NIH eRA Commons Working Group (CWG)

Date/Time:	Sunday, May 22, 2005, 9:00 a.m.–4:00 p.m.
Location:	National Academies of Science, Washington, D.C.
Chair:	David Wright
Next Meeting:	TBD

Action Items

1. (Dan Hall) Make the One View prototype available in the demo section of the Commons prior to the initial release..

2. (Dan Hall) Publish a Request for Information (RFI) for One View in the next few weeks.

3. (David Wright) Research why the full social security number appears on the Key Personnel page (PDF).

Presentations

- Implementation of eRA One View: http://era.nih.gov/Docs/OneView_CWG_05-22-05.pdf

- CWG Response to X-Train and Questions: http://era.nih.gov/Docs/X-Train_UI_CWG_05-22-05.pdf

- eSNAP and Public Access: http://era.nih.gov/Docs/Public_Access_CWG_05-22-05.pdf

- Commons Update: http://era.nih.gov/Docs/Commons_Review_CWG_05-22-05.pdf

- Org Hierarchy and Ranking Tables/Comments Received on Org Hierarchies: http://era.nih.gov/Docs/Org_Hierarchy_Rankings_CWG_05-22-05.pdf; http://era.nih.gov/Docs/Org_hierarchy_response_CWG_05-22-05.pdf

- Electronic Receipt Update: http://era.nih.gov/Docs/ElectronicReceipt_CWG_05-22-05.pdf

- Multiple PI Update: http://era.nih.gov/Docs/Multi-PIs_CWG_05-22-05.pdf

- New Assurances in IPF: http://era.nih.gov/Docs/New_Assurances_CWG_05-22-05.pdf

Welcome

David Wright welcomed CWG members to the meeting. One new person, Sue Marshall, was in attendance representing the University of Minnesota.

David also announced that Marcia Hahn has taken a new position as the director of the Grant Policy Office in the Office of Policy for Extramural Research Administration (OPERA).

One View Process Walkthrough

Dan Hall

http://era.nih.gov/Docs/OneView_CWG_05-22-05.pdf

Dan Hall, requirements analyst for Commons, reported on the implementation of the eRA "One-View." The implementation has been reviewed internally and he asked the CWG for input and suggestions before baselining the implementation.

Looking at One View from an overall perspective, it pulls grant application processing into one program, beginning at the grantee institution and into the NIH, for the life of the award. It is an integrated approach for electronically initiating and processing all eRA transactions.

One View has three primary parts:

- Single logon for all eRA applications, including the eRA Commons

- Single method for notification of actions and events, both internally and externally, i.e., eNotification

- Single interface to initiate and process a request, regardless of context, within HHS and the grantee community.

One View brings a consistent workflow internally and externally. Dan noted that One View will be adopted by eRA and will support request transactions for all of eRA, regardless of DHHS Operating Division. Currently, the Commons only supports NIH, but this will be changing. Adoption of One View should reduce an estimated 10 percent error rate on externally initiated transactions, such as eSNAP, Just-In-Time and Closeout. When it is fully implemented and has a robust population of data, it will provide an historical record of notification events.

Dan showed a demo of the program and pointed out the following:

- When a person logs in, any action that needs the person's attention appears at the top of the screen. The action message continues to appear until the person takes the required action. This structure resembles an assembly line of actions where each action must be approved of or have something done to it before it can move to the next station of the assembly line.

- A request history shows how many times you've requested, for example, a supplement or a no-cost extension. At this time, the history only will be at the grant level. In the future, it will go to the project level.

- The first part of the process takes place in the grantee institution. When the appointed representative hits "Submit," the process moves to the appropriate OPDIV of HHS (in this case, NIH).

- When HHS/OPDIV/NIH receives an electronic grant application, it reviews it for its acceptability to be considered. If it passes the criteria, it issues "Accepted" to the institution. The Accepted does not mean that the grant has been awarded; it means that the request is accepted for consideration.

- The Status/History section lists previous requests, such as the PHS 398, Invention Statement, and Description of Request.

- Search capabilities allow searches for various types of processes.

- The Just-In-Time (JIT) capabilities will allow multiple submissions, which reflect real-world JIT submissions.

- For the first release, the checklist, relinquishing and face page user interfaces will be developed for data capture. This will help to update the data on the back end of the system.

