



National Institute of Environmental Health Sciences
Your Environment. Your Health.

National Advisory Environmental Health Sciences Council June 2024

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National Institute of Environmental Health Sciences



Topics for Discussion



Staff Updates



DERT Activities



Policy and Related Updates



DETR Staffing Updates



Staff Departures

Linda Bass, Ph.D.



- Joined federal service in 1990 and DERT in 2001
- Worked as a Scientific Review Officer and Deputy Chief of the Scientific Review Branch
- Retired in March

Barbara Gittleman



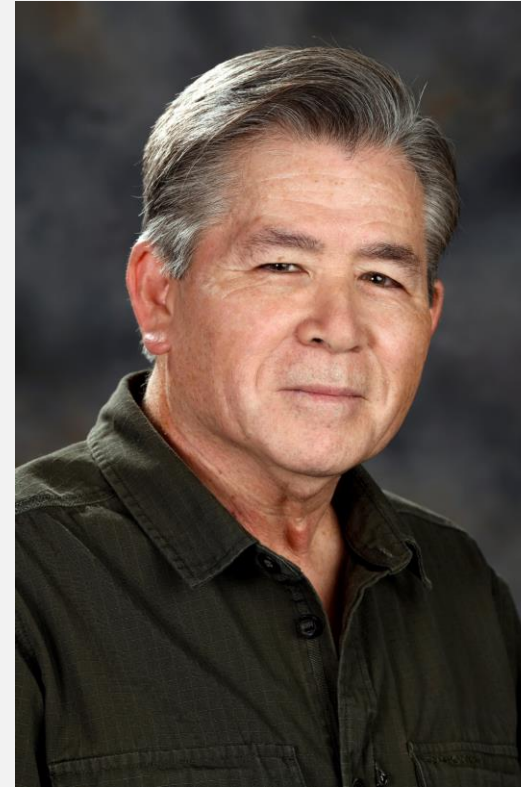
- Joined federal service in 1998 and DERT in 2009
- Worked as a Grants Management Specialist
- Retired in April

Lindsey Martin, Ph.D.



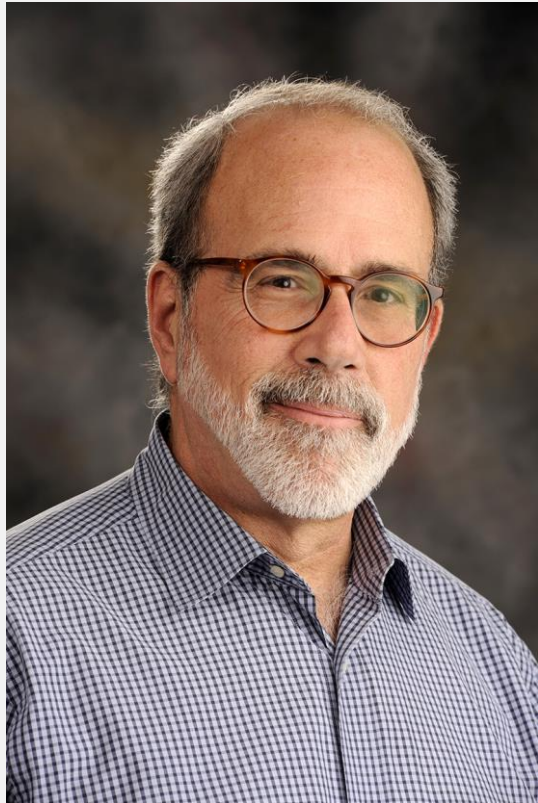
- Joined federal service in DERT in 2020
- Left DERT in April for a position at the National Institute on Drug Abuse

Jim Remington



- Joined federal service in 1984 and DERT in 2005
- Worked as a Program Analyst in the Worker Training Program
- Retired in March

Alfonso Latoni, Ph.D.



- Joined federal service in DERT in 2002
- Joined NIEHS in 2013 as Chief of the Scientific Review Branch
- Retired from Federal Service at the end of May



New Staff and New Roles

Jennifer Baker

Staff Assistant, Office of the Director



- Stepping into the role of Staff Assistant in the Office of the Director
- Has been with DERT, initially as a contractor and then as a Program Specialist, since February 2020
- Brings a wealth of experience in every aspect of administrative support
- New role will include providing administrative support to the Office of the Division Director

Valerie Bartlett

Program Analyst, Office of the Director



- Comes to DERT from NLM
- Worked in both Intramural and Extramural institutes and centers within the NIH since 2001
- Role as the Council Coordinator and Guide Liaison will include providing oversight to the National Advisory Environmental Health Sciences (NAEHS) Council and many of the administrative processes necessary for DERT programmatic operations

Amelia “Mia” Pearson

Industrial Hygienist, Worker Education and Training Branch



- Transferred to DERT from the NIEHS Health and Safety Branch
- Brings a wealth of knowledge in the field of occupational safety and health and industrial hygiene as she has been an occupational health and safety specialist for NIEHS since December 2019
- Before joining NIEHS, she was an OSHA health compliance officer-industrial hygienist for the NC Department of Labor in Raleigh NC from October 2007
- In addition to traditional industrial hygiene work, she conducted mishap and near-miss investigations, lead the NIEHS Narcan program, and provided opioid training to the HSE staff and others

