

Research Administration Advisory Council (RAAC)

Committee-at-Large

Tuesday, October 18, 2022, 3:00 – 4:30 pm
Zoom Meeting
MINUTES

Attendees:

Andrea Anderson – ORSP	Maryclaire Ellis – Ford School	Angie Skellie – OVPR
Kristie Beckon – Sponsored Programs	Stephanie Hensel – Education	Danielle Smith – LSI
Beth Brant – Medical School	Teresa Herrick – SEAS	Maggie Swift – Corp. Res. Alliances
Linda Chadwick – ORSP	Karen Kirchner – Nursing	Debbie Talley – Sponsored Programs
Constance Colthorp – ORSP	Patrick Laguna – Dentistry	Michelle Terrell – SMTD
Cindy Dames – ORSP	Jennifer Linzmeier – Dentistry	Anne Thomson – LSA
Jackie Dani – U-M Dearborn	Charlie Mattison – ISR	Pat Turnbull – U-M Dearborn
Lori Deromedi – OVPR	Jan Mitchell – Pharmacy	Bryan VanSickle – Sponsored Programs
Chris DeVries – RAAC	Becky O'Brien – Information	Nick Wigginton – OVPR
Kathy Devereux – OVPR	Carolyn Pappas – ITS	Rick Wintergerst – Engineering
Joanne DeVore – U-M Flint	Jane Sierra – Medical School	

The meeting started at 3:00 p.m.

1. **Welcome and Membership Update** (*Debbie Talley*)

- Welcome to Lauren Orleman from the School of Public Health and Angie Skellie from OVPR.

Debbie welcomed everyone and introduced our newest members Lauren Orleman from the School of Public Health and Angie Skellie from OVPR, and Nick Wigginton as a special guest presenting on NIH Data Management and Sharing Policy.

Attachment #1

Attachment #2

2. **NIH Data Management and Sharing Policy** (*Nick Wigginton*)

Nick mentioned that there are two new research data policies being prepared - the NIH Data Sharing and Management Policy (DMS), and U-M is developing the U-M Research Data Stewardship Policy. He added that Chris DeVries will send out a Qualtrics form to gather feedback on the new policy.

NIH Data Management & Sharing Policy (DMS):

The DMS goal is to advance rigorous and reproducible research, and promote public trust in research and data stewardship. The DMS will take effect on January 25, 2023 and will apply to all NIH-supported research generating scientific data. All projects will be required to have a Data Management and Sharing Plan that is submitted with the application. Additionally:

- Researchers should maximize appropriate data sharing.
- Compliance is expected and is monitored at regular reporting intervals.

- Encourage the use of established data repositories. NIH requires data to be available at the time of publication or the end of the grant.

What is different from current policy:

It will apply to ALL projects that produce scientific data and it provides more guidance regarding the contents of the plan. It is recommended to deposit the data in an established repository if choosing to share the data. There are allowable costs that should be written into the budget.

Research Data Stewardship:

A group across campus is trying to get a handle on the changes for research and refining [guides](#) and other materials for researchers. We have been working with the RAAC Training Subcommittee to create a webinar, which will be November 1, 2022, and we are also presenting at the RAN Meeting on October 25, 2022. Communication will go out to faculty via schools, colleges, and units. All resources are available at <http://myumi.ch/nihdata>.

NIH is not the only agency making changes to Data Management. The [Nelson Memo](#) from OSTP requires all federal agencies to develop a plan for all federally-funded research manuscripts and data openly available by December 2025. NIH already has a Public Access Policy for manuscripts and anticipates no changes to the new DMS policy. Lots of agencies have made the rule to make these changes and we don't have an SPG in place. We want to make clear what the Roles and Responsibilities are for everyone.

U-M is looking to create a policy that will incorporate current policies while looking to resolve any ambiguity that may exist in those current policies. We will be defining research data as all data that is collected during the course of a research project. U-M has ownership of any research data produced but investigator/Grad students are given grants control. It is recommended the investigator should strive to make their research data available (as long as it does not contact protected information) to other members of the University community, researchers at other institutions, and the general public.

Research data must be retained for a minimum of seven years after the final closeout of a project, unless an applicable agreement, contract, or grant is in place. Nick provided a comparison chart in the slides for NIH DMS Policy vs. the new U-M SPG.

Danielle asked if the retention requirement for human subjects data will remain at 10 years. Or will it change to seven years due to the new NIH DMS policy? Nick answered that his policy does not supersede any other sponsor requirements in terms of data retention.

Becky mentioned that the IT staff in the School of Information have asked about the NIH DMS. Is there, or will there be, any coordination between OVPR and ITS? Nick responded that they are actively working with ITS to help figure out how much data storage is needed, and there is a group looking into this.

