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	This is to request that a "supplemental" cover page be added to the SF-PPR as an optional form so that we can include additional questions about the grantee organization and its staff in the Performance report. Some of these should include standard formats and objects such as "Person Name", "Address", "Phone Number", "Email addresses". These are included on some of our existing OMB-cleared performance reports and we use this as a way to update grantee organization and staff contact information. Some examples of those types of additional fields are listed below: Organization's Fax number Website Address Toll-free Phone Toll-free TTY Number Executive Director Name Program Director/Coordinator Name President of Board of Directors (BoD) Name, Address, Phone, Fax number, Email Chair of Advisory Council Name and Address Satellite Office(s) (SOs) Contact Name and Address Contractor Name, Address, Phone, Fax, Email Person to contact regarding report: Name and Phone Please allow 20 to 30 additional lines on the supplemental cover page for information about the grantee organization and staff contact information that	HHS ACF	J. Dionne	Agree. SF-PPR Continuation page added for additional information relating to the grantee organization or grant project.
2	does not directly relate to the performance of the grant project. The Health Resources and Services Agency (HRSA), an operating component under the U.S. Department of Health and Human Services, has the following comments on the proposed SF-PPR, Performance Progress Report: GLOBAL A major concern is whether the use of this form would be mandated for all agency programs. The consensus at HRSA is that it should not be mandated. Various agency programs have established performance measurement reporting requirements with which grantees must comply with as the reporting requirements are mandated in statute. In some cases the data is collected using electronic data reporting systems. These systems collect data not necessarily captured by the proposed reporting forms, nor in the same format.	HHS HRSA	C. Bish	These formats are proposed for government-wide use. At this time, they are not required. The current clearance is for voluntary participation in pilots, electronic or other. If used, the only required form is the cover page. All other forms/formats (A through F) are optional. SS-PPR-A through E are formats that are intended to accommodate agency-specific or program-specific questions and information collection needs.

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3	In other cases, some of the requested data proposed for collection in the new forms would be duplicative of the information already being collected. These systems have been developed at great cost and provide the grantees with a uniform and expedient means of conveying the information electronically to the agency, while at the same time satisfying Congressional mandates and other agency and Departmental reporting requirements.			These formats are not intended to immediately replace existing collections. They are intended, however, to begin to propose standard formats for collection of same and similar information as we move toward full electronic collection and as existing collections undergo future clearances.
4	In addition, once data is inputted and transmitted to the agency using these systems, the current reporting systems enable programs ready access to the data and the ability to run various reports based on querying capabilities that were developed to address specific audience needs. HRSA believes that if the form is mandated, it will be burdensome on the grantee and duplicative in many cases as HRSA would still need the data provided by the other more established and specifically tailored reporting systems/requirements. Additionally, some information is already reported back to the agencies which incrementally fund grants when the grantee reports on its progress in its non-competing continuation applications or it competing renewal applications. In some cases, requiring this form in addition to other required reporting would increase a grantee's administrative expenses which for some programs are legislatively capped.	HHS HRSA	C. Bish	Information from these collections can go into existing or future electronic databases and be used in existing (or future) reports and queries. Over time, this could replace existing collections and relieve grantees of some burden by providing standard electronic instruments and collection mechanism across Federal agencies and programs. Data on an electronic SF-PPR form could easily be pre-populated on a continuing grant report from existing databases using pre-award or award information.
5	Additionally, it should be noted that the requested information in the proposed forms would be inadequate for use in some programs to assess a grantee's progress and determine if continued funding was warranted. Also, it is unlikely that the proposed requested data will satisfy or crosswalk with some programs' specific project measures and goals specific to the actual grant, program specific measures and goals which address core measures and goals that meet the Department and Agency goals.	HHS HRSA	C. Bish	As stated above, agency-specific and program-specific requirement and questions can be supported in one or more formats A through E.
6	HRSA does not believe that the proposed forms and electronic submission of data through Grants.gov would permit the type of data access and reporting capacities that agencies need to report on program performance measures or other grantee information that are required in some instances.	HHS HRSA	C. Bish	The initial electronic pilots are intended to be done in conjunction with GMLoB consortia efforts, not specifically Grants.gov. Post-award reporting does need ties with back-office databases for pre-population and validation.