Irina Alva-Weinstein

Grants Management Specialist, Grants Management Branch



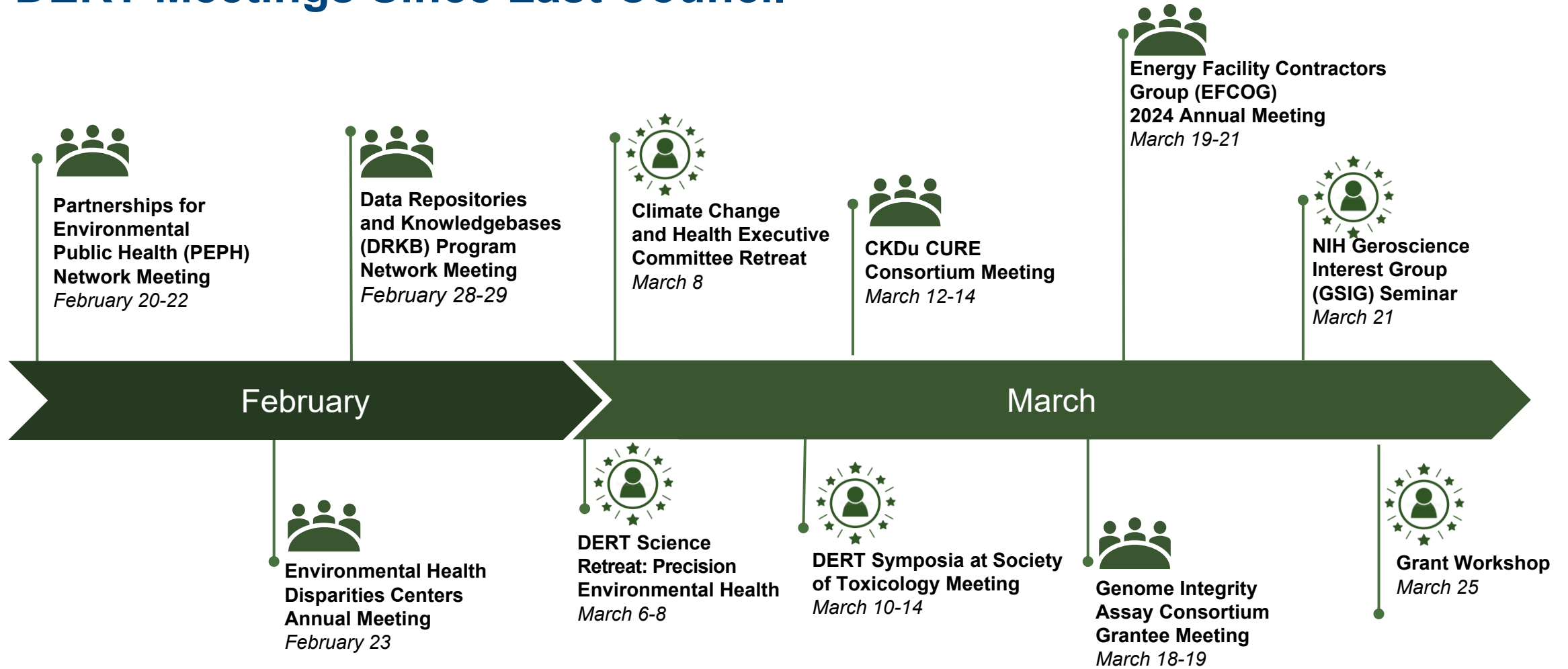
- Joined DERT May 20
- Began at NIH in 1995 as a High School Student Intern, became a grants specialist at NIGMS
- For the last three years has been working in the private sector assisting first responders with finding grants opportunities and supporting their grants management needs.



