



Boston Medical Center  
**HEALTH SYSTEM**

**October 11<sup>th</sup> Research Admin Meeting**



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## **Agenda**

9:00am – 10:00am

Welcome

Research Operations updates

10:00am – 10:30am

Research Policy Socialization



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**Welcome!**



CENTER  
**BOSTON  
MEDICAL**

# Research Operations Updates

Oct 11, 2022

# FY22: Reflection

## Recruit! Recruit! Recruit!

- ❖ Focused on filling vacancies across the team
- ❖ Develop and retain talent
- ❖ Invest in workforce
- ❖ Kicked off onboarding comprehensive plan
  - ❖ Started pilot with new hires

# FY22: Reflection

## Discovery! Discovery! Discovery!

- ❖ Focused on learning BMC's culture, practice, and research infrastructure capabilities
- ❖ Kicked off Website re-design project
  - ❖ Expected launch, Dec 2022
- ❖ Standardized document repository

# FY22: Reflection

## Challenges and Opportunities

- ❖ Systems Integration
- ❖ Policies and Procedures
- ❖ Training and Education
- ❖ Workflow Silos
- ❖ Backlog Management
- ❖ Compromised Service Levels

# FY22: Reflection

## Where are we Heading?

- ❖ Systems Optimization
- ❖ Process Improvement
- ❖ Eliminate manual workflows that contribute to silos and backlogs
- ❖ Data governance
- ❖ Research Metrics Dashboard
- ❖ Optimize Service Levels
- ❖ Communication
- ❖ Targeted Training and Education
- ❖ Establish Best Practice
- ❖ Strengthen Infrastructure



# Coming up – Dec Meeting

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Overview of Research Portfolio



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**Research Operations**

## **Sponsored Programs Administration**

Mahara R. Pinheiro, Director, Sponsored Programs Administration  
Vanessa Rubin, Team Lead, Sponsored Programs Administration

# Sponsored Programs Administration Updates

## **Staffing Updates**

- Vanessa Rubin, Team Lead, Sponsored Programs Administration
- Maria Chitsaz, Senior Grants and Contracts Administration
- Sarah Pearce, Grants and Contracts Administration

## ***Revised Subcontracts Workflow***

- SPA will be releasing information regarding the revised subcontract workflow in October 2022.
- SPA will be offering a drop-in session in October 2022.

## **Data Management and Sharing Policy**

- SPA will be offering drop-in sessions in November and December of 2022.

# NIH Policy for Data Management and Sharing (DMS Policy) – FORMS H

- **Submission** of Data Management & Sharing Plan with all applications for funding beginning January 25, 2023.
- [NOT-OD-22-189](#)
- **Compliance** with the Data Management and Sharing Plan approved by the funding NIH Institute, Center, or Office.
- **DMS Policy:** Applies to all research, funded or conducted in whole or in part by NIH, that results in the generation of “**scientific data**”
- “**Scientific data**” is defined as:
  - *“The recorded factual material commonly accepted in the scientific community as of sufficient quality to validate and replicate research findings, regardless of whether the data are used to support scholarly publications.”*

# Activities Subject to the DMS Policy

## APPLIES TO...

**All research generating scientific data**, including but not limited to:

- Research Projects
- Certain Career Development Awards (Ks)
- Small Business SBIR/STTR
- Research Centers

## DOES NOT APPLY TO...

**Research projects not generating scientific data or non-research projects**, including but **not** limited to:

- Training (Ts)
- Fellowships (Fs)
- Certain non-research Career Awards (e.g., KM1)
- Construction (C06)
- Conference Grants (R13)
- Resources (Gs)
- Research-Related Infrastructure Programs (e.g., S06)

# Format of a DMS Plan

- ✓ Plans should be no more than **2 pages** in length.
- ✓ Optional format page will be available.
- ✓ A [preview of this format](#) page is available now, with a final fillable format version available by Fall 2022.

**DATA MANAGEMENT AND SHARING PLAN**

If any of the proposed research in the application involves the generation of scientific data, this application is subject to the NIH Policy for Data Management and Sharing and requires submission of a Data Management and Sharing Plan. If the proposed research in the application will generate large-scale genomic data, the Genomic Data Sharing Policy also applies and should be addressed in this Plan. Refer to the detailed instructions in the application guide for developing this plan as well as to additional guidance on [sharing.nih.gov](https://www.nih.gov/sharing). The Plan is recommended not to exceed two pages. Text in italics should be deleted.