Constance shared a link for [NIH resources](#) already published. We are also having events to hear from peers about how they have been valuable.

Anne is the new chair and succeeds Melissa Karby who is still on the committee. Amber Smith from Engineering transitioned off of RAAC Process and Lynn Kujawa succeeds Amber on the subcommittee. Additionally, Maryclare Ellis from Ford School of Public Policy joined the group.

Project Updates - Roles & Responsibilities:

Phase VII has been completed and reviewed and pertains to Compliance Factors that impact the project lifecycle. Additionally, the other documents have been updated for consistency, mostly due to the organizational change related to Innovation Partnerships. We are working to get the updated Roles & Responsibilities updated on the ORSP website.

Reporting and Forecasting:

There are still a few items from this project that are on the ITS prioritization list. We will keep these items in mind as we continue to work with ITS.

Ongoing work:

We have provided input and feedback on various eRPM updates:

- Project Personnel details, cost-share, and other commitments section.
- Added hyperlink to PAF in \$\$\$ tab of Award.
- Language updates to COI questions.
- eRPM help text as its been updated for accessibility compliance.

The group also looked at the possibility of incorporating a budget upload template in eRPM. While this is possible to do functionally, it is not easy to build and would require more data entry for administrators than currently, so the group decided not to move forward. The group also provided some feedback to Procurement Services regarding the Small Business Plan template they have created.

Upcoming Projects:

- ORSP Action Requests - We have discussed adding a Sponsor Due Date when a sponsor is requiring action by a specific due date.
- RAAC Survey - Working with the other RAAC committees to identify new initiatives and priorities.
- RAAC Process will work with ITS enhancement requests.

4. **ORSP Update** (*Andrea Anderson*)

ORSP is recruiting a Project Representative for the Government team. The position has been reposted. Also, there will be a posting for a Project Representative for the Private team due to Tony Nielsen's retirement. The Office of the Vice President for Research has posted and hired a recruiter to fill the position of AVP for ORSP.

We are working to update the ORSP website for better ITS job aides, and tools/resources that RAs can use.

We are seeing more stringent oversight of agency deadlines. They are getting stricter and having consequences if reports are not in on time. NIH has also been pressing that reports are delivered a day before it is due to make sure it is on time. Notifications go to the project team and PI.

NSF has postponed the mandatory use of the new form for Current and Pending Support to October 2023, and in the interim, the current PDF form can be used.

Beth mentioned that the information on How to Route and Submit RPPRs on the ORSP website has good information but is confusing on how to process. The PRs say one thing, and the website says another. Need to get the information out to clarify.

We are working on communications for the RA community in the next RAP. We will be updating the website and will have RAAC Communications and others review.

5. **ITS Update** (*Carolyn Pappas*)

There are a couple of updates coming up. eRPM 6.8 update on November 21, 2022, and two SF424 10.5 updates to be released at the end of November or December that will include NIH Forms-H and other agency forms. This will fix the validation error. There is a smaller release of NIH Update Forms-H in December 2022/January 2023

eRPM PAF Updates:

We will be changing the style of Help Text and reminders in eRPM. It was on the right side and we will be moving to something more modern and accessible for screen readers.

We are going ahead to add a Sponsor Due Date field in November for the Request ORSP Action functionality. Jane asked if the Request ORSP Action Sponsor Due Date is just on the AWD or also on the PAF? It is on the Award Change Request. It will only appear once it is submitted to the sponsor.

Based on Help Desk tickets - reviewers/approvers see all inactive departments and we are putting them in a list. Active means they are active in MPathways in financials.

Kathy asked if it is possible to have an end date on UFAs. A: We don't have a champion for it now but should add that question to the upcoming survey going out and have Process look at it.

6. **Sponsored Programs Update** (*Debbie Talley*)

The UG audit is ongoing and the auditors are reviewing the information for testing and there have been no findings to date. We are hoping we will get it submitted by the calendar year-end.

Equipment Inventory: Retagging is still going on and will be finished by the end of October. If there are assets that are missing, the Office of Property Control will work with appropriate departments.

7. **RAMP↑ Update** (*Chris DeVries*)

We have filled up both mentee/mentor applicants. The mentor/mentee matching team will be meeting on Monday (10/24/2022) to match our applicants.

8. **Closing and Future Meetings** (*Debbie Talley*)

The next meeting is Tuesday, November 15, 2022, with an update from the RAAC Training Subcommittee. RAN is coming up Thursday, October 25, 2022.

The meeting ended at 4:00 p.m.

