2019 ANA Panel Survey

The purpose of this survey is to provide the Administration for Native Americans with information on your experience with the 2019 ANA Peer Panel Review processes so we can improve the process in the future. Your participation is voluntary, and the information provided will be kept private.

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information is estimated to average 10 minutes per response, including the time for reviewing instructio and maintaining the data needed, and reviewing the collection of information. An agency may not condusponsor, and a person is not required to respond to, a collection of information unless it displays a current OMB control number. The control number for this project is 0970-0401. The control number expires on	
I. REVIEW MANAGEMENT	
1. The quality of reviewer recruitment and confirmation communications.	
Unacceptable	
Poor	
No Opinion	
Good	
Excellent	
Comment	
2. The helpfulness of the logistical information provided to conduct a successful review.	
Unacceptable	
Poor	
No Opinion	
Good	
Excellent	
Comment	
3. Overall review management.	
Unacceptable	
Poor	
No Opinion	
Good	
Excellent	

Comment

4. The "user friendliness" and overall user experience of ARM.
Unacceptable
Poor
No Opinion
Good
Excellent
Comment
5. I received clear explanations of the conflict of interest and the confidentiality requirements regarding information about applications, and grant review comments and scores.
Strongly Disagree
Disagree
Agree
Strongly Agree
N/A
6. The compensation I received was commensurate with the time and effort required.
Strongly Disagree
Disagree
Agree
Strongly Agree
N/A
II. TRAINING
1. The quality of the Mandatory Online Training
Unacceptable
Poor
No Opinion
Good
Excellent

Comment 2. How useful was the Pre-Panel Webinar and Opening Ceremony? No Helpful Helpful Very Helpful Comment 3. The quality of the Program Support Web Page (please consider all aspects including the accessibility, organization, and presentation of required documents, forms, training materials, and other items). Unacceptable Poor No Opinion Good Excellent Comment 4. The helpfulness of the guidance materials provided on the Program Support Web Page. Unacceptable Poor No Opinion Good Excellent Comment 5. The helpfulness of the programmatic information focused on understanding the Funding Opportunity Announcement (FOA) and guidance for reviewing the grant applications. Unacceptable Poor No Opinion Good Excellent Comment **III. THE OVERALL REVIEW PROCESS**

1. The format used for panel discussions (Teleconference, Webinar).

	Unacceptable
	Poor
	No Opinion
	Good
	Excellent
	Comment
2. How process	would you rate your PM/RD for professionalism and knowledge of the FOA and ANA panel s?
	Poor
	No Opinion
	Good
	Excellent
	Comment
3. You	ur overall satisfaction with the review experience.
	Unacceptable
	Poor
	No Opinion
	Good
	Excellent
	Comment
3. The	11 days allotted to read and panel the assigned applications was
	Too Long
	Just Right
	Too Short
4. I would participate in another ANA Panel Review.	
	Strongly Disagree
	Disagree
	Agree
	Strongly Agree

	Comment
5. Ove	rall, I had a positive experience with this review.
	Strongly Disagree
	Disagree
	Agree
	Strongly Agree
	N/A
	Comment

N/A

FOR CHAIRPERSON ONLY

IV. CHAIRPERSON

Dear Panel Chairperson,

appre grant	feedback is valuable. Please take a few minutes to complete our survey. We would especially ciate comments for items that did not meet your satisfaction so we may further improve future review sessions. Your feedback is private and will not be shared with other members of your or the public. This survey should take approximately 10 minutes to complete. Thank you.
Chair	person - Overall Grant Review Process
1. The	e training I received effectively prepared me as a chair for the grant review process.
	Strongly Disagree
	Disagree
	Agree
	Strongly Agree
	N/A
	Comment
2. The pre-panel introductory call with my PM was helpful in preparing me to develop a sworking relationship and establish expectations before the panel session began.	
	Strongly Disagree
	Disagree
	Agree
	Strongly Agree
	N/A
	Comment
	e guidance I received from the program office (PM) was consistent with the FOA, including the sevaluation criteria.
	Strongly Disagree
	Disagree
	Agree

Strongly Agree
N/A
Comment
EVALUATION OF PANEL REVIEWERS:
Please complete for each reviewer.
1. Reviewer's Name (as written in ARM)
First:
Last:
2. The reviewer was knowledgeable about the subject matter related to this review.
Strongly Disagree
Disagree
Agree
Strongly Agree
N/A
3. The reviewer had access to technology and adequate computer skills.
Strongly Disagree
Disagree
Agree
Strongly Agree
N/A
4. The reviewer attended all panel review discussions.
Strongly Disagree
Disagree
Agree
Strongly Agree
N/A
5. The reviewer was on time to panel * review discussions

	None of the Time
	Some of the Time
	Most of the Time
	All of the Time
	N/A
6. The	reviewer respected and cooperated with other panel members.
	Strongly Disagree
	Disagree
	Agree
	Strongly Agree
	N/A
7. The reviewer read and clearly understood the applications being reviewed, the FOA, and the evaluation criteria.	
	Strongly Disagree
	Disagree
	Agree
	Strongly Agree
	N/A
8. The reviewer's summary comments were well-written, specific, constructive, and based on the strengths and weaknesses of an application's response to the evaluation criteria.	
	Strongly Disagree
	Disagree
	Agree
	Strongly Agree
	N/A
9. The	reviewer assigned applications scores that were consistent with * written comments.
	Strongly Disagree
	Disagree

Agree	
Strongly Agree	
N/A	
10. I would recommend this reviewer for future panel reviews.	
Strongly Disagree	
Disagree	
Agree	
Strongly Agree	
N/A	
11. If you are not recommending this reviewer, please provide 2-3 sentences with additional information about problems or issues with the reviewer. If you are recommending the reviewer, please type N/A.	
FOR PANEL REVIEWER ONLY	
Dear Panelist,	
Your feedback is valuable. Please take a few minutes to complete our performance and process survey. We would especially appreciate comments for items that did not meet your satisfaction so we may further improve future grant review sessions. Your feedback is private and will not be shared with other members of your panel or the public. This survey should take approximately 10 minutes to complete. Thank you.	
1. Name of your Panel Chairperson (as written in ARM)	
First:	
Last:	
2. The panel chairperson clearly established administrative and procedural rules for the review (e.g. established a schedule, ensured reviewers had received all needed materials, and established ground rules).	
Strongly Disagree	
Disagree	
Agree	
Strongly Agree	
3. The panel chairperson instructed reviewers to use only the guidance from the FOA evaluation criteria in evaluating applications.	

Strongly Disagree
Disagree
Agree
Strongly Agree
4. The panel chairperson effectively led panel discussions and facilitated meetings.
Strongly Disagree
Disagree
Agree
Strongly Agree
5. The panel chairperson effectively resolved any differences of opinion that arose between reviewers in regard to scoring applications.
Strongly Disagree
Disagree
Agree
Strongly Agree
N/A
6. The panel chairperson effectively led the process of developing the Panel Summary Reports.
Strongly Disagree
Disagree
Agree
Strongly Agree
7. Overall, the panel chairperson was effective in managing this review.
Strongly Disagree
Disagree
Agree
Strongly Agree
8. Please include any additional comments in the space below.