University of Virginia School of Medicine Best practices for maintaining external research support in response to the leveling of NIH funding and declining pay lines

February 6, 2006

Preamble

We are all aware that we are in the midst of a significant downturn in funding of individual NIH grant applications. Each of us, individual faculty members, the Division Chiefs, Departmental Chairs, Center Directors, and the Dean will be challenged during this period which may extend for multiple years. Together, we can hope to sustain and even expand the excellent programs in basic and clinical research that have been developed here at the University of Virginia. However, this will take more effort, planning, and cooperation than has been required in the past. Outlined below are some steps for discussion and consideration by faculty, divisional, departmental, center leadership and the SOM and University of Virginia administration recommended by the Research Advisory Committee to the Dean, and approved by the Dean.

Best practices for individual faculty

- 1) Review your current research funding portfolio. Consider submitting each renewal application at least 1 or 2 cycles early to minimize or avoid funding lapses.
- 2) If a grant is nearing the end of a 4- or 5-year funding cycle and productivity has been modest, but you have good unpublished preliminary data for a grant application, consider whether renewal or new grant is a better option. Before doing this, seek advice from other SOM faculty, individuals who participate on study sections, and your program officer. It is not critical to lock into the single-project/renewal cycle.
- 3) Complete a good draft of the specific aims of an application at least 2 3 months prior to the submission deadline. (Preferably, this should be done even earlier, so you are not locked into your aims by the time you receive feedback.) Have it reviewed by at least 2 faculty who can offer critical commentary. Then have a completed application or at least a very strong draft completed one month prior to the submission deadline, for review by other faculty.
- 4) Consider identifying at least 2 faculty colleagues at UVA or elsewhere whose expertise might bolster the strength of your application by their inclusion as consultants or coinvestigators, and work through this process. This will require advancing planning. Be particularly mindful of potential opportunities for collaborating with other faculty where shared preliminary data may help with either your or their grant application. Your Chair/Director and senior faculty should be helpful in identifying such collaborations.
- 5) If you work in an area where some portion of your grant can be "shopped" to a voluntary health agency (e.g. American Heart, Cancer etc.), by all means do so. Although such agencies pay little or no F&A costs, some funding is better than none. Please note that NIH awards are more favorably regarded for promotion and tenure decisions.
- 6) Consider approaching the HS Development Office, which may be able to match you with potential donors to support your research.

7) Junior faculty should apply for the many opportunities available to support early career development (HHMI, American Cancer Society, NIH K–awards and Pathway to Independent Development, UVA FEST). Refer to the Office for Research Web site for additional information on these programs.

Best practices for Division Chiefs, Department Chairs, and Center Directors

- 1) Assign research mentors for new junior faculty. This should include all assistant professors and anyone planning on submitting a first R01 research award.
- 2) Promote the idea that faculty have their grants reviewed prior to submission. This might take the form of a mini-seminar where faculty can present the aims and preliminary data for a grant in development to faculty colleagues for review and comment, or a standing departmental review committee, or simply having other faculty knowledgeable in the area review and critique. Note: the UVA interim funding program requests a description by the Chair of the pre-review that a project has received, as a component of the funding decision.
- 3) Encourage faculty (particularly younger faculty) to seek out consultants/collaborators that might strengthen their research program and grant applications.
- 4) Be candid in discussions with individual faculty regarding your expectations for their ability to generate their own grant support or to support the applications of other faculty by collaborative research.
- 5) For faculty with the potential to expand their grant programs, provide protected time for the grant preparation, review, and submission process.

Best practices for the School of Medicine/University Administration

- 1) Provide interim funding for competing renewals that score well with NIH/NSF review but miss the funding line. (Refer to separate RAC recommendations on interim funding.)
- 2) Encourage the HS Development Office to create a list of targeted research areas that most likely fit well with the donor community. Energize faculty and development officers to work closely on these. Encourage HSDO to come up with an annual amount of nontargeted funds that might be used for interim funding of grants.
- 3) Articulate clearly that the effort to maintain and expand ongoing basic and clinical research is a primary priority of the School of Medicine. Emphasize that sustaining the productivity and growth of highly promising junior investigators is of paramount importance, since they are the future of the institution. They must be convinced that their success is of the highest priority. At the same time, work flexibly with senior basic and clinical scientists to assist with the support of their research programs when they are faced with shortfalls in support. The Dean should pro-actively communicate by letter to individual faculty his awareness of the current NIH funding issues and his ongoing efforts to work with faculty, University of Virginia administration and HS Development to support the faculty research efforts.

4) Develop a transparent approach for how to deal with financial shortfalls that affect individual faculty, divisions, and departments and where it sits in priority vis-à-vis other funding obligations of the School of Medicine.