ABOUT THIS REPORT

The National Council of University Research Administrators (NCURA) is a national organization of over 7,000 members. NCURA serves its members and advances the field of research administration through education and professional development programs, the sharing of knowledge and experience, and by fostering a professional collegial, and respected community.

This document focuses on sharing knowledge and experience as a result of the recently conducted review of the research administration area of sponsored programs. Our objectives are to provide the institution with feedback on the institution’s management in support of research and to share some national best practices that might be considered at the institution.

While the review utilizes the NCURA National Standards, the reviewers recognize that policies and practices vary at institutions and that not all Standards are applicable to each institution.

The NCURA peer review does not evaluate personnel, nor does it perform an audit function. The results of this review, therefore, cannot assure fiscal, regulatory, or ethical compliance with federal, state, or local regulations. The recommendations offered in this review report should not be construed as an exhaustive list as these recommendations necessarily represent an analysis by a particular set of reviewers and at a single point in time. A decision by an institution to not adopt one or more recommendations does not, in any way, mean that the institution is failing to meet legal requirements. Rather, the recommendations reflect an opinion by nationally recognized research administrators who may not be fully cognizant of local history, environment, or decisions. This document does not provide legal advice. NCURA does not warrant that the information discussed in this report is legally sufficient.

- The Executive Summary provides an overview of the report and a listing of all the recommendations in abbreviated form.
- The Background, Charge, and Approach lays out the charge to the reviewers and the approach utilized during the peer review.
- The section on National Standards for Sponsored Projects Operations provides an overview of the National Standards utilized for the review (the complete listing of National Standards appears as an appendix).
- The Current Environment for Sponsored Programs at Research Universities section discusses the many influences and pressures that have recently impacted research administration and created some of the current stresses.
- The remaining two sections on Institutional Infrastructure and Core Operations provide a detailed discussion of these areas followed by a set of recommendations and rationale for the recommendation being made.
NCURA will treat the contents of this report as confidential and will not disclose nor distribute the report outside individuals affiliated with the peer review program. There are no such restrictions on how the institution chooses to utilize the report.
Mississippi State University  
NCURA PEER REVIEW

**EXECUTIVE SUMMARY**

An evaluation of the research administration infrastructure at Mississippi State University was conducted at the request of Dr. David Shaw, Vice President, Research and Economic Development and Mr. Don Zant, Vice President for Budget and Planning. The evaluation was performed in September 2011 (site visit on September 7-9, 2011) by a Peer Review Team from the National Council of University Research Administrators.

The evaluation covered the Institutional Infrastructure and Core Operations of the National Standards for research administration. The review assessed the following broad areas:

1) **Institutional Infrastructure**, consisting of Organizational Structure; Communication, Outreach, and Education; Compliance and Risk Assessment; and Electronic Research Administration

2) **Core Operations**, consisting of Proposal Services; Award Acceptance and Initiation; Award Management; and Research Ethics

The NCURA Peer Review Program performs a review of the effectiveness of the sponsored programs operation using National Standards. The program does not perform an audit function. The results of this review, therefore, cannot assure fiscal, regulatory, or ethical compliance with federal, state, or local regulations. Additionally, the program does not evaluate personnel.

The recommendations are listed here in abbreviated form. They appear in the order that they are discussed in the report. A more complete description and rationale for each recommendation below appears in the Recommendations section in the body of this report.

**Organizational Structure**

*NCURA Standard II.A.i. Operational Structure*

- **Recommendation:** SPA Administration and SPA Accounting should jointly assess peer institution pre- and post-award operations to determine the appropriate location for duties and align functions to the mission and purpose of the departments involved.

- **Notable Practice:** The new leadership and changes that have begun to occur over the past one to two years were noted by most who were interviewed. People expressed strong support and respect for the new leaders. Many are positive and anticipating more progress to come. They noted that the institution investing in the
NCURA Peer Review was a further demonstration that the institution was serious about improving the support available to their researchers.

- **Recommendation:** A task force should be formed to evaluate and define the appropriate roles and responsibilities of those involved in the administration of research at the local level as well as the organizational structure for the support of research administration. This should include the development of a plan to ensure that the designated roles and responsibilities are put in practice.

- **Recommendation:** The Vice President for Research and Economic Development and the Vice President for Budget and Planning should initiate/sponsor the development of a carefully designed plan that lays out the institutional changes necessary to provide a more efficient and effective research administration. This plan needs to include periodic points of discussion with senior administration.

**NCURA Standard II.A.ii. Staffing and Resources**

- **Recommendation:** The Director of SPA Administration and the Assistant Controller should develop career tracks for their departments which are designed to develop and retain staff.

- **Recommendation:** MSU should conduct a review of peer institutions of similar expenditure or award volume to gain a better understanding of the number of staff generally in place to centrally support research administration. This can vary greatly because the distribution of responsibilities that are handled between the pre award, post award and other offices involved in research administration varies greatly by institution.

- **Recommendation:** MSU should strongly consider increasing staff immediately to provide needed support while they conduct a review of peer institution staff models and develop their long term staffing model.

- **Recommendation:** MSU should explore other organizational models for work assignment within SPA Administration and SPA Accounting, e.g. organized by constituency or creation of agency “liaisons” that strengthen the alignment between offices, departments, centers and sponsoring agencies.

**NCURA Standard II.B.i. Communication and Outreach**

- **Notable Practice:** “Maroon Research” is a well-done and comprehensive magazine that provides information regarding research and economic development news.

- **Notable Practice:** The FAQ’s on SPA Accounting’s website are a useful tool to administrators and could be expanded to cover additional areas.

- **Recommendation:** MSU should identify a task force to develop a research administration communication plan for the institution.
- **Recommendation:** The "Faculty and Staff Guide to Research Administration" should either become a shared Guide with SPA Accounting and be expanded to include information regarding post award activities or a counterpart post award Guide should be developed.

- **Recommendation:** The leadership of SPA Administration and SPA Accounting should establish effective and regular meetings and communications between the staff of both offices (not just the managers). In addition, other types of team building and educational occasions should be organized to bring the groups together.

- **Recommendation:** The leadership of SPA Administration and Research Compliance should establish effective and regular meetings to ensure that communication occurs as needed.

**NCURA Standard II.B.ii. Education**

- **Notable Practice:** It is commendable that SPA Administration is offering educational courses for the new faculty researchers. It is highly commendable that they have been able to attract many faculty to attend these sessions.

- **Notable Practice:** SPA Administration has a training manual available to their staff.

- **Recommendation:** MSU needs to explore avenues to further develop and expand current educational opportunities into a comprehensive educational program for the central, College and departmental administrators involved in research administration at the University as well as educational offerings for researchers.

- **Recommendation:** MSU should strongly consider adding an additional staff member who is dedicated to research administration education and communication.

- **Recommendation:** Pre and post award central staff should be provided regular educational opportunities to maintain and increase their knowledge level of research administration.

**NCURA Standard II.C.i. Compliance and Risk Assessment**

- **Recommendation:** The Directors of the Office of Internal Audit and Sponsored Programs Administration and Accounting should clarify the roles and responsibilities of each office and develop appropriate communication mechanisms to direct inquiries to the appropriate office.

- **Notable Practice:** The Institution has conducted two very important audits in the last few years in areas of high risk.
- **Recommendation:** Due to the importance of risk assessment and management reviews in research-related matters, MSU may want to consider establishing a standing committee to evaluate research risk and to recommend audit priorities for review.

- **Notable Practice:** Commissioning the Report of the Research Infrastructure by ORED was notable. The report was well done, areas identified for review were well thought out, and suggestions on the whole were well balanced.

- **Recommendation:** MSU management should continue to work through the suggestions made in the Report of the Research Infrastructure and to communicate back to the participants the plan of action to be taken, what will and will not be accomplished by the institution.

- **Recommendation:** The Vice President for Research and Economic Development should establish a regular review cycle for SPA.

- **Recommendation:** As research policies are a critical component for the administration of sponsored programs and the acceptance of risk, MSU should complete an inventory of all relevant policies and have a plan in place to write, approve and publish such policies.

- **Recommendation:** MSU must assure that Operating Policy and Procedure Policy (OP 01.01) revised on 10/04/11 and found at (http://www.msstate.edu/dept/audit/0101.html) is maintained and that an established and regular schedule of review and policy updates (annual review recommended) are conducted.

- **Recommendation:** MSU should consider developing a simple compliance matrix to identify compliance oversight areas, policies, and responsible office.

**NCURA Standard II.D.i. Electronic Research Administration**

- **Recommendation:** Senior management at MSU, including the Provost, Vice President for Research and Economic Development, Associate Vice President for Research and the Vice President for Budget and Planning, the Controller and the Chief Information Office (CIO) should review the campus’s priorities for Information Technology Services with an eye to improving the technology for research administration and the fiscal management of awards.

- **Recommendation:** MSU should consider creating a unit in Information Technology Services that is dedicated to research and administrative technology concerns.

- **Notable Practice:** Piloting an electronic IAS is commendable and should lead to a full implementation of this program campus-wide.
• **Recommendation:** MSU should continue their efforts to determine and implement an electronic signature protocol and workflow routing and move forward as quickly as possible with the procurement of software to enable such.

• **Recommendation:** MSU should investigate software and electronic systems dedicated to easing the burdens of the compliance committees.

• **Recommendation:** The Controller and Treasurer and the Assistant Controller for Sponsored Programs Accounting, with the Director and Assistant Director of Sponsored Programs Administration, should form a task force to look at the possibility of having a data feed directly from Coeus to Banner.

• **Recommendation:** MSU should conduct an evaluation of the current configuration of their Banner and Coeus systems, including a review of the potential benefits of implementing the unused modules available to them.

• **Recommendation:** MSU should consider whether to implement a third party proposal preparation and submission system as an interim solution at the same time as considering the full implementation of Kuali/Coeus.

Proposal Services

**NCURA Standards 1.A.i Collection and Dissemination of Funding Information**

• **Recommendation:** The Office of Research and Economic Development might consider offering a searchable funding opportunities database that has capabilities for both searches as well as automatic matches of opportunities to filed faculty profiles.

**NCURA Standards 1.A.ii Proposal Development and Assistance**

• **Recommendation:** SPA Administration should consider expanding the role of the Assistant Director as the “go-to” person in SPA assigned to facilitate proposal development for those faculty who have limited assistance in their departments.

• **Notable Practice:** The Faculty and Staff Guide to Research Administration is a well-developed basic document. It broadly covers how to prepare proposals, how to develop budgets and gives some tips on basic proposal preparation.

• **Recommendation:** MSU should form a task force consisting of the Assistant Vice President ORED, the Director and Assistant Director of SPA Administration, and other members of the research community to explore an efficient model for offering faculty proposal development services.

• **Recommendation:** MSU should explore a model of sponsored program service centers for proposal and budget development to assist the smaller units that do not have the funding or the staff to assist faculty with their sponsored activities.
NCURA Standards 1.A.iii - Proposal Review and Submission

- **Recommendation:** The SPA Administration Director and Assistant Director should consider assigning one member of the staff to stay current with the new IT initiatives in research administration and to report these changes to management and other members of the staff.

- **Recommendation:** The Vice President for Research and Economic Development should consider using the Associate Deans for Research to explore the potential for campus-wide policies on items such as tuition remission.

- **Recommendation:** SPA Administration should conduct a survey of other research institutions to determine an appropriate level of proposal review for the office. Once determined they should develop and introduce the use of a proposal checklist to assure that every review is done the same for like-type proposals, such as NSF, NIH, or non-federal.

- **Recommendation:** MSU should evaluate the benefits of not applying the regulations of OMB Circular A-21 to non-federal grants and contracts.

- **Recommendation:** The Vice President for Research and Economic Development should explore revising the signature authority policy to allow for multiple authorized signers in SPA Administration to submit proposals.

- **Recommendation:** The Director of SPA Administration should assure that timely post reviews are conducted by SPA administrators for all proposals that are submitted with insufficient lead time prior to submission.

- **Recommendation:** The Vice President for Research and the Deans should communicate expectations to faculty in terms of the submission requirements for proposals.

NCURA Standards 1.A.iv Collaborative Project Development

- **Notable Practice:** The development of a grant program to encourage and support collaborative project development is creative and an excellent way for the campus to show support for such endeavors.

- **Recommendation:** SPA Administration should consider expanding the checkbox on its Internal Approval Sheet to additionally ask for a listing of the names and/or the number of the institutions involved in the proposed activity.
NCURA Standard 1.A.v. Agency Liaison

- **Recommendation:** Due to the increase in federal regulations, complexities in sponsor policies and application processes, and special funding opportunities SPA Administration should consider assigning responsibility to the more experienced administrators for monitoring and keeping abreast of select specific sponsors representing significant activity at MSU.

Award Acceptance and Initiation

NCURA Standards 1.B.i. Review and Negotiation of Terms and Conditions

- **Recommendation:** In order to quantify the turnaround time for award processing and assess the extent of any delays, SPA Administration should develop a method of tracking individual awards from receipt to account set up, with a calculation of total time transpired at critical steps.

- **Recommendation:** The SPA Administration Director should ask Legal Counsel to provide training that would allow a select group of individuals from SPA to review agreements for legal compliance and independently determine final acceptability of agreements.

- **Recommendation:** The SPA Administration Director should discuss with the Director of the Office of Technology Commercialization and the Export Control Review Officer developing a training program that would give SPA staff the knowledge needed to independently review and negotiate agreements involving common intellectual property and export control matters.

- **Recommendation:** Upon the SPA Administration staff’s successful completion of training in legal, intellectual property and export control reviews, MSU should revise its policy requiring Legal Counsel review of awards.

- **Recommendation:** The Review and Contract Negotiation guidance in SPA’s Internal Procedures Manual should be reviewed, topics added and more information provided on alternatives for acceptance.

- **Notable Practice:** Master agreement templates typically reduce negotiation time and allow funds to be accepted more quickly.

- **Recommendation:** MSU senior administration should consider revising the signature authority policy to allow for multiple authorized signers in SPA for the execution of bi-lateral grants, contracts and agreements.
NCURA Standards 1.B.ii. Ancillary Agreements Associated with Research Grants and Contracts

- **Recommendation:** Because material transfers and non-disclosure agreement terms are related to the protection or assumption of responsibility for intellectual property, MSU should consider re-delegating full signature authority for these to the Director or staff of the Office of Technology Commercialization.

- **Recommendation:** The Vice President for Research and Economic Development should engage in conversations with Procurement and Contracts regarding a re-alignment of responsibilities for independent consulting agreements.

- **Notable Practice:** The Employee-Independent Contractor Classification Checklist developed and reviewed by Human Resources is an excellent tool for decision-making.

NCURA Standards 1.B.iii. Subawards

- **Recommendation:** During proposal review and as the subaward is in preparation, SPA staff should document an analysis of risk associated with the subrecipient.

- **Recommendation:** SPA Administration and SPA Accounting staff should draft policy and procedures for subrecipient monitoring.

NCURA Standard 1.B.iv. Award Acceptance Process

- **Recommendation:** The Directors of SPA Administration and Regulatory Compliance and Safety should develop a reliable process that would provide SPA with timely information regarding regulatory committee approvals.

NCURA Standard 1.B.v. Award Activation and Notification

- **Recommendation:** SPA Administration, SPA Accounting and ITS staff should examine business practices and processing to eliminate redundancies in electronic data, data entry, and document files.

- **Recommendation:** SPA Administration and SPA Accounting should develop a shared process that presents a single information source to PIs and departmental administrators for award activation.
**Award Management**

**NCURA Standards I.C.i. and C.ii Fiscal and Administrative Management**

- **Recommendation:** SPA Accounting should form a team to evaluate the current financial research administration policies in place, develop a plan to create policies that are needed, and establish a central location and consistent format for institutional policies related to the financial administration of sponsored programs that aligns with those of non-financial research administration policies.

- **Recommendation:** SPA Accounting needs to establish a cost transfer policy and ensure that central and departmental administrators are aware of the requirements. As the policy and procedures are developed, they need to ensure that there are systems to address that compliance to the policy is monitored.

- **Recommendation:** SPA Accounting should assess the adequacy of the processes in place to review the allowability of costs.

- **Recommendation:** The Division of Finance and SPA Accounting should develop an effort reporting policy that clearly outlines the rules at a high level and look at the options for electronic effort reporting systems (including the use of Banner).

- **Notable Practice:** Having a staff member with a solid foundation of knowledge in facilities and administrative costs is very important for an institution with a research base the size of MSU’s.

- **Recommendation:** The Division of Finance should form a task force or consider bringing in consultants (given the lack of staffing in SPA Accounting) to conduct a review of business processes to identify where the use of electronic systems/options could increase efficiency and allow faster processing of documents and requests.

- **Recommendation:** The Associate Vice President for Research and Associate Vice President for Budget and Planning should evaluate SPA Administration’s involvement in the closeout and external audit processes.

- **Recommendation:** The Associate Vice President for Research and Associate Vice President for Budget and Planning should evaluate the tasks handled by SPA Administration and SPA Accounting to ensure that the most appropriate staff are assigned to tasks.

- **Recommendation:** MSU should develop and issue a formal policy for record retention.
Research Ethics

_NCURA Standard I.D.i. Project Integrity_

- **Recommendation**: The Office of Regulatory Compliance and Safety and SPA Administration should work toward an integrated data system to streamline processes between SPA Administration and the regulatory committees.

- **Recommendation**: The ORCS staff should investigate software options that would provide for researcher’s electronic submission of applications to all compliance committees.

- **Recommendation**: MSU needs to ensure that they have proper policies, guidelines and education in place to manage the risks associated with financial conflicts of interest. A task force should be formed to revise the policy and structure of this area.

- **Notable Practice**: The RCR Training Plan is comprehensive and provides alternative training and scheduling to students.

- **Recommendation**: It is critical that MSU move quickly to put a functioning review structure for financial conflicts of interest in place.

- **Recommendation**: MSU should consider requiring financial disclosures for all key investigators, regardless of funding source.

- **Recommendation**: MSU should consider appointing a core group of four or five faculty to serve two or three year staggered terms on the CIRC, bringing in additional faculty members when expertise is needed on a particular disclosure.

- **Recommendation**: The IAS question related to conflict of interest should be reworded.

- **Recommendation**: The SPA Administration Internal Procedures should be revised to include instructions on the review and routing of Financial Disclosure Forms.

- **Recommendation**: The SPA Administration Internal Procedures should be revised to indicate order of precedence for consideration of a disclosed financial interest and a request for pre-award spending.

- **Recommendation**: MSU should reconsider the assignment of record-keeping responsibility in revising the conflict of interest policy.

- **Recommendation**: The conflict of interest policy should reflect the responsible office to notify sponsoring agencies, as required, of the outcome of a review.
• **Recommendation**: The campus should make faculty and staff aware that the MURA approval process does not relieve investigators from completing financial disclosures required by federal sponsors.

• **Recommendation**: Approved MURA applications should be routed to the Research Ethics Review Officer, as stated in the Faculty Guide, in addition to the SPA Administration Director.

• **Recommendation**: The Research Ethics Review Officer should develop a database of positive disclosures and CIRC decisions, which can be cross-referenced with MURA approvals and disclosure information received by the Institutional Review Board.

• **Notable Practice**: The MSU Ethics Line offers anonymous reporting of actions perceived as inappropriate and provides for the subsequent exchange of information with the complainant.

**NCURA Standards I.D.ii Human and Animal Use**

• **Notable Practice**: A comprehensive list of IRB policies and procedures is easily accessible on the IRB website. Key topics are addressed by policies and procedures. A cursory review of the contents found the documents to be well written and complete.

• **Notable Practice**: The MSU web-based training menu for the use of human subjects in research is well done.

• **Recommendation**: The Director of ORCS should monitor the IACUC staff workload and response time to determine if action is needed to avoid delays or errors.

**NCURA Standards I.D.iii Biohazards, Radiation Safety, Bioterrorism**

• **Recommendation**: None.

**Export Controls/Deemed Export Regulations**

• **Recommendation**: MSU should revise the Export Control Management Plan to accurately reflect the current authorities and procedures. The Director of Research Security has the responsibility to work with faculty and obtain licenses for controlled items.

• **Recommendation**: MSU should revise the Export Control Management Plan to assign record retention responsibilities to the Director of Research Security.
- **Recommendation:** The Director of Research Security should provide regular reminders to faculty on the responsibilities related to export control.

- **Recommendation:** The Director of Research Security should meet with individuals in Procurement and Contracts, Accounts Payable and Shipping to inform them of export control regulations that may impact their areas of responsibility.
BACKGROUND, CHARGE, AND APPROACH

The National Council of University Research Administrators (NCURA) Peer Review Team would like to commend Mississippi State University for undertaking an open and comprehensive review of the research administration infrastructure. The strong support for research is evident with the decision of University leadership and the University community to engage in a process that allows all members to participate and contribute.

The NCURA Review Team especially believes it is a critical part of this review process to include experienced research administrators who have a national presence. This external validation allows Mississippi State University to incorporate best practices and models into their final action plans.

An evaluation of the research administration infrastructure, at Mississippi State University was conducted at the request of Dr. David Shaw, Vice President, Research and Economic Development and Mr. Don Zant, Vice President for Budget and Planning. The NCURA Peer Reviewers consisted of three individuals who all brought experience with sponsored programs operations (see Appendix B for bios of the peer reviewers). All Reviewers brought national-level experience on pre-award, post-award, departmental, and compliance operations, as well as a broad view of the academic environment and the interface of academic needs with research administration processes.

The Charge given to the Reviewers appears in Appendix C. Prior to the three-day site visit (itinerary appears in Appendix D) the Peer Reviewers received descriptive materials from the University covering policies, forms, and other information. The evaluation was performed in September 2011 (site visit on September 7-9, 2011).

The evaluation covered the Institutional Infrastructure and Core Operations of the National Standards for research administration. The review assessed the following broad areas:

1) **Institutional Infrastructure**, consisting of Organizational Structure; Communication, Outreach, and Education; Compliance and Risk Assessment; and Electronic Research Administration

2) **Core Operations**, consisting of Proposal Services; Award Acceptance and Initiation; Award Management; and Research Ethics

**Acronyms Used:**
- AFVM: Agriculture, Forestry and Veterinary Medicine
- CIRC: Conflict of Interest Review Committee
- F&A: Facilities & Administrative Costs or Indirect Costs or Overhead Costs
- IACUC: Institutional Animal Care and Use Committee
NATIONAL STANDARDS FOR SPONSORED PROJECTS OPERATIONS

The NCURA Peer Reviewers utilized the National Standards for Sponsored Project Operations, developed by NCURA, as guidelines to conduct this assessment. The Standards appear as Appendix A. The application of those Standards to Mississippi State University is described in the following sections of the report.

NCURA Standards for Institutional Infrastructure

The NCURA Standards for the Institutional Infrastructure are based on two key points. (1) The structure for sponsored programs should support all the needs of those activities at both central and departmental levels. Communications and coordination must be clear, and the lines of authority should be specified for each function. (2) Institutional resources, including staff, should be sufficient to support the core functions of sponsored programs in a manner consistent with the institutional mission.
NCURA Standards for Core Operations

Proposal Services: The NCURA Standards for Proposal Services focus on support of faculty and staff in the general areas of providing funding information, assistance in proposal development, review of proposals prior to submission, and monitoring sponsors for changes in process and policy. These Standards outline the importance of a thorough understanding of federal and non-federal policies, as well as the importance of disseminating a wide variety of information to differing audiences, routinely, clearly and with relevance.

Award Acceptance and Initiation: The NCURA Standards for Award Acceptance and Initiation focus on the areas of reviewing and negotiating award terms and conditions, subawards, formal acceptance of awards, and award activation and notification to appropriate parties.

