eRA Program Official Users Group (ePUG)

Date: April 14, 2004, Wednesday
Time: 1:00–3:00 p.m.
Location: Rockledge 2, Room 9100
Advocates: Carlos Caban, Janna Wehrle

Next Meeting: Wednesday, May 16, Rockledge 2, Room 9100

Actions Items

1. (Chanath Ratnanather, Carlos Caban, Janna Wehrle) Set up a PGM training session for NCRR.

2. (Chanath Ratnanather, Carlos Caban, Janna Wehrle) Investigate possibility of setting up PGM icon on desktop toolbars for Program staff across ICs; consider placing instructions for how to accomplish this on the opening screen in PGM.

Handouts

1. Greensheets Instructions

2. NCI Workbench Screen Shots

3. Award Worksheet Report

4. Checklist Change for April and Summer Releases

NCI "Greensheet" Checklist Demonstration

Anne Heath

Anne Heath presented a demonstration of the Greensheet Checklist program that the National Cancer Institute (NCI) currently uses to sign off on grants. Although this program and the Program Module are essentially competing, Janna Wehrle felt that certain characteristics of the NCI program could possibly improve the functionality of the Program Module. She emphasized the importance of looking at all IC systems to see what characteristics of these various systems might be incorporated into the Program Module.

After reviewing the NCI program, the group agreed that the following characteristics of the program were attractive:

- The collapsible and expandable sub-questions under each checklist question. The group liked the flexibility and the ability to customize the checklist screen.

- The system's automatic inclusion or elimination of questions that are not applicable to the type of grant.

- The ability to view the previous year's application. David Finkelstein felt that this aspect of the NCI program was most beneficial.

- The ability to include attachments. Anne said that she is unsure how frequently this functionality is employed by her IC. She guessed that it would most often be used for competing applications.

- The table listing recent activities on a grant. Anne agreed that this is the most valuable aspect of the program. Chanath suggested that a table like the one featured in the NCI program might be useful on the *Portfolio-At-A-Glance* page in the Program Module. In fact, this table might be a better substitute for the *Portfolio-At-A-Glance* page altogether.

At the same time, the group agreed that the following were problematic:

- Although the checklist runs against the OLTP database and is refreshed constantly, when a grant is approved the information is not automatically uploaded into IMPAC II. This is a benefit of the Program Module.

- When a Program Director signs off on a grant, the grant is locked and Program can no longer alter information. If a Program Director wants to change information on the checklist, the Grants Specialist has to unlock the grant for the Program Director. The group was unsure if this was an efficient procedure.

Award Worksheet Report

Cathy Walker

At the last ePUG meeting in March, Cathy presented a prototype of the Award Worksheet Report, a single report that combines the PO Worksheet, the GM Worksheet, and the Checklist Report. This report is intended for both Grants Management and Program staff. By combining all three documents into one report, users will have a single, comprehensive report and will not have to view and print the separate items.

Over the last month, Cathy received helpful feedback from Program and Grants Management. Based on these comments, Cathy assembled a revised Award Worksheet Report. She presented this revision to the group for further comment. This revised version allows users the option of selecting what combination of the Budget, the GM Worksheet, and the PO Worksheet they would like to view on the screen.

In reviewing this version, group members suggested the following:

- The Program Official Signature Notes should be visible in both the GM Worksheet and the PO Worksheet sections.

- Allowing the user to collapse and expand individual sections in the Award Worksheet Report would be very helpful and make it easier for users to view the information they need without having to re-customize each time on the options screen.

- The signature blocks/lines may create confusion when users generate and print different portions of the Award Worksheet Report. It was unclear as to how the system would combine these different versions, some of which may be signed and some of which may not be signed. It was suggested that the Award Worksheet Report display the signatures at the time of award only. Cathy said that this was a good idea

and that she has already proposed "freezing" the Award Worksheet Report and storing it in the electronic Grant Folder as a PDF document at the time of award. Specifically, the Award Worksheet Report would be saved and stored at the six o'clock Work in Progress (WIP) deadline (the point at which Grants Management cannot "unrelease" the award).

Checklist Update

Cathy Walker

Cathy distributed a handout listing the Checklist changes for April 2004 and this summer.

Changes for April include the following:

- Content for checklist pages will include the following text: "SAVE will save your data to the database, Checklist Complete saves your data and changes the status to complete."

- Currently, the radio buttons default to n/a in the PGM Checklist pages to align with ICO. PGM Checklist items will be changed to show no default.

- The user interface will be changed: (1) radio buttons will be moved to the far left, (2) the Response Required and Updated fields will no longer be displayed, (3) the PI name and grant number will be moved to the far left of the page.