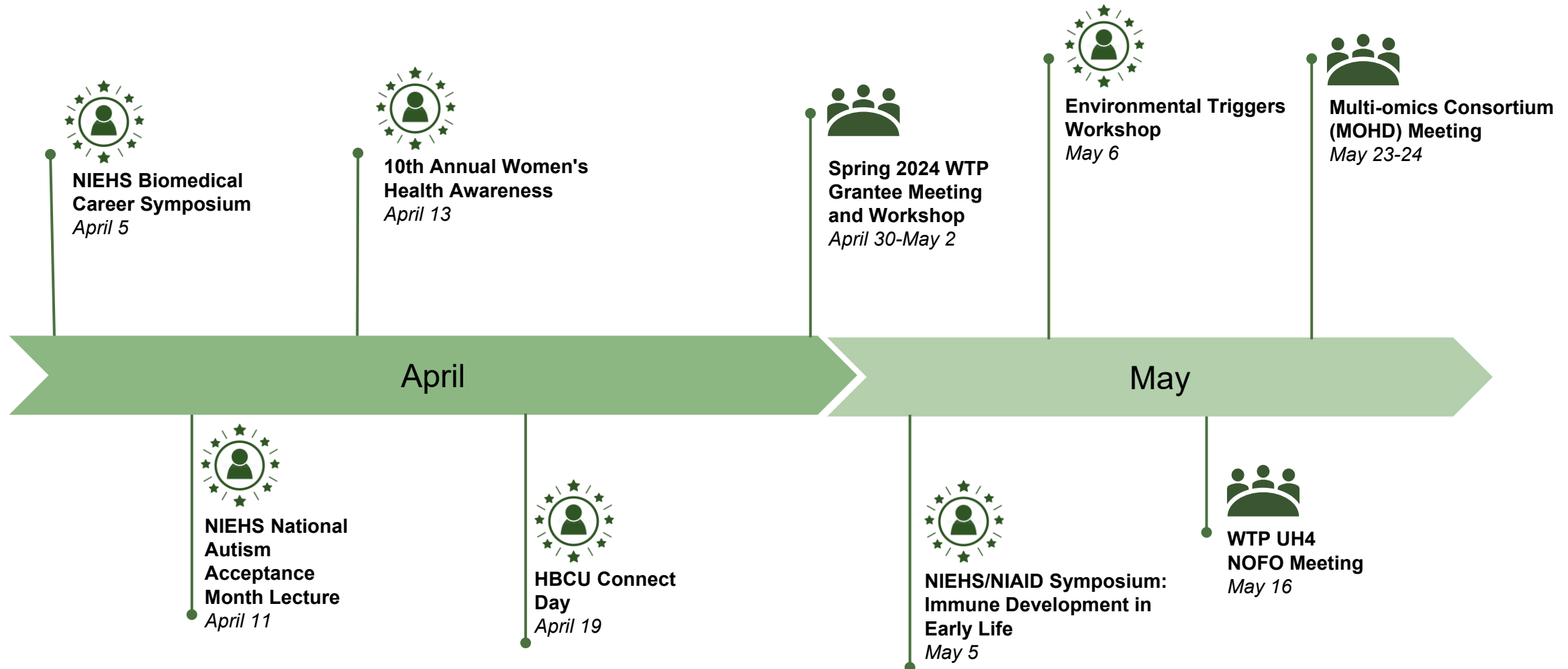
DETR Activities



DERT Meetings Since Last Council



DERT Meetings Since Last Council



Upcoming DERT Meetings



**WTP Grantee
Update**
June 10

June

July

August

September

**NCCIH-NIEHS Workshop
on Complementary and
Integrative Interventions
to Prevent and Mitigate
the Effects of Endocrine
Disrupting Chemicals**
June 10-11



**A Web-tool for Autism and
the Environment (aWARE)
Workshop**
September 5-6



**NIEHS Children's
Translation Center
Meeting**
September 16-17



Policy and Related Updates



Cloud Computing Resources

The NIH STRIDES Initiative and Cloud Lab

ODSS and CIT are providing access to the Cloud

- 90-day program for NIH Intramural and Extramurally supported researchers
- \$500 credit to access from Amazon Web Services, Google Cloud, or Microsoft Azure
 - CPU/GPU Virtual Machines
 - Generative AI
 - Jupyter Notebooks
 - Workflow managers
- Tailored Training and Cloud support from CIT



Visit the Cloud Lab Page
to learn more!



OER Policy Updates

Not an exhaustive list, consult the Grants Policy Statement and NIH Guide for Grants and Contracts

Unilateral Closeout (<https://bit.ly/3JXn3b8>)

- Grant recipients have an obligation to submit timely and accurate closeout reports including progress, financial expenditure and invention reports.
- NIH recipients must submit a Final Federal Financial Report (FFR), Final Research Performance Progress Report (F-RPPR), and Final Invention Statement and Certification (FIS) within 120 calendar days of the end of the period of performance (project period)
- After 120 calendar days NIH will initiate unilateral closeout
- After 1-year NIH will report non-compliance to the System for Award Management
 - This may impact eligibility for future funding among other consequences
 - To comply with regulations this will be applied retroactively to January 1, 2023

Foreign Subawards (<https://bit.ly/4bCX6ta>)

- Not new policy, updated guidance and enforcement
- For foreign subrecipients, a provision requiring the foreign subrecipient to provide access to copies of all lab notebooks, all data, and all documentation that supports the research outcomes as described in the progress report, to the primary recipient with a frequency of no less than once per year, in alignment with the timing requirements for Research Performance Progress Report submission. Such access may be entirely electronic.
- NIH will not support any agreement that does not meet the minimum requirements outlined in GPS 15.2.1 (above)

NRSA Stipends and other costs (<https://bit.ly/4bwaU9v>)

- Significant increases to trainee stipends, similar increases planned for next 3-4 years Additional increases to Training Related Expenses and Dependent* Care costs
 - For FY24 4% for predoc, 8% for postdoc
- Retroactive to all FY24 awards
- No assurance that the number of trainees will be maintained at previous levels

Simplified Review Framework (<https://bit.ly/4apB3oJ>)

- Effort to simplify review criteria and process
 - Should the proposed research be funded?
 - Can the proposed research be conducted?
- Mitigate the effects of reputational bias
- Reduce reviewer burden
- Applies to applications with due dates of January 25, 2025 and later
- New application forms and guidance coming this summer