Award Management: The NCURA Standards for Award Management focus on the areas of fiscal and administrative management. These Standards outline the importance of a thorough understanding of federal and non-federal policies, appropriate accounting mechanisms and internal controls and covers areas such as F&A rates, cost sharing, re-budgeting, time and effort, fiscal controls, cost accounting standards, cost transfers, cash management, program income, recharge centers, procurement, closeout, prior approval, reporting, record retention, data retention, subrecipient monitoring, intellectual property, and property control.

Research Ethics: The NCURA Standards for Research Ethics cover institutional systems for meeting federal and state regulations for the oversight and protection of certain populations involved in research, most notably the use and protection of humans and animals in research. These Standards also cover expectations for institutional systems for the oversight and protections involved in the use of radioactive materials, bioterrorism, conflicts of interest, and export controls. The Standards define expectations for linkages between the management of sponsored programs and the assurance of project integrity. Although not explicitly stated, the Standards suggest a broader expectation for an institutional statement or program on responsible conduct of research.

CURRENT ENVIRONMENT FOR SPONSORED PROGRAMS OPERATIONS

Any institution that is focused on developing a more research-intensive program faces a number of challenges. On one front is the challenge to change the culture of the institution to integrate a heightened focus on research. On the other front is the challenge to build an infrastructure that can nurture, facilitate, and support a growing research enterprise.

A growing research enterprise brings a measure of risk, accountability, and oversight to the institution that has not been previously apparent. Those measures are in response to a parallel growth in attention by the federal government that is evidenced by escalating policies, regulations, and oversight. This increased involvement of the federal government in research oversight has resulted in the need for higher degrees of specialization and education on the part of institutional sponsored programs staff. Institutions now maintain a delicate balancing act between developing the infrastructure for facilitating and moving forward research activities of
their faculty and providing sufficient oversight and internal controls to demonstrate accountability and to mitigate risk.

In the last five years, institutions have been especially impacted by the external environment. Reduced funding, increasingly large-scale and multi-disciplinary research, and collaborations with foreign scientists and business have all contributed to complex relationships and issues of ownership. The recent federal attention on institutional operations through audits, whistleblowers, and investigations has not only exposed our institutions to the public but has brought increasing levels of Congressional attention. The resulting attention on how institutions manage their relationships and the use of the public’s funds often results in tighter institutional controls and more restrictive policies imposed on both the university and faculty.

Many of our institutions are now recognizing that the growth of infrastructure and specialized expertise has not kept pace with the complexity of the current-day research relationships and the attention to government regulations and policies that are inextricably intertwined with the external funding.

Institutions that are transitioning into a greater focus on research will find that external funding is a double-edged sword. At even a relatively low level of funding, the federal awards carry all the rules, regulations, oversight, and accountability found at the top universities whose research enterprise is in excess of $1 billion dollars. It is critical that an institution have adequate staff, with appropriate training and resources, in place to handle the administrative burden imposed by accepting external funding. Mistakes in this area can be damaging to both individual and institutional reputations. In addition, sponsored programs offices are responding to deadlines not of their own making. Decisions and administrative actions must often be undertaken with virtually no advanced notice. Sponsored programs offices, pre- and post-award, must have staff in the office every day. Shutting down these offices for even short periods of time due to inadequate staffing can have both considerable short- and long-term consequences for the institution’s research enterprise.

The infrastructure supporting sponsored programs is always complex and it requires a periodic review to determine if it efficiently supports the efforts of investigators while also offering an adequate compliance posture with the regulations that underlie federal funding. There are trends in the approach to supporting faculty and to the direction an institution may establish in order to demonstrate its stewardship of sponsor funds.

This general discussion of the current national environment within which all sponsored programs operations exist and the special challenges for transitioning institutions will serve as a foundation for the more specific discussion of the pre- and post-award functions, project integrity, and institutional infrastructure issues for sponsored programs staffing, communication, and educational programs.

**INSTITUTIONAL INFRASTRUCTURE**

Many integral aspects of an institution’s infrastructure provide the framework for supporting the extramural funding of faculty and provide the necessary protections and accountability.
associated with that funding. The institution needs to attend to the organizational structure of sponsored programs and the lines of authority and responsibility that support research. Within the organizational structure, the institution must provide attention to appropriate levels of staffing, necessary expertise of those staff, and salary and promotional lines for staff.

Institutions must ensure that faculty and staff understand the requirements and expectations of the funding sponsors with whom they work, as well as key institutional policies and procedures and risk areas. Institutions must ensure that faculty and departmental/college staff have ready access to the body of knowledge needed to effectively oversee their sponsored projects. Key roles and responsibilities for those involved in the research enterprise need to be articulated to all participants and accepted, understood, and promoted (enforced). The institution must establish mechanisms to communicate key regulatory, policy or procedural changes to stakeholders, recognizing the varied roles of the participants. Appendix E provides examples of some NCURA resources that are utilized by institutions in their educational and professional development activities.

Organizational Structure

NCURA Standard II.A.i. Operational Structure

MSU, a land grant institution, has a long history dating back to 1878. It is a Carnegie Doctoral Research Extensive institution. They are the only institution in Mississippi holding this designation and only one of 108 nationally. MSU includes the state’s only Veterinary Medicine School and Architecture Program. The University is a major contributor to local and state economic development through targeted research, the transfer of knowledge, and the funding brought into the local area and State through their programs. The organizational structure of the institution is complex including eight Colleges, eleven Centers/Institutes and four Research and Extension Centers. Campuses and locations are spread throughout the state. Leadership and organizational structure varies fairly significantly between many of these units within the University.

The amount of total awards received by fiscal year at MSU has varied fairly greatly over the past five years. The spike in awards received was at $205 million in FY2007 with drops in FY2008 and FY2009, and FY2010 seeing another spike to $201 million. In FY2011, the institution received $155.6 million in awards. Much of the decrease in recent awards reflects not only the current funding environment but a significant reduction in seasoned researchers at MSU. An early retirement package was offered and accepted by a large number of researchers. With this change, a number of young and new researchers came to MSU, resulting in a significantly altered environment for the research environment at MSU. The large number of less experienced researchers creates the need for greater support and guidance from both the assigned central and the departmental personnel who provide administrative research support.

The institution has a relatively small central administration dedicated to research administration and research compliance, which includes:

- **The Office of Research and Economic Development** is led by the Vice President for Research and Economic Development. The Associate Vice
President for Research reports to this individual and oversees SPA Administration, Regulatory Compliance and Safety, Research Security, and the Animal Research Attending Veterinarian. The Assistant Vice President for Research also reports to the Vice President for Research and Economic Development. The role of this individual is described as the promotion of grant opportunities while serving as the primary point of contact for faculty inquiries on grants/grant development, the coordination of special research projects and research-related initiatives, and management of the research misconduct allegations.

- **SPA Administration** reports to the Director who reports to the Associate Vice President for Research under the leadership of the Vice President for Research and Economic Development. This office handles the pre award functions and select functions that would typically be considered post award for the institution.

- **SPA Accounting** reports to the Assistant Controller/Director for Sponsored Programs who reports to the Controller and Treasurer who reports to the Associate Vice President for Budget and Planning under the leadership of the Vice President for Budget and Planning. This office handles the accounting functions and some post award activities related to research administration.

- **Office of Regulatory Compliance and Safety (ORCS)** is a unit of the Office of the Vice President for Research and Economic Development and provides support and training in the regulatory requirements for the conduct of research for University faculty members, researchers, and students. ORCS oversees programs in human research protections, animal care and use, occupational safety, biological safety, radiological safety, fire safety, laboratory and environmental safety, chemical hygiene, and hazardous waste management.

- **Conflict of Interest** responsibilities fall under the responsibility of the Vice President for Research and Economic Development. There is no formal committee for these responsibilities (discussed later).

- **Office of General Counsel** reports to the President. They review and provide negotiation guidance on approximately 20% of all awards (limited primarily to contracts). (OGC reviews MOUs, NDs, MTAs and contracts.)

- **Office of Research Security (ORS)** is involved with projects that are classified or involve export control issues. The office reports to the Associate Vice President for Research. ORS was created by combining the Facility Security Office and the Export Control responsibilities formerly held by Sponsored Programs Administration. MSU is a cleared defense contractor or CDC. As a CDC contractor, MSU is a participant in the National Industrial Security Program that is administered by the U.S. Department of Defense through the Defense Security Service. MSU is also required to meet all regulations and rules for export control set forth by the U.S. State Department, Department of Commerce and the Department of the Treasury.
The central pre and post award offices, SPA Administration and SPA Accounting, have separate reporting lines. This model is not unique to MSU. SPA Administration is led by a Director who reports to the Vice President for Research and Economic Development. SPA Accounting is led by the Assistant Controller/Director for Sponsored Programs who reports to the Controller and Treasurer who reports to the Associate Vice President for Budget and Planning who reports to the Vice President for Budget and Planning. There are a variety of models for central research administration offices. Some organizational models reflect these departments brought together into one department. Others have two distinct departments reporting to the same individual/location. Others, like MSU, have distinct and different reporting lines. Any of these models can work. What is most critical is that there is a partnership between the two groups that values the full award process and understands that the ultimate goal is to ensure that a high level of efficient and appropriate support is provided to researchers (rather than focusing on “protecting the territory” of their own organization). In efficient operations with split reporting lines, the focus is on what will best support the research infrastructure at the university and not on who does what.

In the current model that exists at MSU, while the leadership is a group of dedicated and passionate individuals, they operate as two distinct operations and while some coordination has begun, there does not appear to have been much attention paid to evaluating the full award process and identifying what work distribution will most benefit the institution and its researchers. A change in reporting lines or bringing the two groups together as one organization can assist in transitioning groups to look more broadly at the processes that support research. However, evaluating the full award process and identifying work distribution can occur without a change in reporting lines and a change in reporting lines, if not properly implemented, will not in itself bring about a broader view of processes that support research. In order to achieve the highest level of efficiency possible, it will be critical for the institution to review the workflow from proposal through closeout and audit, and to define roles and responsibilities for those involved in the flow of documents. Any proposed change in the distribution of work needs to consider available staffing resources. Lack of staffing can contribute to a situation where decisions are made focusing on areas other than what is the most efficient and logical process.

SPA Administration is led by a Director who has been in the position for a year and a half. His direct report, the Assistant Director, has seventeen years experience in research administration and appears very knowledgeable in research administration and ready to move into more of a managerial role. The organization has 15 employees and additional student employees. The organizational structure is flat with all staff reporting directly to the Director. Several of the staff members in this office have been able to attend outside conferences to expand their knowledge. As briefly noted previously and detailed later in the report, this pre award group handles several functions that would normally be handled by a post award group while some functions that are normally handled in a pre award office are being routed to the Office of the General Counsel. SPA Administration has two JDs on staff, but continues to direct non-federal contracts and non-standard federal grants/contracts to the Office of the General Counsel. The General Counsel generally does not contact sponsors and the SPA Administration staff person becomes a messenger between the General Counsel and the sponsor. This is highly inefficient.
SPA Accounting is led by the Assistant Controller/Director who has 20 years experience in research administration. She presents herself as knowledgeable and dedicated to her role at the institution. There are five additional professionals in the department and two administrative support staff. As will be discussed further in the staffing section of this report, this level of staffing is significantly less than seen at other institutions of similar size. Because of minimal staffing, there are many key functions that are handled by one person and only one person has knowledge of select processes. This places the institution as a whole at risk. Many key business practices such as ARRA reporting are handled only by the SPA Accounting Director. Many people stated that the Director did everything and they would be lost without her. This places the department in a situation where they do not really have anyone functioning as a Director. When the Director is handling the day-to-day functions of the office, she is unable to “direct” and as a result is not evaluating areas such as process and system efficiencies and risks. Because of the lack of attention to these areas, this office is functioning similar to what would have been seen in a research administration office of 15 or more years ago, relying heavily on paper processes and inter-campus mail.

The small staff in this office has had almost no opportunity to attend outside conferences. This leaves the area lacking exposure to some of the issues that are relevant in today’s financial research administration environment. In order to design an appropriate structure for research support that focuses on the critical concerns and ensures that staff time is spent on value added activities, the staff needs to be exposed to outside professional development opportunities. While budgets may not allow all staff to attend, some who can attend could bring back information for others. SPA Accounting is the group in the best position to identify the areas of highest risk for the institution. If they do not have the knowledge to identify these issues, this opportunity is lost.

- **Recommendation:** SPA Administration and SPA Accounting should jointly assess peer institution pre- and post-award operations to determine the appropriate location for duties and align functions to the mission and purpose of the departments involved. A closer examination of the duties and responsibilities handled in SPA Administration should be conducted (e.g. handling audits or property reports). An additional evaluation of those activities not handled in the office but rather in the Office of General Counsel should occur. Appropriate realignment of duties with consideration to models of peer institutions could help to better articulate the functions and focus of each unit and the ways in which they mesh.

The Colleges and Centers have a variety of different structures and overall they function very independent of each other. The level of support available to researchers varies greatly by College or Center. Centers are reported to have stronger support in place for researchers. Since researchers have some choice in where they route proposals, some have an opportunity to route through the Centers. However, where proposals are routed does impact indirect cost distribution and departmental credit. As a result, there is a belief that this could impact their department or their own tenure so some are hesitant to route proposals outside of their department. The differing organizational structures and business processes/procedures create a variety of challenges, particularly in a period where collaborative research is increasing. Numerous faculty and administrators expressed frustration regarding the challenges related to doing work that
crosses College, Center, and even departmental lines. Some faculty members report having strong local support while others report having limited or no local support.

MSU is clearly in a transition period with a change in researchers and their level of experience in research as well as fairly new changes in leadership with a relatively new Controller and Director for SPA Administration. Much positive feedback was received regarding the changes that are occurring in SPA Administration and SPA Accounting.

- **Notable Practice:** The new leadership and changes that have begun to occur over the past one to two years were noted by most who were interviewed. People expressed strong support and respect for the new leaders. Many are positive and anticipating more progress to come. They noted that the institution investing in the NCURA Peer Review was a further demonstration that the institution was serious about improving the support available to their researchers. It will be imperative to manage future initiatives well and communicate progress to keep the research community’s current faith levels high. Some changes will take time and if they don’t hear about progress, they may begin to feel that it is not happening.

This transition period has revealed a number of areas where there is some confusion over roles and responsibilities. Not only have there been changes in leadership positions, but the composition of the faculty has changed. The many stresses to sustain a research enterprise with increasing unfunded mandates and slim or understaffed operations have resulted in misplaced functions. All of these factors suggest that it is an appropriate time for the institution to broadly look at the roles and responsibilities surrounding the facilitation and management of sponsored programs.

- **Recommendation:** A task force should be formed to evaluate and define the appropriate roles and responsibilities of those involved in the administration of research at the local level as well as the organizational structure for the support of research administration. This should include the development of a plan to ensure that the designated roles and responsibilities are put in practice. The task force should consist of members of the central and the departmental/college/center offices as well as faculty members. After the University and stakeholders have reviewed and clarified what roles and responsibilities should be in place, the institution should develop a plan to identify how these responsibilities can be best accomplished with the staffing resources available. A timeline should be developed for rolling out different levels of responsibilities and levels of authority/support. Ensuring that everyone involved is educated with the knowledge required to administer sponsored programs needs to be an important consideration in this process. Several institutions are looking at new and innovative ways to more efficiently manage the administration of research. Some examples are as follows:
  - [http://operationalexcellence.ucsf.edu/work-groups/pre-award-implementation](http://operationalexcellence.ucsf.edu/work-groups/pre-award-implementation)
  - [http://frms.yale.edu/](http://frms.yale.edu/)
There is a need to reconsider the personalized approach to research administration and to develop a strategic vision for a new organizational structure. A reassessment of structure provides an excellent opportunity to explore faculty needs, the current division of responsibilities, and where best to place resources or individuals to have the process optimally fit together to support the research enterprise. Examples of university’s roles and responsibilities matrix can be found at:

http://www.research.northwestern.edu/ori/ RolesResponsibilities/instructions.html
http://www.rochester.edu/ORPA/rules/roles_admin.htm
http://www.hms.harvard.edu/spa/docs/reference/roles.pdf
http://www.uncg.edu/rss/pdfs/ ResponsibilityMatrixSponsoredPrograms.pdf
http://www.ovpr.uga.edu/docs/tools/osp/restricted-projects

The breadth of the recommendations within this report go beyond the purview of these two offices and into other areas involved in research administration at the institution, such as Office of General Counsel, the compliance committees, and the Colleges/departments/Centers. To help insure a successful change process, MSU’s senior administrators need to be brought into the discussion on a variety of the focus areas so that they understand the issues involved and can demonstrate their support.

- **Recommendation:** The Vice President for Research and Economic Development and the Vice President for Budget and Planning should initiate/sponsor the development of a carefully designed plan that lays out the institutional changes necessary to provide a more efficient and effective research administration. This plan needs to include periodic points of discussion with senior administration. There must be active participation and contributions from the other areas involved in research administration to look at all the needs of the research community. Participation should include members from all areas of the research enterprise and not just faculty or central staff. Some of the necessary improvements will require support from upper leadership.

MSU has established an external organization, Research & Technology Corporation, a 501(c)3 non-profit entity that is independent from MSU and established to foster the development of MSU’s research and technology. RTC manages intellectual property, real property and some sponsored agreements. An additional organization, University Technology, a limited liability corporation, was formed to handle those business transactions that impose liability upon MSU or RTC. Material Transfer Agreements and contracts requiring MSU to assume third-party liability (and other terms and conditions that are in conflict with State laws) are routed through the LLC. Many times, agreements are transferred from MSU to the RTC or LLC after long, unsuccessful negotiations. MSU is in the process of hiring an individual to negotiate industry contracts, at which point all future industry contracts received by MSU will be processed through RTC and then subcontracted to MSU.

After speaking with many individuals who appear to understand the boundaries of these three organizations, the Reviewers can only conclude that the division of authority among the three organizations is blurred as it relates to sponsored projects. While no formal recommendations are being made regarding RTC, some observations of the Reviewers are provided below:
There appears to be a less than arms-length relationship among MSU SPA, RTC and the LLC. MSU Vice Presidents (ORED and AFVM) alternate as President of the RTC. The Director of SPA decides when an agreement cannot be accepted by MSU and refers the agreement to the RTC/LLC for acceptance.

There is no clear differentiation of responsibilities between RTC and the LLC for research by MSU faculty. The question is which organization takes the lead, and why. One statement provided to the Reviewers is that it is sometimes “necessary to utilize either RTC or the LLC because of legal language” that is unacceptable to MSU. A concise statement regarding the responsibilities and involvement of each for sponsored research would be appropriate. The document entitled “SPA/RTC Roles and Operating Procedures,” draft dated November 1, 2011, provides basic information on the relationship and should be expanded to include clear, concise guidance to a wide audience.

Documents indicate that RTC was designed to take advantage of opportunities not otherwise available to state universities (i.e., equity positions in startup companies) and to promote development of new businesses and industries formed to take MSU technology and intellectual property into the marketplace. The Review Team found no document that formally assigns responsibilities to RTC or the LLC for MSU sponsored research. Additionally, no document was found that limits the transfer of sponsored projects agreements to RTC or LLC. The Reviewers were told that terms related to third-party liability, warranty of work, or the imposition of out-of-state governing law are unacceptable under Mississippi State law and, therefore, agreements with these terms could only be accepted through RTC or LLC. Other staff mentioned that any agreement with unacceptable terms could be transferred to RTC or LLC for acceptance. It is unclear if federal flow through funds can be routed through the RTC. The impression is that RTC and the LLC could sign all MSU agreements if so requested, which indicates the possibility of quickly expanding authority and leads to confusion on the campus and in the sponsor community related to the responsibilities of SPA, RTC and LLC. The above mentioned draft SPA-RTC Roles and Operating Procedures (provided following the review), Roles and Responsibilities document begins to better define the shared operational responsibilities between MSU and RTC/LLC.

Because RTC and the LLC are able to accept terms that would otherwise be unacceptable to MSU, the Reviewers wonder if RTC and LLC have any internal policies regarding contractual language that they cannot accept. This area of concern is also addressed by the Roles and Responsibilities document.

RTC’s funding of a contract negotiator reduces the workload on existing SPA staff and legal counsel; however, there does not appear to be thought given to the additional use and reimbursement of MSU resources (personnel, supplies), since the negotiator will be housed in the SPA offices.
With RTC or the LLC acting as the prime award recipient for a larger number of activities, staff will be required to prepare subawards to SPA to fund MSU investigators. The Review Team was unable to determine if RTC and the LLC have sufficient infrastructure in place to manage an increase in funding that will flow through RTC and the LLC if all industry contracts are transferred to them.

It is unclear how proposals to industry sponsors will be identified and routed if RTC is to be the award recipient. In similar circumstances, the MSU internal approval sheet would show the sponsor is RTC and the industry sponsor is the prime sponsor. Awards to MSU then would be categorized as subawards from a nonprofit sponsor, rather than contracts from industry. Because awards to RTC will affect the analysis of sponsored projects data and reports, clarification should be provided to staff that will perform the data entry into Coeus and Banner. And, a communication regarding proposal submission and award processing should be issued to faculty.

As an example, instead of parsing responsibilities for various sponsors in order to deal with certain issues, MSU could take steps to align responsibilities and authority in an integrated fashion. Such a model might call for SPA to accept and negotiate all sponsored project agreements through the University. SPA would assemble and lead a negotiating team, including representatives from OTC and/or RTC, for agreements that demand expertise with intellectual property matters and non-standard language. When a project involves further support of research on MSU/RTC-owned technology, it may be appropriate to have OTC take the lead in negotiations. In either case, the agreement would be administered and executed by SPA. The document entitled “SPA/RTC Roles and Operating Procedures,” draft dated November 1, 2011, provides contract language options related to intellectual property.

One suggestion for the intellectual property clauses described in the Roles and Operating Procedures is to provide sponsors with a “first right to negotiate” a license, rather than a “first right of refusal.” The “right of refusal” requires the University, if an agreement cannot be struck, to market the invention and then bring its best deal back to the sponsor and offer those terms. It is hard to deal with the second company in good faith with the first right of refusal term in place. In the case of “first right to negotiate,” if a deal cannot be struck, the University is free to go elsewhere and not be obligated to return to the original sponsor.

NCURA Standard II.A.ii. Staffing and Resources

The Review Team heard mixed feedback on the service provided by the staff in SPA Administration and SPA Accounting. Those interviewed reported significant inconsistency in the knowledge and support provided by various members of SPA Administration. Since this office has experienced considerable turnover and has many new staff members, this is not surprising.

Staff from both SPA Administration and SPA Accounting noted that there is a pay difference between the staff in these offices and that the staff members in SPA Accounting were paid lower. Both felt that this contributed to the tension that exists between the offices. The level of pay between pre and post award staff varies between institutions throughout the country. While
some institutions may pay pre award staff somewhat higher, others will pay accounting staff higher. As the demand for accountants has increased in recent years, the salaries have increased to remain competitive. Like the pre award staff, accountants that specialize in research administration need to have a high level of expertise to successfully function in their roles. Similar to a tax accountant, these accountants hold specialized knowledge and are generally compensated for that knowledge. Frequently institutions are not able to hire accountants with a strong background in research administration. A career track allows institutions to hire staff at lower salaries providing opportunities for advancement and salary increases later as their knowledge increases. This will also allow the central department to retain the knowledge they have built within their department. When compensation does not increase appropriately with experience, it is common to see staff leave for other opportunities in departments or at other institutions where they can receive increases in salary and developmental opportunities. Retaining experienced staff in the central office is essential to creating a successful central office. The local administrators are told to rely on the central offices as the “experts.” Meeting these expectations becomes impossible when the central staff is less experienced than the local administrators.

SPA Administration has job roles set up in what appears to be a career track. However, the staff members report that they all perform the same job. While it is understood that staff members may not always be able to identify the differences in number or complexity of agreements, there should be well-defined job responsibilities that do include some higher level tasks and responsibilities for higher level staff and this should be communicated to staff.

