



# Environmental Health Sciences Core Centers (P30) RFA-ES-22-010

**Pre-Application Webinar  
January 20, 2023**

Claudia Thompson, Program Director

Liam O'Fallon, CEC Lead

James Williams, Grants Management

Varsha Shukla, Scientific Review

## Purpose & Agenda

- Focus on recent changes to the EHS Core Center program and answer questions about requirements.

## Agenda

- Background & Center Structure Claudia Thompson
- Changes to FOA Claudia Thompson
- CEC Reminders Liam O'Fallon
- Grants Management Topics James Williams
- Review Topics Varsha Shukla
- Questions & Answer Q&A Box



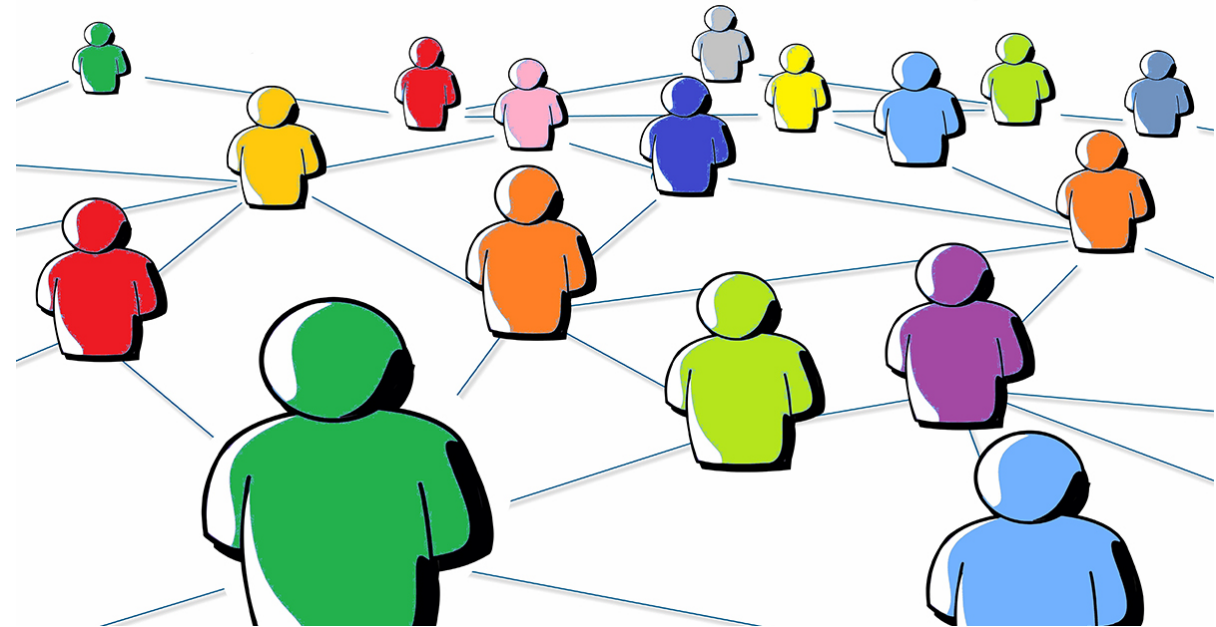
# EHSCC Structure and Function

## EHSCC Program Goals

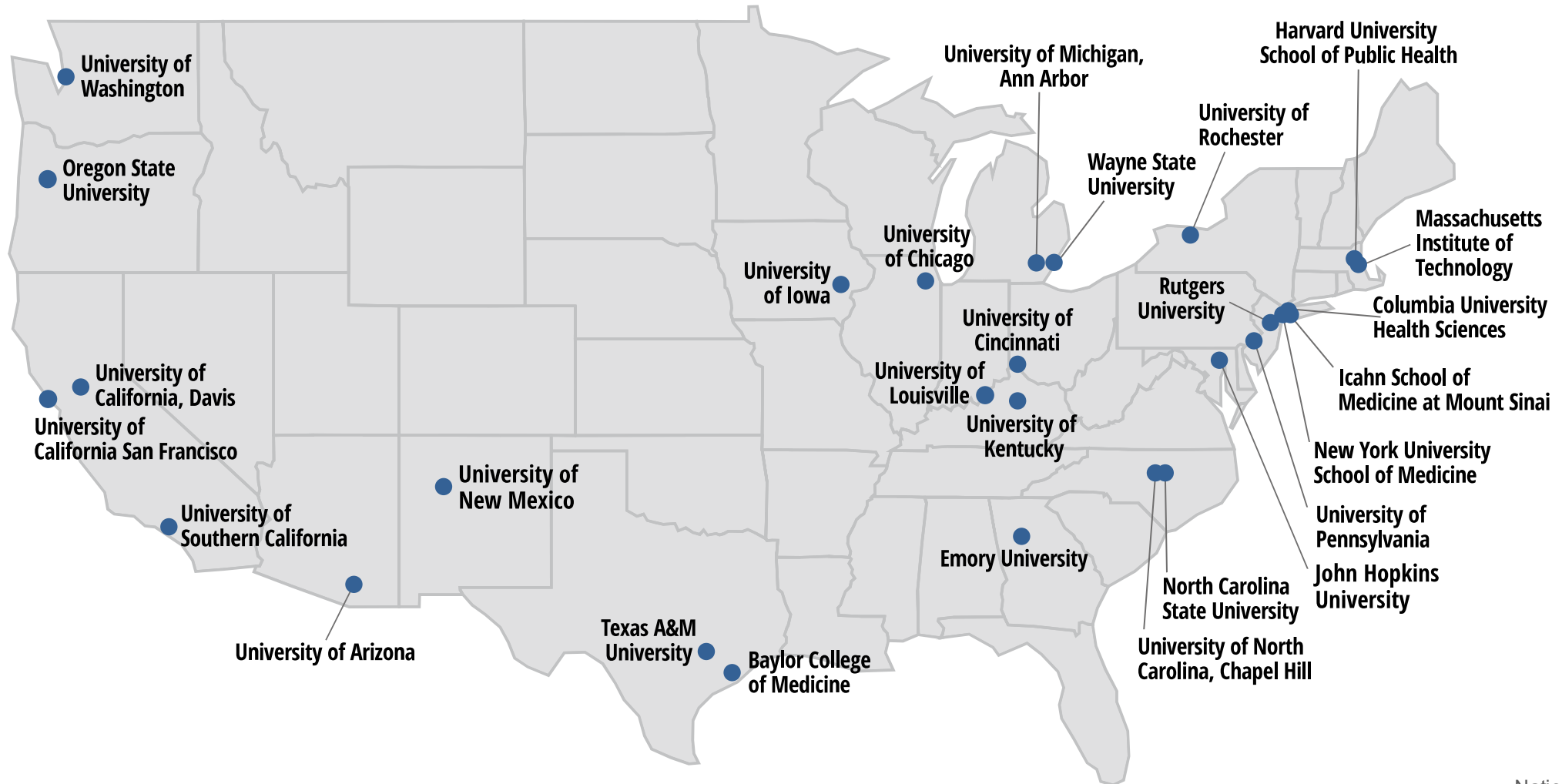
Environmental Health Sciences Core Centers guide and support environmental health research at an Institution or region.

Their goals are to:

- Provide intellectual leadership and foster innovation
- Translate research into public health outcomes
- Support new ideas and collaborations
- Provide career development for future leaders
- Engage communities in multi-directional communication



