Open Mike with Dr. Michael Lauer

>> Megan Columbus: We're here with an Open Mike, and we're here to talk about virtually anything that you want to talk about. Mike Lauer, the NIH Deputy Director for extramural research, is our presenter today, and I'm Megan Columbus, and I have the privilege of working with Mike and being on his Open Mike blog team, and being his communication director. One of the things that I really love about working at NIH is our commitment, and our commitment to transparency, and our commitment to partnering with the extramural community in a way that actually moves science forward, and moves our knowledge forward and moves health forward, and that commitment to transparency is what we're trying to work on with Open Mike, right? We are trying to let folks know while we're making the decisions that we're making. We're trying to show people the data that's driving some of those decisions, and we're trying to provide a platform where we can have some dialogue and we can get insights from you all. So as we're going through this session, I want to let you know that there's a Q and A box, and the Q and A button is what you should be using for questions rather than the chat button. We'll be monitoring the Q and A. We also have many more people here than we can probably accommodate questions, and so we may be picking and choosing some questions. If you don't get those questions answered, though, there's lots of other staff around the seminar and other ways that we can get it to happen. So with that, Mike, let me turn it over to you.

>>Dr. Michael Lauer: Great, Megan. Thank you so much, and I want to again take this opportunity to welcome you to the seminar. This is the first time that we've done it virtually. We're now living in the world of COVID. For those of those who are not familiar, we do a regional seminar typically twice a year. Once in the Baltimore, Washington area and then once some place else in the country. I remember some years ago, we did it in Chicago at the same time that the Chicago Cubs were in the World Series for the first time in something like 50 years, and I was wondering how people could play attention. But they did. We greatly enjoy the seminars. We were supposed to have our last seminar in April. Obviously, we couldn't have it because that was just when the pandemic was starting, and so now we're doing this event. Normally, we have about 900 come to the seminar. We had 20,000 people register for this virtual event, so we're absolutely thrilled by that. So the Open Mike is actually one of my favorite parts of the seminar because I don't have to prepare for it. I don't have to put together slides. All I have to do is show up and be ready to interact with an engaged audience, and so essentially whoever happens to come to the room will help drive the conversation. We often hear interesting questions about various things that are coming up, what's on people's mind, and we engage in a dialogue. So we're going to try to do that as best as we possibly can here using this virtual setting. Megan is watching the questions, and so she will be ...

>> Megan Columbus: I am.

>> Megan Columbus: ... your mouthpiece, and so let's go.

>> Megan Columbus: That's right. So we already have some good questions in the box here. So, Mike, how does the focus on ESI status impact mid career scientists? Is the attrition rate after the first R01 changing?

>>Dr. Michael Lauer: So that's a great question. There are concerns that mid career scientists are facing a squeeze. We know that over time, late career scientists are taking up an increasing proportion of our investigators, and this is not just due to demographic changes. There are a variety of other factors at play as well. Back in 2008, 2009, NIH instituted a number of early stage investigative policies, which we have made more robust over recent years, and that has stemmed the tide, whereby we no longer have a loss of early stage investigators. But in fact, the data do show that mid career investigators are increasingly squeezed. But one thing that we are trying to do is to pay particular attention to so called "at-risk investigators," most of whom are mid- career investigators. These are people who are doing good works, submit high quality grants, but if they don't get funded, we'll potentially lose all funding. So we're paying more attention to them and we're trying to increase our funding rates.

>> Megan Columbus: Related question to that. Can ESI status be extended due to COVID?

>>Dr. Michael Lauer: Yes, thank you so much for asking. This is really, really important. So ESI status can be extended for any of a variety of reasons. One of the things that we have done is we've made it easier to extend ESI status because of COVID related matters. So we have a website. We've tried to make it easy, and our general philosophy on this is to be extremely lenient. So if your work has basically ground to a halt, or been severely impacted by COVID, let us know and there's a very high likelihood that we will extend your ESI status.

