

Annual Reporting Form—All Questions

National Institute on Disability and Rehabilitation Research
ANNUAL PERFORMANCE REPORT

Paperwork Burden Statement

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless such collection displays a valid OMB control number. The valid OMB control number for this information collection is 1820-0675. The time required to complete this information collection is estimated to average 52 hours per response in a grantee's first year of award, including the time to review instructions, search existing data resources, gather the data needed, and complete and review the information collection. The web-based system is designed so that, whenever possible, information entered by grantees will be carried forward from one year to the next, with only verification and any necessary updating of that information required. Therefore, in subsequent years, grantees will be asked to update that information, which we anticipate will require approximately 22 hours for NIDRR's major programs (i.e., Rehabilitation Research and Training Centers, Rehabilitation Engineering Research Centers, Model Systems, Disability Rehabilitation Research Projects) and 10 hours for the other program mechanisms. **If you have any comments concerning the accuracy of the time estimate(s) or suggestions for improving this form, please write to:** U.S. Department of Education, Washington, D.C. 20202-4537. **If you have comments or concerns regarding the status of your individual submission of this form, write directly to:** National Institute on Disability and Rehabilitation Research, U.S. Department of Education, 400 Maryland Avenue, S.W., Potomac Center Plaza, Room 5137, Washington, D.C. 20202-2700.

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Contact and Identifying Information

General Information

Purpose: Grantee identification

Frequency of data entry: Once with annual updates as necessary

Please complete the information on this screen so that we may verify your record in the future.

1. PR Award # (preloaded)	
2. Reporting Period (preloaded)	
3. DUNS #	
4. Employee Identification Number (EIN)	
5. NCES ID #	
6. CFDA #	
7. Grant Title	
8. Program Mechanism (preloaded)	
9. Host Institution/Grantee Name	
10. Grantee Street Address (limit: 500 characters)	
11. City	
12. State	
13. Zip	
14. Phone	
15. Fax	
16. URL	
17. E-mail	
18. TTY	
19. Toll-Free Number	

Please fill out the following information about the Principal Investigator.

Last name

First name

Title

Phone

E-mail

Please fill out the following information about an Administrative Contact. (This should be different from above.)

Last name

First name

Title

Phone

E-mail

Please fill out the following information about the Authorizing Representative/Certifying Official (the person who signed the Application for Federal Assistance ED 524 form with original grant application).

Last name

First name

Title

Phone

E-mail

Street Address (if different from original ED 524) (Limit: 500 characters)

City

State

Zip

Award Abstract

The abstract you provided in last year's APR (or, if you are a new grantee, in your original application) has been preloaded below. Please review the existing abstract and answer the following questions.

1. Abstract

[Box] (Limit: 5,000 characters)

2. Have substantial changes been made to the scope of work or nature of the activities being conducted under this award during the current reporting period?

Yes

No

3. If "yes," have these changes been discussed with and approved by your project officer?

Yes

No

4. If "yes," please upload your revised abstract and use it to replace the one in the above box. **(NOTE: The revised abstract will be your new abstract going forward.)**

5. Have you submitted the revised abstract to the National Rehabilitation Information Center at <http://www.NARIC.com>?

Yes

No

Impairment Group

6. Please select the primary impairment group or groups that is/are the focus of this award. (Check all that apply).

- a. Sensory disability
- b. Psychiatric disability
- c. Developmental disability
- d. Physical disability
- e. Intellectual disability

Budget Information

Purpose: Department of Education regulation

Frequency of data entry: Once with annual edits as necessary

Budget Summary

In the budget summary table below, enter the information that you provided in your original grant application.

U.S. DEPARTMENT OF EDUCATION FUNDS						
Budget Categories	Project Year 1 (a)	Project Year 2 (b)	Project Year 3 (c)	Project Year 4 (d)	Project Year 5 (e)	Total (f)
1. Personnel						
2. Fringe Benefits						
3. Travel						
4. Equipment						
5. Supplies						
6. Contractual						
7. Construction						
8. Other						
9. Total Direct Costs (lines 1–8)						
10. Indirect Costs						
11. Training Stipends						
12. Total Costs (lines 9–11)						

(System will automatically generate totals in shaded areas.)

Funding

Please complete the following Budget Information Section for the **current budget period** with respect to funds that directly support this NIDRR award or funds you receive as a result of this NIDRR award, including any carryover funds from the previous budget period. Enter all amounts rounded to the nearest dollar.

Note: **Budget period** is not synonymous with **reporting period**. Budget period is defined as 365 days from the start date of your grant. For multiyear awards, consecutive budget periods proceed immediately from the end of the previous budget period and are 365 days in duration. The inclusive dates of the first budget period can be found in Block 6 of the Grant Award Notification (GAN). **Reporting period** is variable. The first reporting period begins on the start date of your award until May 31 of the following year. Subsequent reporting periods begin June 1 (immediately following May 31) until the next May 31. (This will also be found in Block 6 of the GAN.)

1. NIDRR funds expended

NIDRR Funds Expended	
a. Actual amount of NIDRR grant expenditures during the <i>previous</i> budget period. (This would be 0 if this is your first year.)	
b. Estimated total amount of NIDRR grant expenditures during the <i>current</i> budget period	
c. Grantee cost-share amount for <i>current</i> budget period	

2. NIDRR funds received

NIDRR Funds Received	
a. The total amount (exclusive of supplements) of funds that you received from NIDRR for this budget period for this award	
b. The total amount of funds carried over from the <i>previous</i> budget period	
c. The total amount of supplemental NIDRR funds added to the award in the <i>current</i> budget period	
d. The anticipated amount of funds carried over to <i>next</i> budget period.	

3. Rationale for carryover from previous budget period (**NOTE: System will display this item only if 2.b > 0.**)

If you entered any amount of carryover funds from the previous budget period to the current budget period, briefly summarize the reason for this carryover. (Limit: 20,000 characters)

[Box]

4. Rationale for carryover to next budget period (**NOTE: System will display this item only if 2.d > 0.**)

If you entered any amount of anticipated funds to be carried over from the current budget period to the next budget period, briefly summarize the reason for the anticipated carryover. (Limit: 20,000 characters)

[Box]

5. Additional funds

Additional Funds	
a. The total amount of additional (i.e., non-NIDRR) funds that you received in direct support of this award during this budget period. (NOTE: All grantees except SBIRs will report in-kind funding later in this section.)	

6. Financial and in-kind support received from host institution in current budget period

Support from Host Institution	
a. Total amount of financial contributions (exclusive of in-kind) received from host institution in support of this award in the <i>current</i> budget period	
b. Estimated value of in-kind contributions from host institution support in <i>current</i> budget period, excluding indirect costs	

Summary Table—Funding Overview

Funding overview (exclusive of in-kind funding) for award in the current budget period.

Funding Category	Amount
a. Total funds expended	<i>System-generated:</i> $1.b + 1.c$
b. Total NIDRR funds received including carryover	<i>System-generated:</i> $2.a + 2.b + 2.c$
c. Total funds available or received from all sources	<i>System-generated:</i> $(2.a + 2.b + 2.c) + 5.a + 6.a^1$

Indirect Costs

NOTE: This section must be completed by your Business Office.

A1. Are you claiming any indirect costs in association with this award?

Yes

No

NOTE: System will display next item only if A1 = "yes."

B1. Are there any changes to the Indirect Cost Rate associated with this award from your original application (line 10 on Form ED524B)?

Yes

No

NOTE: System will display next item only if B1 = "yes."

NOTE: If you are claiming a new Indirect Cost Rate a revised budget information form (ED524B) must be submitted to NIDRR.

C. Please enter the following for the new Indirect Cost Rate:

1. Period covered by the Indirect Cost Rate Agreement

From (enter as "mm/dd/yyyy")

To (enter as "mm/dd/yyyy")

2. Approving Federal agency

a. ED

b. Other

Specify (if other): _____

¹ For SBIRs, this row will be based on entries in 2.a–c and 5.a, since SBIRs do not complete item 7.

3. Are you using a restricted indirect cost rate?

Yes

No

(NOTE: System will display the following item only if C.3 = "yes.")

4. For restricted rate programs, please check all that apply:

a. Rate is included in your approved Indirect Cost Rate Agreement

b. Rate complies with 34CFR 76.564(c)(2)

5. Did your host institution provide a discounted cost rate for this grant?

Yes

No

Research Fellows Program—Current Budget Expenditures

Please complete the following Budget Information Section for the **current budget period**. Enter all amounts rounded to the nearest dollar.

Note: **Budget period** is not synonymous with **reporting period**. Budget period is defined as 365 days from the start date of your grant. For multiyear awards, consecutive budget periods proceed immediately from the end of the previous budget period and are 365 days in duration. The inclusive dates of the first budget period can be found in Block 6 of the Grant Award Notification (GAN). **Reporting period** is variable. The first reporting period begins on the start date of your award until May 31st of the following year. Subsequent reporting periods begin June 1 (immediately following May 31) and end May 31. (This will also be found in Block 6 of the GAN.)

1. Estimated total amount of NIDRR grant expenditures during the **current** budget period.
[Box]

Research Fellows Program—Entire Budget Expenditures (Final Report Only)

1. Actual budget expenditures—Entire project period (performance period)
 - a. Federal grant funds [Box]
 - b. Non-federal funds [Box]
 - c. Totally (system generated) [Box]

Final Report (all grantees except RFP)—Budget Expenditures

Note: this section must be completed by your Business Office.

Report your actual budget expenditures for the entire previous budget period, the entire final budget period, and the entire project period (performance period). Your project period (performance period) start and end dates are shown on the first page of this report under "Award Information." They are also found in Block 6 of the GAN.

Enter all amounts rounded to the nearest dollar. Include any carryover amounts from previous budget periods.

Please separate expenditures into federal grant funds and non-federal funds (match/cost share).

1. Actual Budget Expenditures—Entire previous budget period
 - a. Federal grant funds [Box]
 - b. Non-federal funds (match/cost share) [Box]
 - c. Total (system generated) [Box]
2. Actual Budget Expenditures—Entire final budget period
 - a. Federal grant funds [Box]
 - b. Non-federal funds (match/cost share) [Box]
 - c. Total (system generated) [Box]
3. Actual Budget Expenditures—Entire project period (performance period)
 - a. Federal grant funds [Box]
 - b. Non-federal funds (match/cost share) [Box]
 - c. Total (system generated) [Box]

Final Report (all grantees except RFP)—Indirect Cost Information

1. If you are claiming indirect costs under this grant and have an Indirect Cost Rate Agreement approved by the Federal government, please indicate the type of rate applied.
 - a. Provisional
 - b. Final
 - c. Other
 - d. N/A—do not meet criteria

Specify (if other): [Box]

Human Resources

Paid Staff

Purpose: NIDRR—Capacity building metrics

Frequency of data entry: Once with annual edits as necessary

Please complete this section for all paid staff who work on this award and for all formal financial subcontracts. Information on doctoral students and any individuals who are contributing to this award as part of training activities is covered in the “Capacity Building” section (if applicable to your program mechanism) and does not need to be entered here.

Please review the records that you have previously entered and add, edit, or delete records as necessary in order to provide an annual update. The “Date Completed” column displays the date of the last save for each record. If a record has been carried forward from a previous APR, the text “needs review” will appear in this column. Click “edit” to review and update these records. After you “save,” the system will update the date completed.

NOTE: If this is your first year, you will need to enter information for all paid staff who work on this award.

Last Name	First Name	Position on NIDRR Award	FTE in NIDRR Award	Add/Edit Record	Delete Record	Date Completed
				Edit	Delete	
				Add new		

For each paid staff member, please complete the following.

