possible. The NIH Policy on Late Submission of Grant Applications (//grants.nih.gov/grants/guide/notice-files/NOT-OD-15-039.html) states that failure to complete registrations in advance of a due date is not a valid reason for a late submission.

- <u>Dun and Bradstreet Universal Numbering System (DUNS) (http://fedgov.dnb.com/webform)</u> All
 registrations require that applicants be issued a DUNS number. After obtaining a DUNS number,
 applicants can begin both SAM and eRA Commons registrations. The same DUNS number must be used
 for all registrations, as well as on the grant application.
- System for Award Management (SAM) (https://www.sam.gov/portal/public/SAM/) Applicants must complete and maintain an active registration, which requires renewal at least annually. The renewal process may require as much time as the initial registration. SAM registration includes the assignment of a Commercial and Government Entity (CAGE) Code for domestic organizations which have not already been assigned a CAGE Code.
 - NATO Commercial and Government Entity (NCAGE) Code
 (//grants.nih.gov/grants/guide/url_redirect.htm?id=11176) Foreign organizations must obtain an
 NCAGE code (in lieu of a CAGE code) in order to register in SAM.
- <u>eRA Commons (//grants.nih.gov/grants/guide/url_redirect.htm?id=11123)</u> Applicants must have an active DUNS number to register in eRA Commons. Organizations can register with the eRA Commons as they are working through their SAM or Grants.gov registration, but all registrations must be in place by time of submission. eRA Commons requires organizations to identify at least one Signing Official (SO) and at least one Program Director/Principal Investigator (PD/PI) account in order to submit an application.
- <u>Grants.gov (//grants.nih.gov/grants/guide/url_redirect.htm?id=82300)</u> Applicants must have an active DUNS number and SAM registration in order to complete the Grants.gov registration.

Program Directors/Principal Investigators (PD(s)/PI(s))

All PD(s)/PI(s) must have an eRA Commons account. PD(s)/PI(s) should work with their organizational officials to either create a new account or to affiliate their existing account with the applicant organization in eRA Commons. If the PD/PI is also the organizational Signing Official, they must have two distinct eRA Commons accounts, one for each role. Obtaining an eRA Commons account can take up to 2 weeks.

Eligible Individuals (Program Director/Principal Investigator)

Any individual(s) with the skills, knowledge, and resources necessary to carry out the proposed research as the Program Director(s)/Principal Investigator(s) (PD(s)/PI(s)) is invited to work with his/her organization to develop an application for support. Individuals from underrepresented racial and ethnic groups as well as individuals with disabilities are always encouraged to apply for NIH support.

For institutions/organizations proposing multiple PDs/PIs, visit the Multiple Program Director/Principal Investigator Policy and submission details in the Senior/Key Person Profile (Expanded) Component of the

SF424 (R&R) Application Guide.

2. Cost Sharing

This FOA does not require cost sharing as defined in the <u>NIH Grants Policy Statement</u>. (//grants.nih.gov/grants/guide/url_redirect.htm?id=11126)

3. Additional Information on Eligibility

Number of Applications

Applicant organizations may submit more than one application, provided that each application is scientifically distinct.

The NIH will not accept duplicate or highly overlapping applications under review at the same time. This means that the NIH will not accept:

- A new (A0) application that is submitted before issuance of the summary statement from the review of an overlapping new (A0) or resubmission (A1) application.
- A resubmission (A1) application that is submitted before issuance of the summary statement from the review of the previous new (A0) application.
- An application that has substantial overlap with another application pending appeal of initial peer review (see NOT-OD-11-101 (//grants.nih.gov/grants/guide/notice-files/NOT-OD-11-101.html)).

Section IV. Application and Submission Information

1. Requesting an Application Package

The application forms package specific to this opportunity must be accessed through ASSIST, Grants.gov Workspace or an institutional system-to-system solution. Links to apply using ASSIST or Grants.gov Workspace are available in <u>Part 1</u> of this FOA. See your administrative office for instructions if you plan to use an institutional system-to-system solution.

2. Content and Form of Application Submission

It is critical that applicants follow the Research (R) Instructions in the <u>SF424 (R&R) Application Guide</u> (//grants.nih.gov/grants/guide/url_redirect.htm?id=12000), except where instructed in this funding opportunity announcement to do otherwise. Conformance to the requirements in the Application Guide is required and strictly enforced. Applications that are out of compliance with these instructions may be delayed or not accepted for review.

Page Limitations

All page limitations described in the SF424 Application Guide and the <u>Table of Page Limits</u> (//grants.nih.gov/grants/guide/url_redirect.htm?id=11133) must be followed.