- For the first release, the Signing Official (SO) does all of the approvals. Dan acknowledged that this will make One View a harder sell but was necessary for the first release. In the future, delegation of approval will be available so that this responsibility can be spread out within an organization.

Dan agreed to make the prototypes available for testing and demonstration in the demo section of the Commons prior to the initial release.

Action:	**(Dan Hall) Make the One View prototype available in the demo section of the Commons prior to the initial release.**

Dan showed draft processes for Standard Request Types, Change of PI, Change of Institution on Single Project Grants (non Fellowships), eSNAP, Project Extension, Fellowship Activation, Closeout Final Invention Statement, Closeout Final Progress Report and Just in Time. He noted the following:

- For a standard request, NIH will require the institution to upload a document (Word or PDF) on the institution's letterhead stating what is requested.

- Administrative Supplements will require a budget supplement and checklist.

- For a change in institution, the Signing Official (SO) from the old institution must sign off before it is sent to the PI of the grant at the new institution.

- In the future, Payback will be included. However, Marcia Hahn said that the government still requires a hard-copy signature for payback. Government legal counsel must be consulted to see if a PDF signature is acceptable.

It was suggested that the PI signature should be made optional. This would allow the flexibility of different processes within different institutions.

Dan will publish a Request for Information (RFI) regarding One View in the next few weeks. David Wright mentioned that comments have been sparse in regard to the RFIs for X-Train and some others. He asked that CWG members take the time to provide some response to the One View RFI.

Action:	**(Dan Hall) Publish a Request for Information (RFI) for One View in the next few weeks.**

The key milestones for the One View project are:

Task Order awarded	March 2005
Prototype	June 2005
Candidate for production	October 2005
Production release	January 2006

X-Train UI Comments and Update

Linda Katzper and Pam Mayer

A Request for Information (RFI) was issued for X-Train. There were few responses but the ones received were positive. The CWG agreed that they'd had positive responses from people in their organizations regarding X-Train, whether or not they responded officially.

Linda reviewed each response and explained the answer from the X-Train team (see attachment). There was some discussion regarding comment 6 in the Issues section: Stipend amount can be adjusted slightly

when end dates are adjusted to accommodate university accounting. How much flexibility is needed? Linda and Pam explained that they are trying to account for variations in the length of the month. If the program is based on a 30-day month, it might not work if local systems count various lengths. It was suggested that it be based on up to seven days at the highest level.

Linda pointed out the following as she showed the new prototype:

▪ X-Train in not searchable by trainee yet, but, as a workaround, projects with trainee listings can be sorted.

▪ When the status is listed as "terminated," it means that the termination papers have been accepted.

It was suggested that it would be useful for the SO to see all available slots for institution grants.

eSNAP and Public Access

Tim Hays

Tim provided an overview of the NIH Public Access Policy. Public access is important for preserving medical research results and information; advancing science by providing an easier way to mine medical research publications; providing NIH a way to better manage its research investment; and gives patients, families, health professionals, scientists, teachers and students access to research publications. It also allows articles to be cross-indexed to other federal-supported databases, and it heightens the visibility of the research.

Tim said that Dr. Zerhouni, NIH director, received more than 6,200 comments during the development of the new Public Access Policy, which resulted in a final policy, released on February 3, 2005, with these key elements:

The policy strongly encourages, but does not require, all NIH-funded investigators to make the peer-reviewed, author's final manuscript available to other researchers and the public at the NIH National Library of Medicine's (NLM) PubMed Central (PMC) immediately after the final date of publication in a journal. The "Policy applies to peer-reviewed, original research publications that have been supported in whole or in part with direct costs from NIH. CWG members wondered why it was "encouraged" but not "required." Tim said that the NIH is attempting to "change the landscape" of how publications are made available to the public. Since only about 10 percent of PubMed cited journal articles are NIH-funded, NIH is optimistic that the introduction of a more benevolent voluntary policy will encourage publishers to change their "open access" publishing models so that *all* articles will be available to the public on earlier timescales than what currently exists.

The policy also states that "at the time of submission, the author will specify the timing of the posting of his or her final manuscript for public accessibility as soon as possible and within twelve months of the publisher's official date of final publication." Tim reiterated that final manuscripts will not be released to the public until after the journal's official date of final publication.