1. Last name
2. First name
3. Position on this NIDRR award (please indicate the most appropriate category):
 - a. investigator
 - b. training professional
 - c. dissemination/knowledge translation professional
 - d. other professional staff
 - e. technician, programmer, or other support staff
 - f. student (not working to satisfy degree requirements through employment on NIDRR-funded grant)
 - g. other
Specify (if other): _____

4. Time spent working on this NIDRR award in reporting period. Enter a whole number, a decimal, and then 2 numbers following the decimal; e.g., the FTE for a staff member working 10 hours per week is 0.25.

[Box]

5. Demographic/Diversity Information

NOTE: Submitting this demographic information is voluntary. There are no adverse consequences if you chose not to submit it. NIDRR uses this information in aggregate reports to gauge whether our programs and other opportunities in disability and rehabilitation research are fairly reaching and benefiting everyone regardless of demographic diversity and to ensure that those in underrepresented groups have the same knowledge of, and access to, programs, meetings, vacancies, and other research and educational opportunities as everyone else.

- (a) Is this person of Hispanic or Latino ethnicity?

Yes

No

- (b) Please indicate the racial designation for this person (check one or more)

- (1) American Indian or Alaska Native
 (2) Asian
 (3) Black or African American
 (4) Native Hawaiian or Other Pacific Islander
 (5) White

- (c) Does this person have a declared disability?

Yes

No

(NOTE: System will allow grantee to add this information or review existing records.)

Summary Tables—Paid Staff Diversity

Diversity Category	Number of Staff
a. Number of staff of Hispanic or Latino ethnicity	<i>System-generated: based on number of records with 5.a = “yes”</i>
b. Number of staff from underrepresented populations*	<i>System-generated: based on number of records with 5.b = other than “White”</i>
c. Number of staff with a disability	<i>System-generated: based on number of records with 5.c = “yes”</i>

* Includes all categories except White.

Summary of Data Submitted	Number of Staff
a. Total number of staff	<i>System-generated: based on number of records entered</i>
b. Submission of data for ethnicity	
Data submitted	<i>System-generated: based on number of records with responses for 5.a</i>
Data not submitted	<i>System-generated: based on number of records with missing data for 5.a</i>
c. Submission of data for race	
Data submitted	<i>System-generated: based on number of records with responses for 5.b</i>
Data not submitted	<i>System-generated: based on number of records with missing data for 5.b</i>
d. Submission of data for disability status	
Data submitted	<i>System-generated: based on number of records with responses for 5.c</i>
Data not submitted	<i>System-generated: based on number of records with missing data for 5.c</i>

Formal Financial Subcontracts

- Does the award have any financial collaborations or partnerships with other organizations or universities that involve subcontracts?

Yes

No

(NOTE: System will display next section only if 1.a = “yes.”)

Please review the records that you have previously entered and add, edit, or delete records as necessary in order to provide an annual update. The “Date Completed” column displays the date of the last save for each record. If a record has been carried forward from a previous APR, the text “needs review” will appear in this column. Click “edit” to review and update these records. After you “save,” the system will update the date completed.

NOTE: If this is your first year, you will need to complete this table and, in subsequent years, supply any annual updates.

Name of Subcontractor	Task or Role on This Award	Add/Edit Record	Delete Record	Date Completed
		<u>Edit</u>	<u>Delete</u>	
		<u>Add new</u>		

For each of the formal financial subcontracts in direct support of the activities of this award, please complete the following.

NOTE: Progress on activities of the subcontract will be reported in the corresponding section(s) under “Projects and Activities.”

- Name of subcontractor (Limit: 500 characters)

[Box]

- Task or role on this award (Limit: 1,000 characters)

[Box]

Partnerships and Collaborations

1. *Does the award have any partnerships who have involvement in the work on this award? (Collaborations are defined as cooperative activities with one or more institutions of higher education, or one or more providers of rehabilitation or other appropriate services, and other local, state, regional, and national programs and organizations developing or delivering rehabilitation services and technology. Collaborations may also involve groups of researchers and experts working together across institutions or departments with institutions through assembling multisite collaborations or multidisciplinary teams.)*

Yes

No

(NOTE: System will display next section only if 1 = "yes.")

Please review the records that you have previously entered and add, edit, or delete records as necessary in order to provide an annual update. The "Date Completed" column displays the date of the last save for each record. If a record has been carried forward from a previous APR, the text "needs review" will appear in this column. Click "edit" to review and update these records. After you "save," the system will update the date completed.

NOTE: If this is your first year, you will need to complete this table and, in subsequent years, supply any annual updates.

Name of Individual or Organization	Role in This Award	Add/Edit Record	Delete Record	Date Completed
		Edit	Delete	
		Add new		

For each partnership, please complete the following:

- Name of individual or organization (Limit: 500 characters)
[Box]
- Please describe their role in the activities of this award (Limit: 1,000 characters)
[Box]

Consumer Involvement

Purpose: NIDRR internal monitoring of research relevance

Frequency of data entry: Once with annual updates

Please answer the following question related to consumer involvement.

Describe the ways in which you have involved persons with disabilities, family members and/or caregivers in decision-making concerning the planning, management, implementation, and evaluation of award activities and accomplishments.

(Limit: 5,000 characters)

[Box]

Planning for Outcomes and Significant Outputs

Purpose: Evaluation and accountability

Frequency of data entry: Once with one update

Outcome-Oriented Goal

Instructions: all grantees must identify a limited number (1–2/2–4) of reasonably ambitious outcome-oriented goals that they intend to achieve by the end of the funding cycle. Each goal must specify what you intend to accomplish and should be written in terms of any of the following: advances in knowledge, increased capacity for research, training or knowledge translation, and/or changes/improvements in policy, practice, or systems capacity.

In this section, please provide a brief 2–3 sentence description of the (2–4) “most important” outcome-oriented goals you plan to achieve by the end of the funding cycle. Grantees will be allowed to update and/or revise their goals up to and through the second year of their funding cycle, after which time the fields in this section will be locked.

Goal Number	Short Title	Add/Edit Record	Delete Record	Date Completed
		Edit	Delete	
		Add new		

1. Provide a short title for this outcome-oriented goal. (Limit: 75 characters) This title will appear later in other questions that refer to this goal.

2. Provide a brief 2–3 sentence description of this outcome-oriented goal. (Limit: 1,000 characters)

[Box]

3. Select the type of change or improvement you anticipate achievement of this goal will result in.

(Select only one)

- Advances in knowledge—changes or improvements in awareness, knowledge, understanding, skills and/or attitudes
- Increased capacity to conduct and/or use high-quality research, or progression of trainees in academic stature
- Changes or improvements in policy, practice, behavior, or system capacity (e.g., access, practice guidelines, State or Federal regulations)

4. Select the 1–2 primary target population(s) that you anticipate will benefit most directly from the anticipated accomplishment, or that you must reach in order to achieve the goal.

- a. Researchers
- b. Practitioners/clinicians
- c. Service providers
- d. Educators
- e. Policy experts
- f. Federal and non-federal partners
- g. Industry representatives and/or product developers
- h. Employers
- i. Media
- j. Consumer advocates
- k. Individuals with disabilities and/or family members
- l. Other (Select “other” for this item only if none of the listed categories apply)

Specify (if other) **[Box]**

5. Briefly describe how the goal is related to the priority area. A complete response to this item should include a brief description of the problem you are trying to solve, the gap you expect to fill, and how the target population will benefit from accomplishment of this goal.

a. Problem to be solved (Limit: 1,000 characters)

[Box]

b. Gap expected to be filled (Limit: 1,000 characters)

[Box]

c. How the target population will benefit from accomplishment of this goal (Limit: 1,000 characters)

[Box]

Projects and Activities

Research Projects


For each of your research projects, answer the following questions. Where appropriate, you may cut and paste from your original grant proposal.

Please review the records that you have previously entered and add, edit, or delete records as necessary in order to provide an annual update. The “Date Completed” column displays the date of the last save for each record. If a record has been carried forward from a previous APR, the text “needs review” will appear in the column. Click “edit” to review and update these records. After you “save,” the system will update the data completed.

NOTE: If this is your first year, you will need to enter information for all of your projects.

For each project that has received Institutional Review Board approval, upload all relevant approval documents, including your own and any for subcontractors or partner sites participating in the project. (All relevant approval documents should be combined into a single file for upload.) **Do not submit your report until you have uploaded all relevant IRB approval documents.**

The attachment icon in the table below indicates projects for which you have uploaded an IRB approval document. **A red “X” indicates projects for which you still need to upload an IRB approval document.**

Project ID	Short Project Title	IRB Status		Add/Edit Record	Delete Record	Date Completed
R1	Sample project			Edit	Delete	
				Add new		

NOTE: System will assign a sequential number to each project, and the sequential number will appear in the summary table.

1. Provide a short title for this research project (Limit: 75 characters)
[Box]
2. Full title of research project (Limit: 500 characters)
[Box]
3. Name of the Principal Investigator responsible for this project
[Box]

4. If applicable, name of the Co-Principal Investigator responsible for this project
[Box]
5. Project start date (enter as “mm/dd/yyyy”)
[Box]
6. Projected (or actual) project end date (enter as “mm/dd/yyyy”)
[Box]
7. a. What is the current status of your research project?
- (1) on time
 - (2) delayed
 - (3) completed
 - (4) not scheduled to start yet
 - (5) dropped
7. b. If “delayed,” by how many months?
[Box]
7. c. If “delayed,” what was the primary reason for the delay? (Limit: 4,000 characters)
[Box]
7. d. If “dropped,” what was the major reason for dropping it? (Limit: 4,000 characters)
7. e. If “dropped,” was this change discussed with your project officer?
- Yes
 - No
8. a. What is the Institutional Review Board status for this research project? (Select the best answer.)
- (1) approved
 - (2) pending
 - (3) submitted
 - (4) not yet submitted
 - (5) N/A (choose this option if IRB Approval was not required)
8. b. If “approved,” enter the IRB annual approval number
[Box]

8. c. If “approved” enter the date of approval (enter as “mm/dd/yyyy”)
[Box]
8. d. If “approved,” is this your most recent IRB approval for this project?
- Yes
 No
8. e. Are there other sites working on this project?
- Yes
 No
8. f. If “yes,” do these sites have IRB approval?
- Yes
 No
8. g. Please upload a copy of your most recent IRB approval document. Your upload should include all relevant IRB approvals, including those for any subcontractors or partner sites participating in the project. (All relevant approval documents should be combined into a single file for upload). *Do not submit your report until you have uploaded all relevant IRB approvals.* Use the “Browse” button below to select the file you want to upload from your computer. You may upload files of the following types: PDF, DOC (Microsoft Word), GIF, and JPG.
- [Box]** **Browse...**
9. Please select the National Science Foundation (NSF) response category that best applies to this project. For definitions of response categories and more information on the NSF survey, see http://www.nsf.gov/statistics/showsrvy.cfm?srvy_CatID=4&srvy_Seri=10
- a. engineering
 b. life sciences
 c. psychological sciences
 d. social sciences
10. a. Briefly describe the objectives of this project. (Limit: 4,000 characters)
[Box]
10. b. Have there been substantial changes to the objective(s) for this project during the current reporting period?
- Yes
 No

10. c. If “yes,” have these changes been discussed with your project officer?
- Yes
 - No
10. d. If “yes,” in one or two sentences, explain the reason for these changes. (Limit: 1,000 characters)

[Box]

11. a. Based on the objectives listed in Question 10, what **one** NIDRR Long-Range Plan Domain does this project **best** fit in? (Select only one)
- (1) health and function
 - (2) employment
 - (3) participation and community living
 - (4) technology
 - (5) demographics
 - (6) knowledge translation, including tech transfer
 - (7) cross-cutting (specify two or more domains that apply)

11. b. If “cross-cutting,” specify two or more domains that apply.