Instructions for Application Submission

The following section supplements the instructions found in the SF424 (R&R) Application Guide and should be used for preparing an application to this FOA.

SF424(R&R) Cover

All instructions in the SF424 (R&R) Application Guide must be followed.

SF424(R&R) Project/Performance Site Locations

All instructions in the SF424 (R&R) Application Guide must be followed.

SF424(R&R) Other Project Information

All instructions in the SF424 (R&R) Application Guide must be followed.

SF424(R&R) Senior/Key Person Profile

All instructions in the SF424 (R&R) Application Guide must be followed.

R&R or Modular Budget

All instructions in the SF424 (R&R) Application Guide must be followed.

R&R Subaward Budget

All instructions in the SF424 (R&R) Application Guide must be followed.

PHS 398 Cover Page Supplement

All instructions in the SF424 (R&R) Application Guide must be followed.

PHS 398 Research Plan

All instructions in the SF424 (R&R) Application Guide must be followed, with the following additional instructions:

Resource Sharing Plan: Individuals are required to comply with the instructions for the Resource Sharing Plans as provided in the SF424 (R&R) Application Guide, with the following modification:

 All applications, regardless of the amount of direct costs requested for any one year, should address a Data Sharing Plan.

Appendix:

Only limited Appendix materials are allowed. Follow all instructions for the Appendix as described in the SF424 (R&R) Application Guide.

PHS Human Subjects and Clinical Trials Information

When involving NIH-defined human subjects research, clinical research, and/or clinical trials (and when applicable, clinical trials research experience) follow all instructions for the PHS Human Subjects and Clinical Trials Information form in the SF424 (R&R) Application Guide, with the following additional instructions:

If you answered "Yes" to the question "Are Human Subjects Involved?" on the R&R Other Project Information form, you must include at least one human subjects study record using the **Study Record: PHS Human Subjects and Clinical Trials Information** form or **Delayed Onset Study** record.

Study Record: PHS Human Subjects and Clinical Trials Information

All instructions in the SF424 (R&R) Application Guide must be followed

Delayed Onset Study

Note: <u>Delayed onset (https://grants.nih.gov/grants/glossary.htm#DelayedOnsetHumanSubjectStudy)</u> does NOT apply to a study that can be described but will not start immediately (i.e., delayed start).

All instructions in the SF424 (R&R) Application Guide must be followed.

PHS Assignment Request Form

All instructions in the SF424 (R&R) Application Guide must be followed.

3. Unique Entity Identifier and System for Award Management (SAM)

See Part 1. Section III.1 for information regarding the requirement for obtaining a unique entity identifier and for completing and maintaining active registrations in System for Award Management (SAM), NATO Commercial and Government Entity (NCAGE) Code (if applicable), eRA Commons, and Grants.gov

4. Submission Dates and Times

<u>Part I. Overview Information</u> contains information about Key Dates and times. Applicants are encouraged to submit applications before the due date to ensure they have time to make any application corrections that might be necessary for successful submission. When a submission date falls on a weekend or <u>Federal holiday (https://grants.nih.gov/grants/guide/url_redirect.htm?id=82380)</u>, the application deadline is automatically extended to the next business day.

Organizations must submit applications to <u>Grants.gov (//grants.nih.gov/grants/guide/url_redirect.htm?</u> id=11128) (the online portal to find and apply for grants across all Federal agencies). Applicants must then complete the submission process by tracking the status of the application in the <u>eRA Commons (//grants.nih.gov/grants/guide/url_redirect.htm?id=11123)</u>, NIH's electronic system for grants administration. NIH and Grants.gov systems check the application against many of the application instructions upon submission. Errors must be corrected and a changed/corrected application must be submitted to Grants.gov on or before the application due date and time. If a Changed/Corrected application is submitted after the deadline, the application will be considered late. Applications that miss the due date and time are subjected to the NIH Policy on Late Application Submission.

Applicants are responsible for viewing their application before the due date in the eRA Commons to ensure accurate and successful submission.

Information on the submission process and a definition of on-time submission are provided in the SF424 (R&R) Application Guide.

5. Intergovernmental Review (E.O. 12372)

This initiative is not subject to <u>intergovernmental review. (//grants.nih.gov/grants/guide/url_redirect.htm?</u> <u>id=11142)</u>

6. Funding Restrictions

All NIH awards are subject to the terms and conditions, cost principles, and other considerations described in the NIH Grants Policy Statement (//grants.nih.gov/grants/guide/url_redirect.htm?id=11120).

Pre-award costs are allowable only as described in the <u>NIH Grants Policy Statement</u> (//grants.nih.gov/grants/guide/url_redirect.htm?id=11143).

