

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

January 25, 2008

**National Institutes of Health
Bethesda, Maryland**

MINUTES

The National Deafness and Other Communication Disorders Advisory Council convened on January 25, 2008 in Building 31, Conference Room 6, National Institutes of Health (NIH), Bethesda, MD. Dr. James F. Battey, Jr., Director, National Institute on Deafness and Other Communication Disorders (NIDCD), served as Chairperson. In accordance with Public Law 92-463, the meeting was:

Closed: January 25, 2008: 8:30 a.m. to 10:50 a.m. for review of individual grant applications; and

Open: January 25, 2008: 10:50 a.m. to 2:25 p.m., for the review and discussion of program development needs and policy.

Council members in attendance:¹

Dr. Margaretha Casselbrant
Dr. Edward Conture
Dr. Albert Feng
Dr. Nathan Fischel-Ghodsian
Dr. Susan Goldin-Meadow
Dr. Charles Greer
Dr. Jennifer Horner

Ms. Myrna Orleck-Aiello
Dr. Lorraine Ramig
Dr. Allen Ryan
Dr. Ernest Weymuller
Dr. William Yost

Ad Hoc members in attendance:

Dr. Barry Ache

Council members absent:

Ms. Donna Bates Boucher
Mr. Ronald Lanier
Dr. Steve Rauch

Dr. Karen Cruickshanks
Dr. Sharon Moss

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

Ex-Officio Members Not Participating:

Dr. Lucille B. Beck
Dr. John R. Franks
Dr. Michael E. Hoffer

The Council roster is found as Appendix 1.

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

CLOSED SESSION

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

The meeting was called to order by Dr. Battey, Director, NIDCD, who welcomed Dr. William Yost as a new member to the Council, and expressed appreciation to the entire Council for their service and advice. Dr. William Yost has been appointed to the Council and a more formal introduction to staff and other members of our audience is planned during the open session. Dr. Sharon Moss, Dr. Karen Cruickshanks, Dr. Steven Rauch, Dr. Lucille Beck, Ms. Donna Bates, and Mr. Ronald Lanier had scheduling conflicts which prevented them from attending this meeting.

II. Council Procedures Dr. Craig A. Jordan

Procedural Matters

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

III. Council Consideration of Pending Applications

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

A. Research Project Grant Awards

1. Consideration of Applications: On the Council's agenda was a total of 99 investigator-initiated research grant applications; 85 applications had primary assignment to NIDCD, in the amount of \$25.04 million first-year direct costs. It is anticipated that, of the applications competing at this Council, NIDCD will be able to award grants to R01 applications scoring up to the 20.9 percentile.

B. Special Programs Actions

1. Institutional National Research Service Awards (T32): The Council recommended support of eight applications.
2. National Research Service Award Short-Term Institutional Research Training Grants (T35): The Council recommended support of one application.
3. NIH Pathway to Independence (PI) Award (K99/R00): The Council recommended support of four applications.
4. Small Grants (R03): The Council recommended support of seven applications.
5. NIH Support for Conferences and Scientific Meetings (R13): The Council recommended support of four applications.
6. AREA Grant (R15): The Council recommended support of four applications.
7. NIH Exploratory/Development Research Grant Award (R21): The Council recommended support of five applications.
8. NIDCD Research Core Center Grant (P30): The Council recommended support of one application.
9. Small Business Innovation Research Awards (SBIR): The Council recommended support for four Phase I (R43) applications and one Phase II (R44) application.
10. PA06-344 - Methodology and Measurement in the Behavioral and Social Sciences (R03): The Council recommended support of one application.

OPEN SESSION

IV. Opening RemarksDr. Battey

Dr. Battey welcomed additional staff and visitors to the open session of the meeting and introduced Dr. William Yost as a new member of the Council:

- **Dr. William Yost** is Chair of Speech and Hearing Sciences at Arizona State University. Dr. Yost received his Ph.D. in Psychology from Indiana University. In addition to his

primary appointment, he is an Adjunct Professor in the Department of Otolaryngology and received an honorary degree of Doctor of Science from the Colorado College. Dr. Yost's research interests include auditory perception and psychoacoustics in areas of pitch perception; sound localization including localizing sounds in reverberant environments and virtual auditory environments; processing sounds with modulated waveforms; sound source determination and segregation, and computational modeling with respect to time-based neural models of complex sounds; hearing impairment and hearing aids, and people-machine interactions. Dr. Yost is a member of several professional organizations. He has served as a consultant to educational, service-oriented, and outreach organizations and has received many awards.