- (1) health and function
- (2) employment
- (3) participation and community living
- (4) technology
- (5) demographics
- (6) knowledge translation, including tech transfer

12. Below are the outcome-oriented goals you specified for your award. Select the **one** goal that this project helps to achieve. (Select one)

- Goal 1
- Goal 2
- Goal 3

(short title, as previously entered by grantee)

13. In one or two sentences, briefly describe the study population for this project. (Limit: 4,000 characters)

[Box]

14. What is your proposed sample size for this project?

[Box]

15. If the project is underway, what sample size have you achieved to date?

[Box]

N/A

16. a. Have there been any changes to the proposed sample size?

Yes

No

16. b. If there have been changes to the proposed sample size, have these changes been discussed with your project officer?

Yes

No

16. c. If there have been changes to proposed sample size, please describe the changes. (Limit: 4,000 characters)

[Box]

17. What method(s) or design(s) does the project use to obtain its information? (Check all that apply.)

a. Survey

b. Observation

c. Case studies

d. Focus groups

e. Qualitative Interview

f. Secondary analysis

g. Meta-analysis

h. Intervention study—experimental or randomized control design

i. Intervention study—Quasi-experimental design

j. Intervention study—Single-subject design

k. Other (Select “other” for this item only if none of the listed categories apply.)

Specify (if other) **[Box]**

18. What time dimension is associated with this study?

a. cross-sectional

b. longitudinal

c. other

Specify (if other) (Limit: 1,000 characters) **[Box]**

19. a. Have there been any changes to your proposed plan and methods during the current reporting period?

Yes

No

19. b. If “yes,” have these changes been discussed with your project officer?
- Yes
- No
19. c. If “yes”: In two or three sentences, explain the reason for the changes: (Limit: 4,000 characters)
- [Box]**
20. Describe your overall progress in implementing this project during the reporting period. Focus on what activities have been conducted and, if applicable, describe any promising findings or “lessons learned” in the current reporting period. (Limit: 20,000 characters)
- [Box]**
21. a. Is the project meeting its original sampling goals?
- Yes
- No
- N/A – project has yet to start
21. b. If “no,” what is the contingency plan for how the project will proceed? (Limit: 20,000 characters)
- [Box]**
22. a. Do you have any significant problems or challenges to report, other than sample size?
- Yes
- No
22. b. Other than sample size, briefly describe any significant problems or challenges you encountered and summarize the actions you took to remedy them. (Limit: 20,000 characters)
- [Box]**
23. a. Did you report any problems or challenges in last year’s APR?
- Yes
- No
23. b. If “yes,” please update us on the status of problems or challenges that you reported. (Limit: 20,000 characters)
- [Box]**

System will automatically take respondent back to summary table at the beginning of this section, in order to add, edit, or delete projects.

Summary Table—Research Projects (system-generated)

List of project titles (sequential project number and project title):

R1: Sample project title 1

R2: Sample project title 2

Projects	R1	R2
Start date (Q5)	mm/dd/yyyy	mm/dd/yyyy
Actual /projected end date (Q6)	mm/dd/yyyy	mm/dd/yyyy
Project status (Q7.a)	On-time	Completed
IRB status (Q8.a)	Approved	Pending
IRB annual approval Number (Q8.b)		
IRB annual approval date (Q8.c)		
IRB approval uploaded (Q8.e)		
Long-range plan domain (Q11.a)	Employment	Health and function
Changes to sample size (Q16.a)	Yes	No
Meeting its original sampling goals (Q21.a)	No	Yes
Project method or design (Q17)	Survey Observation	Intervention Study: Experimental or Randomized Control Design
Study time-dimension (Q18)	Cross-sectional	Longitudinal
Changes to proposed plan or method (Q19.a)	Yes	No

Development Projects

Purpose: NIDRR project monitoring

Frequency of data collection: Once with annual progress updates


For each of your development projects, answer the following questions. Where appropriate, you may cut and paste information from your original grant proposal.

Please review the records that you have previously entered and add, edit, or delete records as necessary in order to provide an annual update. The “Date Completed” column displays the date of the last save for each record. If a record has been carried forward from a previous APR, the text “needs review” will appear in this column. Click “edit” to review and update these records. After you “save” the system will update the date completed.

NOTE: If this is your first year, you will need to enter information for all of your projects.

For each project that has received Institutional Review Board approval, upload all relevant approval documents, including your own and any for subcontractors or partner sites participating in the project. (All relevant approval documents should be combined into a single file for upload.) **Do not submit your report until you have uploaded all relevant IRB approval documents.**

The attachment icon in the table below indicates projects for which you have uploaded and IRB approval document. **A red “X” indicates projects for which you still need to upload an IRB approval document.**

Project ID	Project Title	IRB Status		Add/Edit Record	Delete Record	Date Completed
D1	Sample project			Edit	Delete	
				Add new		

NOTE: System will assign a sequential number to each project, and the sequential number will appear in the summary table.

1. Title of development project (Limit: 500 characters)
[Box]
2. Name of the Principal Investigator responsible for this project
[Box]
3. If applicable, name of the Co-Principal Investigator responsible for this project
[Box]
4. Project start date (enter as “mm/dd/yyyy”)
[Box]

5. Projected (or actual) project end date (enter as “mm/dd/yyyy”)
[Box]
6. a. What is the current status of your development project?
- (1) on time
 - (2) delayed
 - (3) completed
 - (4) not scheduled to start yet
 - (5) dropped
6. b. If “delayed,” by how many months?
[Box]
6. c. If “delayed,” what was the primary reason for the delay? (Limit: 4,000 characters)
[Box]
6. d. If “dropped,” what was the major reason for dropping it? (Limit: 4,000 characters)
[Box]
6. e. If “dropped,” was this change discussed with your project officer?
- Yes
 - No
7. a. What is the Institutional Review Board status for this development project? (Select the best answer.)
- (1) approved
 - (2) pending
 - (3) submitted
 - (4) not yet submitted
 - (5) N/A (choose this option if IRB Approval was not required)
7. b. If “approved,” enter the IRB annual approval number
[Box]
7. c. If “approved,” enter the date of approval (enter as “mm/dd/yyyy”)
[Box]

7. d. If “approved,” is this your most recent IRB approval for this project?
- Yes
- No
7. e. Are there other sites working on this project?
- Yes
- No
7. f. If “yes,” do these sites have IRB approval?
- Yes
- No
7. g. Please upload a copy of your most recent IRB approval document. Your upload should include all relevant IRB approvals, including those for any subcontractors or partner sites participating in the project. (All relevant approval documents should be combined into a single file for upload). *Do not submit your report until you have uploaded all relevant IRB approvals.* Use the “Browse” button below to select the file you want to upload from your computer. You may upload files of the following types: PDF, DOC (Microsoft Word), GIF, and JPG.
- [Box]**
8. a. Briefly describe the objectives of this project. (Limit: 4,000 characters)
- [Box]**
8. b. Have there been substantial changes to the objective(s) for this project during the current reporting period?
- Yes
- No
8. c. If “yes,” have these changes been discussed with your project officer?
- Yes
- No
8. d. If “yes,” in one or two sentences, explain the reason for these changes. (Limit: 1,000 characters)
- [Box]**

9. a. Based on the objectives listed in Question 8, what **one** NIDRR Long-Range Plan Domain does this project **best** fit in? (Select only one)
- (1) health and function
 - (2) employment
 - (3) participation and community living
 - (4) technology
 - (5) demographics
 - (6) knowledge translation, including tech transfer
 - (7) cross-cutting (specify two or more domains that apply)
9. b. If “cross-cutting,” specify two or more domains that apply.
- (1) health and function
 - (2) employment
 - (3) participation and community living
 - (4) technology
 - (5) demographics
 - (6) knowledge translation, including tech transfer
10. Below are the outcome-oriented goals you specified for your award. Select the **one** goal that this project helps to achieve. (Select only one)
- Goal 1
 - Goal 2
 - Goal 3
- (short title, as previously entered by grantee)
11. In one or two sentences, briefly describe the potential users of your product or device. (Limit: 4,000 characters)
- [Box]**
12. What stage of the development process are you in during this reporting period? NOTE: This question assumes that you have already recognized and defined the problem in your proposal. (Check all that apply)
- a. Information gathering on constraints, specifications, materials, etc.
 - b. Analysis of information to generate solutions
 - c. Evaluation of solutions and synthesis of best solution
 - d. Implementation of solution
 - e. Evaluation of effectiveness and efficiency of solution and redesign as needed
 - f. Commercialization activities
13. Overall, how many target users are going to provide feedback on your product or device?
- [Box]**

14. Have you reached the desired number of users you need to test your product or device?
- Yes
- No
- If “no,” indicate how many more users you need.

[Box]

15. a. Have there been any changes to your proposed plan and methods during the current reporting period?
- Yes
- No
15. b. If “yes,” have these changes been discussed with your project officer?
- Yes
- No
15. c. If “yes”: In two or three sentences, explain the reason for the changes: (Limit: 4,000 characters)

[Box]

16. Describe your overall progress in implementing this project during the reporting period. Focus on what activities have been conducted and, if applicable, describe any promising findings or “lessons learned” in the current reporting period. (Limit: 20,000 characters)

[Box]

17. a. Do you have any significant problems or challenges to report?
- Yes
- No
17. b. Briefly describe any significant problems or challenges you encountered and summarize the actions you took to remedy them. (Limit: 20,000 characters)

[Box]

18. a. Did you report any problems or challenges in last year’s APR?
- Yes
- No
18. b. If “yes,” please update us on the status of problems or challenges that you reported. (Limit: 20,000 characters)

[Box]

System will automatically take respondent back to summary table at the beginning of this section, in order to add, edit, or delete projects.

Summary Table—Development Projects (system-generated)

List of project titles (sequential project number and project title):

D1: Sample project title 1

D2: Sample project title 2

Projects	(Sequential Project Number) D1	(Sequential Project Number) D2
Start date (Q4)	mm/dd/yyyy	mm/dd/yyyy
Actual /projected end date (Q5)	mm/dd/yyyy	mm/dd/yyyy
Project status (Q6.a)	On-time	Completed
IRB status (Q7.a)	Approved	Pending
IRB annual approval Number (Q7.b)		
IRB annual approval date (Q7.c)		
IRB approval uploaded (Q7.e)		
Long-range plan domain (Q9.a)	Employment	Health and function
Stage of development project is in (Q12)	Information gathering	Evaluation of solutions and synthesis of best solution
Number of target users in current reporting period (Q13)	5	10
Desired number of users reached (Q14.a)	No	Yes
Changes to proposed plan or method (Q15.a)	Yes	No

Dissemination and Knowledge Translation Projects

Purpose: NIDRR project monitoring

Frequency of data collection: Once with annual progress updates

In this section, please answer the following questions about your dissemination and knowledge translation activities and how they support each of the award-level goal(s) you specified in the outcomes planning section. If you specified more than one award-level outcome goal, you will be required to answer the same three questions again.

Goal Number	Dissemination and Knowledge Translation Activities	Add/Edit Record	Date Completed
G1		Edit	

Goal 1 for this award: (system-generated)

1. Describe the dissemination and knowledge translation activities you are conducting, or plan to conduct, to support the achievement of the above goal. (Limit: 5,000 characters)

[Box]

2. For the current reporting period, describe the progress you have made in conducting the activities described in the first question. (Limit: 5,000 characters)

[Box]

3. a. Do you have any problems or challenges to report?

Yes

No

3. b. If you encountered problems or challenges in the current reporting period, what actions have you taken to address them? (Limit: 5,000 characters)

[Box]

(System will display other goals entered by the grantee, if applicable, and repeat the three questions above for each goal.)

Capacity-Building Activities—Fellows Overview

Capacity-Building Activities—Fellows

Purpose: NIDRR project monitoring

Frequency of data entry: Once with annual progress updates

Number of fellows in the current reporting period:

1. Number of fellows proposed for the current reporting period
[Box]
2. Number of fellows who have completed the fellowship program in the current reporting period
[Box]

Please review the records that you have previously entered and add, edit, or delete records as necessary in order to provide an annual update. The “Date Completed” column displays the date of the last save for each record. If a record has been carried forward from a previous APR, the text “needs review” will appear in this column. Click “edit” to review and update these records. After you “save” the system will update the date completed.