7. Other Submission Requirements and Information

Applications must be submitted electronically following the instructions described in the SF424 (R&R) Application Guide. Paper applications will not be accepted.

Applicants must complete all required registrations before the application due date. Section III. Eligibility Information contains information about registration.

For assistance with your electronic application or for more information on the electronic submission process, visit How to Apply - Application Guide (https://grants.nih.gov/grants/how-to-apply-application-guide.html). If you encounter a system issue beyond your control that threatens your ability to complete the submission process on-time, you must follow the Dealing with System Issues (https://grants.nih.gov/grants/how-to-apply-application-guide.html).

<u>application-guide/due-dates-and-submission-policies/dealing-with-system-issues.htm)</u> guidance. For assistance with application submission, contact the Application Submission Contacts in <u>Section VII</u>.

Important reminders:

All PD(s)/PI(s) must include their eRA Commons ID in the Credential field of the Senior/Key Person Profile Component of the SF424(R&R) Application Package. Failure to register in the Commons and to include a valid PD/PI Commons ID in the credential field will prevent the successful submission of an electronic application to NIH. See Section III of this FOA for information on registration requirements.

The applicant organization must ensure that the DUNS number it provides on the application is the same number used in the organization's profile in the eRA Commons and for the System for Award Management. Additional information may be found in the SF424 (R&R) Application Guide.

See more tips (//grants.nih.gov/grants/guide/url_redirect.htm?id=11146) for avoiding common errors.

Upon receipt, applications will be evaluated for completeness and compliance with application instructions by the Center for Scientific Review, NIH. Applications that are incomplete or non-compliant will not be reviewed.

Post Submission Materials

Applicants are required to follow the instructions for post-submission materials, as described in the-policy (//grants.nih.gov/grants/guide/url redirect.htm?id=82299). Any instructions provided here are in addition to the instructions in the policy.

Section V. Application Review Information

1. Criteria

Only the review criteria described below will be considered in the review process.

Applications submitted to the NIH in support of the NIH mission (//grants.nih.gov/grants/guide/url_redirect.htm? id=11149) are evaluated for scientific and technical merit through the NIH peer review system.

In addition, for applications involving clinical trials:

A proposed Clinical Trial application may include study design, methods, and intervention that are not by themselves innovative but address important questions or unmet needs. Additionally, the results of the clinical trial may indicate that further clinical development of the intervention is unwarranted or lead to new avenues of scientific investigation.

For this particular announcement, note the following:

The R21 exploratory/developmental grant supports investigation of novel scientific ideas or new model systems, tools, or technologies that have the potential for significant impact on biomedical or biobehavioral research. An R21 grant application need not have extensive background material or preliminary information. Accordingly, reviewers will emphasize the conceptual framework, the level of innovation, and the potential to significantly advance our knowledge or understanding. Appropriate justification for the proposed work can be provided through literature citations, data from other sources, or, when available, from investigator-generated data. Preliminary data are not required for R21 applications; however, they may be included if available.

Overall Impact

Reviewers will provide an overall impact score to reflect their assessment of the likelihood for the project to

exert a sustained, powerful influence on the research field(s) involved, in consideration of the following review criteria and additional review criteria (as applicable for the project proposed).

Scored Review Criteria

Reviewers will consider each of the review criteria below in the determination of scientific merit, and give a separate score for each. An application does not need to be strong in all categories to be judged likely to have major scientific impact. For example, a project that by its nature is not innovative may be essential to advance a field.

Significance

Does the project address an important problem or a critical barrier to progress in the field? Is the prior research that serves as the key support for the proposed project rigorous? If the aims of the project are achieved, how will scientific knowledge, technical capability, and/or clinical practice be improved? How will successful completion of the aims change the concepts, methods, technologies, treatments, services, or preventative interventions that drive this field?

In addition, for applications involving clinical trials:

Are the scientific rationale and need for a clinical trial to test the proposed hypothesis or intervention well supported by preliminary data, clinical and/or preclinical studies, or information in the literature or knowledge of biological mechanisms? For trials focusing on clinical or public health endpoints, is this clinical trial necessary for testing the safety, efficacy or effectiveness of an intervention that could lead to a change in clinical practice, community behaviors or health care policy? For trials focusing on mechanistic, behavioral, physiological, biochemical, or other biomedical endpoints, is this trial needed to advance scientific understanding?

Investigator(s)

Are the PD(s)/PI(s), collaborators, and other researchers well suited to the project? If Early Stage Investigators or those in the early stages of independent careers, do they have appropriate experience and training? If established, have they demonstrated an ongoing record of accomplishments that have advanced their field(s)? If the project is collaborative or multi-PD/PI, do the investigators have complementary and integrated expertise; are their leadership approach, governance and organizational structure appropriate for the project?