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**Element 1: Data Type**

**A. Types and amount of scientific data expected to be generated in the project:**  
*Summarize the types and estimated amount of scientific data expected to be generated in the project.*

**B. Scientific data that will be preserved and shared, and the rationale for doing so:**  
*Describe which scientific data from the project will be preserved and shared and provide the rationale for this decision.*

**C. Metadata, other relevant data, and associated documentation:**  
*Briefly list the metadata, other relevant data, and any associated documentation (e.g., study protocols and data collection instruments) that will be made accessible to facilitate interpretation of the scientific data.*

**Element 2: Related Tools, Software and/or Code:**  
*State whether specialized tools, software, and/or code are needed to access or manipulate shared scientific data, and if so, provide the name(s) of the needed tool(s) and software and specify how they*

DMS Plan format page will be added to list of [Format Pages](#) and incorporated into FORMS-H application instructions by Fall 2022

# DMS Plan Submission

- A new “**Other Plan(s)**” field will be added to the PHS 398 form to collect a single PDF attachment.
- Data Sharing Plans and Genomic Data Sharing Plans (GDS) will no longer be submitted to the “Resource Sharing Plan(s)” field.

Research Plan Section			
5. Vertebrate Animals	<input type="text"/>	<input type="button" value="Add Attachment"/>	<input type="button" value="Delete Attachment"/> <input type="button" value="View Attachment"/>
6. Select Agent Research	<input type="text"/>	<input type="button" value="Add Attachment"/>	<input type="button" value="Delete Attachment"/> <input type="button" value="View Attachment"/>
7. Multiple PD/PI Leadership Plan	<input type="text"/>	<input type="button" value="Add Attachment"/>	<input type="button" value="Delete Attachment"/> <input type="button" value="View Attachment"/>
8. Consortium/Contractual Arrangements	<input type="text"/>	<input type="button" value="Add Attachment"/>	<input type="button" value="Delete Attachment"/> <input type="button" value="View Attachment"/>
9. Letters of Support	<input type="text"/>	<input type="button" value="Add Attachment"/>	<input type="button" value="Delete Attachment"/> <input type="button" value="View Attachment"/>
10. Resource Sharing Plan(s)	<input type="text"/>	<input type="button" value="Add Attachment"/>	<input type="button" value="Delete Attachment"/> <input type="button" value="View Attachment"/>
<b>11. Other Plan(s)</b>	<input type="text"/>	<input type="button" value="Add Attachment"/>	<input type="button" value="Delete Attachment"/> <input type="button" value="View Attachment"/>
12. Authentication of Key Biological and/or Chemical Resources	<input type="text"/>	<input type="button" value="Add Attachment"/>	<input type="button" value="Delete Attachment"/> <input type="button" value="View Attachment"/>

# Submitting DMS Budgets

- Direct costs to support the activities proposed in the DMS Plan must be indicated as “**Data Management and Sharing Costs**”
  - **R&R Budget Form:** line item in section F. Other Direct Costs.
  - Brief summary of DMS Plan and description of DMS costs must be included within the budget justification attachment.

F. Other Direct Costs		Funds Requested (\$)
1.	Materials and Supplies	
2.	Publication Costs	
3.	Consultant Services	
4.	ADP/Computer Services	
5.	Subawards/Consortium/Contractual Costs	
6.	Equipment or Facility Rental/User Fees	
7.	Alterations and Renovations	
8.		
9.	Data Management and Sharing Costs	
10.		

- **PHS 398 Modular Budget Form:** within Additional Narrative Justification

2. Budget Justifications			
Personnel Justification	<input type="text"/>	Add Attachment	Delete Attachment View Attachment
Consortium Justification	<input type="text"/>	Add Attachment	Delete Attachment View Attachment
Additional Narrative Justification	<input type="text"/>	Add Attachment	Delete Attachment View Attachment

