

## Instructions for the Cancer Center Support Grant Non-Competing Progress Reports

The information included in the non-competing Progress Report is used to monitor scientific and programmatic progress and to ensure that public funds are used appropriately. As of October 17, 2014 all P30 progress reports are required to be submitted using the Research Performance Progress Report (RPPR) system (see [NOT-OD-14-092](#)). Non-Competing Continuation Progress Reports and eData files must be submitted two months (60 days) prior to the start of their next budget period.

The instructions here *supplement* those provided in the U.S. Department of Health and Human Services Grants & Funding Research Performance Progress Report (RPPR). All RPPR forms should be used as relevant. Additional information and resources on the RPPR, including the current RPPR Instruction Guide and training archives, can be found at: <http://grants.nih.gov/grants/RPPR/>. Please note chapters 6 (Sections A – H) and 7 (Section 7.6) specifically apply to the P30 mechanism.

### Detailed Budget for Next Budget Period:

1. The following types of P30 requests require NCI approval and should be submitted to the Center's NCI Program Director separately from the non-competing continuation application.
  - a. Key personnel whose effort has changed more than 25%: provide a budget justification and rationale. In general, key personnel include members of the Center's Senior Leadership Team including the Center Director.
  - b. Budget categories that have changed more than 25% from the previous year: provide a budget justification and rationale.
    - i. Developmental Funds and Supplement Funds are restricted, and cannot be re-budgeted to other components in the CCSG.
    - ii. CCSG funds in other categories may be moved into any peer-reviewed portion of the grant that received an Excellent or better rating during the most recent Competing Application (Type 2) grant review.

### Director's Scientific Overview/Six Essential Characteristics:

Not to exceed 8 pages.

For each of the elements below, describe the Center's activities for the prior year funding period.

1. Highlight your Center's most significant scientific accomplishments. If desired you may include references within the text of this section.
2. Provide an overview of important changes to Center's Senior Leadership, Research Programs, Shared Resources, consortium arrangements, etc.
3. Describe updates or accomplishments (if any) related to the Six Essential Characteristics of Cancer Centers: Physical Space, Organizational Capabilities, Transdisciplinary Collaboration and Coordination, Cancer Focus, Institutional Commitment, and the Center Director.
4. Briefly describe the general plans for future scientific directions.

## **Planning and Evaluation:**

Not to exceed 2 pages.

1. Summarize how the CCSG Planning and Evaluation funds were used in the prior year funding period. Discuss any accomplishments or changes made.
2. Discuss any changes made in conjunction with EAC committee recommendations (if not previously discussed in the overview).

## **Page Limit Exclusions:**

1. Provide a consolidated list of EAC members with titles and affiliations.
2. Include the biosketches of new EAC members.

## **Developmental Funds:**

Not to exceed 3 pages.

1. Summarize how the CCSG developmental funds were used in the prior year funding period. Discuss any accomplishments.
2. Discuss plans for use of developmental funds in the coming year.\*

\*If the Developmental Funds include involvement of a foreign component, State Department clearance is required in advance of implementation. Contact the Center's NCI Program Director for information.

## **Administration:**

Not to exceed 2 pages.

1. Update any changes to the Administration.

## **Research Programs:**

Not to exceed 4 pages/ Research Program.

1. Discuss the scientific accomplishments in the prior year funding period.
2. Discuss any changes in Program Leaders and/ or Program Membership.
3. As appropriate to the type of Program, discuss how research in the catchment area is being addressed.
4. Describe any changes or future plans for the programs.

## **Page Limit Exclusions:**

Include a list of twenty-five program-related publications from the prior progress report. Mark those that illustrate inter-and intra- programmatic collaborations or other multi-institutional collaborations.

## **Shared Resources:**

Not to exceed 1 page/ Shared Resource.

1. Discuss any changes to Shared Resources in the prior year including Resource Leadership, scientific or technical capabilities or overall usage.

## **Clinical Protocol and Data Management:**

Not to exceed 1 page.

1. Discuss any accomplishments and/or significant changes relative to the CPDM in the prior year funding period, *e.g.*, timeline of CDPM functions, updates to the data safety monitoring plan (DSM), modifications to centralizing, managing, and reporting processes. If your Center's DSMP has significantly changed with regard to the review criteria as defined in the DSMP document posted on the OCC website (<http://cancercenters.cancer.gov/documents/DSMPReviewCriteria508.pdf>) please submit the revised plan (tracked and untracked versions) to the Office of Cancer Centers, Dr. Henry Ciolino ([ciolino@mail.nih.gov](mailto:ciolino@mail.nih.gov)) for NCI approval. Please direct questions to Dr. Ciolino.