- When the grant is not in WIP status, the Checklist will not be editable but the Checklist Report can be accessed and printed. The GM Checklist should not be editable if the grant is not in WIP status, but the Checklist Report may still need to be printed.

Changes for this summer include the following:

- Users will have the ability to enter text into the comment text box, rather than just entering Y, N, n/a.

- The correct checklist will be displayed based on Activity Code and Type.

- The correct checklist required by/based on Agency will be displayed.

- The title bar for the customizable section of the checklists (GM or PGM IC Checklist items), including the Y,N, n/a column headings, will remain on the screen as the user scrolls down.

- An auto save will occur when moving from page to page in the checklists (a request to Architecture to change framework and user interface standards).

- The new Award Worksheet Report will be accessible. Users will have the option to print a full report or one or more sections (budget, GM checklist, PM checklist) of the report.

Status of PGM in ICs

Janna asked group members to provide a brief update on the use/success of the Program Module in their respective ICs. Janna explained that the best way to discuss the progress of

the Program Module with eRA Project Management is to provide concrete numbers and evidence from the various ICs.

Representatives from each IC provided the following information:

National Cancer Institute (NCI)—Anne Heath explained that currently NCI is not using the Program Module. NCI has its own system and until eRA can provide a program that is equivalent or better than this system, NCI has no intention of changing over.

NCI also provided additional suggestions:

- *Online Training*—It was suggested that an online PGM training manual be provided for ICs. This way, ICs could receive training on their own schedule, at their own pace. Chanath said that the eRA Virtual School will soon be releasing a PGM online tutorial; this may be prove helpful.

- *"Harmonization" Group*—It may be beneficial to organize a sub focus group to identify the benefits of all the various IC systems that Program staff uses. Once these benefits are identified, they could then be incorporated into the Program Module. This way, it will be easier to "sell" the Program Module to the ICs; ePUG could argue that the Program Module contains all the best features of the systems each IC is currently using.

- *Message Board*—It was suggested that a message board be established so that ICs using PGM could converse freely about problems and concerns using the system. It may increase PGM to have an open forum where PGM users can collaborate and solve problems. Chanath asked if a message board would be useful to have in the PGM itself, specifically for discussing and collaborating on grants across ICs. The group said that this could certainly be beneficial.

National Center for Complementary and Alternative Medicine (NCCAM)—Shen Wong explained that in NCCAM about 80% of the Program Officials are using PGM. Recently, Grants Management has agreed to accept Type 5 Checklists for PGM. Apparently, there are some issues with PGM. For instance, PGM does not provide a text search function . PGM also does not list secondary ICs. Chanath said that PGM does list at least one secondary IC; however, Chen said that more than IC would be beneficial. Chanath also said that a list of secondary ICs can be found in the Grant Snapshot; however, Shen argued that searching for secondary ICs in the Grant Snapshot was tedious. Finally, Chanath suggested that Web QT could provide this functionality. He will investigate the matter further.

National Institute of Mental Health (NIMH)—Chiiko Asanuma said that PGM is well received at her IC. However, she feels that PGM would be more useful to her IC if the system provided users the ability to customize PCC codes on each page in the portfolio. Specifically, NIMH users need the ability to define the PCC codes they use and to have their portfolio save, store, and call up grants corresponding to those PCC codes. Chanath Ratnanather said that the addition of customizable PCC codes should be a priority.

National Institutes of Allergy and Infectious Diseases (NIAID)—Karen Reese is the new lead user from NIAIDS/NIAID. Several of the other NIAID users present at the meeting reported that only certain divisions of NIAID are using PGM. The divisions that are using

PGM are using the system frequently. However, NIAID is still required to print out progress reports because NIAID is still using an in-house Checklist.

National Institute of Nursing Research (NINR)—Alexis Bakos, new NINR alternate, reported that NINR held in-service training on PGM two weeks ago. Alexis explained that PGM is well received at NINR. However, the PGM would prove more useful to NINR if it included a box for minority supplements on the Type 5 page. Chanath said that he would talk about this issue further after the meeting.

National Center for Research Resources (NCRR)—There is very little usage of PGM in NCRR. Most people are still unaware that PGM even exists. For those who are aware of PGM, they use PGM not even once a week. Many people at NCRR are interested in using PGM, but feel that they have no idea where to begin learning the program and have asked repeatedly about the availability of training. Those who have used PGM feel that the user interface is obtuse, that the learning curve is too high, and that PGM appears to have little to no value. Chanath asked whether NCRR has an alternative system for Program Staff. Apparently, NCRR does not have an alternative system. Rather, Program staff uses QVR and ICO to complete the majority of their tasks. Carlos concluded that the problem with the PGM at NCRR could be resolved with training. Chanath and Carlos agreed to work with NCRR to set up a training session.