RAAC Committee-At-Large Meeting Dates (*all meetings 3:00-4:30 p.m., unless otherwise noted*)

- Tuesday, October 18, 2022 (*Anne Thomson, RAAC Process Subcommittee*)
- Tuesday, November 15, 2022 (*Patrick Laguna, RAAC Training Subcommittee*)
- *No December 2022 meeting*

Executive Committee Meetings (*all meetings 3:30-5:00 p.m., unless otherwise noted*)

- Tuesday, October 11, 2022
- Tuesday, November 8, 2022
- Tuesday, December 13, 2022

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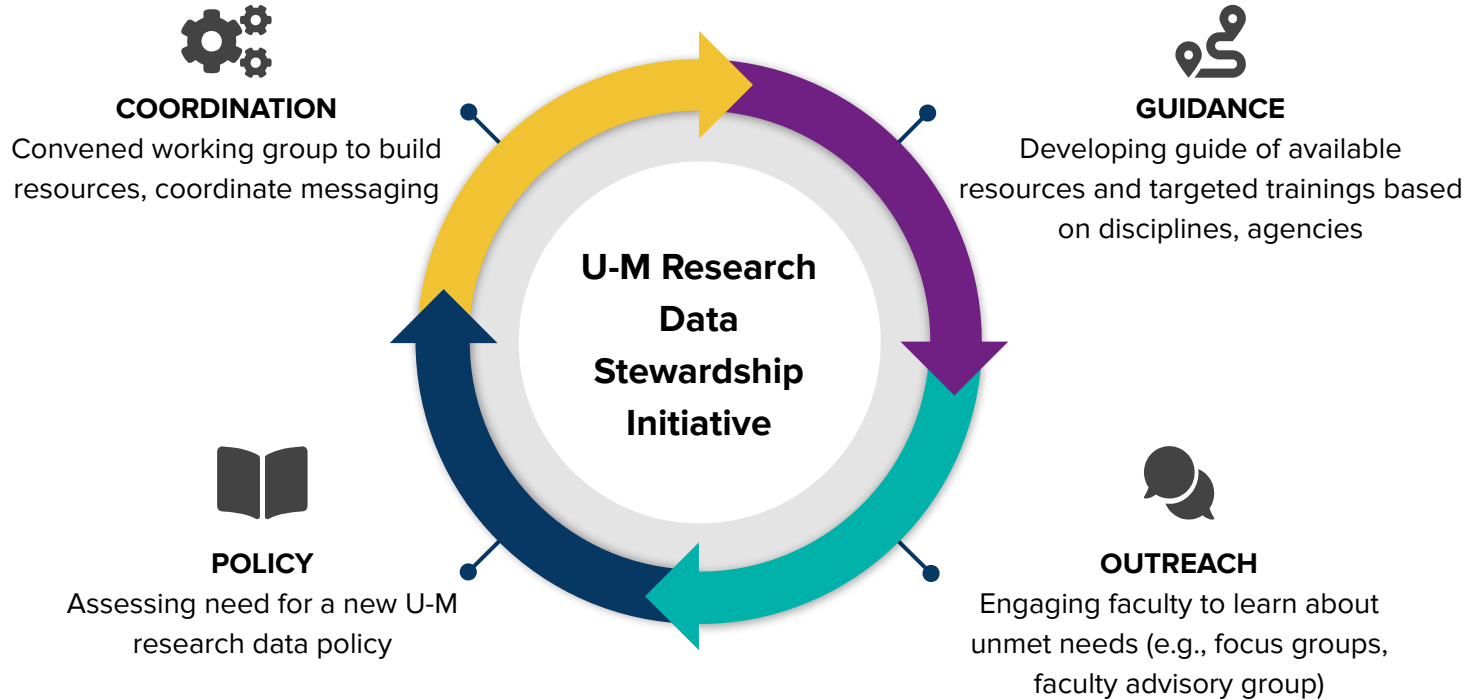
Preparing for two new policies

- 1) NIH Data Sharing and Management Policy
- 2) U-M Research Data Stewardship Policy

M RESEARCH
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The **Research Data Stewardship Initiative (RDSI)** helps U-M researchers improve the transparency, rigor and impact of their research and scholarship across all disciplines.



New NIH Data Management & Sharing Policy

- Goals:
 - Advance rigorous and reproducible research
 - Promote public trust in research
 - Promote data stewardship
- Developed with public input, released in 2020.
- Takes effect January 25, 2023.

New NIH Data Management & Sharing Policy

- All NIH-supported research generating scientific data is required to have a **Data Management and Sharing Plan**.
- Plans are submitted with **application**.
- Researchers should **maximize** appropriate data sharing.
- **Compliance** is expected and is **monitored** at regular reporting intervals.
- Encourages the use of **established data repositories**.
- Data shared no later than the **time of an associated publication** or the end of the performance period.