NOTE: If this is your first year, you will need to enter information for all of your fellows.

Name of Fellow	Add/Edit Record	Delete Record	Date Completed
Fellow 1	Edit	Delete	
	Add new		

For each current fellow, enter the following information:

1. Last name of fellow:
[Box]
2. First name of fellow:
[Box]

3. Fellows—Demographic/diversity information

The next series of questions asks for demographic information about the particular fellow. Submitting this demographic information is voluntary. There are no adverse consequences if you chose not to submit it. NIDRR uses this information in aggregate reports to gauge whether our programs and other opportunities in disability and rehabilitation research are fairly reaching and benefiting everyone regardless of demographic diversity and to ensure that those in underrepresented groups have the same knowledge of and access to programs, meetings, vacancies, and other research and educational opportunities as everyone else.

3. a. Is this person of Hispanic or Latino ethnicity?

- Yes
 No

3. b. Please indicate the racial designation for this person (Select one or more)

- (1) American Indian or Alaska Native
 (2) Asian
 (3) Black or African American
 (4) Native Hawaiian or Other Pacific Islander
 (5) White

3. c. Does this person have a declared disability?

- Yes
 No

4. Select the highest degree earned by the fellow. (Select only one)

- a. Master's
 b. Doctorate
 c. MD
 d. DO
 e. J.D.
 f. other

 g. joint degree (e.g., MD, Ph.D., etc.)

Specify (if joint degree): **[Box]**

5. Please tell us the discipline/subject area in which the highest degree was received:
(Limit: 1,000 characters)

[Box]

6. When did the fellow start the program? (enter as "mm/dd/yyyy")

[Box]

7. What is the fellow's anticipated end date (enter as "mm/dd/yyyy")

[Box]

8. Name of fellowship program:

ARRT

other

Specify (if other)

[Box]

9. Briefly describe the ARRT fellow's area of focus.

(NOTE: This item is for ARRT fellows only.) (Limit: 3,500 characters)

[Box]

10. Briefly describe the non-ARRT fellow's major role or contribution to grant/award in the current reporting period. (NOTE: This item is for all non-ARRT fellows only.) (Limit: 3,500 characters)

[Box]

NOTE: System will allow grantee to report as many fellows as necessary.

Capacity Building—Graduate Students Overview

Capacity Building—Graduate Students

1. Number of graduate students you have working on your award in the current reporting period who are receiving training and/or satisfying requirements in conjunction with an advanced degree. (NOTE: Does not include graduate students working on award for pay only).

Please review the records that you have previously entered and add, edit, or delete records as necessary in order to provide an annual update. The “Date Completed” column displays the date of the last save for each record. If a record has been carried forward from a previous APR, the text “needs review” will appear in this column. Click “edit” to review and update these records. After you “save” the system will update the date completed.

NOTE: If this is your first year, you will need to enter information for all of your graduate students.

Name of Graduate Student	Add/Edit Record	Delete Record	Date Completed
Graduate Student 1	Edit	Delete	
	Add new		

For each current graduate student enter the following information:

1. Last name of graduate student:
[Box]
2. First name of graduate student:
[Box]

3. Graduate students—Demographic/diversity information

The next series of questions asks for demographic information about the particular graduate student. Submitting this demographic information is voluntary. There are no adverse consequences if you chose not to submit it. NIDRR uses this information in aggregate reports to gauge whether our programs and other opportunities in disability and rehabilitation research are fairly reaching and benefiting everyone regardless of demographic diversity and to ensure that those in underrepresented groups have the same knowledge of and access to programs, meetings, vacancies, and other research and educational opportunities as everyone else.

3. a. Is this person of Hispanic or Latino ethnicity?

- Yes
 No

3. b. Please indicate the racial designation for this person (Select one or more)

- (1) American Indian or Alaska Native
 (2) Asian
 (3) Black or African American
 (4) Native Hawaiian or Other Pacific Islander
 (5) White

3. c. Does this person have a declared disability?

- Yes
 No

4. Select the highest degree earned by the graduate student.

- a. Bachelor's
 b. Master's
 c. Doctorate
 d. MD
 e. DO
 f. J.D.
 g. other

 h. joint degree (e.g., MD, Ph.D., etc.)

Specify (if joint degree): **[Box]**

5. Please tell us the discipline/subject area in which the highest degree was received:
(Limit: 1,000 characters)

[Box]

6. When did the graduate student start working on the award? (enter as “mm/dd/yyyy”)

[Box]
7. When will the graduate student stop working on the award? (enter as “mm/dd/yyyy”)

[Box]
8. In two to three sentences, briefly describe the graduate student’s major role of contribution to grant/award in the current reporting period. (Limit: 1,000 characters)

[Box]

NOTE: System will allow grantee to report as many graduate students as necessary.

Summary Table—Capacity-Building Activities (system-generated)

Demographic Diversity of Fellows

Diversity Category	Number of Fellows
Fellows of Hispanic or Latino ethnicity	<i>System-generated: based on number of records with 3.a = “yes”</i>
Fellows from underrepresented populations*	<i>System-generated: based on number of records with 3.b = “yes”</i>
Fellows with a disability	<i>System-generated: based on number of records with 3.c = “yes”</i>

* Includes all categories except White.

Demographic Diversity of Graduate Students

Diversity Category	Number of Graduate Students
Graduate students of Hispanic or Latino ethnicity	<i>System-generated: based on number of records with 3.a = “yes”</i>
Graduate students from underrepresented populations*	<i>System-generated: based on number of records with 3.b = “yes”</i>
Graduate students with a disability	<i>System-generated: based on number of records with 3.c = “yes”</i>

* Includes all categories except White.

Capacity-Building Activities—Performance of Fellows and Graduate Students

In this section we ask about the performance of your fellows and graduate students. List the publications based on NIDRR-funded research, published in the current reporting period, that were authored by fellows and/or graduate students who are currently part of your training program or have been in the past 3 years. The fellow or graduate student need not have been the first author, so long as he or she is listed **among** the authors of the publication.

Include only publications supported by NIDRR funding that are related to the objectives of the current award.

The last column indicates whether the journal title that you entered is contained in the ISI® database. NIDRR uses this database to determine which citations entered by grantees can be included in its performance measures. It is extremely important that journal titles be entered correctly (e.g., with no abbreviations or spelling errors) so that your citations, where appropriate, will match the ISI database and can be counted.

After entering a journal title or proceeding, check the last column of the summary table to see whether the title you entered matches an entry in the ISI database. If it does not, you may choose “look up” to view a list of entries in the database. If you have entered the title incorrectly, select the correct title and click on “OK” to change it.

Only journal articles and proceedings will have matches in the ISI database.

Add award-related publication produced by fellows

Add award-related publication produced by graduate students

Type	Name of Fellow/Grad Student	Full Citation	Add/Edit Record	Delete Record	Type of Publication	Timeframe When Work Conducted	ISI
			<u>Edit</u>	<u>Delete</u>			

Enter the following information on award-related publications produced by fellows in the current reporting period.

1. Name of fellow:

Last name: **[Box]**, First initial: **[Box]** Middle initial: **[Box]**

2. Provide a full citation for this publication.

Type of publication: (drop-down box: journal article or periodical, web journal, proceedings of meetings and symposia, book, book chapter, monograph, abstract, technical or research report, review)

NOTE: System will display APA-required fields based on publication type, which are as follows:

Journal article or periodical: For all authors—author's last name, author's first initial(s), year published, title of article, title of journal, volume, page numbers

Proceedings of meetings and symposia: For all authors—author's last name, author's first initial(s), year published, title of paper/presentation, title of conference/meeting/symposium, editors (first initial, last name), page numbers, location, publisher

Book: For all authors—author's last name, author's first initial(s), year published, title of book, location, publisher

Book chapter: For all authors—author's last name, author's first initial(s), year published, title of chapter, editors (first initial, last name), title of book, page numbers, location, publisher

Monograph: For all authors—author's last name, author's first initial(s), year published, title of article, title of journal, volume, issue number, serial or whole number (enter as "Serial No. 219"), supplement or part number (if bound separately as a supplement to a journal)

Abstract: For all authors—author's last name, author's first initial(s), year published, title of abstract, title of journal, volume, page numbers

Technical or research report: For all authors—author's last name, author's first initial(s), year published, title of report, location, publisher

Review: For all authors—author's last name, author's first initial(s), year published, title of review, medium being reviewed (drop-down box: book, motion picture), work being reviewed, title of journal, volume, page numbers

- b. (If publication type = journal article or periodical, or proceedings) Is this a peer-reviewed publication?

Yes

No

3. Indicate whether the publication has been sent to NARIC for inclusion in REHABDATA. (To check the status of this publication in NARIC, click on <http://www.naric.com/research/rehab/default.cfm>.)

Yes

No

4. Was this publication produced as a direct result of receiving funding for this grant: i.e., grant number (PRELOADED)?

Yes

No

(System will allow grantee to add additional publications for this and other fellows.)

Enter the following information on award-related publications produced by graduate students in the current reporting period.

1. Name of graduate student

Last name: [Box], First initial: [Box] Middle initial: [Box]

2. Provide a full citation for each publication produced by this graduate student. To add a new citation, please select the category that best describes the publication from the drop-down box below, then click the "Next" button.

Type of publication: (drop-down box: journal article or periodical, web journal, proceedings of meetings and symposia, book or book chapter, monograph, abstract, technical or research report, review)

NOTE: System will display APA-required fields based on publication type, which are shown above under "fellows."

- b. (If publication type = journal article or periodical, or proceedings) Is this a peer-reviewed publication?

Yes

No

3. Indicate whether the publication has been sent to NARIC for inclusion in REHABDATA. (To check the status of this publication in NARIC, click on <http://www.naric.com/research/rehab/default.cfm>.)

Yes

No

(System will allow grantee to add additional publications for this and other graduate students.)

4. Was this publication produced as a direct result of receiving funding for this grant: i.e., grant number (PRELOADED)?

Yes

No

Capacity-Building Activities—Additional Information

1. Are there any other accomplishments or outputs from your capacity-building efforts that you would like to tell NIDRR about (e.g., poster presentations, successful other grant applications)? (Limit: 10,000 characters)

[Box]

Training Projects

Purpose: NIDRR project monitoring

Frequency of data collection: Once with annual progress updates

If you proposed specific training projects in your original proposal, please report on those here. If you did not, you may regroup your training activities into projects of like tasks.

Please review the records that you have previously entered and add, edit, or delete records as necessary in order to provide an annual update. The "Date Completed" column displays the date of the last save for each record. If a record has been carried forward from a previous APR, the text "needs review" will appear in this column. Click "edit" to review and update these records. After you "save," the system will update the date completed.

NOTE: If this is your first year, you will need to enter information for all of your projects.

Project ID	Project Title	Add/Edit Record	Delete Record	Date Completed
T1	Sample project	Edit	Delete	
		Add new		

NOTE: System will assign a sequential number to each project, and the sequential number will appear in the summary table.

1. Enter the project title (Limit: 1,000 characters)

[Box]

2. Name of person responsible for the project.

[Box]

3. Type of project (Select only one)

- a. workshop
- b. webcast
- c. presentation
- d. training course
- e. curricula development
- f. training manual development
- g. planning, conducting, or sponsoring a conference

- h. other (Select "other" for this item only if none of the listed categories apply.)

Specify, if other: (Limit: 1,000 characters)

[Box]

4. a. What is the status of the project? (Select only one)

- (1) on time
- (2) delayed
- (3) completed
- (4) not scheduled to start yet
- (5) dropped

4. b. If "delayed," by how many months?

[Box]

4. c. If "delayed," what was the primary reason for the delay? (Limit: 4,000 characters)

[Box]

4. d. If "dropped," what was the major reason for dropping it? (Limit: 4,000 characters)

[Box]

4. e. If "dropped," was this change discussed with your project officer?