Consideration of Minutes of the Meeting of September 7, 2007

Dr. Battey called members' attention to the minutes of the September 7, 2007 meeting of the Advisory Council. The minutes were approved as written.

Confirmation of Dates for Future Council Meetings

Dates for the Council meetings through September 2010 have been established. A list of these meetings was distributed to the Council members and posted on the web site prior to this meeting. The next meeting of Council is scheduled for Friday, May 30, 2008, in Building 31, Conference Room 6 on the NIH campus, Bethesda, Maryland.

V. Report of the Director, NIDCD.....Dr. Battey

Budget Considerations:

Dr. Battey began his presentation with a breakdown of the Budget Appropriation for FY 2008. He discussed how the \$276.6 million available for research project grants in the FY2008 Budget Appropriation will be allocated. From this total, \$9.5 million is reserved for Small Business Research grants, \$1.2 million for administrative supplements, \$203.0 million for commitments to noncompeting grants, \$1.4 million for carryover commitments from prior Council meetings, \$14.5 million for program requirements, and \$1.2 million is reserved for Phase II support of existing Exploratory/Developmental Grants. Twenty percent of the remaining \$50.9 million is designated for High Program Priority (HPP). Consequently, there is \$40.8 million available for the initial payline across the year's three Council meetings. This should allow funding of applications up to the 20.9 percentile. The \$10.2 million for HPP applications will be available to support additional applications. A copy of the slides Dr. Battey used for his budget presentation is included in Appendix 3.

Strategic Plan Update:

The NIDCD Strategic Plan serves as a guide to the NIDCD in prioritizing its research investment. To keep current with the state-of-the-science and advances in the field of communication disorders, the plan is updated every three years. The current plan ends December 2008 and the updated Plan will be effective FY 2009-2011. Leading the update will be a small working group of the NIDCD Advisory Council. The Working Group members are Dr. Charles Greer (Chair), Dr. Albert Feng, Dr. Lorraine Ramig, and Dr. Steven Rauch. The Working Group members will present draft versions and lead discussions at the May 2008 and

September 2008 Council meetings.

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

Dr. Cooper introduced Dr. Daniel Sklare and Dr. Lynn Luethke to present on two divisional efforts that they managed.

Dr. Sklare:

Dr. Sklare presented on the NIDCD Workshop for New Physician-Investigators in Communication Disorders: Strategies for Success. The Workshop targeted physicians in their first four years of NIDCD K08 & K23 awards. The purpose of the Workshop was to inform the physicians that NIDCD is their partner in their quest to forge a productive, satisfying and sustained dual-track clinical and research career trajectory. The Workshop had many goals. A few of the goals were to inform, guide, and inspire the physician to help facilitate and accelerate entries to the independent investigator career stage, solicit and stimulate new ideas on career planning/building and support strategies, and allow physicians to provide feedback to the Institute to help inform NIDCD's K-award provisions and policies in alignment with current realities for the clinician sector. As a result of the Workshop we learned that a large majority feel that the K-award research development support budget (\$50k/yr) is insufficient to support the research costs incurred on their K-awards. NIDCD also learned that most are satisfied with the NIH K-award requirement of 75% effort while others preferred a commitment scheme decreasing in the latter K-award years. All of the attendees indicated that a portion of their salaries for time devoted to the K-award is subsidized or supplemented by their department. As a result of the Workshop a number of initiatives were created to address the concerns of the attendees. NIDCD will plan to conduct the Workshop for its K08/K23 awardees every three years, NIDCD will now provide up to \$80k/yr for research-related costs on its new K08/K23 awards, NIDCD introduced Administrative Research Supplements to Promote Emergence of Independent Otolaryngologist-Investigators, and NIDCD will seek to partner with professional societies to establish national mentoring networks for early-stage physician-investigators. The attendees agreed that the Workshop was of high value and should be a continuing event, programmed during the early years of K-award funding.