NIH has a data policy already. What's different?

- Applies to ALL projects that will produce scientific data, not just those research proposals seeking \$500,000 or more in direct costs.
- Provides more guidance regarding the contents of the plan.
- Recommends depositing the data into an established repository if choosing to share the data.
- Explicitly states that there are allowable costs which should be written into the budget.
- Compliance will likely be more rigorously monitored.

What's happening at U-M

Updating and refining [research guides](#) & other materials for researchers

Working with RAAC Training Subcommittee to hold a Navigate webinar; presenting at RAN

Outreach & communication to faculty via schools, colleges, units

All resources available at <http://myumi.ch/nihdata>



The Navigate program is pleased to announce webinar and course offerings to be conducted virtually through Zoom sessions this fall. More details will be [shared here](#) and in a RAPid announcement soon.

Webinar: The New NIH Data Management & Sharing Policy

The presenters will give an overview of the NIH Data Management & Sharing policy which goes into effect on January 25, 2023. The content will include U-M resources for writing a data management and sharing plan.



WEBINARS

NAVIGATING RESEARCH ADMINISTRATION AT THE UNIVERSITY OF MICHIGAN

Presenters:

Sara Samuel, Informationist, Taubman Health Sciences Library

Diane Wilson, Assistant Director, Office of Regulatory Affairs

Date: Tuesday, November 1, 2022

Time: 11:00 a.m. - 12:00 p.m.

Is there a connection to the recent OSTP memo?

- The [Nelson memo](#), released on Aug 25, 2022 requires all federal agencies to develop a plan for making all federally-funded research manuscripts and data openly available, with plans to be implemented by Dec 2025.
- NIH already has a Public Access Policy for manuscripts.
- NIH anticipates that there will be no changes to the new data management and sharing policy.
- NIH will be working to address the requirements of the memo.

All of these changes are exposing a current gap in our current SPGs

Why do we need a Research Data Stewardship SPG?

- Data landscape is changing dramatically
 - More data, more management needs
 - New funder/journal policies
 - Data is increasingly recognized as an asset and resource
- Currently ambiguous roles and responsibilities around data; inconsistent practices
- Critical component of research integrity investigations, IP discovery
- Recent AAU/APLU recommendations, many peers have new policies
- Clear gap in guidance or best practices in our current SPGs

Defining Research Data

- *“Research data as used in this policy means the **recorded factual material commonly accepted in research communities as necessary or useful to validate, reconstruct, evaluate, and/or replicate findings, regardless of whether they are used to support scholarly publications and regardless of the form of the media on which they may be recorded.**”*
 - Mostly based on NIH policy language but broadened to apply to other disciplines and data types

Ownership

- *“For all research and scholarship activities performed under the auspices of the University, regardless of location, intent, or funding source, **the University owns any Research Data.**”*
- *“The University **grants control** over Research Data to investigators, in accordance with the terms of this policy”*
 - Consistent with SPGs on “scholarly works” and copyright, tech transfer / IP policy—and with policies at other universities
 - U-M also assumes an obligation to provide support for management and storage of data as a university asset

Accessibility

- *“Investigators should generally strive to **make research data available** to other members of the University community, researchers at other institutions, and the general public—subject to the terms of any applicable sponsor or data use agreements, security and confidentiality requirements, and/or human-subjects protection requirements.”*
 - Not health system data
 - Does not usurp contracts/agreements
 - Consistent with new [OSTP memo on public access](#)

Retention

- *“Subject to rules or regulations that may extend time periods, research data must be retained for a minimum of **seven years** after final closeout of a project, unless an applicable agreement, contract or grant requires a shorter or longer period of time.”*
 - Provides sufficient time to ensure responsible stewardship
 - Peer policies range from 3-7 years
 - HHS/PHS looks back 6 years for research misconduct
 - Most funding agencies (NIH, NSF) tie data to publications but the University has different motivations for encouraging data stewardship

Implementation Guide (forthcoming)

A companion document that will provide guidance and details on applying the SPG, including:

- Responsibilities and expectations for PIs, students, etc
- Further explanation of retention (storage vs archiving vs sharing)
- What happens when someone leaves the university
- Distinguishing between data and materials
- IP vs scholarly works vs data
- Dispute resolution

NIH DMS Policy vs New U-M SPG

	NIH Data Management and Sharing Policy	U-M Research Data Stewardship Policy
Motivation	Sharing scientific data accelerates biomedical research discovery... by enabling validation of results, providing accessibility to high-value datasets, and promoting data reuse for future studies.	<ul style="list-style-type: none"> To serve the mission of the University in creating, communicating, preserving, and applying knowledge. Sets out expectations and guidance for the stewardship of Research Data associated with the conduct of research as part of University activities
Definition of data	“Scientific data” needed to replicate findings in publications	“Research data” including notebooks & other documentation
Public access	Required at time of publication	Encouraged when possible
Retention	3 years after term of grant (blanket NIH policy)	7 years after final closeout of project
Applies to	Researchers applying for NIH funding that will generate scientific data	All U-M researchers (faculty, staff, students) working under the auspices of the University