The eRA Commons home page has a link to the Public Access Policy Web site where the NIH Manuscript Submission (NIHMS) system can be accessed. Commons users who have logged into the Commons for other reasons can directly access the NIHMS system through a link on the Publications page in the Professional Profile portion of the Commons. To upload manuscripts to PMC through the NIHMS system, PIs must use one of two logins: NIH (for NIH staff) and eRA Commons (for NIH extramural principal investigators, grantees or applicants who have Commons accounts). However, if the PI is not yet registered in the Commons, they can quickly create a provisional Commons account by

following the "Create new account" link. The provisional accounts are similar to the Internet Assisted Review (IAR) accounts, which allow limited Commons access because they are not integrated into the main Commons database. If PIs want to take advantage of the full range of Commons' functionality they need to have their Sponsored Research Office (or equivalent) affiliate their provisional account with the institution. Public Access submissions are scheduled to be integrated into eSNAP on August 1, 2005.

Tim assured the group that the usual checks and balances will be imposed (e.g., comparing the uploaded manuscript with its journal publication) to weed out incorrect uploads. Tim showed the Web pages for uploading manuscripts and stepped through the process.

Commons Update

David Wright

David provided an overview of the latest updates to Commons. There have been three recent Commons releases and two more scheduled in the fall:

Date of Commons Release	Revision
April 18	Commons 2.7.0/2.7.1
April 25	Commons 2.7.2
May 20	Commons Demo 2.7.2
September	Commons 2.7.3
September/November	Commons 3.0

David reviewed some notable changes:

- The PI will receive a pop-up note when they upload a document stating that the SO must submit JIT information.

- Users can see electronic submission errors through Status (eCGAP and Grants.gov errors). Grants.gov is not building in error messages to the submitter but the NIH is providing this.

- Grantee institutions cannot submit an eSNAP if HS and/or AS assurance numbers are blank in IPF.

- eSNAP has been modified to handle the last four digits of a social security number. However, it was noted by a CWG member that on the Key Personnel page (PDF), the full social security number still shows.

Action: **(David Wright) Research why the full social security number appears on the Key Personnel page (PDF).**

- NCE now allows submission on the last day of the grant.

IAR

There were several changes and enhancements made to the Internet Assisted Review (IAR) module:

- The fonts and colors now align with the rest of the Commons. Previously, it had its own look and feel.

- Sorting problems and the incorrect council date problem were fixed.

- A link was added to the Meeting Materials screen on the List of Apps screen.

- There are now batch emails to reviewers.

- IAR now creates Word pre-Summary Statement files for subprojects.

- Discussants now can upload critiques in READ phase.

- Performance enhancements have made the program much faster. It has a much higher use than originally expected in this timeframe with 200–300 meetings a day, so changes were made to accommodate this high traffic.

A CWG member noted that some ICs still are using their own systems for Review.

Big Ticket Items

Closeout Module. More than 200 people have submitted Closeout materials since it became available through the Commons, even though there was no advertisement of its availability. David said that this is often done when a new module is introduced. If just a few people use it at first, the bugs can more easily be worked out. However, CWG members responded was that they would like better communication about enhancements to the Commons. Often a module, such as the Closeout Module, hasn't been put into the demo section before being released. Consequently, users see the module and try to use it but don't really know how. David agreed that sometimes enhancements have bypassed the demo site step before releasing to production. It was agreed that a note to CWG members about released enhancements, whether or not they have been in the demo site, would be an improvement.

CWG members said that they have found several mistakes in Closeout and wanted to know where to send corrections. If the problem is a Closeout computer system problem, people should call the Commons helpdesk. If it is a problem with Closeout documents, people should call their designated IC contact.

Marcia Hahn reminded the group that it is a Closeout requirement that someone at each NIH institute has to manually designate a grant to be in "closeout" status. She will be publishing a Guide Notice about Commons and Closeout with a reminder about this requirement. This is why some grants are not showing up as being in closeout that should be.

Some suggestions:

- Add which items are due in the Status Search Result List for the Closeout Search.

- Can we delegate submitting invention statements to the PI? This is being investigated.

- If someone has the FSR role, can they access Closeout? No, they have to have at least an AO role.