Unobligated Balances

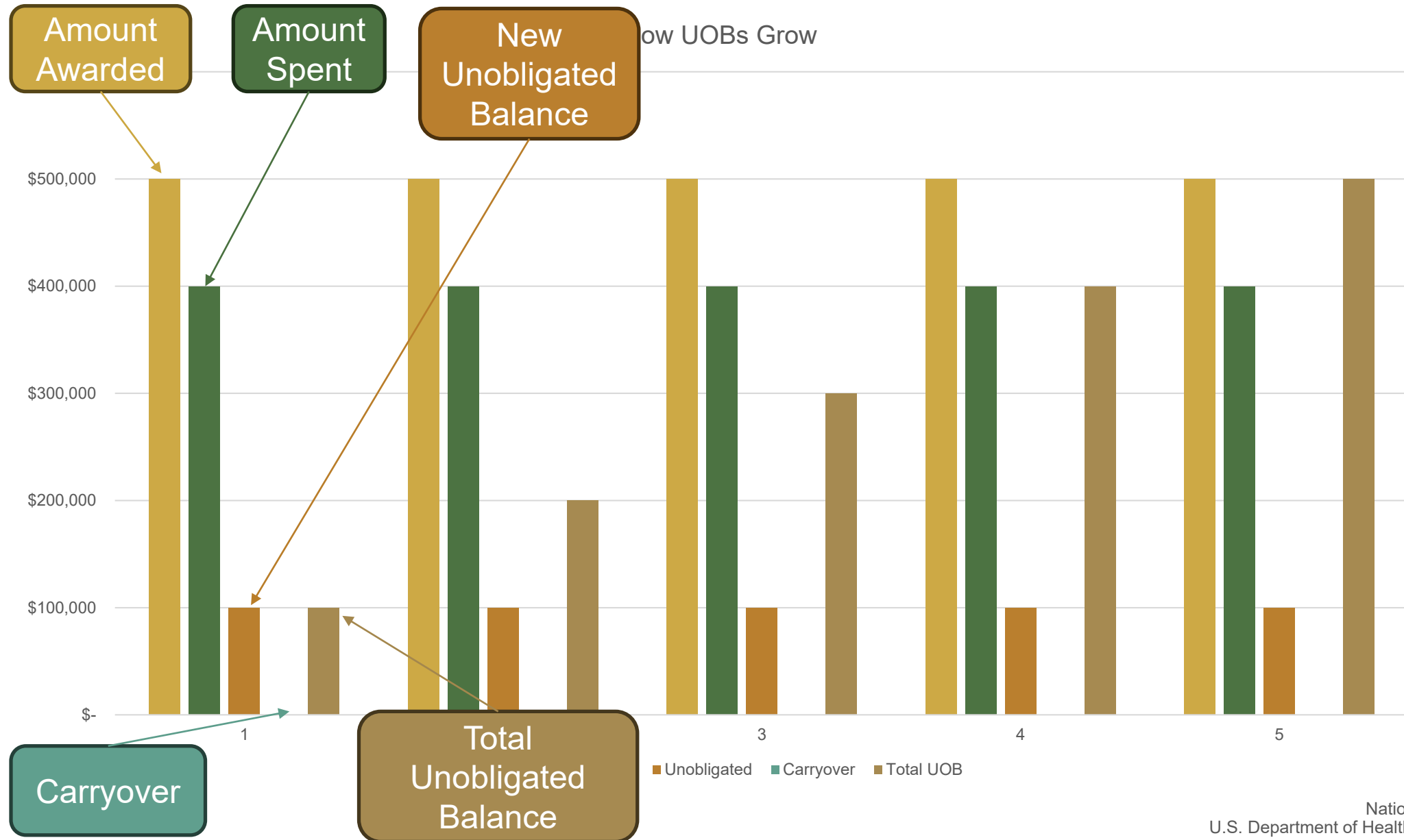
What they are and what we are doing to manage them