SPG U-M Standard Practice Guide

Research Data Stewardship Policy

I. Purpose of the Policy

Responsible stewardship of Research Data is critically important to increase public trust, meet funder mandates, and serve the broader mission of the University in creating, communicating, preserving, and applying knowledge. Both the university and research investigators have responsibilities concerning access to, use of, and maintenance of data resulting from research conducted as part of university activities. This policy sets out expectations and guidance for the stewardship of Research Data associated with the conduct of research as part of University activities. This policy does not apply to non-research clinical data, or ownership of patents, inventions, copyrights, or other data or property governed by separate University policies, e.g., those cited below.

II. Definition of Research Data

“Research data” as used in this policy means the recorded factual material commonly accepted in research communities as necessary or useful to validate, reconstruct, evaluate, and/or replicate findings, regardless of whether they are used to support scholarly publications and regardless of the form of the media on which they may be recorded. Laboratory notebooks and other related forms of documentation would be included in this definition, but analyses, completed case report forms, drafts of publications, plans for future research, peer reviews, communications with colleagues, and scholarly works (as defined in SPG 601.28) would not, except to the extent these items are frequently associated with or contain Research Data.

III. Ownership of Research Data

For all research and scholarship activities performed under the auspices of the University, regardless of location, intent, or funding source, the University owns any resultant Research Data. Such activities include, but are not limited to, data generated as a result of grants, fellowships, or other forms of sponsorship administered by the University; scholarship or research generated during time that faculty, staff, or students are being compensated; and/or data generated using equipment, facilities, or other unique access afforded to University faculty and staff.

The University grants control over Research Data to investigators, in accordance with the terms of this policy, and has the ability to grant rights to others, such as through contracts, data use agreements, or materials transfer agreements. The University does not in this policy or in other related policies (e.g., SPG 601.28) generally claim ownership of copyright in scholarly journal articles or other similar works created by academic authors based on such Research Data.

Data acquired from a third party are subject to the terms of agreement under which they were acquired, and researchers should work with the Office of Research and Sponsored Projects to understand their responsibilities in these situations.

IV. Accessibility of Research Data

Investigators should generally strive to make Research Data available to other members of the University community, researchers at other institutions, and the general public—subject to the terms of any applicable sponsor or data use agreements, security and confidentiality requirements, and/or human-subjects protection requirements. If allowable, the University generally expects investigators to make Research Data available in a manner that is consistent with FAIR principles¹ (findable, accessible, interoperable, and reusable), even in cases when not explicitly required by funder and/or scholarly journal policies, or other research agreements.

There are some types of protected Research Data that should not or may not be shared outside of the University without ensuring compliance with applicable laws, regulations, grants, contracts, and other university policies, etc. This Policy does not introduce new requirements, rights, or protections for sharing such data. Researchers seeking to change any approved protocols or agreements must always receive prior approval from the cognizant office responsible for overseeing the relevant data protection program [e.g., Institutional Review Board (IRB), Export Control Office]. Concerns or disputes concerning access to data will be handled according to the procedures described in the related Procedures document.

V. Retention of Research Data

Subject to rules or regulations that may extend time periods, Research Data must be retained for a minimum of seven years after final closeout of a project, unless an applicable agreement, contract or grant requires a shorter or longer period of time due to sensitivity of Research Data. In rare cases when data storage costs become prohibitive to retain Research Data for the entire period (e.g., for very large datasets), researchers or their unit may request a waiver from the Office of the Vice President for Research. In cases where the researcher leaves the University before the term of the retention period expires, researchers must ensure original Research Data remain at U-M in their home unit or another approved location. Transferring materials or copies of data to another institution will require a materials transfer agreement or data use agreement, respectively.