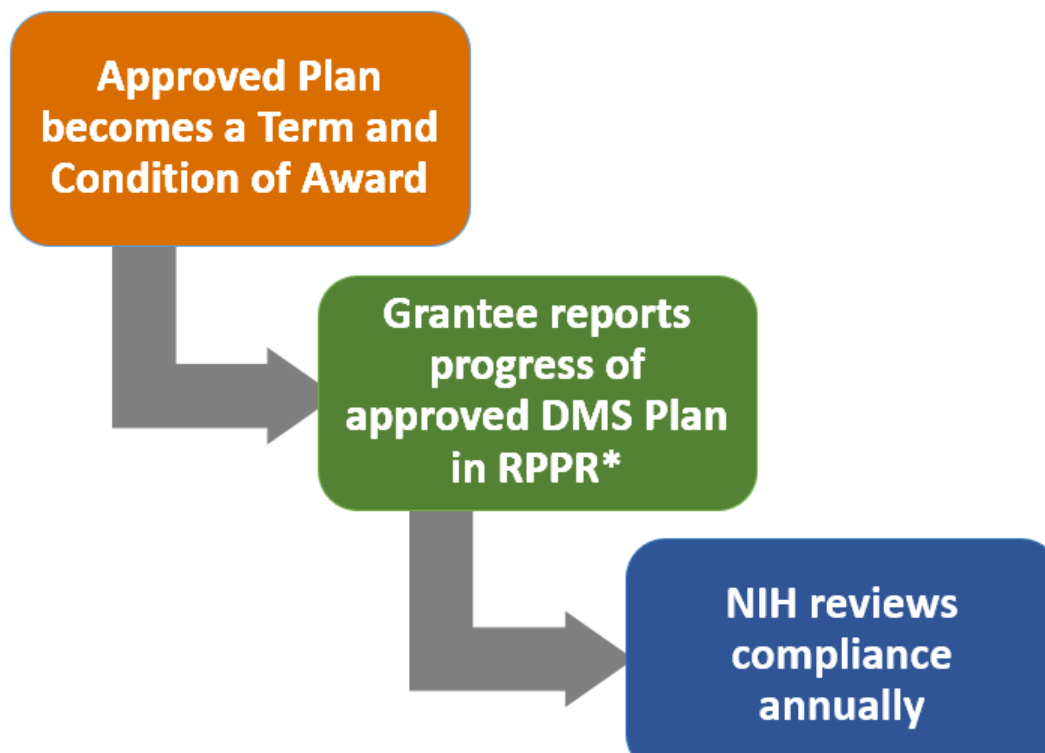


# DMS Plan Assessment

- NIH Institute, Center, or Office determine if **DMS Plan** is acceptable or unacceptable.
- Peer reviewers **ONLY** consider if **budget** is reasonable.
- DMS Plan must be approved prior to award.
- If additional details are needed, it may be necessary to communicate with NIH staff to resolve issues with DMS Plan.
  - Will occur through standard Just-In-Time (JIT) process.
- **When should I share my data?**
  - No later than the time of a **publication of findings** in a peer-reviewed journal OR at the **end of the award**, whichever comes first.



# Monitoring Compliance



**Failure to comply....** may result in an enforcement action, including additional special terms and conditions or termination of award, and may affect future funding decisions.

# Resources

- [NIH Scientific Data Sharing](#)
- **Email Box:** [Sharing@nih.gov](mailto:Sharing@nih.gov)
- [FAQs](#)
- [NOT-OD-22-189](#)
- [Budgeting for Data Management & Sharing](#)
- [Writing a Data Management & Sharing Plan | Data Sharing \(nih.gov\)](#)
- [Which Policies Apply to My Research? | Data Sharing \(nih.gov\)](#)
- [NIH Institute and Center Data Sharing Policies | Data Sharing](#)
- [Repositories for Sharing Scientific Data | Data Sharing \(nih.gov\)](#)
- **FAQ on Noncompliance:** [Frequently Asked Questions \(FAQs\) | Data Sharing \(nih.gov\)](#)



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## **Clinical Trial Office**

**Johanna Chesley & Michael Porreca**

# CTO Updates

- Introducing Cissy Ayebi, Research Operations Intern!
- Preparing CTO FY22 metrics – Dec 13<sup>th</sup> meeting
- VelosCT updates:
  - Epic interface issues and misbilling of research participant charges
  - VelosCT upgrade Oct 17<sup>th</sup> (tentative date)
    - Interface stability
    - Ability to use latest browsers
    - Enhanced user interface
  - No workflow changes with upgrade



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**Clinical Research Network**  
Ryan Schroeder