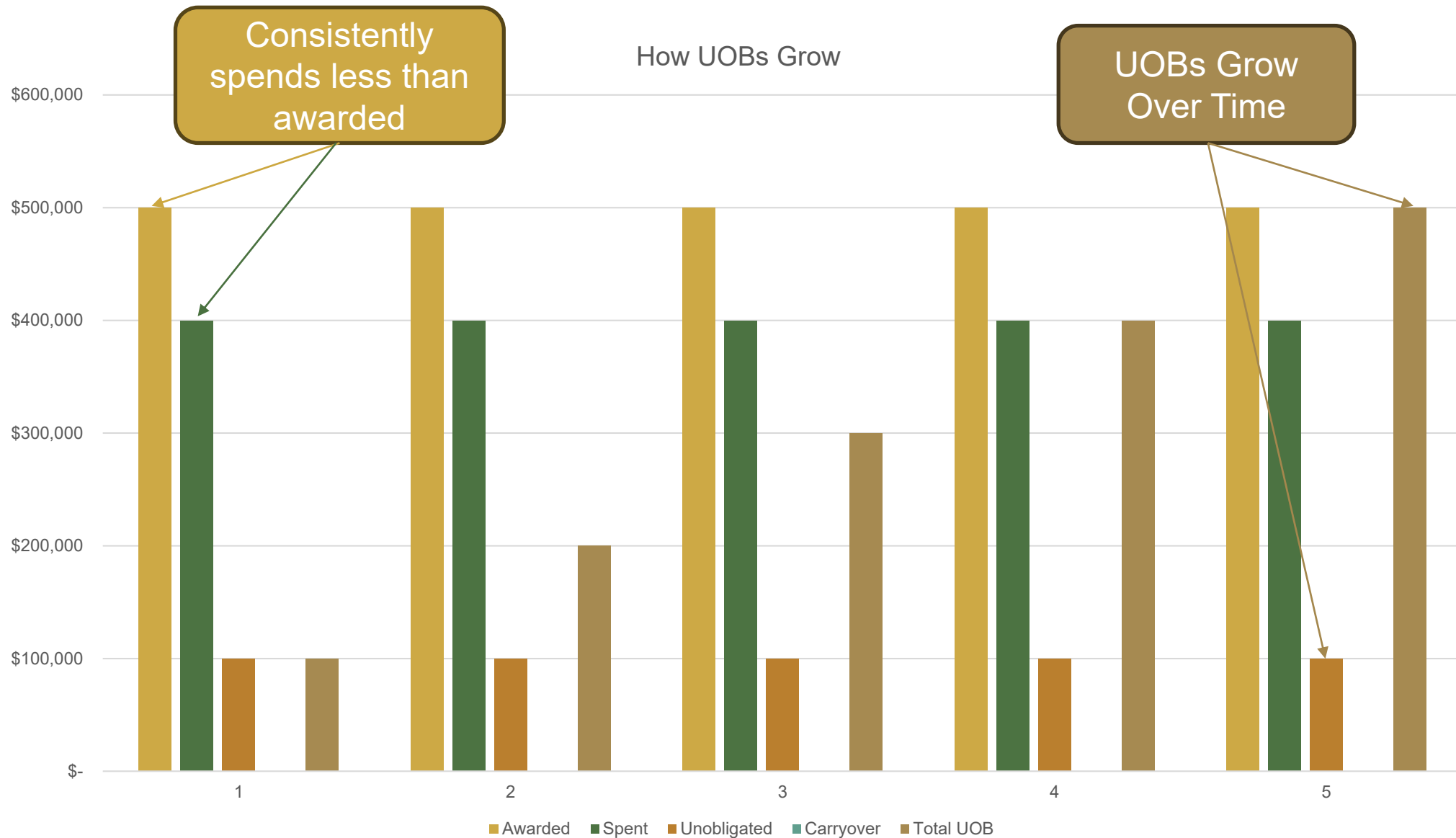
Definitions

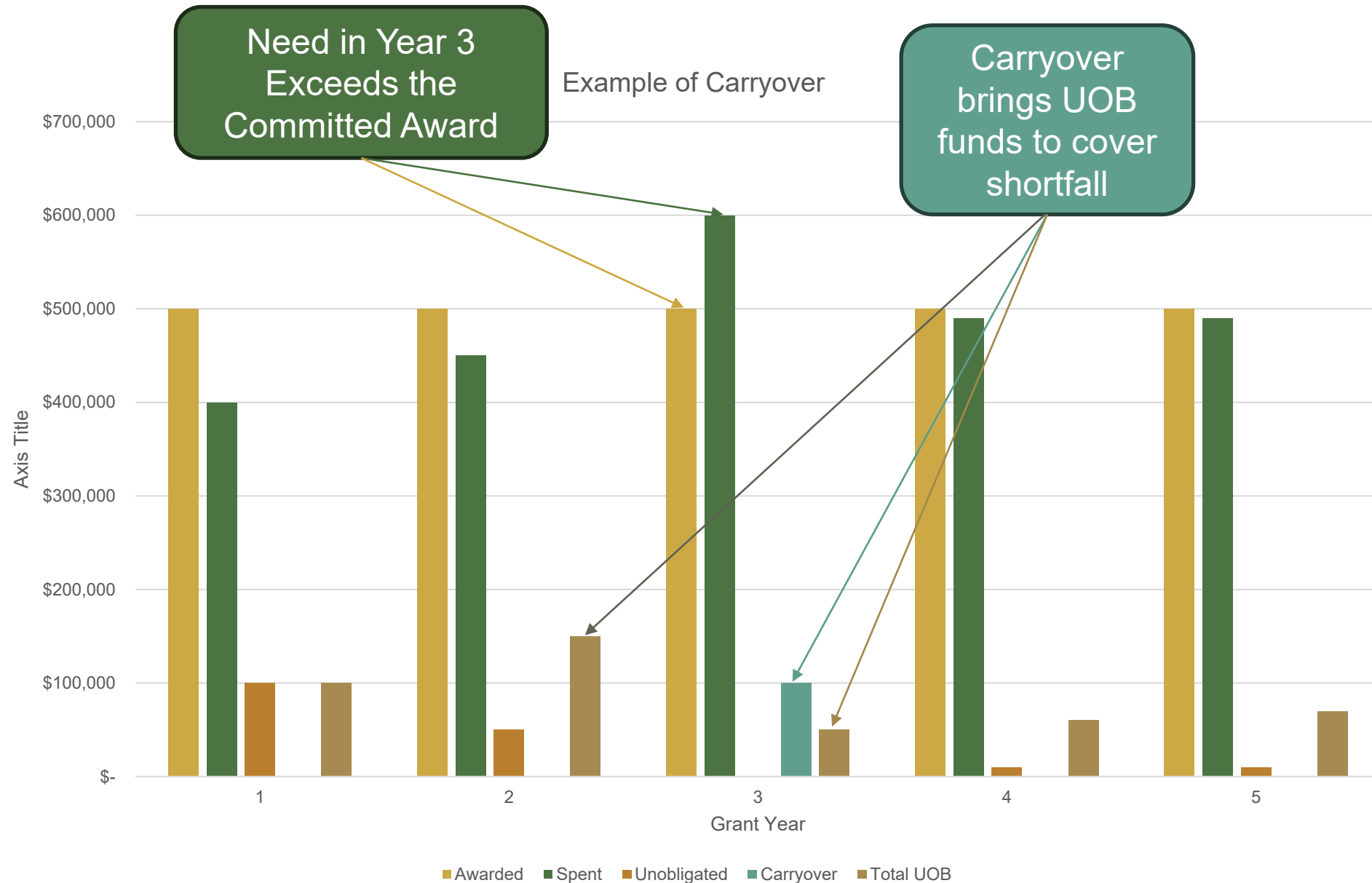
- **Unobligated Balance (UOB)** – funds awarded in a previous year that are not formally obligated to a specific expenditure
- **Unliquidated Obligation** – funds (from the current or a previous year) that have been formally obligated to an expenditure that has not been liquidated (had the funds removed from the account)
- **Carryover** – A request to access funds from an UOB to enable an obligation in the current year beyond what can be funded from the current award
- **‘Draw Down’** – When the Recipient withdraws funds from the Payment Management System
- **Bona Fide Needs rule** – The US Government may not award more funds in a year than can reasonably be expected to be utilized for a current-year need (including UOB, carryover, supplements, and the current year funding).

Streamlined Noncompeting Award Process (SNAP, <https://bit.ly/3QNaBib>)

- Modification of provisions for progress reports, NoAs, and financial reports, key to this discussion:
 - FFR is only required at the end of the competitive segment
 - Recipient has ‘automatic carryover authority’
- Applies to most ‘R’ and ‘K’ awards
 - Explicitly indicated in the NoA
- Non-SNAP awards include ‘P’, ‘U’, ‘F’, ‘T’, SBIR, R35, clinical trials, and additional individual awards that have been excluded from SNAP (require close monitoring for consistent failure to report)