# Current Core Centers Map



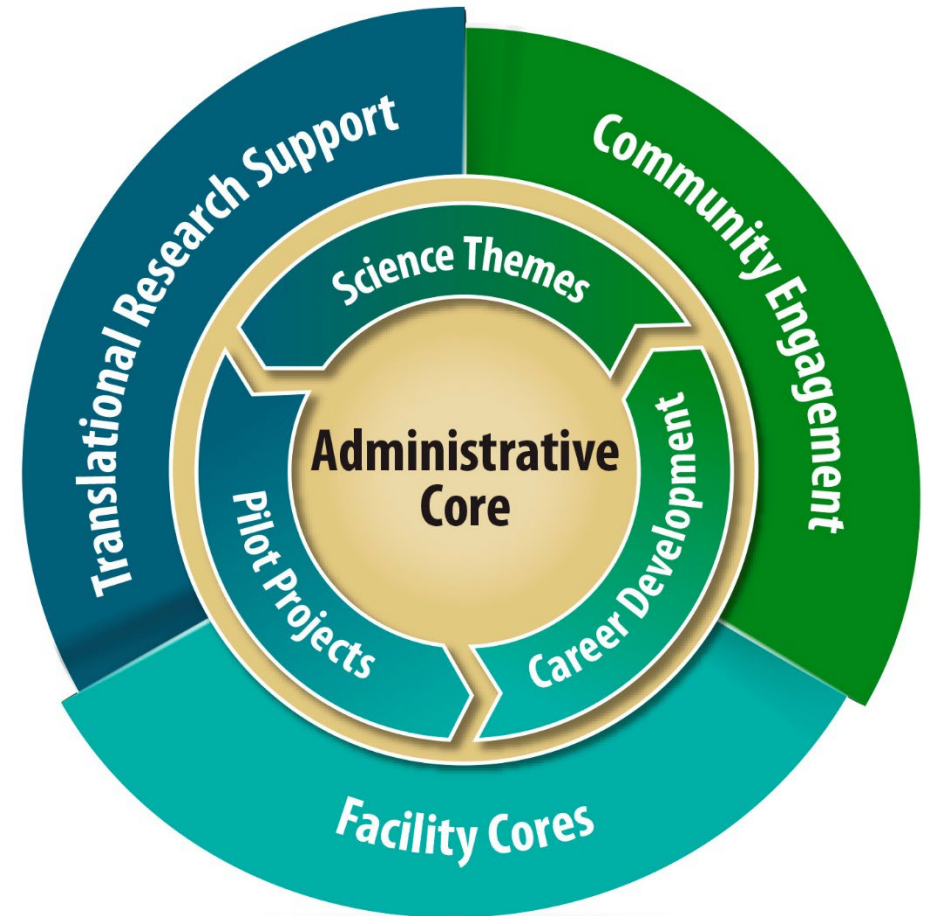
## Core Centers

Provide administrative and infrastructure support needed to bring together scientists from multiple disciplines to pursue promising research opportunities.



## Background: Required Components

- Overall -- Demonstrate an Organized Approach to Leading EHS
- Administrative Core
- Pilot Projects
- At least one Facility Cores
- Translational Research Support Core
- Community Engagement Core





## Science Themes

Centers identify multidisciplinary or interdisciplinary themes to bring together researchers and encourage innovation in environmental health research.





## Career Development

The Administrative Core brings in and cultivates careers of new investigators. Centers provide new investigators with assistance, guidance, and opportunities that enable them to achieve independent status.



## Pilot Projects

Centers use pilot projects to support short-term projects to explore the feasibility of new areas of study, and/or to provide opportunities for investigators from other disciplines to apply their expertise to environmental health research and environmental medicine.



## Facility Cores

Equip teams of investigators with technologies, services, or instrumentation that will enhance research progress. They also play an important role in developing new methodologies and training and educating center members.



## Translational Research Support

This facility core provides instrumentation and technologies to facilitate translation of environmental health sciences into information that can be used by affected communities for improved public health, and/or clinical practice.





## Community Engagement Core

These cores increase awareness of environmental health by translating and disseminating center research findings, and helping researchers understand which environmental health issues are important to their community partners.



## Learn More: EHS Core Center Webpage

- Currently funded Centers
  - Webpage
  - Publications
  - NIH RePORT link
- Spotlights
  - Research
  - Community Engagement
  - Career Development
- Current RFA link

**Research**

Funded by NIEHS Grants

- Centers, Interagency Collaborations, and Consortia
  - Breast Cancer & the Environment Research Program +
  - Centers of Excellence on Environmental Health Disparities Research +
  - Climate Change and Human Health Research +
  - Collaborative Centers in Children's Environmental Health Research and Translation +
  - Countermeasures Against Chemical Threats (CounterACT) Program
  - Environmental Health Sciences Core Centers -**
  - About the EHS Core Centers
  - Center Spotlight
  - Community Engagement Core
  - Early Stage Investigator Spotlight Webinar Series
  - EHS Core Centers Data Collection Form
  - Environmental Health Sciences Core Centers Grantees
  - Guidelines & Funding Announcements
  - Expanding Genome Integrity Assays to Population Studies +
  - Nanotechnology Consortia
  - Oceans and Human Health +
  - Superfund Research Program +

### Environmental Health Sciences Core Centers

Scientific collaboration and cutting-edge technologies can advance environmental health sciences. The NIEHS Environmental Health Sciences (EHS) Core Centers Program facilitates these collaborations by funding institutional infrastructure to support scientific equipment, facilities, and other resources that can be shared among environmental health researchers. By pursuing shared research questions, the EHS Core Centers identify emerging issues that advance understanding about how pollutants and other environmental factors affect human biology and may lead to disease.

Currently, there are more than [20 centers](#) across the country. Each center has its own strategic vision and scientific focus, but all share four common goals: advancing scientific research; promoting community engagement; advancing translational research; and training new researchers.

**PFAS in Blood Linked to Higher Diabetes Risk in Middle-aged Women**

High concentrations of per- and polyfluoroalkyl substances (PFAS) in blood were associated with an increased risk of diabetes in middle-aged women, found NIEHS-funded researchers from the University of Michigan. [Linkage for Environmental Engineers and Disease Center](#) According to the authors, results suggest that lowering PFAS exposure could be a useful tool in combating diabetes, one of the leading causes of death in the U.S.

**About Core Centers**

[About the EHS Core Centers Program](#)

Scientist collaborating on a computer

The EHS Core Centers Program brings together researchers to tackle related environmental health questions.

**Center Spotlight**

[Precision Health, Environmental Justice Focus of Community Forums](#)

The NIEHS Director and Deputy Director shared information on gene-environment interactions, anti-racism in biomedical research, and more at two community forums hosted by NIEHS-funded Core Centers.

**Community Engagement Cores**

Community Engagement Cores translate and

<https://www.niehs.nih.gov/research/supported/centers/core/index.cfm>



# RFA Specific Information & Changes



## Key Information

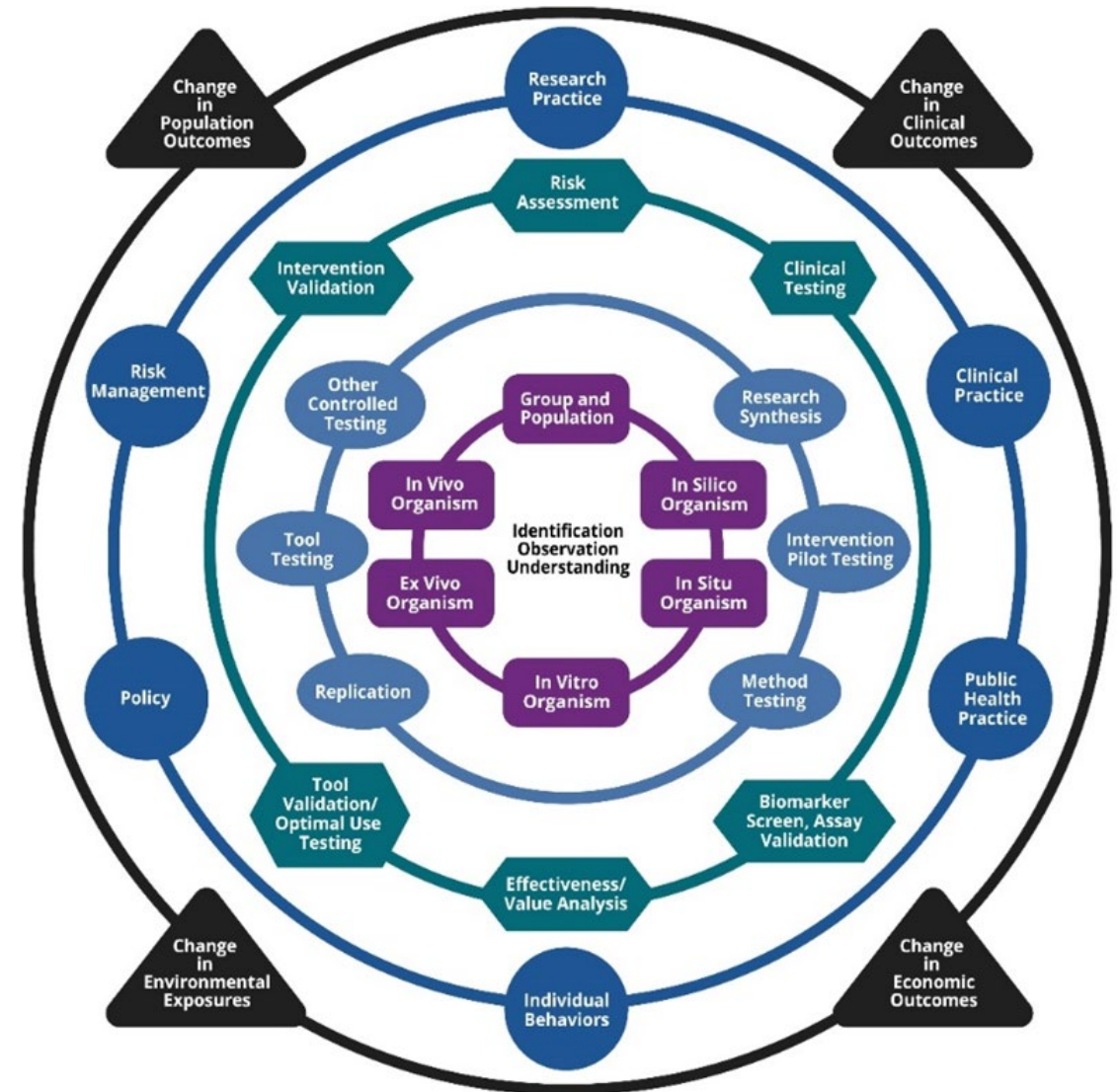
- Receipt Date: April 19, 2023 and April 19, 2024
- Budget: New/first time applications = \$850K/year (Direct Costs)  
Renewal applications = \$1M/year (Direct Costs)
- Eligibility: Six active NIEHS-supported research awards from four distinct PDs/PIs who are members of the proposed Center.  
At the time of submission of an application, awards must have at least 1 full active year remaining
- Eligible Grants: R00, R01, R03, R21, R24, R33, R35, R43, R44, P01, P42, P50, U01, U19, U24, U2C,UG3 and or K-grants). P01, P50, or U19) awards only count as one qualifying research project (i.e., sub-components are not separately counted).
- Duration: New/first time applications = 4 Years  
Renewal applications = 5 Years
- Foreign Institutions: Non-domestic entities or components of US institutions **are not** allowed.  
Foreign components **are** allowed

