Research Performance Progress Report

Implementation Plan for NIH and Other PHS Agencies

January 21, 2011*

In accordance with the April 21, 2010 memorandum to the heads of executive departments and agencies from the Office of Management and Budget and Office of Science and Technology Policy, the National Institutes of Health (NIH) hereby provides its implementation plan for the Research Performance Progress Report (RPPR). The RPPR is a federal-wide uniform format for use by agencies and awarding offices that support research and research-related activities.

NIH implementation of the RPPR will replace the following existing OMB approved information collections and associated burdens:

- Public Health Service (PHS) Non-competing Continuation Progress Report (PHS 2590);
 OMB no. 0925-0001, currently approved for use through 06/30/2012; 15 burden hours.
 The PHS 2590 is used by approximately 37,000 grantees each year; total annual burden hours is 555,000. Note that OMB approval number 0925-0001 includes other information collections, which are not affected by the RPPR, including the PHS Grant Application (PHS 398).
- NIH and Agency for Healthcare Research and Quality Ruth L. Kirschstein National Research Service Award Individual Fellowship Progress Report for Continuation Support (PHS 416-9), OMB no. 0925-0002, currently approved for use through 06/30/2012; 15 burden hours. The PHS 416-9 is used by over 1,800 recipients of fellowship awards each year; total annual burden hours is 27,480. Note that OMB approval number 0925-0002 includes other information collections, which are not affected by the RPPR.

Accordingly, the RPPR will replace all interim performance reports used by all NIH grantees to report on research and research-related activities, for programs such as:

- Research project grants
- Institutional training grants
- Research career development awards
- Individual fellowship awards
- Cooperative agreements
- Program project and center grants

- Conference grants
- Cancer Center Support grants
- Biotechnology resources grants
- Academic career awards
- Academic research enhancement awards

Consistent with Public Law 106-107, the Federal Financial Assistance Management Improvement Act, and NIH's transition to electronic systems for greater than 94% of its interactions with its grantee community (including application submission, award, and reporting) the NIH will implement the RPPR in an electronic, paperless, environment only. The eRA Commons, NIH's electronic interface with the grantee community, will be the avenue that grantees will use to submit an electronic RPPR.

Use of the NIH version of the RPPR by other PHS agencies is contingent upon a partnership with NIH's electronic grants administration system. The following PHS agencies currently use the PHS 2590, have the requisite partnership with NIH's electronic systems, and intend to adopt the NIH version of the RPPR: Food and Drug Administration, Centers for Disease Control and Prevention, and Agency for Healthcare Research and Quality. Other PHS agencies that currently use the PHS 2590 (e.g., Indian Health Service) may choose to adopt the NIH implementation of the RPPR if and when they establish the requisite partnership.

Electronic development of the NIH RPPR implementation will commence early in 2011, and it is anticipated that the system will be ready for pilot testing in January of 2012 for all awards except multi-year funded awards. Pilot testing for progress reports for multi-year funded awards is anticipated to begin in April 2012. Full implementation of the NIH version of the RPPR is expected to occur no later than 07/31/2012, and will be applicable for non-competing awards issued in FY 2013 and beyond. NIH will submit its version of the RPPR to OMB for clearance under the normal Paperwork Reduction Act public notice and comment process in the near future.

*January, 2012 Update: Pilot testing of the NIH RPPR is targeted to begin in April, 2012. The pilot will be limited to a small number of institutions, and will include most awards that do not require submission of an annual detailed budget (i.e., awarded under the Streamlined Noncompeting Award Process or SNAP). The timing of full implementation of the NIH RPPR for SNAP awards, and pilot testing of the RPPR for awards that include an annual detailed budget, will be determined based upon the success of the initial pilot.