eRA Commons: Interacting with NIH Electronically

>> Scarlett Gibb: Welcome to "How Does eRA Commons Fit in the Grants Process Puzzle?" eRA stands for electronic Research Administration and is part of the National Institutes of Health electronic form of processing grants. We will have a very short time at the end of the recorded presentation to answer live questions, so let's get started with introductions. Hi. I am >> Scarlett Gibb: I am a Customer Relationship Manager with the eRA Commons. This means I advocate for the customer, which in this case is our grantees and applicants, which is you. Please feel free to contact me with suggestions, concerns or praise.

>> Anastasiya Hardison: Hi, everyone. My name is Anastasiya Hardison, and I'm a Customer Relationship Manager for xTrain and xTRACT. I have been with eRA for over 7 years, spent a few years being the analyst for xTrain and then moved to being a Customer Relationship Manager for both of these applications.

>> >> Joe Schumaker: Hello. My name is >> Joe Schumaker: . I'm a Senior Communications Specialist for eRA, and it would be about this time that I would be doing some housekeeping information for you telling you where you could find coffee or find the restrooms, but I figure, in this scenario, y'all have that figured out already.

>> Scarlett Gibb: Now that you've met everyone, let's get started. We will be running through this path that you see on the screen. The eRA Commons covers the entire life cycle of the grant from inception, which would be application submission, to the end of the grant and closeout. We plan on hitting on all the highlights from how you are able to see the status of your application or grant to managing your personal data to delegating responsibility to others to help you support the processing and how to meet your reporting requirements. We may have mentioned the eRA Commons is an online interface where grantees and applicants can have access to share administrative information and related to grant applications and awarded research grants. Federal staff also have their own interfaces that access the same data. This is where we meet, and as we get moving forward, you'll see that, so let's dig in. Joe, handing it off to you.

>> Joe Schumaker: So one of the most important things you're going to find out about Commons is where you're going to go to either track your application if it's a new submission or manage the award, and a lot of that's going to take place through the Status menu that you see highlighted in this slide, so the PI, principal investigator, has one kind of status menu, and the signing official, or SO, has a different one. One of the primary reasons that we see a principal-investigator screen as being a little cleaner with the newer look versus the signing official is that the principal investigators only see their own applications and awards where signing officials see applications awards for their entire institution, and because they are responsible for submitting much of the reporting that has to take place through Commons, they have a larger, more extensive menu option in order to find the particular award that they're looking for. So what you see here is the PI view of their list of applications, which they access through the status option, and what we did is, a few years ago, is we reconfigured this interface to group an award or a grant as a family, so as it goes through its numerous years, they are all grouped under the primary NIH grant number, which is on the far left, and then by clicking in the blue area, you expand that, nicely laid out. We see some color-coding along the left side, and when you open those up, you'll see if there are actions that need to be taken. You'll notice where it says in the box, once you expand a family, you'll have the full grant number listed there, and those will be hyperlinked to the detailed status information for that particular award. So in this slide, you're seeing the signing-official view of a general search for applications and awards, and what you see here is the application ID number that is hyperlinked along the left side, and on the right side then are your actions for any particular award. The application ID is the thing that is hyperlinked, and by clicking on that, you'll go to what we call a Detailed Status Information Screen for that particular application, so here is the Detailed Status Information Screen, and time doesn't permit us to go into all the details on this, but you get the idea of this is a lot of information, but as you can see in the categories, it's all kinds of stuff. There's the status, review information that are going to be your scores and summary statements. Other relevant documents might be just time information or correspondence. At the bottom, there's reference letter, so should this be a career training grant, this will show what reference letters were submitted with the application. What you also want to remember about the Detailed Status Information Screen is that it allows you to check your application image, so you need to do that after submission, and you can check your review information and where your application has been assigned to which ICs. You can then check the review outcomes, which includes your summary statement, impact score and percentile score. New as of the summer, that signing officials have access to that information. NIH does not award individuals. We don't give grants and awards to individual people. We give them to institutions. The policy was changed to allow institutional representatives, those with the signing-official role, to be able to see that information as well. Another thing in here is you want to make sure that you're checking on your early stage investigator status. Also, your Notice of Award can be found through the Detailed Status Information Screen, so it contains a lot of information that you're going to want to know about your application and your awards.