- Yes
- No

5. a. Briefly describe the objective(s) of the project. (Limit: 4,000 characters)
5. b. Have there been substantial changes to the objectives(s) for this project during the current reporting period?
- Yes
- No
5. c. If “yes,” have these changes been discussed with your project officer?
- Yes
- No
5. d. If “yes,” in one or two sentences, explain the reason for these changes. (Limit: 1,000 characters)

[Box]

6. Select the 1–2 primary target audiences for this project.
(Choose no more than two.)

- a. Researchers
- b. Practitioners/clinicians
- c. Service providers
- d. Educators
- e. Policy experts
- f. Federal and non-federal partners
- g. Industry representatives and/or product developers
- h. Employers
- i. Media
- j. Consumer advocates
- k. Individuals with disabilities and/or family members
- l. Students
- m. Other (Select “other” for this item only if none of the listed categories apply.)

Specify (if other) **[Box]**

7. Which of your outcome-oriented goals does this project help to achieve?
- Goal 1
- Goal 2
- Goal 3
- (short title, as previously entered by grantee)

8. What steps have you taken to evaluate the impact of this training project?
(Check all that apply)

- a. None
- b. Key informant interviews
- c. Customer satisfaction survey
- d. Pre/post design
- e. Quasi-experimental
- f. Other (Select "other" for this item only if none of the listed categories apply.)

Specify (if other) [Limit: 1,000 characters] **[Box]**

9. What did you learn from this evaluation? (Limit: 5,000 characters)

[Box]

Summary Table—Training Projects (system-generated)

List of project titles (sequential project number and project title):

T1: Sample project title 1

T2: Sample project title 2

Projects	T1	T2
Type of project (Q3)	Workshop	Training course
Project status (Q4.a)	On schedule	Completed
Target audience(s) (Q6)	Researchers	Media Consumer advocates

Technical Assistance Activities

Purpose: NIDRR project monitoring

Frequency of data collection: Once with annual progress updates

In this section, we ask about your technical assistance activities in the current reporting period.

1. In the current reporting period, what was the most frequently used method of delivering technical assistance? (Select only one.)

- a. phone consultation
- b. e-mail
- c. the Web
- d. in-person
- e. other

Specify (if other) (Limit: 1,000 characters) **[Box]**

2. From the list below, select the primary audiences that most often requested technical assistance.

(Choose up to 2 audiences.)

- a. Researchers
- b. Practitioners/clinicians
- c. Service providers
- d. Educators
- e. Policy experts
- f. Federal and non-federal partners
- g. Industry representatives and/or product developers
- h. Employers
- i. Media
- j. Consumer advocates
- k. Individuals with disabilities and/or family members
- l. Other

Specify (if other) **[Box]**

3. Briefly describe the nature of the technical assistance you provided to the audience(s) identified in Question 2. (Limit: 1,000 characters)

[Box]

4. Briefly comment on how the technical assistance provided in the current reporting period related to the goals of your award. (Limit: 1,000 characters)

[Box]

Additional Notes

Purpose: NIDRR project monitoring

Frequency of data collection: Once with annual progress updates

1. Please use this space to report any additional information on your current projects or activities that you would like NIDRR to know. (Limit: 5,000 characters)

[Box]

Award-Specific Sections for Model Systems Clinical Care, Knowledge Translation Awards, and Disability Business Technical Assistance Centers

(System will present appropriate section for these three types of grantees.)

Clinical Care/Longitudinal Database (Model Systems Only)

Purpose: NIDRR project monitoring

Frequency of data collection: Annual

Provide the following information for your entire grant, not for each of your projects.

1. Number of new patients enrolled in the Model Systems longitudinal database during the reporting period
[Box]
2. Number of patients followed up during the reporting period
[Box]
3. Briefly describe how R&D findings of your current Model Systems grant are used, or their anticipated use, in the clinical care setting. (Limit: 1,000 characters)
[Box]

Knowledge Translation Awards—Projects and Activities Section

Please use the definitions below to select the type of project that best applies. NOTE: Definitions are taken from the “Disability and Rehabilitation Research Projects and Centers Program; Final Rule,” Federal Register, Vol. 62, No. 25, February 6, 1997 (<http://www.gpoaccess.gov/fr/index.html>).

Research activities focused on systematic study directed toward advancing knowledge of KT or technology transfer, testing an hypothesis, or evaluating the effectiveness of a new KT or technology transfer strategy or approach (e.g., refining and testing conceptual or theoretical models of KT or tech transfer, developing or evaluating standards of evidence grading; and evaluating the effectiveness of dissemination or technology transfer strategies).

(NOTE: Questions in this section are the same as those listed in the Research Projects Section above.)

Development activities focused on using knowledge and understanding gained from research to create KT or technology transfer related materials, devices, systems, or methods beneficial to the target population, including design and development of prototypes, processes and information products.

(NOTE: Questions in this section are the same as those listed in the Development Projects Section above.)

Dissemination and knowledge translation activities focused on the systematic exchange, synthesis, distribution, and ethically sound application of information or knowledge through a variety of ways for potential users or beneficiaries.

(NOTE: Questions in this section are the same as those listed in the Dissemination and Knowledge Translation Projects section above.)

Training activities focused on conducting a planned and systematic sequence of supervised instruction on KT or technology transfer that is designed to impart predetermined skills and knowledge.

(NOTE: Questions in this section are the same as those listed in the Training Projects section above.)

Technical Assistance activities focused on providing expertise or information on KT or technology transfer for use in problem solving.

(NOTE: Questions in this section are the same as those listed in the Technical Assistance activities section above.)

Other KT or Tech Transfer activities

In this section, we ask you to answer some basic questions about your Knowledge Translation (KT) projects, including Technology Transfer projects where applicable. For purposes of the APR, a “KT project” can refer to a designated project that you proposed in your initial application or, if you did not propose projects, to a collection of related activities or tasks that you group together as a project for reporting. Whichever applies to you, the designation you use to identify projects will be carried forward to future APRs. The maximum number of KT projects you can report on is 10.

Please review the records that you have previously entered and add, edit, or delete records as necessary in order to provide an annual update. The “Date Completed” column displays the date of the last save for each record. If a record has been carried forward from a previous APR, the text “needs review” will appear in this column. Click “edit” to review and update these records. After you “save,” the system will update the date completed.

NOTE: If this is your first year, you will need to enter information for all of your projects.

Project ID	Project Title	Add/Edit Record	Delete Record	Date Completed
T1	Sample project	Edit	Delete	
		Add new		

1. Title of this KT project (Limit: 500 characters):
[Box]
2. Name of person responsible for this project
[Box]
3. Project start date (enter as "mm/dd/yyyy")
[Box]
4. Actual or projected project end date (enter as "mm/dd/yyyy")
[Box]
5. a. What is the current status of this research project?
 - (1) on time
 - (2) delayed
 - (3) completed
 - (4) not scheduled to start yet
 - (5) dropped
5. b. If "delayed," by how many months?
[Box]
5. c. If "delayed," what was the primary reason for the delay? (Limit: 4,000 characters)
[Box]
5. d. If "dropped," what was the major reason for dropping it? (Limit: 4,000 characters)
[Box]
5. e. If "dropped," was this change discussed with your project officer?
 - Yes
 - No
6. a. Briefly describe the objectives of this project. (Limit: 4,000 characters)
[Box]
6. b. Have there been substantial changes to the objective(s) for this project during the current reporting period?
 - Yes
 - No

6. c. If “yes,” have these changes been discussed with your project officer?
- Yes
- No
6. d. If “yes,” in one or two sentences, explain the reason for these changes. (Limit: 1,000 characters)
- [Box]**
7. Describe your overall progress in implementing this project during the current reporting period (including any significant problems or challenges you encountered and the actions you took to remedy them). (Limit: 20,000 characters)
- [Box]**
8. Describe any preliminary findings or “lessons learned” in the current reporting period. (Limit: 5,000 characters)
- [Box]**
9. Briefly describe any significant problems or challenges you encountered in the current performance period conducting your KT activities and summarize the actions you have taken to address them. (Limit: 20,000 characters)
- [Box]**
10. Please update us on the status of problems or challenges that you reported in previous Annual Performance Reports. (Limit: 20,000 characters)
- [Box]**

(System will automatically take respondent back to summary table at the beginning of this section, in order to add, edit, or delete projects.)

Disability Business Technical Assistance Center Awards

Purpose: NIDRR project monitoring

Frequency of data collection: Once with annual updates

In this section, please report on the technical assistance, training, and dissemination activities that you conduct for this award.

DBTACs—Training Projects

If you proposed specific training projects in your original proposal, please report on those here. If you did not, you may regroup your training activities into projects of like tasks.

Please review the records that you have previously entered and add, edit, or delete records as necessary in order to provide an annual update. The “Date Completed” column displays the date of the last save for each record. If a record has been carried forward from a previous APR, the text “needs review” will appear in this column. Click “edit” to review and update these records. After you “save,” the system will update the date completed.

NOTE: If this is your first year, you will need to enter information for all of your projects.

Project ID	Project Title	Add/Edit Record	Delete Record	Date Completed
T1	Sample project	Edit	Delete	
		Add new		

1. Enter the project title: (Limit: 1,000 characters)

[Box]

2. Name of person responsible for the project:

[Box]

3. Type of project: (Select only one)

- a. workshop
- b. webcast
- c. presentation
- d. training course
- e. curricula development
- f. training manual development
- g. planning, conducting, or sponsoring a conference
- h. distance learning curricula

- i. other (Select "other" for this item only if none of the listed categories apply.)

Specify (if other): (Limit: 1,000 characters) **[Box]**

4. a. What is the status of the project?

- (1) on time,
- (2) delayed,
- (3) completed,
- (4) not scheduled to start yet,
- (5) dropped

4. b. If "delayed," state the major reason for the delay: (Limit: 4,000 characters)

[Box]

5. In one or two sentences, briefly describe the objective(s) of the project. (Limit: 4,000 characters)

[Box]

6. Select the 1–2 primary target audiences for this project.
(Choose no more than two.)

- a. Researchers
- b. Practitioners/clinicians
- c. Service providers
- d. Educators
- e. Policy experts
- f. Federal and non-federal partners
- g. Industry representatives and/or product developers
- h. Employers
- i. Media
- j. Consumer advocates
- k. Individuals with disabilities and/or family members
- l. Business groups
- m. State/local government agencies
- n. Code officials responsible for physical accessibility requirements
- o. Architects and design professionals
- p. Attorneys or other legal professionals
- q. Other (Select “other” for this item only if none of the listed categories apply.)

Specify (if other) **[Box]**

7. What steps have you taken to evaluate the impact of this training project?
(Check all that apply)

- a. None
- b. Key informant interviews
- c. Customer satisfaction survey
- d. Pre/post design
- e. Quasi-experimental
- f. Other (Select “other” for this item only if none of the listed categories apply.)

Specify (if other) (Limit: 1,000 characters) **[Box]**

8. What did you learn from this evaluation? (Limit: 5,000 characters)

[Box]

(System will allow grantee to report as many training projects as needed.)

DBTACs—Summary Table—Training Projects (system-generated)

List of project titles (sequential project number and project title):

T1: Sample project title 1

T2: Sample project title 2

Projects	T1	T2
Type of project (Q3)	Workshop	Training course
Project status (Q4)	On schedule	Completed
Target audience(s) (Q6)	Researchers	Media Consumer advocates

DBTACs—Technical Assistance Activities

In this section, please report on the technical assistance activities that you conduct for this award.

1. Please describe the nature and frequency of the following technical assistance that you have conducted in this reporting period.

(Check all that apply and enter volume [i.e., total number during this reporting period for each activity].)