## Translational Research Vision

- Part of the Overall Component
- Describe the TR vision and how it will support the overall Center goals.
  - Provide examples of how the EHSCC structure facilitates TR.
  - Provide details on staff and resources to implement the TR vision.

### Translational Research:

The movement of an idea through the various research phases with the goal of creating an impact on human health



## Change: Attachments

### Other Attachments under Overall Component:

The filename provided for the attachment will be the name used for the bookmark in the application image. There are two Other Attachments that are required. *Applications that do not include these two attachments will be considered non-responsive and withdrawn.*

- **Table Listing Non-key/senior personnel associated with the Center (use file name: Center Members)**
  - Organize table alphabetically by Last Name.
  - Include the following information: Name, Institution, Title at Institution, Affiliation, Role within Center
- **Plan for Enhancing Diverse Perspectives (PEDP) (use file name: PEDP)**

### Note:

Detailed Core Usage tables are no longer required to be submitted under "Other Attachments."

## New Requirements

- Data Management and Sharing (DSM) Plan
- Plans for Enhancing Diverse Perspectives (PEDP)

## NIH has a longstanding commitment to making the results of research available.



### **Data Management and Sharing Policy**

will create a consistent minimum expectation for all research supported by NIH.

- **Submission** of Data Management & Sharing Plan with all applications for funding beginning January 25, 2023
- **Compliance** with the Data Management & Sharing Plan approved by the funding NIH Institute, Center, or Office

## Scope of DMS Policy

Applies to all research, funded or conducted in whole or in part by NIH, that results in the generation of "**scientific data**".

**"Scientific data"** is defined as:

"the recorded factual material commonly accepted in the scientific community as of sufficient quality to validate and replicate research findings, regardless of whether the data are used to support scholarly publications."

## Exclusions from the DMS Policy

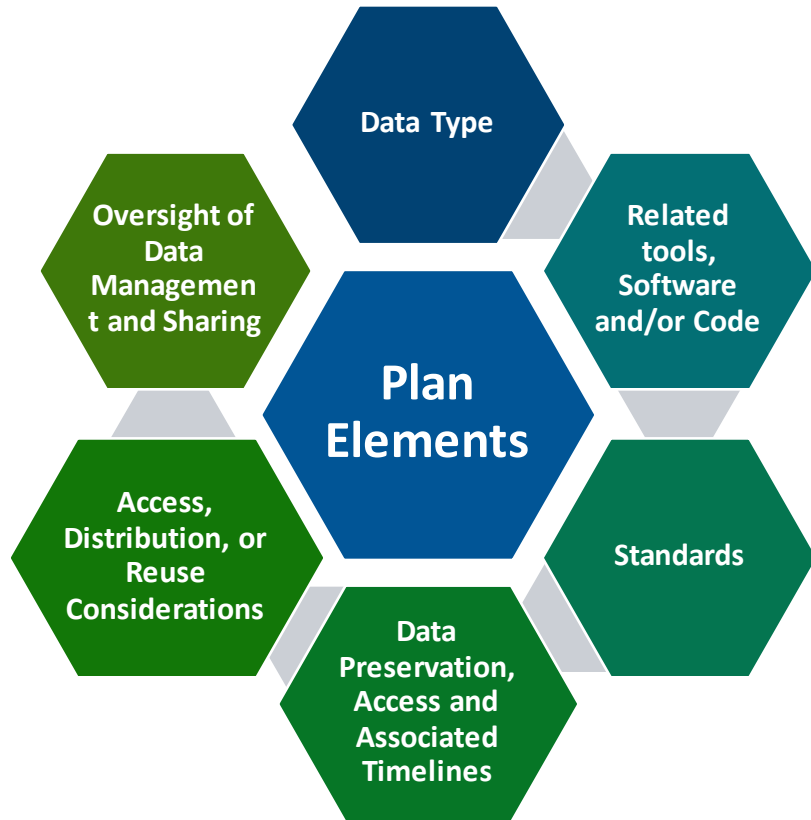
### Scientific data do not include:

- Data **not** necessary for or of sufficient quality to validate and replicate research findings,
- Laboratory notebooks,
- Preliminary analyses,
- Completed case report forms,
- Drafts of scientific papers,
- Plans for future research,
- Peer reviews,
- Communications with colleagues, or
- Physical objects, (e.g., laboratory specimens)



**PLANNING &  
BUDGETING**

## Elements of a DMS Plan



- **Data type**
  - Identifying data to be preserved and shared
- **Related tools, software, code**
  - Tools and software needed to access and manipulate data
- **Standards**
  - Standards to be applied to scientific data and metadata
- **Data preservation, access, timelines**
  - Repository to be used, persistent unique identifier, and when/ how long data will be available
- **Access, distribution, reuse considerations**
  - Description of factors for data access, distribution, or reuse
- **Oversight of data management and sharing**
  - Plan compliance will be monitored/ managed and by whom

See [Writing a Data Management & Sharing Plan](#) for details

# Recommended Data Management and Sharing Plan Format/Template

- DMS Plans are recommended (*but not required*) to be two pages or less in length.
- NIH has developed an optional DMS Plan [format page](#) (preview available but fillable format available soon) that aligns with the recommended elements of a DMS Plan.

OMB No. 0925-0001 and 0925-0002 (Rev. 07/2022 Approved Through TBD)  
**PREVIEW – DRAFT**

## DATA MANAGEMENT AND SHARING PLAN

If any of the proposed research in the application involves the generation of scientific data, this application is subject to the NIH Policy for Data Management and Sharing and requires submission of a Data Management and Sharing Plan. If the proposed research in the application will generate large-scale genomic data, the Genomic Data Sharing Policy also applies and should be addressed in this Plan. Refer to the detailed instructions in the application guide for developing this plan as well as to additional guidance on [sharing.nih.gov](#). The Plan is recommended not to exceed two pages. Text in italics should be deleted. There is no "form page" for the Data Management and Sharing Plan. The DMS Plan may be provided in the format shown below.

