SECTION C-1

GENERAL INFORMATION

The Service Provider (SP) shall provide all management, supervision, administration, and labor to support the Grants Management, Program, and Review support services identified in this Performance-based Performance Work Statement (PWS) for the National Institutes of Health (NIH) headquartered in Bethesda, Maryland. This includes all direct and indirect resources, except as specified in SECTION C-3 as Government-furnished property (GFP) and services. The SP shall assume total responsibility for all requirements stated herein on the start date of the performance period.

1.1 SCOPE OF WORK

- **SECTION C-1**

Provides general information about NIH and its specific rules and regulations to be followed and an introduction to operating conditions.

- **SECTION C-2**

Provides definitions and acronyms used throughout this document and in the performance of this work.

- **SECTION C-3**

Provides information as to Government-furnished property.

- **SECTION C-4**

Provides information on items that may be SP furnished.

- **SECTION C-5**

Presents the Performance-based Performance Work Statement.

5.1 Grants Management
5.2 Review
5.3 Program

- **SECTION C-6**

Provides a list of directives, publications, instructions, and forms to be used by the SP during the award period.

1.2 BACKGROUND INFORMATION

The National Institutes of Health (NIH) form one of the world's foremost medical research centers. An agency of the U. S. Department of Health and Human Services (DHHS), the NIH is the Federal focal point for biomedical and health research. NIH is the steward of medical and behavioral research for the Nation. Its mission is science in pursuit of fundamental knowledge about the nature and behavior of living systems and the application of that knowledge to extend healthy life and reduce the burdens of illness and disability. The goals of the NIH are to: 1) foster fundamental creative discoveries, innovative research strategies, and their applications as a basis to advance significantly the Nation's capacity to protect and improve health; 2) develop, maintain, and renew scientific human and physical resources that will assure the Nation's capability to prevent disease; 3) expand the knowledge base in medical and associated sciences in order to enhance the Nation's economic well-being and ensure a continued high return on the public investment in research; and 4) exemplify and promote the highest level of scientific integrity, public accountability, and social responsibility in the conduct of science.

The NIH consists of 20 Institutes and 7 Centers (ICs) which together have programs designed to improve the health of the Nation by conducting and supporting research into the causes, diagnosis, prevention, and cure of human diseases, the processes of human growth and development, the biological effects of environmental contaminants, the understanding of mental, addictive, and physical disorders, directing programs for the collection, dissemination, and exchange of information in medicine and health, including the development and support of medical libraries and the training of health information specialists. A complete list of the NIH Institutes

and Centers can be found at http://www.nih.gov/about/NIHoverview.html#Ics.

Approximately 84% of the NIH budget is devoted to supporting research, research training and career development, and research infrastructure in colleges and universities, research institutions, large and small businesses across the U.S. as well as internationally. All of the 20 NIH Institutes and 4 of the 7 Centers have portfolios of these extramural research grants, cooperative agreements, and Research and Development (R&D) contracts in a wide variety of different award mechanisms. A complete list of all of the award mechanisms supported by the NIH can be found at http://grants1.nih.gov/grants/funding/ac.pdf. A brief description of each NIH Institute and Center with an extramural portfolio can be found at the end of SECTION C.1.2.

The NIH awards grants, cooperative agreements, and R&D contracts through a peer review process mandated by the Peer Review Requirements of the Public Health Service Act and directed by Scientific Review Administrators (42 CFR 52h). Technical Exhibit 1 shows a general schematic diagram of the process for submission, scientific peer review, and award of grant and cooperative agreement applications. Technical Exhibit 2 shows a general schematic diagram of the NIH dual peer review system for grants and cooperative agreements. In this process, applications are received by the NIH Center for Scientific Review (CSR). The various scientific peer review units and offices at the NIH organize, manage, conduct, and report the first level of scientific peer review. Program officials in each of the 20 Institutes and 4 Centers with extramural portfolios identify scientific and technical needs related to public health priorities, commit the government to program initiatives and awards based on the advice of advisory and peer review groups, and exercises scientific oversight of funded research projects. Grants Management officials monitor the financial assistance process to ensure that all required business management actions are performed by every awardee in a timely manner both before and after award of a grant; evaluate and monitor the business management capability and performance of applicant organizations and awardees, as well as internal operating procedures associated with the business management aspects of the financial process; and interpret and develop financial assistance policies. Grants management officials are responsible for the fiscal stewardship of awarded grants, negotiate fiscal aspects of the awards, monitor the financial progress made, and close out awards at the termination of the grant. Support for these three general functions of the NIH extramural grants program (Grants Management, Review and Program support) is included in this RFP. Since some IC scientific peer review offices also handle the peer review of R&D contracts, support for those scientific peer review activities is also included in this RFP. Since some extramural program officials also handle research and development contracts, support for the program management aspects of these contracts is also included in this RFP.

Technical Exhibit 3 is a general representation of the NIH grant receipt, review, and award schedule, showing the relationship between grant receipt dates, peer review meetings, National Advisory Council or Board meetings, and earliest possible award dates. Technical Exhibit 4 shows a diagram of the three overlapping submission, review, and award cycles or “rounds” per year that result from these NIH application receipt dates. The cycles produce several distinct surges in workload in the Review, Program, and Grants Management functional areas at various times during the year. Both professional and support staff in all three NIH extramural functional areas must therefore be adept at managing concurrent projects in different stages of completion throughout the year. Technical Exhibit 5 shows the competing applications and proposals received, scientific review meetings held, and grant awards made for each month of fiscal year 2002, the most recent fiscal year for which complete data are available. Peer review meetings are typically held in the Washington, D.C. metropolitan area, but they may also include site visits to applicant institutions to view research or clinical facilities necessary for research.

Grants are awarded to nonprofit and for-profit organizations and institutions, university hospitals, research foundations, state and local Governments, and individuals. Applications for financial support are usually initiated by the researcher (principal investigator) and approved by officials of the researcher's sponsoring institution prior to submission to NIH (TE-1). Most NIH grant and cooperative agreement awards are made for one project period of 3 to 5 years. Grantees must also submit non-competing progress reports for continued funding each year, or budget period, until the end of their project period; these non-competing progress reports are approved by program and grants management officials, and support staff in these two functional areas are involved in processing non-competing continuation awards. At the end of the project period, grantees must re-compete with other applicants for renewal of their financial support. Program and grants management staff also process administrative supplements to grant awards.

