EMF A/R AND NEW COLLECTIONS TEAM
by Susan Lin, Assistant Controller for EMF, Controller’s Office

“What is an account receivable?” Did Michael Grafton, Manager of EMF Reconciliation and Special Projects ask this question at the recent RSA Town Hall to test the RSAs’ accounting acumen? Well, maybe, but actually no. Michael was endeavoring to impart the importance of responsible money (accounts receivable) management.

Accounts receivable is money owed to UCSF by our sponsors. The longer we wait to generate billing (i.e., invoices) for expenses incurred on a sponsored project, the greater our exposure to default. That is because the longer an invoice goes unpaid, the more difficult it becomes to collect. Therefore, good accounts receivable management runs the gamut from timely and accurate expense recording and cost transfers, to timeliness of billing and financial and technical report submission, thorough follow-up, and proper cash application.

The need for shoring up this financial area can be seen in that, as of February 2009, our accounts receivable was $46 million. Of that sum, $14 million was 121 days or older. To improve UCSF’s cash management and the quality and collection of the accounts receivable, EMF recently established a Collections Team under the leadership of Robert Chang to focus on collection follow-up and timeliness of unapplied cash resolution.

At present, the main tasks of the Collections Team is to work through the outstanding invoices, clean up the uncollectible items, and follow up with the sponsors and the departments. In the near future, the Collections Team will develop the Campus Accounts Receivable Collection Policy and Procedures that will formalize our billing and collection procedures, and delineate responsibilities of EMF and Departments on collection and treatment of uncollectible accounts receivable. Additionally, the Collections Team will develop accounts receivable aging reports by school and department to share with you so that we can collaborate more effectively in managing the accounts receivable.

If you have any questions about outstanding invoices and would like to discuss this with the Collections Team, please contact Robert Chang at 415-476-6568 or email: robert.chang@ucsf.edu.

$10.4 BILLION TO NIH FROM AMERICAN RECOVERY AND REINVESTMENT ACT (ARRA)
by Suzanne Sutton, Director of Research Administration

President Obama signed into law ARRA on February 17, 2009, which includes an appropriation to the NIH for $10.4 billion in economic stimulus funds to be spent entirely before October 2010. More than $8 billion of that funding will go towards supporting scientific research priorities, while the remainder will finance facilities expansion, construction and other material needs, both within and outside the NIH. An additional $500 million in
grant funding was authorized to the Health Resources and Services Administration (HRSA) to support new sites, services, and to expand services at existing sites. The Department has a number of HRSA-funded projects that study effective health care delivery to marginal populations.

ARRA’s objectives are to preserve and create jobs; promote economic recovery; help people most impacted by the recession; increase economic efficiency by investing in technological advances in science and health; promote long-term economic benefits by investing in transportation, environmental protection and other infrastructure; and preserve essential services in State and local governments.

UCSF and the Department have historically been one of the leading recipients of NIH funding so it is logical to assume that a fair amount of the ARRA funding will be granted to us. Each Institute is deciding how to best allocate its portion of the ARRA funds, which includes lower the paylines for funding applications they have already received in prior cycles; funding for revisions (new science on currently funded projects); supplemental funding; Challenge Grants; and Grand Opportunities. While the ARRA dollars must be spent by the end of OMB’s FY 2010, it does not necessarily mean that new awards will be for two years only. In many cases, the new dollars will help to extend the amount of funds the Institutes currently have. For example, existing dollars will go towards the last three years of a five-year award and ARRA dollars will fund the first two years.

Due to the variability in how each Institute will allocate its funds and the very tight deadlines for proposal submissions, UCSF created the Stimulus Team to provide PIs and staff with advice, guidance, and resources. The Stimulus Team’s website is located at http://stimulus.ucsf.edu/ and provides up-to-date information on all ARRA funding opportunities as they become available, including summaries of each with a direct link to the full program announcements. The Stimulus Team also provides campus wide coordination for certain opportunities such as the High End Instrumentation FOA, which disallows duplicate requests from the same institution. An e-mail address located at stimulusteam@ucsf.edu is monitored daily to quickly answer specific questions and requests for guidance.

