

NIH eRA Commons Working Group (CWG)

Date/Time: Sunday, January 11, 2004, 8:30 a.m.–2:00 p.m. Location: Hilton Palacio del Rio, San Antonio, Texas

Chair: David Wright

Next Meeting: Wednesday, May 19, 2004, Washington, D.C.

Presentations

• eRA Project Status (Tim Twomey): http://era.nih.gov/Docs/CWG-FDP Twomey 01-11-04.pdf

• CGAP Update (David Wright): http://era.nih.gov/Docs/CWG_CGAP_01-11-04.pdf

Welcome

David Wright welcomed everyone to the CWG meeting. He announced the retirement of George Stone from federal service effective January 30, 2004. George is leaving the NIH to pursue other opportunities and to spend more time on his family business.

Also, David has moved to the position of eRA Requirements Branch Chief. The NIH is searching for replacements for the two positions. There is a possibility that the two positions will be combined into one. In any case, David will continue in his role with the CWG and the grantee community until his previous position is filled. The possibility of having the role of the extramural advocate being filled by someone on the CWG was raised and anyone interested should contact David.

Bob Beattie asked that consideration be given to filling these positions with people with professional research administration experience.

eRA Project Status

Tim Twomey

Tim reviewed the status of the eRA System project and presented some of the challenges facing it.

Organization Changes

Tim announced some of the organizational changes that have taken place at the NIH since the last meeting that affect the eRA System project. Norka Ruiz Bravo, Ph.D., was appointed the NIH Deputy Director for Extramural Research in November 2003. As part of her new role, she also will be the Director of the NIH Office of Extramural Research (OER). The OER is NIH's focal point and voice for all policies and guidelines for extramural research grants, which represent approximately 85 percent of the NIH budget. The office is responsible for the complete range of issues associated with scientific program implementation, management of grants, and peer review, including the roles and responsibilities of grantee institutions and their compliance with policies and regulations.

Joe Ellis succeeded Regina White as Director, Office of Policy for Extramural Research Administration (OPERA).

John J. McGowan stepped down from his post as eRA project manager on December 9, 2003. Jim Cain has assumed his duties until a new project manager is assigned. JJ acted as project manager in addition to his official duties at the National Institute of Allergy and Infectious Diseases (NIAID). Because the project has grown so much, his replacement will be a full-time, dedicated manager who will report to Dr. Ruiz Brayo

New Contracts

Tim recounted the new strategy for eRA development. In the past, one company, Northrop Grumman Information Technology (NGIT), had the development contract with several smaller subs working on various tasks. The NGIT contract ended at the end of December and several new contracts have been awarded. The Office of Program Management (OPM) required that all contracts be competing. The iEdison contract should be awarded next week.

Contracts have been awarded to the following:

Contract	Partners	Role
IBM	Ekagra, Z-Tech	Architecture, Analysis, Integration
RNSolutions		Technical Operations
RS Information Systems (RSIS)		Helpdesk Support
Optimus		Documentation Support

Additionally, the following are the new development contracts that have been awarded. Each Design and Development contractor will compete for task orders.

Contract	Partners	Role
AC Technologies	Booz Allen, Hamilton	Design and Development
Northop Grumman Information Technology (NGIT)	Silicon Spirit, Global Solutions	Design and Development
Science Application International Corp. (SAIC)	Altum, Turner Consulting Group	Design and Development

The contract with Kumaran Systems to migrate client-server applications to J2EE using the eRA architecture is being finalized. User Admin and Grants Management (GM), including the Person module, will be targeted first and used as proof of concept. Maintenance of code and cost also will be evaluated.

eSNAP Pilot Expansion

The eSNAP pilot is open to all Federal Development Project (FDP) organizations. To participate, an organization must contact the eRA Helpdesk: commons@od.nih.gov, 301-402-7469, 866-504-9552.

eRA Commons Statistics

Tim reported the following statistics for the eRA Commons and its modules.

