

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

January 22, 2010

**National Institutes of Health
Bethesda, Maryland**

MINUTES

The National Deafness and Other Communication Disorders Advisory Council convened on January 22, 2010 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 22, 2010: 8:30 a.m. to 10:30 a.m. for review of individual grant applications; and

Open: January 22, 2010: 10:30 a.m. to 1:45 p.m., for the review and discussion of program development needs and policy.

Council members in attendance:¹

Ms. Brenda Battat
Dr. William Brownell
Dr. Margaretha Casselbrant
Dr. Robert Davila
Mr. Richard Ellenson
Dr. Albert Feng
Dr. Karen Friderici
Dr. Charles Greer

Dr. Jennifer Horner
Dr. John Niparko
Dr. Lorraine Ramig
Dr. Steven Rauch
Dr. Randall Reed
Dr. Mabel Rice
Dr. Anne Smith
Dr. William Yost

Council members absent:

Dr. Karen Cruickshanks

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 Participating:

Dr. Lucille B. Beck
Dr. Rickie Davis

Ex-Officio Members Not Participating:

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 expressed appreciation to the entire Council for their service and advice. Dr. Karen Cruickshanks had scheduling conflicts which prevented her 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 10:30 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 111 investigator-initiated research grant applications; 94 applications had primary assignment to NIDCD, in the amount of \$28.01 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 through the 22nd percentile.

B. Special Programs Actions

1. Institutional National Research Service Awards (T32): The Council recommended support of five applications.
2. Research Scientist Development Award (K01): The Council recommended support of one application.
3. Mentored Quantitative Research Development Award (K25): The Council recommended support of one application.
4. NIH Pathway to Independence (PI) Award (K99/R00): The Council recommended support of one application.
5. Small Grants (R03): The Council recommended support of eight applications.
6. NIH Support for Conferences and Scientific Meetings (R13): The Council recommended support of six applications and partial support of three applications with dual assignments.
7. AREA Grant (R15): The Council recommended support of one application.
8. NIH Exploratory/Development Research Grant Award (R21): The Council recommended support of six applications.
9. Small Business Technology Transfer (STTR): The Council recommended support of two Phase I (R41) applications and one Phase II (R42) application.
10. Small Business Innovation Research Awards (SBIR): The Council recommended support for four Phase I (R43) applications and five Phase II (R44) applications.
11. HD-09-017 Safe and Effective Instruments and Devices for use in the Neonatal Intensive Care Units (R43): The Council recommended support of one application.

IV. Pre-Council Voting

Council members were invited to vote on the following staff recommendations via e-mail ballot on ARRA funding prior to the meeting.

- AREA applications (R15) – The Council voted to support four applications.
- BRDG-SPAN application (RC3) – The Council voted to support one application.

V. Enhancing Peer Review Survey

As part of the NIH Enhancing Peer Review initiative, representatives from the NIH Office of Extramural Research came to the NCD Advisory Council meeting to administer a brief opinion survey about the Enhancing Peer Review initiative. One element of the Enhancing Peer Review initiative is the implementation of a process of continuous review of peer review. The survey of Council members is one way opinions about NIH's peer review process will be periodically collected. In this particular survey, NIH is gathering opinions from current members of NIH National Advisory Councils/Boards about the impact of the changes on their ability to carry out council/board responsibilities, focusing on three of the enhancements introduced since May 2009:

- the new 9-point scoring system;
- provision of reviewer scores for each review criterion, as well as for the overall potential impact of the proposed research; and
- use of a template to prepare critiques and encourage reviewers to provide bulleted comments rather than prose.

OPEN SESSION

VI. Opening Remarks..... Dr. Battey

Dr. Battey welcomed additional staff and visitors to the open session of the meeting.

Consideration of Minutes of the Meeting of September 11, 2009

Dr. Battey called members' attention to the minutes of the September 11, 2009 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 2011 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 14, 2010, in Building 31, Conference Room 10 on the NIH campus, Bethesda, Maryland.