Dr. Luethke:

Dr. Luethke presentation was titled, "From Bench to Marketplace: NIDCD Support of Small Business Research." The Small Business Innovation Research (SBIR) Program's purpose is to stimulate technological innovation, to use small business to meet Federal R&D needs, to foster and encourage participation by minorities and disadvantaged persons in technological innovation and to increase private-sector commercialization innovations derived from Federal R&D. Dr. Luethke discussed the 3-Phase Program for SBIR/STTR (Small Business Technology Transfer) that includes:

- **Phase I – R41, R43** – Feasibility study, \$100K and 6 month (SBIR) or 12 month (STTR) award
- **Phase II – R42, R44** – Full research (R&D), \$750K and 2 yr award (SBIR & STTR), and commercial plan required
- **Phase III** – Commercialization stage and use of non-SBIR/STTR funds

For a small business to be eligible for the SBIR Program it must be organized as a for-profit U.S. business, must have 500 or less employees including affiliates, the PD/PI's primary

employment must be with the small business's concern at time of award and for the duration of the project period, and at least 51% of the business must be owned by individuals and independently operated or at least 51% of the business must be owned and controlled by another (one) business concern that is at least 51% owned and controlled by one or more individuals. In order to be considered for the STTR Program the business must comply with the formal cooperative R&D effort, must be a research institution, and must enter an intellectual property agreement. Some examples of NIDCD supported projects/products were highlighted, including the acoustic processing of speech to improve electrolaryngeal communication, visiBabble (system for early speech intervention), the YAKK (a new communication device for nonverbal children), noise suppression for hearing aids and cochlear implants, and high resolution mapping of cochlear nerve using optical stimulation.

VII. Report of the Director, Division of Extramural ActivitiesDr. Jordan

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

New Staff

Dr. Jordan introduced Kristin Shazor, who joined the NIDCD in September as a Program Analyst and Council Liaison. Ms. Shazor earned her Master's of Science in Health Services Administration from Central Michigan University and earned her Bachelor's of Science in Health Care Management from Florida A&M University. Ms. Shazor brings strong qualifications in analysis, management, and customer service from her past positions at health care management companies in the greater Washington, D.C. area.

Endorsement of Council Operating Procedures

Dr. Jordan called Council's attention to a copy of the Council Operating Procedures which had been provided to each member prior to the meeting. The Council Operating Procedures state those actions which Council empowers staff to take without specific prior Council approval. It is the NIDCD's practice to review the Council Operating Procedures annually at the January meeting of Council. There were minimal suggested changes to the document this year in order to reflect changes in NIH-wide progress and practices. Dr. Jordan reviewed the document and it was endorsed unanimously for the current year; a copy is included in these minutes as Appendix 4.

Changes at NIH

Dr. Jordan discussed a number of changes in NIH policies and practices that have recently been announced in the "NIH Guide for Grants and Contracts." He also presented some trend data demonstrating the increasing use of the Multiple PI designation in applications submitted to NIDCD and NIH.

VIII. Scientific PresentationDr. Bechara Kachar

Dr. Battey introduced Dr. Bechara Kachar, Section on Structural Cell Biology, NIDCD, NIH. Dr. Kachar accepted our invitation to discuss his research in a presentation entitled "New Insights into Sensory Stereocilia Self-renewal and Potential Repair Mechanisms Following Hearing Impairment." The following is an abstract of Dr. Kachar's presentation:

“New Insights into Sensory Stereocilia Self-renewal and Potential Repair Mechanisms Following Hearing Impairment”