>> Megan Columbus: Just related in terms of the COVID questions, do investigators need to discuss in the grant applications how their protocols are adjusting to COVID realities, or should they be writing and assuming life was normal? And if you can speak to both the lab-based research and other, that would be good.

>>Dr. Michael Lauer: Okay, so this is a great question. We've posted some recent guide notices that addressed these.

>>Dr. Michael Lauer: As a general rule, right now what we're telling you to do is to write your proposal as if there is no COVID. Now, I know that's really hard. Here we are, sitting on a virtual platform instead of being in a nice hotel, but we don't know what this world is going to look like a year or two from now when hopefully your grant will be funded, and will be in place. So what we're asking you to do is to write the science as best as you possibly can, pretend that there is no COVID. We are actually telling our reviewers, as hard as this is, to please don't pay attention to that. Look at the science, see how good it is and rate it accordingly, and then for those grants that are potentially fundable, we will work with you to figure out what's feasible and what's not. So bottom line, write your proposals as if there is no COVID, and we are telling our reviewers, review the proposals as if there is a no COVID. Now the only exception to that, obviously, are those proposals that are related to COVID. But other than that, that's what we're telling people to do.

>> Megan Columbus: Great. Thank you. Are there plans to expand funding for maximizing investigators ... Sorry, I just lost ... the MIRA awards for other ICs?

>>Dr. Michael Lauer: So, that's a good question. The MIRA Award is an award that's given out by NIGMS that focuses more on the program that an investigator has than on specific projects. So for example, for the MIRA Award does not involve specific aims. It's not a specific project. There are other institutes and centers that have R35 like programs. NCI has one, NHLBI. There are some others as well, but I think that it's fair to say that the way the MIRA award is set up is very much an NIGMS flavor. It's a basic science flavor, and I think we can assume that the different institutes will use the R35 mechanisms in different ways over time.

>> Megan Columbus: And related, what about the DP2 awards?

>>Dr. Michael Lauer: Well, the DP2 awards, we've been very happy with how those have turned out. There's been some interesting evaluations. These yield highly innovative research, and what we've also seen is that people who get DP2 awards, the likelihood that they will continue to receive funding is about the same as everybody else. It's no lower. There was a concern that people who got DP2 awards would have lower success going on down the line. So this is a program that we're very excited about, which reminds me, and I mentioned this during on the chat in the planning session. We have a high risk, high reward website that's part of our common fund. Please come take a look. There's some great opportunities there.

>> Megan Columbus: Great. Here's a question that we've been getting fairly frequently recently, and it's about the URL hyperlinks policy and applications. The policy is clear, but it's a struggle that they have to remove those components from the grants. Do you have any latitude, such as like in resource sharing plans or elsewhere?

>>Dr. Michael Lauer: So I do understand the concern about this. This is one of the more common kinds of "you've got to be kidding" queries that I often get, or e-mails that I often get, and a reminder that we are now living in the 21st century, and certainly I hyperlink things like crazy when I'm communicating with my colleagues. But unfortunately, we live in a dangerous world, and so while on the one hand it makes sense to allow hyperlinks as much as possible, on the other hand there are real security concerns. There's another concern as well, and I hope this sounds like it would never apply to you, but we know that people can keep track of who is looking at various webpages, and so there may be, unfortunately, some scientists out there who want to know who is looking at their grant application, because that way they know who is reviewing their grant application, and so this is something that we want to prevent. So for a variety of security reasons, we're not allowing hyperlinks, with certain exceptions. But as a general rule, we're not allowing hyperlinks. I know it causes inconvenience, but it is what it is. Let me just say one other thing, which is that we are concerned about what we call "stuffing." You have 12 pages to write your proposal, and it's hard enough for reviewers to read 12 pages. We can't be expecting reviewers to dig into every hyperlink and read those as well. So this is another way in which we try to control the conversation.

>> Megan Columbus: Yeah, and questions about what can I include on my application and that kind of thing. We have a policy booth that's actually the system's policy branch booth that you'll be able to go, and they're the experts in all things application guide. So I encourage people to find that booth and talk to them there. Here's a timely question. How many competing awards are issued during competing resolution, and are there are certain activity codes or funding opportunity announcements that get prioritized?