VII. Report of the Director, NIDCD Dr. Battey

Budget Considerations:

Dr. Battey began his presentation by reporting that the FY 2010 Appropriation for NIDCD is \$418.8 million, representing an increase over both the FY2009 Appropriation and the FY2010 President's Budget request. He was not able to provide particulars regarding the FY2010 Appropriation since details were not available for release to the public. He then continued with a breakdown of NIDCD's projections for expenditures of NIDCD's FY 2010 Research Project Grant dollars. He discussed how the \$290.6 million available for research project grants in the FY2010 Budget Appropriation will be allocated. From this total, \$9.7 million is reserved for Small Business Research grants, \$1.5 million for administrative supplements, \$218.2 million for commitments to noncompeting grants, \$0.7 million for carryover commitments from prior Council meetings, and \$13.8 million for

program requirements. An additional estimated \$10 million is available from end of year FY09 funds. Twenty percent of the remaining \$56.8 million is designated for High Program Priority (HPP). Consequently, there is \$45.4 million available for the initial payline across the year's three Council meetings. This should allow funding of applications up to the 22 percentile. The \$11.4 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.

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

Dr. Cooper turned the podium over to Dr. Amy Donahue, Division of Scientific Programs, NIDCD.

Dr. Amy Donahue, Dr. Judy R. Dubno, Dr. Lucille Beck:

Drs. Donahue, Dubno and Beck presented a report of the NIDCD research working group held in August of 2009: Research on Accessible and Affordable Hearing Health Care for Adults with Mild to Moderate Hearing Loss. Dr. Donahue presented the background and purpose of the working group, including the working group process and listing of participants. Dr. Dubno then presented the numerous research recommendations that evolved from the working group. Dr. Donahue continued the presentation by describing the possible next steps and challenges identified in the report. Council expressed considerable interest and support for the working group and follow-up actions during the subsequent discussion.

IX. Scientific PresentationDr. Robert Margolskee

Dr. Battey introduced Dr. Robert Margolskee, Member of the Monell Chemical Senses Center. Dr. Margolskee accepted our invitation to discuss his research in a presentation entitled "Role of Taste Signaling Proteins in Endocrine Function." The following is an abstract of Dr. Margolskee's presentation:

"Role of Taste Signaling Proteins in Endocrine Function"

Our laboratory studies the involvement of taste signaling proteins in gastrointestinal (GI) chemosensation, i.e. how the gut "tastes" what has been ingested. We are particularly interested in how nutrients inside the gut (within the lumen) are sensed and in turn regulate hormone release from the gut's endocrine (hormone-producing) cells. We have determined that many of the same signaling proteins that underlie taste sensation in the mouth also are expressed in specific gut endocrine (enteroendocrine) cells. These "taste cells of the gut" use gut-expressed taste signaling proteins such as sweet and bitter taste receptors, and the receptor coupled G-protein gustducin, to sense, in effect to *taste*, the dietary contents within the lumen of the gut. Chemosensory responses of these enteroendocrine cells include hormone release to promote the gut's digestive and metabolic functions. One example of the importance of taste signaling proteins to gut taste comes from the observation that knockout mice lacking gustducin do not secrete GLP-1 (Glucagon-Like Peptide-1) from their enteroendocrine cells in response to glucose introduced into the gut lumen – because of this defect these mice have defective regulation of their plasma insulin and glucose levels, leading them to a prediabetic condition. In recent studies we have determined that sweet receptor-expressing endocrine cells in the pancreas utilize this taste receptor to sense non-caloric sweeteners and respond with insulin release – a finding with significant implications for human health.

We have recently found that a number of hormones typically found in enteroendocrine cells of the

gut are present also in a subset of taste cells, the “endocrine taste cells.” In response to taste stimuli these taste cells release GLP-1 and other hormones that have local (paracrine) or systemic effects. Our preliminary data show that GLP-1, glucagon and PYY (peptide YY) are expressed in endocrine taste cells. In addition, we have found that glucose and sweeteners elicit release of GLP-1 from these taste cells.