### Element 1: Data Type

**A. Types and amount of scientific data expected to be generated in the project:**

*Summarize the types and estimated amount of scientific data expected to be generated in the project.*

**B. Scientific data that will be preserved and shared, and the rationale for doing so:**

*Describe which scientific data from the project will be preserved and shared and provide the rationale for this decision.*

**C. Metadata, other relevant data, and associated documentation:**

*Briefly list the metadata, other relevant data, and any associated documentation (e.g., study protocols and data collection instruments) that will be made accessible to facilitate interpretation of the scientific data.*

### Element 2: Related Tools, Software and/or Code:

*State whether specialized tools, software, and/or code are needed to access or manipulate shared scientific data, and if so, provide the name(s) of the needed tool(s) and software and specify how they can be accessed.*

### Element 3: Standards:

*State what common data standards will be applied to the scientific data and associated metadata to enable interoperability of datasets and resources, and provide the name(s) of the data standards that will be applied and describe how these data standards will be applied to the scientific data generated by the research proposed in this project. If applicable, indicate that no consensus standards exist.*

### Element 4: Data Preservation, Access, and Associated Timelines

**A. Repository where scientific data and metadata will be archived:**

*Provide the name of the repository(ies) where scientific data and metadata arising from the project will be archived; see [Selecting a Data Repository](#).*

**B. How scientific data will be findable and identifiable:**

*Describe how the scientific data will be findable and identifiable, i.e., via a persistent unique identifier or other standard indexing tools.*

**C. When and how long the scientific data will be made available:**

*Describe when the scientific data will be made available to other users (i.e., no later than time of an associated publication or end of the performance period, whichever comes first) and for how long data will be available.*

## Points to Consider

- Applicants will need to submit a single DMS Plan in the Overall component (i.e. NOT a DMS plan for each component)
- The plan should address only the management of scientific data being generated by the Center. Note that physical objects or infrastructure resources such as biospecimens, animals, tissues, etc. are not considered scientific data and would not need to be addressed in the DMS plan. Activities like administrative efforts/services, communication efforts, and possibly pilot projects would not need to be addressed in the DMS plan.
- Ideally, the DMS plan would describe the coordinated management approach for these scientific data being generated by the Center. Applicants are encouraged to determine whether and how to coordinate Plans with all Program Directors/Principal Investigators and all Key Personnel on the same application. Note the P30 DMS Plan doesn't need to outline the project-specific details/metadata of each Center members' study (These specific details will be included in the DMS plans submitted for each R01, etc.).
- The plans are not restricted in length (i.e., they can be longer than the recommended 2 pages).
- The Center DMS plans can be a 'living document' and updated at time of RPPRs

## DMS Plan Submission

- A new “**Other Plan(s)**” field added to the PHS 398 form to collect a single PDF attachment
- Data Sharing Plans and Genomic Data Sharing Plans will no longer be submitted to the “Resource Sharing Plan(s)” field

Research Plan Section			
5. Vertebrate Animals	<input type="text"/>	<input type="button" value="Add Attachment"/>	<input type="button" value="Delete Attachment"/> <input type="button" value="View Attachment"/>
6. Select Agent Research	<input type="text"/>	<input type="button" value="Add Attachment"/>	<input type="button" value="Delete Attachment"/> <input type="button" value="View Attachment"/>
7. Multiple PD/PI Leadership Plan	<input type="text"/>	<input type="button" value="Add Attachment"/>	<input type="button" value="Delete Attachment"/> <input type="button" value="View Attachment"/>
8. Consortium/Contractual Arrangements	<input type="text"/>	<input type="button" value="Add Attachment"/>	<input type="button" value="Delete Attachment"/> <input type="button" value="View Attachment"/>
9. Letters of Support	<input type="text"/>	<input type="button" value="Add Attachment"/>	<input type="button" value="Delete Attachment"/> <input type="button" value="View Attachment"/>
10. Resource Sharing Plan(s)	<input type="text"/>	<input type="button" value="Add Attachment"/>	<input type="button" value="Delete Attachment"/> <input type="button" value="View Attachment"/>
<b>11. Other Plan(s)</b>	<input type="text"/>	<input type="button" value="Add Attachment"/>	<input type="button" value="Delete Attachment"/> <input type="button" value="View Attachment"/>
12. Authentication of Key Biological and/or Chemical Resources	<input type="text"/>	<input type="button" value="Add Attachment"/>	<input type="button" value="Delete Attachment"/> <input type="button" value="View Attachment"/>

# DMS Plan Assessment



- **NIH Program staff:**

- Ensure [Elements of a DMS Plan](#) have been adequately addressed and assess the reasonableness of those responses
- Applications will only be funded when Plan is complete and acceptable

- **Peer reviewers:**

- Consider if budget is reasonable

See [Writing a Data Management & Sharing Plan](#)

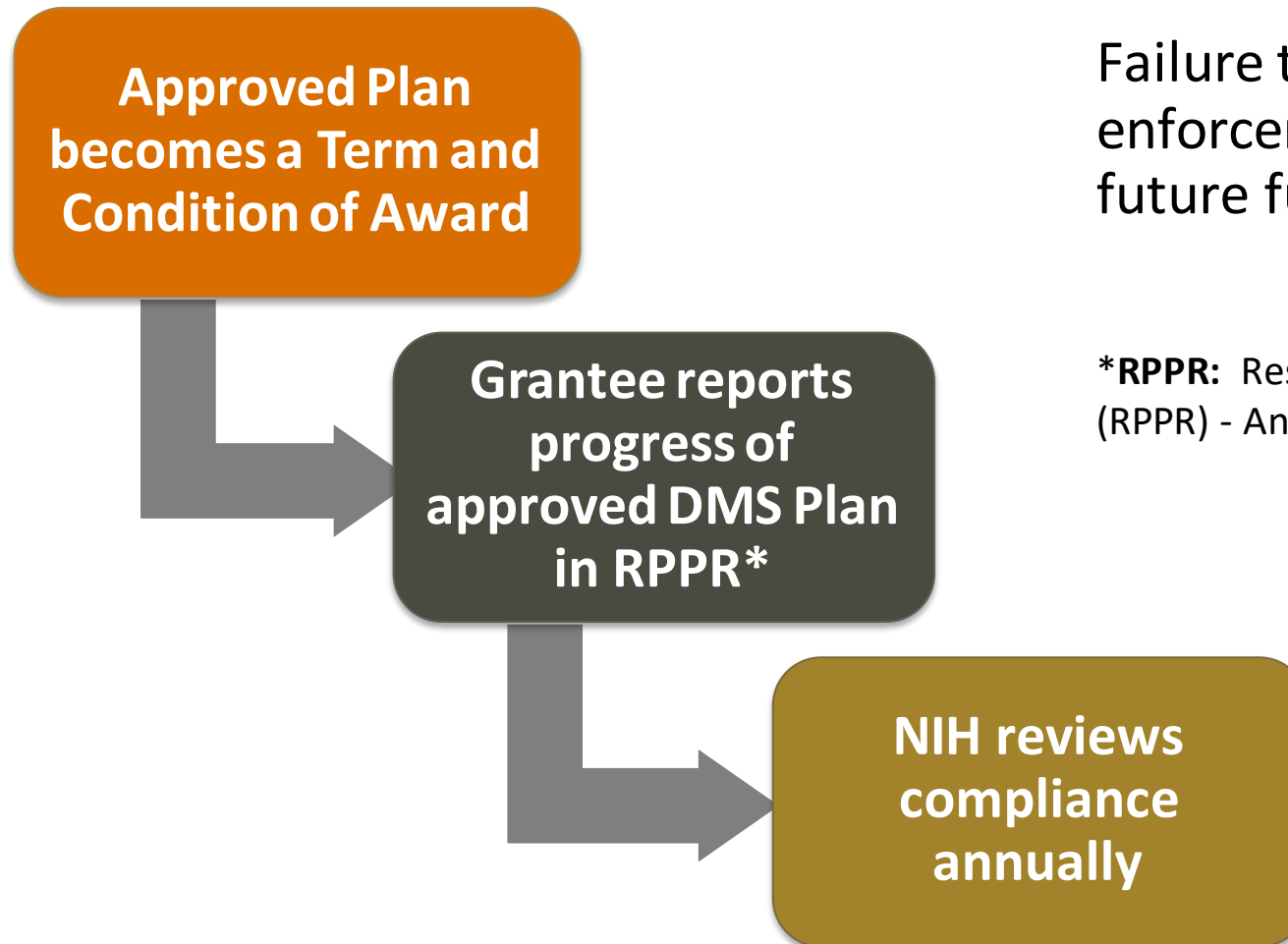
## Resolving Plan Issues Before Award

- DMS Plan must be approved prior to award
- If additional details needed, communicate with NIH staff to resolve issues with DMS Plan
  - Will occur through standard Just-In-Time (JIT) process
  - Provide additional information and potentially a revised DMS Plan

See [Writing a Data Management & Sharing Plan](#)



## Monitoring Compliance



Failure to comply may result in an enforcement action and affect future funding decisions.

\***RPPR**: Research Performance Progress Report (RPPR) - Annual, Interim, and Final

## Data Management and Sharing Costs

### ALLOWABLE COSTS:

- Curating data/developing supporting documentation
- Preserving/sharing data through repositories
- Local data management considerations
- **IMPORTANT:** Must be incurred during the performance period

### UNALLOWABLE COSTS:

- Infrastructure costs typically included in indirect costs
- Costs associated with the routine conduct of research (e.g., costs of gaining access to research data)

See [Budgeting for Data Management & Sharing](#) for details

## Submitting DMS Budgets

Direct costs to support the activities proposed in DMS Plan must be indicated as **“Data Management and Sharing Costs”**

- **R&R Budget Form:** line item in section F. Other Direct Costs

<b>F. Other Direct Costs</b>		<b>Funds Requested (\$)</b>
1.	Materials and Supplies	
2.	Publication Costs	
3.	Consultant Services	
4.	ADP/Computer Services	
5.	Subawards/Consortium/Contractual Costs	
6.	Equipment or Facility Rental/User Fees	
7.	Alterations and Renovations	
8.	<b>Data Management and Sharing Costs</b>	
9.		
10.		