In addition, for applications involving clinical trials:

With regard to the proposed leadership for the project, do the PD/PI(s) and key personnel have the expertise, experience, and ability to organize, manage and implement the proposed clinical trial and meet milestones and timelines? Do they have appropriate expertise in study coordination, data management and statistics? For a multicenter trial, is the organizational structure appropriate and does the application identify a core of potential center investigators and staffing for a coordinating center?

Innovation

Does the application challenge and seek to shift current research or clinical practice paradigms by utilizing novel theoretical concepts, approaches or methodologies, instrumentation, or interventions? Are the concepts, approaches or methodologies, instrumentation, or interventions novel to one field of research or novel in a broad sense? Is a refinement, improvement, or new application of theoretical concepts, approaches or methodologies, instrumentation, or interventions proposed?

In addition, for applications involving clinical trials:

Does the design/research plan include innovative elements, as appropriate, that enhance its sensitivity, potential for information or potential to advance scientific knowledge or clinical practice?

Approach

Are the overall strategy, methodology, and analyses well-reasoned and appropriate to accomplish the specific aims of the project? Have the investigators included plans to address weaknesses in the rigor of prior research that serves as the key support for the proposed project? Have the investigators presented strategies to ensure a robust and unbiased approach, as appropriate for the work proposed? Are potential problems, alternative strategies, and benchmarks for success presented? If the project is in the early stages of development, will the strategy establish feasibility and will particularly risky aspects be managed? Have the investigators presented adequate plans to address relevant biological variables, such as sex, for studies in vertebrate animals or human subjects?

In addition, for applications involving clinical trials:

Does the application adequately address the following, if applicable

Study Design

Is the study design justified and appropriate to address primary and secondary outcome variable(s)/endpoints that will be clear, informative and relevant to the hypothesis being tested? Is the scientific rationale/premise of the study based on previously well-designed preclinical and/or clinical research? Given the methods used to assign participants and deliver interventions, is the study design adequately powered to answer the research question(s), test the proposed hypothesis/hypotheses, and provide interpretable results? Is the trial appropriately designed to conduct the research efficiently? Are the study populations (size, gender, age, demographic group), proposed intervention arms/dose, and duration of the trial, appropriate and well justified?

Are potential ethical issues adequately addressed? Is the process for obtaining informed consent or assent appropriate? Is the eligible population available? Are the plans for recruitment outreach, enrollment, retention, handling dropouts, missed visits, and losses to follow-up appropriate to ensure robust data collection? Are the planned recruitment timelines feasible and is the plan to monitor accrual adequate? Has the need for randomization (or not), masking (if appropriate), controls, and inclusion/exclusion criteria been addressed? Are differences addressed, if applicable, in the intervention effect due to sex/gender and race/ethnicity?

Are the plans to standardize, assure quality of, and monitor adherence to, the trial protocol and data collection or distribution guidelines appropriate? Is there a plan to obtain required study agent(s)? Does the application propose to use existing available resources, as applicable?

Data Management and Statistical Analysis

Are planned analyses and statistical approach appropriate for the proposed study design and methods used to assign participants and deliver interventions? Are the procedures for data management and quality control of data adequate at clinical site(s) or at center laboratories, as applicable? Have the methods for standardization of procedures for data management to assess the effect of the intervention and quality control been addressed? Is there a plan to complete data analysis within the proposed period of the award?

If the project involves human subjects and/or NIH-defined clinical research, are the plans to address

- 1) the protection of human subjects from research risks, and
- 2) inclusion (or exclusion) of individuals on the basis of sex/gender, race, and ethnicity, as well as the inclusion or exclusion of individuals of all ages (including children and older adults), justified in terms of the scientific goals and research strategy proposed?

Environment

Will the scientific environment in which the work will be done contribute to the probability of success? Are the institutional support, equipment and other physical resources available to the investigators adequate for the project proposed? Will the project benefit from unique features of the scientific environment, subject populations, or collaborative arrangements?

In addition, for applications involving clinical trials:

If proposed, are the administrative, data coordinating, enrollment and laboratory/testing centers, appropriate for the trial proposed?

Does the application adequately address the capability and ability to conduct the trial at the proposed site(s) or centers? Are the plans to add or drop enrollment centers, as needed, appropriate?

If international site(s) is/are proposed, does the application adequately address the complexity of executing the clinical trial?