>> Scarlett Gibb: Thanks, Joe. Now I'm going to discuss the Just-In-Time feature. This feature was created to allow grantees to submit data that is not needed in the review process but will be needed for the award when it is more likely to be required. Please note applicants should never submit JIT information until specifically requested to do so by NIH. The JIT link is not an indication that the grant award will be made. What we will be looking for when you do submit that JIT is certain things like other supports, budget uploads, other uploads, institutional review board dates, Human Subjects Education, things like that. The PD/PI can go in and make these additions, but they cannot submit the JIT to NIH. That must be done only by the signing official, and everything that's uploaded must be in a PDF format. I love this slide because it states the obvious. Everyone gets a link, so to reiterate, the JIT link doesn't guarantee award. With that being said, when your NIH grant staff request you submit, please do so. So now we are at the personal profile, or PPF. This is where we ask our users to maintain data that is specific to them, things like name, demographics, which is important for trainees, your employment history, which we use for conflict-of-interest checking in review. Education. That's important for new investigator status or early stage investigator status. Reference letters and publications. Very few staff members at NIH have access to change this. This is really up to the person who owns the personal profile to make those changes. This is a screenshot of the PPF. Things that we use the personal profile for is to verify information submitted in your grant applications, to send you notifications, and we ask for ... You can upgrade your e-mail addresses in here. It allows us to complete our aggregate reporting. It allows us to determine new investigator and early stage status, and it determines a reviewer's eligibility for continuous submission. As you can see on the left-hand side of the screen, the personal profile summary has green check marks, and it is all green. That is allowing you to understand that this personal profile is complete, and all required data has been entered. This is a personal profile screenshot that is missing data. As you can see, on the left-hand side, the personal profile summary is in red and that there are places where there are red Xes. It's showing you that there's missing required data, and there are certain things that are required in your personal profile before you can save it. One thing that's very important to know, that no data will be saved if the required information is missing, that it's very important not to navigate away from the page until all the required information is complete because if you leave before the required information is complete, you will lose those changes that are important to your process and business processes and NIH's business processes. Let's talk about ORCID, not the flower, but the Open Researcher and Contributor ID. This is a personal identifier that distinguishes every researcher. It is obtained in by access to orcid.org and can be added to personal profile. We have highlighted in red the link. This link nicely allows you to go straight from your personal profile into either create a new ORCID ID or connect your current one. All you need to do is follow the instructions. Since October 2019, we have been requiring that appointees that are being appointed through our xTrain system on all of these activity code training grants, they are required to have an ORCID ID, and they need to be connected in their individual eRA Commons personal profile, so there's a guide notice here that you can go into and look at it, and also the slide that we just showed you had the ORCID link, and all of those trainees need to have an ORCID ID.

