NIH COMPLIANCE

Financial Conflict of Interest (FCoI)

In 2011, The U.S. Department of Health and Human Services (HHS) amended the Public Health Service (PHS) regulations on Responsibility of Applicants for Promoting Objectivity in Research for which PHS Funding is sought. The amendment required all Institutions applying for or receiving NIH funding from a grant or cooperative agreement to be compliant with all of the revised regulatory requirements and to implement institutional procedures associated with those revised guidelines by August 24, 2012. For more information on the NIH’s policy on FCoI, refer to http://grants.nih.gov/grants/policy/coi/

As of August 2012, SFU has established FCoI procedures that fully implements all of the regulatory requirements. SFU is a registered institution in the Federal Demonstration Partnership Site that lists institutions who are in compliance with the PHS FCoI rules and regulations. Refer to http://sites.nationalacademies.org/PGA/fdp/PGA_070354 for the list of compliant institutions. As an NIH Investigator, you are required to be trained on SFU’s FCoI procedures and make annual disclosures of Significant Financial Interests to ORS. Click here for more information http://www.sfu.ca/ors/research-policies-guidelines/NIH-financial-conflict-of-interest.html or contact Elaine Walton.

Public Access Policy

NIH is mandated by its Federal law to, “require all investigators funded by the NIH to submit or have submitted to the National Library of Medicine’s PubMed Central an electronic version of their final peer-reviewed manuscripts upon acceptance for publication to be made publicly available no later than 12 months after the official date of publication.” (Reference: Division G, Title II, Section 218 of PL 110-161 (Consolidated Appropriations Act, 2008)) The Public Access Policy ensures that the public has access to the published results of NIH-funded research. It requires scientists to submit final peer-reviewed journal manuscripts that arise from NIH funds to the digital archive PubMed Central (http://www.ncbi.nlm.nih.gov/pmc/). The Policy requires that these final peer-reviewed manuscripts be accessible to the public on PubMed Central to help advance science and improve human health.

NIH provides educational videos and interactive tools to help investigators comply with this policy. Refer to this link for more information: https://publicaccess.nih.gov/

Fly America Act

Investigators using NIH funds to travel must adhere to the Fly America Act. The Fly America (Act, 49 U.S.C. App. 1517) requires Federal employees and their dependents, consultants, contractors, grantees, and others performing United States Government financed foreign air travel to travel by U.S. flag air carriers. Investigators using NIH funds to travel must comply with the requirement that U.S.-flag air carriers be used to the maximum extent possible when commercial air transportation is the means of travel between the U.S. and a foreign country, or between foreign countries. This requirement shall not be influenced by factors of cost, convenience, or personal travel preference.

August 24, 2015
There are limited exceptions to using a US flag air carrier: (a) If a U.S. flag air carrier offers nonstop or direct service (no aircraft change) from your origin to your destination, you must use the U.S. flag air carrier service unless such use would extend your travel time, including delay at origin, by 24 hours or more. (b) If a U.S. flag air carrier does not offer nonstop or direct service (no aircraft change) between your origin and your destination, you must use a U.S. flag air carrier on every portion of the route where it provides service unless, when compared to using a foreign air carrier, such use would: i) Increase the number of aircraft changes you must make outside of the U.S. by two or more; or ii) Extend your travel time by at least six hours or more; or iii) Require a connecting time of four hours or more at an overseas interchange point. Consult NIH’s website for more information: http://www.fic.nih.gov/grants/pages/foreign-travel.aspx

NIH REPORTING

Progress Reporting

Progress reports are required annually to document grantee accomplishments and compliance with terms of award. They describe scientific progress, identify significant changes, report on personnel, and describe plans for the subsequent budget period or year.

Effective 2013, The Office of Management and Budget (OMB) has mandated that Federal agencies (such as NIH) implement a Federal-wide research performance progress report (RPPR) for submission of required annual or other interim performance reporting on research grant and cooperative agreement awards to standardize recipient reporting on Federally-funded research projects. SFU Investigators are now subject to the requirement to submit progress reports online through ERA Commons using the RPPR function. All NIH Investigators holding Prime awards are expected to submit progress reports online and to seek ORS approval prior to submitting the report to NIH. Paper copies are no longer accepted at NIH.

Online training tools are offered by NIH and can be found via this url: http://grants.nih.gov/grants/rppr/index.htm

Close-out Procedures

When the Grant term ends, NIH requires Investigators to submit a final report, final financial statements, inventions statements and other reports as necessary to determine that all applicable administrative actions and all required work of the award have been completed by the grantees and by NIH. Failure to properly close a grant may have an effect on future funding awarded by NIH. For a list of Q&A concerning NIH Close-out, refer to NIH’s site: http://grants.nih.gov/grants/closeout/faq_grants_closeout.htm

No-cost Extension

The grantee may extend the final budget period of the previously approved project period one time for a period of up to 12 months beyond the original expiration date shown in the Notice of Award if:

• no term of award specifically prohibits the extension,
• no additional funds are required to be obligated by the NIH awarding IC, and
• the project's originally approved scope will not change.

August 24, 2015
No-cost extension requests are made online via eRA Commons through ORS. Contact Elaine Walton for more information.

**Inventions Report**

The Bayh-Dole Act (P.L. 96-517) affords grantees the right to elect title and retain ownership to inventions they develop with funding under an NIH grant (“subject inventions”). In accepting an award, the grantee agrees to comply with applicable NIH policies, the Bayh-Dole Act, and its Government-wide implementing regulations found at Title 37, Code of Federal Regulations (CFR) Part 401. A significant part of the regulations require that the grantee report all subject inventions to the awarding agency (see section 8.4.1.6 Invention Reporting in the NIHGPS), as well as include an acknowledgement of federal support in any U.S. patent applications and issued patents thereon (see 37 CFR 401.14(a)(f)(4) for specific language). NIH participates in the trans-government Interagency Edison system and expects grantees to use this system to comply with Bayh-Dole and related intellectual property reporting requirements. The system allows for grantees to submit reports electronically via the Internet. In addition, the invention must be reported in renewal and non-competing continuation applications. Refer to this link if you require additional Invention reporting information: [https://public.era.nih.gov/iedison](https://public.era.nih.gov/iedison) Invention reporting documents or questions pertaining to renewal and non-competing continuation applications should be directed to the NIH awarding Institute or Center, as specified on the Notice of Award.

All subject inventions also must be included on the Final Invention Statement and Certification (HHS 568), which is required within 90 days following the expiration or termination of the project (see section 8.6.3. Final Invention Statement and Certification in the NIHGPS.) The Final Invention Statement and Certification should be submitted through the eRA Commons using the Closeout feature. Paper submissions may be directed to the NIH Centralized Processing Center (see address under Progress Report in the section B.2 above). A downloadable version of the HHS 568 is at: [http://grants.nih.gov/grants/hhs568.pdf](http://grants.nih.gov/grants/hhs568.pdf).