## Justifying DMS Budgets

Brief summary of DMS Plan and description of DMS costs must be **included within the budget justification attachment**

- **R&R Budget Form:** section L. Budget Justification

**L. Budget Justification**

(Only attach one file.)

# SHARING SCIENTIFIC DATA

# Finding and Selecting a Repository

Established repositories encouraged

NIH ICs may designate specific data repository(ies)

Recommend using a data-type or discipline-specific repository if available

Other suitable options include:

- Institutional repositories
- PubMed Central (small datasets only)
- Generalist repositories

See [Selecting a Data Repository](#) for details

# Finding and Selecting a Repository: NIH & Other Resources

## NIH-Supported Repositories

Filterable list of 70+ [NIH Repositories](#)

Institute or Center	Repository Name	Repository Description
<input type="text" value="NCI"/>		<input type="text" value="Keyword Filter"/>
NCI	<a href="#">Cancer Nanotechnology Laboratory (caNanoLab)</a>	caNanoLab is a data sharing portal designed to facilitate sharing in the biomedical nanotechnology research community. It expedite and validate the use of nanotechnology in research. caNanoLab provides support for the annotation of nanomaterial characterizations resulting from physico-chemical, in vitro assays and the sharing of these characterizations and

## Other Repository Resources

- [Generalist repositories](#)
- [Nature's Data Repository Guidance](#)
- [Registry of Research Data Repositories](#)

See [Repositories for Sharing Scientific Data](#)



## **ADDITIONAL POLICIES & EXPECTATIONS**

## Harmonization: Research Subject to DMS and Genomic Data Sharing (GDS) Policies

1. **DMS Plan:** Include a single Plan that addresses GDS and DMS policies
2. **DMS Plans Review:** Plan Assessment conducted by program staff, not by peer reviewers
3. **Budget Considerations:** Detailed budget should include allow allowable costs for all data types
4. **Compliance:** Monitoring handled in accordance with DMS policy compliance and enforcement terms
5. **Timing of Data Sharing:** GDS policy provides specific timelines, the latest possible time to submit data will be at the end of the award performance period

NOT-OD-22-198

**RESOURCES**

## You Can Prepare Now







- ❑ **Familiarize yourself** with the DMS Policy and resources available at [sharing.nih.gov](https://sharing.nih.gov)
- ❑ **Identify existing resources and expertise within your institution** that may be able to assist you, such as data librarians
- ❑ Try **drafting a Data Management and Sharing Plan** for your work based on the recommended elements ([NOT-OD-21-014](#))
- ❑ **Review your past data sharing practices** to meet other funder or publisher expectations and consider what you may need to update for the new Policy in the future

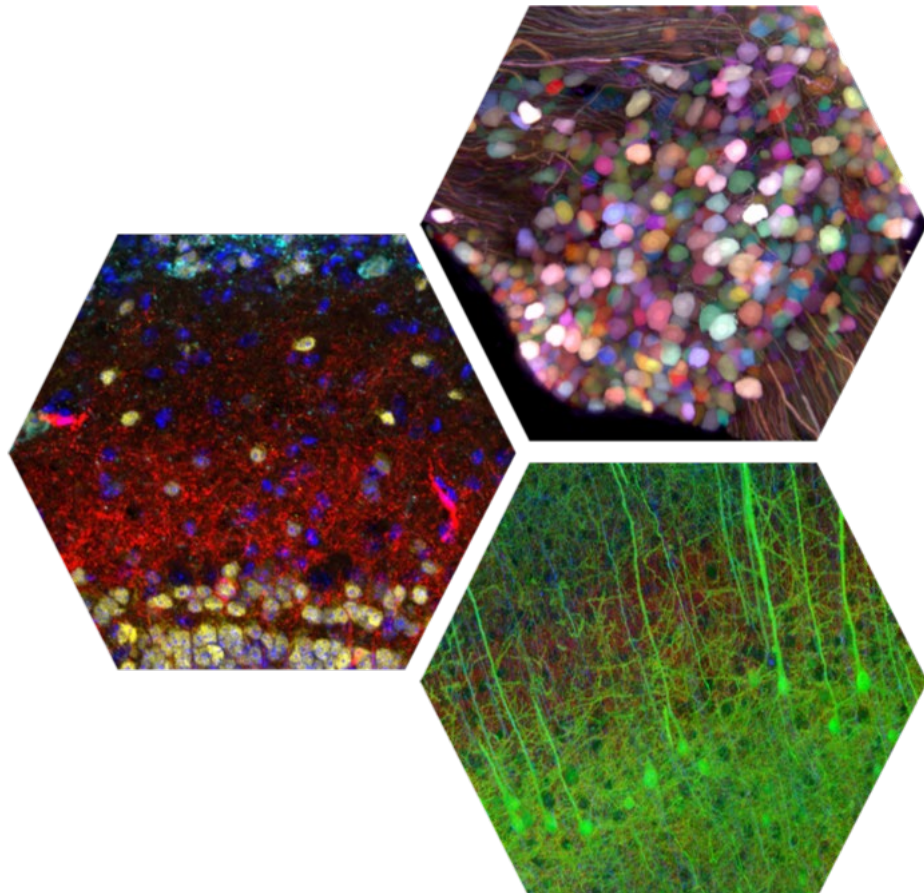
## NIEHS Scientific Data Website

- A source of guidance for policies and data sharing-related activities
- Resources to develop Data Management and Sharing Plans
- Information about data science funding opportunities
- Linked to central NIH Data Sharing website [Sharing.nih.gov](https://www.nih.gov/data-sharing)
- Content will continue to be updated

[www.niehs.nih.gov/datasharing](https://www.niehs.nih.gov/datasharing)

### Scientific Data at NIEHS

 <a href="#">Data Management and Sharing Policies</a> NIH policy statements on data management and sharing and additional information on the implementation of the policy.	 <a href="#">Data Management and Sharing Plan Development</a> Guidance to prepare data management and sharing plans for NIEHS-funded research.	 <a href="#">Maximizing the Value of Scientific Data</a> Learn more about how NIEHS-funded researchers are leveraging data science and data sharing to improve public health.
 <a href="#">Frequently Asked Questions</a> Frequently asked questions related to data management and sharing.	 <a href="#">Scientific Data Resources</a> Information on data sharing, data repositories, data science training, and other resources.	 <a href="#">Data Science Funding Opportunities</a> Research and training funding opportunities in Data Science.



NIH The BRAIN Initiative<sup>®</sup>

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# Plan for Enhancing Diverse Perspectives (PEDP): Guidance

## What is a PEDP?

A PEDP or “Plan for Enhancing Diverse Perspectives” is a summary of strategies to advance the scientific and technical merit of the proposed project through inclusivity.

## What does “diverse perspectives” mean for a research project?

Broadly, diverse perspectives refer to:

- the *people* **WHO DO** the research,
- the *people* **WHO PARTICIPATE** in the research as part of the study population, and
- the *places* **WHERE** research is done.



## What are applicants asked to provide in a PEDP? (pt. I)

- 1-page PEDP summary (Other Attachment):
  - Applicant(s) are expected to show how enhancing diverse perspectives is supported throughout the application and how this strengthens the scientific and technical merit of the project (in terms of significance, investigator(s), innovation, approach, and environment), as appropriate.
  - The PEDP will depend on the content and structure of the scientific aims, the expertise required, the environment, and the performance site(s).
- Key Elements to be included in a PEDP:
  - Summary of strategies (and their rationales) that advance the scientific and technical merit through expanded inclusivity
  - Timeline and milestones for the PEDP
  - Approaches to assessing progress towards meeting the PEDP defined goals





## What are applicants asked to provide in a PEDP? (pt. II)

- Within the Research Strategy, applicant(s) should align their description with the PEDP strategies and milestones
- Applicants are encouraged to refer to information included in the PEDP attachment

**\*\* Each PEDP will be unique and will depend on the content and structure of the scientific aims, the required expertise, the environment, and the performance site(s). \*\***



## Examples of potential strategies (pt. I)

### Inclusion of personnel (MPIs, PIs, Co-Is, Consultants)...

- ...from groups historically underrepresented in the biomedical, behavioral, and clinical research workforce (e.g., women, underrepresented racial and ethnic minorities, those with disabilities, and individuals from disadvantaged backgrounds).
- ...located within, or who have done training within, multiple geographic locations, especially those regions underrepresented in BRAIN Initiative funding.
- ...representing different career stages.
- ...from different types of institutions and organizations (e.g., research intensive and research-active, undergraduate-focused, minority-serving, community-based, and industry).
- ...from varying scientific fields to contribute to transdisciplinary aspects of the proposed project (e.g., neuroscience, computational biology, engineering, mathematics, physics, computer and data sciences, and bioethics).