**POLICY/PROGRAM UPDATES**

by Joseph Wilson, Assistant Director

**Electronic Submission of Proposals to Contracts and Grants**

The Contracts and Grants office will now accept electronic proposal submissions for review via e-mail. In order for the office to accept an electronic proposal, it must be submitted by 9:00 a.m. four working days before the agency deadline. This will eliminate the need to physically deliver proposals or corrections to the office.

( Exception): If a hard copy is required by the agency, please continue to submit a paper copy to our office.
(Exception): If your proposal submission is past the four-day deadline, please continue to submit a paper copy to our office.

- Your electronic proposal must be sent to CGProposalTeam@ucsf.edu.
- C & G will accept either electronic or handwritten signatures of the PI, Chair, Dean and other required signatures on the OSR Approval Form.
- Please use the following subject line header on all email proposal submissions. Proposal Express Number, PI last name, PI first name, Deadline date (e.g., P0000111, Smith, John 01/01/09)
- Please assemble the proposal packet in the following order:
  1. OSR Approval Form;
  2. COI Documents (if applicable);
  3. Human and Animal Subject Approvals, or other compliance documents;
  4. Funding agency instructions, program announcement, Request for Proposals, or other special agency instructions;
  5. Proposal Additional information: http://listsrv.ucsf.edu/cgi-bin/wa?A0=CGANNOUNCE

Human Subject Protection Training Update

The procedures and requirements for submitting human subject protection training certification material to NIH have been updated and posted to the C&G webpage. These new procedures should be utilized effective March 1, 2009. Please note the following highlights:

1) As of March 1, 2009 the previously utilized UCSF Human Subjects Basic Training Course certificate will no longer be accepted as proof of training for NIH Just-In-Time (JIT) submissions. Instead, all UCSF Key Personnel working on NIH grants or sub-awards under a prime NIH award are required to take the new Collaborative Institutional Training Initiative (CITI) online class.
2) All human subject training material will now be submitted to NIH using the JIT feature of the NIH Commons. Full information on the process to enter the training certification material into the online JIT NIH Commons system is located on the C&G webpage.
3) Principal Investigators/departments are no longer required to submit copies of the human subject training certifications to C&G when submitting JIT material. C&G will now verify the human subject training material using the listing on the Human Subjects Protection website of all UCSF personnel who have completed the new CITI training.

“Clinical Trial Budgeting” Course on May 12, 2009

The Industry Contracts Division (ICD) of the Office of Sponsored Research (OSR), in collaboration with the OSR Training Department, is hosting a one-day course on “Clinical Trial Budgeting”. The course will be taught by an RN/CRC with over 20 years experience in managing clinical trials and negotiating budgets. The focus of the course will be the development and negotiation of clinical trial budgets. Special emphasis will be placed on the timely recovery of all costs associated with trials, contingency budgeting, and proven techniques for negotiating with sponsors.
**Allowable Administrative Costs on Clinical Trials**

A new matrix of allowable administrative costs on clinical trials by sponsor type is now available on the [Industry Contracts webpage](http://industrycontracts.ucsf.edu) and the [C&G webpage](http://cg.ucsf.edu). This matrix can be used when preparing clinical trial budgets, and for determining allowable costs on awards from federal, nonprofit, and industry sponsors.

**NIH Salary Cap Limitation Update**

NIH has published updated information regarding the salary limitation for NIH awards under NIH Notice [NOT-OD-09-037](http://nihms.nih.gov). Please utilize the new salary cap rate effective immediately when preparing new, renewal or revision proposals. A copy of the text of the NIH announcement is attached below.

**Note:** The salary cap limitation applies only to awards from NIH, AHRQ, and SAMHSA. This salary cap should not be applied when preparing proposals for other federal agencies.

Notice Number: NOT-OD-09-037 Salary Limitation on Grants, Cooperative Agreements and Contracts under the Current Continuing Resolution

Release Date: January 16, 2009; Update of Notice [NOT-OD-08-035](http://nihms.nih.gov). Issued by National Institutes of Health (NIH), [http://www.nih.gov](http://www.nih.gov). This notice provides updated information regarding the salary limitation for NIH grant and cooperative agreement awards and extramural research and development contract awards (referred to here as grants).

