

NATIONAL INSTITUTES OF HEALTH

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NIH and Core Facilities over the Past 2 Years



January 28, 2011 Virginia Research Resource Consortium

Recent Core Activities from NCRR/NIH

- 1. Released a Request For Information (NOT-RR-09-003) in February 2009.
- 2. Hosted a meeting in Bethesda based on the responses to the RFI in July 2009.







Request for Information/Meeting -Highlights

- Desire for a centralized directory for information about cores
- Strong desire for training resources for core facility directors
- Core management the benefit of centralized vs decentralized institutional management
- Core operations finding resources for centralized operations at the institution level and for personnel who work in core facilities
- NIH Issues



Recovery Act





NCRR and the Recovery Act

- NCRR received three distinct pools of funds under the Recovery Act:
 - \$300 M shared instrumentation
 - \$310 M scientific research
 - \$1B extramural construction
- Funds from each pool were used to support core facilities



Shared Instrumentation Program (SIG) Facts

2005-2009 average	
Receipt date	Annually (Mar)
# of Applications	350
\$ range	100-500K
Total \$ requested	142.8M
# of Awards	150
Average \$ per award	365K
Budget	43M
Success rate	30%

ARRA (FY10 non-ARRA)	
Receipt date	Mar 2009
# of Applications	1,898 [¥]
\$ range	100-500K
Total \$ requested	731M
# of Awards	378 ⁺ (+114)
Average \$ per award	375K
Budget	142M (+42M)
Success rate	26%

+ Includes 84 ARRA FY09 (68 SIG)

¥ Reviewed by more than 50 different CSR study sections



High-End Instrumentation Program (HEI) Facts

2005-2009 average	
Receipt date	Biannually (Sept)
# of Applications	100
\$ range	750K-2M
Total \$ requested	152.3M
# of Awards	14-15*
Average \$ per award	1.62M
Budget	20M
Success rate	30%

* Annually

ARRA (FY10 non-ARRA)	
Receipt date	May 2009
# of Applications	834 [¥]
\$ range	600K-8M
Total \$ requested	1.76B
# of Awards	80 ⁺ (+13)
Average \$ per award	1.98M
Budget	158M <mark>(+22M)</mark>
Success rate	11%

+ Includes 84 ARRA FY09 (16 HEI)

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Administrative Supplements for Core Consolidation

• NOT-RR-10-001

- The goal of the program was "to allow institutions that have multiple cores to consolidate those facilities into a single, more efficient, core."
- Administrative supplements were reviewed by program staff
- 12 ICs participated
- 22 supplements were recommended for funding (\$18M total costs)



Core Consolidation Awards

- U of Ala Birmingham
- Children's Hosp Cincinnati
- MD Anderson Cancer
- Vanderbilt
- Univ of North Carolina
- Albert Einstein
- Univ of Utah
- Wayne State
- Dartmouth
- Univ of Texas HSC, San Antonio
- Oregon Health Sciences University

- Univ of Chicago
- Yale
- Univ of Michigan
- Univ of Rochester
- Univ of Maryland
- Univ of Montana
- UCLA
- NYU School of Med
- UC Davis
- Xavier
- Oklahoma Medical Res Foundation



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Recovery Act Extramural Construction

- NCRR released two RFAs
- One RFA was aimed at renovations for core facilities (G20 activity code)
- Overall,1200 applications were received and those applications requested nearly \$10.6B in funds
- 31 G20 awards were made to support core facilities
- Those awards totaled roughly \$180M.
- A total of 147 awards were made under both RFAs



Costing Issues for Core Facilities

- NOT-OD-10-138 was released on September 23, 2010
- This Notice contains a draft set of FAQs concerning how to deal with OMB Circular A21 and related issues.
- Significant response from the community was received (70+ pages of comments)



Second NIH Cores Meeting

- In order to get additional information about some of the issues raised at the July 2009 meeting, a second meeting was held in November 2010.
- That meeting was also well attended, and a great deal of helpful information was exchanged among participants and between participants and NIH.
- Few new issues were raised which gives us some hope that when all of the current issues have been addressed that the current needs of the cores community will have been addressed.



- Desire for a centralized directory for information about cores – Have made introductions among all interested parties. Will monitor to see if additional incentives/actions are required.
- Strong desire for training resources for core facility directors – NARRC has approved the concept, and we hope to release an RFA incorporating information received at the second meeting.



 Centralized versus decentralized core management – We have concluded from the second meeting that there is no single way that is clearly optimal for institutional core management. We will monitor with interest the results from the core consolidation supplements and from the G20 core renovation awards to see whether the centralized cores really do help institutions manage their core facilities.

We have also concluded that a wide range of software is available to help institutions manage centralized core facilities.



- Core operations finding resources for centralized operations at the institution level and for personnel who work in core facilities – This continues to be an unresolved issue. It would be expensive to address this issue.
- NIH issues
 - Similar cores established by different ICs - If the core consolidation supplements are successful, this might be a model for NIH in the future.



NIH issues

- 2) Cost recovery issues OMB Circular A21 – Many comments were received in response to the draft FAQs. Those comments are being evaluated, and a final document will be released.
- 3) Relationship between the Shared Instrument Grant program and core facilities – While there may be some benefit in requiring SIG instruments to reside in cores, such a requirement really would eliminate flexibility in the program.



NIH issues

4) Progress Reports – The ICs that support core facilities often require similar information to be reported in the annual progress report in different ways. For centralized cores, this is at best inconvenient. - We plan to see if there is any appetite for harmonization of the format for progress reports for core facilities.