- **Recommendation:** The Director of SPA Administration and the Assistant Controller should develop career tracks for their departments which are designed to develop and retain staff. Human Resources should be involved in the development of these career tracks. A market review of salaries is recommended for both SPA Administration and SPA Accounting due to the high volume of turnover and other concerns noted. Attachment F provides an example.

Another issue that contributes highly to staff turnover is when staff members are not able to feel successful in their roles. Research administration is a very complex area. When the workload exceeds what an individual can effectively accomplish and they are not provided with the support and education they need to build their knowledge, they do not have the opportunity to feel successful in their role and become frustrated. Frequently, the next step will be to seek other opportunities. In other cases, staff performance and/or morale is impacted. Staffing levels in SPA Administration are lower than seen in some similar sized research institutions. Staffing levels in SPA Accounting are drastically lower than what is typically seen in similar sized research institutions. While staffing depends on the distribution of responsibilities, typically at institutions, there are more post award staff than pre award staff.

- **Recommendation:** MSU should conduct a review of peer institutions of similar expenditure or award volume to gain a better understanding of the number of staff generally in place to centrally support research administration. This can vary greatly because the distribution of responsibilities that are handled between the pre award, post award and
other offices involved in research administration varies greatly by institution. As previously described, the staffing levels are somewhat lower than typically seen in SPA Administration and significantly lower in SPA Accounting. Any comprehensive review of required staffing levels should begin with a review of the needs of the institution, the distribution of activities and the staffing needs to support that model. It is a complex process to compare the staffing levels in research administration offices in different institutions since the distribution of activities between central offices and departments can vary significantly. However, as requested, the Review Team provides below some examples of staffing models at other land grant institutions. None of these should be used as a clear model without further discussion with those institutions regarding how the work is distributed.

It is necessary to note that there is a basic foundation of staff required for the administration of sponsored projects in both pre and post award offices. As awards increase, total staffing in the office does not need to increase proportionately. Because of the need for this basic foundation of staff, when reviewing other institutions it should not be interpreted that because one institution has twice as much research, they would require twice the staff. In reality, the larger institution may only require approximately 60% additional staff. For example, if responsibilities were distributed similarly between offices in an institution with a research base of $310m, they would require approximately 60% more staff than an institution such as MSU with a research base of $155. These are general estimations. Currently, there is no precise model or calculation to determine the exact number of staff required to support research. Further information on organizational structures at other land grant institutions are provided below.

- Rutgers, The State University of New Jersey (research base $433m)
  - Pre Award - [http://orsp.rutgers.edu/sites/orsp.rutgers.edu/files/Visio-ORSP%20chart3.pdf](http://orsp.rutgers.edu/sites/orsp.rutgers.edu/files/Visio-ORSP%20chart3.pdf)
  - Post Award - [http://postaward.rutgers.edu/personnel.html](http://postaward.rutgers.edu/personnel.html)

- University of Kentucky (research base $299m)
  - Pre Award - [http://www.research.uky.edu/ospa/info/staff.html](http://www.research.uky.edu/ospa/info/staff.html)
  - Post Award - [http://www.uky.edu/EVPFA/Controller/sponsor.htm](http://www.uky.edu/EVPFA/Controller/sponsor.htm)

- University of Georgia (research base $251)
  - Pre Award – See OSP [http://www.ovpr.uga.edu/about/directory](http://www.ovpr.uga.edu/about/directory)
  - Post Award - [http://www.busfin.uga.edu/contracts_grants/staff1.htm](http://www.busfin.uga.edu/contracts_grants/staff1.htm)

- **Recommendation:** MSU should strongly consider increasing staff immediately to provide needed support while they conduct a review of peer institution staff models and develop their long term staffing model. Because it will take some time to conduct an analysis of the appropriate staffing levels for these offices, a recommendation would be to add two positions in the SPA Accounting Office in the near future to assist while any broader staffing review is occurring.
**Recommendation:** MSU should explore other organizational models for work assignment within SPA Administration and SPA Accounting, e.g. organized by constituency or creation of agency “liaisons” that strengthen the alignment between offices, departments, centers and sponsoring agencies. When pre and post award office staffing levels are at less than ideal levels, one way to better manage the work is to assign work by sponsor or type. This allows staff to become experts in specific areas rather than generalists. It can result in a well trained staff in less time and allow staff to feel successful in an environment when they can become a “Sponsor Expert” rather than being buried in a sea of information that seems impossible to ever comprehend in the foreseeable future. One other option is keeping a structure where staff members remain assigned to researchers/departments but are also assigned to sponsors as the designated expert. For these sponsors, part of their responsibilities will include staying up to date on sponsor requirements and communicating them to the office. This will provide SPA staff with a resource if they have a question about an area, will allow the staff member to develop an expertise and will allow the relationships between individual staff members and the departments to continue.

In the pre award area, many institutions find value in separating the staff responsible for grants and for contracts. The background and skills required for these two areas can vary significantly. When these areas are handled by the same staff, contracts frequently do not get the attention they require as staff are pulled away to meet grant deadlines. It is recommended that SPA Administration consider assigning staff solely to one of these areas.

**NCURA Standard II.B.i. Communication and Outreach**

In the ever changing environment that surrounds research administration, effective communication is critical to ensuring compliance with federal and sponsor regulations as well as maintaining a highly efficient research administration infrastructure. Lack of communication frequently results in administrators making poor decisions and taking inefficient or unnecessary actions.

SPA Administration and SPA Accounting both have websites that provide a variety of information. There is lack of consistency between the look and functionality of these two websites. Those interviewed expressed confusion at knowing which website to look on for specific issues and frustration with not being able to find the information they needed. Both websites include links to policies. Some of the policy links lead to home pages of other departments, memos, or policies/procedures in a variety of formats. Most policies have dates of last update or issuance; some of the dates are over 10 years old.

During the site visit, it was stated that information such as policy or sponsor guideline changes are shared with the research community via a list of email addresses; however listings of email addresses can easily become outdated with staff changes in the departments/Centers. Information is shared through direct one-on-one communication between members of the
research community and SPA Administration or SPA Accounting staff. There is no general 
listserv or research administration newsletter in place. A newly developed newsletter/magazine 
to share information regarding Research and Economic Development News began production 
this spring.

The Review Team meetings with faculty members revealed that some appeared to be 
unfamiliar with research policies and expressed difficulty in knowing where to access current 
policies. As a result of the difficulty in accessing information or learning of changes to policy or 
process, information is not well communicated to those who need the information.

- **Notable Practice:** “Maroon Research” is a well-done and comprehensive 
magazine that provides information regarding research and economic 
development news. This magazine is well organized and should continue to be 
published on a regular basis.

- **Notable Practice:** The FAQ’s on SPA Accounting’s website are a useful tool 
to administrators and could be expanded to cover additional areas.

- **Recommendation:** MSU should identify a task force to develop a research 
administration communication plan for the institution. This plan should 
include the following types of communications and identify form, frequency, and 
who is responsible for each.
  - **Communication with senior leadership:** Regular and timely communication 
between those involved in day to day research administration activities and 
those ultimately responsible for the performance for the offices should be 
established.
  - **Creation of a listserv:** This will provide an easy to maintain method to 
communicate with those who need to receive communications regarding 
research administration. It provides those interested with an easy way to 
subscribe and unsubscribe to the system.
  - **Policy communications:** As a standard practice, when a policy has been 
updated, approved and posted to the policy webpage, SPA Administration or 
SPA Accounting should send a formal communication to all appropriate 
stakeholders (faculty, deans, chairs, college financial departmental and center 
administrators).
  - **Websites:** SPA Administration and SPA Accounting should form a committee 
to review the current websites and to evaluate what sponsored program 
information needs to be added or organized in a clearer fashion to best meet 
the needs of faculty, staff, and administrators. Separate websites can work but 
should include links to each other’s sites and preferably be in a similar format 
to allow those seeking information to locate it without significant difficulty. 
An example of a well organized website can be found at: 
[http://www.ovpr.uga.edu](http://www.ovpr.uga.edu)
  - **Research Community Communications:** SPA Administration and SPA 
Accounting should establish effective and regular meetings and
communications with their offices and the college/center and departmental administrators to enable a cohesive partnership that provides knowledge sharing, discussion of processes and process improvements, as well as specific research administration topics. Larger group meetings and smaller groups should be formed in order to concentrate on specific topics.

- **Newsletter:** SPA Administration and SPA Accounting should consider co-sponsoring a periodic research administration newsletter or communication. Consideration should be given to issuing a newsletter that represents all of the central offices supporting research. Using the newsletter to communicate about grant, contract, and research compliance issues illustrates and affirms the strong partnership between the offices and the dedication to seamless support. Areas highlighted might include communicating policy and other changes, outlining tips for accessing award or financial information in the existing systems and sharing training schedules. Continuing the current targeted electronic newflashes for time-sensitive issues and reminders is recommended, but having a regular newsletter provides an efficient vehicle for communicating general guidance and important changes. Newsletters can be developed in an email format or in word. Other programs such as Adobe InDesign can be most efficiently utilized after attending a half day in person or online course.

Examples of newsletters at other institutions can be found at:

- [http://www.siue.edu/graduate/research/pdf/November_2008_2.pdf](http://www.siue.edu/graduate/research/pdf/November_2008_2.pdf)
- [http://www.osca.emory.edu/shared_web/newsletters.cfm](http://www.osca.emory.edu/shared_web/newsletters.cfm)
- [http://www.umassd.edu/grants_contracts/newsletter09.pdf](http://www.umassd.edu/grants_contracts/newsletter09.pdf)

Overall, the SPA Administration and SPA Accounting websites provide basic information on general topics. A “Faculty and Staff Guide to Research Administration” handbook can be accessed from the SPA Administration website. The Guide includes high level, general information on roles and responsibilities as well as general guidelines for proposal preparation and submission. There is very limited information regarding activities surrounding the receipt of the award or administration of the award. While the existing Guide appears to have been developed by the pre-award office and naturally includes those areas of responsibility, shared ownership of materials such as this often help faculty access information on the entire spectrum of proposal and award resources and responsibilities.

- **Recommendation:** The "Faculty and Staff Guide to Research Administration” should either become a shared Guide with SPA Accounting and be expanded to include information regarding post award activities or a counterpart post award Guide should be developed.

In both faculty and administrator meetings, as well as meetings with SPA Administration and SPA Accounting, it was noted that there was some tension between staff of the SPA Administration and SPA Accounting. Researchers and administrators reported being sent back and forth between the offices because the offices did not “talk.” In recent months, meetings with
the higher-level managers of the two offices have begun. The staffs of the two offices have not been brought together in approximately a year.

- **Recommendation:** The leadership of SPA Administration and SPA Accounting should establish effective and regular meetings and communications between the staff of both offices (not just the managers). In addition, other types of team building and educational occasions should be organized to bring the groups together. The staff should participate in joint business improvement projects or shared policy and guidance documents. Building collaborative relationships between these groups is essential to a strong research administration enterprise.

- **Recommendation:** The leadership of SPA Administration and Research Compliance should establish effective and regular meetings to ensure that communication occurs as needed.

**NCURA Standard II.B.ii. Education**

SPA Administration has recently begun offering organized educational sessions for researchers and administrators. These have been very well attended and many praised these offerings. Some of the sessions reached maximum capacity where some had to be turned away. Because of the offering of an early retirement package, many experience researchers left the institution and new faculty joined the institution. This creates a high need for a strong structure of education and guidance.

- **Notable Practice:** It is commendable that SPA Administration is offering educational courses for the new faculty researchers. It is highly commendable that they have been able to attract many faculty to attend these sessions. Many institutions struggle in attracting researchers to attend similar offerings.

A training manual for SPA Administration staff has been developed and is available. A similar manual is not available for SPA Accounting. Both SPA Administration and SPA Accounting staff report that they received their training “on the job” and training is not readily available or consistent between staff members. Knowledge regarding OMB Circulars and general research administration policies seemed to vary greatly amongst both pre and post award staff. While managers had a clearer understanding, some of the staff reporting to them had limited knowledge. All staff involved in research administration should be cognizant of the OMB Circulars. As federal regulations change (e.g., implementation of the Federal Financial and Transparency Act), it is necessary to have staff appropriately educated in the implications and reporting requirements.

- **Notable Practice:** SPA Administration has a training manual available to their staff. This manual is generally well organized with a variety of visuals to assist in understanding the concepts. Manuals such as these are a great asset to staff. The expansion of this manual or creation of a similar manual for SPA Accounting would further strengthen the research administration infrastructure. However, these manuals must be kept up-to-date at all times.
**Recommendation:** MSU needs to explore avenues to further develop and expand current educational opportunities into a comprehensive educational program for the central, College and departmental administrators involved in research administration at the University as well as educational offerings for researchers. Lack of this knowledge places uninformed staff in positions where they may make uneducated/incorrect decisions on behalf of the institution. Staff who feel unable to be successful in their roles due to lack of knowledge and support will frequently experience low morale and seek other career opportunities resulting in a high level of turnover of staff. It also creates an inefficient work environment where staff members are checking items that may not require checking, rather than spending time on the areas where requirements warrant review. Expansion of the current educational opportunities into a more comprehensive program is one option. The University could consider developing and offering a certification in research administration to MSU central and department administrators. This has been successful at other institutions. As the funding environment continues to become more competitive, having knowledgeable administrators to support researchers can be critical to increasing capacity for competing for funds. Educational opportunities should include pre and post award topics.

*Examples of training programs in research administration offered by other institutions can be found at:*
http://ora.stanford.edu/cardinal/
http://www.upenn.edu/researchservices/SPCCP/
http://www.osp.emory.edu/shared_web/training.cfm

Other options to offer educational opportunities include sending staff to outside training. NCURA offers three day workshops on a wide variety of sponsored program administration. This can be done on-site or staff can travel to a location to attend with representatives from other institutions. Further information on a range of educational opportunities through NCURA can be obtained in Attachment E.

**Recommendation:** MSU should strongly consider adding an additional staff member who is dedicated to research administration education and communication. When these responsibilities are assigned as “extra duties” to research administration staff, they become activities that staff put off “until they have time.” Due to workload demands, education and communication ends up not receiving much or any attention. The knowledge required for the proper administration of sponsored funds is extensive and there is a high risk associated with having inexperienced staff in the departments and central offices. Currently, there is not a formal process in place for educational activities or a staff member assigned to this.

**Recommendation:** Pre and post award central staff should be provided regular educational opportunities to maintain and increase their knowledge level of research administration. This can be accomplished by formal training
such as that offered at the NCURA national and regional meetings and conferences, networking with other institutions, joining some of the sponsored program list-serves and brown bag luncheon sessions with topics of interest delivered by different individuals.

**NCURA Standard II.C.i. Compliance and Risk Assessment**

Risk assessment denotes the identification of compliance or other issues that have significant impact at the institutional level. Risk assessment measures the risk, potential impact, and the possibility of harm to an individual or the institution. It is essential that institutions carrying out research programs and projects conduct formal and periodic assessments of sponsored programs policies and practices, including the assessment of emerging risk areas. MSU currently does not have a risk assessment program.

The senior management at MSU is acutely aware of compliance issues and has the knowledge about risk assessment. Two of the senior managers were formerly from the Office of Internal Audit and now serve in roles that directly affect the daily activities of research administration. The Vice President for Budget and Planning was the Director of Internal Audit and the Director of Sponsored Programs Administration served as an internal auditor at MSU for over a decade.

The responsibility for research-related compliance is distributed between many offices and individuals:

- The Assistant Vice President, Research and Economic Development has the oversight and management responsibility for misconduct in science and recently has been given the oversight of federal financial disclosures and conflict of interest policies and procedures;
- The Director of Research Security deals directly with all classified, secret, and restricted research, and has currently taken over the responsibilities for export control issues, including ITAR policies and procedures;
- The Office of Regulatory Compliance and Safety is responsible for the management of the compliance committees, such as the IRB, the IACUC, and the IBC, as well as, other regulatory review committee activities;
- The Property Officer, who manages the capital assets for the institution does periodic audits of federal equipment throughout the institution;
- The Office of Internal Audit is the office mandated with the responsibility to conduct independent reviews of university operations in the areas of risk management, internal controls, and governance processes.

While the official responsibilities for compliance and risk assessment is distributed widely at MSU, in practice the Office of Internal Audit is the area responsible to perform the traditional role of testing and evaluating University operations, processes and internal controls including those related to sponsored programs administration. The office is responsible for managing and
coordinating all external audits from outside agencies, as well as the annual OMB A-133 financial and procurement audit.

Internal Audit has an advisory function and has independent status within the University. The Director of Internal Audit reports directly to the President, with a dotted reporting line to the Audit Committee of the Board of Trustees, and is independent of any other University section, branch or officer. The role and objective of the Office of Internal Audit is:

“Office of Internal Audit will assist the President in achieving sound managerial control over all aspects of the operations of the University, including accounting, asset management, information management and control systems, and other such activities. The office will also coordinate audit activities throughout the University.”

As noted elsewhere throughout this report, due to budget cuts and other institutional priorities, administrative offices are very short staffed; the Office of Internal Audit is no exception. There are currently three auditors (including the Director) and an audit assistant. The Director is an experienced auditor having previously worked in MSU’s Office of Internal Audit and recently returning to MSU to direct the office. With a fairly new Director and a very small staff, the office has been unable to assume some of the duties often done by similar offices in other institutions such as developing and initiating a comprehensive audit program for financial research compliance.

While a comprehensive audit program has not yet been implemented, the Office has been able to conduct two audits related to research administration in the last few years, one on Time and Effort Reporting and the other on ARRA. The Director reported to the Review Team that she is spending a considerable amount of her time fielding, researching, and answering questions that are generally the responsibility of other central post award offices. For example, the Director stated that she received many calls about what are appropriate and allowable expenses to charge to sponsored projects, including on and off campus rates.

It is unusual to find Internal Audit involved in responding to specific questions about sponsored projects. Given the high amount of time spent by the Director on areas that would traditionally and typically be handled by sponsored program offices, it appears that there are some systemic issues related to roles and responsibilities between offices. As a result of Internal Audit effort being directed towards answering routine sponsored program questions, the office has not yet conducted regular and comprehensive sponsored programs management-level type audits that determine risk to the institution. These audit priorities should be established and the schedule of audits communicated to the research community and carried out in a timely fashion. The Review Team understands that this process is in place with audits involving Colleges and departments, but not so with issues that are directly related to research administration at MSU.

- **Recommendation:** The Directors of the Office of Internal Audit and Sponsored Programs Administration and Accounting should clarify the roles and responsibilities of each office and develop appropriate communication mechanisms to direct inquiries to the appropriate office. Clarifying the roles and responsibilities for Internal Audit and appropriately directing inquiries would be a first step to freeing valuable time to concentrate on sponsored program areas.
that need attention by Internal Audit, such as audits of cost transfers, allowable costs charged against federal projects, or conflict of interest.

Working with the Controller, the Directors of SPA Accounting and SPA Administration should establish a contact point that will answer questions redirected by Internal Audit.

The Director of Internal Audit noted that the areas of greatest concern for campus risk were the lack of training for members of the research community, out of date policies and procedures, and very weak support for the post award functions in SPA Accounting.

- **Notable Practice:** The Institution has conducted two very important audits in the last few years in areas of high risk.

- **Recommendation:** Due to the importance of risk assessment and management reviews in research-related matters, MSU may want to consider establishing a standing committee to evaluate research risk and to recommend audit priorities for review. This committee could suggest priorities for the Office of Internal Audit to review and audit areas in research-related processes and policies, including those under the auspices of the Controller. The committee should consist of the Director of Sponsored Programs Administration, Director of University Audit, the Controller and other participants in research administration such as faculty, deans and Legal Counsel when applicable.

The background materials provided to the Review Team included a “Report of the Research Infrastructure Committee.” The Office of Research and Economic Development (ORED) commissioned this report. The committee was charged with evaluating the future research infrastructure needs and the effectiveness and efficiency of the current research infrastructure system. The committee identified areas to review and made many excellent observations about the present areas of concern, as well as suggestions regarding future improvements. Areas identified for study in the review were: safety and regulatory requirements, administrative needs to enable smooth functioning of research projects, instrumentation needs, facility needs, and communications. The Review Team believes it is important for the institution to continue with the consideration of some of these suggestions, most importantly to continue work on the Administrative Business Processes, in particular the functioning of Research Technology Corporation (RTC) and MSU. The Team heard from several of the participants that they are not aware of any of steps taken by senior administration regarding the committee report.

- **Notable Practice:** Commissioning the Report of the Research Infrastructure by ORED was notable. The report was well done, areas identified for review were well thought out, and suggestions on the whole were well balanced. This is an excellent example of a management review on the overall risk and business assessment at the institution.

- **Recommendation:** MSU management should continue to work through the suggestions made in the Report of the Research Infrastructure and to
communicate back to the participants the plan of action to be taken, what will and will not be accomplished by the institution.

At many institutions, there is increasing attention on critical administrative operations and the need for a regularly occurring review cycle, as is found in academic program reviews. While the form for such review can be varied (internal or external), the process establishes an expectation for attention on the operational effectiveness, how well that operation succeeds in a fluid environment, and a venue for faculty to comment on process.

There are a number of techniques used by institutions of higher education to periodically review the effectiveness of sponsored programs, to assess operations for areas of improvement and currency, and to review for compliance or risk. Techniques may include:

- Self assessment
- Institutional defined program of review for administrative units
- Assessment of programs following internal or external audit or investigation findings
- Scheduled reviews of program components by Internal Audit
- External program review

- **Recommendation:** The Vice President for Research and Economic Development should establish a regular review cycle for SPA. A review of the program that occurs regularly will enable continued attention on operational effectiveness and serve as a source of information for future decision-making. Such a review enables stakeholders to provide input.

Throughout this report, training and education is recommended that would enable MSU staff to make better-informed decisions, including the acceptance of risk. However, research administration is often “gray” and even the best-trained staff are confronted with issues that are difficult; therefore all policies and procedures must be current and kept on websites that are easy to find and to navigate, and that are available to all members of the institution. The responsibility for maintaining the policies and procedures should be known campus-wide (i.e., which office/individual).

Both the SPA Administration and the Office of Internal Audit post policies and procedures related to research administration, however, neither website is up-to-date. Often SPA Administration will take its reader to the website of Internal Audit for policies and guidelines. On the Office of Internal Audit’s website are the operating policies and procedures for the University. There is a section for Research and one policy for “ Funds from External Sources.” This website is a great resource, but it is incumbent for it to be kept current. MSU has a written Operating and Policy Procedure System Policy (OP 01.01) dated 07/13/92, which has been revised on 10/04/11 (since the initial NCURA Peer Review visit). The revised policy is excellent, however, the campus must be diligent to assure that it is followed and kept up-to-date. The policy can be found at ([http://www.msstate.edu/dept/audit/0101.html](http://www.msstate.edu/dept/audit/0101.html))
• **Recommendation:** As research policies are a critical component for the administration of sponsored programs and the acceptance of risk, MSU should complete an inventory of all relevant policies and have a plan in place to write, approve and publish such policies. As part of this oversight, MSU should determine which policies and procedures need to be updated. The Directors of all the offices involved in research related compliance should participate in the initial compiling of such an inventory.

• **Recommendation:** MSU must assure that Operating Policy and Procedure Policy (OP 01.01) revised on 10/04/11 and found at [http://www.msstate.edu/dept/audit/0101.html](http://www.msstate.edu/dept/audit/0101.html) is maintained and that an established and regular schedule of review and policy updates (annual review recommended) are conducted.