VI. Procedures

Procedures for SPG [link to come]

Other Related University Policies and Guidelines

[SPG 303.03](#) – Policy Statement on the Integrity of Scholarship

[SPG 303.04](#) – Technology Transfer Policy

[SPG 601.11](#) – Privacy and the Need to Monitor and Access Records

[SPG 601.12](#) – Institutional Data Resource Management Policy

[SPG 601.28](#) – Who Holds Copyright at or in Affiliation with the University of Michigan

Applies To

Faculty, students, other trainees, staff, and all other members of the University of Michigan's academic community

Owner

Office of the Vice President for Research

Primary Contact

Office of the Vice President for Research

References

- 1) <https://www.go-fair.org/fair-principles/>

PROCEDURES DOCUMENT

(attachment to go along with the policy; to be formatted/revised)

Responsibilities of Principal Investigators

U-M researchers are stewards and custodians of Research Data. Because [principal investigators](#) (PI) are responsible for the design, conduct, and/or reporting of research for all supervisees and staff, PIs have unique responsibilities with respect to Research Data that include at least the following, as conditioned by this and other University policy and the terms of any applicable grants and/or contracts:

- A. Ensuring that sufficient records are created and maintained to document the accuracy of data collection and interpretation;
- B. Creating and/or adopting an orderly system of Research Data organization
- C. Establishing and maintaining appropriate procedures for the protection of Research Data and other essential records, in compliance with requirements of applicable grants and/or other contracts, and in compliance with applicable federal, state, and local laws;
- D. Maintaining confidentiality of Research Data, where appropriate;
- E. Maintaining or putting into place appropriate data use agreements for the sharing of Research Data, which may require requesting assistance of other University staff;
- F. Establishing plans for dissemination of Research Data, including but not limited to making data publicly accessible and/or publishing data in scholarly works;
- G. Assigning collaborators or other researchers the ability to access Research Data, including members of the research group, researchers at other institutions, or supervisees or trainees leave the institution but still require access to data to complete their scholarly work.

A PI may choose to delegate this work (e.g., to others within a research group); however, the PI will remain responsible for achievement of these duties. PIs are expected to ensure all supervisees collecting Research Data as part of their employment, including faculty members, staff, or students acting as employees (e.g., graduate students on stipends) comply with this policy. This Policy does not apply to undergraduates who are not working as employees (e.g., as part of coursework).

The PI, upon request of the University, must promptly provide the University with Research Data and related records. Under extraordinary circumstances, such as a research misconduct investigation, the University will take all necessary steps to ensure integrity of the Research Data in a manner specified by University policy on the integrity of scholarship (SPG 303.03).

Data Retention

As defined in this Policy, all recorded factual material commonly accepted in research communities as necessary or useful to validate, reconstruct, evaluate, and/or replicate findings, regardless of whether they are used to support scholarly publications and regardless of the form of the media on which they may be recorded, should be retained for a minimum of seven years.

Under this definition, the following would be required to be retained under normal circumstances: raw and treated data files, original recordings or observations, and any newly developed computer code. Because this definition of Research Data overwhelmingly consists of digital media, adequate retention of Research Data records requires [robust digital storage planning and appropriate data security measures](#). Physical media (e.g., laboratory notebooks) can also fall under the definition of Research Data used here, if not transcribed electronically as part of metadata associated with a dataset.

The following typically are not required to be retained under normal circumstances, but could be required to be released to University officials under circumstances described above (including, but not limited to investigations or litigation): duplicates of original records; preliminary drafts of letters, memoranda, reports, worksheets, and informal notes that do not represent significant steps and/or decisions in the preparation or analyses of original records; books, periodicals, manuals, training binders, newspapers and other printed material obtained from external sources and retained primarily for reference; and blank forms.

Any of the following circumstances will justify longer periods of retention outside the period of retention specified in this Policy:

- A. If applicable regulations, federal oversight, sponsor policies or guidelines, journal publication guidelines, or other University policies or guidance require longer retention, all applicable sources must be reviewed and the Research Data must be kept for the longest period of time applicable;
- B. If any charges regarding the research arise (such as allegations of scientific misconduct, improper charging of costs, or financial conflict of interest), data must be retained at least until such charges are fully resolved or for such other period as may be required by University policy or regulation;
- C. If other adequate period of time is necessary or desirable to enable appropriate responses to questions about accuracy, authenticity, primacy, and compliance with contracts, laws, and regulations governing the conduct of the research;
- D. If a graduate student or postdoctoral scholar is involved, Research Data must be retained at least until at least five years after the student's degree is awarded, training is completed, or it is clear that the individual has abandoned the work at the University, and any resulting papers are published;
- E. When research is funded by an award to or contract with the University that includes specific provision(s) regarding ownership, retention of, and access to technical data, the provision(s) of that agreement may result in longer periods of retention;
- F. Research data from human participant research studies must be maintained consistent with the applicable law or policy, such as relevant IRB policy, guidance, and instructions;
- G. Research data must be kept for as long as may be necessary to protect any intellectual property and complete patenting and licensing procedures for inventions resulting from University research, taking into account guidance from Innovation Partnerships and the Office of the Vice President and General Counsel;

- H. If litigation or other dispute resolution, claims, financial management review, or audit related to the research project is started before the expiration of the five-year period, or commenced after the five-year period but the relevant data and records have not been destroyed, the Research Data and other project records must be retained until all such litigation/dispute resolution, claims, financial management review, audit findings involving the records have been resolved and final action taken, or as required by law or instruction by the Office of the Vice President and General Counsel.