>> Joe Schumaker: Thank you, Scarlett. Another aspect of the personal profile is your early stage investigator status. Now I'm going to explain what an early stage investigator is. It's a status granted to an applicant who has, and I quote here, "Completed their terminal research degree or end of postgraduate clinical training, whichever date is later, within the past 10 years and who has not previously competed successfully as a PD/PI for a substantial NIH independent research award." The advantage of the early investigator status is that your application is grouped with other early stage investigators. So for various reasons, that extension period can go beyond those 10 years, so to make a request to extend your ESI eligibility, you're going to go to your personal profile, and you're going to go to the education section, and that's what you see on this slide here on the right. Now, in order to activate the ESI Extension Request button, you're going to have to click the Edit button to open up that section. The button will appear, and you'll be able to follow it in and make that request. Your current status is displayed there at the bottom, and if you're ineligible because of time and yet you have a legitimate request to extend it, you'll be able to complete that request. So in this slide, we see the ESI extension screen on the right, but the first thing you're going to do is request the number of months that you want your extension, and it's a whole number. Just plug it in there. Now if you're requesting for an extension due to a childbirth, the system is automatically going to give you 12 months. If you have a different reason for asking for extension, the Add Hiatus button is where you're going to go, and when that's clicked on, another subscreen opens up and gives you a list of options to choose from. Then, below that, you'll see a green Upload button. You can provide additional support for your request by uploading documents to the request, and you can also then provide just some plain-text comments below that. When all said and done, you'll either click Save, and it will not be submitted, but when you're done, you can go ahead and hit Submit, and it'll be sent to the committee that reviews all these requests, and they will process it and send you a notification back as to the status of the request. Next, we're going to move on to the institutional profile. The institutional profile holds lots of important information about your organization but is only editable by users with a signing-official role. However, if you are affiliated with your organization, you can go and see the institutional profile, and it is made up of two sections. There's a basic section, which is really contact information, and then Assurances and Certifications. So the IPF Basic Information is fairly self-explanatory. You have your institution name. Institution contact information is a little bit more. There are contact fields for Notice of Award, for general announcements, for conflict of interest and closeout correspondence. There's also some contact name, so a person and a phone number and their e-mail address in case NIH needs to refer to a specific person. The next category is about the institution, and the important stuff in here is your DUNS number, the Dun & Bradstreet identifying number. Then you have indirect cost negotiations and signing officials and TTO administrators. Your TTO is your tech transfer officer. If you're new to an institution and you've been affiliated to it but you need to change something to your account, this is a great place to go and look up who has a signing-official role so that they can make any changes to your account that you might need done. Your institution address is basically the postal address and is also ... That is the address that we use to calculate when your submissions are due. Remember a submission is due by 5 o'clock p.m. local time for each institution that submits to NIH. That is calculated based on the time zone from the address in that field. Also noted on the slide is the SAM registration expiration, and it is the one registration that you have to do that actually has to be renewed every year. You don't want to have an expired SAM registration when you're trying to submit to grants.gov and thus NIH. The Institutional Assurances and Certifications tab holds the information about your compliance for various aspects of doing research. So let's talk a little bit about eRA Commons roles. Basically, a person can execute certain actions and perform certain functions within Commons based on the roles assigned to their account, and on this slide, you see the entire list of eRA Commons roles. Basically, they break down to three categories. You have administrative roles. You have your scientific roles. Then you have the category of other, and these are kind of a weird mixture of review roles for types of reporting or reporting itself and compliance. So those are the three types of roles, and what is important is you can't mix a scientific role with an administrative role because the way permissions work within eRA Commons is it can create a conflict between that role and the administrative roles. Now how does all the roles get started? It starts at the time the organization is registered with eRA Commons. During the registration process, organization will designate somebody as a signing official. It is the signing official who has the authority to be the legal representative of the organization or the institution, the equivalent to the AOR in grants.gov. So signing officials maintain the institutional profile. They submit the reporting, and they manage accounts. We already stated that signing officials and account administrators have the responsibility of managing accounts. Part of that is to make sure that they don't create duplicate accounts, so anybody with scientific roles, if you're going into science and you're a postgrad and you eventually become a full research person, you want that same account from the time you were a postgrad, and NIH does that to be able to track your career. For reviewers, it's very important for their continuous submission eligibility. It helps determine new and early stage investigators. We've already talked about that. So signing officials and account administrators have to make sure that they're checking to see if accounts for somebody already exist. In the Account Management System, AMS, you can search across the entire eRA database for accounts, and as long as you are very confident that the person you're creating the account for is unique and not already in the system, then it will let you go ahead and create that account. And finally, with regards to accounts, one of the things that's really, really important is to make sure that you have more than one signing official at your institution. Signing officials are the ones who submit the reports, and if they're not there to click the button, your reports can't go in on time. Also, in most institutions, the signing official is also the authorized organization representative for grants.gov, and if they're not there, you can't submit applications to grants.gov. Not having additional people with that authority, NIH will not accept that as a reason for your application being submitted late. And signing officials can create other signing-official accounts. You don't need anything beyond the SO role to begin with to create additional SO roles. Please make sure that before you create an account that the user does not already have one. Next, let's go ahead and turn it back over to Scarlett to talk about delegations.

>> Scarlett Gibb: I am going to explain to you how you can delegate to others so they can support you in your endeavors to manage your grants and applications. We have all the delegations you see on the slide. Let's get into more of what each one means in the next slide. The first delegation we're going to speak of is Progress Report. The Progress Report delegation allows someone to work on your Progress Reports, your RPPR, which is your Research Performance Progress Report, or make changes in the Human Subject System, which is HSS. It allows for both of those. The Progress Report can be delegated either by the PI to someone within their institution or by the SO, AA or AO on behalf of the PI to someone in their institution. The next delegation is Sponsor. This is ... A Sponsor is used in the xTrain module for fellowships, and in this case, the SO or AA or the sponsor can assign someone to work on those for them. Next one is status. Only the PI can delegate their status to someone else, and this allows their assistant to work on their status module and see the status of their grants. The PPF, which is personal profile as we have discussed earlier, can be done by anybody at the institution to anybody else, but they have to delegate it themselves, so it is your personal profile. You need to be responsible for whom you delegate the ability to change that, so you may delegate it to anyone in your institution, and they can help you maintain your personal profile, but again, it's your personal data, so be careful. The Submit is an ability that an organization has to allow their principal investigators to submit their own progress reports. This is used by some institutions all the time and by some institutions not at all, and it's all up to the personal organization's policies and procedures to decide whether they're going to use this. The last one here is xTrain, and that allows a PI or Sponsor to give the ability to work in the xTrain and xTRACT modules to an assistant to help them maintain all the trainees and the appointments and the terminations.