>>Dr. Michael Lauer: Oh, that's a great question, especially right now. So as a general rule, NIH does not give out many awards between October, and say January or February. This is especially true during a continuing resolution because we do not know how much money we're going to have available for us during the course of the year. And even last year, when we actually had a budget at the beginning of the year, spending was relatively slow from October to January, mainly because this is a time when institutes are trying to figure out what their spending plans are going to be over the course of the year. The kinds of awards that we do give out in October are those that are linked to specific RFAs. So there the institutes and centers know that these are going to be coming up in October, and therefore they want to fund them in a timely way. And then obviously, those that are related to public health urgencies. So COVID awards are going to continue to flow over the next few weeks to months because this is obviously a very high priority for the agency.

>> Megan Columbus: All right. Another timely question. Undo foreign influence is a hot topic. There's been talk that these issues will be added to research misconduct proceedings. Do you agree that that would be appropriate?

>>Dr. Michael Lauer: So research misconduct has a very specific regulatory meaning. Research misconduct is fabrication, falsification or plagiarism, and those types of misconduct follow a certain route. You can think of foreign influence, what we're talking about is a certain kind of professional misconduct, and the way this often manifests is that people tell us ... Well, I'll be quite candid. They'll tell us lies on their applications. So they will tell us, for example, that they're not getting any funding from a foreign country, from a foreign grant. They'll tell us that they're available for 12 months of the year to do their research, when they may actually only be available for 6 months of the year or less because they have signed an employment contract someplace else. They'll tell us that they don't have any conflicts of interest, when in fact they have substantial equity in a company which is based in a foreign country. So that's a kind of professional misconduct. It's different from research misconduct, so it gets handled in a different way. In some cases, in the most extreme cases, it can be even criminal. And so, for example, we had one investigator who had a job in a foreign country, earned half a million dollars through that job that he did not disclose to his university, and did not disclose to NIH. He also didn't disclose it to the IRS, so he wound up submitting false tax forms over a period of a many years, and he actually wound up being convicted of a crime. In less severe cases, what we're talking about is significant grant non-compliance in that important information has been withheld from the agency that leads to our making distorted decisions. So I would think of it as professional misconduct as opposed to research misconduct.

>> Megan Columbus: This a follow-up question to something that came up in Open Mike where we talked about women and sexual harassment. Being a PhD, doing now administration of research, I've witnessed on many occasions moral harassment and abuse of power to trainees in labs, especially successful labs. They believe NIH is aware, but what are the policies maybe in the discussion as this affects the next generation of researchers?

>>Dr. Michael Lauer: Yeah, this is a great question. So is another kind of professional misconduct. Sexual harassment is a kind of professional misconduct, but other kinds of bullying, harassment, hostile work atmosphere, these also constitute a kind of professional misconduct. We have a website, a sexual harassment website, but the key thing is it's not just sexual harassment. It's other types of problems as well. We indicate in our grants policy statement that we expect that all research will be conducted in an environment that is safe and conducive to high quality research. So if you're in that kind of environment that you describe, a toxic environment, it's not safe, and it's not conducive to high quality research. We encourage people to notify us about this, and in fact, it's happened. We have received over 100 notifications over the past year, and we have actually pursued these, and in some cases this has led to significant findings and significant actions on the part of institutional leadership. So please don't hesitate to let us know if you see problems occurring in your lab. We want to know about it and we will follow up up to see whether there's anything that either we or institutional leaders can do.

>> Megan Columbus: Here's a little bit easier question, and for those of you who are submitting questions, I'm picking and choosing a little bit. Those questions that are very institute specific about an institute program, you do a lot better to ask at the institute booth because we have staff who are staffing those booths, rather than ask Mike about the details of that opportunity. So that's why I'm not picking those, just so you know. Is it necessary to ...

>>Dr. Michael Lauer: I wouldn't know.

>> Megan Columbus: Right. Is it necessary to request an ESI extension from NIH to be counted?