Hair cells in the inner ear are the most sensitive mechanical transducers in the human body. The key players in the transduction of sound waves or motion into electrical signals that underlie our senses of hearing and balance are the organized bundles of stereocilia that protrude from the surface of the sensory hair cells. Although stereocilia are exquisitely sensitive to mechanical vibration, orderly structured, and easily damaged by over-stimulation, they are maintained in proper working order for a lifetime. Recent studies on actin incorporation and turnover in stereocilia show that stereocilia are dynamically maintained and undergo continuous renewal. These observations, together with the identification of several novel proteins that when mutated cause deafness through stereocilia disruption, provide new insights into the mechanisms of stereocilia function and renewal and also a framework to consider different forms of loss of function and open new opportunities for preventive and therapeutic interventions. Connecting the tops of stereocilia in adjacent rows are filaments called tip links. Tip links are thought to convey the force to gate in mechanoelectrical transduction channel. New work in collaboration with colleagues at the Scripps Institute shows that two members of the cadherin family of transmembrane proteins constitute the tip links. Knowing the molecular composition of tip links will provide the basis for further exploring the mechanisms of transduction and sensory impairment and repair. Both PCDH15 and CDH23 have been implicated in a broad range of inherited syndromic and non-syndromic sensory disorders. Some of these such as Usher syndrome cause deafness and blindness. Others lead to mild or age related hearing impairment. This new study already shows that specific mutations in the PCDH15 gene that cause deafness in humans disrupt interactions between CDH23 and PCDH15.

IX. Update: Enhancing Peer Review at NIH.....Dr. Jeremy Berg

Dr. Battey introduced Dr. Jeremy Berg, Director, National Institute of General Medical Sciences to discuss trans-NIH efforts on enhancing peer review at NIH.

Dr. Berg:

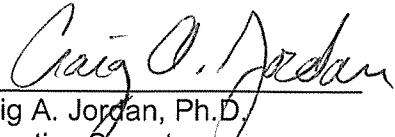
Dr. Berg started his presentation discussing a self-study by the NIH in partnership with the Scientific Community to strengthen peer review in changing times. With the increasing breadth, complexity, and interdisciplinary nature of biomedical science are creating new challenges for the system that is currently used by NIH to support biomedical and behavioral research. It is important to remember that peer review is a key component of this system. Several phases have been identified in this study; External Diagnostic Phase, Internal Diagnostic Phase, and the Project Phase that includes designing pilots and analysis. When creating a new system it is necessary to preserve the scientific competence of reviewers and review and to maintain the fairness of integrity of the review process. Any proposed solutions should be able to address a specific problem or challenge and be testable in some format. The ultimate goal of the study is to fund the best science, by the best scientists, with the least administrative burden but recognize that “best” is dependent on many factors, including scientific quality, public health impact, and mission of the Institute or Center. Dr. Berg reported that the diagnostic phases are coming to completion and that decisions will be made in January and February that will allow transition into the design and pilot implementation phase beginning in March. He provided numerous examples of “Emerging Themes” that arose from the diagnostic phase and will be considered by the Working Groups and senior NIH management as the effort moves into the final phases.

X. Adjournment: The meeting was adjourned at 2:25 p.m. on January 25, 2008.

XI. Certification of Minutes

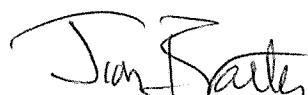
We certify that, to the best of our knowledge, the foregoing minutes and attachments are accurate and correct.²

2-20-2008



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

February 20, 2008



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

Director
National Institute on Deafness and
Other Communication Disorders

Kristin Shazor
Program Analyst
NDCD Advisory Council

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

APPENDICES

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APPENDIX 2	List of Meeting Attendees.....
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APPENDIX 4	Council Operating Procedures.....

Roster
National Deafness and Other Communication Disorders Advisory Council

Chairperson

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

National Institute on Deafness and Other Communication Disorders
Bethesda, Maryland 20892