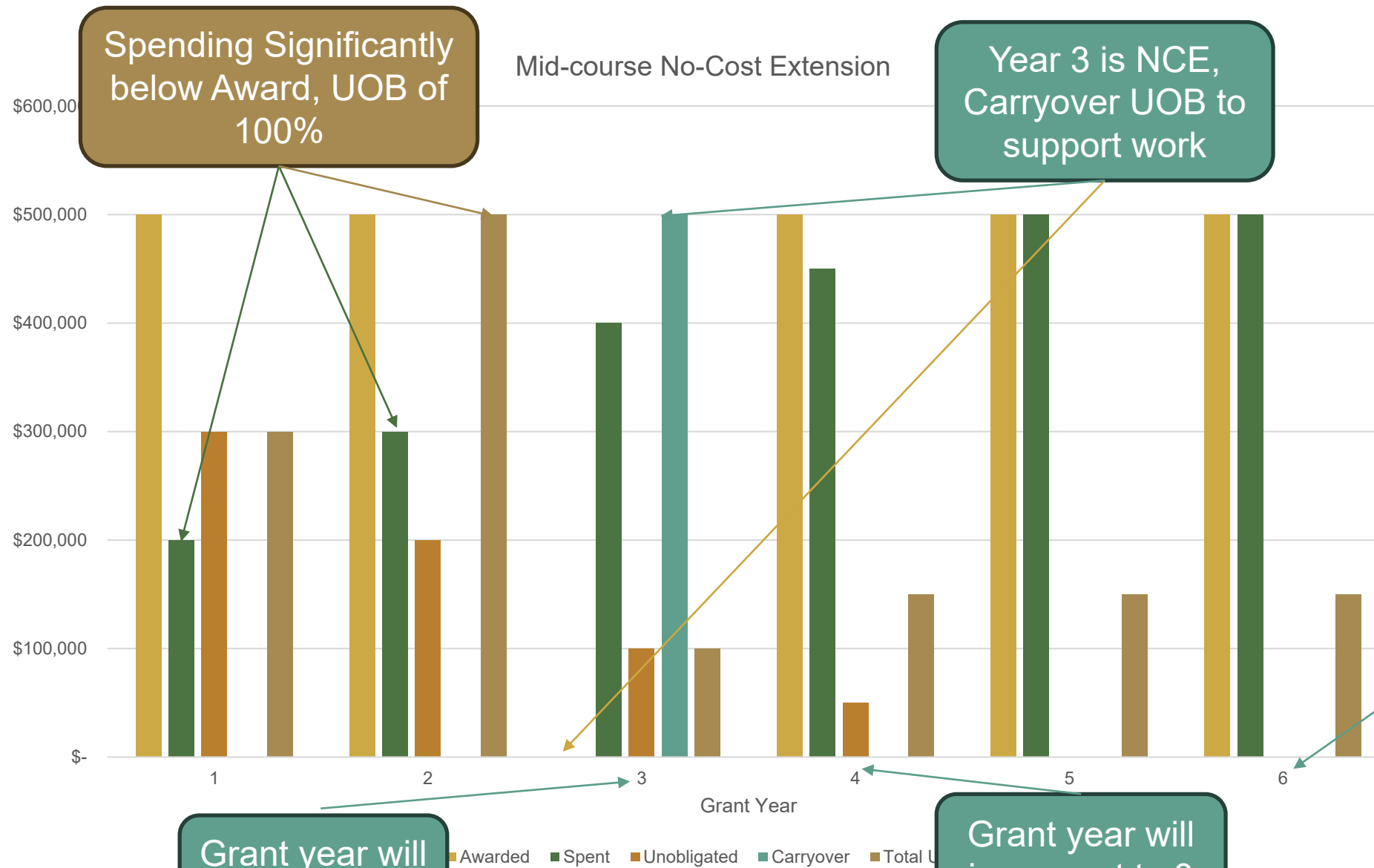


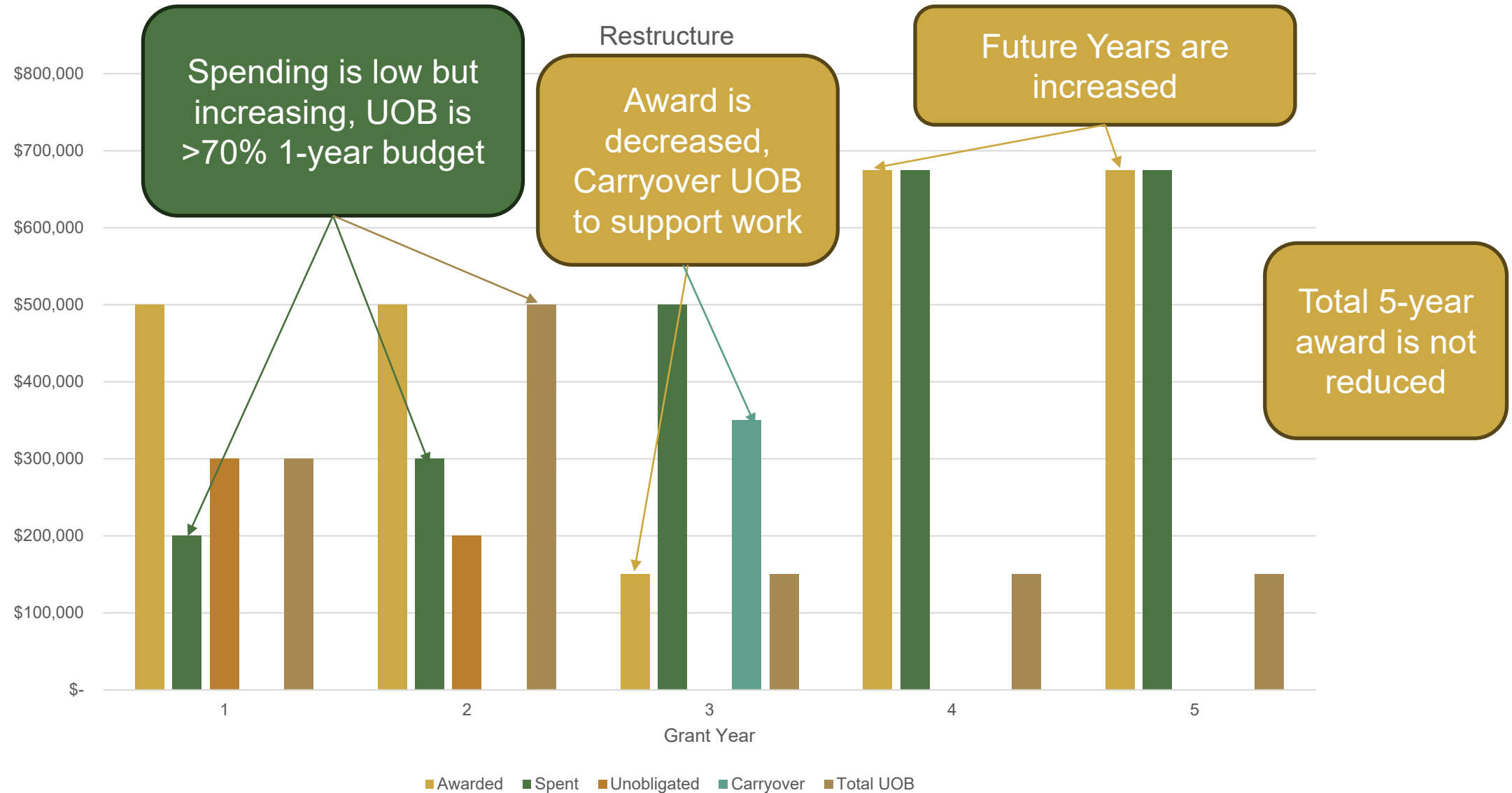