The NIH peer review system absolutely depends on the willingness of thousands of scientists, including nationally and internationally recognized investigators, Department Chairpersons, clinical Division Directors, and Nobel Laureates, to serve as peer reviewers to evaluate the many thousands of applications submitted to the NIH every

year. Many of these scientists serve on standing review committees (or “study sections”) that meet three times per year to review up to 100 or more applications each time. All of the reviewers are extremely busy with their own research projects, grant applications and awards, teaching, clinical and administrative responsibilities, and are doing NIH a favor by participating in the peer review process. They are reimbursed for their travel, lodging and meal expenses, and receive a small honorarium for each of the days that they actually attend review meetings; clinical investigators lose significant amounts of income during their participation in NIH peer review meetings. The reviewers expect a single informed point of contact for the logistics of each review meeting. Therefore, review support staff perform critical tasks to facilitate reviewers’ participation in the NIH peer review process. Disruption or discontinuity of service to the reviewers will be a disincentive for them to serve, and will seriously undermine the ability of the NIH to accomplish its mission.

Confidentiality of information is a critical component of all aspects of the NIH peer review and award process for grants, cooperative agreements, and R&D contracts. Professional and support staff in the Review, Program, and Grants Management functional areas must obtain, use, and safeguard sensitive personal information about applicants, reviewers and NIH staff. A high level of judgment and a knowledge of all pertinent Federal laws, regulations, and policies are required in the disposition of documents containing personal, proprietary, and other confidential information.

The NIH review and award process for grants, cooperative agreements, and R&D contracts is subject to many laws, DHHS and NIH regulations, and policies, which change over time. Support staff are expected to understand and operate in accordance with all applicable laws, regulations, policies, and procedures. In addition, a wide variety of computer application programs and software tools (TE-6) are involved in the various steps of processing, reviewing, awarding, and monitoring NIH grants. The NIH IMPAC II database is currently the central NIH database for grants; it has many different software tools or “modules” for use during various stages in the life cycle of a grant. The IMPAC II system is available only to authorized NIH staff and NIH-authorized contractors and is not accessible outside NIH. The IMPAC II system is updated and upgraded regularly, requiring frequent retraining of staff.

The complexity of the work, the unavoidable changing requirements and procedures, the volume and diversity of documents, policies and processes, and the high degree of accuracy required combine to create great demands on Grants Management, Review, and Program support staff.

Emerging Requirements:

A number of already ongoing developments may impact NIH workload and work processes in the grants functional areas during the period of this contract:

1. Electronic Research Administration (eRA) efforts in the Federal government, DHHS and the NIH are advancing rapidly. Electronic submission of grant data and reports (and eventually entire grant applications) through the NIH Commons is expected to replace hard copy submission within the next 5 years. Registration of grantee institutions and principal investigators via the NIH Commons is already under way.

2. Increased documentation and reporting requirements are likely for applications and for grant awards related to human subjects, animal welfare, human embryonic stem cells, data sharing, and other issues.

3. A variety of new grant mechanisms are likely, including grants for innovative research and other special initiatives, are likely to be developed to better accomplish the missions of the NIH ICs. Such changes will increase workloads in all grants functional areas.

4. Workloads in all grants functional areas are influenced greatly by Congressional initiatives. For example, the Review, Program, and Grants Management workloads related to funding for bio-terrorism-related research are increasing dramatically during fiscal year 2003, and are expected to increase significantly again during Fiscal Year 2004. It is likely that workloads related to bio-terrorism will continue to increase at a much more rapid rate than the general NIH workload over the life of this contract. Other Congressional initiatives could result in sudden unexpected increases in workloads in other scientific areas during the life of the contract.

5. The expansion of the NIH Loan Repayment Program will increase review workloads in most of the NIH IC

review units.

6. There is an increasing trend towards the development of “partnerships” between NIH and other government agencies and between NIH and private foundations or businesses. Such partnerships will result in increased workloads and more complex award monitoring situations for program and grants management functions at the NIH.

7. There is an increasing emphasis on multidisciplinary research in NIH research funding initiatives and in the resulting applications. These applications also tend to be multi-institutional. This trend leads to increases in the number of reviewers required, the complexity of the award process, and the complexity of the required programmatic and fiscal monitoring.

The National Institutes of Health consist of:

Center for Scientific Research

CSR’s mission is: the receipt, referral and review of the vast majority of biomedical research and research training grant applications submitted for NIH funding. Peer review is recognized as the cornerstone of the NIH extramural program, and is the principal mechanism by which other Institutes and Centers identify high quality research that is worthy of funding.

Official Address:
Rockledge 2, Rm 3100
6701 Rockledge Drive
Bethesda, MD 20817

John E. Fogarty International Center

FIC promotes and supports scientific research and training internationally to reduce disparities in global health.

Official Address:
Bldg 31, Rm B2C08
31 Center Drive
Bethesda, MD 20892

National Cancer Institute

The National Cancer Institute (NCI) is a component of the National Institutes of Health (NIH), which is one of eight agencies that compose the Public Health Service (PHS) in the Department of Health and Human Services (DHHS). The NCI, established under the National Cancer Act of 1937, is the Federal Government's principal agency for cancer research and training. The National Cancer Act of 1971 broadened the scope and responsibilities of the NCI and created the National Cancer Program. Over the years, legislative amendments have maintained the NCI authorities and responsibilities and added new information dissemination mandates as well as a requirement to assess the incorporation of state-of-the-art cancer treatments into clinical practice.

The National Cancer Institute coordinates the National Cancer Program, which conducts and supports research, training, health information dissemination, and other programs with respect to the cause, diagnosis, prevention, and treatment of cancer patients. Specifically, the Institute:

- Supports and coordinates research projects conducted by universities, hospitals, research foundations, and businesses throughout this country and abroad through research grants and cooperative agreements;
- Conducts research in its own laboratories and clinics;
- Supports education and training in fundamental sciences and clinical disciplines for participation in basic and clinical research programs and treatment programs relating to cancer through career awards, training grants, and fellowships;
- Supports research projects in cancer control;
- Supports a national network of cancer centers;
- Collaborates with voluntary organizations and other national and foreign institutions engaged in cancer

research and training activities;
- Encourages and coordinates cancer research by industrial concerns where such concerns evidence a particular capability for programmatic research;
- Collects and disseminates information on cancer;
- Supports construction of laboratories, clinics, and related facilities necessary for cancer research through the award of construction grants.

Official Address:
Bldg 31, Rm 11A48
31 Center Drive
Bethesda, MD 20892

National Center for Complementary and Alternative Medicine

The National Center for Complementary and Alternative Medicine (NCCAM) is dedicated to exploring complementary and alternative healing practices in the context of rigorous science; training complementary and alternative medicine researchers; disseminating authoritative information to the public and professionals.

Official Address:
Bldg 31, Rm 2B11
31 Center Drive
Bethesda, Maryland 20892

National Center for Minority Health and Health Disparities

The mission of NCMHD is to promote minority health and to lead, coordinate, support, and assess the NIH effort to reduce and ultimately eliminate health disparities. In this effort NCMHD will conduct and support basic, clinical, social, and behavioral research, promote research infrastructure and training, foster emerging programs, disseminate information, and reach out to minority and other health disparity communities.