If Research Data are outside the period of retention specified in this Policy, the destruction of those data are at the discretion of the PI and/or the PI's department. Processes for destruction or discarding of Research Data must follow applicable federal regulations, University policies on record retention and data disposal, sponsor requirements, and other applicable rules and guidelines.

Researchers that Leave the University

It is the responsibility of the schools and colleges to develop exit processes in accordance with this Policy through which the applicable school or college can determine what Research Data and supporting records, if any, must be retained on-campus as originals or copies, taking into account the needs and rights of those researchers who remain at the University, the need to maintain the integrity of the research, including any ongoing research, the need to comply with sponsored research terms and conditions, and the needs of the departing PI to continue the PI's research if applicable.

At times, an ongoing project at the University, or projects that have ended but are within the seven-year data retention period, may be moved to another institution in accordance with the agreement of relevant parties, sometimes contemporaneously with the move of the PI to the new institution. Subject to any applicable restrictions (e.g., in sponsor agreements or law), copies of the original data may be transferred from the University to the PI's new institution with the approval unit leadership through a data use agreement and any sponsor that requires approval. The University, in its sole discretion, has the right to agree to transfer only copies of Research Data and/or supporting documentation and records, or to refuse transfer of any Research Data in the absence of compliance with any other applicable rules (e.g., IRB approval for human subjects Research Data). IRB review and approval to use the data may also be needed from the institution to which the data will be transferred.

Data Sharing and Archiving

To ensure long-term accessibility of research beyond the retention time stated in this Policy, the University encourages researchers to make the data associated with publications publicly available and permanently archived, preferably in funder-approved disciplinary repositories or in the [University's own Research Data repository](#). Adhering to common disciplinary practices (e.g., depositing other related materials, code, or datasets into repositories) is also strongly encouraged whenever possible.

Compliance with funders policies. More specifically, Research Data collected or created in the process of research developed with federal funds should be shared in accordance with data sharing policies adopted by funding agencies. It will be the responsibility of the grant's principal investigator (PI) to follow the requirements imposed by contract (e.g., agreements with sponsors), legal requirements (e.g., export laws and other federal regulations), any applicable informed consent documents or agreements, and/or conditions of IRB approval. Specifically, if data has been collected conducting human subjects research, the IRB must review and approve any such transfer prior to other required approvals being effective.

Other Investigators. The PI shall document explicit understandings with other research investigators/contributors regarding access to and use of Research Data. These understandings should reflect access appropriate to one's role and contribution to the conception and design of research, acquisition of Research Data, or analysis, and interpretation of Research Data. For example, the PI should assure that Research Data or copies thereof are made available for review by co-investigators in group research projects.

Clarification of Data Ownership and Copyright

Copyright, a form of intellectual property law, protects original works of authorship including literary, dramatic, musical, and artistic works, such as poetry, novels, movies, songs, computer software, and architecture. Copyright protects expression, and not ideas, procedures, methods, systems, processes, concepts, principles, or discoveries. To be protectable by copyright, a work must have "modicum" of creativity, and facts by themselves are not protected by copyright. Therefore, data, as a collection of facts, is not protected by U.S. copyright law. Databases as a whole can be protected by copyright as a compilation, as can some manners of presentation of data, but only under certain conditions. Faculty have the right to present data in Scholarly Works as described and defined in SPG 601.28, and the right to own and assign copyrights in Scholarly Works, but the University owns Research Data as provided in this Policy.

University Rights. The University has the right of access to Research Data arising from all University research, regardless of the location or status/rank of the researcher. When necessary or desirable to ensure appropriate access, the university has the right to take physical custody of original Research Data and supporting records (e.g., during an investigation of alleged research misconduct), in a manner described in SPG 303.03. Researchers, including those that leave the University, agree to fully cooperate in the same, regardless of status/rank.

None of these provisions is intended to alter a PI's traditional right to hold Research Data proprietary, or to require others to hold Research Data proprietary, until the results of the research have been published and the terms of the research agreement or project have been fulfilled.

Dispute Resolution

Subject to other stated grievance procedures for academic unit(s), if a dispute arises concerning a researcher's access to data, an initial effort to resolve the dispute will be made by the chair or delegated member of leadership of the relevant academic unit(s) involved. Any unresolved disputes then shall be resolved in the first instance by the unit's associate dean for research. If necessary, any party may take the dispute for final resolution to the Research Integrity Officer.