>>Dr. Michael Lauer: Yes. If you want to extend your early stage investigator status, you do have to ask. It's not something that would happen automatically. You need to make sure that you're in the system as an early stage investigator, and there are situations where sometimes there's a perfectly honestly mistake. You can work with us to rectify that. And this brings up another very important point, and I think this will be an important ... This is always an important theme of our regional seminar, and it is an important theme of this virtual seminar. You will be penalized for reaching out to our staff. Our staff are here to listen to you and to work with you, and to help you navigate the system. So when in doubt, please reach out to your program official, or your grants management specialist, or your grants management officer, because we really want to help you. And the one thing we don't want to have happen is that there's some kind of horrible misunderstanding, or something doesn't go through, and it's something that potentially could have been avoided with a 5 minute e-mail exchange or 3 minute phone call.

>> Megan Columbus: Yeah, absolutely. The other thing I just want to point out for people who are newer on the spectrum, we do have an "Ask an NIH Training Officer" booth, and I know that that's being staffed by people who knew a whole lot about ESIs and other early career issues. So I suggest that you can also take questions there. We always get this question, Mike. What about the possibility of the captions on modular budget mechanisms being increased, given the decrease in purchasing power since its introduction?

>>Dr. Michael Lauer: Yes, we always do get that question. So the cap at $250,000 dollars. I believe that cap was set in the year 1850, and I keep getting reminded. Actually, I think it was 1992, but I keep reminded that that hasn't changed over a long period of time. $250,000 dollars obviously buys a lot less now than it did way back when, and in fact what we have seen is the community is responding. The proportion of grants that we get that fall under a modular cap has been steadily going down and we anticipate that that trend is going to continue. Okay, so that's all the logical reasons why we should increase the modular cap, and why it's obvious. So now let me tell you why we're not doing that, or why we're hesitant to do that, which is that if we were to increase the modular cap from $250,000 dollars to $300,000 dollars, what we would see is a very large number of grants that will jump from $249,000 dollars to $299,000. That's exactly what one would expect, and the problem is then that translates into fewer grants that we can potentially fund. We want to be able to fund as many grants as we possibly can. All right, now I do know that the trend is continuing to go down, and as the years go by, $250,000 dollars seems increasingly ridiculous, and so we may eventually get to a point where we'll either do one of two things. We will increase the modular cap in way bowing to reality, or we'll eliminate the modular budget all together. I predict the former rather than the latter, but I guess the big question is whether it will happen before I retire, or after.

>> Megan Columbus: Here's another question that kind of follows on to what we were talking about before. They thank you for addressing the issues with young investigators and gender disparity in research. Unfortunately, COVID has widened that disparity, as we well know. Besides extended ESI status, are there any other plans to support young or female investigators?

>>Dr. Michael Lauer: Yeah, we're very worried about this, and we know about data that are out there already suggesting that women investigators, particularly women investigators who have now childcare and educational responsibilities that they previously didn't have, are able to spend less time on research, and this is having a serious effect. There's been quite a bit written about it. There's also been some data suggesting that women are already publishing less than they were in years past. So we're also paying attention to this. We looked at our applications that came in June the 5th, and interestingly enough, we did not see a decline in applications among women. We're now going to look again at October the 5th, which is perhaps a more realistic frame to look at, and we hope to have those data available some time within the next few weeks. I'm now going to make an absolutely shameless plug. We're trying to learn as much as we possibly can about how COVID is affecting our workforce and our institution. So we have put out two surveys. One survey is going to institutional leaders, vice presidents for research, and another survey is going to scientists and scientific staff. We've sent out 250,000, or something like that, requests for people to fill out surveys. If you get a request, or if you have received such a request for a survey, first of all, it is not spam. It is real. It is not a scam. It's actually us, and we do really want to know. We're hoping for a robust response rate. We need to know what's happening with you, and how is COVID affecting you. And armed with this kind of data, which I hope will be data that involves more than 100,000 people ideally, as well as hundreds of institutional leaders, I think we'll be in a much better state to better understand what's going on, and to make wise data driven decisions. We do not want to lose a generation of researchers because of this, and we certainly do not want to lose a generation of outstanding women scientists because of this. We recognize this, and this is a very high priority and concern for us.