Module	Statistics
General System	• 750 organizations registered (43% increase from August)
	• 8,431 "affiliated" and "active" registered persons
eSNAP	673 eSNAPs submitted; 422 awarded
	Expanded to all FDP organizations
	Third server added in December
	• 20,000 logons per month
FSR	• 21,203 FSRs with 64 percent coming from Grantees—no paper!
IAR	Full production in July
	• 19,731 critiques submitted
	• 34 meetings for October Councils (535 users)
	• 79 meetings for January Councils (1,335 users)

New Deployment Strategy

Maintenance—An initial maintenance task order was awarded to AC Technologies. There will be smaller, more frequent maintenance releases.

New functionality and enhancements—There will be one to two large releases each year. The releases will be established based on an annual plan and a prioritized workload. Multiple task orders are now being prepared and will be put out for bid.

eRA Designated System for DHHS

The NIH eRA System has been designated as the Department of Health and Human Services (DHHS) enterprise system for research grants management. The eRA System team is working with DHHS Operating Divisions (OPDIVs) to migrate their systems by FY2005.

Tim said that the accounting system also will combine with the eRA System.

There was a general discussion on various systems used to submit grants.

eRA 2004 Priorities

Tim presented the top ten priorities for 2004:

- 1. Electronic Receipt
- 2. J2EE Migration
- 3. Commons Expansion
- 4. eRecords Management
- 5. Workflow
- 6. Virtual Organization Layers
- 7. Co-Investigator and Key Personnel
- 8. Single Sign-On
- 9. Contract Data Added
- 10. Grants.gov

Additionally, there will be resources for Knowledge Management, IMPAC II Reporting Database (IRDB) Redesign and OPDIV Integration.

Marcia Hahn noted that some items may override lower priority items, which would change some of the other priorities.

It was commented that the tracking of more personnel on grants might be construed as a "Big Brother" activity. The NIH personnel made the point that this was not the intent, but that NIH wanted to be more flexible in how we gave credit for personal contributions to research projects as well as being better able to report to Congress who received funds from the NIH.

The Key Personnel definition was discussed. The NIH wants Key Personnel to be defined more narrowly than currently is being defined at universities and other institutions. The group agreed that there has to be a way to officially recognize contributors on grants, some of whom may not fit the NIH definition for Key Personnel. The NIH wants to implement a new category—non-contributing effort—which would allow non-paid contributors to a grant to be recognized but not be included in the work and time credits as Key Personnel.

Training—Tim indicated they were holding off on training until the contract for the helpdesk was in place so that training wasn't wasted on personnel who would not be retained.

Helpdesk—Tolliver McKinney expressed a strong need for making it a priority that the Helpdesk is always updated.

CGAP Update

David Wright

There were 20 submissions in the October/November pilot, with 13 of them processed through Receipt and Referral. Modular R01s were submitted, but no subcontracts (R03, R15, R21). Paper backups were also submitted for this first electronic submission pilot. Five Service Providers participated in the pilot:

- RAMS
- ERA Software Systems (GAMS)

- InfoEd International
- Cayuse
- Clinical Tools (HealthProposal.net)

Clinical Tools, however, did not transmit the proposals successfully.

David reported that 13 institutions participated in the pilot:

- Penn State University
- Virginia Commonwealth University
- University of Michigan
- University of Miami
- Oregon Research Institute
- St. Jude's Children's Hospital
- University of Connecticut

- University of Illinois
- Washington University
- Johns Hopkins University
- Olin Neuropsychiatry Research Center
- Children's Mercy Hospital
- University of Massachusetts

When the grant applications were submitted and received by the NIH, the Principal Investigator (PI) and Signing Official (SO) logged into the Commons to view the application. They were to acknowledge that the same language was on the electronic form as was on the paper form.