Examples that can be used as a guide:

http://www.yale.edu/researchadministration/policies/index.html
http://rph.stanford.edu/
https://financialservices.kennesaw.edu/business/policies_procedures

Creating and implementing a compliance matrix is a tool used by many institutions. The matrix identifies the compliance areas throughout the institution and the unit that is responsible for ensuring compliance. A compliance matrix could be as simple as a chart that includes some of the following elements:

- Compliance area (e.g., use of humans, monitoring of expenditures, proposals reviewed for university commitments, Federal or state policies referenced in proposal/award terms and conditions and as such is committed to being in place by the institution—i.e., Drug Free Workplace)
- Responsible institutional office and individual
- Monitoring process (e.g., committee, individual, or other)
- Location of institutional policies/procedures;
- Guiding principles (e.g., applicable Federal or State regulation, OMB, ethical codes, etc.);
- Reporting requirement (e.g., filing of assurance/certification/non-compliance/other); frequency of reporting; recipient of reports;
- Ramifications of non-compliance: fines, findings, audit result;
- Training requirements (who, frequency, oversight)

A compliance matrix enables various offices to come together to discuss and understand the compliance areas and their role in mitigating risk. Information from a compliance matrix may additionally be useful to ensure compliance risks are addressed during proposal development,
award set-up and award management. There are numerous varieties and approaches that can be used for such a matrix; some focus on identifying responsible units while others focus on providing a “risk assessment” of the area.

Some examples of compliance matrixes follow and in Appendix G:

http://researchadmin.uchicago.edu/about/announcement_roles.shtml
http://www.princeton.edu/compliance/officers.html
http://universityrisk.tamu.edu/AssessmentTool.aspx
www.fms.iu.edu/avpfms/FODSpresent08_09/Internal%20Controls%20Presentation.ppt

- **Recommendation:** MSU should consider developing a simple compliance matrix to identify compliance oversight areas, policies, and responsible office. Such a matrix will assist the institution in coordinating the multiple compliance requirements that are managed by differing offices.

Another tool that can be helpful in the management of risk is the use of periodic quality assurance assessments (similar to the one conducted by the ORED). These assessments, which are less formal than an internal audit review, can also provide valuable information about specific and targeted areas that the institution wishes to review. Examples of other assessments might include reviewing a sample of grants for appropriate administrative and clerical charges in real time or reviews of animal and human subject protocols to assure that the research is being conducted in accordance with the approved protocol.

The following NCURA publications could serve as additional references and best practices:


Another useful publication for the institution’s reference is found at www.ecostudies.org/A133_audit-2004_SRA.pdf:

- Grant Administrator’s Guide to Preparing for an A-133 Audit of Sponsored Projects: The Responsible Stewardship of Federal Funds as Preparation for the A-133 Audit

**NCURA Standard II.D.i. Electronic Research Administration**

At Mississippi State University, the Office of Information Technology Services (ITS) reports to the Provost and Vice President for Academic Affairs. ITS has a division that is dedicated to Enterprise Information Systems, which includes a Financial Systems unit. It is unclear from the organizational structure, and from discussions with the Review Team, whether or not there is any unit dedicated to research administration and/or academic computing. It was clear during discussions that senior management at MSU understands the importance of adequate and up-to-
date technology, however, budget constraints and competing priorities have left research and fiscal management systems falling behind other concerns. This has created unnecessary burdens on faculty researchers and administrative staff, as well as all the central research administration and compliance services.

The Review Team believes it is important for senior management to review the current information technology priorities with an eye to raising the priority for the research administration and fiscal management as an institutional concern. MSU might even consider creating a unit in ITS (if one does not already exist) dedicated to research administration systems, in order for research administration/compliance systems to have the specialized and knowledgeable IT expertise needed for research administration. At institutions with the research volume the size of MSU such units are often found housed either in the IT organization or in the research organization:

- **Recommendation:** Senior management at MSU, including the Provost, Vice President for Research and Economic Development, Associate Vice President for Research and the Vice President for Budget and Planning, the Controller and the Chief Information Office (CIO) should review the campus’s priorities for Information Technology Services with an eye to improving the technology for research administration and the fiscal management of awards. Increased attention is needed on information systems and support for the campus to be more effective in research administration and better serve its faculty. Time and money must be spent to bring systems up-to-date and to make effective research administration a priority for the institution.

- **Recommendation:** MSU should consider creating a unit in Information Technology Services that is dedicated to research and administrative technology concerns. Creating a unit within ITS will assure that more attention is being paid to the needs and concerns of the faculty/administrative research enterprise.

The Review Team heard from all parties interviewed that MSU did not currently employ technology to ease the administrative burdens for researchers and research administrators. For example, the campus has not deployed an electronic signature protocol or software that would allow for electronic signatures and workflow routing, thus proposals and other documents that required approvals are still managed by paper and carried by hand (often by the faculty) around the institution or placed into campus mail in order to obtain approval signatures from the departments and colleges. Once signatures are obtained the documents are again either hand-carried or put in campus mail to forward to the appropriate office for review and approval. If proposals are interdisciplinary and involve more than one Department and/or College, signature approvals must be obtained from all parties; this is creating an enormous burden and causing significant time delays for the faculty, departmental and college staffs. Some of the research Centers and Departments at MSU are hours away in different parts of the State.

SPA Administration started to pilot an electronic Internal Approval Sheet (IAS) while the NCURA Review Team was on site. Because the pilot was just taking effect with one department, the results of the efforts were unknown at the time of the site visit.
- **Notable Practice:** Piloting an electronic IAS is commendable and should lead to a full implementation of this program campus-wide.

- **Recommendation:** MSU should continue their efforts to determine and implement an electronic signature protocol and workflow routing and move forward as quickly as possible with the procurement of software to enable such. If the campus allowed for the approval of documents via electronic signatures and routing, it would clearly eliminate an enormous burden for all in the research community and considerably reduce the time needed to prepare proposals and compliance documents.

The IRB, IACUC, and IBC all process paper protocols. The committee chairs stated that the applications can be filled out online and sent via email attachment for the initial preparation, however, signatures are required on paper copies, which can be scanned and emailed or faxed to the appropriate committee. Protocols are uploaded to the ORC&S website for committee members to access using their net id and password. Only community members are sent paper copies. Although none of the committee chairs indicated that paper copies of proposals were a burden, they were all eager to implement the workflow and signature authorization in order to speed up the reviews.

- **Recommendation:** MSU should investigate software and electronic systems dedicated to easing the burdens of the compliance committees. There are several commercial products that have been developed specifically for compliance committees. Click Commerce has one such product. In addition, Kuali/Coeus has several compliance components that can solve the workflow and signature authorization issues.

Currently, MSU uses Coeus for proposal and award tracking and Banner for their financial systems. Both of these information systems are widely implemented at other research-intensive institutions and, as such, these systems have been developed, and enhanced, to ease administration burdens. At the present time, MSU has not implemented some of the modules and functions that are available in both Coeus and Banner. As a result the staffs of both SPA Administration and Accounting must do a considerable amount of their work manually. It was noted that duplicate data entry into both Coeus and Banner was prevalent, both SPA Administration and SPA Accounting are scanning the same documents and many administrators in both offices are keeping separate spreadsheets to track work flow.

- **Recommendation:** The Controller and Treasurer and the Assistant Controller for Sponsored Programs Accounting, with the Director and Assistant Director of Sponsored Programs Administration, should form a task force to look at the possibility of having a data feed directly from Coeus to Banner. A data feed of the award information provided in Coeus directly into Banner will save the SPA Accounting staff a considerable amount of time and effort and it will free up very precious time in the SPA Accounting office. The Review Team understands that there might be differences between the two offices regarding which fields to send over electronically and there are often mistakes that need to be corrected, however a more coordinated effort might work to help
eliminate errors. Developing consistency in data field definitions and agreement on data will eventually produce accurate and reliable data.

The Review Team was informed that MSU is looking at implementing the Kuali/Coeus pre-award system. Kuali/Coeus is a very robust data system that allows for the preparation, routing, electronic approvals, logging, tracking and the submission of the proposals to external funding agencies. In addition, the newest version of Coeus has integrated the sharing of information with compliance committees and is in the process of developing modules for individual compliance issues, such as ITAR, IRB, or COI. MSU has not established a timetable to begin this implementation and such implementation may take one or more years before it is fully functioning.

As previously mentioned, MSU currently does not employ an electronic proposal preparation, routing, approval signature or a system for submitting federal proposals other than NSFastlane and Grants.gov. Fastlane and Grants.gov are extremely time consuming for the central offices. Each federal agency employs a different system or proposal format. The proposals in Grants.gov are literally a .pdf email attachment and can get lost in an individual’s email box. To ease the burdens on the researchers and research administration community, and to immediately access the capabilities that are present in Kuali/Coeus, MSU might consider looking into using a third party vendor proposal system until Kuali/Coeus is implemented and fully operational.

- **Recommendation:** MSU should conduct an evaluation of the current configuration of their Banner and Coeus systems, including a review of the potential benefits of implementing the unused modules available to them. These robust systems provide opportunities for increased functionality and efficiencies (such as the automatic calculation of indirect costs and effort reporting in Banner and the proposal routing in Coeus).

- **Recommendation:** MSU should consider whether to implement a third party proposal preparation and submission system as an interim solution at the same time as considering the full implementation of Kuali/Coeus. Electronic proposal routing and approval and system-to-system proposal submission is a major undertaking and will require a significant commitment to ensure that systems are current with continuously changing sponsor requirements; extended technical support and the ability to modify the system as last minute, deadline-driven issues arise will be essential. A third party, subscription based product, such as Cayuse424, that can be rolled-out to the campus in a few weeks, and which is vendor-hosted, with vendor-provided technical support, can be a quick-win, and will help to eliminate some of the manual effects now taking place. MSU may determine that such a product will constitute a more cost and time effective long-term solution.


More information about Kuali/Coeus can be found @ [http://www.kuali.org/kc](http://www.kuali.org/kc)
CORE OPERATIONS

Research administration begins with the receipt, review and submission of proposals to funding sponsors. Institutional offices and services need to be in place to aid faculty in the development of proposals into successful applications for funding. The NCURA Standards for Proposal Development and Assistance outline the need for staff that are knowledgeable in sponsor regulations and procedures and in the use of sponsor electronic systems for proposal submission.

Submission of successful applications hinges on a university’s ability to keep up-to-date with sponsor policy and procedures, proposal solicitations, adherence to federal, state and local laws as they relate to compliance, and with the consistent application of university policy. These aspects of successful submission are realized only through a staff with regular access to changes in sponsor policy, electronic systems, and university policy.

In addition, institutional policies and sponsoring agency procedures have a significant impact on the conduct of research. Communications about these policies and any changes in them must be brought to the attention of senior management. The need for ongoing communications about compliance risks is critical to success in our dynamic research environment.

Proposal Services

Proposal Services in sponsored program operations includes collection and dissemination of funding information, proposal development and assistance, proposal review and submission, collaborative project development and providing faculty and other staff with information and interpretation on current sponsor policies, procedures and processes. These services should be within the scope of support provided by staff in college/departmental and centralized levels of research administration, with responsibilities shared as fit the institution. Proposal services are core to the undertaking of research and central to proposal success and awarding of extramural funding. Without efficient and reliable proposal services the research enterprise may falter or in some cases may fail.

Obtaining funding is critical and without funding the other elements of research administration would not exist. It is important to have strong support staff that are knowledgeable about proposal preparation, including allowable, allocable, and consistent costing. It is also important that pre-award research administrators can articulate to faculty and staff up-to-date information on sponsor policies, procedures and processes, are knowledgeable about electronic proposal submission, and can advise faculty and other staff on preparation of compliant proposals.

NCURA Standards 1.A.i Collection and Dissemination of Funding Information

The Assistant Vice President for Research (AVP) promotes grant opportunities, serves as the primary point of contact for faculty inquiries on grant development, and coordinates special research projects and research-related initiatives. She is also charged with the collection and dissemination of funding opportunities and sponsor information. When asked, the AVP will
conduct individualized and unique funding searches for individual faculty. She sends targeted opportunities to the appropriate faculty, Deans, and Department Chairs. The Colleges and the departments are then responsible for further distribution within their units. There does not appear to be a weekly or monthly newsletter containing funding opportunities.

ORED’s website includes a page on “Funding” which offers guidelines on applying for federal requests, internal funding opportunities, cross-college research grants and extramural funding opportunities. The Review Team heard from the AVP that MSU once licensed Community of Science (COS) as their searchable database, however they no longer license it. The ORED website lists Grants.gov, as well as several other useful links. The site is simple and very easy to navigate.

Although, ORED is responsible to conduct funding opportunities for the faculty, the SPA Administration’s website also includes a page for “funding” in which they list Grants.gov and other federal agency pages. This page appears to be more targeted towards agency specific sites and requirements.

A sizeable portion of the research conducted at MSU is from federal line item appropriations (earmarks) that are specifically for their research programs and projects. With the promise of earmarks being discontinued at the federal level, MSU faculty and the institution will be affected. It is anticipated by many at the institutions that there will be an increase in faculty needing assistance with finding funding opportunities that might be more than the Assistant Vice President can handle by herself. In order to relieve a potentially large burden on the AVP, ORED might consider licensing one or more funding opportunity databases that can be searched by anyone with a campus email.

- **Recommendation:** The Office of Research and Economic Development might consider offering a searchable funding opportunities database that has capabilities for both searches as well as automatic matches of opportunities to filed faculty profiles. There are several robust funding opportunity databases that are available to license. The sites for these can be simply posted on websites and are then searchable by any member of the institution at any time. Faculty can create individual profiles of their interests and automatically receive notices of funding opportunities that fit their interests. That capability, combined with workshops to assist faculty in creating a targeted profile, will expand exposure to opportunities at minimal effort. Licensing more than one searchable database might help eliminate a potential burden on the ORED by allowing more options for users across the campus. InfoEd’s SPIN, and Illinois Researcher Information Services (IRIS) are among the searchable databases that are available to license. [http://www.library.illinois.edu/iris/](http://www.library.illinois.edu/iris/) [http://www1.infoed.org/](http://www1.infoed.org/)

Although the process for disseminating funding opportunities throughout the campus community does not appear to have a formalized mechanism, such as a weekly funding opportunities newsletter or email listserv, the Review Team understands that each year ORED and the Office of the Provost provide a one-day New Faculty Orientation. ORED has a place on
the agenda and there are break-out sessions that provide information about ORED services and funding opportunity information. For the past two years postdocs have been included at the orientation. The Review Team received no negative comments about faculty missing a chance to apply for funding due to lack of knowledge about the availability of funding.

NCURA Standards 1.A.ii Proposal Development and Assistance

SPA Administration is the office through which proposals are officially approved and submitted at MSU. The office does not have any one individual who is charged with assisting the faculty with proposal development.

MSU does not have a formalized process in place to assist faculty with responding to funding opportunities, as found with many universities. Although the Assistant Vice President is identified as the primary contact for grant development, her role does not extend to assisting faculty with the hands-on development of proposal budgets or other pieces of proposal development. The department heads and unit directors are also asked to assist faculty in finding funding opportunities but once the information is distributed, the faculty may receive assistance from their department or research center, or they might be on their own to put the proposals together, including the preparation of their budgets and the inclusion of the proposal information into a myriad of application forms and formats.

MSU, like other institutions of their size and research volume, depends upon proposal and award support services at the local level, whether it is a research unit, a department or a College. There is no one in central administration tasked with assisting faculty to develop and respond to proposal solicitations. Unfortunately, the knowledge needed about research administration, and the services offered across the institution and within Sponsored Programs Administration, vary considerably. Some campus units, especially the research Centers, have experienced staff who help their faculty with proposal preparation, other units depend upon untrained staff assistance, and some units offer no help leaving it to the faculty to figure out how to prepare proposals.

The position of Assistant Director in SPA Administration could be expanded to cover the role of assisting the faculty that have little to no help in proposal preparation. The Assistant Director has many years in research administration and can be a great asset to the campus in such a role.

- **Recommendation:** SPA Administration should consider expanding the role of the Assistant Director as the “go-to” person in SPA assigned to facilitate proposal development for those faculty who have limited assistance in their departments. Having such a position in SPA Administration would be extremely helpful to the faculty and would offer an excellent and needed service to the institution. It would also assure that the information that the faculty receive is accurate and appropriate for the funding being sought.

Although, there is no individual in SPA assigned to assist faculty with proposal development, there is guidance posted on the SPA Administration website on budget development and a sample budget form in the NSF model. In September of 2011, a new “Faculty and Staff Guide to Research Administration” was posted on the SPA Administration’s website. This Guide
generally outlines how to prepare proposals. This Guide is a notable endeavor and should be valuable in providing a basic and general understanding of proposal development and budget preparation; however, it must go into more depth, as the discussion is at a very broad level. If the Guide was not distributed widely throughout the institution, in addition to being posted on a website, it would be valuable to do so.

- **Notable Practice:** The Faculty and Staff Guide to Research Administration is a well-developed basic document. It broadly covers how to prepare proposals, how to develop budgets and gives some tips on basic proposal preparation. It should be a very useful tool for the new investigator.

Even with the new Faculty and Staff Guide, and the understanding campus-wide that the Colleges and departments have the responsibility for proposal preparation; what that role meant was not well defined. Some units had so few faculty doing research that they were unable to provide any proposal preparation service. The level of services offered to the faculty varied greatly depending upon the unit through which the award would be managed. Some faculty members seem frustrated by the uneven services offered by various departments and research Centers.

- **Recommendation:** MSU should form a task force consisting of the Assistant Vice President ORED, the Director and Assistant Director of SPA Administration, and other members of the research community to explore an efficient model for offering faculty proposal development services. By clearly defining the type of task each unit is responsible to perform when putting a proposal together, a more consistent and more even service will arise across the campus.

Having very clear roles and responsibilities articulated and agreed upon is essential and will help to eliminate a considerable amount of faculty frustration witnessed by the Review Team.

As mentioned previously, the Review Team heard from some faculty from small units that did not conduct much research, that they had no help at the department or unit level and were left on their own to find proposal assistance or do everything by themselves. Due to tightening budgets nationally, many institutions are establishing sponsored program service centers to assist faculty in smaller less activity units. These centers work at a College level and/or between several smaller departments. It is a model that MSU might want to consider as more faculty apply for and receive funding.

- **Recommendation:** MSU should explore a model of sponsored program service centers for proposal and budget development to assist the smaller units that do not have the funding or the staff to assist faculty with their sponsored activities. Having service centers is budget effective because it saves effort while at the same time supports faculty at a local level.
As noted in the Electronic Research Administration section of this report, MSU uses Coeus as its proposal and pre-award tracking system and is looking into the possibility of implementing Kuali/Coeus. The institution does seem aware of the need for more robust information technology system development for proposal routing, tracking and system-to-system submissions. The Director of the SPA Administration is the person tasked with this initiative. There is no IT group in SPA but the office has a graduate student assistant assigned to IT tasks. Staying current with electronic research initiatives that are emerging at the federal level is critical at an institution of this size and research volume. Due to the importance of IT initiatives in research administration SPA might consider appointing one member of the office to become responsible as the IT initiatives liaison.

- **Recommendation:** The SPA Administration Director and Assistant Director should consider assigning one member of the staff to stay current with the new IT initiatives in research administration and to report these changes to management and other members of the staff. Having an IT initiatives liaison in SPA Administration will help to insure that changes in government regulations, new systems development for proposal submission and award acceptance, and other IT initiatives such as federal reporting requirements are tracked and known.

SPA Administration has a staff of 15 FTE including the Director and the Assistant Director, three graduate student assistants and undergraduate student workers. The organization is flat with every member reporting to the Director. When the Director is unavailable the Assistant Director assumes his responsibilities. The work assignments for the SPA administrative staff are by department, College and/or research Center; the graduate students have designated assignments, such as reports, subcontracts and technology, and there is one administrator responsible for logging in proposals and entering proposal data into Coeus, as well as other specific tasks.

In FY 2010/2011, 1,393 proposals were submitted from MSU for requests totaling approximately $449 million. MSU has witnessed a decline in the number of proposals submitted since 2009 but with the real potential of the earmark funding being eliminated in federal appropriations, it is anticipated that the level of proposals will increase in the future to cover the short fall in research funds available at MSU. Some faculty who met with the Review Team indicated that they have been doing research for a long time and were funded by earmarks or state appropriation; they stated that they have never submitted a proposal and felt concerned about the needed support for this endeavor.

At MSU, proposals are prepared in the departments or research Centers by the faculty or research administrators hired by the unit. An Internal Approval Sheet (IAS) is required with all proposals and must be signed by every unit with authority to approve the proposal submission. The IAS is paper based and must be signed in ink causing the PI or their administrator to walk paper around the campus or to utilize the campus mail system. Once the proposal is prepared a review is done by the department chair’s office then in the College Dean’s office. If the proposal is going through a research Center it needs the review and approval by the Center’s Director and then by the appropriate unit head through which the Center reports. If the proposal involves
more than one PI and more than one department or research unit, reviews must be performed and signatures obtained by everyone involved.

The Review Team heard from several faculty members that when proposals involved more than one department and/or College, the required budget elements might be different for each. For example, the School of Engineering requires that all graduate students receive tuition and fees from grants and the fees are incorporated within the cost of the tuition. There are some units that do not pay tuition at all. As a result, with interdisciplinary proposals, faculty often found themselves changing proposal budgets in order to obtain the necessary approval from different units that held different policies. In some cases when the proposal reached SPA Administration, the faculty member was once again asked to make corrections to the budget and the proposal. The Review Team heard that faculty were extremely frustrated by the constant corrections in the proposal review and approval process.

The Office of Research and Economic Development has a Faculty Research Advisory Committee (FRAC) that meets monthly and discusses issues that are important to the research community. The committee includes faculty from numerous disciplines. Given the significant frustration by faculty in terms of the proposal review and approval process and the broad representation on the FRAC, the ORED might find this committee an appropriate resource to begin addressing issues such as a campus-wide policy for tuition remission and other budgeted direct cost items. While ultimately campus-wide policies of this magnitude would require significant conversations with Colleges, this committee might be a first step to exploring the issues and preparing recommendations. Having campus-wide proposal policies would greatly reduce faculty frustration in this area.

- **Recommendation:** The Vice President for Research and Economic Development should consider using the Associate Deans for Research to explore the potential for campus-wide policies on items such as tuition remission. Once the issues and recommendations have been explored by FRAC, the Vice President ORED should begin discussions with other University and College leadership.

Some of the tasks related to budget preparation that are handled in SPA Administration are responsibilities that are more commonly handled at the College level. The SPA administrators check to see if the salaries in budgets are correct (this action is time consuming because they go into the payroll systems), that the tuition and fees are correct, and that the budget adds up correctly. These are normally all items that the unit preparing the proposal has the responsibility to assure are correct. Checking salaries and running “tapes” on budgets are not the typical type of review that should be undertaken in a sponsored programs office of this size activity. If these items are not correct in the proposal it is not a risk to the institution, albeit the funding request might be incorrect. With an educational program in place for college and departmental administrators, these would be tasks that could be handled at the local level. A sponsored programs office is usually responsible to make sure that the proposal is compliant with the federal, state and local laws and that agency/sponsor guidelines are being followed. Examples of the items that should be reviewed are:

- the appropriateness and allowability of the costs being included in the budget;
- the accuracy of the indirect costs (on or off campus);
- cost sharing and matching are being addressed;
- compliance committee reviews have been or are being performed;
- or the appropriate costs associated with animal care or human subjects are included in the budget.

In addition, each administrator in SPA Administration reviews proposals differently and looks for different issues. The reviews are not consistent. The faculty interviewed mentioned that when SPA administrators changed for their units, the proposals were reviewed differently. This was frustrating for them because they had to attend to different issues with each new administrator. It might be useful for SPA to do a survey of what types of reviews are conducted at other research universities.

