

60-day FRN Public Comment Log

Title:

(Federal Register Notice Vol 89 No.100, Pgs.45000-45001)

Date of Comment:	July 19, 2024
Date Received:	July 30, 2024
Category: (Simple or Multiple Comments)	Simple
Comment Type: (Fax, Letter, Email, Post Card, Other)	Email
Author's First Name:	Krystal
Author's Last Name:	Toups
Author's Affiliation: (if available)	Council on Governmental Relations (COGR)
Sponsoring Organization: (if available)	
Comment received: (if lengthy please provide screenshot below)	<p>C.5.c Data Management and Sharing</p> <ol style="list-style-type: none">1. We recommend the following actions to clarify. Delete “Applicable/Not Applicable” and add two radio buttons. The first radio button indicates the applicability of the 2023 NIH Final DMS Policy for the award. We suggest the text: “Completion of this section is not required because either this award is not subject to the 2023 NIH Final Policy on Data Management and Sharing or a Data Management and Sharing Plan was not required for this mechanism.” The second radio button to add is to indicate if there is anything to report. We suggest adding the text “Nothing to Report,” which aligns with other response options in the RPPR to indicate there is nothing significant to report during the reporting period.2. We recommend deleting this question as it is duplicative. However, if the intent of this question is an overall status of DMS activities, we suggest the question be re-worded as follows: “Describe any challenges or delays in implementing the approved DMS Plan encountered during the reporting period and actions or plans to resolve them.” <p>DMSP Information Dialogue Box: Data Management and Sharing Plan Information.</p> <ol style="list-style-type: none">3. Given that some projects may have multiple data types, we recommend using a drop-down box with categorical

	<p>selections consistent with those utilized in DMS Plan templates instead of a text box to facilitate ease of completion. This approach will also aid NIH’s analysis of the data collected. Additionally, because an appropriate repository may not exist for all data types, we recommend revising the “Repository” header to read “Repository/Database”. Also, given that a Persistent Unique Identifier is not specifically required under the policy and may not be feasible in all cases, we recommend revising the “Unique Identifiers/Digital Object Identifier (DOI)” header to read “Persistent Unique Identifier or other standard indexing tool used.” Finally, if this information needs to be populated annually, we suggest it automatically roll over to the next progress report to streamline the process.</p> <p>4. While we focused our response on section C.5.c, Data Management and Sharing, we noted references to data sharing in the Resource Sharing section (C.5.b). We recommend removing this reference and providing clear instructions that information related to the 2023 NIH Final DMS Policy should be addressed in section C.5.c.</p>
<p>Date responded to comment:</p>	<p>August 7, 2024</p>
<p>Program response provided: (if lengthy please provide screenshot below)</p>	<ol style="list-style-type: none"> 1. Thank you for the comment. The proposed instructions for this question specify that recipients will not be required to manually respond. The eRA RPPR module will automatically populate the value based on how the application is coded in the system. If the grant is coded as ‘Not Applicable’ in the system, recipients will not be required to respond to the sub questions relevant for awards subject to the DMS Policy. 2. Thank you for the comment. NIH does not consider this question to be duplicative. The questions are designed to distinctly first capture 1) whether data has been generated and 2) whether the data has been shared during the reporting period. Subsequently if data has been generated and not shared, NIH will then want to capture the status of data sharing activities in consideration of the approved DMS plan. NIH thanks the commenter for the recommendation and will consider the recommended wording for future changes, if appropriate. 3. NIH thanks the commenter for the feedback and will consider the recommendations. 4. RPPR Section C.5.b remains unchanged as NIH has recipients that are subject to the 2003 NIH Data Sharing Policy. NIH thanks the commenter for the

	recommendation and will consider the recommended wording for future changes, if appropriate.
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