The Consolidated Appropriations Act, 2008, Public Law 110-161, restricts the amount of direct salary of an individual under an NIH grant to Executive Level I of the Federal Executive Pay scale. NIH continues to operate on a continuing resolution (CR) through March 6, 2009. The CR applies the terms of the FY 2008 appropriations into the period covered by the CR. The Executive Level I annual salary rate was $191,300 for the period January 1 through December 31, 2008. **Effective January 1, 2009, the Executive Level I salary level increased to $196,700.** When the final FY 2009 Appropriation is enacted, we will publish our annual NIH Guide Notice on the legislative mandates included therein with additional information on the salary cap. For complete information, please see [http://grants.nih.gov/grants/guide/notice-files/NOT-OD-09-037.html](http://grants.nih.gov/grants/guide/notice-files/NOT-OD-09-037.html).

**Update on C&G Quality Improvement Project Changes**

C&G has continued to implement various process changes as part of the OR Quality Improvement Project in order to streamline and standardize the services provided. The following information is an update on current reengineering improvements.

1) **Outgoing Subaward Instruction Sheet.** To assist with the process of setting up
subawards to outside institutions, instructions for completing the Subaward Request Form have been posted and are now available on the C&G webpage at: http://www.research.ucsf.edu/cg/forms/cgUC SfForm.asp. The Subaward Request Form is used when a request is made to issue a subaward to an outside institution. These instructions are intended to facilitate completion of the Subaward Request Form and clarify the material needed by C&G to issue the subaward.

2) New SLA on Fund Advance Requests. Effective February 1, 2009 a Service Level Agreement (SLA) is being implemented at C&G for handling of Fund Advance Requests. The C&G office is committed to reviewing and entering into the RAS system all Fund Advance Requests received at C&G within four working days from the date that Fund Advance Requests are received at C&G. In order for C&G to process a Fund Advance Request Form, the department must have previously submitted a proposal through C&G and all required compliance material must be in place. For federal awards in particular, please note that all COI, HRPP, and IACUC approvals must be in place and current. Please note the four working day SLA will not be applied to Fund Advance Requests submitted simultaneously with After-the-Fact proposals.

3) New Automated Award Completion Request Reminder System. C&G has implemented a new automated system for collection of departmental material related to awards. This new automated system is aimed at improving turnaround time on set up of awards at C&G.

MEET SCOTT BIGGINS, MD
Assistant Clinical Professor of Medicine, Division of Gastroenterology
by Julie Tang, Research Services Analyst, Division of Gastroenterology

JT: When did you know you wanted to become a medical doctor?
SB: I began my study at the University of California, Los Angeles (UCLA), specialized in Chemical Engineering-Bioengineering and during my third year at UCLA, I worked at the GI Division designing a liver-kidneys dialysis system. After completing my undergraduate study, I knew then I wanted to become a medical doctor.

JT: Are you the first in your family to enter the medical profession?
SB: No, actually my grandma was the first; she was a nurse and lived a fruitful live until age of 98. She is what I would consider one of the pioneers in the medical profession. Also, my aunt and cousin are both nurses. So, although I am not the first in my family to enter the medical profession; I am the first medical doctor in my family. I came from a
family of professionals. My dad and brother are both pilots, and my mom was a teacher. Dad is a former Air Force Pilot and brother is flying for United Airlines and the National Science Foundation (NSF). He flies the NSF Scientists to Antarctica for their research.

JT: Who or what inspired you to enter the medical profession?
SB: At the end of my undergraduate study at UCLA, I learned that my mom was diagnosed with lung cancer. I took care of her while she was going through a TAXOL clinical trial. (It is now an FDA approved chemotherapy under the generic drug name paclitaxel.) Her treatment was very effective and helped in her recovery. At that time, I was already a researcher. In short, my mom inspired me to become a clinician scientist.

JT: How and why did you decide to select Gastroenterology as your specialty?
SB: The seed was planted when I researched the artificial liver design at UCLA. Later, during my Internal Medicine residency, it was clear to me that Gastroenterology and Hepatology were the best fit for me as a clinical specialty.