- **Recommendation:** SPA Administration should conduct a survey of other research institutions to determine an appropriate level of proposal review for the office. Once determined they should develop and introduce the use of a proposal checklist to assure that every review is done the same for like-type proposals, such as NSF, NIH, or non-federal. Having a checklist would also help to eliminate faculty frustration when their administrator changes. Examples can be found at: [http://www.osp.cornell.edu/ProposalPrep/Proposal_Checklist.pdf](http://www.osp.cornell.edu/ProposalPrep/Proposal_Checklist.pdf) [http://www.spo.berkeley.edu/guide/checklist.html](http://www.spo.berkeley.edu/guide/checklist.html) [http://www.virginia.edu/sponsoredprograms/Proposal%20Checklist.pdf](http://www.virginia.edu/sponsoredprograms/Proposal%20Checklist.pdf)

MSU currently applies the concepts of federal OMB Circular A-21 to all projects (federal and non-federal). Even in the new Faculty and Staff Guide the NSF model is identified as the appropriate proposal model to follow. While historically many institutions did this, many have reevaluated this area and no longer apply the principles of A-21 to non-federal projects that have different requirements and lower overhead rates. Preparing budgets and requiring spending in compliance with A-21 for non-federal grants and contracts is not required and can reduce possible funding to the institution. For example, foundations who may pay only 10 percent indirect costs frequently will allow administrative costs to be charged to their grants.

- **Recommendation:** MSU should evaluate the benefits of not applying the regulations of OMB Circular A-21 to non-federal grants and contracts. Preparing budgets and requiring spending in compliance with A-21 for non-federal grants and contracts is not required and can reduce possible funding to the institution.

The Director of SPA Administration is the only authorized individual to sign proposals in the office because of a recent change in campus policy; however the proposal signature authority can be delegate to the Assistant Director for a 10 day period when the Director is off campus or otherwise unavailable. Having only one authorized signer for proposals in an institution with the volume as large as MSU’s is a potential bottleneck causing the possibility of time delays and missed proposal submissions. Most research institutions allow for the senior members of the office, who have demonstrated expertise, to have delegated authority for proposal submissions to federal agencies and in some cases allow certain active units with qualified unit-level research
administrative support (such as the School of Engineering) to submit proposals for grants directly from their offices and to not go through central services.

- **Recommendation:** The Vice President for Research and Economic Development should explore revising the signature authority policy to allow for multiple authorized signers in SPA Administration to submit proposals. Allowing the senior members of the office who have demonstrated expertise to have institutional approval to sign for proposals will eliminate a potential bottleneck and allow the research administrators to feel more responsibility for the proposals that they submit. Many institutions would provide permanent signature authority to the Assistant Director. Discussions with counterpart institutions should provide an understanding of the models and breadth of authorities that are in place. With this direction, it job descriptions of staff should reflect the delegation of institutional authority.

Even though senior management has issued policies stating that proposals need to be in SPA Administration three days prior to the deadline, MSU staff noted that this policy is generally not complied with or supported. This has created struggles for SPA staff. For example, they may have several contracts to negotiate and proposals to review for faculty who did submit their proposal to SPA on time but then are required to put those aside to handle proposals that arrive on the last possible day or even hour. Although, MSU does have a policy that late proposals might risk the chance of being withdrawn, post reviews of proposals in practice do not take place. Several of the SPA members voiced concern about this.

- **Recommendation:** The Director of SPA Administration should assure that timely post reviews are conducted by SPA administrators for all proposals that are submitted with insufficient lead time prior to submission. It is extremely important that the faculty appreciate that the staff will review their late proposals after submission and if necessary withdraw them from competition if they do not meet the institutions standards.

While most universities have a rule regarding when proposals need to be submitted, most will accept exceptions. In these cases, it needs to be acknowledged to the PI that accomplishing a full proposal review in SPA becomes unrealistic with late proposals and that a post review will take place.

The Review Team heard comments from faculty that often when they were able to get their proposal to SPA Administration by the three-day deadline it just sat unattended and was usually not reviewed until the last minute anyway. The sentiment was “why bother.”

- **Recommendation:** The Vice President for Research and the Deans should communicate expectations to faculty in terms of the submission requirements for proposals. A plan should be implemented that PIs who are persistent offenders of the expectations for proposal submission will receive direct communications from the VPR and the Dean concerning their lack of attention to institutional expectations.
At MSU, faculty members are allowed to conduct classified and ITAR controlled research. There is a research security officer who is assigned the responsibility to review that all the proper controls are in place to handle such work, however, he is not involved in the review of proposals. According to the security officer and other senior members of the MSU administration, the proposals prepared for these activities are treated like all other proposals and as such are not kept separate or reviewed only by authorized personnel. The Review Team is making no recommendation about this; however, MSU might consider contacting other institutions that conduct classified research, such as Georgia Tech, to help determine if SPA is giving the appropriate attention to the handling of such proposals.

NCURA Standards 1.A.iv Collaborative Project Development

The Office of Research and Economic Development (ORED) at Mississippi State has started a program called “cross-college research grants” to encourage MSU faculty to create interdisciplinary, cross-college research groups on campus. ORED is offering a grant to teams of faculty members who have a common research theme that is interdisciplinary in nature. These grants will be in the amount of $2,000 each and limited to a period of 12 months (renewable one time for a total of 24 months and $4,000).

The collaborative teams are expected to meet on a regular basis, share research ideas, and prepare one or more proposals within the first 12 months to a funding agency. Consideration of funding for an addition year would be contingent on the success of the research group during the first year.

- **Notable Practice:** The development of a grant program to encourage and support collaborative project development is creative and an excellent way for the campus to show support for such endeavors.

Other than this new “cross-college research grants” program, there is no evidence that special attention is paid at any level to determining whether or not a collaborative activity is appropriate and/or administratively manageable for the institution. While not stated in any documentation, it is assumed as part of the review done by the academic and research units that the appropriateness of the research and the relationship with other institutions is taken into consideration. In SPA Administration, outgoing subcontracts were handed off to a graduate student to prepare the FDP boilerplates and check on the viability of the subcontractor, but there is no evidence of any special attention to collaborations at proposal review time. Issues to consider at the review stages are:

- is this a collaboration or a sales and service (purchase);
- is the collaboration doing a scope of work or providing a consulting service (consultant);
- is the entity’s work being carried out as part of the entire scope of the project and in accordance with the terms and conditions of the sponsor;
- is a budget and scope of work included with this proposal.
An excellent guide to collaborative subcontracts can be found at:
http://www.spo.berkeley.edu/Procedures/subawards.html#preaward_responsibility

It is important for the units submitting proposals to be knowledgeable about the collaboration involved in the project. There is a check off box on the IAS to indicate that subcontracting is involved. However, it is also recommended that the IAS include the names of the collaborating institutions and or the number of subcontractors involved. A review of collaborative subcontracts as part of the proposal review by the units and schools in addition to SPA will assure that appropriate attention is paid to the intended collaboration. With continued federal regulations in the area, such as the Federal Financial Transparency Act (FFTA), it is incumbent upon the institution to take care at the proposal review time. SPA Administration is responsible to collect the budgets and other documentation from the subcontractor prior to submission; it is equally important for the unit that will manage the award to understand their responsibilities when subcontracting to others.

- **Recommendation:** SPA Administration should consider expanding the checkbox on its Internal Approval Sheet to additionally ask for a listing of the names and/or the number of the institutions involved in the proposed activity. Adding such a list will help to insure that some attention is paid to collaborations by the units and SPA and that the units signing off on the proposal are aware of their responsibility to manage the collaboration, such as approving invoices and monitoring the progress of the collaboration.

**NCURA Standard 1.A.v. Agency Liaison**

In SPA Administration, the responsibilities are distributed by department assignments. As a result, SPA does not have individual staff members who are considered to be agency specialists or agency liaisons. All the SPA staff work as generalists and they each handle proposals submitted to all types of sponsors. This method of workload distribution is excellent for building relationships within the institution (through the department assignments) but it does not create opportunities for specialized knowledge of the sponsors and it leaves the institution at risk for the potential of missing changes to sponsor regulations or policies.

Some of the SPA Administration staff members have worked in the office for many years. They have considerably more in depth knowledge about research administration, federal regulations, and other aspects of how to complete a compliant application than the newer members of the staff. However, due to the organization of the office and the consistent training of new personnel, the skills of these more knowledgeable members of SPA are not utilized fully. These more experienced staff are limited to working with their own set of departments and helping to train/educate the newer members of the staff. There are no assignments within SPA that deal specifically with sponsor-type or award type (such as contract versus grant) and thus there is no agency liaison or sponsor specialized expertise within the office. Each staff member independently must stay on top of changing regulations and requirements across the full range of sponsors.

- **Recommendation:** Due to the increase in federal regulations, complexities in sponsor policies and application processes, and special funding opportunities
SPA Administration should consider assigning responsibility to the more experienced administrators for monitoring and keeping abreast of select specific sponsors representing significant activity at MSU. Having SPA team members assigned responsibilities for specific agencies and sponsors could assure that needed expertise is built in SPA and that the campus is kept up-to-date on changes in sponsor’s policies, procedures and processes. It is essential to have this expertise in SPA Administration, especially with the ever-increasing level of federal requirements.

Award Acceptance and Initiation

Award acceptance and initiation includes review and negotiation of incoming awards for acceptability to the institution and to the investigators involved, formal classification and acceptance of the award by the institution, establishment of the award in the institution’s financial system, notification of the terms and conditions of the award to all relevant parties, and issuance of any subawards associated with an award. Award acceptance and initiation processes are core to the success of the research enterprise since it is at this stage that the institution and investigators commit to the terms and conditions that will govern how each award is handled. The institution must have staff trained and authorized: 1) to review and negotiate award terms and conditions and ensure that investigators or others materially impacted by the terms have an opportunity to provide input prior to their acceptance and have a process to remain informed during the award negotiation process; 2) to deploy staff knowledgeable about sponsor regulations and requirements and the institution’s research policies and practices; 3) to be able to properly discern among various types of agreements (e.g., grants, contracts, cooperative agreements, material transfer agreements, gifts, confidentiality agreements, etc.); and 4) to ensure that key provisions and requirements of awards are translated into useful guidance for faculty and other staff.

NCURA Standards 1.B.i. Review and Negotiation of Terms and Conditions

SPA Administration has primary responsibility for award negotiation and acceptance on behalf of MSU. The Director, Assistant Director, and SPA Administrators at all levels (Assistant, Associate and Full) have assigned responsibilities for the review and negotiation of award terms. Reviewers heard several comments about awards being held up in SPA Administration for weeks or months before an account is established. In one case, the Review Team was told about an award that was lost in the processing. Thus, the comments in this section highlight possible areas for improvement.

- **Recommendation:** In order to quantify the turnaround time for award processing and assess the extent of any delays, SPA Administration should develop a method of tracking individual awards from receipt to account set up, with a calculation of total time transpired at critical steps. Data fields should include receipt date in SPA, acceptance date (cleared internal reviews) and initiation (transfer to SP Accounting). Data for contracts would include the negotiation issues and dates when the sponsor was contacted and replied to MSU. Comparison of monthly reports would reflect trends, highlight sponsor concerns or the need for staff training. It may be possible to utilize data in Coeus for some of the report needs.
The Review Award section of SPA’s Internal Procedures/Training Manual provides basic guidance to SPA staff for standard award terms and appears to be the first level review for all awards. This is excellent information in an accessible format. However, the guidance omits discussion of the importance of timely reimbursement of costs and the need to minimize reporting burdens to the University, e.g., the frequency and level of detail of financial and technical reports.

This Review document also directs staff to send agreements for review by Legal Counsel, the Office of Technology Commercialization, and the Export Control Review Officer, as appropriate. Although not confirmed by formal policy, SPA staff members indicate that they rely on previously approved agreements as models for acceptable terms in order to avoid external review. Representatives from these three offices confirm their award review responsibilities. For example, General Counsel receives approximately 3 new non-federal contracts per week for review, including memoranda of understanding, non-disclosure agreements, material transfer agreements and other miscellaneous agreements related to sponsored research. The number of documents being sent for legal and other review is high for an institution the size of MSU. The preparation of documents for review, transit time by campus or electronic mail and involvement of highly skilled technical and legal counsel makes this an inefficient and costly process. Because of the relatively routine nature of sponsored agreements, many research universities delegate authority to several of their sponsored projects staff to determine the legal sufficiency of award terms and to negotiate acceptable language on behalf of the institution. Reliance on legal counsel, OTC and the ECRO should be reserved for the most complex issues or occasional difficult negotiations with the sponsor. Bringing the expertise and authority to assess contract terms into the SPA office will streamline award processing, reduce delays related to routing agreements for external review, reduce the burden on the external review offices and empower the SPA staff.

• **Recommendation:** The SPA Administration Director should ask Legal Counsel to provide training that would allow a select group of individuals from SPA to review agreements for legal compliance and independently determine final acceptability of agreements. Legal Counsel advised the Review Team that she had expressed a willingness to train those SPA staff that hold legal degrees in order to delegate full authority to SPA. This is a commendable first step; however, it may be appropriate to expand this responsibility within the office if non-JD holding individuals have sufficient experience in sponsored research administration and demonstrate an ability to successfully negotiate awards.

• **Recommendation:** The SPA Administration Director should discuss with the Director of the Office of Technology Commercialization and the Export Control Review Officer developing a training program that would give SPA staff the knowledge needed to independently review and negotiate agreements involving common intellectual property and export control matters. Training by staff from OTC and the Export Control Review Officer should include institutional policy, acceptable alternative language, negotiation strategies, and situations that call for participation of the experts. A reference list of unacceptable terms along with the above items would become a valuable
learning and teaching tool for staff. External professional training of staff also would strengthen the skill levels on both topics. Ultimately, SPA staff should function more independently as institutional representatives in determining the acceptability of terms, alternate language, and negotiation strategies. The goal should be for the experts in OTC and the ECRO to act as consultants on the most complex contract issues or when they are required to take action.

Although current University policy requires Legal Counsel’s review of all non-federal awards, Counsel is supportive of revising campus policy to allow SPA Administration to make the legal determination once staff training is complete. The MSU Executive Council needs to approve this revision, but a number of arguments can be made regarding the improved skills, relatively low level of risk to the institution, and the efficiencies and benefits to be gained that positively impact central and departmental personnel.

- **Recommendation:** Upon the SPA Administration staff’s successful completion of training in legal, intellectual property and export control reviews, MSU should revise its policy requiring Legal Counsel review of awards. The revised policy would delegate to specific SPA positions the authority to determine necessity of legal review before acceptance or execution of contracts and grants for extramurally supported research, scholarly or professional training, or public service programs relating either to research or to scholarly or professional training.

The Contract Negotiation section of the Internal Procedures Manual includes guidance on standard contract terms, such as governing law, jurisdiction, indemnification, insurance, arbitration, restrictions on publications and warrants. The Reviewers assume that the information included in the Review Award section of that Manual is also considered, since a number of issues apply to contracts. Other clauses frequently included in contracts (confidentiality, classification of data, and termination) are not addressed in the Contract Negotiation section, but should be added.

- **Recommendation:** The Review and Contract Negotiation guidance in SPA’s Internal Procedures Manual should be reviewed, topics added and more information provided on alternatives for acceptance. The issues mentioned in the previous paragraphs should be included. If these documents are to be used as negotiating and training tools, then more alternatives should be added to the text.

SPA is in the process of developing Master Agreements in order to streamline the contracting process and reduce review time of agreements with sponsors that have supported MSU PIs for an extended period of time. Negotiating a master agreement can be a frustrating process because of the need to obtain commitment from a high level manager in the sponsor’s organization and to address objections as sponsor contracting officers change. Nonetheless, this is a prospect that can improve relationships with industry sponsors.

- **Notable Practice:** Master agreement templates typically reduce negotiation time and allow funds to be accepted more quickly. MSU should continue its efforts to expand the library of master agreements.
Only the Director or, in his absence, the Assistant Director has authority to execute contracts and other agreements. This limited delegation of authority establishes a bottleneck that may cause delays as files and other materials are routed in the office. Most comparable research universities have delegated authority to a few individuals in their Sponsored Programs offices, who are knowledgeable and have a level of experience commensurate with the level of authority. This establishes a robust backup system and allows for adequate coverage during scheduled and unscheduled staff absences, professional travel and turnover.

- **Recommendation:** MSU senior administration should consider revising the signature authority policy to allow for multiple authorized signers in SPA for the execution of bi-lateral grants, contracts and agreements. Allowing the senior members of the office, who demonstrate expertise, to have institutional approval to sign awards will eliminate a potential bottleneck and allow the research administrators to feel more responsible for the awards they accept. The Assistant Director should be given permanent signature authority for all awards and not just in the Director’s absence. One option is to delegate authority to accept grants and execute contracts and agreements at various maximum levels of budgeted/awarded annual direct costs. Junior staff would receive a lower delegation than the more senior staff. An example of such a delegation can be found at: [http://www.policies.uci.edu/doa/ida446.html](http://www.policies.uci.edu/doa/ida446.html). It is recommended that the job descriptions of staff reflect the expected delegation of institutional authority.

The institution has the appropriate policies and procedures in place to assure compliance with national policy requirements.

**NCURA Standards 1.B.ii. Ancillary Agreements Associated with Research Grants and Contracts**

Policies exist for most common ancillary agreements that would be expected at MSU. Information on both the SPA and OTC websites provides guidance related to Material Transfer Agreements. An Incoming MTA received by a faculty member is forwarded to an Administrator in SPA with a completed MTA Routing Form. If negotiation is required, SPA will take the lead and consult with OTC on intellectual property issues or ORCS for compliance matters. Although not specifically detailed in the briefing materials, it would be important for SPA to ensure the IBC is included for certain types of materials. The PI is kept informed throughout the process. The MSU Policy and Procedure Statement on Biosafety places responsibility upon investigators receiving microorganisms, biological toxins or other biohazard materials requiring Biosafety level 2 or greater practices to contact the Biosafety Officer prior to receipt of such materials. MSU also signed the widely-adopted master Uniform Biological Material Transfer Agreement and utilizes those terms as well. The SPA Director approves incoming MTAs which are entered into Coeus as awards without proposals.

Two MTA models are provided for outgoing materials (seed and germplasm breeding lines; other biological materials) on the SPA and OTC websites. Outgoing MTAs are handled by OTC, although the SPA Administration Director appears to be the final approval, following a recommendation for approval by the Interim Director of Technology Commercialization. The
same is true for Non-Disclosure Agreements that allow for the exchange of confidential information, typically for evaluation or research purposes.

- **Recommendation:** Because material transfers and non-disclosure agreement terms are related to the protection or assumption of responsibility for intellectual property, MSU should consider re-delegating full signature authority for these to the Director or staff of the Office of Technology Commercialization. This action would relieve the SPA Director of these duties and allow him to focus on sponsored projects matters.

Some MSU faculty perform classified research at off-site facilities and must comply with strict information control policies in order to use classified information. No classified research is done in MSU facilities. The Research Security Officer ably manages all aspects of clearance and control of classified information. The MSU National Industrial Security Program received a Superior rating from the Defense Security Service during an inspection in November 2010.

- **Recommendations:** None

SPA also reviews and executes agreements for independent contractor/consulting services from restricted funds (sponsored projects). The SPA Administration Office Coordinator and the Director prepare and sign agreements based upon information provided by the PI or department. The consulting agreement is forwarded to the consultant for signature and, when returned, scanned and emailed to the department contact for payment. The original agreement is forwarded to SPA Accounting as the office of record. Because consulting agreements involve the payment, rather than the receipt, of funds, many universities align responsibility for independent consulting agreements with the purchasing function.

- **Recommendation:** The Vice President for Research and Economic Development should engage in conversations with Procurement and Contracts regarding a re-alignment of responsibilities for independent consulting agreements. It is recommended that consideration be given to assigning responsibility and final signature authority for all independent consulting agreements, regardless of funding source, to the Department of Procurement and Contracts.

- **Notable Practice:** The Employee-Independent Contractor Classification Checklist developed and reviewed by Human Resources is an excellent tool for decision-making.

**NCURA Standards 1.B.iii. Subawards**

The SPA Training Manual includes detailed guidance for the collection of information regarding subawards identified in a proposal budget. At the proposal stage, SPA obtains a proposal from the potential subawardee, along with documentation of their negotiated rates and contact information. After a proposal is funded, step-by-step instructions lead administrators through the subaward review and preparation process. SPA staff requests the PI or department complete a Request for Subaward Form. Documents provided to the Review Team make no
mention of SPA completing a risk assessment associated with the subaward at either the proposal or award stage.

- **Recommendation:** During proposal review and as the subaward is in preparation, SPA staff should document an analysis of risk associated with the subrecipient. Risk assessment would include debarment or suspension of the subrecipient PI, financial stability and audit history of the subrecipient, and performance issues arising if the subrecipient is in a foreign country. The Reviewers recommend a risk assessment tool developed by the Stevens Institute of Technology, which includes both pre and post award considerations: [http://www.stevens.edu/osr/fileadmin/osr/docs/SUBRECIPIENT_AGREEMENT_ACTIVITY_CHECKLIST.doc](http://www.stevens.edu/osr/fileadmin/osr/docs/SUBRECIPIENT_AGREEMENT_ACTIVITY_CHECKLIST.doc)

MSU utilizes the Federal Demonstration Partnership subaward templates for federal funds going to other universities. Other templates are employed for non-federal flow-through funds and subawards to private for-profit entities. Staff consider if the subaward is to be fixed-price or cost-reimbursement. Additional data required by the Federal Funding Accountability and Transparency Act (FFATA) is collected from the subawardee as appropriate. When all information has been compiled, the package is routed to the SPA Graduate Assistant who drafts the subaward and returns the entire file to the SPA Administrator for review and signature by the SPA Director.

Sponsors expect performance and compliance from MSU and its subawardees. Therefore, it is critical that MSU establish an oversight process for financial and non-financial concerns arising in the management of subawards. Currently, SPA Accounting performs some subrecipient monitoring through the review of expenses billed by the subawardee. However, the campus has not developed a comprehensive policy that assigns responsibilities to the PI, department office, SPA and others.

- **Recommendation:** SPA Administration and SPA Accounting staff should draft policy and procedures for subrecipient monitoring. The policy should consider the PI’s assessment of performance and the satisfaction of project goals/deliverables, and address other risk areas related to subawardees. A number of institutions have issued policy on subrecipient monitoring and some utilize a checklist for the assessment:


  University of California, Berkeley - [http://www.spo.berkeley.edu/Procedures/subawards.html#subrecipientmonitoring](http://www.spo.berkeley.edu/Procedures/subawards.html#subrecipientmonitoring)

  University of California, Irvine - [http://www.research.uci.edu/ora/sp/subrecipient.htm](http://www.research.uci.edu/ora/sp/subrecipient.htm)

  University of Colorado Boulder - [http://abs.colorado.edu/ABS_WEB/nonhtm/word/Sub_monitoring_guide_2009.doc](http://abs.colorado.edu/ABS_WEB/nonhtm/word/Sub_monitoring_guide_2009.doc)
NCURA Standard 1.B.iv. Award Acceptance Process

The SPA Training Manual includes procedures for the review of awards prior to acceptance. In addition, the Manual includes guidance for contract negotiations, which discusses some examples of desired language and alternatives. Procedures discuss the comparison of proposed and awarded budgets and staff are directed to submit revised budgets as necessary. SPA Administrators review and negotiate awards.

If compliance approvals (IRB, IACUC, IBC) are shown on the internal approval sheet, SPA Administration confirms receipt of the approval letters or contacts the PI or department business officer to obtain a copy of the approval letter before accepting an award and forwarding information to SPA Accounting for fund number assignment. Because SPA Administration and the compliance committees report to the same Vice President, it seems an unnecessary burden to ask the PI for this information and not to have direct communications between the compliance committees and SPA.