BATES-BOUCHER, Donna President Bates Group, Inc. Eight Hyde Park Circle Denver, CO	2009	GOLDIN-MEADOW, Susan J., Ph.D. Beardsley Ruml Distinguished Service Professor Department of Psychology Division of Social Sciences University of Chicago Chicago, IL	2008
CASSELBRANT, Margaretha L., M.D., Ph.D. Eberly Professor of Pediatric Otolaryngology Director, Division of Pediatric Otolaryngology Children's Hospital of Pittsburgh of UPMC University of Pittsburgh, School of Medicine Pittsburgh, PA	2010	GREER, Charles A., Ph.D. Professor of Neuroscience Department of Neurosurgery Yale University School of Medicine New Haven, CT	2011
CONTURE, Edward G., Ph.D. Professor and Director, Graduate Studies Vanderbilt University Medical Center DHSS Graduate Studies and Research Nashville, TN	2008	HORNER, Jennifer, J.D., Ph.D. Associate Dean for Research and Graduate Studies College of Health and Human Services Ohio University Athens, OH	2010
CRUICKSHANKS, Karen J., Ph.D. Professor Department of Ophthalmology and Visual Sciences University of Wisconsin School of Medicine and Public Health Madison, WI	2011	LANIER, Ronald L. Director Virginia Department for the Deaf and Hard of Hearing Commonwealth of Virginia Richmond, VA	2008
FENG, Albert S., Ph.D., MS Professor Department of Molecular and Integrative Physiology University of Illinois Urbana-Champaign Urbana, IL	2011	MOSS, Sharon E., Ph.D. Director Scientific Programs and Research Development Science and Research Unit American Speech-Language-Hearing Assoc. Rockville, MD	2008
FISCHEL-GHODSIAN, Nathan, M.D. Professor Department of Pediatrics Cedars-Sinai Medical Center University of California, Los Angeles Los Angeles, CA	2009	ORLECK-AIELLO, Myrna "Mo" CEO/President Abacus N Bytes, Inc. D/B/A TCS Associates Wheaton, MD	2009

RAMIG, Lorraine, Ph.D., CCC-SLP Professor Department of Speech Language Hearing Sciences University of Colorado, Boulder Boulder, CO	2010	FRANKS, John R., Ph.D. Chief, Bioacoustics and Occupational Vibration Section Physical Agent Effects Branch Division of Biomedical and Behavioral Science National Inst for Occupational Safety & Health Cincinnati, OH
RAUCH, Steven D., M.D. Associate Professor Otolaryngology Department of Otology & Laryngology Harvard Medical School Massachusetts Eye and Ear Infirmary Boston, MA	2010	HOFFER, Michael E., M.D. Co-Director Department of Defense Spatial Orientation Center Department of Otolaryngology Naval Medical Center San Diego, CA
RYAN, Allen F., Ph.D. Professor of Surgery/Otolaryngology Department of Surgery University of California at San Diego La Jolla, CA	2009	LEAVITT, Michael O. Secretary Department of Health and Human Services Hubert H. Humphrey Building Washington, DC
WEYMULLER, Ernest A., M.D. Chair and Professor Department of Otolaryngology-HNS University of Washington School of Medicine Seattle, WA	2009	ZERHOUNI, Elias Adam, M.D. Director National Institutes of Health Bethesda, MD 20892
YOST, William A., Ph.D. Chair of Speech and Hearing Science Department of Speech and Hearing Science Arizona State University Tempe, AZ	2011	EXECUTIVE SECRETARY JORDAN, Craig A., Ph.D. Director Division of Extramural Research, NIDCD Bethesda, MD
AD HOC MEMBER:		
ACHE, Barry W., Ph.D. Director, Center for Smell and Taste Distinguished Professor of Zoology and Neuroscience Whitney Laboratory for Marine Bioscience University of Florida Gainesville, FL		<i>Rev. 02/2008</i>
EX-OFFICIO MEMBERS:		
BECK, Lucille B., Ph.D. Director Audiology & Speech Pathology Service (117A) Department of Veterans Affairs Washington, DC		

Appendix 2

ATTENDANCE LIST

Other than Council members, attendees at the January 25, 2008 Council meeting included:

NIDCD Staff:

Office of Health Communication and Public Liaison

Joy, Linda, Science Writer
Wenger, Jenny, Technical Writer

Office of Administration

Kerr, W. David, Executive Officer

Financial Management Branch

Rotariu, Mark, Chief
Langston, Catherine, Budget Analyst
Lee, Mimi, Budget Analyst

Science Policy and Planning Branch

Wong, Baldwin, Chief
Cole, Laura, Ph.D., Science Policy Analyst
Montney, Lisa, Ph.D., Science Policy Analyst
Stewart, Lesley, Science Policy Analyst

Division of Extramural Activities

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

Grants Management Branch

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

Scientific Review Branch

Stick, Melissa, Ph.D., M.P.H., Chief
Livingston, Christine, Ph.D., Scientific Review Administrator
Moore, Christopher, Ph.D., Scientific Review Administrator
Singh, Sheo, Ph.D., Scientific Review Administrator