JT: What is your research program and what do you plan to achieve?
SB: My research programs focus on three areas: (1) Investigate evidence-based data for improving the organ allocation system that benefit liver transplant recipients. Currently, there are about 20,000 patients per year waitlisted for about 5,000 available organs in the country. (2) Develop an application to measure the outcomes (negative and positive) of liver transplantation. (3) Investigate the medical ethics of liver transplantation.

JT: What major factors influenced you to choose UCSF over other institutions?
SB: Dr. Norah Terrault. My mentor at the Oregon Health and Sciences University referred me to Dr. Terrault and after my visit with her, I decided that UCSF was the right place for my career and me. Also, UCSF’s Liver Transplant Program is outstanding and renowned worldwide.

JT: President Obama’s proposal to make Electronic Medical Records is seemingly cost effective. In your opinion, what are the benefits and risks?
SB: In my opinion, the benefits outweigh the risks if we develop and implement the President’s proposal correctly from infancy. The benefits are (1) a reduction of the overall health care costs. Health care costs in the US is equivalent to about 17% of the Growth Domestic Product (GDP). The electronic medical record, which is a central database system, can help providers access the information more timely to avoid unnecessary and duplicate procedures such as lab tests, CT scans, and other procedures. (2) The Electronic Medical Records System would enable ease in establishing a single-payer system, which would make health care available to all people regardless of income levels. On the other hand, there is some unintended risk associated with any system such as the potential loss of privacy, but this can be minimized with strict oversight and system security access.

JT: You are currently the Chairman of the Subcommittee for the Liver Transplantation Risk Adjustment, a component of the United Network for
Organ Sharing (UNOS). Can you tell us what this subcommittee does.
SB: The UNOS implements and adjusts organ allocation under the direction of the Department of Health and Human Services. We develop models for predicting the outcomes of survival for liver transplant recipients.

JT: Finally, as a relatively new RSA in GI, I appreciate your comment on how and what I can improve to better serve you as the PI.
SB: I like the fact that there is a well-defined deadline and responsibility for submitting proposals through the Department of Medicine and that you maintain an “open door” policy where PIs can come by whenever he/she needs help or has questions. It is also very helpful in decision-making and work schedule planning when the Funding Opportunity Announcement, Call for Proposals, or update policy/information is distributed to the PIs.

MEET MARGARET DILAURA
Division Administrator, General Internal Medicine and Hospitalists, SFGH
by Olive Giovannetti, Research Services Analyst, Division of Experimental Medicine, SFGH

OG: Can you tell us about your educational background and how you came to work for UCSF? How did you become a Division Administrator?
MD: I attended the University of Michigan where I earned my undergraduate degree in Business with a focus on Finance and Organizational Behavior. After college, I worked as a litigation consultant for about five years but knew wasn’t what I wanted to do for the long term. I took some time off and traveled. During my time off I asked people about various types of careers and I kept hearing about hospital administration. I met Shawn Sheffield, the previous Director of Administration at SFGH through a friend of a friend and she told me about hospital administration. Shawn was very excited when talking about hospital administration and I got excited about it too. I applied for a division administrator position at SFGH because it was important to me to work at an institution that contributes to the community.

OG: What influenced you to get into the health field?
MD: I felt it was a good use of my business background in making a larger impact in the world than just creating spreadsheets.

OG: What qualities and/or characteristics do you feel a DA needs in order to be successful in their work?
MD: This is a very generalist job, so you need to know a little bit about a lot. That means that the ability to multi-task is key.
and the ability to prioritize and be well organized are also very important. Good communication is essential because you’re the conduit in a lot of ways; communicating between the DOM to staff and vice versa. You need to be able to explain the bigger picture to keep sane and provide inspiration to others while doing the little things. Diplomacy is also important. You need to know which battles to fight and which ones aren’t worth fighting.