Official Address:
Two Democracy Plaza
6707 Democracy Blvd
Bethesda, MD 20817

National Center for Research Resources

The National Center for Research Resources (NCRR) serves as a “catalyst for discovery” by creating and providing critical research technologies and shared resources. This infrastructure underpins biomedical research and enables advances that improve the health of our Nation’s citizens.

Official Address:
Bldg 31, Rm 3B11
31 Center Drive
Bethesda, MD 20892

National Eye Institute

The National Eye Institute (NEI) was established by Congress in 1968 to protect and prolong the vision of the American people. As one of the Federal government’s National Institutes of Health (NIH), the NEI conducts and supports research that helps prevent and treat eye diseases and other disorders of vision. This research leads to sight-saving treatments, reduces visual impairment and blindness, and improves the quality of life for people of all ages. NEI-supported research has advanced our knowledge of how the visual system functions in health and disease.

Vision research is supported by the NEI through approximately 1600 research grants and training awards made to scientists at more than 250 medical centers, hospitals, universities, and other institutions across the country and around the world. The NEI also conducts laboratory and patient-oriented research at its own facilities located on the NIH campus in Bethesda, Maryland.

Part of the NEI mission is to develop public and professional education programs that help prevent blindness, reduce visual impairment, and increase awareness of services and devices that are available for people with low vision. To meet these objectives, the NEI has established the National Eye Health Education Program (NEHEP), a partnership of over 65 professional, civic, and voluntary organizations and government agencies concerned with eye health. The program represents an extension of the NEI's support of vision research, where results are disseminated to health professionals, patients, and the public. The NEI is also the lead Federal agency for the vision and hearing chapter in Healthy People 2010, the nation's blueprint to improve public health.

Official Address:
Bldg 31, Rm 6A03
31 Center Drive
Bethesda, MD 20892

National Heart, Lung and Blood Institute

NHLBI provides leadership for a national program in diseases of the heart, blood vessels, lung, and blood; blood resources; and sleep disorders. Since October 1997, the NHLBI has also had administrative responsibility for the NIH Woman's Health Initiative.

The Institute plans, conducts, fosters, and supports an integrated and coordinated program of basic research, clinical investigations and trials, observational studies, and demonstration and education projects. Research is related to the causes, prevention, diagnosis, and treatment of heart, blood vessel, lung, and blood diseases; and sleep disorders. The NHLBI plans and directs research in development and evaluation of interventions and devices related to prevention, treatment, and rehabilitation of patients suffering from such diseases and disorders. It also supports research on clinical use of blood and all aspects of the management of blood resources. Research is conducted in the Institute's own laboratories and by scientific institutions and individual supported by research grants and contracts.

For health professionals and the public, the NHLBI conducts educational activities, including development and dissemination of materials in the above areas, with emphasis on prevention.

The NHLBI supports research training and career development of new and established researchers in fundamental sciences and clinical disciplines to enable them to conduct basic and clinical research related to heart, blood vessel, lung, and blood diseases; sleep disorders; and blood resources through individual and institutional research training awards and career development awards.

The institute coordinates relevant activities in the above areas, including the related causes of stroke, with other research institutes and federal health programs. Relationships are maintained with institutions and professional associations, and with international, national, state, and local officials as well as voluntary agencies and organizations working in the above areas.

Official Address:
Bldg 31, Rm 5A52
31 Center Drive
Bethesda, MD 20892

National Human Genome Research Institute

NHGRI provides leadership for and formulates research goals and long-range plans to accomplish the mission of the Human Genome Project, including the study of the ethical, legal, and social implications of human genome research; fosters, conducts, supports, and administers research and research training programs in human genome research by means of grants, contracts, cooperative agreements, and individual and institutional research training awards; provides coordination for genome research, both nationally and internationally, and serves as a focal point within NIH and the DHHS for Federal interagency coordination, collaboration with industry and academia, and international cooperation; plans, supports, and administers intramural, collaborative, and field research to study human genetic disease in its own laboratories, branches and clinics; sponsors scientific meetings and symposia and collects and disseminates educational and informational materials related to human genome research to health professionals, the scientific community, industry, and the lay public.

Official Address:
Bldg 31, Rm 4B09
31 Center Drive
Bethesda, Maryland 20892

National Institute of Aging

NIA's mission is to improve the health and well-being of older Americans through research, and specifically to: Support and conduct high quality research on aging processes, age-related diseases, special problems and needs of the aged; train and develop highly skilled research scientist from all population groups; develop and maintain state-of-the-art resources to accelerate research progress; disseminate information; and communicate with the public and interested groups on health and research advances and on new directions for research.

Official Address:
Bldg 31, Rm 5C35
31 Center Drive
Bethesda, MD 20892

National Institute of Alcohol and Alcohol Abuse

Conducts and supports biomedical and behavioral research, health services research, research training, and health information dissemination with respect to the prevention of alcohol abuse and alcoholism and the treatment of alcoholism. Provides a national focus for the Federal effort to increase knowledge and promote effective strategies to deal with health problems and issues associated alcohol abuse and alcoholism. In carrying out these responsibilities the Institute: (1) conducts and supports research on alcohol-related disorders in its own laboratories and through extramural projects; (2) supports epidemiological studies and national and community surveys to assess the risks for alcohol abuse among various population groups; (3) plans, directs, supports, and evaluates research to identify new and improved alcoholism prevention, intervention, and treatment methods and techniques for application in the Nation's health care system; (4) supports training and development of scientists for participation in alcohol research programs and activities; (5) collaborates with other research institutes and Federal programs relevant to alcohol abuse and alcoholism, and provides coordination of Federal alcohol abuse and alcoholism research activities; (6) serves as a national resource for the collection, analysis, and dissemination of scientific findings and improved methods of alcoholism prevention and treatment services; (7) maintains continuing relationships with institutions and professional associations and with international, national, State, and local officials, and voluntary agencies and organizations engaged in alcohol-related work; (8) conducts policy studies and activities which have broad implications for alcoholism treatment, prevention, and rehabilitation activities; (9) supports public education activities to inform the public of the risks and consequences associated with alcohol abuse and alcoholism; (10) collaborates with SAMHSA on services research issues.

Official Address:
Rm 400
6000 Executive Blvd, Willco Bldg
Rockville, MD 20852

National Institute of Allergy and Infectious Diseases

NIAID research strives to understand, treat, and ultimately prevent the myriad infectious, immunologic, and allergic diseases that threaten millions of human lives.

Official Address:
Bldg 31, Rm 7A03
31 Center Drive
Bethesda, MD 20892

National Institute of Arthritis and Musculoskeletal and Skin Diseases

The mission of the National Institute of Arthritis and Musculoskeletal and Skin Diseases is to support research into the causes, treatment, and prevention of arthritis and musculoskeletal and skin diseases, the training of basic and clinical scientists to carry out this research, and the dissemination of information on research progress in these diseases.