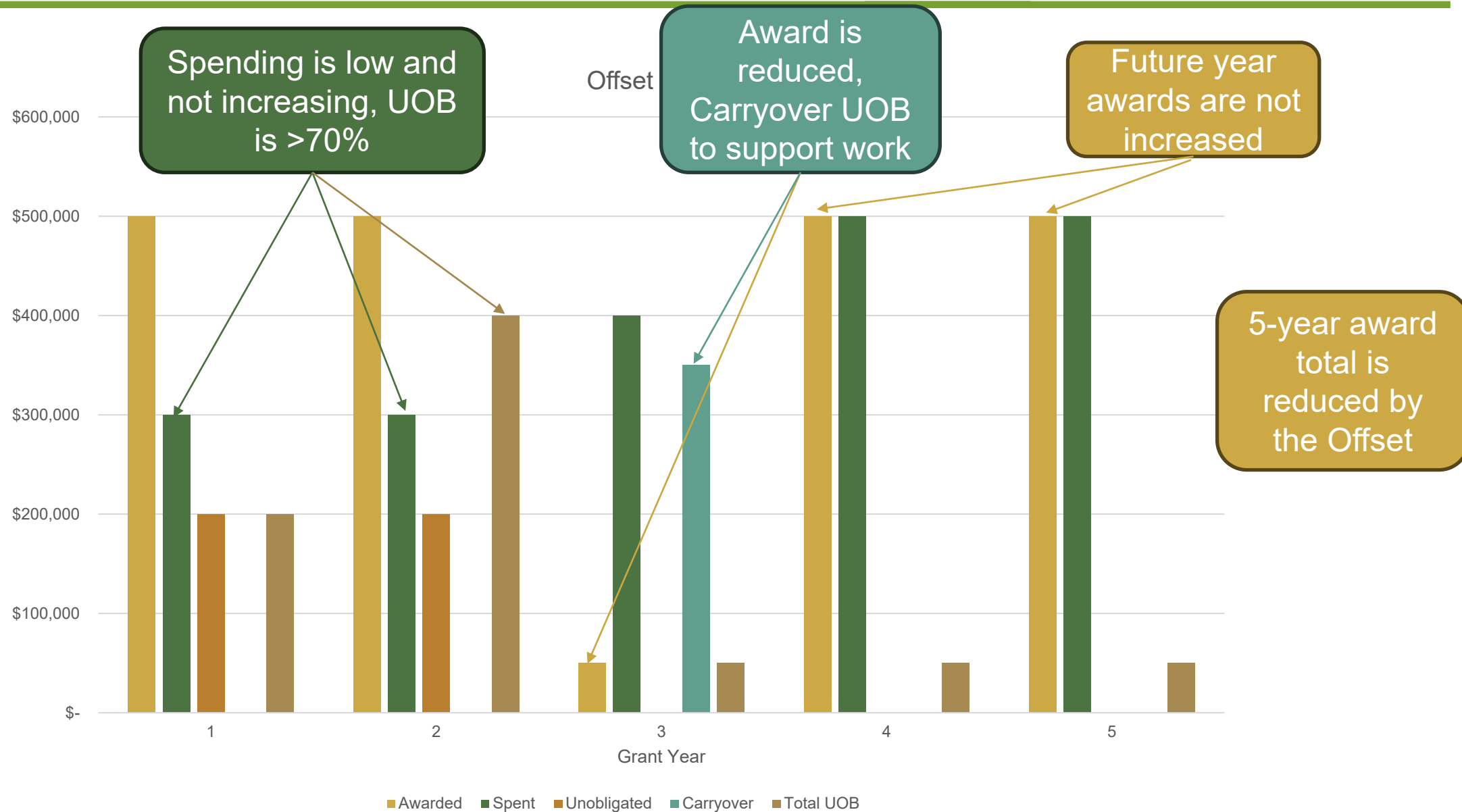


How are we managing UOBs?