Content Management. This new feature was added so that NIH can be more prompt in adding content to screens that may not be as clear in their purpose or need some additional guidance on how to fill in the data on the screens. It has proven to be very useful so far.

Integration with the NIH Manuscript Service. Now, a delegate can upload a manuscript on behalf of a PI with PI approval. If the PI submits directly, the PI is asked to create a second account for the approval. This has increased the number of duplications in the system. In the next version, there will be a way for the PI to be self identified and provide their Commons account number. This should reduce duplications.

Improved error handling. This has greatly improved troubleshooting.

Organizational Hierarchy and Ranking Tables

David Wright

David discussed three issues: searches on current data, NIH published ranking and medical school identification and naming.

Searches on current data

There are four things to consider:

- Changing structure or reassigning grants will not change historical data. If a project is moved to another department within the organization, this will not affect a previous year's ranking table.

- Changes to historical data (PUB file) will not change the current data.

- Only allow designated individuals to alter the hierarchy and assign and reassign grants.

- If an institution changes their data, they cannot depend on the NIH for its accuracy.

When the organizational hierarchy is rolled out, there will be a basic structure with two levels. The institution can then change it.

NIH published ranking

The NIH PUB(lications) file is a file cut after the close of a fiscal year and is applicable to a single fiscal year. Since the NIH Published Ranking comes from the frozen PUB file, it is not affected by current changes. The PUB file is created from the current file in October. Organizations can request a change to this frozen file, and any change requested and done to the PUB file will not be overwritten by future information in the organizational hierarchy (which will change current data only).

In the interim between the creation of the PUB file (early October) and freezing of the PUB file (early May), DSA receives numerous requests for data that are filled based on the PUB file as it exists at that point in time. Incorrect major component assignments will affect all requests during this six-month period.

Medical school identification and naming

Within the Commons, organizations can assign their own names to levels of hierarchy. This does not mean that the information they enter into their organizational hierarchy layer will be published on our Web site. The information published on our Web site will be the NIH standardized names that match the major component they choose when they construct their organizational hierarchy layers.

If organizations want to change their medical school name, they still have to contact Systems Quality Assurance and request that information be put in the appropriate field. NIH will certify that the organization still qualifies as a medical school.

David noted that Carolyn Stelle was the contact in Systems Quality Assurance but she is retiring so there will be a new contact.

He also explained some terminology. Virtual organization layer (VOL) was the name used when the concept was developed for internal NIH use. When the project expanded, the terminology "organizational hierarchy" superseded the VOL terminology. However, you may see VOL still used in eRA documentation.

Comments on Organizational Hierarchies

There were a number of comments received about the organizational hierarchy project. See the attached for the comments and answers: http://era.nih.gov/Docs/Org_hierarchy_response_CWG_05-22-05.pdf.

Maintenance rights. David reminded the group that with the first roll-out, the hierarchy-maintenance right only is assignable at the root level. This means that for now, only the SO and the person(s) given this right can make the changes to the hierarchy and assign grants to places in the hierarchy. Since this is the case, no notification is sent to the SO about any changes

PIs. The Principal Investigator (PI) won't be much affected by the new organizational hierarchy in that they will always see their data wherever it lies in the structure.

Number of layers. There was a question as to whether or not institutions can increase the number of layers to more than the five now designated. David said that the structure will remain at five layers for the initial rollout until NIH finishes shaking out the system After that, requests for more layers will be considered. However, the NIH encourages institutions to not get carried away with a complex structure and to keep it to five layers if possible.

Multiple PIs. Instituting the new policy of multi-PIs will affect the organizational hierarchy structure. The Working Group is addressing it now and will issue two RFIs on this issue.

List of Rights. The system has the capability to see what rights and at what level each person has.

eCGAP/Grants.gov Update

Jennifer Flach

Jennifer provided an update on electronic receipt, Grants.gov integration, 424RR transition and plans for next year.

eCGAP open submission. In January 2005, eRA opened submissions for the following applications: Simple (R01, R03, R21); Types—New (Type 1) and Competing Continuations (Type 2); Revisions; and Modular budget without consortia.