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7	HRSA has concerns similar to those posed with the combined financial reporting form pertinent to the quarterly reporting requirements based on the calendar year versus the actual quarterly cycle established by the award issuance date which may not coincide with calendar quarters. Mandating reporting on such a basis will be problematic both for the grantee and the awarding agency. HRSA sees no meaningful benefit to be gained from this requirement.	HHS HRSA	C. Bish	At this point there is no policy for timing and usage of these report formats in association with the clearance for voluntary electronic pilots. Reporting based on calendar quarters is proposed for the SF-FFR and SF-PPR forms/formats. Separately comments will be solicited before policy is established, but not for this pilot. For pilot collections agencies will specify their reporting frequency and due dates.
8	Of particular concern is the proposal for form PPR-E requiring reporting of expenditures on the basis of activities. HRSA believes this would require very careful scrutiny by OMB to determine whether the benefit of such reporting warrants the added cost to the grantee for identifying and aggregating financial information in that manner unless there is already a pre-existing requirement for the grantee to do so.	HHS HRSA	C. Bish	An agency would only use SF-PPR-E when they already have OMB-clearance to collect cost by activity. Forms and formats A through F are optional collections.
9	HRSA believes the forms, if approved, should be optional only and directed towards use by programs which do not have any satisfactory reporting process/requirements in place to capture the range of information covered by the various reporting under the PPR format.	HHS HRSA	C. Bish	We agree that most of these collection forms/formats are optional. In the proposed policy, if adopted, the only required form is the cover page. If adopted, the other forms and formats are intended to be utilized with existing and future OMB clearances. That can include agency-specific and programspecific question and data but only in formats A through F.
10	 SPECIFIC: If the forms ultimately are approved for agency use and/or become a requirement the following comments and suggestions are provided: Instructions should be separated from the form. Otherwise, the form is confusing and appears very onerous. When the form is put into computerized format, it presumably will be put into a web entry system. If this is the case, there could be a link from key items in the form back to the instructions and to key definitions. 	HHS HRSA	C. Bish	We agree. Agency-specific and program-specific instructions should be available and should be made electronic.

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11	 It may be appropriate to clarify or define "research" as this has been a source of contention in the past as to whether requirements were applicable to a group of awards or not. 	HHS HRSA	C. Bish	Currently there is no OMB policy regarding research performance reporting. There is a separate draft set of questions (that could fit into these formats) for research reporting. Since there is no specific definition of research, these forms could be used by an agency as an option
12	 The space allowed for responses appears to be inadequate throughout most of the document, unless the computerized version provides space for responses as needed or provides opportunities for continuation pages for the items that require narrative. 	HHS HRSA	C. Bish	These are intended to be used electronically.
13	 PPR-E requires the reporting of expenditures by activity. If this form is to be useful, it must be matched to an application that also requires applicants to allocate their proposed budgets by activity, a form that is currently not in use by HRSA, nor other agencies to our knowledge. Is OMB going to require activity-based budgeting? If so, then we presume there will be revisions to the required application forms to capture and report back on activity costs. 	HHS HRSA	C. Bish	Same as answer #8. Not required. If agency has OMB-cleared need to collect activity based budget AND collects the same information at time of application, then electronic mechanisms can pre-populate that information as a starting point.
14	 There is no form that allows a comparison of projected/budgeted expenditures to actual expenditures or requires grantees to project their expenditures for the next 6-months, except for form E. 	HHS HRSA	C. Bish	Correct. Form E allows this projection. Form D could also be used for some levels of projection if additional columns are needed.
15	 Some of the items on Form PPR-F seem more relevant than others. Will agencies and or their programs be allowed to determine and tell their grantees which items they can disregard if the information is not relevant? 	HHS HRSA	C. Bish	Agencies may provide additional instructions instead of or in addition to the instructions written.
16	 Form C and D might be combined as both are looking at results. 	HHS HRSA	C. Bish	Both are not intended to be used at the same time unless they fit current collection formats.
17	 Grantees are repeatedly asked to enter certain data (e.g., Federal Agency Name, DUNS number, EIN). These data should only be entered once on the first form filled out and should automatically populate subsequent forms. 	HHS HRSA	C. Bish	These are intended to be used electronically with pre-population capabilities.
18	 If supplemental data are requested, can programs add a check box to confirm that grantees have submitted the data? 	HHS HRSA	C. Bish	We have added a supplemental page to the cover page to allow types of questions such as the check box asking a question.

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19	Will additional supplemental information requirements require clearance through the OMB paperwork clearance office? If so, will each agency program office be responsible for seeking such clearance?	HHS HRSA	C. Bish	All agency-specific or program-specific questions will still need to seek OMB clearance and provide burden hours. The intent, however, is that when the SF-PPR is adopted along with revised policy, those agency-specific clearances would be expedited if using the standard forms and formats.		