>> Joe Schumaker: Thank you, Scarlett. Next, let's talk about prior approval. The Prior Approval module allows signing officials the ability to electronically submit requests to NIH for certain types of actions. There is the change in PD/PI when an institution is going to add and/or remove a person from a project, carryover request when you want to carry over funds from one budget period to the next. Withdrawal request: This is used when you want to remove an application submission from consideration before it's gone to review. This option can be initiated by the Principal Investigator, but it must be submitted by the signing official. And the most common request is the No Cost Extension. This is when you want to extend the project period but are not asking for additional funds. Let's look at some of the details. Now there are two ways to request an NCE or No Cost Extension. The traditional way is that, within 90 days of the end of the project or the project period end date, an extension link will be presented to the SO and the Status Results search screen as you can see here. This is automatic if your award is eligible under NIH's expanded authority policy. The Notice of Award will let you know if your award is eligible for this option. The majority of NIH awards are eligible for an NCE, but the NOA will let you know for sure. Here is what the NCE extension screen looks like. You simply use the Extend drop-down menu to select a number from one to 12. The system will automatically calculate the new project end date. The SO clicks Extend Project Date button to submit the request, and that's it. It's that easy. If an NCE is automatic for most awards, why do we have the Prior Approval option at all? The Prior Approval module can be used if you've already been granted a No Cost Extension prior to the end of the project period end date. The Prior Approval module can be used if the award is not covered by expanded authority, and then there's a small window of opportunity if you've not already had an extension, and it is after the project period end date, so the extension link is no longer available in status, but the award has not gone into closeout. So NCE, you get just one. This means that, under expanded authority, you get one extension without the awarding institute having to provide specific or express approval of the request. However, what we have been seeing is that, sometimes due to catastrophic events like hurricanes, floods or even pandemics, institutions are requesting extensions before the 90-day window near the end of the project period end date. Now if this is approved by the IC, you need to understand that now when you get to your 90 days out from the new project period end date, you will not get the extension link and status. You've used your one, and I quote, free extension request. Now we'll go back to Scarlett for a little bit on administrative supplements.