>> Megan Columbus: A related question, and I know that we'll know more once we get the results of the survey, and we can strategize some. But are we considering allowing additional no cost extensions to grantees due to the slow down in work caused by the first few months of COVID pandemic? That would be for small business grants, as well as academic.

>>Dr. Michael Lauer: Yeah, so we're not only considering no cost extensions. We are issuing no cost extensions. We've seen some data that the number of no cost extensions has increased dramatically since last March. So as you may know, a first no cost extension is almost automatic. You basically just have to ask for it and you'll get it. A second no cost extension used to be distinctly uncommon and was something that we were quite hesitant about. Now if you ask for it, you're probably going to get it. We're taking a very lenient stance on that. This is also true for training awards. We may not necessarily have more money to give, but we will have more time to give, and so please have a low threshold to talk to your program official about this. We are issuing no cost extensions and anticipate that we're going to be quite liberal with this over the months ahead.

>> Megan Columbus: Another question that I am sure is going to resonate with folks is Richard wanted to comment that administrative burden's never been response in his 26 years as administrator. Snap grants were easier when we filed an annual FFR after the budget period was over, between PubMed and My NCBI and HHS and xTRACT and xTrain, all are difficult for a PI to comprehend, and the burden is falling on administrators who are no longer close to the research.

>>Dr. Michael Lauer: Yeah, that's very fair, and we certainly saw, for example, a number of years ago the National Academy of Sciences put out a report about a regulatory framework for research. This is a government wide problem. It's not an NIH ... It is an NIH problem, but it's not just an NIH problem. It's also a government wide program. So the Office of Science and Technology Policy, or OSTP, has convened a group that's been working for the past couple of years to look at ways in which we can harmonize and reduce administrative burden. Actually within this COVID period, NSF and NIH have been working closely together to harmonize our efforts and our interpretation of various new measures that have been put out. So this a work in progress. We recognize that this is a real problem. We're trying to make things simpler, but it's hard. So in trying to make things simple, it turns out things are rather complicated. Our own grant system is incredibly complicated. We have hundreds of activity codes. An activity code is like R01, R03, U54. One of the things that we're actually working on is ways in which we can greatly simplify our activity code system, and the way we make our funding announcements so that it will be easier for our staff to put together these announcements, and much easier for scientists and administrators to work with them and apply. So we're continuing to work on this.

>> Megan Columbus: So more to come.

>>Dr. Michael Lauer: Yeah, more to come. Yeah.

>> Megan Columbus: So back to the question about threats to the U.S. research enterprise. As those threats increase, would NIH be less encouraging of investigators to collaborate with foreign investigators on an NIH grant proposal?

>>Dr. Michael Lauer: So absolutely not, and I think this is ... I'm really glad you asked this question. This is very important. So remember I gave the example before of the scientist who had a job in a foreign country that he didn't tell his university about, and he was making $500,000 dollars on the side to run this foreign lab that he didn't tell anybody about, and as a result he was submitting false tax reports, false tax forms, that's not collaboration. That's dishonesty. That's an ethical breach. That's what we're concerned about. Collaboration is very different. Collaboration is where scientists here in the United States, and scientists in foreign countries get together with the full knowledge and blessing of funding agencies and their institutions to work on common problems, and to solve common problems. Collaboration is absolutely critical, and international collaboration is absolutely critical to the success of the scientific enterprise. So I think it's important to differentiate between collaboration, which is good, and dishonesty, which is bad. That's trying to keep it simple.

>> Megan Columbus: Okay. Switching back to COVID for a minute. Are COVID applications being reviewed quicker or with higher priority than any other application?