# CRN Updates

- Introducing Olanike (Nike “Knee-Kay”) Asupoto, Clinical Research Coordinator II
- Announcements/Updates:
  - Institutional Clinical Research SOPs Approved on 10/1
    - Next Steps:
      - Socializing with Departments
      - Training Infrastructure
      - BMC/BU Hosting of SOPs
  - Interpreter Research Training Series Launching 10/12



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**Research Operations**

**Update: Policy, Education, and Communications**  
**Kaye Mottola**

Bi-monthly Meeting  
11 October 2022



# Policy, education, communications intersect in multiple initiatives

## *Eg, policy programming includes training and communications*

- **Socialize** new and updated policy drafts, pre- and post-submission to committee
  - FY2022: benchmarking; draft updates to SMEs – **1<sup>st</sup> communication**
  - Q1 FY2023 : add one general departmental reviewer per draft policy – **2<sup>nd</sup> communication**
    - Track to ensure: all departments are invited to participate as policy drafts are prepared
  - Bi-monthly policy spotlights: **RO-departmental communication**
  - Under discussion: **communication methods** to share new and updated policies between **bi-monthlies**
  - **Website re-launch, Q1**: updated library of active policies
- Goal, FY 2023: provide multiple **job aids/trainings** for understanding policy
  - Q1 pilot: launch **Research Operations General Education (ROGE) trainings** on targeted policies
  - Future: assign **policy modules through Workday**

# Policy, education, communications intersect in multiple initiatives

## *Eg, onboarding initiative, conceived in 2021, evolves*

- Originally conceived as a **general research education curriculum** for NE
  - Common training for all roles: **~35% policy reviews**
  - Subsequent specialty trainings by role
- Q4 FY2022: onboarding **plan expands** and RO pilot commences:
  - Tracker adds business/tech needs, job-specific structures, **HM-NE reviews** to training curriculum
  - Common training for all roles (ROGE); job-specific by HM for individual NE
  - New RO employees (11) and HMs (4) test-drive draft template, provide feedback
  - RO directors confer on draft design for consensus improvements
- Q1 FY2023: **pilot adds two DRA NEs**: a grants administrator and research director
  - Draft template shared – to be customized as needed
  - NEs join orientation and basic classes
  - Department focus spotlights needed specifics: eg, robust InfoEd, Infor trainings

# Onboarding plan aims at community building and job training

## ***Multifold goals include:***

1. Tear down silos, strengthen research **community and communications**
  - Acknowledges that job performance needs more than job-specifics
  - Builds **collegial relations** among and between teams and departments
  - Creates **shared general knowledge**: background, context, big-picture RA awareness
2. Enlighten RO and departments on crucial job-specific needs
  - Fosters collaboration and mutual responsibility to develop **role-specific training**
  - Identifies **training gaps** and works to fill them
3. Provide a multi-purpose onboarding template for department customization
  - Maps a multitude of tasks from pre-start through 13 weeks
  - Documents onboarding task completion
  - Suggests a model for ongoing **collaborative manager-employee job review**
4. Introduce salient **policies** to new employees
5. Suggest **training**, provide drafts for **ongoing employees**

# Policy, education, communications intersections, continued

## *Eg, website redesign*

- Website itself is a primary **communications tool**
  - RO teams rework content for **user ease** and **relevance**
  - Outdated materials to be replaced; new material added
    - Focus on **educating** and communicating
  - **Multiple routes** to individual items
- Team pages to provide team-specific, community-wide content
  - Primary content to **inform** and direct
  - **User-based** features
  - Prominent links to **policy, trainings, forms, resources** (eg, systems, SOPs)
- Separate systems page directs users to **electronic tools** for quick access
- **Policy, education, communications** page houses multiple **libraries**
  - Access directly or through team pages
  - Content available through **multiple means** (eg, RO team ownership, user role, general look-up)



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# **Research Technology Program (RTP) Updates**