- **Recommendation:** The Directors of SPA Administration and Regulatory Compliance and Safety should develop a reliable process that would provide SPA with timely information regarding regulatory committee approvals. Currently, the committees are sending copies of approval letters to SPA Administration at the time they are issued, but information to tie the approval to a project may be lacking. Committee application forms may require revision in order to include the proposal or award numbers and sponsor names that would enable a match within SPA Administration. Also, one office would need to compare the proposed scope of work to the approved protocol. Importantly, the Directors should plan to move to electronic updates of compliance committee data in Coeus and involve ITS in those discussions. Because the regulatory committees use different programs to maintain their protocol data, separate software solutions will be needed to upload committee approvals. Anticipated releases of Kuali Coeus include modules on the regulatory committees, but a data upload will still be required.

NCURA Standard 1.B.v. Award Activation and Notification

There is considerable duplication of effort in the award initiation process, which the MSU self-study document recognized. Data are input into Coeus by SPA Administration and much of the same data are input into Banner by SPA Accounting. Documents in both hard copy and electronic form are duplicated in SPA Administration and in SPA Accounting records. Award documents are scanned by SPA Administration into a shared drive that is not utilized by SPA Accounting and, thus, SPA Accounting scans its own set of award documents. These practices serve to build functional silos that prevent the University from capitalizing upon efficiencies and cost savings. With appropriate leadership and information technology support, systems could be developed or modified so that several offices could share scanned documents and limit duplicate data entry.
• **Recommendation:** SPA Administration, SPA Accounting and ITS staff should examine business practices and processing to eliminate redundancies in electronic data, data entry, and document files. Data input into Coeus should be uploadable to Banner. Scanning of award documents by SPA Administration should suffice as the document for SPA Accounting.

The Reviewers heard several comments from the campus community that confused the institution’s acceptance of an award with the award activation. This confusion appears to arise when SPA Administration distributes a scanned copy of the award to the PI, but SPA Accounting has not yet assigned an account and fund number to activate it.

• **Recommendation:** SPA Administration and SPA Accounting should develop a shared process that presents a single information source to PIs and departmental administrators for award activation. Some institutions issue an award synopsis through their sponsored projects office with account and fund number assignment, important terms noted, and scanned documents attached; others have this information distributed by the accounting function. The Review Team suggests that SPA Administration no longer distribute a scanned copy of the award to the PI and department until after a fund number is assigned. To eliminate duplicate scanning, SPA Accounting should utilize the SPA Administration scan.

**Award Management**

Extramural policies are often broad and written in a manner that leaves room for interpretation. Sponsors expect their funds to be treated in a manner that recognizes specific terms and conditions; however, sponsors also recognize that institutions are able to accomplish their research in a variety of methods under a range of administrative structures. In many areas, both federal and non-federal sponsors rely on the recipient’s own policies and procedures. Within this framework, an institution has the ability to establish its operations, including policies and procedures, to optimize its research enterprise and appropriately allocate resources. These standards need to be balanced against the needs of the researchers to conduct their projects.

**NCURA Standards I.C.i. and C.ii Fiscal and Administrative Management**

Throughout the review of fiscal and award administration, the issue of poor electronic systems surfaced in conversations. Limited or no access to specific information or tools was consistently noted as the highest challenge faced. Changes during the life of an award such as a no cost extension require entry into two systems by both the pre and post award offices. While this report section does not specifically discuss the electronic systems available to support research at the institution, it is important to emphasize that the lack of systems in this area is significantly impacting research administration at MSU. Throughout the University, people noted the use of manual processes and spreadsheets to handle their responsibilities. The use of systems that are not integrated creates an inefficient work environment and leaves the institution at risk.

It appears that some sponsored projects policies and practices vary amongst Departments and Colleges. At an institution the size of MSU, having multiple people define policies creates
confusion for many and creates an environment where non-compliance with required guidelines may more easily occur. These challenges increase in the current environment where collaborative research is expanding.

As noted in the Electronic Research Administration section of this report, the financial system is under-utilized, creating an inefficient environment and increased opportunity for errors. One example is that the accounting staff manually calculates indirect costs on a monthly basis. Banner is capable of automating this process. Frustrated faculty stated that they commonly find miscalculations in their indirect costs and are frustrated because indirect costs are posted to the ledger only once per month, leaving them with a limited ability to manage their awards. With a very thinly staffed post award office, this is a burden that could fairly easily be removed with existing technology.

Award set ups are processed in SPA Accounting by one staff member. Having one staff member assigned to and knowledgeable of any task creates a risk for the institution and a bottleneck for that area. This is especially true in this critical area. The SPA Accounting Director acknowledged that this issue is a problem that she is concerned about but due to lack of staffing, she does not see another option. Award documents are forwarded from SPA Administration to SPA Accounting in paper form after they are scanned into SPA Administration’s electronic document system. SPA Accounting then scans them into their system. The structure of the set up for sponsored programs appears to meet the federal requirements and capture the required elements. Separate projects are set up as appropriate including designated accounts for cost sharing and projects without carryover. It was noted that awards arrive in SPA Accounting with errors. It is hoped that the recent addition of a checklist for SPA Administration staff to use in their process will improve this situation.

There are only three policies listed on SPA Accounting’s website. Typical and important policies, such as policies for cost transfers, effort reporting, and service center administration are not available. Extramural policies are often broad and written in a manner that leaves room for interpretation. Sponsors expect their funds to be treated in a manner that recognizes specific terms and conditions; however, sponsors also recognize that institutions are able to accomplish their research in a variety of methods under a range of administrative structures. In many areas, both federal and non-federal sponsors rely on the recipient’s own policies and procedures. Within this framework, an institution has the ability to establish its operations, including policies and procedures, to optimize its research enterprise and appropriately allocate resources. These standards need to be balanced against the needs of the researchers to conduct their projects.

- **Recommendation:** SPA Accounting should form a team to evaluate the current financial research administration policies in place, develop a plan to create policies that are needed, and establish a central location and consistent format for institutional policies related to the financial administration of sponsored programs that aligns with those of non-financial research administration policies. Part of this plan should include a future plan for regular review and update of policies. There is a compilation of different documents in a variety of different formats available on the website. Examples and different strategies can be found at:
Throughout the peer review, numerous people noted that cost transfers are frequently processed one year or more after the date of the original charge/transaction. MSU currently does not have a cost transfer policy. Cost transfers are frequently reviewed in federal audits and have resulted in findings. Most frequently, university policies require that cost transfers occur in a period of 90 days following the original transaction (or the end of the month in which the transaction occurred). Guidance from federal agencies also quotes this as a reasonable period. Late transfers are viewed by auditors as a “red flag” and as possible evidence that proper oversight is not in place for the administration of the project and/or that charges are being inappropriately moved between grants based upon availability of funds rather than benefit to the project. Late cost transfers should only be allowed under rare circumstances. Most staff (departmental and central) did not have knowledge of the issues surrounding late cost transfers.

- **Recommendation:** SPA Accounting needs to establish a cost transfer policy and ensure that central and departmental administrators are aware of the requirements. As the policy and procedures are developed, they need to ensure that there are systems to address that compliance to the policy is monitored. Specific requirements and terms of policies vary by institution. Pre-award accounts should be utilized for charges prior to the receipt of the award. The risk of not receiving the funds remains the same whether the costs are charged to a departmental fund or a pre-award account. Samples of cost transfer policies can be found at:

  - [http://policies.emory.edu/7.19](http://policies.emory.edu/7.19)
  - [http://www.vanderbilt.edu/ocga/vupolicies/costtransfers/costtransfer.htm](http://www.vanderbilt.edu/ocga/vupolicies/costtransfers/costtransfer.htm)

The processes in place related to cash management and the administration of federal letters of credit appear to be appropriate and in compliance with federal guidelines, but these are not well documented.

There is information and guidance available from SPA Administration in their manual regarding the development of a budget. Available online guidance or policies related to the allowability of costs during the life of the award is very limited. The Banner system is currently configured to route any expenditures above the budgeted high level budget line to SPA Accounting for approval. Since most sponsors allow spending outside of budget lines, this requirement is inefficient. Time is dedicated to this task that adds very minimal value, and as a result staff do not have time to evaluate high risk areas, such as reviewing charges that are potentially unallowable (office supplies or administrative salaries).
A high risk for the University in the area of award administration appears to exist at the departmental level. It appears that some departments do not have enough staff and/or knowledgeable administrators available to support the faculty in administering their projects. Some of the faculty expressed frustration that they are not provided with day-to-day support they need to administer their projects. Several reported that department assistants or other support staff who do not understand research administration are handling the administration of some awards. While SPA Accounting stated that all researchers must review and sign off on monthly financial statements, a couple of researchers stated that they do not receive any form of financial report regarding their awards. Having some faculty with minimal staff to support them or staff who are not knowledgeable about the administration of sponsored programs creates a large risk. This situation results in individuals making decisions on behalf of MSU without the appropriate knowledge to do so (i.e., processing charges to federal awards). One junior faculty member stated that she attended four hours of training on Banner so that she could train her administrative help. As mentioned previously in the report, the lack of defined roles and responsibilities creates significant confusion.

- **Recommendation:** SPA Accounting should assess the adequacy of the processes in place to review the allowability of costs. Having a more thorough review at invoicing and closeout and/or implementing a financial compliance program that includes reviews of selected projects should be investigated. Professional development opportunities to increase and maintain the level of knowledge of SPA Accounting staff in this area should be explored. It is important to note that additional staffing in SPA Accounting would be required to allow for this additional review. The lack of support and knowledge at the departmental level in some areas of the institution needs to be addressed.

Almost no information or guidance regarding effort reporting could be located on the websites. The effort reports are processed in a format where the researcher needs to move through dozens or more pages to locate his/her name and certify effort via a manual signature. The researchers that met with the Review Team seemed to understand the concepts of effort reporting.

- **Recommendation:** The Division of Finance and SPA Accounting should develop an effort reporting policy that clearly outlines the rules at a high level and look at the options for electronic effort reporting systems (including the use of Banner). An official policy outlines the rules at a high level and provides a clear reference to researchers. An electronic system provides an easy tool for both certifying and monitoring effort. A further discussion of Effort Reporting policies is available at: University of Wisconsin: [http://www.rsp.wisc.edu/effort/COGR_EffortPaper.pdf](http://www.rsp.wisc.edu/effort/COGR_EffortPaper.pdf)

Minimal requirements for subrecipient monitoring are in place. It was reported that the PI does review the invoices. The PI review is required and provides the value as they understand what work was to be done and if the invoice reflects what has been accomplished. There is limited review given to the risk of those with whom MSU is subcontracting. If the subcontractor does not have an A133 audit completed, it is noted but there is no additional follow up or
investigation done. There is very limited follow up or review occurring on the costs billed by subcontractors.

A cost accountant was recently hired to handle the facilities and administrative costs area and proposal. Staff reported concern that the DS2 statement is not being updated in a timely manner. This will be an area for the new cost accountant to focus on.

- **Notable Practice:** Having a staff member with a solid foundation of knowledge in facilities and administrative costs is very important for an institution with a research base the size of MSU’s. Many decisions that leadership makes may need to consider this area and the addition of this staff member will provide a resource.

Many tasks administered by SPA Accounting are still handled via paper forms and utilizing intercampus mail. This is inefficient and very unusual for universities in today’s world (particularly those the size of MSU).

- **Recommendation:** The Division of Finance should form a task force or consider bringing in consultants (given the lack of staffing in SPA Accounting) to conduct a review of business processes to identify where the use of electronic systems/options could increase efficiency and allow faster processing of documents and requests. While it may seem quicker to put an item in an envelope than to scan the item, the process of providing information to others has been very significantly extended beyond what it could be.

MSU has a clearly defined policy on Government Property Management. Equipment is managed in a web-based system and tracked by room. There is a feed from Banner which includes information on whether it was purchased with federal funds. The Manager in this area is knowledgeable of federal requirements for equipment. Sponsor required final property reports are routed through SPA Administration rather than SPA Accounting which is unusual. This task is normally a function of the post award office. The end date is not consistently updated in the equipment system for awards that are extended. Otherwise, the systems and oversight for equipment purchased with sponsored funds seem to be very well managed.

External audits are generally (but not always) handled by SPA Administration, which is unusual. The responsibility for different functions has not been defined.

SPA Administration handles various other tasks that would normally be handled in a post award office such as budget revisions and sponsor audits. Typically, the staff members in a post award office generally have backgrounds that are better suited for administering these areas.

- **Recommendation:** The Associate Vice President for Research and Associate Vice President for Budget and Planning should evaluate SPA Administration’s involvement in the closeout and external audit processes. Reports such as the final property report and final invention report are reports that could be obtained by SPA Accounting as part of their closeout process, thereby removing the need to involve another office (SPA Administration) and further
confusion to the closeout process. External audits are normally handled by the post award office or the institution’s internal audit office.

- **Recommendation:** The Associate Vice President for Research and Associate Vice President for Budget and Planning should evaluate the tasks handled by SPA Administration and SPA Accounting to ensure that the most appropriate staff are assigned to tasks.

- **Recommendation:** MSU should develop and issue a formal policy for record retention. SPA Administration’s policy recommends that documents from sponsors and externally funded projects should be retained according to the grant or contract terms. Typical policies for record retention expand this recommendation to note that documents should be maintained for three years following the submission of the final report (technical and financial) unless required to be maintained longer by the terms of the agreement.

**Research Ethics**

Sponsored program activities come with a variety of ethical responsibilities that are shared by investigators and the institution. While institutions are expected to have appropriate policies and oversight committees in place, the principal investigators and the institution share the ultimate responsibility that the conduct, and those of their colleagues and students, are within acceptable practices.

The commitment to an effective research ethics program is a visible demonstration of the University’s willingness to maintain the trust of its major constituencies. Effective research ethics programs are based on some guiding principles such as:

- Stewardship of sponsor and donor funds
- Ethical conduct of research to assure the objectivity of the research and the integrity of the data
- Protection of human and animal subjects
- Safety of the employees participating in the research enterprise
- Protection of the environment for both University employees and student and the community they serve

Research ethics programs are constantly challenged with ever increasing regulations, guidance and policies. Each institution should have in place a process to monitor these changes, assess their impact on the specific institutional programs, identify and manage the risk for their specific institution and research portfolio and respond appropriately with policies, procedures, auditing and monitoring programs, educational initiatives and the ability to receive and respond to allegations of wrong doing.
**Electronic Research Administration**

Most procedures for the regulatory compliance functions are paper-based. Forms are posted and may be completed on the web, but routing is done by mail or as scanned attachments to email. Approval letters for all committees are issued as email messages to researchers with copies to SPA.

The IRB utilizes IRB+, a cloud computing service that stores campus protocol data and allows local IRB staff to easily prepare agendas and approval letters. The IACUC uses LAMS software. The IRB, IACUC and IBC have access to proposal and award information that is scanned by SPA Administration to a shared network drive.

There is no direct feed of data between SPA Administration and the regulatory committees or among the regulatory committees, so each group performs data input. This is an inefficient method to manage data and one that amplifies opportunities for errors in the various systems.

- **Recommendation:** The Office of Regulatory Compliance and Safety and SPA Administration should work toward an integrated data system to streamline processes between SPA Administration and the regulatory committees. SPA Administration’s Coeus system has expanded its support for IRB and IACUC activities and continues to make improvements, including in the future biosafety and radiation safety modules. MSU should examine the possibility of transitioning data to Coeus or, at minimum, uploading personnel and home department data tables from Coeus to the committees’ systems to establish a common data set. Other alternative software vendors include:

  - Huron Click Portal offers secure, browser-based solutions for sponsored programs and the regulatory committees that are fully integrated with each other and with existing systems. Link to: [http://www.clickcommerce.com/cc/Ro](http://www.clickcommerce.com/cc/Ro)


- **Recommendation:** The ORCS staff should investigate software options that would provide for researcher’s electronic submission of applications to all compliance committees. The IRB is presently working toward electronic signatures on their applications. The faculty and process would benefit from this enhancement and investigators all voiced support for more electronic processes.

Overall, there is evidence of a solid understanding of the roles and responsibilities of the compliance committees/areas. These areas will be discussed in depth later in the report. An area of concern is that the University is not complying with its Financial Conflict of Interest policy and procedures, which could put the institution’s funding from NSF and NIH (and the non-
profits that follow the NIH) at risk. Communication, education and knowledge regarding this important area appear to be lacking.

- **Recommendation:** MSU needs to ensure that they have proper policies, guidelines and education in place to manage the risks associated with financial conflicts of interest. A task force should be formed to revise the policy and structure of this area.

**NCURA Standard I.D.i. Project Integrity**

*Responsible Conduct of Research:* The MSU Plan of Implementation of Requirements to Provide Responsible Conduct of Research (RCR) Training for the National Science Foundation, the National Institutes of Health, and the Federal Demonstration Partnership is posted on the ORED Research Conduct website. The RCR training for students includes MSU credit courses, ORED refresher seminars, and web-based training offered through CITI, the Collaborative Institutional Training Initiative hosted by the University of Miami. All undergraduate students, graduate students and postdoctoral scholars employed on a federally-funded project must enroll in an approved MSU RCR course or complete the on-line CITI training. Those choosing to complete the CITI course also must attend six one-hour face-to-face discussion sessions related to one of the nine core competencies recognized by the Public Health Service.

- **Notable Practice:** The RCR Training Plan is comprehensive and provides alternative training and scheduling to students. The refresher course allows researchers to maintain awareness of core competencies.

*Conflict of Interest:* The Policy and Procedure Statement on Conflict of Interest in Federally Sponsored Programs at Mississippi State University addresses financial conflict of interests in research as a means to protect objectivity in NSF and NIH sponsored project activities. The policy itself is compliant with federal requirements in defining a Significant Financial Interest and requiring annual review by the institution to manage, reduce or eliminate certain interests prior to expenditure of federal funding. However, the Conflict of Interest Review Committee (CIRC) described in the policy was disbanded a couple of years ago and the Research Ethics Review Officer is not participating in the process as stated. Instead, the Director of SPA is reviewing positive disclosures. This is serious noncompliance with a published institutional policy and one that could potentially be labeled a conflict of interest itself, since the assessment of a disclosure is made by the person facilitating external funding. A campus committee has started to revise the campus policy to incorporate changes in the disclosure requirements and review structure in accordance with new PHS regulations. These regulations are effective on September 26, 2011 and require institutional compliance by August 24, 2012, or when the institution’s policy is publicly available, whichever is first.

- **Recommendation:** It is critical that MSU move quickly to put a functioning review structure for financial conflicts of interest in place. Disclosure and review processes must follow those set forth in the MSU policy document. Otherwise, the institution will be open to criticism from the federal agencies, faculty, staff and the public, especially if a potentially harmful conflict is overlooked.

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• **Recommendation:** MSU should consider requiring financial disclosures for all key investigators, regardless of funding source. Many research universities have established policies that require disclosures of financial interests from all sponsored investigators. These institutions believe that protecting the objectivity of research is at the heart of disclosure and transparency. Examples are:

Indiana University - [http://researchadmin.iu.edu/COI/coi_home.html](http://researchadmin.iu.edu/COI/coi_home.html)
University of Pennsylvania - [http://www.upenn.edu/almanac/v47/n21/ORdisclosure.html](http://www.upenn.edu/almanac/v47/n21/ORdisclosure.html)

The Review Team was told of discussions during the revision of the conflict of interest policy that would disband the standing CIRC and institute individual *ad hoc* CIRCs for each disclosure. Although it is indeed important to consider aspects of the disclosing faculty member’s scientific discipline, it is far more important for review committee members to understand the risks of conflict of interest and be able to make decisions that are consistent for all disciplines on campus. New members of conflict of interest review committees develop a better understanding of the regulations, the concerns and the effective methods of managing conflicts as they gain experience reviewing disclosures. The learning curve for committee members to understand the nuances of conflicts of interest can be a year or more. Management’s dilemma is how to give the review committee enough disclosures that the members begin to develop thresholds and standard responses, while not overwhelming them with tedious paperwork.

• **Recommendation:** MSU should consider appointing a core group of four or five faculty to serve two or three year staggered terms on the CIRC, bringing in additional faculty members when expertise is needed on a particular disclosure. Appointees should represent the broad academic community and receive orientation on conflict of interest regulations and committee responsibilities prior to their first meeting. A representative from OTC could also be a useful, non-voting contributor. Rather than asking the Research Ethics Review Officer to screen disclosures, it may be useful to engage the future CIRC by having them review all disclosures of financial interests for an extended period of time. Based upon an estimate from the SPA Director, the volume would be approximately 1-2 per month, which seems very manageable.

The Internal Approval Sheet accompanying each proposal includes a question regarding the PI’s or Co-PI’s “actual, potential or perceived conflict of interest regarding the project.” It often is difficult for an individual to recognize a “conflict of interest” in their own business dealings. Thus, the federal policy was written to require disclosure of “financial interests” exceeding a numerical level. The question on the IAS may limit disclosures of financial interests by asking investigators to determine if they have a conflict of interest. This is a judgment that the University Research Ethics Review Officer or the University Conflict of Interest Review Committee should make.

• **Recommendation:** The IAS question related to conflict of interest should be reworded. One option is: “Does the PI or Co-PI have a financial interest that could be related to the project? If yes, please submit a disclosure.” This prompts...
investigator disclosure of qualifying financial interests and removes them from determining if that financial interest might be considered a conflict of interest.

When an investigator has a financial interest, they submit a Financial Disclosure Form with the IAS to SPA Administration. SPA Administration Internal Procedures make no mention of the receipt or further routing of the financial disclosure forms with the proposal package. Therefore, the Review Team might conclude that the proposal review staff does not ensure that the disclosure forms are submitted or complete.

- **Recommendation:** The SPA Administration Internal Procedures should be revised to include instructions on the review and routing of Financial Disclosure Forms. SPA Administration staff should ensure that faculty who indicate they have a financial interest have submitted the Disclosure Form and supporting documentation. If electronic systems were in place, it might be possible to institute an alert to SPA Administration staff for submitting investigators who have disclosed financial interests within the past year. Disclosures should be forwarded directly to the Research Ethics Review Officer in accordance with the current policy or as provided in the revised policy.

- **Recommendation:** The SPA Administration Internal Procedures should be revised to indicate order of precedence for consideration of a disclosed financial interest and a request for pre-award spending. The current procedures do not describe actions to take when a request for pre-award spending is submitted and one or more investigators on the project have disclosed a significant financial interest.

Although the current policy assigns responsibilities to the Research Ethics Review Officer to review financial disclosures, support the CIRC and coordinate Resolution Plans, SPA Administration is designated as the office of record for investigator financial disclosures and the paperwork documenting resulting actions taken to manage conflicts of interest. This record-keeping responsibility seems misplaced.

- **Recommendation:** MSU should reconsider the assignment of record-keeping responsibility in revising the conflict of interest policy. The conflict of interest policy should state that the Research Ethics Review Officer, or the staff person hired to manage conflicts of interest, maintains the records of investigator financial disclosures and of actions taken to manage conflicts of interest.

The current conflict of interest policy describes reporting responsibilities to sponsoring agencies, but does not indicate which office will take the lead. Generally, the conflict of interest administrator advises SPA Administration so that communication can occur between that office and the agency.

- **Recommendation:** The conflict of interest policy should reflect the responsible office to notify sponsoring agencies, as required, of the outcome of a review. The policy should describe the coordination between the review
Office (Research Ethics Review Officer or conflict of interest administrator) and SPA Administration.