Research Data Associated with Physical Materials

These procedures apply specifically to Research Data and supporting records. However, it is understood that many times Research Data may be closely linked with physical materials, such as collected samples, museum specimens, or other types of physical objects. Researchers working with physical materials are expected to follow all applicable rules and regulations related to the collection, documentation, and maintenance of those materials, as well as to standard disciplinary practices. For example, researchers collecting or working with museum-derived materials or biospecimens should ensure their data are linked to appropriately preserved vouchers

RAAC Process Update

RAAC Committee-at-Large Meeting

Anne Thomson, Director of Research and Compliance, LSA
October 18, 2022



RAAC Process Members



Alameddine, Karen – ORSP	Nielsen, Tony – ORSP
Anderson, Andrea – ORSP	Offhaus, Heather – Medical School
Brant, Beth – Medical School	Pappas, Carolyn – ITS
Cross, Kerri – ISR	Simon, Amanda – Sponsored Programs
DeVries, Chris – ORSP / Sponsored Programs	Kujawa, Lynn – Engineering**
Ellis, Maryclaire – Ford School**	Thomson, Anne – LSA
Herrick, Teresa – SEAS	Turnbull, Pat – Dearborn
Karby, Melissa – OVPR	VanSickle, Bryan – Sponsored Programs
<i>Anne Thomson took over as RAAC Process Chair on July 1, 2022. ** Amber Smith from Engineering transitioned off of Process and we welcomed Maryclaire Ellis and Lynn Kujawa</i>	Wintergerst, Rick – Engineering

Project Updates – Roles & Responsibilities



Phase I (*Proposal Development*) – **Completed & Reviewed**

Phase II (*Proposal Review, Approval, and Processing*) – **Completed & Reviewed**

Phase III (*Award Acceptance and Negotiation*) – **Completed & Reviewed**

Phase IV (*Financial Management of Awards*) – **Completed & Reviewed**

Phase V (*Non-Financial Management*) – **Completed & Reviewed**

Phase VI (*Award Closeout*) – **Completed & Reviewed**

Phase VII (*Human / Animal Protocol Review, Approval, and Monitoring*) – **Completed & Reviewed**

We are working to get the updated versions of these documents on the ORSP web page.

Project Updates



Reporting and Forecasting:

- The many recommendations from the Reporting and Forecasting business case were split into groups and submitted to ITS via the Finance Prioritization group. The status of the recommendations is shown below:

Item	Status
Electronic Concurrence Receipt Workflow	<i>Completed</i>
Wire transfer information saved on vouchers	<i>Completed</i>
Show cents in M-Reports (with toggle)	<i>Completed</i>
Remove hyperlinks from exports to Excel format	<i>Completed</i>
Provide consolidated portfolio view in M-Reports	<i>Completed</i>
"7471 Phase II" - SubPG request process transition to online February 2022	<i>Completed</i>
Add purchasing commitments to non-sponsored P/Gs	<i>Paused</i>
Add imputed indirect costs to cost-share P/Gs	<i>Paused</i>
Ability to expand account code rollups on budget reports	<i>Paused</i>

Ongoing Work



Various eRPM Updates

- Provided input and feedback on the various eRPM updates, including:
 - Project Personnel details, cost-share and other commitments section (initiated to bring code up to date)
 - Added hyperlink to PAF in \$\$\$ tab of Award (feedback from users)
 - Language updates to COI questions (COI team)
 - eRPM help text as it is be updated for accessibility compliance

Ongoing Work



Various Discussions/Brainstorms:

- Budget upload template
 - Technically possible, but would be a lot of work to build, and because of the way the system works, it would result in more data entry than current system
 - Based on exploratory information, Process is not moving forward with next steps, however sponsored programs is aware that there is an interest and if circumstances change, will keep Process apprised of any future ability to streamline.
- Procurement - Small Business Plan template

Upcoming Work



- **ORSP Action Requests**
 - Exploring adding a Sponsor due date field for ORSP Action Requests
- **RAAC Survey**
 - Working to develop questions for the RAAC Process portion of the upcoming survey of research administrators to identify new initiatives and priorities.
- **As Needed**
 - We will continue to review and provide feedback on various ITS enhancement requests as needed.
 - We will continue to partner with the various subgroups for the multitude of projects being worked on when needed.

Questions/Comments



- **As always we welcome your feedback!**



Project Updates



Award Change Request (ACR) Design Team

- The implementation for the new workflow in eRPM occurred on November 15, 2021.
- We have received positive feedback on the implementation and the functionality.

Project Updates



Internal Awards

- This project was put on hold at the outset of the pandemic. Before restarting the project, we plan to review the scope and objectives to ensure they are accurate.