**Caitlin Gaudreau**

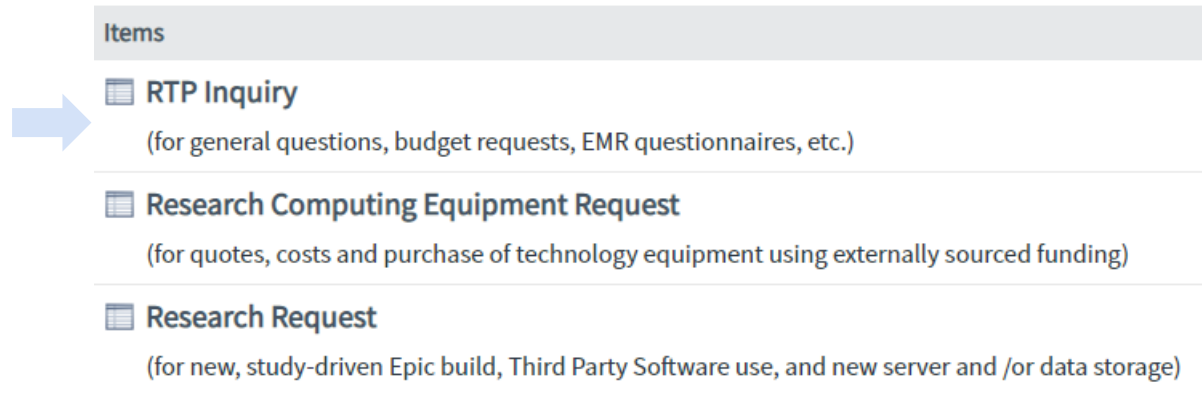
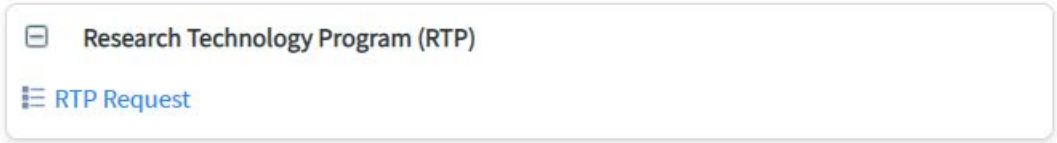
# Research Technology Program (RTP) Updates

## ○ Information Security Review Update:

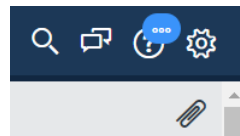
- We are simplifying what is requested of vendors in order for our Information Security team to perform an audit of new software
- In lieu of the BMCHS Questionnaire, a vendor can provide a SOC 2 certification or a Third Party Assessment report to serve as their initial review
- The BMCHS Questionnaire is still in use; however, in some circumstances it may be too in-depth (20+ pages)
- If there are additional questions we may move forward with the questionnaire or meetings

# Research Technology Program (RTP) Updates

RTP has an improved presence in the [BMC Service Catalog](#):



- 'RTP Inquiry' can be used in lieu of sending an E-Mail
  - Ensures RTP team is aware of the request
  - For EMR questionnaires, the document can be attached to the request to help facilitate the review



# Research Technology Program (RTP) Updates

RTP has an improved presence in the [BMC Service Catalog](#):

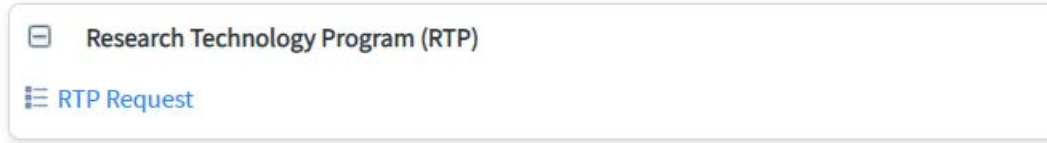
The screenshot shows a navigation menu for the Research Technology Program (RTP). At the top, there is a box containing 'Research Technology Program (RTP)' and a sub-item 'RTP Request'. Below this, a list of items is shown under the heading 'Items'. A blue arrow points to the first item, 'RTP Inquiry', which includes a description: '(for general questions, budget requests, EMR questionnaires, etc.)'. The other items are 'Research Computing Equipment Request' (for quotes, costs and purchase of technology equipment using externally sourced funding) and 'Research Request' (for new, study-driven Epic build, Third Party Software use, and new server and /or data storage).