>>Dr. Michael Lauer: So as a general rule, yes. We have of course many different kinds of COVID applications. Many of the applications are what we call supplements. So these are applications which are appended onto existing grants, and those of course we are able to review very quickly because we've already made a funding decision on the parent grant. We also have our special program. So for example, the RADx program, which I mentioned during the planning talk, they had a system in place whereby they would review technologies very quickly, and then decide which technologies would move on to the next phase. So yes, as a general rule, of course COVID is very high priority, and so those projects are being fast tracked as best as we possibly can, while at the same time of course making sure that we engage in appropriate stewardship, and make appropriate decisions.

>> Megan Columbus: And Mike, what about those folks who are required because of COVID to use euthanize a significant number of animals, or resulted in losses in terms of their ability to create preliminary data, and projects that were ongoing? Is there any support or help to rebuild their scientific infrastructure?

>>Dr. Michael Lauer: Yeah, that's a great question. I've seen some data in particular from organizations like AAU, and the Council on Governmental Relations. It's been estimated that losses, like the losses you described, losses in productivity, new expenses that will be required to get an operation back up and running again, are enormous. They're in many billions of dollars. They're probably in the many 10s of billions of dollars for NIH funded researchers. So there are certain things we do have, and there are certain things that we don't. So one is that we do have flexibilities like time extensions. We have a new flexibility for new applications, which is that we will allow people to submit preliminary data after they have submitted the application. We call that post submission materials. It used to be that we would never allow preliminary data to be submitted post submission. We now allow it. You'll have to look at the specifics because it's not true for absolutely everything, but we do now allow it, and we allow it up to 30 days before the study section meeting. We do not have substantial funds available to make up for existing losses. Those monies are simply not there, and these are difficult decisions that are being made by individual institutes, considering funds available, considering their own priorities. I would say that before you spend too much time thinking about this, talk to your program officer to see what is realistically possibly, and what might not be.

>> Megan Columbus: Here's a question that will probably resonate with some. We're finding shorter turn-around times from the issue of an FOA to the due date on large grants, such as UMP grants. Those are cooperative agreements and program project grants. Is there any thought to requiring a certain amount of minimum time to respond to these?

>>Dr. Michael Lauer: Well, as a general rule, the minimum time is 60 days. That's our benchmark, that there has to be at least a period of 60 days between when an announcement gets posted and the first receipt date. Under rare circumstances, we can go to even less than 30 days. We did do that for COVID because of the public health emergency, but you're right, and in particularly if we wanted to bring scientists who are new to the field, or scientists who are new to this particular area of work, we like to have the announcement percolating for a longer period of time. Many of our funding announcements have multiple receipt dates, and this includes our RFAs, our request for applications, where there may be set aside money. And so what this allows is this allows us to look at applications quickly and try to get some applications funded quickly, but it also allows time for other investigators to turn in applications later. This is a difficult balance. On the one hand, we want to have things out on the street as long as we possibly can to attract good science. On the other hand, we also want to get the science funded as quickly as we can too. So those are the tensions that we have to deal with.

>> Megan Columbus: A related COVID question again. Beyond time away from the lab, universities have been devastated by COVID. I think jobs have fallen 70 percent. Is the NIH thinking about ways to avoid penalizing being stuck in post docs longer, or is it taking longer to get an independent faculty job that are outside of our control? This may not directly affect the previously mentioned avenues for extending ESI status, but it is a reality that we're facing.

>>Dr. Michael Lauer: Yeah, this is true, and that is correct. From the career advertising board from AAAS, it's estimated that the number of new STEM faculty positions has fallen by 70 percent. It's a stunning figure, and it is correct, and then on top of that, we are hearing stories about people who are K99 R00s, and they're not able to go to the next stage because a job offer has dried up. So several thoughts here. One is as much as possible, we are offering extensions. Time extensions are relatively easy to offer. Money extensions are a different story because the money may not be there, but at least the time extensions may help people bridge the gap. The other thing is is that we are telling reviewers, please don't penalize applications because of lost productivity related to COVID. We actually had that explicitly stated in our guide notice. We actually explicitly tell our reviewers this, as much as humanly possible, don't say, "Well, there's been no productivity for the past 6 to 9 months." While we understand why, think about other things as you rate a particular proposal.