- | | | |
|--------------------------|----------------|---------|
| <input type="checkbox"/> | a. Phone calls | Volume: |
| <input type="checkbox"/> | b. E-mail | Volume: |
| <input type="checkbox"/> | c. In-person | Volume: |
| <input type="checkbox"/> | d. Other | Volume: |

Specify (if other) **[Box]**

2. Do you maintain or contribute to a Web site for technical assistance activities?

Yes

No

If yes, Web site address:

[Box]

3. Please indicate the top two target audiences for your technical assistance activities. (Select only two, based on volume.)

- a. Researchers
- b. Practitioners/clinicians
- c. Service providers
- d. Educators
- e. Policy experts
- f. Federal and non-federal partners
- g. Industry representatives and/or product developers
- h. Employers
- i. Media
- j. Consumer advocates
- k. Individuals with disabilities and/or family members
- l. Business groups
- m. State/local government agencies
- n. Code officials responsible for physical accessibility requirements
- o. Architects and design professionals
- p. Attorneys or other legal professionals
- q. Other (Select "other" for this item only if none of the listed categories apply.)

Specify (if other) **[Box]**

4. Please elaborate on any problems or challenges that you encountered and your actions to remedy these challenges in the provision of technical assistance during this reporting period. (Limit: 5,000 characters)

[Box]

DBATCs—Dissemination

What materials did you disseminate during this reporting period? Enter the number of copies of DBTAC-generated and non-DBTAC-generated materials distributed by electronic and other means.

Type of Materials	DBTAC-Generated		Non-DBTAC-Generated	
	Electronic	Other	Electronic	Other
Journal articles				
Project publications				
Video/audio tapes				
CDs/DVDs				
Books/book chapters				
Bulletins/newsletters/fact sheets				
Research reports/conference proceedings				
Other specify [Box]				

Performance: Outputs

Purpose: Evaluation and accountability; project monitoring and program improvement

Frequency of data collection: Once with annual updates

Instructions: In this section grantees report on the following four types of outputs related to the current NIDRR award that were disseminated or delivered to external audiences in the current reporting period:

Type 1: Publications

Type 2: Tools, Measures, and Intervention Protocols

Type 3: Technology Products and Devices

Type 4: Other Information Products

Grantees may also report on any major accomplishments associated with these outputs.

Type 1 Outputs: Publications

Instructions: Enter all peer-reviewed and non-peer-reviewed publications produced during the current reporting period that were directly funded by this award. DO NOT include documents that are currently in review, accepted for publication, in press, or self-published.

Include only publications that were directly funded by the current award.

If you have no publications to report during the current period, check the box below and then click "Save and Continue."

No publications to report during the current period

Otherwise, please complete the balance of this section.

(NOTE: If grantee checks the box above, they will be taken back to the Table of Contents.)

If you use ProCite® software to manage your publication information, our upload tool is available to transfer publications to the APR system.

The last column indicates whether the journal title that you entered is contained in the ISI® database. NIDRR uses this database to determine which citations entered by grantees can be included in its performance measures. It is extremely important that journal titles be entered correctly (e.g., with no abbreviations or spelling errors) so that your citations, where appropriate, will match the ISI database and can be counted.

After entering a journal title or proceeding, check the last column of the summary table to see whether the title you entered matches an entry in the ISI database. If it does not, you may choose "look up" to view a list of entries in the database. If you have entered the title incorrectly, select the correct title and click "OK" to change it.

Only journal articles and proceedings will have matches in the ISI database.

The table below is a summary of all records you have previously entered in this section.

ID Number	Full Citation	Add/Edit Record	Delete Record	Type of Publication	Timeframe When Work Conducted	Submitted to NARIC	ISI
1.1	Sample publication	Edit	Delete	Journal article	Current funding cycle	Yes	√
		Add new					

(NOTE: System will add a sequential number within output type; the first record under “publications” is record 1.1; first record under Tools, Measures, and Intervention Protocols is record 2.1, etc.)

1. a. Provide a full citation for this publication.

Type of publication: (drop-down box: journal article or periodical, web journal, proceedings of meetings and symposia, book or book chapter, monograph, abstract, technical or research report, review)

NOTE: System will display APA-required fields based on publication type, which are shown in “Capacity-Building Activities” section.

1. b. (If publication type = journal article or periodical, or proceedings) Is this a peer-reviewed publication?

Yes

No

2. Indicate whether the publication has been sent to NARIC for inclusion in REHABDATA. (To check the status of this publication in NARIC, click on <http://www.naric.com/research/rehab/default.cfm>.)

Yes

No

3. Was this publication produced as a direct result of receiving funding for this grant; i.e., grant number (PRELOADED)?

Yes

No

Type 1 Outputs: Most Important Publications

Select 1–3 publications that represent your “most important” publications during this reporting period.

To identify a publication as “most important,” click on the “Add new” link in the table below. You will then select the “most important publication” from your list of entered publications, and then be asked several follow-up questions about that publication. After you complete those questions for the first publication, you will be given an opportunity to identify additional publications as “most important.”

“Most important” publications refers to those that contribute the most to achieving the outcome-oriented goals for the award by advancing knowledge; increasing capacity for research, training or knowledge translation; or facilitating changes in policy, practice, or system capacity.

If none of your publications meet the “most important” standard, please click here:

No publications meet “most important” standard during this reporting cycle

Sequential ID Number	Full Citation	Add/Edit “Most Important” List	Delete from “Most Important” List
1.1		Edit	Delete
		Add new	

1. Select the publication that meets the “most important” standard.
(NOTE: System will list all publications entered, for grantee to choose from.)
2. Select the one research or development project that played the biggest role in the development of the output.
(NOTE: System will list all projects entered for grantee to choose from.)
3. For this “most important” publication, select the outcome-oriented goal that corresponds most closely to this accomplishment.
(Select only one)
 G1
 G2

4. a. Select the one NIDRR Outcome Arena that corresponds most closely to the setting or topical area where this accomplishment is occurring. If the accomplishment is occurring in more than one Outcome Arena, grantees may check “cross-cutting” and specify the multiple arenas that apply. NOTE: Accomplishments that result from Technology, Demographics, and/or Knowledge Translation activities and projects are also expected to fit into the following Outcome Arenas.

(Select only one)

- (1) health and function
- (2) employment
- (3) participation and community living
- (4) cross-cutting (specify two or more domains that apply)

4. b. If “cross-cutting,” specify two or more domains that apply.

- (1) health and function
- (2) employment
- (3) participation and community living

5. Provide a bulleted list of the “key findings” or “lessons learned” contained in this publication. (Limit: 5,000 characters)

[Box]

6. Briefly describe how this publication is contributing to the outcome-oriented goal by solving a problem, closing an identified gap, or benefiting the target population, and how it goes beyond what already existed in this area. (Limit: 1,000 characters)

[Box]

(System will automatically return to Question 1 so that grantee can identify another most important publication or advance to next section.)

Type 2 Outputs: Tools, Measures, and Intervention Protocols

Type 2 outputs focus on the most important tools, measures, or intervention protocols produced under this award during the current reporting period. Include only tools, measures, and intervention protocols that were directly funded by the current award. NIDRR defines a “tool” (which includes measures and intervention protocols) to include instruments or processes created to acquire quantitative or qualitative information, knowledge, or data on a specific disability or rehabilitation issue.

“Most important” tools refers to those that contribute the most to achieving the outcome-oriented goals for the award by advancing knowledge; increasing capacity for research, training or knowledge translation; or facilitating changes in policy, practice, or system capacity.

NOTE: It is important to stress that tools, measures, and intervention protocols reported in this section must: (1) be directly funded by the current award, (2) be delivered or disseminated to external audiences during the current reporting period. NIDRR defines “external audiences” as audiences that exist outside of the boundaries of project staff and collaborators associated with an award, including outside of NIDRR-sponsored project directors’ meetings.

1. Did you develop, modify, test or evaluate any tools, measures or intervention protocols under this award that were disseminated or delivered to external audiences during the current reporting period?

Yes

No

(If “yes,” system will present balance of this section. If “no,” system will take grantee back to table of contents.)

2. Briefly describe 1–2 Type 2 outputs that represent the most important accomplishments in this category for the current reporting period. Your description should include an explanation of how the tool was validated or tested.

For each output that you enter, you will be asked several follow-up questions. After you complete those questions, you will be given an opportunity to enter additional most important tools. (NOTE: NIDRR defines a **validated** tool, measure, or intervention protocol as an instrument or process created, in whole or in part using NIDRR funding, to acquire quantitative or qualitative information, knowledge, or data on a specific disability or rehabilitation issue which provides a high degree of assurance that the specific instrument or process will consistently produce a product meeting its pre-determined specifications and quality attributes.)

If none of your tools meet the “most important” standard, please check the box below.

No tools meet “most important” standard during this reporting cycle

Sequential ID Number	Name of Tool	Add/Edit Record	Delete Record	Date Completed
T1	Sample tool	<u>Edit</u>	<u>Delete</u>	
		<u>Add new</u>		

NOTE: System will need to assign a sequential ID number to each tool.

1. Name of most important tool (if applicable): (Limit: 500 characters)
[Box]
2. Select the one research or development project that played the biggest role in the development of the output.
(NOTE: System will list all projects entered for grantee to choose from.)
3. Brief description of the purpose of the tool: (Limit: 1,000 characters)
[Box]
4. Brief explanation of how the tool was validated or tested: (Limit: 1,000 characters)
[Box]
5. Select the category that best describes the type of tool. (Select only one)
 - a. checklist
 - b. survey questionnaire or interview schedule
 - c. diagnosis or assessment instrument, including physiologic measure
 - d. outcome measures
 - e. intervention protocol or program
 - f. statistical technique
 - g. database
 - h. other (Select "other" for this item only if none of the listed categories apply.)
Specify (if other): **[Box]**
6. Does this tool acknowledge NIDRR funding?
 - Yes
 - No

7. For this “most important” tool, select the outcome-oriented goal that corresponds most closely to this accomplishment. (Select only one)

- G1
- G2

8. a. Select the one NIDRR Outcome Arena that corresponds most closely to the setting or topical area where this accomplishment is occurring. If the accomplishment is occurring in more than one Outcome Arena, grantees may check “cross-cutting” and specify the multiple arenas that apply. NOTE: Accomplishments that result from Technology, Demographics, and/or Knowledge Translation activities and projects are also expected to fit into the following Outcome Arenas. (Select only one)

- (1) health and function
- (2) employment
- (3) participation and community living
- (4) cross-cutting (specify two or more domains that apply)

8. b. If “cross-cutting,” specify two or more domains that apply.

- (1) health and function
- (2) employment
- (3) participation and community living

9. Briefly describe how this tool is contributing to the above outcome-oriented goal by solving a problem, closing an identified gap, or benefiting the target population, and how it goes beyond what already existed in this area. (Limit: 1,000 characters)

[Box]

10. Is this tool described in a publication listed above under Type 1 outputs?

- Yes
- No

(If “yes,” system will present Item 11. If “no,” system will take grantee back to the table of contents.)

11. If “yes,” click on the radio button beside the publication that contains the best description of this tool.

	Sequential ID Number	Publication in Which Tool Is Described	Full Citation
<input type="radio"/>	1.1	Sample publication	

(Item 12 is only for those who do not identify a publication.)

12. If this tool is not described in a publication, provide the citation or source (e.g., web site) where a description of the tool can be found. (Limit: 1,000 characters)

[Box]

Summary Table—Type 2 Outputs (Tools) (system-generated)

	Tool #1	Tool #2
Sequential ID Number	1	2
Name of tool (Q1)	Sample tool 1	Sample tool 2
Type of tool (Q4)	Checklist	Outcome measure
Number of corresponding outcome goal (Q6)	2	3
Described in current publication (Q10)	Yes	No
If yes, sequential ID number of publication (Q11)	1.1	1.3
If no, citation or source where description of tool can be found (Q12)	Sample URL	Sample citation

Type 3 Outputs: “Most Important” Technology Products and Devices

Instructions: Type 3 outputs focus on the “most important” technology products and devices produced under this award during the current reporting period. Include only technology products and devices that were directly funded by the current award. Technology products and devices include: industry standards and guidelines; software or netware; inventions; patents, licenses, and patent disclosures; working prototypes; products/concepts evaluated; products transferred to industry for potential commercialization; and products in the marketplace.