20	 Different agency programs are administered by different agency bureaus and or offices. When grantees fill out the forms, could there be a customized drop down menu that allows grantees to select the appropriate program and then the software would populate certain fields with appropriate numbers relevant to those programs? Would such individual customization require separate OMB clearance? 	HHS HRSA	C. Bish	Yes, drop down customization can be provided as part of electronic implementation. Yes, clearance would be required (see answer #19)		
21	 Can agencies require a brief abstract at the beginning of the progress report that provides a summary of the individual grant and which could, if necessary, be updated in the progress report? Would this require OMB clearance first? If so, would suggest it be built into the forms upfront when these forms go through clearance process. 	HHS HRSA	C. Bish	The abstract is on the cover page as a "narrative", and can be attached. This would not require additional OMB clearance unless the specifications for the narrative became too extensive, restrictive or burdensome.		
22	Would these forms be used with all grants, including earmarks?	HHS HRSA	C. Bish	The intent is to require collection for all grants except those in special exempt categories that might need to be protected by the privacy act or national security interests. The policy is not part of this current clearance.		
23	 Not certain on what basis the arbitrary threshold of \$100,000 (small purchase threshold?) was chosen to require or exclude grantees from reporting. Shouldn't all grantees within a program be required to use the form if the agency/program determines that the PPR is useful or should be used as a substitute for an existing reporting form? 	HHS HRSA	C. Bish	The policy is not part of this clearance, however, the intent is that small dollar amount grants would not be required unilaterally to report, but that an agency could still have the option to impose such a requirement.		
24	What would be the standard operating procedure for reporting for grants that have an award of less than \$100,000, an agency's current progress report for these grantees? Would there be a disadvantage to having grantees within a single program reporting back to the agency with differing levels of detail based on whether their awards exceeded the threshold or not? We believe this might happen and could be problematic for agencies. Other Comments/Concerns	HHS HRSA	C. Bish C. Bish	The intent in this regard is for the awarding agency to make the determination of what is required to be submitted and what is optional. Not clear what network information is		
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	 Page 3 and 4 – They have Recipient Organization (Which would be the lead organization/fiduciary), but there isn't any spot for network information in this section. 			required for reporting by a grantee or grant project. Federal identifiers are provided and might be possibly used for this purpose.
26	 Page 8, Program Indicators—this looks like it is providing the same information as page 5, Performance Measures. As written it is difficult to determine the distinction between the two. 	HHS HRSA	C. Bish	SF-PPR-A, SF-PPR-B, and SF-PPR-C are not intended to all be used at the same time. They can be considered subsets of one another with A being middle, B being the most simple and C being the most complex. They would only be used if an agency had a need to collect different types of information in varying degrees of complexity.
27	Page 13, Table of Activity Results—this appears as though it is requesting the same information as pages 5 & 8.	HHS HRSA	C. Bish	SF-PPR-D is provided so that information can be collected in a tabular fashion where there may be a relationship between values in the same row and column. It is also provided for collections where a large amount of comparative data is needed.
28	• Page 15, Activity Based Expenditures—Our grantees do not cost out what an activity costs, but rather how much of each line item based on the NGA they are planning to and have spent. How will we determine if a grantee has moved money from one line item to another? Also, since some of our newer grantees have moved money from one line item to another in the amount of 25% of the total grant award (or in excess of that amount without notifying us beforehand) and not realizing that Grants Management needs to be made aware of this, how will we as project officers be able to catch this and clear this through Grants Management? This may be a circumstance unique to HHS' policies, although other agencies have comparable OMB based prior-approval requirements for significant rebudgeting. While it may be providing another cross-check for grantee compliance, it does pose an additional administrative burden in doing so.	HHS HRSA	C. Bish	The intent of these instruments is to be implemented electronically. If filed and maintained electronically and reporting data requested is consistent over reporting periods, then database reports or data validation business rules can be installed to note where monies over different reporting periods have been moved or exceed certain noted business thresholds.
29	 Page 18, Program/Project Management SF-PPR-F, there is concern that agencies would not get accurate information from our grantees on 	HHS HRSA	C. Bish	Use of the SF-PPR-F is optional.