- Mid-Project No-Cost Extensions
 - Provide additional time for recipients to use funds remaining from previous budget period before awarding new funds
 - Total funds through the project are not affected, project period is extended
 - Used if total UOB exceeds 100% of annual award
- Restructure
 - Redistribute remaining funds over the remainder of the project period, so as not to give too much funding in any one year
 - Total funds through the project and project period are not affected
 - Used if UOB exceeds 70% of the award and spending is ‘reasonable’
- Offset
 - Reduce the amount of the new award by a portion of the unobligated balance
 - Total funds awarded are reduced, project period is not affected
 - Used if UOB exceeds 70% of the award and spending is consistently lower than the award

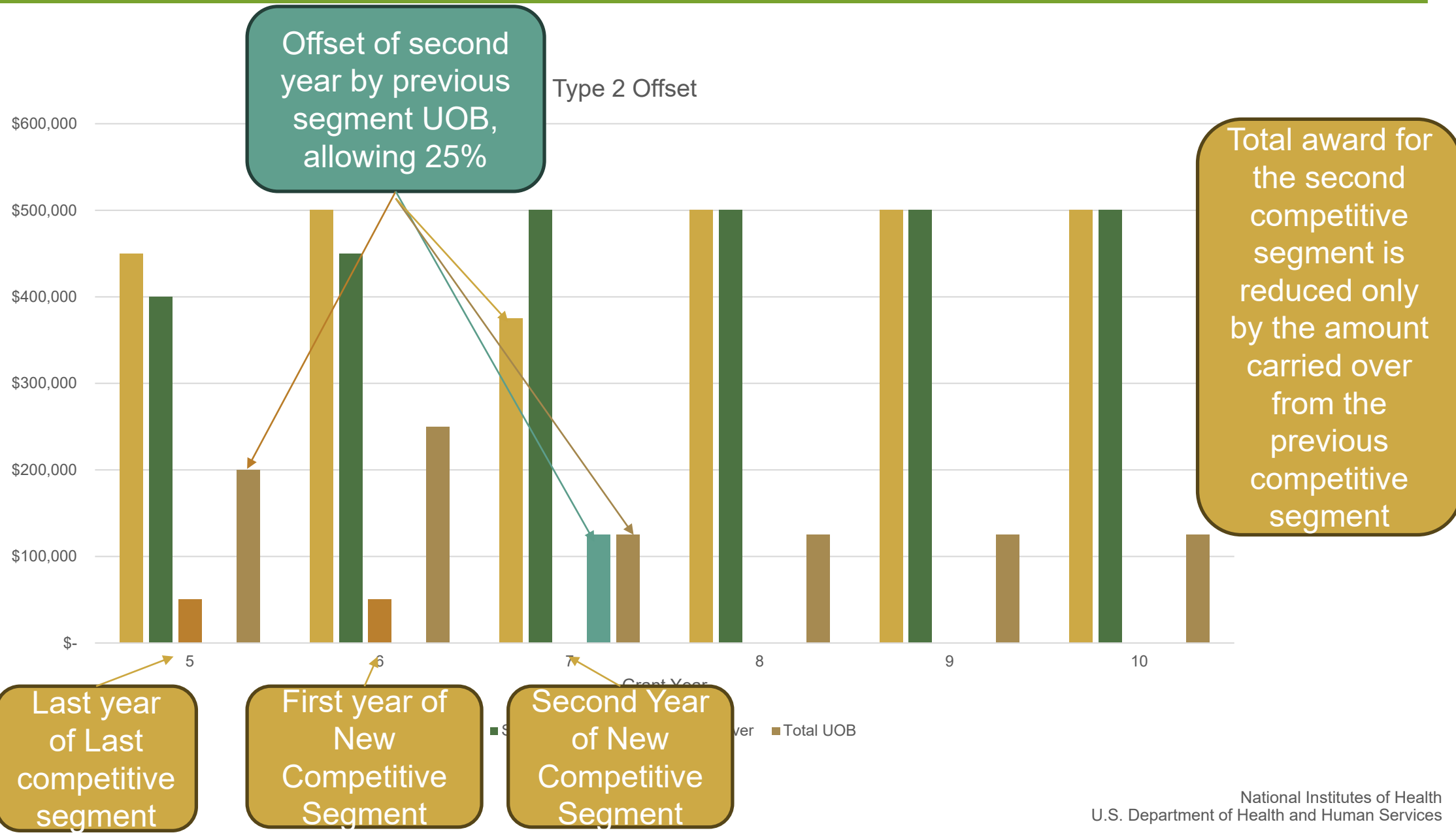






Type 2 Offset

- New process planned to implement in FY25
- **Rationale:** At the completion of a competitive phase and initiation of a new competitive phase (type 2 application) the work of the original phase is complete and the work planned for the new phase is supported by the specific aims and budget.
- **Conclusion:** Carrying an unobligated balance through a type 2 is not justified.
- **Action:** Beginning in FY25 we will implement a standard practice of offsetting the second year of a type 2 by the Unobligated Balance reported on the final Federal Financial Report closing out the previous competitive phase, allowing for an Unobligated Balance of up to 25% of the first year of the new competitive phase (inclusive of any reported UOB of the first year) and consistent with the bona fide need rule.





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Thanks for your attention!



Questions?



Open Council Discussion

NIH Director, Monica Bertagnolli, has requested all Councils to provide feedback on a proposed Common Fund effort...

NIH Common Fund Program to Support Clinical Research in Primary Care Settings

Problem: The health of the U.S. population is declining. Decline is steepest among the underserved and underrepresented.

Goals:

- Establish a **primary care-focused** clinical research network that is disease-agnostic, facilitating clinical research in **mission areas across all ICs**
- **Integrate innovative research** with routine clinical care in real-world settings
- Create a foundation for sustained **engagement with communities underrepresented in clinical research**

Anticipated Budget: OD funds \$5M in FY24, \$25M in FY25; anticipate ramp up of ~\$50-100M/year after assessing feasibility and budget requirements

Timeline: Gather Feedback in Spring 2024 → Quick Launch in 2024 → Expand in 2025 and Beyond