## Examples of potential strategies(pt. II)

- Training and mentoring opportunities to encourage participation of students, postdoctoral researchers, and co-investigators from diverse backgrounds (e.g., existing institution-based programs such as undergraduate research experience programs, or new individual opportunities for trainees, fellows, etc.).
- Activities to enhance recruitment of research participants from diverse groups, including those from under-represented backgrounds.
- Plans to use the project infrastructure (i.e., research and administrative structure) to support career-enhancing research opportunities for junior, early-, and mid-career researchers.
- Inclusion of community advisory boards or other relevant steering committees to inform research project design and/or dissemination of results.



## Examples of potential strategies (pt. III)

- Publication plans that describe equitable processes to determine inclusive authorship and authorship order and ensure proper attribution. Opportunities promote visibility of junior faculty, post-docs, trainees, etc. by serving as first authors and/or presenting at National/International scientific meetings.
- Outreach to and recruitment of diverse trainees and investigators at regional and national scientific meetings (e.g., SACNAS, AISES, ABRCMS, AIChE, IEEE, ACM, etc.).
- Partnerships with advocacy groups or professional societies to help recruit study participants for clinical research and/or to aid with dissemination of research results.
- Outreach activities to various public stakeholders (e.g., educators, patients, policy makers, etc.) to improve engagement and understanding of EHS CC research.



## How will the PEDP be evaluated in Peer Review?

- PEDP considerations are included in each of the scored review criteria (Significance, Innovation, Investigators, Approach, and Environment). Reviewers are asked to consider the strengths and weaknesses associated with each of the review criteria and weigh them appropriately.
- **However, as with the full application, a PEDP does not need to be strong in all review criteria to be judged favorably and to positively affect overall impact score.**
- Thus, the PEDP evaluation will contribute to the criterion scores and overall impact score of each application. It is expected that a PEDP judged by reviewers as insufficient, can negatively impact criterion score(s) and overall impact score.



## PEDP Review Questions

- Significance: To what extent do the efforts described in the PEDP further the significance of the project?
- Investigators: To what extent will the efforts described in the PEDP strengthen and enhance the expertise required for the project?
- Innovation: Will the efforts described in the PEDP meaningfully contribute to innovation?
- Approach: Are the timeline and milestones associated with the PEDP well-developed and feasible?
- Environment: To what extent will features of the environment described in the PEDP (e.g., collaborative arrangements, geographic diversity, institutional support) contribute to the success of the project?





# Community Engagement

## Language in the Funding Opportunity Announcement

### Three Critical Functions of the CEC

- **Translate and disseminate** EHS CC research results into environmental public health knowledge for identified audience(s).
- **Communicate** audience issues, needs, and concerns to EHS CC members.
- **Advance** the field of community engagement and environmental health communication.

### Four Audiences

Community, Policy-makers, Public Health and/or Health Care Professionals, and Educators

*The Community Engagement Core (CEC) promotes multi-directional communication among the EHS CC and its identified audience(s) on issues of environmental health literacy, environmental public health, and prevention.*

*CEC ensures responsiveness and relevance to community needs through collaborative efforts that foster dialogue and interactions among the identified audience and Center members.*



## Key Points Regarding CECs & Research

- **CECs are not required to conduct CBPR**, but they may choose to align their vision and goals to the principles of CBPR
  
- **CECs may use social science/communication research** approaches to examine impacts and outcomes of work

This statement is for applicants and reviewers. We want to be very clear about the expectations of the CECs in context of CBPR.

CECs can, and are encouraged to, use social science research approaches (surveys, focus groups, etc.) on the work they are doing. Some of this research may require IRB approval.

# Green Loop

## Relationship between CEC & Audience

- Build trust
- Gain awareness (needs, questions, EH concerns, skills, knowledge, etc)
- Share information (re: Center and re: community)
- Establish foundation/groundwork for collaborative efforts
- Build capacity for community-led/cit.sci. projects

# Yellow Loop

## Interaction between CEC & Center (members)

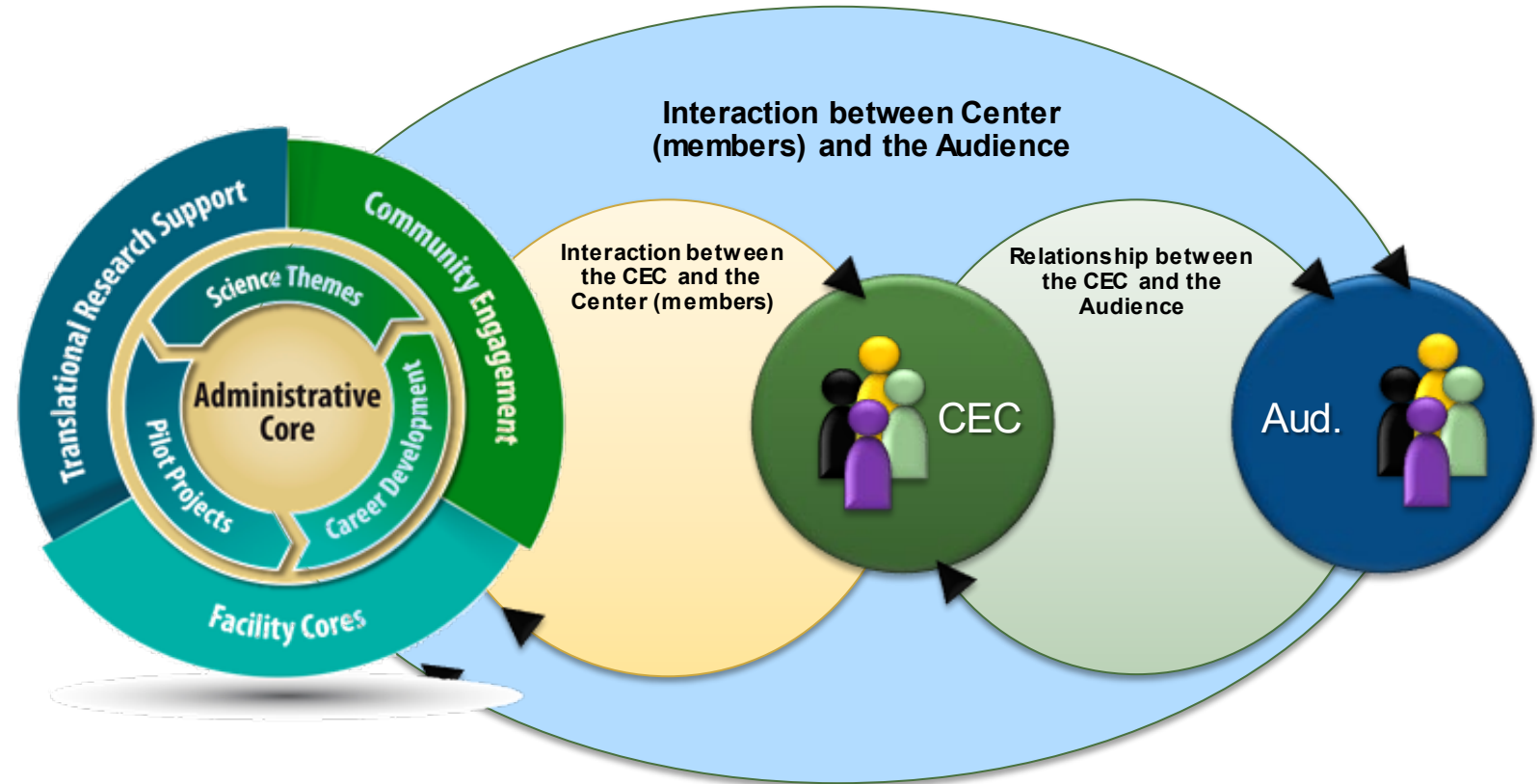
- Increase awareness of community questions/context
- Identify Center “assets” to address/meet community questions
  - Could include making connections between community groups and Center member(s)
- Identify gaps/opportunities within the Center (may include community participation in these discussions)

# Light Blue Loop

## Interaction between Center (members) & Audience

- Center member(s) responding to community questions/concerns, which could include:
  - CEnR through pilot, career development, TRSC, other
- CEC role could include Technical Assistance or Capacity building for Center member & residents
  - Enable/promote proper CEnR
  - Ensure sustainability
  - Promote communication/reporting back of results

# Overview of CEC Roles



## CEC Review Criteria

- **Vision and Objective**
  - Alignment to the EHS CC theme.
  - Relationship between the academic institution and the identified audience(s).
  - Clear and measurable objectives and an evaluation plan.
- **Translating research information into environmental public health knowledge:**
  - Integration of the CEC into the EHS CC.
  - Relevance of products/materials to the theme of the EHS CC and to the needs of the identified audience.
  - Appropriateness of plans, activities, and coordination.