Yang, Shiguang A., Ph.D., Scientific Review Administrator

Division of Scientific Programs
Cooper, Judith, Ph.D., Director

Voice, Speech, Language, Smell and Taste Branch
Cooper, Judith, Ph.D., Program Director, Language Program
Davis, Barry, Ph.D., Program Director, Smell and Taste Program
Shekim, Lana, Ph.D., Program Director, Voice & Speech Program
Sklare, Daniel A., Ph.D., Program Director, Research Training and Development Program

Hearing and Balance/Vestibular Branch
Donahue, Amy, Ph.D., Chief
Freeman, Nancy, Ph.D., Program Director, Hearing
Luethke, Lynn, Ph.D., Program Director, Hearing
Miller, Roger, Ph.D., Program Director, Hearing
Platt, Christopher, Ph.D., Program Director, Balance/Vestibular
Watson, Bracie, Ph.D., Program Director, Hearing

Translational Research Branch
Chiu, May, Program Analyst for Epidemiology & Biostatistics

Division of Extramural Administrative Support, OER, NIH
Holmes, Debbie, Extramural Support Assistant

Center for Scientific Review, NIH
Politis, Alexander, Chief, Infections Disease & Microbiology IRG
Kenshalo, Daniel, Ph.D., Scientific Review Administrator
Ni, Weijia, Ph.D., Scientific Review Administrator
Tian, Biao, Ph.D., Scientific Review Administrator

Office of Director, NIH, and Others
Berg, Jeremy, Ph.D., Director, NIGMS
Knisely, Jane, Ph.D., Presidential Management Fellow, OD
Outlaw, Deborah, Government Relations Counsel, American Tinnitus Association
Thomas, Kate, Government Relations Manager, American Academy of Audiology

Appendix 3

NIDCD Director's Report Slides

As Presented By

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

NIDCD Advisory Council Meeting

January 25, 2008

**National Institute on Deafness and Other Communication
Disorders**

**January 2008 Council
Budget Mechanism
(Dollars in thousands)**

<i>Budget Mechanism</i>	<u>FY 2007 Obligations</u>		<u>FY 2008 Appropriation</u>	
	<u>Number</u>	<u>Amount</u>	<u>Number</u>	<u>Amount</u>
Research Projects				
Noncompeting	628	\$199,207	627	\$202,995
Admin. Supplements	(18)	1,150	(18)	1,150
Competing	233	67,875	214	62,964
Subtotal	861	268,232	841	267,109
SBIR/STTR	32	10,096	30	9,500
Subtotal, RPG's	893	278,328	871	276,609
Research Centers	19	15,924	20	17,079
Other Research	69	10,037	71	10,318
Total Research Grants	981	304,289	962	304,006
Individual Training	152	5,719	152	5,720
Institutional Training	201	7,982	201	7,980
R & D Contracts	52	22,011	52	22,000
Intramural Research		34,617		35,831
Research Mgmt. & Support		18,319		18,601
NIH Roadmap		0		0
TOTAL		\$392,937		\$394,138

**National Institute on Deafness and Other Communication
Disorders**

**January 2008 Council
Competing Research Project Grants
(Dollars in thousands)**

Total RPG Funds FY08 budget	\$276,609
Less SBIR/STTR budget	-9,500
Less Administrative Supplements budget	-1,150
Less Noncompeting budget	-202,995
Less FY08 "Carryover" Commitments from prior Council meetings	-1,356
Less FY08 Program Requirements	-14,500
Plus FY07 funds	5,074
Less FY08 R33 estimate	-1,243

Total

\$50,939

20% HPP

80% Regular

For FY 2008	\$10,188	\$40,751	
	\$3,396	\$13,584	33%

Appendix 4

Council Operating Procedures

Endorsed on January 25, 2008 at
NDCD Advisory Council Meeting

NIDCD Advisory Council Operating Procedures

(As endorsed by Council January 25, 2008)

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

1. Approval of New Principal Investigator or Program Director

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

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

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

3. Awards for Orderly Termination

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

4. Awards for Interim Period Due to a Deferral

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

5. Supplemental Support to Existing Research and Training Awards

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

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

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

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

2. Extension of Project Period Dates

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