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	this form and that the questions asked are very broad and general. There would be a predisposition for grantees to respond only in a favorable manner.			SF-PPR-F would only be used if an agency wished to include grantee input into their P.A.R.T. response. The Yes/No answers were developed so that the information could be aggregated. The explanation was included so that if there was noncompliance or problem performance, it could be noted, and could serve as a checklist during site reviews. In general, we find grantees to be truthful. In fact, this should be perceived as an opportunity to solicit assistance from the awarding office if, in fact, there are any problems.
30	In response to the Federal Register document #07-1676, Proposed Information Collection Activity entitled, "Performance Progress Reports", the Substance Abuse and Mental Health Services Administration (SAMHSA) would like to make the following comments: • The Federal Register notice indicates that these forms will apply to Administration for Children and Families (ACF) and ACF partner grantees only. However, previous communication within HHS on this matter suggested that the forms would be implemented across all HHS OpDivs and possibly across all Federal agencies. This issue should be clarified.	HHS SAMHSA	S. Griffith	These formats are proposed for government-wide use. At this time, they are not required. The current clearance is for voluntary participation in pilots, electronic or other. If used, the only required form is the cover page. All other forms/formats (A through F) are optional. SS-PPR-A through E are formats that are intended to accommodate agency-specific or program-specific questions and information collection needs.
31	Based on previous communication within HHS regarding the proposed forms in the summer of 2006, SAMHSA understands that this data collection effort will be applied across OpDivs where aggregate data collection is already taking place and that the forms would not be required for programs which are collecting client level-data. SAMHSA's ongoing data collections are an integral part of the performance management of its grants. Implementing these forms for grants where SAMHSA is collecting much finer level of detail (i.e., client-level data) would jeopardize SAMHSA's ability to adequately monitor grantee performance. This issue should be clarified in the guidance that accompanies the forms. If there is an expectation that the forms would be applied to all programs regardless of ongoing, detailed data	HHS SAMHSA	S. Griffith	We agree that individual case-data, or client-data, should not be considered to be performance/progress reporting. However, when client-level or case-level data is reported in aggregate or as summary data, it should be done using whatever PPR format is most appropriate. Thank you for noting that this needs to be included in any policy guidance.

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	collections, SAMHSA would like to meet with ACF to discuss this.			
32	It is unclear whether these new forms will be implemented as data collection instruments and renewed through OMB, or whether all ongoing data collections be expected to submit a revised OMB package and halt data collection pending approval of new forms. SAMHSA recommends the former approach, as the latter would cause substantial problems with ongoing data collection.	HHS SAMHSA	S. Griffith	This clearance is for initial voluntary electronic pilots only. If the proposed forms and accompanying policy is adopted for government-wide usage and standardization, the intent is to phase out other cleared collections over time and to standardize new OMB-cleared performance and progress reporting instruments and programmatic surveys by having agencies use the SF-PPR formats.
33	It is SAMHSA's understanding that these forms will not be used to aggregate data on a Department-wide or Government-wide level. If this intent has changed, SAMHSA recommends that further discussions, involving all OpDivs, be conducted to determine appropriate methods for aggregating data from widely disparate programs.	HHS SAMHSA	S. Griffith	We disagree, that in the future there may be value in collecting some aggregated common data across agencies and programs.
34	 SAMHSA has concerns regarding the SF-PPR-F Program/Project Management. The questions on this form resemble the questions in the OMB Program Assessment Rating Tool (PART). These questions are extensive and would create a significant burden for grantees. Further, since the form requires explanation of answers only "if necessary," it is likely that grantees will simply answer these questions "Yes" and leave the explanation box blank. OMB issues extensive, detailed guidance for its PARTs; similar detailed guidance would be required for thse questions in order to elicit meaningful answers. Finally, it is an unreasonable estimate that this form will take grantees 0.5 hours to complete. Based on SAMHSA's experience with the PART we believe these questions would take a grantee several hours at a minimum. 	HHS SAMHSA	S. Griffith	Use of the SF-PPR-F is optional. SF-PPR-F would only be used if an agency wished to include grantee input into their P.A.R.T. response. The Yes/No answers were developed so that the information could be aggregated. The explanation was included so that if there was noncompliance or problem performance, it could be noted, and could serve as a checklist during site reviews. The half hour is intended to only be the time to fill the SF-PPR-F. The data collection effort is not included in this estimate and should be part of normal grant operations.
35	SAMHSA appreciates the opportunity to comment on the proposed data collection activity. If there are questions about these comments, please contact Ms. Suzanne Fialkoff in SAMHSA's Office of Policy, Planning and Budget.	HHS SAMHSA	S. Griffith	No response needed.