Official Address:
Bldg 31, Rm 4C32
31 Center Drive
Bethesda, Maryland 20892

National Institute of Biomedical Imaging and Bioengineering

NIBIB improves health by promoting fundamental discoveries, design and development, and translation and assessment of technological capabilities in biomedical imaging and bioengineering, enabled by relevant areas of information science, physics, chemistry, mathematics, materials science, and computer sciences.

Official Address:
Bldg 31, R1B37
31 Center Drive
Bethesda, MD 20892

National Institute of Child Health and Human Development

NICHD research on fertility, pregnancy, growth, development, and medical rehabilitation strives to ensure that every child is born healthy and wanted and grows up free from disease and disability.

Official Address:
Bldg 31, Rm 2A03
31 Center Drive
Bethesda, MD 20892

National Institute on Deafness and other Communication Disorders

NIDCD conducts, fosters, and supports research and research training on the causes, prevention, diagnosis, and treatment of deafness and other communication disorders through: (a) intramural, collaborative, and field research in its own laboratories, branches, and clinics, and through contracts; (b) research grants to scientific institution and to individuals; (c) individual and institutional research training awards to increase trained professional research personnel in the fields of deafness and other communication disorders; and (d) cooperation with various agencies in collecting and disseminating educational and informational material related to deafness and other communication disorders.

Official Address:
Bldg 31, Rm 3C02
31 Center Drive
Bethesda, Maryland 20892-2350

National Institute of Dental and Craniofacial Research

The mission of the National Institute of Dental and Craniofacial Research (NIDCR) is to promote the general health of the American people by improving their oral, dental, and craniofacial health. Through the conduct and support of research and the training of researchers, the NIDCR aims to promote health, prevent disease, and develop new diagnostics and therapeutics.

Official Address:
Bldg 31, Rm 2C39
31 Center Drive
Bethesda, MD 20892

National Institute of Diabetes and Digestive and Kidney Diseases

The mission of the National Institute of Diabetes and Digestive and Kidney Diseases is to uncover new knowledge leading to improve prevention, diagnosis and treatment of diabetes mellitus, endocrine and metabolic diseases, digestive diseases, nutritional disorders, kidney, urologic and hematologic diseases by conducting and supporting research, training and health information dissemination.

Official Address:
Building 31, Rm 9A52
31 Center Drive
Bethesda, MD 20892

National Institute on Drug Abuse

The research mission of NIDA is to bring the full power of science to bear on the problems of drug abuse and addiction by generating scientific facts about the nature, prevention, and treatment of drug abuse and addiction. NIDA supports a comprehensive research portfolio that addresses all drugs of abuse, both legal and illegal, with the exception of a primary focus on alcohol. The ultimate aim of our Nation's investment in drug abuse research is to enable society to prevent drug abuse and addiction, and to reduce the adverse individual, social, health, and economic consequences associated with drugs.

Official Address:
Rm 5274
6001 Executive Blvd
Bethesda, MD 20852

National Institute of Environmental Health Sciences

NIEHS conducts, fosters, and coordinates (in its own laboratories and through contracts, grants, and support of Environmental Health Sciences Centers) research and research training on the biological effects of chemical, physical, and biological substances in the environment to: (1) develop understanding of the mechanism of action of such substances; (2) provides the scientific basis for evaluating their extent and severity on a national scale; (3) establish the toxicity of chemical substances of significant public health concern; (4) define and develop methods for diagnosis and treatment of environmentally induced illnesses; and (5) collect and disseminate information in furtherance of the program.

Official Address:
Bldg 101, Rm B242
P.O Box 12233
Research Triangle Park, NC 27709

National Institute of General Medical Sciences

NIGMS supports research and research training in the basic biomedical sciences that is not targeted to specific diseases. The Institute funds studies on genes, proteins, cells, as well as on fundamental processes. The results of such research form the foundation needed to understand health and make advances in disease diagnosis, treatment, and prevention. In addition, NIGMS has a major commitment to training future scientists, with an emphasis on multi-disciplinary studies.

Official Address:
Bldg 45, Rm 2AN.12
45 Center Drive
Bethesda, MD 20892

National Institute of Mental Health

NIMH provides leadership for a national program to increase knowledge and advance effective strategies to deal with problems and issues in the promotion of mental health and the prevention and treatment of mental illness; conducts and supports research and research training on the biological, psychological, behavioral, epidemiological, legal and social science aspects of mental health and illness; conducts and supports mental

health services research concerned with the impact of the organization, financing, and management of health services on the quality, cost, access to, and outcome of care; provides assistance to and encourages other Federal agencies and national, foreign, State, and local organizations, hospitals professional associations, and volunteer groups to facilitate and extend programs to promote mental health and prevent mental illness; collects, analyzes, and disseminates scientific findings and data on the incidence, prevalence, and resource for the treatment of mental illness; conducts educational activities, including the collection and dissemination of educational materials concerned with mental health issues, for health professionals and the lay public.

Official Address:
6001 Executive Blvd
Bethesda, MD 20892

National Institute of Neurological Disorders and Stroke

The mission of the NINDS is to reduce the burden of neurological diseases -- a burden borne by every age group, every segment of society, and people all over the world. To accomplish this goal the NINDS supports and conducts research, both basic and clinical, on the normal and diseased nervous system, fosters the training of investigators in the basic and clinical neurosciences, and seeks better understanding, diagnosis, treatment, and prevention of neurological disorders.

Official Address:
Bldg 31, Rm 8A52
31 Center Drive
Bethesda, MD 20892

National Institute of Nursing Research

NINR supports clinical and basic research to establish a scientific basis for the care of individuals across the life span--from the management of patients during illness and recovery to the reduction of risks for disease and disability, the promotion of healthy lifestyles, the promotion of quality of life to those with chronic illness, and the care for individuals at the end of life. This research may also include families within a community context. According to its broad mandate, the Institute seeks to understand and ease the symptoms of acute and chronic illness, to prevent or delay the onset of disease or disability or slow progression, to find effective approaches to achieving and sustaining good health, and to improve the clinical care in a variety of settings including the community and home in addition to more traditional health care sites. The NINR's research extends to problems encountered by patients, families, and caregivers. It also focuses on the special needs of at-risk and underserved populations, with an emphasis on health disparities. These efforts are crucial in the creation of scientific advances and their translation into cost-effective health care that does not compromise quality.

Office Address:
Bldg 31, Rm 5B05
31 Center Drive
Bethesda, MD 20892

National Library of Medicine

NLM assists the advancement of medical and related sciences through the collection, dissemination, and exchange of information important to the progress of medicine and health; serves as a national information resources for medical education, research, and service activities of Federal and private agencies, organizations, institutions, and individuals; publishes and distributes guides to medical literature and audiovisual materials in the form of catalogs, indexes, and bibliographies; develops, produces, and disseminates audiovisual materials and systems and other aids to medical education, research, and practice; supports the translation and publication of biomedical literature; provides support for medical library development and for training of biomedical librarians and other health information specialists; conducts and supports research in techniques and methods for recording, storing, retrieving, and communicating health information; provides technical consultation services and research assistance.