If multi-sites/centers, is there evidence of the ability of the individual site or center to: (1) enroll the proposed numbers; (2) adhere to the protocol; (3) collect and transmit data in an accurate and timely fashion; and, (4) operate within the proposed organizational structure?

Additional Review Criteria

As applicable for the project proposed, reviewers will evaluate the following additional items while determining scientific and technical merit, and in providing an overall impact score, but will not give separate scores for these items.

Study Timeline

In addition, for applications involving clinical trials

Is the study timeline described in detail, taking into account start-up activities, the anticipated rate of enrollment, and planned follow-up assessment? Is the projected timeline feasible and well justified? Does the project incorporate efficiencies and utilize existing resources (e.g., CTSAs, practice-based research networks, electronic medical records, administrative database, or patient registries) to increase the efficiency of participant enrollment and data collection, as appropriate?

Are potential challenges and corresponding solutions discussed (e.g., strategies that can be implemented in the event of enrollment shortfalls)?

Protections for Human Subjects

For research that involves human subjects but does not involve one of the categories of research that are exempt under 45 CFR Part 46, the committee will evaluate the justification for involvement of human subjects and the proposed protections from research risk relating to their participation according to the following five review criteria: 1) risk to subjects, 2) adequacy of protection against risks, 3) potential benefits

to the subjects and others, 4) importance of the knowledge to be gained, and 5) data and safety monitoring for clinical trials.

For research that involves human subjects and meets the criteria for one or more of the categories of research that are exempt under 45 CFR Part 46, the committee will evaluate: 1) the justification for the exemption, 2) human subjects involvement and characteristics, and 3) sources of materials. For additional information on review of the Human Subjects section, please refer to the <u>Guidelines for the Review of Human Subjects (//grants.nih.gov/grants/guide/url_redirect.htm?id=11175)</u>.

Inclusion of Women, Minorities, and Individuals Across the Lifespan

When the proposed project involves human subjects and/or NIH-defined clinical research, the committee will evaluate the proposed plans for the inclusion (or exclusion) of individuals on the basis of sex/gender, race, and ethnicity, as well as the inclusion (or exclusion) of individuals of all ages (including children and older adults) to determine if it is justified in terms of the scientific goals and research strategy proposed. For additional information on review of the Inclusion section, please refer to the <u>Guidelines for the Review of Inclusion in Clinical Research (//grants.nih.gov/grants/guide/url_redirect.htm?id=11174)</u>.

Vertebrate Animals

The committee will evaluate the involvement of live vertebrate animals as part of the scientific assessment according to the following criteria: (1) description of proposed procedures involving animals, including species, strains, ages, sex, and total number to be used; (2) justifications for the use of animals versus alternative models and for the appropriateness of the species proposed; (3) interventions to minimize discomfort, distress, pain and injury; and (4) justification for euthanasia method if NOT consistent with the AVMA Guidelines for the Euthanasia of Animals. Reviewers will assess the use of chimpanzees as they would any other application proposing the use of vertebrate animals. For additional information on review of the Vertebrate Animals section, please refer to the Worksheet for Review of the Vertebrate Animal Section (//grants.nih.gov/grants/guide/url_redirect.htm?id=11150).

Biohazards

Reviewers will assess whether materials or procedures proposed are potentially hazardous to research personnel and/or the environment, and if needed, determine whether adequate protection is proposed.

Resubmissions

For Resubmissions, the committee will evaluate the application as now presented, taking into consideration the responses to comments from the previous scientific review group and changes made to the project.

Renewals

Not Applicable.

Revisions

For Revisions, the committee will consider the appropriateness of the proposed expansion of the scope of the project. If the Revision application relates to a specific line of investigation presented in the original application that was not recommended for approval by the committee, then the committee will consider whether the responses to comments from the previous scientific review group are adequate and whether substantial changes are clearly evident.

Additional Review Considerations

As applicable for the project proposed, reviewers will consider each of the following items, but will not give scores for these items, and should not consider them in providing an overall impact score.

Applications from Foreign Organizations

Not Applicable.

Select Agent Research

Reviewers will assess the information provided in this section of the application, including 1) the Select Agent(s) to be used in the proposed research, 2) the registration status of all entities where Select Agent(s) will be used, 3) the procedures that will be used to monitor possession use and transfer of Select Agent(s), and 4) plans for appropriate biosafety, biocontainment, and security of the Select Agent(s).

Resource Sharing Plans

Reviewers will comment on whether the following Resource Sharing Plans, or the rationale for not sharing the following types of resources, are reasonable: (1) <u>Data Sharing Plan</u>

(//grants.nih.gov/grants/guide/url_redirect.htm?id=11151); (2) Sharing Model Organisms (//grants.nih.gov/grants/guide/url_redirect.htm?id=11152); and (3) Genomic Data Sharing Plan (GDS) (//grants.nih.gov/grants/guide/url_redirect.htm?id=11153).