## CEC Review Criteria

- **Ensuring EHSCC understanding of community and other stakeholder needs**
  - Composition and role of the Stakeholder Advisory Board (SAB).
  - Other plans to increase EHS CC awareness of community concerns.
  - Plans for maintaining transparent communications between the identified audience and the academic partners.
  - Methods of building and sustaining community partnerships and community participation.
- **Leadership and staff expertise**
  - Education and expertise in public health, behavioral and social science research, outreach, health communication, or other relevant disciplines.
  - Education and expertise alignment to the CEC vision and objectives.

### **For Renewal Applications reviewers address:**

- Past progress of the CEC.
- **Impact the Center had on the audience(s).**
- Impact the CEC had on the Center.
- Types of educational and outreach materials have been created as part of the CEC. Relevance to the Center science.

# PEPH Resource Center

- CECs are highly encouraged to submit all CEC-produced materials to the Partnerships for Environmental Public Health (PEPH) Resource Center.

<http://bit.ly/PEPH-Login>

- Benefits:
  - Share materials
  - Leverage existing materials
  - Connect with others

## A Citizen-Science Study of Environmental Exposures and Asthma

by Eiffert S, Noibi Y, Pearson M, Winquist A

Open Material Edit Recommend Comment 1 Like

### Material Overview

Description	The HERCULES Community Engagement Core, in collaboration with the Stakeholder Advisory Board and HERCULES scientists, created a 1-page plain-language summary of a citizen-science research study conducted by Samantha Eiffert and colleagues, including HERCULES scientists Melanie Pearson and Andrea Winquist and community partner Dr. Yomi Noibi, about environmental exposures and the prevalence of asthma among those living in the Proctor Creek area of Atlanta, Georgia.
Author	Eiffert S, Noibi Y, Pearson M, Winquist A
Format	Research Brief
Original Submission Date	April 27, 2020
Review Date	May 31, 2022
Status	Published to Resource Center
Allowed Uses	Download and use as is for public distribution (open)

### Program/Project Affiliations

Program	Environmental Health Sciences Core Centers
Project	HERCULES: Health and Exposome Research Center
Principal Investigator	Carmen Marsit
Points of Contact	Michelle Kegler Erin Lebow-Skelley Melanie Pearson Martha Tomlinson

### Institution Affiliations

Institution	Emory University
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EMORY UNIVERSITY  
A Citizen-Science Study of Environmental Exposures and Asthma  
HERCULES  
Adapted from: A Citizen-Science Study Documents Environmental Exposures and Asthma Prevalence in Two Communities Conducted by Samantha Eiffert and colleagues including Yomi Noibi, Melanie Pearson, and Andrea Winquist, members of the HERCULES Exposome Research Center.

**Introduction and Purpose**  
Residents in the English Avenue and Vine City areas of Atlanta, Georgia were concerned about flooding that had resulted in water entering homes and potentially leading to indoor mold and contributing to respiratory problems, especially asthma.

A citizen-science study was conducted documenting environmental exposures and the prevalence of asthma among those living in English Avenue and Vine City.

**How the Study Was Done (Methods)**  
Research teams of public-health graduate students and local residents asked questions regarding conditions in the home and the respiratory health of an adult resident. The research teams looked for mold growth in the homes and collected a household dust sample. 153 residents participated.

Dust samples were analyzed for the 36 molds that make up the Environmental Relative Moldiness Index (ERMI).

**Results of Study**

- 12% of homes reported a history of flooding.
- 14% of participants reported currently having asthma, compared to 8.4% of Georgians in a statewide survey.
- 35% of homes had visible mold in places other than the bathroom compared to 1.5% in a nationwide study.
- Homes with observed mold were statistically significantly more likely to have basements and reported water leaks.
- 83% of household dust samples had an ERMI value above 5, compared to only 25% in a nationwide study. Higher ERMI values were statistically significantly associated with asthma for those living in their current home for two years or less.

**Limitations (Why we can't draw stronger conclusions)**  
The relationship between ERMI values and asthma in this study only existed for those living in their homes for two years or less. It is possible that people who have asthma, and then move into a home that worsens their asthma, move out within a few years. Therefore, participants who lived in a residence with mold for more than two years might be less sensitive to mold.

Because the date of the asthma diagnosis was not collected, we cannot tell if the diagnosis of asthma happened before or after the participants moved into their current homes. Finally, although the impact of flooding was the initial concern in the communities, many of the homes in the flood zones had been abandoned by the time of this study.

**What does this mean?**  
While it is hard to draw strong conclusions from one study, the high percentage of homes with mold contamination and the high prevalence of asthma among residents in these communities should be a public health concern.

Read the full article here: <https://www.hindawi.com/journals/ieph/2016/1962901/>

The study was funded by the HERCULES Exposome Research Center at Emory University. HERCULES is funded by the National Institute of Environmental Health Sciences (P30ES019776) | Icons adapted from Arthur Shlain of the Noun Project

### Key Words

**Citizen-science:** A collaboration between community members and professional scientists in which members of the community contribute to data collection and interpretation.

**Prevalence:** The percentage of people affected by a disease at a particular time.

**Environmental Relative Moldiness Index (ERMI):** A measure of mold due to water damage. Mold type is determined by the DNA measured from mold species in dust from the home. The ERMI value is the ratio of water-damage mold to common mold.

**Statistically significant:** A statistical term that means there is enough evidence that the results obtained were not only due to chance.

### Tips

To reduce the amount of mold in your home, moisture control is key:

- Improve airflow through your rooms (by using exhaust fans or opening windows and doors)
- Fix any water leaks
- Remove sources of dampness
- Make sure rainwater drains away from your house
- If possible, use central air conditioning with a HEPA filter attachment
- Go to the EPA's website for more information: [www.epa.gov/mold/moldguide.html](http://www.epa.gov/mold/moldguide.html)



# Grants Management Section

## Budget

- New or first-time applicants are limited to \$850K Direct Costs per year for up to 4 years of support
- Renewal applicants are limited to \$1M Direct Costs per year for up to 5 years of support
- Community Engagement Core (CEC) budget must be \$100K minimum Direct Costs per year for new applicant, \$150K Direct Costs per year for renewal applicants
- Each Center must budget at least \$5K per year for Annual Meeting (at minimum, Director CEC Director, and Administrative Assistant must attend)

## Common Budget Errors

- Exceeding the FOA budget amount
- Costs in budget differ from the Budget Justification
- Salaries exceed the NIH salary cap
- Calendar months effort does not equate to the requested salary
- Miscalculation of F&A costs
- Used a modular budget when a categorical budget was required
- Waiting until the last minute to contact NIH on budget clarification questions
- Not asking questions



# Scientific Review Section

***Scientific Review Officer:***  
**Varsha Shukla, Ph.D.**

**[Varsha.Shukla@nih.gov](mailto:Varsha.Shukla@nih.gov)**

Scientific Review Branch  
Division of Extramural Research & Training  
National Institute of Environmental Health Sciences

# Application Preparation and Submission

**Pre-Submission Checklist-** carefully read and following the Guidelines (Key Personnel, font size, page limits, etc.). **Importantly,** understand the instructions outlined in the RFA.

**Submission-** Start early



**eRA Help Desk:**

Monday-Friday, 7 a.m.-8 p.m. Eastern Time

301-402-7469; Toll Free: 866-504-9552

<http://grants.nih.gov/support/index>.

**\*\*Late Submission-NIH Policy on Late Submissions**

## Schedule and Deadline

- **Letters of Intent:** 30 days prior to Application Receipt (sent to the SRO – [Varsha.Shukla@nih.gov](mailto:Varsha.Shukla@nih.gov))
- **New RFA:** [RFA-ES-22-010](#)

Application Due Dates			Review and Award Cycles		
New	Renewal / Resubmission / Revision (as allowed)	AIDS	Scientific Merit Review	Advisory Council Review	Earliest Start Date
April 19, 2023	April 19, 2023	Not Applicable	October 2023	January 2024	April 2024
April 19, 2024	April 19, 2024	Not Applicable	October 2024	January 2025	April 2025

- **Priority Scores:** within 24 hours after Review Meeting ends
- **SS Released in IMPAC:** No later than mid-December

# Electronic Submission

[Home](#)

[Electronic Application Process](#)

[Transition Timeline \(from paper to electronic\)](#)

[Avoiding Common Errors](#)

[Frequently Asked Questions \(FAQs\)](#)

[Training](#)

[Resources](#)

[Finding Help](#)

[Site Map](#)

[eRA Commons](#)

[Intranet Link \(NIH Staff only\)](#)

## Electronic Submission

All electronic submissions to NIH via Grants.gov require the use of Adobe-based forms! Follow the links below for important information about applying electronically, including the latest news and announcements, registration information, tips for successful submission and more.