## **Protocol Review and Monitoring System (PRMS):**

Not to exceed 1 page.

1. Discuss any changes to the PRMS's authorities and processes for initiating, reviewing, prioritizing, monitoring and terminating cancer clinical research protocols.

## **Early Phase Clinical Research Support:**

Not to exceed 1 page.

1. Discuss any accomplishments using Early Phase Clinical Research Support in the prior year funding period.
2. Describe the proposed uses of EPCRS funds for the coming project period.

## **Page Limit Exclusions:**

1. List all studies supported with EPCRS funds in the prior progress report. Include the investigator name, project name, phase, anatomic site (if applicable), duration, and outcome or impact (*e.g.*, led to peer-reviewed funding for a later phase trial, a publication, a revised scientific approach, identification of investigational agents for further development or novel probes, etc.).\*

\*If the EPCRS Funds include involvement of a foreign component, State Department clearance is required in advance of implementation. Contact the Center's NCI Program Director for information.

## **Inclusion of Minorities and Women in Clinical Research:**

Not to exceed 1 page.

1. Discuss any major changes to the accrual of women and minorities to interventional therapeutic, non-therapeutic trials, and to non-interventional studies.
2. Discuss any changes to and the effectiveness of the plans and processes for monitoring and improving recruitment.
3. For Early Phase Clinical Research Support and Developmental Funds follow the SF424 instructions for completing the targeted/planned enrollment tables, as applicable.

## Inclusion of Children in Clinical Trials:

Not to exceed 1 page.

1. Discuss any changes to plans to recruitment of children.

## 6.3 Section C1: Publications

PMCID's are required for **all** publications that receive Direct Cost Support from CCSG components. These components are as follows:

1. Shared Resources that provide subsidies/discounts to Cancer Center Members
2. Pilot Projects supported by Developmental Funds
3. Clinical Research Studies supported by Early Phase Clinical Research Support

For each of these three components, provide a list of the publications alphabetized by lead author, with the appropriate PMCID. Language from the NIH PHS 2590 Instructions is included below:

Report publications resulting directly from this grant that you have not previously reported, including manuscripts submitted or accepted for publication. (If there are no publications to report, include such a statement.)

Using My Bibliography provide a My NCBI generated PDF list of publications (see [http://www.nlm.nih.gov/pubs/techbull/nd12/nd12\\_myncbi\\_pdf.html](http://www.nlm.nih.gov/pubs/techbull/nd12/nd12_myncbi_pdf.html) for instructions). My Bibliography will display the correct text format, and if available, include the appropriate reference number (PMID, PMCID, or NIHMSID), and compliance status.

For additional information on compliance with the Public Access Policy and use of My Bibliography see NIH Guide Notices NOT-OD-08-119, NOT-OD-09-136, NOT-OD-10-103, NOT-OD-12-160, and NOT-OD-13-017. , <http://grants.nih.gov/grants/funding/2590/2590.htm>

## Supplements:

Not to exceed 2 pages/ Supplement, exclusive of grant and/ or publication list. Include:

1. The supplement number (i.e. CA123456-03S1 or CA97654-43S2).
2. The "common" name of the supplement (i.e. "CTRP or CURE").
3. Issue date of the supplement's NoA.
4. Whether the Center expects to carry forward funds into the next budget period, and if so, the proposed end date for the supplemental work to be completed and the funds to be spent.
5. The goals of the supplement.
6. The scientific accomplishments made towards the goals of the supplement in the prior year funding period. Emphasize the most significant published scientific accomplishments and indicate how the center has facilitated these accomplishments. Provide citations and PMCID numbers for the publications associated with the supplement.

## **Standard Cancer Center Data Tables:**

Concurrent with submission of the RPPR, submit Data Tables 1-4 as eData to [ccsgdata@mail.nih.gov](mailto:ccsgdata@mail.nih.gov):

References:

1. The Data Guide: <http://cancercenters.cancer.gov/documents/CCSGDataGuide508C.pdf>
2. The Electronic Data Guide:  
<http://cancercenters.cancer.gov/documents/CCSGElectronicDataGuide-eData508C.pdf>