Some of the issues resulting from this process for submission and acknowledgement were:

- PIs and all Key Personnel need to be registered in the Commons at the beginning of process—not the end.
 - Changes are being implemented for the next pilot so that Key Personnel do not need to be registered. Profiles are not being enforced because they have held up the submission or review process.
- There is a 24-hour wait on submissions, view and sign off of PDF documents.
 - Tim Twomey said that he is concerned that the immediate viewing of PDF documents will slow performance. Suzanne Fisher said you can view paper immediately but as of right now it takes 3–4 days electronically and that seems to produce the opposite of the desired effect. David Wright proposed allowing the sender to view the conversion before it is actually submitted.
- PI and Institution information often do not match between application and profile.
 - Nancy Wray the expressed need for user ID and information to be more consistent. She also discussed distinguishing static information from dynamic information on Profiles.
 - David Wright suggested the possibility of issuing a warning when the bio information does not match the Profile and prompting the user to update the Profile.
- PDF documents are not exactly same as the original document after transmission and conversion into the eRA System. There are pagination and table of contents (TOC) issues, among other things.

The issues here are primarily Service Provider conversion issues, which will be addressed.

David Hamilton, who is a PI researcher, said that he does not use a TOC whatsoever. He goes directly to bookmarked scientific information. Suzanne stated that if the work were only electronic, bookmarks would be fine. However, as long as there is paper generated, the TOC is needed. There was a discussion of deleting the TOC completely.

Marty Feldman expressed concern that the PDF documents significantly differ from the paper documents. He suggested a need for a template for bios.

Tolliver McKinney said that, on submission, documents had to be cut and pasted to match PDF documents. The PI rejected the PDF documents because of formatting issues. The problem appears to be in the conversion from Macintosh to PC. He also stated that notification failure was disastrous because they had notified PIs and what they expected but was not what they received.

• Cryptic Error Messages

The issue of error messages will be addressed for the next pilot. They will be rewritten so that they are more meaningful to the user.

David received some feedback from pilot users. Some thought that the system was not quite ready to accommodate the pilot. Additionally, some felt uncomfortable with the constant changes, which were made to accommodate issues during the pilot. It was noted that at least one Scientific Review Administrator (SRA) was not in the loop regarding progress in the pilot. The compressed timeline caused other issues, e.g., assignment mailers. Consequently, one institution has made the decision to skip a cycle before making an electronic submission again.

Next Pilot Phase

The next pilot will take place for the March deadline (not February), with between 12–24 applications. The same scopes and mechanisms (e.g., R01s) will be used. There will be no revisions but there will be competing continuations.

There will be major changes in the following areas:

- Key Personnel
- Web Services to retrieve and validate personnel and organization information
- Validation Service
- More notifications
- Immediate viewing of PDF files

One or two institutions have shown an interest in becoming their own Service Provider, which is allowable providing their system complies with submission requirements.

For the June/July deadline, there will be full budgets and revisions. There is a possibility that out-of-cycle RFA/PAs will be accepted before the June/July deadline. Instructions and other information will be on the eRA Web site.

There are now three different electronic submission relationships:

- NIH ↔ Institution
- NIH ↔ Service Provider

• Institution ↔ Service Provider

David posed the question for how to formalize these relationships.

Grants.gov

A pilot is being planned for the March deadline that will include three to five testers. The pilot only will proceed if Grants.gov provides an adequate set of PHS 398 forms with enough time to test the forms and work with potential applicants for training. Like the NIH pilot, the Grants.gov pilot will be an electronic submission with a paper backup. The paper backup can be printed using PureEdge forms, available through Grants.gov, or the Standard 398 Forms. However, the pilot's success will be measured on the successful delivery of the PureEdge 398 forms. Obviously, this is an electronic paper process as opposed to the XML-based process in the NIH process. Grants.gov tentatively has decided to use the NIH 398 schema.

Organizational Hierarchy

In developing an organizational hierarchy for the eRA System, the eRA team wants to be sure that the same scheme can be used throughout the eRA System. Consequently, it will be at least a year before a new organizational hierarchy is implemented. When it is implemented, it will be done without user interruption and the changes will be on the backend. There will more flexibility for the institutions once it is implemented. For the short term, the existing structure will be used.