Official Address:
Bldg 38, Rm 2E17B

8600 Rockville Pike
Bethesda, MD 20894

Sites of Performance:

Center for Scientific Research
Rockledge 2
6701 Rockledge Drive
Bethesda, MD 20817

John E. Fogarty International Center
Building 31
31 Center Drive
Bethesda, MD 20892

National Cancer Institute
6116 Executive Blvd
Rockville, MD 20852

6120 Executive Blvd
Rockville, MD 20852

6130 Executive Blvd
Rockville, MD 20852

Frederick Cancer Research Development Center
Bldg 1052
Frederick, MD 21702

National Center for Complementary and Alternative Medicine
Two Democracy Plaza
6707 Democracy Blvd
Bethesda, MD 20892

National Center for Minority Health and Health Disparities
Two Democracy Plaza
8707 Democracy Blvd
Bethesda, MD 20817

National Center for Research Resources
Democracy Plaza One
6701 Democracy Blvd
Bethesda, MD 20827

National Eye Institute
6120 Executive Blvd
Rockville, MD 20852

National Heart, Lung and Blood Institute
Two Rockledge Center
6701 Rockledge Drive
Bethesda, MD 20892

National Human Genome Research Institute
Building 31, Level B2
9000 Rockville Pike
Bethesda, MD 20892

National Institute of Aging
7201 Wisconsin Avenue
Bethesda, MD 20892

National Institute of Alcohol and Alcohol Abuse
6000 Executive Blvd
Willco Bldg
Rockville, MD 20852

National Institute of Allergy and Infectious Diseases
6700B Rockledge Drive
Bethesda, MD 20817

6610 Rockledge Drive
Bethesda, MD 20817

National Institute of Arthritis and Musculoskeletal and Skin Diseases
One Democracy Plaza
6707 Democracy Blvd
Bethesda, MD 20817

National Institute of Biomedical Imaging and Bioengineering
Two Democracy Plaza
6707 Democracy Blvd
Bethesda, MD 20817

National Institute of Child Health and Human Development
6100 Executive Blvd
Rockville, MD 20852

National Institute on Deafness and other Communication Disorders
Executive Plaza South
6120 Executive Blvd
Rockville, MD 20852

National Institute of Dental and Craniofacial Research
Bldg 45
45 Center Drive
Bethesda, MD 20892

National Institute of Diabetes and Digestive and Kidney Diseases
Two Democracy Plaza
6707 Democracy Blvd
Bethesda, MD 20817

National Institute on Drug Abuse
6001 Executive Blvd
Rockville, Maryland 20852

National Institute of Environmental Health Sciences
Nottingham Hall Building
4505 Emperor Blvd
Research Triangle Park, NC 27703

Rall Building
111 Alexander Drive
Research Triangle Park, NC 27709

4401 Building
79 Alexander Drive
Research Triangle Park, NC 27709

National Institute of General Medical Sciences
Bldg 45
45 Center Drive
Bethesda, MD 20892-6200

National Institute of Mental Health
Neuroscience Center
6001 Executive Blvd
Rockville, MD 20852

National Institute of Neurological Disorders and Stroke
Neuroscience Center
6001 Executive Blvd
Rockville, MD 20852

National Institute of Nursing Research
6701 Democracy Blvd
Bethesda, MD 20892

National Library of Medicine
Rockledge I
6705 Rockledge Drive
Bethesda, MD 20817

1.2.1 BROAD WORK DESCRIPTION

1.2.1.1 WORK RESPONSIBILITY

SP responsibility shall include all planning, programming, administration, management, supervision, and execution necessary to provide the specified services. The SP shall conduct work in accordance with this Contract and all applicable Federal, State, and Local laws. The SP shall ensure that all work meets critical reliability rates or tolerances specified in the Contract Specifications, the Performance Work Statement (PWS), or in applicable referenced documents. The SP shall perform all related administrative services, such as supply requisitioning, quality control, and correspondence, in order to meet Contract specifications. Lists of examples in this contract are not exclusive or exhaustive. The SP shall compile historical data, prepare required reports, and submit information as specified by Contract Data Requirements Lists (CDRLs), as applicable for this contract.

1.2.1.2 AREA OF SUPPORT

The major portion of work to be performed is in Bethesda and Rockville, MD. Work is also required to support The National Institute of Environmental Health Sciences, Research Triangle Park, NC. The SP shall complete all work at these locations using Government Furnished Property (GFP). If the GFP does not include equipment necessary for creation of a product, then the SP may accomplish the work at other facilities. If GFP are available to accomplish the work, but the SP chooses to use the other facilities for efficiency or speed, the SP shall submit a request to the CO to use other facilities.

1.2.1.3 SP QUALITY CONTROL PROGRAM

The SP shall develop a proactive Quality Control Program (QCP) for measuring and attaining quality of performance under this contract. The SP's Quality Control Program shall explain the manner in which the SP shall ensure all Contract requirements are being accomplished in accordance with the specifications of this contract and industry standards. A sustaining focus throughout the Quality Control Program shall be the attainment of continuous quality improvement. The program shall emphasize deficiency prevention over deficiency detection. The SP's Quality Control Program and any services performed will be accepted by the CO only when in full compliance with clause FAR 52.246-4, "Inspection of Services_Fixed Price." The SP shall demonstrate a concerted effort in improving its QCP to prevent unsatisfactory performance from consistently recurring in any area and to ensure unsatisfactory performance is addressed and rectified in a timely manner.

1.2.1.3.1 QUALITY CONTROL PLAN

The SP shall maintain a Quality Control Plan describing the Quality Control Program. The SP shall submit the final Quality Control Plan to the Project Officer for approval within 30 calendar days prior to Contract start date. The SP shall submit any changes in the Quality Control Plan and Quality Control Program to the Project Officer for approval five workdays prior to implementation.

1.2.1.4 QUALITY ASSURANCE

The NIH Contracting Officer and NIH Quality Assurance Evaluator(s) (QAE) will inspect for compliance with Contract terms throughout the Contract period. Evaluation will be based on the SP's compliance with the requirements set forth in SECTION C-5. The QAE will monitor the SP's performance under this Contract by performing checks as contained in the Quality Assurance Surveillance Plan (QASP) and as outlined in FAR 52.246-5. Typical procedures include random sampling, planned sampling, scheduled inspections, incidents inspections, and validated customer complaints.

1.2.1.5 CUSTOMERS SUPPORTED

The SP shall provide support and service for all NIH employees engaged in extramural Grants Management, Review and Program activities requesting support.