E-application statistics. The following applications have been received:

- 38 apps for Feb/March receipt dates

- 148 e-applications to date

- 12 awarded, to be paid, or pending award

- 20 pending council review

- 38 pending peer review

eCGAP release for next receipt cycle. eCGAP was deployed to production on May 9 with changes to accept the new 398 form and consortia for modular applications. It is the fourth pilot for full-budget applications and includes PPF update transactions.

CGAP-RR release for next receipt cycle. The next CGAP-Receipt and Referral release is planned for June 3. It will include enhancements and defect fixes. It is being done under a Task Order recently awarded to SAIC. The improvements that will be in this release are critical to handling volume and extending the deadline for e-applications.

Submission and verification timeline. For the June 1 receipt date, the ticket must be requested by June 1 and the PI/SO must verify it by June 3. If the PI/SO rejects the e-application, paper applications must be received by the NIH no later than June 9.

For the July 1 receipt date: the ticket must be requested by July 1 and the PI/SO must verify it by July 6. If the PI/SO rejects the e-application, paper applications must be received by the NIH no later than July 8.

Increasing number of applications. There are a number of reasons why more people are not taking advantage of the new electronic submission. It takes time for service providers (SPs) to recruit and set up new clients. Some potential SPs are waiting for outgoing transactions (eNGA). Some institutions and SPs are waiting for Grants.gov to be available.

There are still consortia restrictions. They are lifted for modular grant applications but are still in place for full-budget applications.

The eRA team is expanding its outreach activities and educating interested applicants to begin early in the process. Additionally, it is enhancing CGAP Receipt and Referral to be ready for higher traffic volumes.

Outreach and support. The eRA Web site (http://era.nih.gov/Projectmgmt/SBIR/) now has improved information regarding Service Providers, an applicant orientation and plans with Grants.gov. Also, there is a brochure on e-receipt and a link on the OER Web site. There have been newsletter articles about the project and some press releases. The team also makes presentations at council meetings, extramural conferences and other related meetings. Expanding eCGAP technical support has encouraged the use of the system as has its support of Grants.gov.

eCGAP/Commons Demo. A new environment that integrates eCGAP with the Commons demo will be released by May 26. It is separate from the eRA integration test that the SPs use. This new environment will facilitate "end-to-end" e-submission training and allow remote testing of Grants.gov integration.

Planned releases. There are four releases planned for this summer and fall:

- Loan Repayment Program applications

- Receive planned and actual enrollment as structured data in application (currently pdf)

- Receive actual enrollment as separate transaction

- Grants.gov

Enrollment form. There currently is an optional enrollment form for Grants.gov. eRA will transition this option in and will accept both structured data and PDF files.

Application Guide. The draft version of the Grants.gov application guide is available to the CWG. Contact David Wright should you want a copy.

Workflow for Grant Submission. Jen reviewed the workflow for registered grantees submitting an application to the NIH. They have three options: submit through a SP; submit through Grant.gov; or submit through the institution's electronic submission program.

Integration with Grants.gov. NIH and the other HHS Operating Divisions (OPDIVs) will use federal-wide 424 Research and Related (RR) plus PHS-specific forms and other federal forms. However, the grant image will be based on the 424RR and not the PHS 398. In an effort to address any issues, a 424RR Transition Working Group has been created and will focus on using the SF424 when possible for more simple applications.

To accommodate other OPDIVs migrating to eRA, the team has plans to modify Commons to provide status and verification ability to OPDIV's grantees.

Modular agency-specific budget forms were developed for use by the NIH. The 424RR budget form will be used for full budgets.

Several of the current eRA Service Providers are involved in the Grants.gov Applicant System-to-System Interface pilot.

Status of Grants.gov integration. System-to-system testing with Grants.gov was completed in August 2004. PHS 398-specific forms and schema were deployed by Grants.gov in April 2005. The validations for simple, modular applications were defined. The 424RR-based grant image generation requirements were completed. Database changes were analyzed and short-term changes were approved. The mechanism for returning errors and warnings via Commons was deployed.

The following activities now are in progress:

- Refining the Grants.gov system-to-system interface in the eRA development environment.

- Implementing short-term databases changes and the mechanism for storing XML in a useful way until long-term changes are complete.

- Continuing an analysis of the impacts of long-term database changes have on the eRA.

- Developing and testing validations and grant image.