We are coming to a new appreciation of the chemosensory functions of taste signaling proteins in oral and extra-oral sites. We are also coming to a new appreciation of the physiological importance of taste cells of the tongue, gut, pancreas and elsewhere in the body. Taste cells and taste signaling proteins have potential medical relevance to appetite, satiety, diabetes and obesity.

Jang, H.J., Kokrashvili, Z., Theodorakis, M.J., Carlson, O.D., Kim, B.J., Zhou, J., Kim, H.H., Xu, X., Chan, S.L., Juhaszova, M., Bernier, M., Mosinger, B., Margolskee, R.F., Egan, J.M. Gut-expressed gustducin and taste receptors regulate secretion of glucagon-like peptide-1. *Proc Natl Acad Sci U S A* 2007 **104**, 15069-74.

Margolskee, R.F., Dyer, J., Kokrashvili, Z., Salmon, K.S., Ilegems, E., Daly, K., Maillet, E.L., Ninomiya, Y., Mosinger, B., Shirazi-Beechey, S.P. T1R3 and gustducin in gut sense sugars to regulate expression of Na⁺-glucose cotransporter 1. *Proc Natl Acad Sci U S A* 2007 **104**, 15075-80.

Kokrashvili, Z., Rodriguez, D., Yevshayeva, V., Zhou, H., Margolskee, R.F., Mosinger, B. Release of endogenous opioids from duodenal enteroendocrine cells requires Trpm5. *Gastroenterology*. 2009 **137**, 598-606, 606.e1-2.

Maillet EL, Margolskee RF, Mosinger B. Phenoxy herbicides and fibrates potently inhibit the human chemosensory receptor subunit T1R3. *J Med Chem*. 2009 **52**, 931-5.

Egan, J.M. and Margolskee, R.F. Taste cells of the gut and gastrointestinal chemosensation. *Mol Interv*. 2008 **8**, 78-81.

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

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

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.

New Investigator applications at NIH / NIDCD

Dr. Jordan reviewed the history of NIH support for New Investigators and the changes in practices and policies that have been implemented in an effort to shore up the percentage of grant awards to this population of investigators. He compared some of the efforts initiated within NIDCD

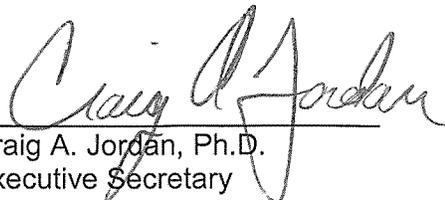
to the efforts implemented more recently at the NIH level. Some of the most recent changes included the formalization of the Early Stage Investigator (ESI) definition, special peer review procedures, and expectations for grant support. An ESI is a New Investigator who is still within 10 years of completing his/her terminal research degree or is within 10 years of completing medical residency. Dr. Jordan presented information about the implementation of these new processes at both the NIH and NIDCD level. He finished his presentation by describing the ESI extension process and the accomplishments of the ESI Extension Committee during the initial year, 2009.

XI. Adjournment: The meeting was adjourned at 1:45 p.m. on January 22, 2010.

XII. Certification of Minutes

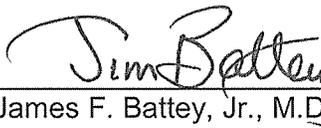
We certify that, to the best of our knowledge, the foregoing minutes and attachments are accurate and correct.²

March 1, 2010



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

March 1, 2010



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

Nanette Stephenson
Committee Management Specialist
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

		PAGE
APPENDIX 1	NDCD Advisory Council Roster	10
APPENDIX 2	List of Meeting Attendees.....	12
APPENDIX 3	NIDCD Director's Report Slides	14
APPENDIX 4	Council Operating Procedures	17