1.2.1.6 WORKLOAD DATA

Workload data presented in SECTION C, 5.1 through 5.3, are based on historical workload. In this Contract, the workload data for all ICs has been combined. The workload information displayed in the text is based on annual data, where available, or extrapolated to represent estimated annual workload, where less than one year's data was available. This workload is provided to assist offerors in proposal presentation and shall not be a limiting factor on the SP's obligation to perform all services described in this Contract to the required level of effort.

1.3 GENERAL OPERATING CONDITIONS

1.3.1 FEDERAL HOLIDAYS

Federal Holidays Observed are:

- Christmas Day
- Columbus Day
- Independence Day
- Labor Day
- Martin Luther King Day
- Memorial Day
- New Year's Day
- President's Day
- Thanksgiving Day
- Veteran's Day
- Inauguration Day (DC area, if so designated by OMB)

1.3.2 WORKING HOURS

The normal working days and hours are as follows:

- Monday through Friday
- 8:30AM to 5:00PM
- 30 minute lunch period.

1.4 SECURITY

The SP shall report any security violations to the CO or designee immediately. The SP shall ensure compliance with the following regulatory guidance:

1.4.1 INSTALLATION SECURITY

SP personnel who have had contact, as described below, are required to report that contact, either verbally or in writing, to their security officer, or supervisor, who will report it to the CO or designee for action. Contacts for reporting purposes are defined as:

- Contact with an individual (regardless of nationality) that suggests to the SP employee that a foreign interest intelligence or terrorist organization may have targeted him or her for possible intelligence exploitation.
- A request by anyone (regardless of nationality) for illegal or unauthorized access to classified or unclassified controlled information.
- Contact with a known or suspected intelligence officer from any country.
- Contact with a foreign diplomatic establishment, whether in the United States or abroad, for personal or official reasons. Certain SP personnel in positions designated as “sensitive” by the Government may also be required to apprise their chain of command in advance of the nature and reason for contacting a foreign diplomatic establishment.

Additionally, SP personnel who have information about activities pertaining to espionage, terrorism, unauthorized technology transfer, sabotage, sedition, subversion, spying, treason, unauthorized release of classified or unclassified controlled information, or unauthorized intrusions into automated information systems are required to report that information to the CO or designee for action.

1.4.2 ACCESS TO INSTALLATION

Due to changing traffic requirements brought on by construction, changing missions and security concerns within NIH Campus’s, access to the installation is subject to change, sometimes with little or no warning. Inbound and outbound traffic restrictions exist.

The main campus of the National Institutes of Health (NIH) is located in Bethesda, Maryland.
Main mailing address is:

National Institutes of Health
Building 1
1 Center Drive
Bethesda, Maryland 20892

Information about how to get to NIH is located at http://www.nih.gov/about/#visitor. Maps of campus and of the local area are located at http://www.nih.gov/about/maps.html.

1.4.2.1 VISITORS AND SECURITY

The National Institutes of Health, like all Federal Government facilities, has recently instituted new security measures to ensure the safety of NIH employees, patients, and visitors.

In response to an announcement of a heightened state of security throughout the Federal Government, the following security procedures are in effect at the National Institutes of Health.

1.4.2.2 PERIMETER SECURITY

To enter the campus, all visitors must present one (1) government-issued photo ID (i.e. Federal employee badge, driver's license, passport, green card, etc.). Visitor vehicles will be inspected at the campus perimeter.

1.4.2.3 BUILDING SECURITY

Many main-campus buildings have limited entrance points (typically the "main" entrance). Buildings 10, 31, 38, and 45 will retain multiple entrance points. Visitors must show one (1) government-issued photo ID (i.e. Federal employee badge, driver's license, passport, green card, etc.) All employees should be prepared to have their personal belongings inspected and go through a metal detection inspection (magnetometer, wand, etc).

All visitors must be escorted to and from their destination within all buildings by an NIH employee.

1.4.2.4 GETTING ON AND OFF CAMPUS

All visitors including patients, contractors, vendors and delivery persons must use the following two entrances:

Rockville Pike and South Drive — enter and exit 24 hours daily

Old Georgetown Road and Center Drive — open as follows:

WEEKDAYS
From 5 a.m. to 2 p.m. Lane 2 will be a transitional lane under police direction. The west end of Center Drive closest to Old Georgetown Road will be used as an Exit lane. The eastern segment will be used as an entrance/thoroughfare for NIH Employees displaying a valid parking permit and employee ID. From 2 p.m. to 9 p.m. Lane 2 will be EXIT only

WEEKNIGHTS
This entrance will be closed to incoming traffic at 7 pm. Open for outbound traffic until 9 pm. Closed to all incoming and outbound traffic from 9 pm through 5 am next weekday morning.

WEEKENDS
This entrance will be closed to all incoming traffic at 7 pm and all outbound traffic at 9 pm Friday. Entrance will then remain closed to all traffic through 5 am Monday.

HOLIDAYS
The hours of operation will vary depending on whether the holiday falls on a Monday or a weekday other than Monday.

For holidays falling on a Monday: This entrance will be closed to incoming traffic at 7 pm Friday evening prior to the Monday holiday. Open for outbound traffic until 9 pm. Closed to all incoming and outbound traffic from 9 pm Friday through 5 am Tuesday.

For holidays falling on a weekday other than Monday: This entrance will be closed to incoming traffic at 7 pm on the evening prior to the holiday. Open for outbound traffic until 9 pm on the evening prior to holiday. Closed to all traffic from 9 pm the evening prior to the holiday through 5 am next regular workday.

Visitors may exit the campus using these additional exit points:

1. Rockville Pike and Center Drive — exit 6:00 a.m. until 7:00 p.m.
2. Old Georgetown Road and Lincoln Drive — exit 6:00 a.m. until 7:00 p.m.
3. Rockville Pike and Wilson Drive — exit only 3:00 p.m. until 7:00 p.m.