- Working with OPDIVs to define their needs and priorities.

- Developing and conducting outreach activities.

- Making presentations and conducting discussions at NIH grants management, peer view, and program committees on 424RR implementation.

- Preparing eRA helpdesk to handle calls on Grants.gov submissions.

- Preparing for Pioneer awards, which again will be accepted via Grants.gov this year.

Future plans for Grants.gov integration. Iteration 1 should be finished in May. CWG members will test it using "dead" data. The 424RR application guide will be published in June. The next iteration/production release will be in July. We will continue acceptance testing throughout the summer. There will be a live pilot in the fall, and sooner if possible. We will accept live applications in Fall 2005 for select grant mechanisms. The 424RR Transition Working Group will provide guidance on the ramp up.

424RR Transition Working Group. This group, which was established about two months ago, includes representatives from HHS OPDIVs, Review, Policy, eRA and Grant.gov. It is charged with developing a plan and guidance on transitioning to the 424RR forms set and phasing out the PHS 398 as it is today.

The DRAFT milestones for the 424RR transition are:

Date	Draft Milestone
June 2005	Publish 424RR Application Guide for pilots
Fall 2005	Begin pilot using live 424RR applications through Grants.gov
March 2006	PHS 398 Revision Committee forms
May 2007	PHS 398 revision to OMB due; goal is to clear PHS-specific forms to 424RR and NIH instructions
Sept 2007	Open 424RR submission for "all" applications
May 2008	Mandate 424RR+PHS-specific for "all" apps

Transition to 424RR plans. The working group is considering some strategies for transitioning to the 424RR, including targeting specific mechanisms and/or RFAs to pilot and move toward requiring Grants.gov submission, targeting R03s and SBIRs. Other OPDIVS also are identifying opportunities.

Some of the possible new mechanisms to be developed in FY06 using Grants.gov forms and submission process are: other R's; construction grants (424); mandatory/blocks grants; Form 5161 applications; Pioneer Awards, SBIR; and STTR.

CWG members wondered if the May 2008 date for full electronic submission is feasible and whether Grants.gov will be ready to accommodate it. With technology changing so fast, it is difficult to plan so far ahead and to speculate what future breakthroughs will affect the systems currently being planned and developed. Going back to paper submission, obviously, is a fallback position for Grants.gov but it would be better if they had an electronic fallback strategy. However, until the 424RR is mandated, a full transition to Grants.gov won't take place. The PureEdge forms still are not acceptable for many grantees.

ebXML evaluation for the eXchange. The evaluation task made these recommendations: use the ebMS message handler user Hermes (open source) and for the Registry, using OMAR (open source). eRA is designing new architecture based on these recommendations. An eXchange construction task order is being developed.

Possible new transactions for FY06. There are four types of transactions that are being considered for FY06: system-to-system Notice of Grant Award; system-to-system SNAP (eRA plans to make e-submission of SNAPs mandatory in October 2006); IPF update; and data retrieval by grantees.

Possible new capabilities for FY06. Three new capabilities are being considered for FY06: corrections to e-applications, digital signatures and consolidated rules engine for edit checks.

Modular Budgets/New F&A Rules

All

Westat conducted an evaluation regarding the implementation of Modular Budgets at the NIH and drafted a report, which is being circulated. A Web site will be available soon for those interested in the results. A working group has been formed to analyze the main themes in the report.

There were some issues noted about the implementation of the new NIH rule concerning F&A calculations. It seems that while they serve a good business purpose, they pose some issues when training faculty and staff how to make the calculation by hand and how to program computers to make the calculations automatically. The issues were acknowledged, but no action plan was decided upon.

Miscellaneous

David Wright

David reviewed the Multi-PI issue and the new assurances in the IPF.

Multiple PI Update

The directive from John H. Marburger, III, director of the Office of Science and Technology Policy (OSTP), on January 4, 2005, stated that all federal research agencies should accommodate the recognition of two or more Principal Investigators on research projects (grants and contracts). The change impacts departmental ranking tables, apportionment of funds to PIs, the desirability of development of grant applications for more than one PI along with identifying information in databases, systems and reports.

The apportionment of dollars is a sticking point with its effect on ranking tables and a split with institutions.