OG: What is your favorite part of your job? What is the most challenging part of your job?
MD: My favorite part of this job is getting to work with the people in the Divisions of General Internal Medicine and Hospital Medicine, as well as the people at SFGH and in the Department of Medicine. It’s really inspiring to see the work that gets done. My other favorite part of this job is figuring out creative solutions to problems, as nothing is ever really that obvious.

The most challenging part of my job is dealing with space issues because it can be a very emotional subject for people. Also, learning to navigate the system at UCSF and SFGH can be very challenging. I try not to let myself get frustrated at the process of getting things done, such as having to obtain six signatures on ten pieces of paper to get one thing completed (like a PET!).

OG: Do you belong to any clubs or organizations? If so, what benefit do you get from being a member?
MD: I’m the co-chair of SFGH-Bayside ABOG (Academic Business Officers Group). It’s been beneficial to meet a lot of people outside the Department at SFGH.

OG: Have you been part of any leadership program during your tenure at UCSF?
MD: I attended the Leadership Development Program led by Richard Secunda last year. There were two meetings a month focusing on various aspects of leadership. I also attended the Business Officers Institute two years ago. That was a one-week conference and it was very interesting and educational to meet all the different types of business officers that work at the University of California. Through that, I discovered that although each UC campus is different in many ways, UCOP policies bind us together as one organization.

OG: What makes an outstanding RSA? What specific services/tools are most helpful to you?
MD: One attribute that makes an outstanding RSA is effective communication with the division administrator and with faculty. Another attribute is someone who can navigate the system and show others how to navigate it; someone who can take a grant from beginning to end and communicate what is needed from faculty and the division administrator. For example, knowing where to find progress report instructions, RFA guidelines, NIH policies, etc.

OG: Is there anyone who has specifically inspired you in your work or passed along great advice?
MD: I am lucky to work with two wonderful division chiefs. Andy Bindman, MD is the Chief of DGIM and he has a lot of experience and understanding about how things operate at UCSF. He gives me good advice on how to navigate the system and is very supportive. He gives me opportunities to learn and try new things.

My other division chief is Jeff Critchfield, MD, the Chief of Hospital Medicine. Jeff inspires me because of his dedication and commitment to SFGH. He teaches me about collaboration and making the whole better by working together.

They are both very different with different styles, and working with both of them makes me a better manager.

OG: Any message to RSAs? What advice would you give to an RSA who wants to become a division administrator?

MD: My message to RSAs would be, “Thank you.” I believe that the RSA job is one of the toughest jobs around and it’s very important. As for advice to an RSA wanting to become a DA, if you’re given an opportunity to do something new, say “yes,” even if the opportunity is outside your realm of duties. Within reason of course! Saying yes to new opportunities allows you to meet new people, learn new skills and become exposed to even more opportunities.

OG: What do you like to do when you’re not at work?

MD: I love to cook, watch movies, read, do Pilates and ride my bicycle. One of my favorite things to do is to explore new neighborhoods in San Francisco.

BEST IN RESEARCH ADMIN. OF GRANTS (BRAG) AWARD

The Research Administration Unit is proud to announce that Susana Szeto is the April 2009 BRAG Awardee. Susana is a Research Services Analyst for the Division of Prevention Sciences (DPS) located on Beale Street. Susana joined DPS a little over a year ago in January 2008 and has helped to greatly improve the services provided to faculty. She received an overwhelming number of outstanding commendations, some of which include the following.

“I have been working with Susanna for over a year now, and I cannot say enough about how helpful, efficient, and hardworking she is. When Susanna and I began working together, I was learning how to manage my first R01 grant budget; due to her diligence and focus, I have found this process to be clear and understandable, and I have had no budgetary problems and have easily met all deadlines associated with this grant.”

“In all of our interactions, I have found Susanna to be professional, friendly, and extremely capable. She always follows up with me in a timely manner, which I deeply appreciate because I know how much work is on her plate and how easy it would be for
something to get lost in the shuffle. Thanks to Susanna, what is often one of the hardest aspects of being a PI has become a smooth, collaborative operation.”

“She has been a tremendous asset to CAPS. Susana has consistently submitted all her BSRs on time. In less than one year at CAPS, she has closed out many old grants and cleared old overdrafts.”