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

BATTAT, Brenda, MA, MCSP Executive Director Hearing Loss Association of America (HLAA) Bethesda, MD	2013	FRIDERICI, Karen, Ph.D. Professor Department of Microbiology & Molecular Genetics Michigan State University East Lansing, MI	2013
BROWNELL, William, Ph.D. Jake and Nina Kamin Chair Bobby R. Alford Department of Otorhinolaryngology & Communicative Science Baylor College of Medicine Houston, TX	2013	GREER, Charles A., Ph.D. Professor of Neuroscience Department of Neurosurgery Yale University School of Medicine New Haven, CT	2011
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	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	NIPARKO, John, M.D., George T. Nager Professor Director, Division of Otology, Neurotology, & Skull Base Surgery Department of Otolaryngology – Head & Neck Surgery The Johns Hopkins Hospital Baltimore, MD	2013
DAVILA, Robert R., Ph.D. President (Retired) Galludet University Washington, DC	2012	RAMIG, Lorraine, Ph.D., CCC-SLP Professor Department of Speech Language Hearing Sciences University of Colorado, Boulder Boulder, CO	2010
ELLENSON, Richard, MBA Chief Vision Officer DynaVox New York, NY	2013	RAUCH, Steven D., M.D. Professor Otolaryngology Department of Otology & Laryngology Harvard Medical School Massachusetts Eye and Ear Infirmary Boston, MA	2010
FENG, Albert S., Ph.D., MS Professor Department of Molecular and Integrative Physiology University of Illinois Urbana-Champaign Urbana, IL	2011		

REED, Randall, Ph.D. 2011
Director, Center for Sensory Biology
Professor, Department of Molecular Biology
and Genetics
Department of Neuroscience
Department of Otolaryngology - HNS
Johns Hopkins School of Medicine
Baltimore, MD

RICE, Mabel L., Ph.D. 2012
Fred and Virginia Merrill Distinguished
Professor of Advanced Studies
Department of Speech-Language-Hearing
The Merrill Advance Studies Center
University of Kansas
Lawrence, KS

SMITH, Anne, Ph.D. 2012
Distinguished Professor
Department of Speech, Language
and Hearing Sciences
Purdue University
West Lafayette, IN

YOST, William A., Ph.D. 2011
Chair of Speech and Hearing Science
Department of Speech and Hearing Science
Arizona State University
Tempe, AZ

SEBELIUS, Kathleen
Secretary
Department of Health and
Human Services
Hubert H. Humphrey Building
Washington, DC

COLLINS, Francis S., M.D., Ph.D.
Director
National Institutes of Health
Bethesda, MD 20892

EXECUTIVE SECRETARY:

JORDAN, Craig A., Ph.D.
Director
Division of Extramural Research, NIDCD
Bethesda, MD

EX-OFFICIO MEMBERS:

BECK, Lucille B., Ph.D.
Director
Audiology & Speech Pathology Service (117A)
Department of Veterans Affairs
Washington, DC

DAVIS, Rickie, Ph.D.
Team Leader
Hearing Loss Prevention Team
National Institute for Occupational Safety and Health
Centers for Disease Control and Prevention
Cincinnati, OH

HOFFER, Michael E., M.D.
Co-Director
Department of Defense Spatial Orientation Center
Department of Otolaryngology
Naval Medical Center
San Diego, CA

Appendix 2

ATTENDANCE LIST

Other than Council members, attendees at the January 22, 2009 Council meeting included:

NIDCD Staff:

Office of Administration

Wysong, Chad, Deputy Executive Officer

Financial Management Branch

Rotariu, Mark, Budget Officer

Wong, JoAnne, Budget Analyst

Science Policy and Planning Branch

Wong, Baldwin, Chief

Cole, Laura, Ph.D., Science Policy Analyst

Reuss, Reaya, Health Science Policy Analyst

Kennedy, Lisa, Science Policy Analyst

Office of Health Communication and Public Liaison

Blessing, Patricia, Chief

Miranda-Acevedo, Robert, MPA, Science Writer/Public Liaison Officer

Division of Extramural Activities

Jordan, Craig A., Ph.D., Director

Stephenson, Nanette, Committee Management Specialist

Grants Management Branch

Myers, Christopher, Chief

Dabney, Sherry, Grants Management Officer

Doan, Hoai, Grants Management Specialist

Garcia, Maria, Grants Management Specialist

McNamara, Castilla, Ph.D., M.P.A., Grants Management Specialist

Myrbeck, Eddie, Grants Management Specialist

Scientific Review Branch

Stick, Melissa, Ph.D., M.P.H., Chief

Livingston, Christine, Ph.D., Scientific Review Officer

Moore, Christopher, Ph.D., Scientific Review Officer

Singh, Sheo, Ph.D., Scientific Review Officer

Sullivan, Susan, Ph.D., Scientific Review Officer

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

Division of Scientific Programs

Cooper, Judith, Ph.D., Director

Donahue, Amy, Ph.D., Deputy Director

Program Officers

Cyr, Janet, Ph.D., Training/Hearing and Balance

Davis, Barry, Ph.D., Smell and Taste Program

Freeman, Nancy, Ph.D., Hearing and Balance

Hoffman, Howard, M.A., Epidemiology and Statistics

Hughes, Gordon, M.D., Clinical Trials

Miller, Roger, Ph.D., Neural Prosthesis

Platt, Christopher, Ph.D., Hearing and Balance

Sklare, Daniel A., Ph.D., Training Officer/Hearing and Balance

Watson, Bracie, Ph.D., Hearing and Balance

Division of Intramural Research

Griffith, Andrew, M.D., Ph.D., Scientific Director

Van Waes, Carter, M.D., Clinical Director

Division of Extramural Administrative Support, OER, NIH

Holmes, Debbie, Extramural Support Specialist

Center for Scientific Review, NIH

Crutcher, Keith, Ph.D., Scientific Review Officer

Etcheberrigaray, Rene, Ph.D., Division Director

Luethke, Lynn, Ph.D., Scientific Review Officer

Melchior, Christine, Chief, Integrative Function & Cognitive Neuroscience IRG

Ni, Weijia, Ph.D., Scientific Review Officer

Tian, Biao, Ph.D., Scientific Review Officer

Office of Director, NIH, and Others

Columbus, Megan, Communications, OER

Hvitved, Angela, Pres. Management Fellow, OER

Bopp, Andrew, Director of Government Relations, Hearing Industries Association

Dubno, Judy, Ph.D., Professor, MUSC

Margolskee, Robert, Ph.D., Member, Monell Chemical Senses Center

Pollick, Amy, Director Government Relations, Association for Psychological Science

Thomas, Kate, Manager, American Academy Audiology

Ouisu, Deborah, American Tinnitus Association

Knox, Sherry, CART Provider

Sumner, Michelle, Interpreter, Purple Communications

Holmes, Mar, Interpreter, Purple Communications

Frances Freeman, CART Provider

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 22, 2010

National Institute on Deafness and Other Communication Disorders

**JANUARY 2010 Council
Budget History
(Dollars in thousands)**

FY 2009 Appropriation	FY 2010 President's Budget	FY 2010 Appropriation
\$407,259	\$413,026	\$418,833

Budget mechanism details for the FY 2010 appropriation are not available for release to the public at this time.

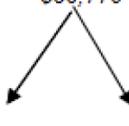
National Institute on Deafness and Other Communication Disorders

JANUARY 2010 Council

Competing Research Project Grants

(Dollars in thousands)

January Council Funds for FY 2010 Competing R01's
Assumes President's Budget Request
 (\$ in thousands)

Total RPG budget	\$290,658	
Less SBIR/STTR budget	-9,700	
Less Administrative Supplements budget	-1,500	
Less Noncompeting budget	-218,248	
Less FY10 "Carryover" Commitments from prior Council meetings	-690	
Less FY10 Program Requirements	-13,750	
Plus FY09 funds	10,000	
	\$56,770	
<i>Total</i>		
		
	<u>20% HPP</u>	<u>80% Regular</u>
For FY 2010	\$11,354	\$45,416
Per Council Round	\$3,785	\$15,139

Appendix 4

Council Operating Procedures

Endorsed on January 22, 2010 at
NDCD Advisory Council Meeting

NDCD Advisory Council Operating Procedures

(As proposed for Council concurrence at January 22, 2010)

All scored research/training grant applications are taken to the National Deafness and Other Communication Disorders Advisory Council (NDCDAC) for second level review prior to possible funding actions. The Institute staff may take the following actions on active 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. Transfer of Award 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 only in those rare 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.