Two requests for information will be issued and the comments can be submitted through the Web sites.

The OSTP and the NIH will work together on their initiatives with some exceptions. There is already an agreement that all agencies will adopt a multiple PI policy, but most agencies are not addressing or don't need to address apportionment.

The issue of one PI being higher or lower than another on a project is being addressed. There should be no implication in the process of higher or lower ranking of a PI on a project. Also, grants with a sole PI will continue to be granted. Institutions already do some of their own apportionment.

CWG members are encouraged to submit their comments in response to the RFI. NIH's RFI will be published in the NIH Guide (http://grants1.nih.gov/grants/guide/index.html) and the OSTP RFI will be published in the Federal Register (http://www.gpoaccess.gov/fr/).

New Assurances in IPF

There are several new assurances that are now or will be in the Institutional Profile File (IPF). They include the following:

- Smoke-free workplace: The PHS strongly encourages all grant recipients to provide a smoke-free workplace and to promote the non-use of all tobacco products. This currently is not reflected in the Commons.

- Ban of funding of human embryo research.

- Limitation of use of funds for promotion of legalization of controlled substances.

- Restriction on distribution of sterile needles

- Restriction on abortions

- Protection against the misuse of select agents and toxins whether inadvertent or the result of terrorist acts against the United States homeland or other criminal acts.

There are other reworded assurances:

- Human Subject Research

- Recombinant DNA Research, including Human Gene Transfer Research

All of these will be added to the Commons IPF. The institution's Signing Official (SO) will need to check these off before any eSNAPs can be submitted. They also can be found in more detail in a document at: http://grants1.nih.gov/grants/funding/phs398/phs398.html .

The group discussed the best way to notify SOs. The following ways were suggested:

- About 60 percent of SOs are registered in the Commons so could use the Commons IPF email address.

- Run a list of the SOs and send them an email.

- Use the NGA address.

The group agreed that notification should be sent out on June 16 using the IPF address but if it is not available, using the NGA address.

Open Discussion

Just-In-Time transactions were the topic of the open discussion. Comments included the following:

- When JIT is submitted not received. Notifications will be instituted when One View is implemented. Email does not return to submitter.

- Withdrawn JIT should go away.

Attendees

CWG Members

Arias, Lynette, (Oregon Health and Science Univ.)
Beck, Ellen (UCLA)
Custer, Tammy (Cornell Univ.)
Fant, Jane (Univ. of Medicine and Dentistry of New Jersey)
Forstmeier, Kenneth (Pennsylvania State Univ.)
McKinney, Tolliver (St. Jude Children's Research Hospital)
Randolph, James (Univ. of Mich.)
Robins, Sandi (Univ. of Wisconsin Medical School)
Sommers, Holly (Emory Univ.)

Other Institutional Representatives

Carr, Olga (Columbia Univ)
Cheng-Chong, Cora (Mass. General Hospital)
Cook, Faye (St. Jude Children's Res. Hospital)
Drinane, Tom (Dartmouth Coll.)
Israel, Beth (Columbia Univ.)
Kirk, Graydon (Emory Univ.)
Marshall, Sue (Univ. of Minn.)
McNulty, P (Univ. of Mass. Medical School)
Robinson, David (Oregon Health and Sci Univ)
Smith, Marcia (Partners Mass. General Hospital Brigham Women's Hosp.)

Swavely, Todd (Univ. of Pennsylvania)
Valenzuela, Richard (UCLA)
Wilson, Thomas (City of Hope)

Service Providers

Bozler, Dianne (ERA Software Systems)
Burnette, Travis (Clinical Tools)
Rodman, John (RAMS)

NIH Staff/Contractors

Ellis, Joe (OPERA)
Fisher, Suzanne (CSR)
Flach, Jennifer (OD/OERRM)
Gibb, Scarlett (OD/OERRM)
Hahn, Marcia (OPERA)
Hall, Dan (Z-Tech/OERRM)
Hays, Tim (OD/OERRM)
Katzper, Linda (OD/OERRM)
Mayer, Pamela (NINDS)
Seppala, Sandy (LTS/OERRM)
Seigert, Mark (OD/OERRM)
Twomey, Tim (OD/OERRM)
Walker, Cathy (OD/OERRM)
Wright, David (OD/OERRM)