“Most important” technology products and devices refer to those that contribute the most to achieving the outcome-oriented goals for the award by advancing knowledge; increasing capacity for research, training or knowledge translation; or facilitating changes in policy, practice, or system capacity.

NOTE: It is important to stress that technology products and devices reported in this section must: (1) be directly funded by the current award, (2) be delivered or disseminated to external audiences during the current reporting period. NIDRR defines “external audiences” as audiences that exist outside of the boundaries of project staff and collaborators associated with an award, including outside of NIDRR-sponsored project directors’ meetings.

1. Did you develop, modify, test or evaluate any technology products or devices under this award that were disseminated or delivered to external audiences during the current reporting period?

Yes

No

(If “yes,” system will present balance of this section. If “no,” system will take grantee back to the table of contents.)

2. Briefly describe 1–2 Type 3 outputs that represent the “most important” accomplishments in this category for the current reporting period. Your description should include an explanation of how the technology product/device is being tested or evaluated.

For each technology product/device that you enter, you will be asked several follow-up questions. After you complete those questions, you will be given an opportunity to enter additional “most important” technology products/devices.

If none of your technology product/devices meet the “most important” standard, please check the box below.

No technology products/devices meet “most important” standard during this reporting cycle

Sequential ID Number	Name of Technology Product/Device	Add/Edit Record	Delete Record	Date Complete
T1	Sample tool	Edit	Delete	
		Add new		

NOTE: System will assign a sequential ID number to each technology product/device.

1. Name of “most important” technology product/device (if applicable): (Limit: 500 characters)
[Box]
2. Select the one research or development project that played the biggest role in the development of the output.
(NOTE: System will list all projects entered for grantee to choose from.)
3. Brief description of the purpose of the technology product/device: (Limit: 1,000 characters)
[Box]
4. Brief explanation of how technology product/device was validated or tested. (Limit: 1,000 characters)
[Box]
5. Select the category that best describes the type of technology product/device.
 - a. industry standards/guidelines
 - b. software or netware
 - c. invention
 - d. patent(s), licenses, patent disclosures
 - e. working prototype
 - f. product(s) evaluated or field tested
 - g. product(s) transferred to industry for potential commercialization
 - h. product(s) in the marketplace
 - i. other (Select “other” for this item only if none of the listed categories apply.)

Specify (if other) **[Box]**
6. Does this technology product/device acknowledge NIDRR funding?
 - Yes
 - No

7. For each “most important” technology product/device, select the outcome-oriented goal that corresponds most closely to this accomplishment.
- G1
- G2
8. Briefly describe how this technology product/device is contributing to the outcome-oriented goal by solving a problem, closing an identified gap, or benefiting the target population, and how it goes beyond what already existed in this area. (Limit: 1,000 characters)

[Box]

9. a. Select the one NIDRR Outcome Arena that corresponds most closely to the setting or topical area where this accomplishment is occurring. If the accomplishment is occurring in more than one Outcome Arena, grantees may check “cross-cutting” and specify the multiple arenas that apply. NOTE: Accomplishments that result from Technology, Demographics, and/or Knowledge Translation activities and projects are also expected to fit into the following Outcome Arenas. (Select only one)
- (1) health and function
- (2) employment
- (3) participation and community living
- (4) cross-cutting (specify two or more domains that apply)
9. b. If “cross-cutting,” specify two or more domains that apply.
- (1) health and function
- (2) employment
- (3) participation and community living

10. Is this technology product described in a publication listed above under Type 1 outputs?
- Yes
- No

(If “yes,” system will present Item 11. If “no,” system will take grantee back to the table of contents.)

11. If “yes,” click on the radio button beside the publication that contains the best description of this technology product.

	Sequential ID Number	Publication in Which Technology Product Is Described	Full Citation
<input type="radio"/>	1.1	Sample publication	

(Item 12 is only for those who do not identify a publication.)

12. If this technology product is not described in a publication, provide the citation or source (e.g., web site) where a description of the product can be found. (Limit: 1,000 characters)

[Box]

Summary Table—Type 3 Outputs (Technology Products) (system-generated)

	Tool #1	Tool #2
Sequential ID Number	1	2
Name of technology product (Q1)	Sample tool 1	Sample tool 2
Type of technology product (Q4)	Checklist	Outcome measure
Number of corresponding outcome goal (Q6)	2	3
Described in current publication (Q10)	Yes	No
If yes, sequential ID number of publication (Q11)	1.1	1.3
If no, citation or source where description of tool can be found (Q12)	Sample URL	Sample citation

Type 4 Outputs: Informational Products

Type 4 outputs focus on the “most important” informational products produced under this award during the current reporting period. Include only informational products that were directly funded by the current award. Informational products can include training manuals or curricula; fact sheets; newsletters; audiovisual materials; marketing tools; educational aids; web sites or other Internet sites that were produced in conjunction with your research and development, training, dissemination, knowledge translation, and/or consumer involvement activities.

“Most important” informational products refer to those that contribute the most to achieving the outcome-oriented goals for the award by advancing knowledge; increasing capacity for research, training or knowledge translation; or facilitating changes in policy, practice, or system capacity.

NOTE: It is important to stress that information products reported in this section must: (1) be directly funded by the current award, (2) be delivered or disseminated to external audiences during the current reporting period. NIDRR defines “external audiences” as audiences that exist outside of the boundaries of project staff and collaborators associated with an award, including outside of NIDRR-sponsored project directors’ meetings.

1. Did you develop, create, test or evaluate any informational products under this award that were disseminated or delivered to external audiences during the current reporting period?

Yes

No

(If “yes,” system will present balance of this section. If “no,” system take grantee back to the table of contents.)

Briefly describe 1–2 Type 4 outputs that represent the “most important” accomplishments in this category for the current reporting period. Your description should include an explanation of how the informational product is being tested or evaluated.

For each output that you enter, you will be asked several follow-up questions. After you complete those questions, you will be given an opportunity to enter additional “most important” informational products.

If none of your informational products meet the “most important” standard, please check the box below.

No informational products meet “most important” standard.

Sequential ID Number	Name of Informational Product	Add/Edit Record	Delete Record	Date Completed
4.1	Sample product	Edit	Delete	
		Add new		

NOTE: System will assign a sequential ID number to each informational product.

1. Name of “most important” informational product (if applicable). (Limit: 500 characters)

[Box]

2. Select the one research or development project that played the biggest role in the development of the output.

(NOTE: System will list all projects entered for grantee to choose from.)

3. Brief description of the purpose of the informational product. (Limit: 1,000 characters)

[Box]

4. Brief explanation of how the informational product was validated or tested. (Limit: 1,000 characters)

[Box]

5. Select the category that best describes the type of informational product:

a. training manuals/curricula

b. fact sheets

c. newsletters

d. audiovisual materials

e. marketing tools

f. educational aids

g. Web sites or other Internet sites

h. other (Select “other” for this item only if none of the listed categories apply.)

Specify (if other) **[Box]**

6. Does this informational product acknowledge NIDRR funding (if applicable)?

Yes

No

7. For each “most important” informational product, select the outcome-oriented goal that corresponds most closely to this accomplishment by clicking on the radio button beside the list of goals below. (Select only one)

G1

G2

8. Briefly describe how this informational product is contributing to the outcome-oriented goal identified by solving a problem, closing an identified gap, or benefiting the target population, and how it goes beyond what already existed in this area. (Limit: 1,000 characters)

[Box]

9. a. Select the one NIDRR Outcome Arena that corresponds most closely to the setting or topical area where this accomplishment is occurring. If the accomplishment is occurring in more than one Outcome Arena, grantees may check “cross-cutting” and specify the multiple arenas that apply. NOTE: Accomplishments that result from Technology, Demographics, and/or Knowledge Translation activities and projects are also expected to fit into the following Outcome Arenas. (Select only one)

- (1) health and function
- (2) employment
- (3) participation and community living
- (4) cross-cutting (specify two or more domains that apply)

9. b. If “cross-cutting,” specify two or more domains that apply.

- (1) health and function
- (2) employment
- (3) participation and community living

10. Is this informational product described in a publication listed above under Type 1 outputs?

- Yes
- No

(If “yes,” system will present Item 11. If “no,” system will take grantee back to the table of contents.)

11. If “yes,” click on the radio button beside the publication that contains the best description of this informational product.

	Sequential ID Number	Publication in Which Informational Product Is Described	Full Citation
<input type="radio"/>	1.1	Sample publication	

(Item 12 is only for those who do not identify a publication.)

12. If this informational product is not described in a publication, provide the citation or source (e.g., web site) where a description of the product can be found. (Limit: 1,000 characters)

[Box]

Summary Table—Type 4 Outputs (Informational Products) (system-generated)

	Product #1	Product #2
Sequential ID Number	1	2
Name of informational product (Q1)	Sample informational product 1	Sample informational product 2
Type of informational product (Q4)	Fact sheets	Marketing tools
Number of corresponding outcome goal (Q6)	2	3
Described in current publication (Q10)	Yes	No
If yes, sequential ID number of publication (Q11)	1.1	1.3
If no, citation or source where description of informational product can be found (Q12)	Sample URL	Sample citation

Performance: Outcomes (Accomplishments): External Use and Adoption of NIDRR-Funded Outputs

Purpose: To be completed

Frequency: Annual

This section requests information about the external use or adoption of up to five “most important” outputs, produced either under this award or in a previous NIDRR funding cycle, during the current reporting period. NIDRR defines “external use or adoption” as use or adoption by persons or groups external to the grant (i.e., not project staff or collaborators).

NOTE: It is important to stress that **outputs reported in this section can be based on research and related activities conducted in a previous reporting period or NIDRR funding cycle as long as they are related to the objectives of the current award** and were used or adopted during the current reporting period by persons or groups external to the grant.

Examples of external use or adoption include:

A research finding of this grant is discussed in a publication, newspaper article, consumer newsletter, etc., by someone who is not project staff or a collaborator.

In a previous funding cycle, your program created an instrument that is related to the objectives of the current award. This instrument is now being used in someone else’s research.

In a previous funding cycle, your program developed an assistive device that is related to the objectives of the current award. This device is now being manufactured for, and used by, individuals with disabilities.

For each output that you report, you will be asked a series of questions about the output and its external use or adoption. Once you have completed the questions about the first output, you may report a second one. As noted above, you may report up to five such outputs.

1. Were any “most important” outputs produced under this award, or produced in a previous NIDRR funding cycle and related to the objectives of the current award, used or adopted by persons or groups external to the grant during the current reporting period?

For your reference in answering this question, a list of “most important” outputs reported for this award (beginning with the 2007 reporting period, and including outputs entered in earlier sections of your current APR) appears at the bottom of this screen.

- Yes
- No (If “no,” system will take grantee back to the Table of Contents)

2. Can you provide evidence of the use or adoption of this output (e.g., an electronic copy of descriptions of the use or adoption, such as in professional journals or books, websites, newspapers, newsletters, or testimonial letters)?

- No (If “no,” system will take grantee back to the Table of Contents)
- Yes

“Most Important” Outputs Reported For This Award (Example of a listing for one grantee)

For additional details concerning any of the outputs listed, please access the relevant APR.

Reporting Period	Type	Title or Name
2011	1 (publication)	Publication title
2011	2 (tool)	Name of tool
2010	3 (technology product)	Name of technology product
2010	4 (informational product)	Name of informational product
2009	1 (publication)	Publication title
2009	2 (tool)	Name of tool
2008	3 (technology product)	Name of technology product
2008	4 (informational product)	Name of informational product
2007	1 (publication)	Publication title
2007	2 (tool)	Name of tool

(Next screen)

The list of “most important” outputs reported for this award, beginning with the 2007 reporting period, and including outputs entered in earlier sections of your current APR, appears again below.