State ethics laws prohibit state employees from maintaining a material financial interest in a company that contracts or licenses technology from MSU, except when the arrangement is approved by the Mississippi Universities Research Authority (MURA). MURA approves and manages arrangements that involve an employee’s financial interest or ownership in the licensee of MSU technology. Research relationships with MSU employee-owned companies can take several forms: University research is funded by the MURA company, including personnel with equity in the company; company goods or services are purchased by the university; the company wishes to use University facilities and/or equipment for a fee; the company employs university graduate students; or the employee with equity in the company is spending a significant portion of time on company business to the extent it has become a conflict of time commitment. The Faculty Guide to Start-Up Companies (Faculty Guide) on the OTC website describes the process and provides application letter templates. An application letter requires a full description of the enterprise, the faculty member’s interests and participation, and how the company will benefit the Mississippi economy; it is signed by the inventor and the MSU President. A statement that the company will not adversely affect the University or any substantial State interest is required. Annual updates are also required. Information regarding approvals by MURA is summarized for the SPA Administration Director; however, the posted Faculty Guide indicates that the Ethics Officer is somehow advised. MURA review is conducted outside of the conflict of interest process involving federal sponsors, but the Research Ethics Review Officer may ask for review by the CIRC.

- **Recommendation:** The campus should make faculty and staff aware that the MURA approval process does not relieve investigators from completing financial disclosures required by federal sponsors. The Review Team was advised of problems due to this misunderstanding.

- **Recommendation:** Approved MURA applications should be routed to the Research Ethics Review Officer, as stated in the Faculty Guide, in addition to the SPA Administration Director. The Research Ethics Review Officer would then be able to cross-reference faculty interests with federal disclosures. If the SPA Administration Director is to be copied, the Faculty Guide should so indicate.

- **Recommendation:** The Research Ethics Review Officer should develop a database of positive disclosures and CIRC decisions, which can be cross-referenced with MURA approvals and disclosure information received by the Institutional Review Board. The institution needs to be vigilant to ensure information on the financial interests of faculty is consistently shared among the units that require it for decision-making and institutional compliance.

**Research Ethics:** MSU’s policy, Ethics in Research and Other Scholarly Activities, addresses research and scholarly misconduct. This policy complies with federal requirements and follows the suggested procedural steps of review, inquiry and investigation. The Assistant Vice President for Research administers the research ethics policy and supports the review.
processes. Several allegations have been completed under the established procedures. The MSU policy has been in place for approximately three years and was filed with the DHHS Office of Research Integrity. Annual reports of research misconduct activity are filed with ORI between January 1 and March 1 of each year.

Research ethics training is offered to faculty in addition to students; however, faculty participation is not mandatory. A library of webcasts related to research ethics is archived on the ORED website under Resources for access at any time. The campus website encourages individuals to report any suspicious or inappropriate activity. Links to the MSU Ethics Line are included in the footer of the MSU home page and several other second-level MSU web pages.

- **Notable Practice:** The MSU Ethics Line offers anonymous reporting of actions perceived as inappropriate and provides for the subsequent exchange of information with the complainant. The Ethics Line is prominently displayed on the Office of Regulatory Compliance and Safety web page.

**NCURA Standards I.D.ii Human and Animal Use**

The Office of Regulatory Compliance and Safety manages the institution’s compliance with regulations involving human participants, animal subjects, biosafety, laboratory and environmental safety, radiation safety, chemical hygiene and general campus safety. The office also may be assigned support responsibilities for conflict of interest in the future. In all areas interviewed, the Reviewers were impressed with the knowledgeable staff and committee chairs, the policy and guidance materials available on the ORCS website, and the web-based instructional modules.

Open communication between the regulatory committees and the Vice President for Research and Economic Development (who serves as the Institutional Official) is essential regarding research demands, regulatory changes and committee needs. Monthly meetings are currently scheduled with the committee chair and the Associate VPRED. Periodic meetings also allow the VPR to express appreciation to these volunteer chairs for the time commitment.

When IRB or IACUC involvement is indicated on the Institutional Approval Sheet at the proposal stage, SPA Administration forwards a scanned copy of the proposal to the regulatory committee staff. There is no direct feed of data in either direction between Coeus and the compliance committees. There is no integration of compliance obligations, except as recorded in the Coeus database.

**Institutional Review Board:** MSU’s policy complies with regulations governing the participation of human subjects in federal research activities; the institution has been granted a Human Subjects Assurance (FWA00000203) by the DHHS Office for Human Research Protections. The current Assurance is valid through May 10, 2013. MSU policy applies the Assurance terms only to federally-funded research, but utilizes the federal standards as the basis for all reviews, regardless of the source or existence of funding. The Vice President for Research and Economic Development is the Institutional Official for this regulated area.
The campus has one Institutional Review Board, which meets every month and reviews approximately four protocols per month. The IRB has the full authority to: review and approve; require modifications in; or disapprove, suspend or terminate research activities involving humans as research subjects. The average number of applications and other IRB transactions processed each year exceeds 800, with Exempt and Administrative protocols comprising the majority of reviews. Full Committee review could take five to six weeks or longer depending upon the time to committee meeting. Expedited review is targeted at two weeks and the goal for Exempt or Administrative review is five days. More time could be required if questions arise or changes are required.

The IRB requires disclosure of financial interests for all researchers and all review levels. Depending upon the review level, either the IRB Chair or the entire committee conducts a review of the interests and determines necessary actions if mitigation is appropriate. IRB members may review private contract terms and require disclosure of the financial interest in consent forms. The Research Ethics Review Officer is copied on the outcome of the IRB financial review.

The IRB is presently pursuing accreditation by the Association for the Accreditation of Human Research Protection Programs, Inc. (AAHRPP). This process demands considerable effort to improve policies and procedures, and raise awareness of the campus community to the obligations inherent in human research. MSU IRB has already completed two self-assessments and implemented changes to policies and procedures. The IRB website hosts an impressive collection of policies and procedures to guide researchers, maintain compliance, and educate faculty, students and staff. These policies will be closely reviewed by AAHRPP during the accreditation review, so the NCURA peer review will not provide an in depth critique.

- **Notable Practice:** A comprehensive list of IRB policies and procedures is easily accessible on the IRB website. Key topics are addressed by policies and procedures. A cursory review of the contents found the documents to be well written and complete.

Each researcher and person identified as key personnel must take either the MSU web-based training module on the use of human subjects in research or attend a classroom training session prior to participating in a project involving human subjects. The web-based training is offered through CITI, the Collaborative Institutional Training Initiative.

- **Notable Practice:** The **MSU web-based training menu for the use of human subjects in research is well done.** This educational module allows faculty, staff and students to complete required training at their own pace.

*Institutional Animal Care and Use Committee:* MSU is in compliance with federal regulations governing the involvement of vertebrate animal subjects in research, testing and instructional activities. The campus Institutional Animal Care and Use Committee program has been granted an Animal Assurance (A3160-01) by the DHHS Office for Laboratory Animal Welfare; the Assurance is valid until December 31, 2014. In addition, the US Department of Agriculture issued Registration Number 65-R-0002 to the campus for USDA-covered species.
The Vice President for Research and Economic Development is the Institutional Official for this regulated area. The IACUC and the University Laboratory Animal Veterinarian work as a team to support research. The campus has one IACUC, which meets monthly and reviews approximately 120 protocols per year. The IACUC has the full authority to: review and approve; require modifications in; or disapprove, suspend or terminate research activities utilizing animals in research and teaching. Approvals are generally issued within three weeks of receipt, depending upon the meeting schedule. In addition, the IACUC performs semi-annual inspections of regulated facilities in accordance with the federal regulations and tries to visit one USDA-regulated School of Agriculture facility every year.

The IACUC in August 2010 took over review of the School of Agriculture’s teaching protocols utilizing animals. Since then, the IACUC chair has noticed that the committee staff appears burdened at times. This increased volume (approximately 50%) has resulted in short delays and occasional errors in correspondence.

- **Recommendation:** The Director of ORCS should monitor the IACUC staff workload and response time to determine if action is needed to avoid delays or errors. Remedies might include assigning part time staff to the IACUC during peak periods, adopting streamlined procedures, or adding staff.

The IACUC requires all persons working with or around vertebrate animals to register with the Occupational Health and Safety Program (OHSP), where they have the option of providing medical information for assessment by the MSU occupational health and safety physician. All persons must also complete an Animal Handler training program before beginning work with animals. Failure to enroll and/or provide updates can result in suspension of one’s ability to do animal work. Faculty, staff and students are required to attend refresher training every four years and alternatives are suggested to satisfy the requirement.

**NCURA Standards I.D.iii Biohazards, Radiation Safety, Bioterrorism**

The MSU Office of Regulatory Compliance and Safety is responsible for biosafety, including recombinant DNA, select agents, chemical safety, and radiation safety. Policy documents are in accordance with federal laws and regulations. Most radioactive materials work is conducted under Educational Broad Scope License MS-EBL-02. The Vice President for Research and Economic Development is the Institutional Official for the above regulated areas.

The campus currently engages in BSL 2 level research and might consider establishing facilities for BSL 3 if resources are made available. The IBC chair and the Director of ORCS were knowledgeable and engaged. Researchers have access to web-based and classroom training for the above areas and are expected to demonstrate good laboratory practices and be aware of changing requirements. Major policy or procedural changes are spotlighted in the monthly ORED newsletter to raise awareness of regulatory requirements.

- **Recommendation:** None
Export Controls/Deemed Export Regulations

The MSU Export Control Management Plan was issued August 2008. This document summarizes federal law and provides guidance to the campus community confronted with export control issues. SPA Administration staff often are first to identify export control issues in proposals and awards, at which time the Plan calls for the Export Control Officer, who was a SPA Administrator, to monitor and direct the University’s compliance. This responsibility has been assigned to the Director of Research Security.

- **Recommendation:** MSU should revise the Export Control Management Plan to accurately reflect the current authorities and procedures. The Director of Research Security has the responsibility to work with faculty and obtain licenses for controlled items.

- **Recommendation:** MSU should revise the Export Control Management Plan to assign record retention responsibilities to the Director of Research Security. The Plan now calls for the individual researcher and SPA Administration to maintain all records.

The Plan emphasizes the need for continued faculty and staff outreach to ensure a high level of awareness on campus. However, the review materials do not indicate recent educational efforts related to export control.

- **Recommendation:** The Director of Research Security should provide regular reminders to faculty on the responsibilities related to export control. Given the global expansion of research activities, educational outreach, collaborations and scholarly exchanges, export control issues are becoming more common on campuses. In order to ensure an informed campus community on such a high-risk, complex requirement, regular communications are extremely helpful.

The Director of Research Security explained that his responsibilities are limited to research only and he is not in communication with other offices on campus regarding export control matters. The Review Team would like to point out that there are a number of offices on campus that would potentially share a role in export control, including those who work with or make payment to denied or debarred persons.

- **Recommendation:** The Director of Research Security should meet with individuals in Procurement and Contracts, Accounts Payable and Shipping to inform them of export control regulations that may impact their areas of responsibility. The discussion should propose simple screening mechanisms to ensure that any potential export control activity is brought to the attention of the appropriate office for review. Because the Office of Research Security and Export Control has a subscription to Visual Compliance and can perform more detailed reviews, most questions should be directed there.
APPENDICES

- Appendix A: NCURA Standards
- Appendix B: NCURA Peer Review Team Bios
- Appendix C: Charge to the NCURA Peer Review Team
- Appendix D: Site Visit Itinerary
- Appendix E: NCURA Resources
- Appendix F: Example of Career Paths
- Appendix G: Examples of a Risk Matrix
Appendix A: NCURA Standards

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National Council of University Research Administrators

Scope and Standards for Peer Reviewed Sponsored Projects Organizations

This definition of “Scope and Standards” represents a statement of the extent of an NCURA Sponsored Peer Review. While recognizing that institutions are organized differently with various kinds of pre- and post-award services, this definition of “Scope” reflects the core operations of Research Administration. The “Standards” outlined below come primarily from the Council of Governmental Relations, “Managing Externally Funded Research Programs: A Guide to Effective Management Practices” (June 2005).

I. CORE OPERATIONS
   A. Proposal Services
      i. Collection and Dissemination of Funding Information
         The institution has procedures in place to identify various opportunities (Federal, State, local, private foundations, etc.) to which faculty can apply for funding. A system is in place to disseminate to faculty information on current funding opportunities in an efficient, timely and easily accessible manner.
         
         STANDARD: The institution has access to information on prospective sponsors and their requirements.
         STANDARD: The institution provides faculty with information on sources of support for research and other scholarly activities.

      ii. Proposal Development and Assistance
         The institution has a process in place to assist faculty with responding to funding opportunities, including proposal writing, understanding and complying with rules, regulations and administrative requirements and help with electronic application processes.
         
         STANDARD: The institution has trained personnel who are knowledgeable about sponsor regulations, requirements and procedures.
         STANDARD: The institution has trained staff who advises investigators in preparation of compliant proposals.
         STANDARD: The institution has appropriate procedures in place to allow it to access and utilize the electronic proposal, award, administrative, and financial management systems of the federal government or other sponsors.
         STANDARD: The institution stays current with respect to the electronic research initiatives of sponsored projects sponsors.
         STANDARD: The institution provides assistance for proposal writing and for proposal preparation.

      iii. Proposal Review and Submission
         The institution follows standard processes and procedures for review of the business, administrative, and financial aspects of proposals developed by their faculty and submits the proposal to the sponsor on behalf of the institution. Where necessary, the
administrative official who submits the proposal on behalf of the proposing organization also makes certifications and assurances to the sponsor. They commit the organization to the conduct of the project that the sponsor is being asked to support as well as ensure the institution will adhere to the sponsor’s various policies and grant requirements.

**STANDARD:** The institution advises investigators in preparation of compliant proposals.

**STANDARD:** The institution has a comprehensive system in place that is designed to ensure compliance with federal, state and local laws.

**STANDARD:** The institution processes proposals in compliance with institutional and sponsor policies and procedures.

**STANDARD:** The institution has procedures in place to coordinate internal competitions that limit the number of submissions per institution.

iv. **Collaborative Project Development**

The institution assists its faculty who wish to collaborate, either with other colleagues at their own institution or at other organizations, on a unified project.

**STANDARD:** The institution reviews the collaborative arrangements and determines if the proposed activity is appropriately and administratively manageable.

v. **Agency Liaison**

Institution staff are involved with proposal development, review and submission and have established methods of keeping up-to-date on changes to sponsor’s policies, procedures and processes. Such methods may include, for example, subscription to electronic mailing lists, newsletters or attendance at outreach events, conferences and/or webcasts.

**STANDARD:** Staff have knowledge of the organizational structure of the sponsor and are able to contact the appropriate individual or office when they have questions.

**STANDARD:** The institution has trained personnel who are knowledgeable about sponsor regulations, requirements and procedures.

B. **Award Acceptance and Initiation**

i. **Review and Negotiation of Terms and Conditions**

Grants and agreements that provide sponsored funding require review by the institution of the terms and conditions that are part of the award. While many grants come with standard terms and conditions, many agreements have language that necessitates scrutiny prior to acceptance. All awards require an institutional evaluation for sponsor restrictions on such items as the use of funds, appropriate project personnel, publication rights, intellectual property, etc. to assure compliance with institutional policies that govern the research activities of the campus.

**STANDARD:** The institution has staff trained to review and negotiate agreement terms and conditions.
STANDARD: The Institutional staff is cognizant of institutional policies and practices with respect to ownership of intellectual property rights, publication, and acceptance of classified material, etc.

STANDARD: The staff is authorized to negotiate changes in award terms and conditions and has access to legal assistance, either institutional or external counsel, when required during complex negotiations.

STANDARD: Investigators and other concerned individuals are consulted/informed during the negotiation.

STANDARD: The institution has policies and procedures to assure compliance with national policy requirements, e.g. Export Controls, Nondiscrimination, etc.

ii. Ancillary Agreements Associated with Research Grants and Contracts
Prior to acceptance, the institution evaluates any sponsor restrictions in light of campus policies and other existing projects. The review includes all agreements commonly associated with research, including material transfer agreements, clinical trial agreements, confidentiality agreements, and others.

STANDARD: The institution has procedures for the review and negotiation of research and other agreements that meet all institutional policies and practices.

STANDARD: The institution takes advantage, when appropriate, of standard agreements, e.g., the Uniform Biological Material Transfer Agreement or the National Institutes of Health Simple Letter Agreement.

iii. Subawards
Incoming subawards are agreements that provide flow-through funding for a sponsored project. With incoming subawards the terms and conditions of the agreement require review as well as any restrictions that pass through from the original funding agency. An outgoing subaward is one in which the institution provides sponsored funding to a third party through the issuance of an agreement. Outgoing subawards are typically issued by a central office with the approval of the PI, and they may require negotiation with the recipient individual or organization.

STANDARD: The institution has policies and procedures for issuing subrecipient agreements and for monitoring the performance of subrecipients.

STANDARD: Policies and procedures are in place to determine whether subrecipients have established adequate management and financial systems prior to issuing subrecipient agreements.

STANDARD: Adequate documentation for the selection and approval if necessary, of the subrecipient when not named in the proposal, is prepared and maintained.

iv. Award Acceptance Process
The institution has a process in place that allows the formal acceptance of a sponsored award by designated individuals or offices. In some cases that may be the negotiation and signing of a bilateral agreement. In others, acceptance occurs when the institution begins to spend the funds provided.
STANDARD: The institution has a system to review proposed award terms and conditions and to negotiate those terms in accordance with institutional standards prior to award acceptance.

STANDARD: The institution has written procedures for review of award documents prior to acceptance.

STANDARD: Award budgets are compared to proposal budgets and amended budgets or scopes of work are submitted when awards have been significantly reduced from requested amounts.

STANDARD: The institution does not make funds available until compliance requirements are satisfied (e.g., human subjects committee approvals, conflicts of interest disclosures, etc.).

v. Award Activation and Notification
Activation is the process by which a sponsored award is placed in the accounting system and made available to the principal investigator for expenditures. The notification process delineates the steps followed to make all appropriate parties, such as PI and departmental staff, aware that the award has been accepted and activated by the institution.

STANDARD: The institution has developed procedures to establish awards in its accounting system in a timely manner, including receipt of electronic awards.

STANDARD: Terms and conditions of awards are distributed to principal investigators and made available to other institutional personnel, as required.

C. Award Management
i. Fiscal Management
The institution has established policies for F&A rates, cost sharing, re-budgeting, time and effort, fiscal controls, cost accounting standards, cost transfers, cash management, program income, recharge centers, procurement, and closeout.

STANDARD: The institution has policies and procedures for:
• proposal costing and budget administration
• the review and submission of budget changes
• assessing F&A costs on external projects
• the review and approval of exceptions and waivers of F&A cost collection
• financial management systems
• depositing all monies on a timely basis and invest them in accordance with institutional and Federal policies and to record the receipt of revenue, to disburse cash, and to bill agencies in a timely manner
• establishing service and recharge centers and for reviewing rates charged by centers
• notifying of upcoming termination dates to appropriate offices and to ensure timely closeout of programs including submission of all sponsor required financial reports, invoices, and deliverables
• defining allowability of costs that are consistent with federal cost principles and other applicable standards of other sponsors
• justifying adequately cost transfers in a reasonable period of time
• applying consistently compensation costs in proposing, accumulating, and reporting those costs
• assuring that sponsor-imposed salary caps are in place.
• governing fringe benefits and the method used to account for these costs
• reporting payroll and effort certification
• purchase of goods and services
• procurement systems
• the identification, recording, managing, and reporting program income in accordance with regulations
• expedited purchases

**STANDARD:** Staff are knowledgeable and responsible for initiation of direct charges and staff are knowledgeable and responsible for approval and payment of those charges.

**STANDARD:** Systems exist for:

• distinguishing between acquisition of goods and services and subrecipient agreements
• providing timely close out of purchases
• identifying mandatory and voluntary cost sharing
• proposing, accumulating, and reporting of cost sharing
• incorporating cost sharing if required in subawards

ii. Administrative Management

The institution has established management systems for administering awards and that encompasses prior approval, reporting, record retention, data retention, subrecipient monitoring, intellectual property, and property control.

**STANDARD:** There is clear communication of Intellectual Property policies and procedures for ownership and management of research data.

**STANDARD:** The accounting system identifies all external funded projects and the system provides appropriate review and internal controls.

**STANDARD:** The institution has procedures for seeking required sponsor prior approvals and for implementing federal expanded authorities.

**STANDARD:** The institution has policies and procedures that ensure compliance with mandated cost accounting standards, demonstrate on-going compliance with the CAS standards whether a DS-2 disclosure statement is filed or not, and ensure revisions to DS-2 are filed as required.

**STANDARD:** Property control policies and procedures exist for acquisition, use, and disposition of equipment, for equipment inventory, and for reporting equipment to external sponsors.

**STANDARD:** The institution has policies regarding responsibilities for report preparation and has procedures for submission of required reports and other deliverables.

**STANDARD:** Record retention policies and procedures exist for the retention and access of financial and administrative data and for responding to requests for data under relevant open records requests.
D. Research Ethics

i. Project Integrity

The institution has policies and procedures that govern responsible conduct of research, conflict of interests, and research integrity (misconduct) and appropriate assurances of compliance.

**STANDARD:** The institution has a written policy that:

- addresses treatment of allegations of research misconduct and that meets sponsor requirements
- assists faculty, staff, and students in determining whether and to what extent outside financial relationships and interests may conflict with their primary research and academic activities or other institutional responsibilities

**STANDARD:** The institution has written procedures to:

- manage individual financial conflicts of interest
- recognize the concern regarding conflict of interest in research involving human subjects identify potential financial conflicts of interest of the institution and has mechanisms in place for managing them

ii. Human and Animal Use

The institution has systems that comply with federal and state regulations and that provide ethical protection of human subjects and for the humane care and use of animals.

**STANDARD:** The institution’s compliance systems accommodate multiple and integrated compliance obligations and are coordinated so that oversight and approval responsibilities are linked in an effective and timely manner.

**STANDARD:** The institution has a written Federal-Wide Assurance with the DHHS and received approval in accordance with federal regulations.

**STANDARD:** The institution has access to at least one Institutional Review Board in accordance with federal regulations to review, approve, require modifications in, or disapprove, suspend or terminate research activities involving human as research subjects.

**STANDARD:** The institution has a system of coordination between its IRB and sponsored projects administration.

**STANDARD:** The institution has filed a written assurance with the DHHS and received approval thereof, and has also secured USDA registration.

**STANDARD:** The institution has established at least one Institutional Animal Care and Use Committee in accordance with federal regulations to review, approve, require modifications to, or disapprove, suspend or terminate activities involving animals used in research.
**STANDARD:** The institution has a system of coordination between its IACUC and sponsored projects administration.

**STANDARD:** Adequate systems are in place to track, report, and maintain compliance with the Animal Welfare Act, the Public Health Service Policy on Humane Care and Use of Laboratory Animals, and applicable occupational health regulations.

iii. **Biohazards, Radiation Safety, Bioterrorism**

The institution has appropriate biohazards and radiation safety, and public health security and bioterrorism systems in place.

**STANDARD:** The institution has adopted an environmental, health, and safety policy that meets environmental, health and safety regulatory standards in sponsored projects activities.

**STANDARD:** The institution has devoted adequate staffing, funding, and other resources to implement, manage and oversee its EHS system and performance.

**STANDARD:** The institution has created a functional organization with clear roles, responsibilities and accountabilities for regulatory compliance and oversight.

**STANDARD:** The institution has established an EHS management system and written policies and procedures for the scope and complexity of activities at the institution.

II. **INSTITUTIONAL INFRASTRUCTURE**

A. **Organizational Structure**

i. **Operational Structure**

The institution has identified offices and structures that support the sponsored programs function at both the central and departmental levels.

**STANDARD:** The relationships of institutional offices at both the central and departmental levels are compatible and supportive of one another.

**STANDARD:** Alignment is strong both between central offices and schools and departments as well as sponsors.

**STANDARD:** Operational relationships among other related functions is positive, such as development, human resources, travel, purchasing and procurements, information technology, and compliance functions.

**STANDARD:** Lines of authority and coordination of functions are clearly delineated. Roles and responsibilities are specified, particularly for key sponsor requirements, including final authority, decision-making.

ii. **Staffing and Resources**

The staff and financial resources necessary to support the core functions of the sponsored programs function are sufficient and consistent with its research volume and the complexity of the organization.