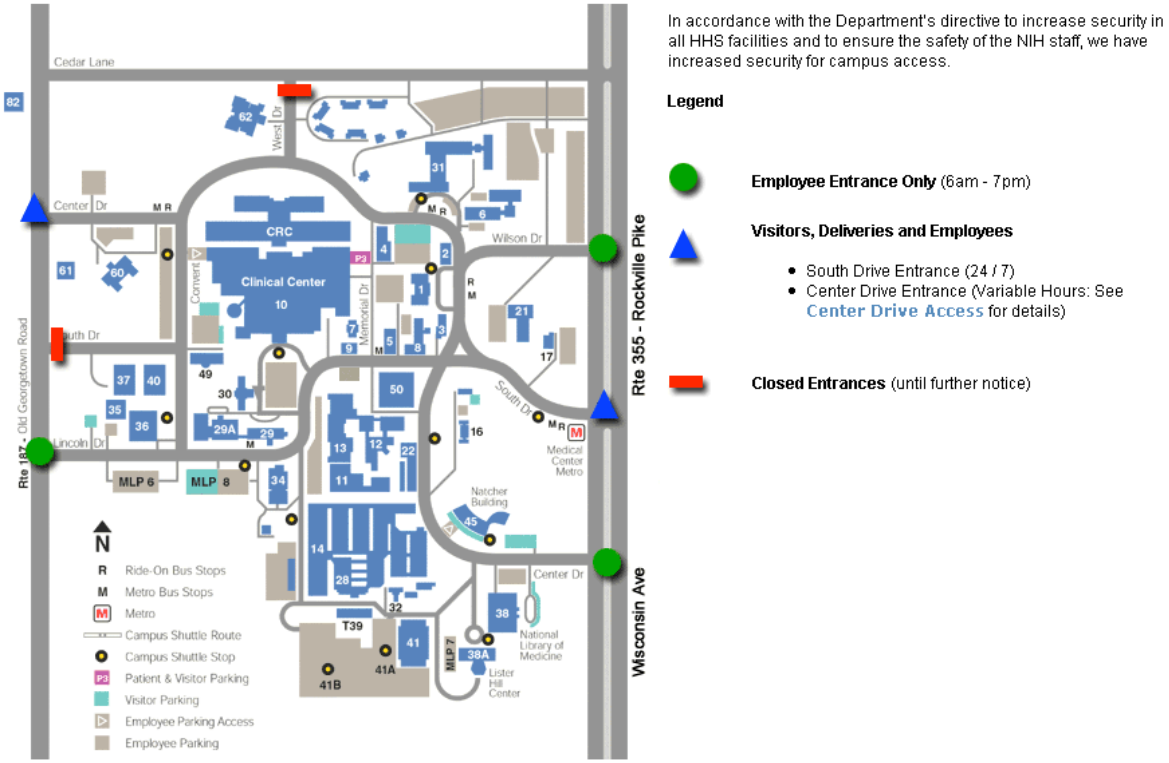
All visitor vehicles, including taxicabs, hotel and airport shuttles, delivery trucks and vans will be inspected before being allowed on campus. Visitors will be asked to show a photo ID and state the purpose of their visit. Be sure to allow extra time for this vehicle inspection procedure.

Please note: visitor parking is limited at NIH. Visitors are encouraged to use public transportation such as the Metrorail subway system, which has a convenient stop (Medical Center) on the NIH campus.

1.4.2.5 PARKING AND TRANSPORTATION

Visitors must park in designated visitor parking lots. Patients may park 24 hours a day, 7 days a week in the Clinical Center garage, P-3 level. Vehicles will be inspected prior to parking in any underground or multi-level garage.

NIH Campus Access



This page last updated on 21 Feb 2002

Public buses are no longer allowed to circulate on campus. Visitors arriving by bus will be dropped off at the NIH/Medical Center Metro stop at Rockville Pike and South Drive. Patients and visitors on official business can then ride the Campus Shuttle to the Clinical Center and other designated shuttle stops on the campus.

1.4.2.6 ACCESS TO NIH BUILDINGS

All visitors should be prepared to show a photo ID, log in and out at building entrances, wear a visitor's pass or have an employee to escort them through the building. Visitors may be required to pass through a metal detector and have bags, backpacks or purses inspected or x-rayed as they enter buildings.

Security staff will be looking for and confiscating any suspicious or potentially dangerous materials. U.S. Code prohibits bringing any dangerous weapons onto Federal property, including anything with a blade longer than 2 _ inches. Meeting participants may want to leave extra bags or personal materials at their hotel to minimize the time needed for inspection.

Visitors may need to call for an employee to escort them through the building.

Vendors and contractors with frequent official business at NIH can be issued special temporary IDs. You must provide an original letter on company letterhead or a memo from your NIH Project Officer justifying your need for a temporary ID. The letter/memo must contain your full name and date of birth and must be presented in person with a valid photo ID at the NIH Parking Office in Building 31C, B3 level, Monday through Friday, 7:30 a.m. - 4:30

p.m.

1.4.3 NIH SECURITY PLAN

The NIH security plan defines both physical and administrative security procedures for the duration of the contract/project. The plan will provide a guide to defining the level of security required for the contract/project, and outlines an approach to overall contract/project security that is consistent with the goals contained in existing NIH regulations and policies.

The plan seeks to achieve the following security goals:

Screen contract/project workforce consistent with NIH policies and procedures.

Maintain contract/project information confidentiality to the greatest extent that is practical.

The plan may be modified from time to time if more effective procedures are required to achieve NIH security objectives.

1.4.3.1 PERSONNEL

Each company involved in the contract/project will be responsible for ensuring that all personnel working on the project undergo a personnel security screening to determine their suitability to access NIH facilities, information, and data.

Generally, the security plan seeks to require personnel clearance procedures that are consistent with guidelines used by the NIH. For this purpose, the plan distinguishes between 1) employees that are involved in sensitive duties, and 2) employees that are not involved with sensitive duties. Accordingly, the NIH will use two levels of security screening for sensitive positions, and one level for non-sensitive positions, in order to determine contract/project suitability:

1) Completion of a background questionnaire and assorted forms (“long form” screening), as well as a credit check is required for:

    a) Employees with direct management responsibilities on the contract/project.
    b) Employees with direct management responsibilities on the contract/project, and/or requiring access to Law enforcement Sensitive information.

2) A police check (single, “short form” screening) is required for all other employees expected to work on the contract/project.

A history of acts of violence, arrests for firearms or explosives violations, illegal alien status, or any felony convictions will disqualify personnel from contract/project participation. Also, any conviction for tax evasion may disqualify individuals subject to the “long form” background screening described in #1 above. This is not an all-inclusive criterion. Other significant concerns as may be determined by the NIH could preclude participation in this contract/project. The NIH will designate a representative or representatives who will be allowed access to all security records. All security information shall be treated as confidential information and stored in a secure, locked file cabinet.

1.4.3.2 COMMUNICATION

The following procedures will be exercised to maintain an acceptable level of communication security on the contract/project:

Telephone use for verbal and facsimile communication will not be restricted with the exception that “sensitive, but unclassified” (SBU) data or information may not be discussed or exchanged over the phone or transmitted over facsimile. Electronic mail (email) may be utilized if commercially available encryption software is used. For consistency, a single software package will be designated by the NIH for use by all appropriate personnel assigned to the contract/project. The software will be compatible with Microsoft Outlook.

Drawings and other electronic design files may be transmitted via email, provided the designated encryption software is utilized.

Use of commercial delivery services or the US mail will not be restricted except “Law Enforcement Sensitive” material must be transmitted by a service that requires a receiving signature.

The NIH shall maintain a current list of persons authorized by the government to send and receive “SBU” information, and will have primary responsibility for its contents.

Information having Privacy Act or proprietary implications, i.e., firings, performance evaluations, contractor bids, etc., should be handled with discretion.