Authentication of Key Biological and/or Chemical Resources:

For projects involving key biological and/or chemical resources, reviewers will comment on the brief plans proposed for identifying and ensuring the validity of those resources.

Budget and Period of Support

Reviewers will consider whether the budget and the requested period of support are fully justified and reasonable in relation to the proposed research.

2. Review and Selection Process

Applications will be evaluated for scientific and technical merit by (an) appropriate Scientific Review Group(s) convened by the Center for Scientific Review, in accordance with NIH peer review policy and procedures (//grants.nih.gov/grants/guide/url_redirect.htm?id=11154), using the stated review criteria. Assignment to a Scientific Review Group will be shown in the eRA Commons.

As part of the scientific peer review, all applications:

- May undergo a selection process in which only those applications deemed to have the highest scientific
 and technical merit (generally the top half of applications under review) will be discussed and assigned
 an overall impact score.
- Will receive a written critique.

Applications will be assigned on the basis of established PHS referral guidelines to the appropriate NIH Institute or Center. Applications will compete for available funds with all other recommended applications. Following initial peer review, recommended applications will receive a second level of review by the appropriate national Advisory Council or Board. The following will be considered in making funding decisions:

- Scientific and technical merit of the proposed project as determined by scientific peer review.
- Availability of funds.
- Relevance of the proposed project to program priorities.

3. Anticipated Announcement and Award Dates

After the peer review of the application is completed, the PD/PI will be able to access his or her Summary Statement (written critique) via the <u>eRA Commons (//grants.nih.gov/grants/guide/url_redirect.htm?</u>

id=11123). Refer to Part 1 for dates for peer review, advisory council review, and earliest start date.

Information regarding the disposition of applications is available in the <u>NIH Grants Policy Statement</u> (<u>//grants.nih.gov/grants/guide/url_redirect.htm?id=11156</u>).

Section VI. Award Administration Information

1. Award Notices

If the application is under consideration for funding, NIH will request "just-in-time" information from the applicant as described in the <u>NIH Grants Policy Statement (//grants.nih.gov/grants/guide/url_redirect.htm?</u> <u>id=11157</u>).

A formal notification in the form of a Notice of Award (NoA) will be provided to the applicant organization for successful applications. The NoA signed by the grants management officer is the authorizing document and will be sent via email to the grantee's business official.

Awardees must comply with any funding restrictions described in <u>Section IV.5</u>. <u>Funding Restrictions</u>. Selection of an application for award is not an authorization to begin performance. Any costs incurred before receipt of the NoA are at the recipient's risk. These costs may be reimbursed only to the extent considered allowable preaward costs.

Any application awarded in response to this FOA will be subject to terms and conditions found on the <u>Award Conditions and Information for NIH Grants (//grants.nih.gov/grants/guide/url_redirect.htm?id=11158)</u> website. This includes any recent legislation and policy applicable to awards that is highlighted on this website.

Individual awards are based on the application submitted to, and as approved by, the NIH and are subject to the IC-specific terms and conditions identified in the NoA.

ClinicalTrials.gov: If an award provides for one or more clinical trials. By law (Title VIII, Section 801 of Public Law 110-85), the "responsible party" must register and submit results information for certain "applicable clinical trials" on the ClinicalTrials.gov Protocol Registration and Results System Information Website (https://register.clinicaltrials.gov (https://register.clinicaltrials.gov). NIH expects registration and results reporting of all trials whether required under the law or not. For more information, see https://grants.nih.gov/policy/clinical-trials/reporting/index.htm (https://grants.nih.gov/policy/clinical-trials/reporting/index.htm)

Institutional Review Board or Independent Ethics Committee Approval: Grantee institutions must ensure that the application as well as all protocols are reviewed by their IRB or IEC. To help ensure the safety of participants enrolled in NIH-funded studies, the awardee must provide NIH copies of documents related to all major changes in the status of ongoing protocols. Data and Safety

Monitoring Requirements: The NIH policy for data and safety monitoring requires oversight and monitoring of all NIH-conducted or -supported human biomedical and behavioral intervention studies (clinical trials) to ensure the safety of participants and the validity and integrity of the data. Further information concerning these requirements is found at http://grants.nih.gov/grants/policy/hs/data_safety.htm and in the application instructions (SF424 (R&R) and PHS 398).