**Important Registration Reminder:**  
**ORGANIZATIONS MUST REGISTER IN BOTH GRANTS.GOV and eRA COMMONS TO APPLY FOR MOST NIH GRANTS**  
Registration can take four weeks or more to complete. [Start now!](#)

- [NIH eRA System Status Update \(May 29, 2009\) \*\*NEW\*\*](#)
- [Error Correction Window Extended for Opportunities Due May 20 - May 29, 2009 \*\*NEW\*\*](#)
- [Recovery Act Grand Opportunities "GO" Grant Submission Deadline Moved to May 29, 2009](#)
- [Latest eSubmission news from NIH](#)
- [Resources for Using the Adobe Forms](#)
- [Latest News from Grants.gov](#)

**Electronic Application Process**

```

graph TD
    1[1. Prepare to Apply] --> 2[2. Find Opportunity and Download Application Package]
    2 --> 3[3. Prepare Application]
    3 --> 4[4. Submit Application to Grants.gov]
    4 --> 5[5. Check Submission Status in Commons]
    5 --> 6[6. Check Assembled Application]
    
```

[View Process Flow Chart \(PowerPoint - 72 KB\)](#)

**Transition Timeline**

- [Timeline \(Graphic format\) \*\*More...\*\*](#)

**Avoiding Common Errors**

- [Missing Commons User ID](#)
- [PDF Issues](#)
- [Total Cost does not equal direct and indirect costs \*\*More...\*\*](#)

**Frequently Asked Questions**

**Having Problems With Your Submission?**

[Subscribe to the latest eSubmission News!](#)

[May 29, 2009 eRA System Status Update](#)

[May 12, 2009 Helpful Information, Resources and Updates](#)

[May 6, 2009 Processing caught up; Beware of Duplicate Applications](#)

[May 1, 2009 Error-Correction Window Extended to May 8](#)

[April 29, 2009 Helpful Information, Resources and Updates](#)

[More...](#)

**Latest Updates**

**Tips**

- [EJ \(PDF - 48 KB\)](#)
- [Small Biz \(PDF - 66 KB\)](#)
- [Reviewers \(PDF - 52.3 KB\)](#)
- [International \(PDF - 150 KB\)](#)
- [Q&A \(PDF - 36 KB\)](#)
- [Contact Info \(PDF - 30 KB\)](#)

**Related NIH Guide Notices**

- [Error-correction window for Challenge Grants extended to May 8](#)

## Application Submission System & Interface for Submission Tracking (ASSIST)

# Electronic Submission

- **Grants.gov**- Due by **5:00 p.m.** local time of application organization on the specified due date
- **Must have eRA Commons account**
  - At least 5 Business Days prior to the Application Deadline
  - Notification of Acceptance or Error (2-3 days)
- **Accepted by DHHS/NIH**
- **Assigned to an Institute/Center**
  - CSR: Receipt & Referral
  - Assigned an Application #
- **Accepted by the Institute/Center (NIEHS)**
  - Assigned to a Review Group

## Components and page limits

The application may consist of the following components:

- Overall: required
- Administrative Core: required
- Translational Research Support Core (TRSC): required
- Facility Cores: required: minimum of 1; maximum of 4
- Community Engagement Core (CEC): required
- Pilot Project Program: required

All page limitations described in the SF424 Application Guide and the [Table of Page Limits](#) must be followed.

Component	Component Type for Submission	Page Limit	Required/Optional	Minimum	Maximum
Overall	Overall	12	Required	1	1
Admin Core	Admin Core	12	Required	1	1
Translational Research Support Core	TRSC	12	Required	1	1
Facility Core	Facility Core	12	Required	1	4
Community Engagement Core	CEC	12	Required	1	1
Pilot Project	Project	6	Required	1	1

## Key Personnel List

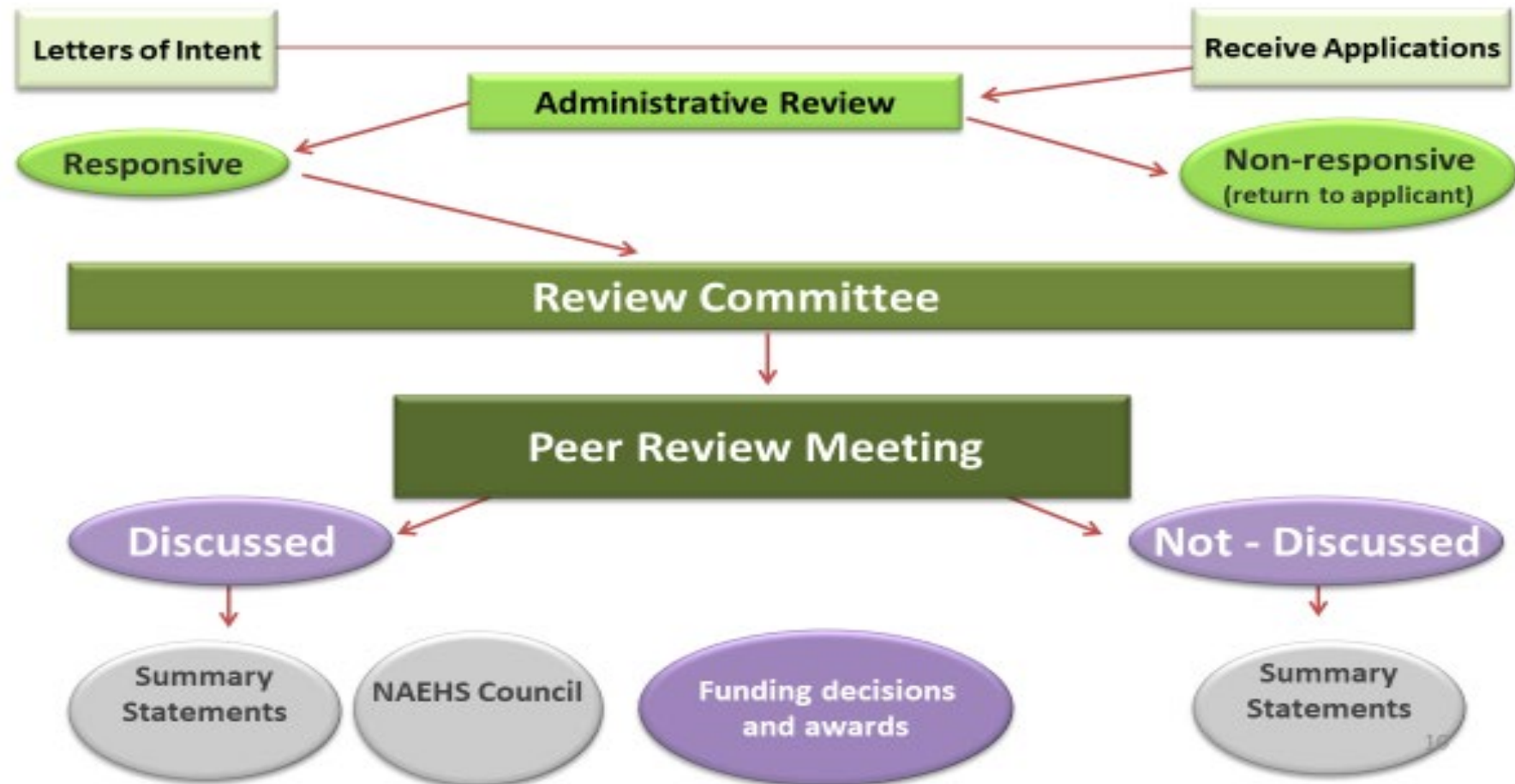
- **Only** Center leadership and Core leaders should be listed as Key Personnel.
- All other individuals should be mentioned under the “other attachments”.
- For Renewals EAC goes into “other attachments”.



## Tips on Grantsmanship: Common Pitfalls

- ✓ Failure to carefully read and follow the instructions for completing the application
- ✓ Biographical sketch not provided for applicable Center membership
- ✓ Inconsistency fonts size throughout application
- ✓ Inconsistency page numbering
- ✓ Improperly prepared budgets
- ✓ No formal letter of commitment for collaborative research
- ✓ Checkpoints for Human Subjects & Animals
- ✓ **Overall quality of application is poor-** (for example, typos, editing, organization, properly identified sections, & illegible figures or tables)....**carefully proof before submitting**

# The Peer Review Process



# The Review Committee(s)

**Environmental Health Sciences Review Committee (EHSRC)  
Special Emphasis Panel (Conflict SEP)**



# Submit Early!!







**THANK YOU!**

## Questions & Discussion

### Program & Scientific

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