

Ad Hoc Group Weekly Round Up – December 12, 2016

Each week, the Ad Hoc Group Weekly Round Up will feature hashtags and/or tweets suggested by members of the NIH advocacy community. We encourage all readers who are active on social media to use these messages, and welcome suggestions from the community for future issues of the Weekly Round-Up.

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1. President Obama Signs Stopgap Funding Measure, Deferring Spending Decisions Until April 28

The president Dec. 10 [signed](#) a continuing resolution (CR) that would extend funding for most federal agencies, including the National Institutes of Health (NIH) and other health programs, at a rate of operations that is 0.1901 percent below fiscal year (FY) 2016 levels until April 28, 2017. Last week, both the House and Senate approved the CR, narrowly averting a government shutdown on Dec. 9.

In addition to continuing funding for the base NIH budget, the CR ([H.R. 2028](#)) enables NIH to access the full \$352 million in funding available to NIH in FY 2017 through the Innovation Account established in the 21st Century Cures Act ([H.R. 34](#)). In FY 2017, the Account provides \$40 million for the Precision Medicine Initiative, \$10 million for the BRAIN Initiative, \$300 million for Cancer Moonshot, and \$2 million for clinical regenerative medicine research.

For your reference, a [complete guide](#) to the NIH Innovation Account, including funding levels by program and fiscal year, is available on the Ad Hoc Group website.

2. Article about NIH Director Collins in the Next Administration

NIH Director Francis Collins, M.D., Ph.D., Dec. 9 [told STAT](#) that it would be a “privilege” to continue his role as Director of the NIH in the next administration, though he told *STAT* that he has yet to be asked by the new administration to stay onboard as NIH director. Dr. Collins’s comments come after top congressional Republicans Dec. 2 sent a letter (attached) to the President-elect’s transition team, urging the new administration to keep Dr. Collins as Director of the NIH.

3. NIH Announces New Chief Executive of the NIH Clinical Center

The NIH Dec. 9 [announced](#) that Major General James Gilman, M.D., will be the “inaugural” chief executive officer (CEO) of the NIH Clinical Center. Prior to his appointment as head of the NIH Clinical Center, Dr. Gilman served as the Executive Director of Johns Hopkins Military & Veterans Institute after serving 35 years in the U.S. Army. Dr. Gilman takes over for John

Gallin, M.D., who stepped down as director of the NIH Clinical Center. The NIH Clinical Center conducts intramural clinical research, and patients participate in the research studies.

4. NIH Grants Extension on Single IRB Policy

The NIH Dec. 8 announced a delay in the implementation date for the NIH Policy requiring a single Institutional Review Board (IRB) of record for all NIH-funded multisite studies. The announcement was made at the meeting of the Advisory Committee to the Director. NIH Director Francis Collins, M.D., Ph.D., announced that the implementation date would be delayed until Sept. 25, 2017, four months later than the date listed on the final policy. The NIH single IRB policy applies to all multisite trials funded by NIH and is going into effect regardless of whether a similar proposal to revise the Common Rule to require a single IRB of record for all multisite trials is finalized.

5. NIH Director and Yo-Yo Ma Jam Session

NIH Director Francis Collins, M.D., Ph.D., and famed cellist Yo-Yo Ma Dec. 7 performed a duet at the annual J. Edward Rall Cultural Lecture. Yo-Yo Ma and Dr. Collins discussed the connection between neuroscience and music. Wendy Suzuki, Ph.D., Professor of Neural Sciences and Psychology at New York University, then led a discussion about her lab's efforts to study electrical activity in the brain.

Please Note: If you have information of interest to the NIH advocacy community that you would like to share with the Ad Hoc Group, please forward it to Tannaz Rasouli at trasouli@aamc.org or Clay Crabtree at ccrabtree@aamc.org.