- For all grant proposal and budget estimates, including costs for technology equipment and consultant planning, please use the “RTP Inquiry” form.
- RTP provides costs via REQ and does not publish a price list to help ensure accuracy
- Friendly reminder: please request as early as possible to enable a timely review
  - Collaboration with internal and external teams is sometimes required



# Research Technology Program (RTP) Updates

RTP has an improved presence in the [BMC Service Catalog](#):



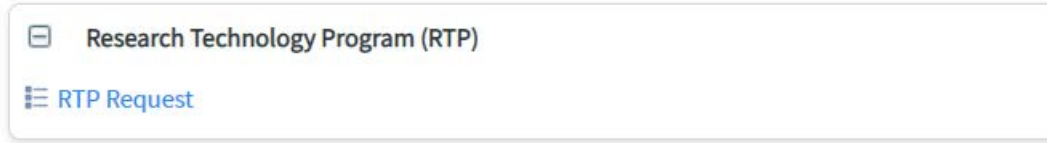
Items	
	<b>RTP Inquiry</b> (for general questions, budget requests, EMR questionnaires, etc.)
	<b>Research Computing Equipment Request</b> (for quotes, costs and purchase of technology equipment using externally sourced funding)
	<b>Research Request</b> (for new, study-driven Epic build, Third Party Software use, and new server and /or data storage)


- Research Computing Equipment Request is used to purchase gear with externally sourced funding (grants, etc.)
  - Laptops, Desktops, Monitors, Tablets and Software\*
- This form should only be used for initiating purchases

\*Note: Software purchases are subject to ITS, Information Security and Compliance review prior to being executed

# Research Technology Program (RTP) Updates

RTP has an improved presence in the [BMC Service Catalog](#):



Items
<b>RTP Inquiry</b> (for general questions, budget requests, EMR questionnaires, etc.)
<b>Research Computing Equipment Request</b> (for quotes, costs and purchase of technology equipment using externally sourced funding)
 <b>Research Request</b> (for new, study-driven Epic build, Third Party Software use, and new server and /or data storage)

- 'Research Request' initiates the RTP review of a new study or project
  - Includes questions around IRB, Funding, IT Involvement, and Study Aims
  - Complete all required fields and provide as much information as possible



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## **Research Counsel: Alternative IRB Oversight**

**Patricia Bass, J.D., M.P.H.**

**Associate General Counsel & Senior Research Counsel**

- Boston University Medical Campus/Boston Medical Center Institutional Review Board

All research or clinical investigations involving human subjects in which faculty, staff, or students acting as employees or agents of Boston Medical Center or Boston University Medical Campus are subject to the authority of the HRPP, regardless of funding source or other regulatory requirements.

- The Human Research Protection Program (HRPP) is a shared service activity between BMC and BU

# Drives Toward Efficiency

- Originally IRB review one a single institution activity
- NIH Policy on the Use of a Single Institutional Review Board for Multi-Site Research (2016)
  - all sites participating in multi-site studies involving non-exempt human subjects research funded by the National Institutes of Health (NIH) will use a single Institutional Review Board (sIRB)
- Industry use of commercial IRBs for multi-site studies
- Avoidance of delays caused by multiple reviews of the same study

# How Does Local IRB Cede Authority?

- Ceding can work either way
  - BUMC/BMC ⇔ Outside IRB
- Core of Ceding is the IRB Authorization Agreement (IAA)
  - For BMC studies agreement is between BMC and outside institution
  - Single study or multiple studies
- OHRA Director or IRB Director determine when to cede and when to accept oversight over another institution's research
  - Factors: risk level, on vs off campus, quality of proposed IRB of record, AAHRPP accreditation, industry-sponsored IND/IDE study

- Streamlined, Multisite, Accelerated Resources for Trials (SMART IRB) platform
- A fixed set of terms and conditions which Institution adopts by signing the Joinder agreement
- Refer all cede review matters to the IRB for drafting and handling
  - Reviewed by OGC

## WIRB Copernicus Group

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- Commercial IRB
- Institutional Agreement





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## **Research Policy Socialization**

**Kaye Mottola**

**Tyler Flack**



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**Research Operations**

## **Allowable Costs of Sponsored Programs**

*Policy Update 2022*

# Allowable Costs policy

## Trifold purpose

- To comply with federal regulations
- To provide a summary of cost accounting requirements of sponsored programs
- To enumerate common unallowable costs

## Policy Statement\*

- Specifies the federal cost principles for hospitals
- Points out:
  - A cost of a federal program cannot included on any other federal program
  - Sponsor approval of a proposal budget including unallowable costs does not make costs allowable
  - Necessary conditions treating admin effort as direct costs
- Lists common unallowable costs and indicates that the list is not exhaustive