“Ms. Szeto is exceptionally skilled and prompt in her work. I really appreciate how she is always very calm and makes herself available to answer questions, even without an appointment. CAPS is a much better place thanks to her outstanding work.”

“She has been a hard-working, consistently helpful, and always accessible RSA on the projects on which I work.”

Congratulations, Susana!

**A DAY IN THE LIFE OF AN RSA**
by Ross Beard, Research Services Analyst, Division of Prevention Sciences

My days begin and end the same way, with my computer. Like other Research Services Analysts (RSA), I depend upon my computer to get my job done.

I am an RSA at CAPS, the Center for AIDS Prevention Studies located on the 13th floor at 50 Beale Street. CAPS has an extraordinary approach to computers and technology. I use a Dell laptop tucked into a cradle that is connected to a 24” LED monitor, with a standard keyboard coupled with a trackball mouse. While in its cradle, my laptop is connected to a wired, local area network (LAN). When I need to, I can remove my laptop from its cradle, take it into one of our three conference rooms and connect the laptop to our CAPS wireless network. I also can take my laptop home and use a wireless network and Citrix software to connect the laptop to my CAPS account.

The first thing I do each morning after I open the door to my office is to turn on my computer monitor and log on to my CAPS account. When that old familiar “desktop” appears, I open my email account [Microsoft Outlook], then my Excel master file with links to all of my important Excel files, and finally my web browser, Firefox. How I use my computer from that point depends upon what I need to accomplish that day. But rest assured, unless I am having a meeting or walking to one of our several printers, I am using my computer.

I have 21 active log-ins with 21 associated passwords that I use on a periodic basis. I use Outlook, PeopleSoft, WebLinks on a daily, sometimes hourly, basis. When we are preparing grant proposals and/or progress reports, I am in and out of the Cayuse and eRA Commons websites. When we are preparing proposals or progress reports, processing payroll or non-payroll transfers, and emailing reports to PIs, I routinely print Word documents, Excel spreadsheets or Firefox webpages to .pdf files and combine them into multi-page documents using Adobe Acrobat.

While I’m certain an RSA’s job has never been easy, it would be impossible today without computers. That fact was made
apparent the Monday I arrived at my office, walked to my desk, went to log-in, and saw a very unexpected void where my laptop should have been. It was at that moment I remembered that I had taken my laptop home for the weekend. Fortunately, CAPS has a conference room with a computer that is connected both to our CAPS network and to a color video projector that projects onto a large, drop-down video screen. Besides the well-deserved ribbing that I received from my co-workers, I had a very productive morning. By lunchtime, I was rather enjoying the gargantuan, drop-down video screen, and thought about forgetting my laptop more often.

Each day ends in the reverse order in which it begins. I close Firefox, then Excel, then Outlook. Then I log off my laptop, turn off my 24” LED monitor, and close my office door, and hope that my laptop will be ready when I return in the morning.

STAFF UPDATES

Hung Dao joined the Division of General Internal Medicine in January 2009. He is responsible for a portfolio of PIs but is also responsible for ensuring quality pre-award for the division by providing training to the other RSAs in DGIM. Hung has been doing research administration work for the past 13 years and was most recently with the School of Pharmacy before transferring to Medicine. Hung holds a bachelor’s degree from UC Santa Cruz.

Kristen Ha joined the Positive Health Program at SFGH in January 2009. She will provide pre- and post-award as well as financial management support for Dr. Diane Havlir. In 1999, she worked for PHP for a short time after completing her MA at SF State University. Kristen completed her MBA in Finance in 2004. Prior to joining UCSF, she worked in marketing and portfolio management at an institutional asset management firm for 8 years and held an RSA type position at the American Cooks School doing pre- and post-award management of training grants.

Toan Vu joined the SFGH’s RSA group in December 2008. His portfolio includes the EPI Center accounts that were transferred to Dr. Kushel and Cardiology Division accounts, and he will assist with clean up of old expired funds and overdrafts. He has a BS degree in Business Administration with an emphasis in Accounting and over 14 years of experience in the academic health care setting. Over 7 years of this experience was at UCSF in the Department of Psychiatry at SFGH.