**STANDARD:** Staffing and resources are sufficient to meet the service requirements of constituents and compliance requirements of sponsors, including financial and administrative requirements.

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STANDARD: Resources are sufficient to identify funding opportunities for faculty, and to provide education and training for faculty and staff, IT support, etc.

STANDARD: Sufficient formal and informal opportunities exist for the professional development of staff, in terms of continuing education, professional meetings, etc. in order to be current with sponsor requirements, effective practices, and appropriate oversight procedures.

B. Communication, Outreach, and Education
i. Communication and Outreach
The institution has established mechanisms for regular communication between faculty, central offices, and departmental staff about sponsored programs policies and procedures, expectations, roles and responsibilities, changes in policies, and risk areas.

STANDARD: There are routine and predictable means utilized to communicate institutional policies and procedures to faculty and appropriate staff. For example, sponsored programs policies may be incorporated within a body of formal organizational policy, the policies may be distributed in writing, updated on a web site, and special notices distributed by email, etc.

STANDARD: There are periodic communications to senior management and academic deans and department heads, regarding significant issues, implementation of new requirements, risk areas, assessment of staff resources, etc.

ii. Education
The institution has established programs of education for faculty including teaching and research faculty, postdocs, and graduate and undergraduate students, as appropriate, about institutional and sponsor expectations in the conduct of sponsored programs.

STANDARD: There are programs of education as appropriate for faculty, students, and staff on institutional policies and procedures, compliance issues, special risk areas, resources, points of contact, etc.

STANDARD: There are programs of education, as mandated for specific compliance requirements, such as the protection of humans and animals, biosafety and other substantive policy requirements.

C. Compliance and Risk Assessment
i. Compliance and Risk Assessment
The institution periodically assesses sponsored programs policies and practices, and assessment of emerging risk areas.

STANDARD: There is a thorough, periodic review of the effectiveness of sponsored programs policies and procedures and the communication of the results of the reviews to institutional senior management. These programs may be conducted as internal controls, quality improvement, compliance programs, etc.
STANDARD: There is a system for monitoring new sponsor requirements, external trends in audit and compliance, and risk areas at the national level. New requirements or risk areas are addressed within institutional policies, education and outreach programs, and compliance reviews, as appropriate.

D. Electronic Research Administration
   i. Systems
      The institution has in place appropriate electronic information systems, and the integration of systems for proposals, financial management, human resources, education programs, and compliance reviews
      STANDARD: Electronic systems are well integrated to process transactions, review and track activities, and provide required reports.
      STANDARD: Systems are sufficient to integrate with Federal-wide or agency specific processes for proposal and report submission.
      STANDARD: There is a sufficient level of understanding among central and departmental staff and a level of proficiency, support, and training to ensure the effective operations of the systems.
Appendix B: NCURA Peer Review Team Bios

NCURA Peer Review Program

The National Council of University Research Administrators has developed a formal system of assessment for university offices of sponsored programs, in part, from its purpose as a professional development organization. The mission of professional development organizations, like NCURA, is to provide education and training to its members as well as others within the research community. Many educational efforts implicitly, if not explicitly, provide information on effective practices, techniques for success, and models of excellence. Setting standards and identifying quality of organizational performance, therefore, are expected functions of professional development organizations. In fact, no other activity of a professional development organization may be as important as the articulation of the standards and core practices of the profession. The NCURA system of peer review was developed for this purpose.

NCURA Peer Review Team
for Mississippi State University

**Kerry Peluso **TEAM LEADER

Kerry Peluso, CPA, MBA has 22 years experience in research and grants administration. Her experience includes a background in both public and private Universities as well as experience in Medical and non-Medical institutions. She is the Associate Vice President for Research Administration at Emory University where she is currently responsible for the Office of Sponsored Programs and the Office of Grants and Contracts Accounting. These offices provide both PRE and POST award research administration services to Emory’s research community for all sponsored projects received. In this position, Kerry has been responsible for the functional implementation of the PeopleSoft Grants module. This included overseeing the development of an electronic proposal routing system. Other areas of focus have included management of process review and efficiency improvement initiatives in research administration (from proposal routing through closeout).

Prior to joining Emory in February 2007, Kerry held the position of Director of Post Award Financial Administration at the University of Pennsylvania. Her background also includes several years experience as a Senior Accounting Manager at Rutgers University in the Division of Grant and Contract Accounting and seven years experience managing grants for non-profit organizations. Beyond grants and research administration, Kerry’s background included five years experience in tax, private and public accounting.

Kerry’s areas of expertise include financial research administration, pre award administration, functional system implementation and development, effort reporting, conflict of interest, training program development, workload management and many other areas. At both University of Pennsylvania and Emory, Kerry has overseen and managed the development of Departmental Administrator Certification Programs for Research Administrators. Kerry has been involved in a variety of roles at NCURA including serving as National Treasurer, Chair/co-Chair of national conferences and Chair of the Financial Research Administration Neighborhood Committee. She is a frequent speaker at national conferences.

**Number of Years in Research Administration:** 17

**Current and Prior Institutions:** Emory University, University of Pennsylvania, Rutgers University

**NCURA Standards Review Expertise Areas:** Award Acceptance and Initiation, Award Management, Institutional Infrastructure
Joyce Freedman

Joyce Freedman has served in senior roles in research administration at private and public universities, an academic medical center and a DOE national laboratory. She is currently an independent contractor working with a liberal arts college to set up an infrastructure for research administration and a private university as an executive coach and consultant. Joyce has been working in research administration for over thirty years; serving as Assistant Vice Chancellor and Assistant Vice President for Research at three major research institutions, as well as director of sponsored projects offices and Associate Comptroller for Restricted Funds.

Her experience includes: The day-to-day management of research administration programs and offices: pre-award; industry contracts; research and gift accounting; compliance offices and committees. She has had institutional responsibility for research compliance programs: export controls; effort reporting; conflict of interest; has implemented databases for research administration; cost sharing; effort reporting and research accounting; and had the oversight for the management of human subjects, animal care and conflict of interest programs.

Joyce has been a member of NCURA for over 20 years; served as chair of the western region; served on the Board of Directors and the Executive Committee; co-editor of the Newsletter for Biomedical; co-program chair for a summer conference; faculty on a national video conference and a webinar; speaker at regional and national NCURA meetings, as well as SRA, CASE and NACURA conferences. Joyce attended COGR meetings while at Chicago, Berkeley and UCSF and was an original member of the FDP steering committee while at Chicago.

Number of Years in Research Administration: 33

Current and Prior Institutions: University of California, San Francisco, University of California, Berkeley, University of Chicago, Stanford University, Mills College

NCURA Standards Review Expertise Areas: Proposal Services, Award Acceptance and Initiation, Research Ethics, Institutional Infrastructure

Christina Hansen

Christina Hansen served as contract and grant officer, assistant director, director and assistant vice chancellor for research during her 30+ years in research administration. Retired in 2009 from the University of California, Irvine, she currently consults with local universities and works with NCURA on peer review panels. She also worked at the University of California, Los Angeles and in private industry.

Chris has experience in proposal support and management, award negotiation and acceptance, clinical trial negotiations, and special agreements. She supervised over 40 staff in charge of sponsored projects, human subjects, animal subjects, conflict of interest, export control, ARRA reporting, and awards data management. Her campus involvement included implementation of the Health Insurance Portability and Accountability Act, development of the whistleblowers and the campus conflict of interest policies, and coordination of a campus-wide response to export control regulations. She also was a co-director and member of the steering committee to develop and implement Kuali electronic research administration programs at UCI.

At UCLA and UCI, Chris taught a variety of research administration-related courses, including the principles of research, conflict of interest management, gift/grant determination, research ethics, and export controls. She was instrumental in the development of the UCI Research Administration Management Program (RAMP), a certificated program for departmental staff and others on essential grant and contract functions.

Chris was faculty for four NCURA videoconferences and for NCURA’s Fundamentals of Sponsored Projects Administration and Sponsored Projects Administration: Level II workshops. She is a co-author of The Role of Research Administration, an NCURA monograph, and was on the Editorial Advisory Board of the Sponsored Research Administration: A Guide to Effective Strategies and Recommended Practices. Additionally, Chris served on the NCURA Board of Directors and a number of committees. She also served on the Board of the Council on Governmental Relations board for two years.
Assisting the Review Team and Reader for Review Report

**Peggy S. Lowry, NCURA Peer Review Program Coordinator**

Peggy serves as the Program Coordinator for the NCURA Peer Review Program and has been involved in over 30 peer reviews of research administration offices, received evaluations of her offices, and taught national workshops on sponsored program assessment. Peggy has prepared self-study documents and participated in institutional accreditation self-studies. She authored the chapter: “Assessing the Sponsored Research Office” (NCURA/AIS Sponsored Research Administration—A Guide to Effective Strategies and Recommended Practices) and published: “But the Emperor Has No Clothes On! Or Assessing Your Operation with Fresh Eyes” (NCURA Newsletter).

Peggy served until her retirement in 2007 as Director of Sponsored Programs and Research Compliance at Oregon State University where she oversaw sponsored programs ($250+ million in awards), non-financial research compliance areas, and served as Conflict of Interest Officer. She returned from retirement to assist by leading the University’s new Office of Research Integrity, until 2011 when she retired again. Her career includes 21 years at the University of Illinois--Urbana-Champaign as Assistant Vice Chancellor for Research/Director, with 10 years as a College-level administrator, seven years in predominantly undergraduate universities: Ball State University and Murray State University in Director and Associate Director positions. At Ball State and Murray State she additionally focused on faculty development and institutional incentives for research. She served on numerous university/faculty committees, created/implemented university-wide policies, and engaged in department-central research administrator networking groups.

Peggy has given over 200 national, regional and local presentations and workshops. She has served on numerous national NCURA committees and twice served on their Board of Directors. She served as a NCURA national workshop faculty for Fundamentals of Research Administration and Sponsored Projects Administration Level II, Chair of the Nominating and Leadership Committee and co-Chair of the NCURA newsletter. Peggy received NCURA’s national Award for Distinguished Service in Research Administration in 2006. She served several terms on the Board of Directors of the International Society of Research Administrators and received several national awards from that organization. She has been a member of the Council on Governmental Relations.

**Number of Years in Research Administration:** 38  
**Current and Prior Institutions:** University of Illinois at Urbana-Champaign, Oregon State University, Ball State University, Murray State University  
**NCURA Standard Review Expertise Areas:** Proposal Services, Research Ethics, Institutional Infrastructure
Appendix C: Charge to the NCURA Peer Review Team

August 11, 2011

Ms. Peggy Lowry
Peer Review Program Coordinator
National Council of University Research Administrators
1225 19th Street, NW, Suite 850
Washington, DC 20036

Ms. Lowry,

Mississippi State University has requested an NCURA Peer Review. In the interests of maintaining an effective, responsible administrative organization, we intend to periodically review the various special administrative units within the purview of the Offices of the Vice President of Research and Economic Development and Vice President for Budget and Planning. One of these units is the Office of Sponsored Programs Administration. The Office of Sponsored Programs Administration is an administrative unit under the Office of the Vice President for Research and Economic Development. As part of the evolution into a "very high research activity university" according to the Carnegie Foundation, our Office of Sponsored Programs Administration has undertaken a variety of services in support of the efforts of our faculty to secure external research support, and in general support of campus and central research administration. The Office of Sponsored Programs Accounting shares this role of supporting the research enterprise. The Office of Sponsored Programs Accounting is an administrative unit of the Controller’s Office which reports to the Office of the Vice President for Budget and Planning. We believe that both units as well as the entire research administration function have matured to an extent that a review of the research administration functions and operations are warranted. We anticipate that while we are continually looking for ways to improve the process a periodic external review would greatly aid our process.

We understand that the review will utilize the NCURA National Standards. In your review we ask that in particular you pay attention to the following:
• The staffing levels as well as roles and responsibilities of Sponsored Programs Administration, Sponsored Programs Accounting and the other ancillary units along with the departments.

• The amount and type of training, policies, and general support and outreach provided to the research faculty and staff.

• The post-award workflow process. We are specifically interested in recommendations for changes that would optimize this step between Sponsored Programs Administration and Sponsored Programs Accounting.

We look forward to your visit and appreciate any recommendations you can make that will improve our overall process and better position the university to continue delivering high quality research in the future. Thank you in advance for your willingness to undertake the activity on our behalf.

Sincerely,

David Shaw
Dr. David Shaw, Vice President
Research and Economic Development

Mr. Don Zant, Vice President
Vice President for Budget and Planning
## Appendix D: Site Visit Itinerary

<table>
<thead>
<tr>
<th>Date</th>
<th>Time</th>
<th>Title</th>
<th>Attendees</th>
</tr>
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<tbody>
<tr>
<td>9/7/2011</td>
<td>8:00-8:45</td>
<td>Associate Vice President For Research &amp; Vice President for Budget and Planning</td>
<td>Rayford Vaughn &amp; Don Zant</td>
</tr>
<tr>
<td></td>
<td>8:45-9:30</td>
<td>Assistant Vice President For Research &amp; Provost</td>
<td>Teresa Gammill &amp; Jerry Gilbert</td>
</tr>
<tr>
<td></td>
<td>9:30-9:45</td>
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<td>Assistant Controller-Sponsored Programs Accounting (Post Award)</td>
<td>Denise Peeples</td>
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<td>10:45-11:30</td>
<td>BREAK</td>
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<td>11:30-12:00</td>
<td>Property Officer</td>
<td>Sharon Hamlin</td>
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<td></td>
<td>12:00-1:00</td>
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<td></td>
<td>1:00-2:00</td>
<td>Sponsored Programs Accounting Staff(Post Award)</td>
<td>SPAccounting Staff</td>
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<td>2:00-2:15</td>
<td>BREAK</td>
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<td>2:15-3:00</td>
<td>Deans/Assoc. Deans/Directors Research Centers</td>
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<td>3:00-3:15</td>
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<td>3:15-3:45</td>
<td>Assistant Vice President for Research (discuss Research Integrity)</td>
<td>Teresa Gammill</td>
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<td>3:45-4:15</td>
<td>Director of Research Security and Export Control</td>
<td>Neil Lewis</td>
</tr>
<tr>
<td></td>
<td>4:15-4:45</td>
<td>Director of Fiscal Affairs</td>
<td>Sandy Williamson</td>
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<tr>
<td>9/8/2011</td>
<td>8:00-8:45</td>
<td>Controller &amp; Treasurer</td>
<td>Kevin Edelblute</td>
</tr>
<tr>
<td>Time</td>
<td>Topic</td>
<td>Speaker</td>
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<td>8:45-9:00</td>
<td>BREAK</td>
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<tr>
<td>9:00-9:50</td>
<td>Director, Sponsored Programs Administration</td>
<td>Richard Swann</td>
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<td>9:50-10:10</td>
<td>Assistant Director, Sponsored Programs Administration</td>
<td>Robyn Remotigue</td>
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<tr>
<td>10:10-10:25</td>
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<td>10:25-11:30</td>
<td>Sponsored Programs Administration Staff (Pre Award)</td>
<td>SP Administration Staff</td>
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<td>11:30-12:00</td>
<td>General Counsel</td>
<td>Joan Lucas</td>
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<td>12:00-1:00</td>
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<tr>
<td>1:00-2:00</td>
<td>Director of Internal Audit</td>
<td>Lesia Bryant</td>
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<tr>
<td>2:00-3:00</td>
<td>Vice President for Development</td>
<td>John Rush</td>
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<td>3:00-3:15</td>
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<td>3:15-4:15</td>
<td>Director of Regulatory Compliance and Safety (IRB, IACUC, Conflict of Interest)</td>
<td>Kacey Strickland</td>
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<td>4:15-4:30</td>
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<td>4:30-5:15</td>
<td>Junior Faculty</td>
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9/9/2011

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<th>Time</th>
<th>Topic</th>
<th>Speaker</th>
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<td>8:30-9:30</td>
<td>Regulatory Compliance Committee Chairs</td>
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<td>9:30-9:45</td>
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<tr>
<td>9:45-10:45</td>
<td>Senior Faculty Group</td>
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<td>10:45-11:00</td>
<td>BREAK</td>
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<tr>
<td>11:00-11:30</td>
<td>Director of Research and Technology Corporation</td>
<td>Marc McGee</td>
</tr>
<tr>
<td>Time</td>
<td>Position and Role</td>
<td>Name(s)</td>
</tr>
<tr>
<td>------------</td>
<td>----------------------------------------------------------------------------------</td>
<td>----------------------------------------------</td>
</tr>
<tr>
<td>11:30-12:00</td>
<td>Associate Director of Tech Transfer</td>
<td>Chase Kasper</td>
</tr>
<tr>
<td>2:00-3:30</td>
<td>Assistant Vice President for Research, Vice President for Budget and Planning, Provost, Director of Sponsored Programs Admin, Controller</td>
<td>Teresa Gammill, Don Zant, Julia Hodges(in place of Jerry Gilbert, Provost), Richard Swann, Kevin Edelblute</td>
</tr>
</tbody>
</table>
Appendix E
NCURA Professional Development Resources

A number of NCURA resources are valuable to the institution and serve to enhance professional development of departmental, college, and central research administrators. All of the NCURA educational offerings go through a rigorous evaluation process to insure the quality of the program. Presenters are carefully selected and represent experienced research administrators with extensive understanding of the profession. The following list provides a selection of professional development resources that may be referenced in this Review Report and may be valuable for the institution to consider.

NCURA Traveling Workshops
NCURA’S four traveling workshops are scheduled at locations around the country or can be hosted by your own institution. They serve as an excellent foundation for new staff, or as a refresher for more experienced staff. When hosted by your own institution, they serve to offer a broad-based and consistent knowledge sharing across the institution. To bring this resource to your institution, you need to have a minimum of 60 participants (central, departmental, center/college) and can include research administrators from neighboring institutions. These workshops are taught by experienced research administrators and the curriculum reflects the critical issues for training and professional development. Our four national workshop topics are: Departmental Research administration Workshop, Financial Research Administration Workshop, Fundamentals of Sponsored Project Administration, and Sponsored Project Administration II. http://www.ncura.edu/content/educational_programs/workshops/

NCURA TV
Each year, NCURA offers a series of TV broadcasts on critical issues of importance to sponsored program operations. Recent years have included such topics as audits, cost sharing, subrecipient monitoring, issues for the department administrator, and non-financial research compliance. These TV broadcasts, which can be viewed live or purchased as a DVD, provides excellent training opportunities within the institution. http://www.ncura.edu/content/educational_programs/ncura_tv_2009/index2009.php

Online Tutorials
NCURA offers several multi-week online tutorials. These tutorials provided interactive learning activities as well as knowledge reviews for each lesson. Current tutorials are primers offered in the areas of clinical trials, federal contracting, and subawards. http://www.ncura.edu/content/educational_programs/

Webinars
A number of webinars are offered on special focus topics that are of importance to research administration. Recent topics have included export controls, contract law, and procurement cards.

Other educational resources are located at: http://www.ncura.edu/content/educational_programs/
Appendix F: Example of Career Paths

<table>
<thead>
<tr>
<th>Program</th>
<th>Working Title</th>
<th>Coded and Worker Activities</th>
<th>Classified Civil Service Title</th>
<th>Estimated Duration</th>
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<tbody>
<tr>
<td>Sponsored Projects Account</td>
<td>Complete preparation of budget of grant and contract proposal correspondence and follow-up information with required support and/or review staff. Creation of documentation including reports and charts. Maintain current records of status of sponsored and current proposals, grants, and awards. Provide support to pre-award review process, project initiation, and project support. Ensure compliance with Project Proposal Specialist.</td>
<td>University Grant &amp; Contract Specialist</td>
<td>Typically, 1-2 months involving multiple disciplines or Sponsored Projects Officer.</td>
<td></td>
</tr>
<tr>
<td>Sponsored Projects Support</td>
<td>Expands to limited range of projects related to ongoing supporting research and development work.</td>
<td>University Grant &amp; Contract Specialist</td>
<td>Typically, 1-2 months involving multiple disciplines or Sponsored Projects Officer.</td>
<td></td>
</tr>
<tr>
<td>Sponsored Projects Administration</td>
<td>Expands to limited range of projects related to ongoing supporting research and development work.</td>
<td>Sponsored Projects Officer</td>
<td>Sponsored Projects Officer</td>
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</tr>
<tr>
<td>Sponsored Projects Office</td>
<td>Expands to support of technical staff in sister programs or initiatives.</td>
<td>Sponsored Projects Office</td>
<td>Sponsored Projects Officer</td>
<td></td>
</tr>
<tr>
<td>Senior Sponsored Projects Officer</td>
<td>Expands to support of technical staff in sister programs or initiatives.</td>
<td>Sponsored Projects Officer</td>
<td>Sponsored Projects Officer</td>
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</tbody>
</table>

Managing Officer: Varying titles for sponsored activities. Financial Proposal Specialist.
Appendix G: Examples of a Risk Matrix

Attachment 1: QUICK REFERENCE

Institutional Compliance
Risk Assessment Matrix

Purpose of Initial Risk Assessment
Primary: To identify those compliance issues that have significant impact at the institutional level, including those risks that you feel are being inadequately controlled. These are the issues that provide the infrastructure for the development of the compliance program.
Secondary: To identify compliance issues at every level of the institutional organization.
To determine at each level those issues that are significant for that level.

Goal of This Risk Assessment
To populate the "Risk Assessment Matrix"

Required Resources
- All policies, procedures, rules and regulations that apply to the functions, processes, and activities associated with the area of compliance.
- Ideally, employees with direct knowledge of the work being performed participate in a brainstorming session to identify risks that affect the successful achievement of the goals and objectives of the work unit.
- Recommended brainstorming question: "What are the problems you recognize, concerns you have, and risks you perceive regarding compliance with the federal and state laws and regulations, and the UH System/UHD policies and procedures in this work unit?"
- "Compliance Sections/Risk Assessments" required by UH System [Note: Included in this package. You are not limited to these compliance sections/risk assessments; however, these are required to be addressed in your assessment.]

Summary of Steps in the Risk Assessment Process (Detail Information Included in this Package)
Step 1: Identify the Compliance Risk and Expose
- Develop a list of all the compliance risks that can affect the successful achievement of the work unit's goals and objectives.
- Determine the applicable law, rule, regulation, policy, or procedure driving the risk.

Step 2: Measure the Compliance Risk
- The Impact of the risk, when it happens, on the achievement of the work unit goals and objectives: (High, Medium or Low)
- The Probability of the risk becoming a reality (High, Medium or Low)

Step 3: Prioritize the Compliance Risk
- Based upon their combined measurement of probability of becoming reality and the impact that would have on the work unit.
- All risk that have an "HR" "measurement value" would be placed at the top of the risk inventory, followed by HM, HI, MH, MM, ML, LH, LM, and LL groups in that order.
- Rank order each "measurement value" group from most to least significant via paired elimination.

Step 4: Populate the Risk Assessment Matrix (For Each "Measurement Value")
- Phase I: Compliance Section, Assessment Date, Sub-Section, Prepared By, Objective/Activity, Risk & Exposure, Potential Impact, Probability of Occurrence and Rank Before Controls.
- Phase II: Assign the "Responsible Party" (see requirements in this package). Specify the Operating and Oversight Controls. Assess the Rank After Controls (High, Medium or Low).

Step 5: Initial Review
Provide a copy of the Risk Assessment Matrix package to __________ on or before __________.

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<th>Law, Procedure, Policy, etc.</th>
<th>Risk &amp; Exposure</th>
<th>Potential Impact H, M, L</th>
<th>Probability of Occurrence H, M, L</th>
<th>Rank Before Controls</th>
<th>Mitigation Strategy</th>
<th>Controls</th>
<th>Rank After Controls</th>
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