1.4.3.3 FILES AND INFORMATION PROTECTION

Each company, or individual employed on the contract/project shall exercise due diligence to protect project information. The following are minimum administrative procedure requirements.

Electronic Security: If computer area networks are used for performing administrative or technical work, electronic partitions must be installed to limit access by non-contract/project personnel to protect electronic files. Electronic files shall be organized to allow complete purging of the project files at the conclusion of the contract/project to avoid retention of latent files.

Paper Document Security: File cabinets used by contract/project members shall be secured by lock during non-business hours. Access to the files shall be limited to individuals specifically assigned to the contract/project, and have authorized access to the files. “Sensitive, but unclassified” documents shall be maintained in segregated locked storage with access controlled and limited to individuals with a specific need to use the information. Duplication of “Law Enforcement Sensitive” documents shall be limited with all copies numbered and recipients documented. All copies of “Law Enforcement Sensitive” logs and documents shall be turned over to the NIH at the conclusion of the contract/project.

Project Waste: All waste paper from the project shall be recycled or shredded as appropriate. Diskettes, tape cassettes, and CDs should be dismantled and similarly disposed of.

1.4.3.4 PRESS RELEASES AND INTERVIEWS

Any information released by a member of the contract/project, including press releases, advertisements, solicitations, etc. must be reviewed and approved by the NIH, and/or a designated representative of the NIH. All contract/project members are prohibited from the publication or other public release of project information without the written authorization of NIH.

1.4.3.5 GENERAL CONFIDENTIALITY

The NIH has general confidentiality concerns about allowing certain general contract/project information to be easily obtained by potential adversaries of the NIH and/or the U.S. Government. Therefore, discussion of building specifications, project schedules, data, phone numbers, or security systems, should be strictly limited to those with a need to know the information in order to accomplish contract/project responsibilities. This should be done in a manner that discourages availability to anyone not directly connected with the contract/project. All requests for specific data (as mentioned above), and any information from sources external to the contract/project shall be referred to the NIH, or the designated NIH contract/ project representative.

1.4.3.6 NON-SENSITIVE MATERIAL

All contract/project information, hard copy or electronic, not rising to the level of “Sensitive, but Unclassified” shall be safeguarded in a manner which encourages its use by only those individuals involved in the project, and discourages relatively easy acquisition by unauthorized persons.

1.4.3.7 SENSITIVE, BUT UNCLASSIFIED (SBU) MATERIAL

“SBU” information is that which requires a degree of protection commensurate with the possible risk or magnitude

of loss or harm that could result from its inadvertent or deliberate disclosure, alteration, or destruction. The release of SBU data to the general public is prohibited. If released, SBU information could result in injury or unfair treatment of any individual or group, or could impact negatively on the Government's mission. The following information should be considered Sensitive, but Unclassified without further identification by the Government:

1) Any mission-related information defined or labeled as "Law Enforcement Sensitive", to include:
   (a) All documents that contain basis of design information on structural systems;
   (b) Active security system design documents;
   (c) Passive security system design calculations, narratives, and other support information.

2) Personal information on individual NIH employees, reviewers, consultants, applicants or awardees

3) Information bearing proprietary or Privacy Act implications.

4) Patient confidentiality.

Information or documents not defined by items 1 through 3 above shall be designated SBU only if specifically identified by the NIH.

1.5 PRIVACY ACT/PERSONAL INFORMATION

The SP and its employees shall not disclose or disseminate any information that may be considered private in nature concerning NIH, other contractor employees, reviewers, applicants, consultants, or awardees except as directed by the CO.

1.6 SAFETY AND HEALTH

The SP shall comply with requirements of NIH Occupational Safety and Health Plan.

1.6.1 ACCIDENT/MISHAP REPORTING

The SP shall report accidents to the Contracting Officer within one hour of any accident. Within two working days of any accident, the SP shall submit to the Contracting Officer the Accident Report that will cover the circumstances of the accident.

1.6.2 SP SAFETY AND HEALTH PLAN

The SP shall submit and implement a Safety and Health Plan. This plan shall be submitted to the Government Representative within 30 calendar days of commencement of the transition period. The SP Safety and Health Plan shall include the following:

1.6.2.1 STANDARDS AND CODES

Identification of and provisions for compliance with applicable safety standards and codes.

1.6.2.2 OCCUPATIONAL SAFETY AND HEALTH (OSH) INSPECTIONS

Provisions for granting access without delay and at reasonable times to OSH officials for inspections are required. The SP is subject to enforcement authority by Federal, state, and local safety and health officials.

1.7 INFORMATION TECHNOLOGY SYSTEMS SECURITY

The SP shall comply with Information Technology systems security and privacy specifications set forth in SECTION H of this RFP.

1.8 DOCUMENTATION REQUIREMENTS

1.8.1 SAFEGUARDING INFORMATION

Performance under this contract may require the SP to access data and information that are proprietary to a government agency or other government SP's. This information may be of such a nature that dissemination or use other than as specified in this contract would be adverse to the interests of the Government or others. The SP and SP personnel shall not publish, divulge, use, copy, or make known in any manner data or information developed or obtained under performance of this contract except to authorized government personnel or upon written approval of the CO or designee. The SP shall not use, disclose, or reproduce proprietary data that bears a restrictive legend other than as specified in this contract.

The SP shall not allow access to records by any government agency, non-government organization, or individual unless specifically authorized by the CO or designee. The SP shall provide documents and files to the CO or designee within one hour of receipt of the request. All files are the property of the Government and shall be turned over to the CO or designee at the completion or termination of this contract.

Disclosure of information regarding operations and services of the activity to persons not entitled to receive it, or failure to safeguard any classified information that may come into the SP's control in connection with work under this contract, may subject the SP, the SP's agent, or the SP's employees to criminal liability under Title 18, Sections 793 and 798, of the United States Code (USC). Neither the SP nor the SP's employees shall disclose or cause to be disseminated any information concerning the operations of the activity which could result in, or increase the likelihood of, the possibility of a breach of the activity's security or interrupt the continuity of the Center's operation.

1.8.2 REPORTS

The SP shall create and distribute periodic reports necessary for the Government to administer contract performance and to manage and interface with other government activities or agencies. The SP shall submit all reports to the CO or designee for review and final distribution.

1.8.3 RECORD KEEPING

In accord with 36 CFR 1228, the SP shall assist in the creation, maintenance and disposition of necessary and useful records retained in the files of NIH offices. Recordkeeping by Federal agencies is controlled by laws and regulations which require that (1) government records be kept only for authorized periods of time; (2) no government records be destroyed, mutilated or removed from government custody without authorization; (3) records which are valuable enough to be preserved permanently be kept intact and be transferred to the National Archives as appropriate; (4) records which are not in active use, but which cannot be destroyed for some time, be transferred to a Federal Records Center.