To report a “most important” output that was used or adopted by persons or groups external to the grant during the current reporting period, select one of the outputs below or scroll to the bottom of the list and select “Other output—not listed.” You will be asked to complete a series of questions about the first output you report. Then you may return to this list and repeat the process until you have reported up to five outputs.

You may report only outputs that meet the “most important” standard. “Most important” outputs are those that contribute the most to achieving the outcome-oriented goals for the award by advancing knowledge; increasing capacity for research, training or knowledge translation; or facilitating changes in policy, practice, or system capacity.

“Most Important” Outputs Reported For This Award (Example of a listing for one grantee)

Select One	Reporting Period	Type	Title or Name
<input type="radio"/>	2011	1 (publication)	Publication title
<input type="radio"/>	2011	2 (tool)	Name of tool
<input type="radio"/>	2010	3 (technology product)	Name of technology product
<input type="radio"/>	2010	4 (informational product)	Name of informational product
<input type="radio"/>	2009	1 (publication)	Publication title
<input type="radio"/>	2009	2 (tool)	Name of tool
<input type="radio"/>	2008	3 (technology product)	Name of technology product
<input type="radio"/>	2008	4 (informational product)	Name of informational product
<input type="radio"/>	2007	1 (publication)	Publication title
<input type="radio"/>	2007	2 (tool)	Name of tool
<input type="radio"/>	Other output—not listed		

If you have selected a previously reported output from the list: The system will automatically prefill Questions 3–7 below with information from your APRs. (You will not be able to edit these responses.) Please complete the balance of this section, beginning with Question 8.

If you have selected “other output—not listed”: Please complete all questions in the balance of this section.

Characteristics of This Externally Adopted/Used output

3. What type of output is this?
(Select one)
- Publication (Type 1 output)
 - Tool, measure, or intervention protocol (Type 2 output)
 - Technology product or device (Type 3 output)
 - Informational product (Type 4 output)

Brief description of output (questions vary depending upon type of output)

Questions for publications (Type 1 outputs)

4. a. Provide a full citation for this publication (system will display APA-required fields based on type of publication)
- b. Provide a bulleted list of the “key findings” or “lessons learned” contained in this publication (Limit: 5,000 characters)

[Box]

Questions for tools, measures, or intervention protocols (Type 2 outputs)

4. a. Name of tool (if applicable) (Text field—limit: 500 characters)
- b. Brief description of the purpose of this tool (Text field—limit: 1,000 characters)
- c. Select the category that best describes the type of tool
(Select only one)
- checklist
 - survey questionnaire or interview schedule
 - diagnosis or assessment instrument, including physiologic measure
 - outcome measures
 - intervention protocol or program
 - statistical technique
 - database
 - other
- Specify (if other): (Limit: 250 characters) **[Box]**

Questions for technology products and devices (Type 3 outputs)

4. a. Name of “most important” technology product/device (if applicable) (Limit: 500 characters) **[Box]**
- b. Brief description of the purpose of the technology product/device (Limit: 1,000 characters) **[Box]**
- c. Select the category that best describes the type of technology product/device (Select only one)
- industry standards/guidelines
 - software or netware
 - invention
 - patent(s), licenses, patent disclosures
 - working prototype
 - product(s) evaluated or field tested
 - product(s) transferred to industry for potential commercialization
 - product(s) in the marketplace
 - other
- Specify (if other): (Limit: 250 characters) **[Box]**

Questions for informational products (Type 4 outputs)

4. a. Name of informational product (if applicable) (Text field—limit: 500 characters)
- b. Brief description of the purpose of the informational product (Text field—limit: 1,000 characters)
- c. Select the category that best describes the type of informational product (Select only one)
- training manuals/curricula
 - fact sheets
 - newsletters
 - audiovisual materials
 - marketing tools
 - educational aids
 - Web sites or other Internet sites
 - other
- Specify (if other): (Limit: 250 characters) **[Box]**
5. What is the number of the NIDRR grant that funded this output (e.g., H133Xyynnnn)? (If you do not have the grant number, enter the name of the grant and the name of the principal investigator.) (Limit: 250 characters.) **[Box]**

6. In what reporting period was this output produced?
(Select one)
- 2004 (individual grantee reporting periods varied)
 - 2005 (individual grantee reporting periods varied)
 - 2006 (reporting period ending May 31, 2006)
 - 2007 (June 1, 2006 to May 31, 2007)
 - 2008 (June 1, 2007 to May 31, 2008)
 - 2009 (June 1, 2008 to May 31, 2009)
 - 2010 (June 1, 2009 to May 31, 2010)
 - 2011 (June 1, 2010 to May 31, 2011)
7. Select the **one** NIDRR Outcome Arena that corresponds most closely to the setting or topical area where this accomplishment/output is occurring. If the accomplishment/output is occurring in more than one Outcome Arena, grantees may check “cross-cutting” and specify the multiple arenas that apply. (Note: Accomplishments that result from Technology, Demographics, and/or Knowledge Translation activities and projects are also expected to fit into the following Outcome Arenas.)
(Select only one)
- Health and function
 - Employment
 - Participation and community living
 - Cross-cutting
- If “cross-cutting,” specify the two or more domains that apply:
- Health and function
 - Employment
 - Participation and community living

Use or Adoption of the Output

Questions 8–13 ask about how your output has been used or adopted by individuals or groups external to your grant. These questions also ask for **evidence** that your output has been used or adopted.

Questions 14–20 ask about how this use or adoption of your output has led to change in policy, practice, or system capacity. These items also ask for **evidence** that the use of your output has led to this change.

8. Who used or adopted this output?
(Select up to two)

- Researchers
- Practitioners/clinicians
- Service providers
- Educators
- Policy experts
- Federal and non-federal partners
- Industry representatives and/or product developers
- Employers
- Media
- Consumer advocates
- Individuals with disabilities and/or family members
- Business groups
- State/local government agencies
- Code officials responsible for physical accessibility requirements
- Architects and design professionals
- Attorneys or other legal professionals
- Other
- Specify (if other): (Limit: 250 characters) **[Box]**

9. Briefly describe the user(s). (Limit: 500 characters)
[Box]

10. How, specifically, is this output being used or adopted? (Limit: 1,000 characters)
[Box]

11. Please identify the source(s) of your evidence concerning the external use or adoption of this output.
(Check all that apply)

- Publication(s)
- Web site(s)
- Other
- Specify (if other): (Limit: 500 characters) **[Box]**

12. Upload electronic copies of all evidence.

Use the "browse" button below to select the file you want to upload from your computer. You may upload files of the following types: PDF, DOC (Microsoft Word), GIF, and JPG.

13. If it is not possible to upload some of the evidence, describe where NIDRR can find the documentation. (For publications, enter the full citation; for Web pages, enter the URL; for users themselves, provide contact information.) (Limit: 1,000 characters)

[Box]

14. Is the use or adoption of this output contributing to change in policy, practice, or system capacity, or another type of change?

- No (If “no,” system will return to first screen of this section and allow grantee to enter another output)
- Yes

15. What kind of change?
(Select one)

- Policy—governmental or non-governmental
- Practice—rehabilitation and related fields, research in these fields
- System capacity, including access to services and supports
- Other
Specify (if other) (Limit: 250 characters) **[Box]**

16. Describe this change and the contribution of this output to this change. (Limit: 1,000 characters)

[Box]

17. Can you provide evidence regarding the role of your output in bringing about these changes?

- No (If “no,” system will return to first screen of this section and allow grantee to enter another output)
- Yes

18. Please identify the source(s) of your evidence regarding the role of your output in bringing about these changes.
(Check all that apply)

- Publication(s)
- Web site(s)
- Other
- Specify (if other) (Limit: 500 characters) **[Box]**

19. Upload electronic copies of all evidence.

Use the “browse” button below to select the file you want to upload from your computer. You may upload files of the following types: PDF, DOC (Microsoft Word), GIF, and JPG.

A file upload interface consisting of a rectangular text input field on the left and a button labeled "Browse..." on the right. The button has a light gray background and a thin border.

20. If it is not possible to upload some of the evidence, describe where NIDRR can find the documentation. (For publications, enter the full citation; for Web pages, enter the URL; for users themselves, provide contact information.) (Limit: 1,000 characters)

[Box]

Other Accomplishments and Contributions

Purpose: Evaluation and accountability, project monitoring, and program improvement

Frequency of data entry: Annually

1. In addition to the outputs previously described, please describe any other accomplishments that occurred during the current reporting period and contributed to the achievement of your outcome goals for this award. This can include (1) awards and other forms of recognition key personnel have received for activities and accomplishments associated with this award; (2) organizational accomplishments that strengthen the infrastructure for conducting high-quality disability and rehabilitation research and related activities; and (3) more consumer-oriented accomplishments that affect the lives of individuals with disabilities and their family members more directly. For all accomplishments that fall into this "other" category, be sure to provide enough detail to describe the nature of this (or these) accomplishments and how they are related to your outcome goals. (Limit: 10,000 characters)

[Box]

Overall Status of Outcome-Oriented Goals

1. Finally, taking into account all the outputs and accomplishments reported in previous sections, which of the following best describes your overall progress to date toward achieving the outcome-oriented goals for this award? (Select only one)
 - a. no progress to report yet
 - b. behind schedule/delayed
 - c. making limited progress
 - d. making reasonable/moderate progress
 - e. making substantial progress
 - f. completed
 - g. otherSpecify (if other): [Box]

Final Report (all grantees except RFP)—Award Summary

The information you provide in the Award Summary and Future Implications sections should be considered an “Executive Summary” of your award overall. For reference, your project abstract is provided below.

1. For each Research and Development project conducted over the entire course of this award, what are the key findings or discoveries that resulted from it? Please respond using a bulleted format. List the findings or discoveries under the title of each research or development project that generated them. (Limit: 20,000 characters)

[Box]

2. For all other types of projects (e.g., Knowledge Translation, Capacity Building, etc.), what are the key contributions of this award? Please respond using a bulleted format. List the key contributions under the title of each Knowledge Translation, Capacity-Building, Training or Other Project you conducted. (Limit: 20,000 characters)

[Box]

3. Please list in bulleted format the most significant problems you encountered in carrying out the grant. (Limit: 20,000 characters)

[Box]

4. Please explain your methods for addressing the problems listed above and describe their impact on the final outcome of the grant. (Limit: 20,000 characters)

[Box]

5. Looking over all of the projects you conducted and the outputs you produced over the course of the entire grant, what outcomes (changes in learning or knowledge or policy, practice, behavior, or systems capacity) can you say your work helped to bring about? Outcomes do not happen on their own. Therefore, it is important to show: (1) how the research, development, capacity-building, training, and knowledge translation projects you carried out relate to the outputs you produced and (2) how the documented use of these outputs by intended audiences resulted in the occurrence of the type of outcome you are claiming. (Limit: 20,000 characters)

[Box]

6. What are the most important “lessons learned” in conducting the activities associated with this award? Note: Lessons learned are different from problems encountered; lessons learned focuses on what you might have done differently if you had to do the work in your grant over again. (Limit: 20,000 characters)

[Box]

Final Report (all grantees)—Future Implications

The information you provide in the Award Summary and Future Implications sections should be considered an “Executive Summary” of your award overall.

1. Please describe any anticipated outputs (e.g., publications, tools, and products and/or outcomes, advances in knowledge, increased capacity to conduct or use high-quality research, and changes in policy, practice, behavior or system capacity) that will result in the near future from activities associated with this award, although they have not yet been published or otherwise disseminated or delivered to outside audiences. (Limit: 20,000 characters)

[Box]

2. What implications for future research and related activities, if any, do you think have emerged from the work conducted under this award and the findings, discoveries and accomplishments produced to date? (Limit: 20,000 characters)

[Box]