>> Scarlett Gibb: So what is an administrative supplement? Well, basically you're asking for additional funds, but you're not going through the whole application review process, so because of that, you're not ... You're going to be limited to it must be within the scope of the peer-reviewed, approved project, and there is no increase in scope, so you're looking for increased costs but no increase in scope. There was up until very recently a streamlined process in Commons allowing users to submit the one way of submitting an administrative supplement. That has been changed, and we have put the guide notice in this slide so that you can take a look at it. But now Commons will connect to ASSIST, and we'll describe that more in the next slide. So in this slide, we explained the three methods that we currently have to initiate an admin sup. The first method is initiating in ASSIST via the Funding Opportunity Announcement for the admin sup and then entering your information manually. The second one is to initiate an ASSIST with the federal ID number of the parent grant where some of the parent award is prepopulated, and the third way is to initiate in the eRA Commons. It will direct you to ASSIST where, again, the information from the parent award is prepopulated. This does not stop you from submitting via system to system with the FOA, so we don't want people to think that we're no longer allowing system-to-system submissions for administrative supplements. We are. Welcome to the RPPR, which is the Research Performance Progress Report. This report is federally mandated, and the format is used across all agencies that have research grants. NIH and eRA Commons have automated this form. This slide shows you all the overview of the sections in the RPPR. We are asking you to watch for character limits in your data-entry fields, ensure uploads are in PDF, and when completing data tables, remember to click Add/New. It is important to note that when you're submitting a Progress Report with a budget that will be for the next year, NIH supports both the PHS 398 budget and the SF424 budget. Check with your grant management specialist or the application to see which one you need if both are available, but if only one is available, that is the one that you are required to use. The RPPR is integrated with another eRA system, the Human Subjects System. HSS allows you to manage your human subjects in clinical trials information and is available either through the eRA status, or when preparing the RPPR, it can be available there. The most common use of the HSS system is for updates that'll be needed in the RPPR. You will find the Human Subjects link in Section G.4.b, which is Inclusion Enrollment Data of the RPPR, and it is only available if you need to make updates to human subjects. A multiyear-funded grant is one where the project period start and end date are the same as the budget period start and end date, and it expands over more than 1 year. In these cases, they ... multiyear Progress Reports will be found under the Action column and status and not in the RPPR tab. Submitting Progress Reports for complex or multiproject grants, the RPPR is initiated by the PI or their delegate, and at that point, they're going to need to identify if the RPPR should contain components. If it doesn't, then components are not needed, but if it does, then the structure will be the same as originally submitted in the application, and some sections are not available on the Overall component, i.e. the budget because it folds in from the other subcomponents, and some sections are not available at the component level, i.e. participants and publications, which are reported on the Overall. One of the newest features available for the RPPR is the ability now to start selecting awarded components that came from your application. Those that were submitted through the SF-424 will now be carried over, and you'll be able to actually pull them into your RPPR when you start them, so this will allow you to take some burden off of your setting up and allow you to synchronize with those components that were submitted in the application. Along with your Annual RPPR, there are two other types of RPPRs, an Interim RPPR and a Final RPPR. The Interims and the Finals contain the exact same reporting data, so they look identical when you're creating them. The Interim is due at the end of a segment where you will have a competing continuation awarded or what we call a Type 2. The Final is due when the grant closes out. Please take time to review this slide when you have a chance about when Interim RPPRs would be used and due and what happens if they go in and out of closeout. The most significant addition to the Interim and Final RPPRs is the Outcomes sections. The really important takeaway here is that the information in the Outcomes sections will be publicly available, and it should be written as a high level and in plain language. Very important takeaway: will be made public. Please review this slide with tips and share them with your staff so that the Outcomes section is filled out appropriately. It's important to know that occasionally we may need additional information on your Progress Report after it has been submitted. There are two ways of submitting this information. One is through the Public Access Progress Report Additional Materials section, which is specifically for those public applications that are not compliant with public access policy, and the second is through an agency requested PRAM. That is only available if the grants management specialist has requested additional information. The PI or the PD can enter the PRAM but can only be submitted by the signing official or if the PI has been given the Submit Progress Report authority. The RPPR is integrated and also utilizes publications through the National Library of Medicine System. We allow you, the user, to report their publications through the MyBib system at NLM, and then we pull them into the Progress Report. It is important to know that if you have issues deleting a publication with what is called a gold lock that you will need to contact the NIHMS Help Desk. The link is available. And to delete a publication with a silver lock that you will need to contact the Public Access Help Desk, which there is an e-mail for.

>> Joe Schumaker: Thank you, Scarlett, and congratulations to all of you as well because we've made it to the end of the line. We're at closeout. At the end of the award, you'll need to submit three closeout reports: the Final Research Performance Progress Report, the Final RPPR, the final Federal Financial Report, FFR, and a Final Invention Statement. You will only need to do this if your research has resulted in anything like a new device or a procedure that you want to have patented. The closeout link will appear in the Status Search Results when the project period end date has passed and you have not submitted a Type 2 renewal application, sometimes also known as a competing continuation application. So here is the Closeout Search screen. Because closeout is so important, it has its very own search screen with its own variables that you can set. You really want to avoid NIH putting an award into unilateral closeout because it usually means the closeout reports are so late, more than 120 days after the project period end date, that NIH is forced to take action. You can search by the various types of reports that need to be submitted or by something called FRAM, which we'll talk about in a minute. So FRAM, the Final Report Additional Materials request. Now if you have submitted a Type 2 application, this would be called the IRAM, or Interim Report Additional Materials request. Basically, this means that the awarding IC needs clarification or additional information to complete the closeout of the award. If you get a FRAM or IRAM request, it will appear in the status screen for both the signing official and the principal investigator under the action column. Well, this concludes the presentation. Thank you so much for attending, and please don't hesitate to ask questions or contact us if you need additional help and information.