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Memorandum

TO : RMPS Staff

DATE: February 6, 1970

FROM : Associate Director for Grant
and Contract Policy, RMPSSUBJECT: Interpretation of National Advisory Council
Recommendations on Grant Applications

The purpose of this communication is to review the role of the National Advisory Council in evaluating and recommending action on applications for Regional Medical Programs.

In line with the provisions of Public Law 89-239, no grant may be made without the recommendation of approval of the National Advisory Council. These recommendations are made to the Administrator, Health Services and Mental Health Administration who has delegated the responsibility for final action to the Director, Regional Medical Programs Service. It is he who authorizes and signs awards which may be for any portion of a grant application or any dollar figure, as long as both are within that which was recommended for approval by the Council.

As one step in the effort to improve the delineation of the various review functions among the Regional Advisory Group, the staff, the technical panels, the Review Committee, and the National Advisory Council a slight revision of the terminology used for recording the recommendation of the various review groups was initiated for the November/December review cycle. Although no change in the system of review was proposed, the use of these designations is intended to focus major attention on Regional programs, even when only supplemental components are under review. A list of these designations is attached.

An additional word seems appropriate in regard to the use of the Council minutes in working with and providing feedback to the Regions.

A. It is essential to keep in mind that the Council makes recommendations to the Director. The final decisions on the extent of the approvals and funding levels, based on individual applications, are his and supercede any of the recommendations made by the peer review groups. The single exception is that he may not award funds

for anything which the National Advisory Council does not recommend for approval. It is also important to recall that the final process of award is not accomplished until the region has had an opportunity to reassess its own priorities in the light of the information feedback from the National review process, has had the opportunity to consult its Regional Advisory Group, and submits a final budget.

B. Assuming concurrence by the Director, the Council recommendations on Regional Medical Programs applications are to be interpreted as follows:

1. Approval. Full funding, in the time and amount requested, for the entire grant application, with no specific suggestions, conditions, or contingencies* on any one of the components.
2. Approval with specific conditions. Funding, in whole or in part, of at least one of the components of a grant application, in an amount which is the sum of the amounts recommended for the approved components (either as requested or specified in the recommendations).

With the exception of those components on which the recommendation is non-approval or deferral (see below), the total amount of money recommended for funding may be utilized at the discretion of the Region for any or all of the projects, as long as they are not substantially changed in their intent or operation, and as long as the conditions and suggestions of the reviewers are taken into account.

3. Deferral. This designation will be used for entire program application packages only very rarely and usually in instances in which policy decisions to which the projects relate are still pending before the Council. This implies no need for alteration or revision of the proposal or its budget and serves simply to hold the application for action consideration in the next or subsequent review cycle.

4. Return for Revision. This recommendation is used to convey the recommendation for substantial revision of the whole proposal, to the extent that a new application must be submitted for review through a complete review cycle.

5. Disapproval - Inappropriate for DRMP funding. This designation is used for total grant applications only when it applies equally to all components contained therein. It is used rarely, and only in two instances. One is when the activities proposed are considered to be either outside the terms of the Program's legislative authority or previously announced Council-approved guidelines and policy recommendations. The second use is for applications which are determined to be based on erroneous scientific concepts, propose activities which are potentially hazardous to patients, or otherwise

are not in the best interests of either the providers or the consumers of the proposed service.

C. When the Council wishes to record a recommendation on a single project component of an application which is at variance with the recommendation of the Review Committee, it may do so and the following designations are used:

Approval I - A straight approval, with or without specific conditions or contingencies*, in either the amount requested or a reduced amount, with the suggestion of sufficiently high priority that the base grant to the Region be supplemented with additional funds for its implementation.

Approval II - Approval, with or without conditions, for inclusion in the applicant's program, pending the reassessment of funding priorities by the applicant Region but without the suggestion of supplementation of the grant with additional funds.

Non-approval I - Inappropriate for DRMP funding on the same bases as cited above for disapproval of entire program applications.

Non-approval II - (Revision Required) - Not to be implemented by the Region even by rebudgeting of existing program funds until a revised application, reviewed through a complete cycle, has been recommended for approval by the National Advisory Council.

Deferral - As defined above, this recommendation serves to hold a project in review pending clarification of the intent of the project itself or of a program policy to which it relates.

* When the recommendations carry comments, suggestions, or conditions made during the review process they are transmitted to the Region to help explain the reasons for the specific action taken, particularly when the action involves a budgetary limitation. When the action carries a contingency, it is the responsibility of the staff to secure in writing the agreement of the applicant to make the necessary specific changes in program and/or budget, before the award is made. This written evidence of concurrence must be returned to the Council for final approval unless the Council delegates that final approval to staff.