Some of the security issues that are being addressed in preparation for its implementation are:

- Security will be tied to hierarchy level and role
- Delegations to be tied to hierarchy level
- Unassigned people will default to root
- Two types of SO:
 - Institutional
 - School level (distributed environment)

The grant-related issues include:

- Hierarchy ties to rankings
- Lag time in NIH making major component and department assignments
- Who should see unassigned grants through Status?
- Considering letting institution make and change major component and department assignments
- Need to guard against "stacking"

David demonstrated a prototype of the hierarchical organization. The new prototype was well received and there were a few suggestions for improvements.

It seemed to be the consensus that for the initial roll out of the organizational hierarchy that PIs should not be required to be placed into the hierarchy. The reasons for this is that not all of the issues regarding multiple appointments and which administrator would maintain a PI account have not been worked out. There also was concern that only one structure could be used. Some institutions wanted to have one

structure for administrative and security purposes and another strictly to be used by the NIH rankings. This was determined not to be feasible.

General Questions and Issues

There were a number of miscellaneous problems and issues that the group wanted addressed as well as potential enhancements to the system, as follows:

- Allow institutions to delegate PI authority to submit eSNAPs when the PI account is created.
- The "Submit" button should not be taken from the PI when they route an eSNAP and they should have submit authority.
- When an SO submitted an eSNAP for a PI who had been given submit authority, that authority was retracted from the PI.
- The eSNAP route list only shows SOs; it should show everyone at the institution.
- Provide a list of email notifications that are sent by the system including who the recipients are. The group wants to cull through these to determine which notifications are superfluous.
- Need to have the "Designate as Complete" button in eSNAP to include "save" functionality.
- Place an additional "Designate as Complete" button at the top of the page.
- Allow "Designate as Complete" from the "Manage eSNAP" page.
- Do not refresh the "Org Information" page in eSNAP when the AO and SO are selected. Only refresh when the "Save" button is selected.
- If the PI doesn't validate the information in a newly created account, the NIH doesn't process the account. The NIH should continue the processing even if the PI doesn't validate the information.
- Allow delegation of PPF edit and eSNAP edit authorities from one screen. Create a better interface for delegations.
- More and better on screen instructions.
- Better help screens.
- Need a Professional Profile (PPF) user guide.
- Need to not make email address and telephone number mandatory for previous employers in PPF.
- Need to be able to delete a previous employment in PPF.
- Need to default employment type to Non-Federal instead of Federal in the PPF employment screen.
- The human subject and animal subject fields in eSNAP are confusing. Users don't know when which fields are required and when they are not.
- Determine if grants with the status of Withdrawn/Not Funded are being listed in the status result list.

Attendees

CWG Members

Beattie, Robert (Univ of Michigan)
Beck, Ellen (UCLA)
Clark, Denise (Cornell Univ.)
Dowdy, Steve (MIT)
McKinney, Tolliver (St. Jude Children's
Research Hospital)
Randolph, Jim (Univ. of Mich.)
Wray, Nancy (Dartmouth College)

Other Institutional Representatives

Bredahl, Rich (Univ. of Texas at Austin)
Cook, Faye (St. Jude Children's Research
Hospital)
Custer, Tammy (Cornell Univ.)
Drinane, Tom (Dartmouth Coll.)
Dwyer, Dan (Cornell Univ.)
Hamilton, David (Univ. of Minnesota)
Henninger, Kevin (Univ. of Minnesota)
Kirk, Graydon (Emory Univ.)
Lloyd, Brittany (Univ. of Minnesota)

McKoskey, Kevin (Univ. of Minnesota)
Ross, Susan (Northwestern Univ.)
Sharon, Diane (Oregon Health & Sciences
Univ.)
Spencer, Lynn (Southwest Foundation for
Biomedical Research
Valenzuela, Richard (UCLA)
Wilson, Tom (MD Anderson Cancer Center)

Vendors

Bozler, Dianne (ERA Software Systems) Feldman, Martin (ERA Software Systems) Hulette, Forrest (ERA Software Systems)

NIH Staff

Ellis, Joe (OER) Fisher, Suzanne (CSR) Hahn, Marcia (OPERA) Twomey, Tim (OD) Wright, David (OPERA)