Action: **(Chanath Ratnanather, Carlos Caban, Janna Wehrle) Set up a PGM training session for NCRR.**

National Heart, Lung, and Blood Institute (NHLBI)—NHLBI has its own system for Program staff. This system is actually fairly similar to PGM. Apparently, when this system does not provide needed functionality, the Program staff at NHLBI look to PGM. Specifically, NHLBI uses PGM to search for other Program Official's in other ICs across the NIH.

National Institutes of Child Health and Human Development (NICHD)—NICHD has mandated that Program Officials sign-off on Checklists in PGM. However, a problem that NICHD has encountered with PGM is that there is no confirmation that checklists have been completed so grants management requests an e-notification when the program official signs off. This has created a lot of confusion. NICHD has also been struggling with the bug in the Checklist. Cathy said that this bug is caused by the ordering of Checklist questions and suggested possibly reordering the questions.

National Institute of Neurological Disorders and Stroke—Pam Mayer, Co-Advocate of the Grants Management Lead Users Group in eRA, has held several training sessions for NINDS Program Officials on how to use the PGM Checklist. She has received several suggestions: (1) incorporate the Population Tracking Codes from previous years, (2) clarify the four buttons found at the bottom of the Checklist, particularly the "save and return" button, (3) fix the Checklist so that the PO has to complete the Checklist before he/she signs-off on it. Right now the PO can submit the Checklist even though it isn't complete, (4) provide ability to delete a question from the Checklist. Mike Loewe, the Grants Management Lead Users Advocate for eRA, is planning to require that NINDS Program staff use only PGM starting May 1, 2004. Pam said that she would provide feedback to the NINDS PGM Lead User representative to share with the ePUG group.

National Institute of Aging (NIA)—David Finkelstein has provided several training sessions at NIA and has received several complaints regarding PGM. NIA has complained about (1) having to rewrite their PO notes in the text box provided, (2) not being able to access previous year's data, (3) not having the ability to search PO notes by terms, and (4) not being able to print out pages in PGM. David said that he has additional items as well and is willing to forward these to Carlos, Janna, and Chanath. Finally, David explained that NIA still has no method of electronic sign-off and requires a printed sheet. Currently, everything is done manually.

National Institute of General Medical Sciences (NIGMS)—Janna explained that a quarter of her Program staff is using PGM, including 8 Program Officials and 8 Grants Management personnel. This group is using PGM for electronic sign-off. Janna said that NIGMS has experience the same problems that NINDS has dealt with concerning the Checklist. NIGMS has also experienced the same problems that NIA has dealt with concerning PGM in general. Janna said that what would help NIGMS the most is access to historical PO notes.

National Institute on Drug Abuse (NIDA)— PGM is used somewhat in NIDA. It is mandatory for NIDA to use the NIDA system for checklist, and NIDA requires a printed form. It was suggested that tutorials may not be enough to encourage use of PGM and that actually placing an icon to PGM on the desktop toolbars of Program staff would greatly increase usage. Placing a PGM on the toolbar would also ensure that Program staff open Internet Explorer rather than Netscape Communicator. Carlos thought this was an excellent idea and suggested including steps on how to place a PGM icon on a desktop toolbar on the opening screen of the PGM itself. Chanath said that the eRA Technical Coordinators could also support this need. The group also recommended putting QVR on desktop toolbars as well. This way, users would have both PGM and QVR in front of them. Chanath said that QVR is already a link in PGM. NIDA also suggested making the link to QVR more visible in the PGM The group suggested that the link may not be large enough or easily accessible and recommended making it more visible.

Action: **(Chanath Ratnanather, Carlos Caban, Janna Wehrle) Investigate possibility of setting up PGM icon on desktop toolbars for Program staff across ICs; consider placing instructions for how to accomplish this on the opening screen in PGM.**

Attendees

Armistead, Allyson (OER/eRA/PCOB)

Asanuma, Chiiko (NIMH)

Bakos, Alexis (NINR)

Bartlett, Virginia (NIMH)

Bean, Carol (NCRR)

Caban, Carlos (OER)

Delcore, Sandi (NICHD)

Finkelstein, David (NIA)

Goldman, Stephen (NHLBI)

Heath, Anne (NCI)

Hilton, Thomas (NIDA)

Holmes, Margaret (NCI)

Kinley, Teresa (CDC)

Ratnanather, Chanath (OER/eRA)

Reese, Karen (NIAID)

Schultz, Susann (NIMH)

Wehrle, Janna (NIGMS)

Whalin, Micheal (NICHD)

Wong, Shen (NCCAM)