Investigational New Drug or Investigational Device Exemption Requirements: Consistent with federal regulations, clinical research projects involving the use of investigational therapeutics, vaccines, or other medical interventions (including licensed products and devices for a purpose other than that for which they

were licensed) in humans under a research protocol must be performed under a Food and Drug Administration (FDA) investigational new drug (IND) or investigational device exemption (IDE).

2. Administrative and National Policy Requirements

All NIH grant and cooperative agreement awards include the <u>NIH Grants Policy Statement</u> (<u>//grants.nih.gov/grants/guide/url_redirect.htm?id=11120</u>) as part of the NoA. For these terms of award, see the <u>NIH Grants Policy Statement Part II: Terms and Conditions of NIH Grant Awards, Subpart A: General</u> (<u>//grants.nih.gov/grants/guide/url_redirect.htm?id=11157</u>) and <u>Part II: Terms and Conditions of NIH Grant Awards, Subpart B: Terms and Conditions for Specific Types of Grants, Grantees, and Activities (<u>//grants.nih.gov/grants/guide/url_redirect.htm?id=11159</u>). More information is provided at <u>Award Conditions</u> and Information for NIH Grants (<u>//grants.nih.gov/grants/guide/url_redirect.htm?id=11158</u>).</u>

Recipients of federal financial assistance (FFA) from HHS must administer their programs in compliance with federal civil rights law. This means that recipients of HHS funds must ensure equal access to their programs without regard to a person's race, color, national origin, disability, age and, in some circumstances, sex and religion. This includes ensuring your programs are accessible to persons with limited English proficiency. HHS recognizes that research projects are often limited in scope for many reasons that are nondiscriminatory, such as the principal investigator's scientific interest, funding limitations, recruitment requirements, and other considerations. Thus, criteria in research protocols that target or exclude certain populations are warranted where nondiscriminatory justifications establish that such criteria are appropriate with respect to the health or safety of the subjects, the scientific study design, or the purpose of the research.

For additional guidance regarding how the provisions apply to NIH grant programs, please contact the Scientific/Research Contact that is identified in Section VII under Agency Contacts of this FOA. HHS provides general guidance to recipients of FFA on meeting their legal obligation to take reasonable steps to provide meaningful access to their programs by persons with limited English proficiency. Please see https://www.hhs.gov/civil-rights/for-individuals/special-topics/limited-english-proficiency/index.html (https://www.hhs.gov/civil-rights/for-individuals/special-topics/limited-english-proficiency/index.html). The HHS Office for Civil Rights also provides guidance on complying with civil rights laws enforced by HHS. Please see https://www.hhs.gov/civil-rights/for-individuals/section-1557/index.html (https://www.hhs.gov/civil-rights/forindividuals/section-1557/index.html); and https://www.hhs.gov/civil-rights/for-providers/laws-regulationsguidance/index.html (https://www.hhs.gov/civil-rights/for-providers/laws-regulations-guidance/index.html). Recipients of FFA also have specific legal obligations for serving qualified individuals with disabilities. Please see https://www.hhs.gov/civil-rights/for-individuals/disability/index.html (https://www.hhs.gov/civil-rights/forindividuals/disability/index.html). Please contact the HHS Office for Civil Rights for more information about obligations and prohibitions under federal civil rights laws at https://www.hhs.gov/ocr/about-us/contactus/index.html (https://www.hhs.gov/ocr/about-us/contact-us/index.html) or call 1-800-368-1019 or TDD 1-800-537-7697. Also note it is an HHS Departmental goal to ensure access to quality, culturally competent care, including long-term services and supports, for vulnerable populations. For further guidance on providing culturally and linguistically appropriate services, recipients should review the National Standards for Culturally and Linguistically Appropriate Services in Health and Health Care at http://minorityhealth.hhs.gov/omh/browse.aspx?lvl=2&lvlid=53 (http://minorityhealth.hhs.gov/omh/browse.aspx?lvl=2&lvlid=53).

In accordance with the statutory provisions contained in Section 872 of the Duncan Hunter National Defense Authorization Act of Fiscal Year 2009 (Public Law 110-417), NIH awards will be subject to the Federal Awardee Performance and Integrity Information System (FAPIIS) requirements. FAPIIS requires Federal award making

officials to review and consider information about an applicant in the designated integrity and performance system (currently FAPIIS) prior to making an award. An applicant, at its option, may review information in the designated integrity and performance systems accessible through FAPIIS and comment on any information about itself that a Federal agency previously entered and is currently in FAPIIS. The Federal awarding agency will consider any comments by the applicant, in addition to other information in FAPIIS, in making a judgement about the applicant's integrity, business ethics, and record of performance under Federal awards when completing the review of risk posed by applicants as described in 45 CFR Part 75.205 "Federal awarding agency review of risk posed by applicants." This provision will apply to all NIH grants and cooperative agreements except fellowships.