>> Megan Columbus: Just advising you, there's 5 minutes left.

>>Dr. Michael Lauer: Okay.

>> Megan Columbus: Great. Thank you so much, David. Are there NIH resources other than reaching out to one's program officer for women with our first R01 who are struggling, both due to COVID-19 and other reasons?

>>Dr. Michael Lauer: So that's a great question. So there are a couple of things I would mention. One is there's a lot of information that's available on grants.nih.gov. That's our website. Megan was our master. She and her team helped put this together. So there's a lot there. The other is we have an intramural training program. It's called the Office of Intramural Training and Education, or OITE, and that have put out quite a few programs, virtual programs on mental health, resiliency, coping with stress, and then also dealing with some of the very specific and practical challenges that have been brought forth by COVID, and we made this available to the extramural community. And actually, what's amazing is that thousands of extramural people have tuned in to these various resources. It's been really something to see. So these were programs that were initially designed for our intramural trainees, and our intramural junior scientists, but we're making this available to the extramural world. Please see what's available. There's already stuff that's going on, and stay tuned because I anticipate that is something that will continue over the longer term.

>> Megan Columbus: And those training resources, also that responds to another question about concern about PIs with severe mental health challenges because it's so stressful. That's exactly what some of those training programs. So I think even for more senior investigators, they could be really helpful coping mechanisms.

>>Dr. Michael Lauer: Yes. Absolutely.

>> Megan Columbus: For diversity supplements, Mike, how quickly are they discussed, and if appropriate, awarded? Is that weeks or months after submission, and does the continuing resolution affect the award timing?

>>Dr. Michael Lauer: I'm sorry, the what?

>> Megan Columbus: Does the continuing resolution affect the timing of those awards at all?

>>Dr. Michael Lauer: So it is. Weeks to months is probably a good way of putting it, and it is variable. The continuing resolution is affecting everything, and so I think it's fair to say that particularly during the early part of the year, discretionary funding is going to be fairly minimal, and that's because that's the way it is. We don't know what our budget is going to be, and so the agency is being careful and conservative. At the same time, we recognize that these supplements in particular are targeted toward just those scientists who are most vulnerable, and for whom we want to pay the most amount of attention to.

>> Megan Columbus: So we have some questions about human subjects, and I think those are questions that are best directed to ... We have a human subjects booth, so please go to the booth. We have it well staffed with our human subjects team who can help you figure out the details of whether something is human subjects or not and that kind of thing, and the details of how to fill out clinical trial, parts of applications and those things. One person suggests, what about a third no cost extension due to COVID delays. Have we thought about it?

>>Dr. Michael Lauer: Well, yes, we have thought about it. We're not quite there yet. We're now about eight months into this, but as I'm sure you all know, the national statistics are looking threatening, and so we may need to address that, but we're not there quite yet.

>> Megan Columbus: Great. So the DOE National Libraries have tremendous team science network and structure that surpass those found at universities that could be leveraged by NIH, especially under situations demanding multidisciplinary approaches, and yet suffers greatly from NIH policies limiting FFRDC's applications based on the indirect costs. Is this something NIH is aware of at all, or have been developing ways of managing?

>>Dr. Michael Lauer: So, yes, I have heard about this, and we only have a minute left, so this is a kind of complicated issue. I would say that we do have a strong working relationship with DOE, and have explored a number of opportunities by which we can synergize each other's resources and assets.

>> Megan Columbus: Great. You've been wonderful. Thank you, Mike. For those of you who still have questions, the policy related questions can go to Ask a Policy Officer booth. The compliance questions, Ask a Compliance Officer booth. Lots of resources are out there. Lots of staff are here to help you, and thank you very much. You've been wonderful.

>>Dr. Michael Lauer: Thank you all for coming, and enjoy the rest of the seminar. Be well, be healthy and be safe. Wear your mask when you're outside and wash your hands.

>> Megan Columbus: Thank you.