# Allowable Costs policy

## Length shortened from 6-3 pages

- To render language natural and concise and avoid repetition
- To facilitate understanding of essential requirements
- A training is being prepared

## Clarification of concepts, roles and responsibilities, and unallowable costs

- Reconfiguration of cost principles and definitions simplify concepts
- Definition additions and references explicate crucial distinctions
- Addition of “overbase payments” and bonuses on commonly unallowable list
- Approval requirements are explicitly noted for
  - Non-federal cost transfers from one program to another
  - Allocation of administrative/clerical effort as direct cost
  - Any exception to the policy
- *PI/PDs must review posted expenses quarterly at a minimum*
- *Department administrators must review posted expenses monthly*

# Appendix: cost principles and common unallowable costs

## To be assigned to a sponsored program, a cost must be:

- Reasonable for program performance
- Allocable in relation to program performance
- Consistent with other cost-related BMC policies
- Treated consistently as direct or indirect across programs, whenever alike type and circumstance
- Incurred during the approved budget period (exception: pre-award spending **with prior approval**). Large amounts posting at the end or after a project end date will be questioned by Res Ops and Auditors
- Documented adequately, and
- Otherwise determined according to generally accepted accounting principles

## In addition:

- A federal program cost may not be charged to or used for cost sharing or matching reqs of any other federal program
- A sponsor-approved proposal that includes non-allowable cost is *not* an indication of allowability

## Non-allowable costs include but are not limited to:

- |             |  |                                     |
|-------------|--|-------------------------------------|
| – alcohol   | – business meals (unless a travel expense) | – first-class airfare               |
| – bad debts | – fundraising, donations, contributions    | – entertainment, flowers, gifts     |
| – lobbying  | – bonuses or “overbase” payments           | – parking tickets, fines, penalties |

# Resources

BMC policy:

<https://bostonmedicalcenter.policytech.com/dotNet/documents/?docid=3205>

Federal requirements

- 45 CFR 75 Appendix IX, *Principles for Determining Costs Applicable to Research and Development under Grants and Contracts with Hospitals*
- NIH Grants Policy Statement



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**Research Operations**

**Sponsored Program Equipment  
Management**

*Policy Update 2022*

# SP Equipment Management policy

## Twofold purpose

- To comply with federal regulations
- To facilitate inventory control

## Policy Statement\*

- Provides list of required documentation for equipment record
- Specifies additional requirements for changes, maintenance, safeguard
- Includes the technical meanings of “movement,” “transfer,” “sale,” or “disposal”  
— and associated requirements
- Requires Research Operations approval before purchase

*\*See appendix, slide 4, for details*



# SP Equipment Management policy

## Length shortened from 4.5 to 2 pages

- To avoid repetition and facilitate understanding of essential requirements
- A standard operating procedure (SOP) is being prepared
- The associated form has been removed and is being prepared as a web form

## Affected equipment and associated requirements and roles are clarified

- All equipment, with a life expectancy of  $\geq 1$  year and costing  $\geq \$5K$ , that is/was purchased with *sponsored-program* funds
  - (Service programs are held to the same UG requirements as research)
- PI/PDs must provide accurate, timely records to Research Finance (RF)
  - (Administrators may act as designees, but PI/PD is responsible)
- RF maintains a physical inventory and reconcile it with PI/PD records

## Outdated references were replaced by current section covering equipment

# Appendix: summary of PI/PD requirements

## Initial requirement: documentation to be provided to RF

- Equipment description
- Serial or other ID number
- Source of funding
- Award ID number
- Title holder
- Acquisition date
- Cost
- Location
- Percentage of sponsor participation in award costs, as applicable
- All additional funder requirements specified (regarding the equipment)
- Disposal date and description, sale price, and approver, as applicable

## Subsequent requirements

- Documentation updates, as applicable:  $\leq 2$  years
- Adequate upkeep maintenance and controls for prevention of loss, damage, theft
- Loss, damage, or theft must be investigated
- Research Finance **authorization prior** to movement, transfer, sale, disposal, any other sponsor requirements
  - See policy for related details, definitions, and limitations

# Resources

BMC policy:

<https://bostonmedicalcenter.policytech.com/dotNet/documents/?docid=3269>

Federal requirements: 2 CFR 200.313



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## **Open Discussion and Questions**

Thank-you for attending today's meeting!