Cooperative Agreement Terms and Conditions of Award

Not Applicable

3. Reporting

When multiple years are involved, awardees will be required to submit the <u>Research Performance Progress</u> <u>Report (RPPR) (//grants.nih.gov/grants/rppr/index.htm)</u> annually and financial statements as required in the <u>NIH Grants Policy Statement. (//grants.nih.gov/grants/guide/url_redirect.htm?id=11161)</u>

A final RPPR, invention statement, and the expenditure data portion of the Federal Financial Report are required for closeout of an award, as described in the <u>NIH Grants Policy Statement</u> (//grants.nih.gov/grants/guide/url_redirect.htm?id=11161).

The Federal Funding Accountability and Transparency Act of 2006 (Transparency Act), includes a requirement for awardees of Federal grants to report information about first-tier subawards and executive compensation under Federal assistance awards issued in FY2011 or later. All awardees of applicable NIH grants and cooperative agreements are required to report to the Federal Subaward Reporting System (FSRS) available at www.fsrs.gov (//grants.nih.gov/grants/guide/url redirect.htm?id=11170) on all subawards over \$25,000. See the NIH Grants Policy Statement (//grants.nih.gov/grants/guide/url redirect.htm?id=11171) for additional information on this reporting requirement.

In accordance with the regulatory requirements provided at 45 CFR 75.113 and Appendix XII to 45 CFR Part 75, recipients that have currently active Federal grants, cooperative agreements, and procurement contracts from all Federal awarding agencies with a cumulative total value greater than \$10,000,000 for any period of time during the period of performance of a Federal award, must report and maintain the currency of information reported in the System for Award Management (SAM) about civil, criminal, and administrative proceedings in connection with the award or performance of a Federal award that reached final disposition within the most recent five-year period. The recipient must also make semiannual disclosures regarding such proceedings. Proceedings information will be made publicly available in the designated integrity and performance system (currently FAPIIS). This is a statutory requirement under section 872 of Public Law 110-417, as amended (41 U.S.C. 2313). As required by section 3010 of Public Law 111-212, all information posted in the designated integrity and performance system on or after April 15, 2011, except past performance reviews required for Federal procurement contracts, will be publicly available. Full reporting requirements and procedures are found in Appendix XII to 45 CFR Part 75 – Award Term and Conditions for Recipient Integrity and Performance Matters.

Section VII. Agency Contacts

We encourage inquiries concerning this funding opportunity and welcome the opportunity to answer questions

from potential applicants.

Application Submission Contacts

eRA Service Desk (Questions regarding ASSIST, eRA Commons, application errors and warnings, documenting system problems that threaten submission by the due date, and post-submission issues)

Finding Help Online: http://grants.nih.gov/support/ (preferred method of contact)

Telephone: 301-402-7469 or 866-504-9552 (Toll Free)

General Grants Information (Questions regarding application instructions, application processes, and NIH grant resources)

Email: <u>GrantsInfo@nih.gov (mailto:GrantsInfo@nih.gov)</u> (preferred method of contact)

Telephone: 301-945-7573

Grants.gov Customer Support (Questions regarding Grants.gov registration and Workspace)

Contact Center Telephone: 800-518-4726

Email: support@grants.gov (mailto:support@grants.gov)

Scientific/Research Contact(s)

Inna Belfer, M.D., Ph.D.

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Gretchen Buckler, M.D.

Office of Research on Women's Health (ORWH)

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Peer Review Contact(s)

Examine your eRA Commons account for review assignment and contact information (information appears two weeks after the submission due date).

Financial/Grants Management Contact(s)

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Section VIII. Other Information

Recently issued trans-NIH policy notices (//grants.nih.gov/grants/guide/url_redirect.htm?id=11163) may affect your application submission. A full list of policy notices published by NIH is provided in the <u>NIH Guide for Grants and Contracts (//grants.nih.gov/grants/guide/url_redirect.htm?id=11164)</u>. All awards are subject to the terms and conditions, cost principles, and other considerations described in the <u>NIH Grants Policy Statement (//grants.nih.gov/grants/guide/url_redirect.htm?id=11120)</u>.

Authority and Regulations

Awards are made under the authorization of Sections 301 and 405 of the Public Health Service Act as amended (42 USC 241 and 284) and under Federal Regulations 42 CFR Part 52 and 45 CFR Part 75.

Weekly TOC for this Announcement (/grants/guide/WeeklyIndex.cfm?03-01-19)
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