

# eRA Project Team Meeting Minutes

Date: Tuesday, January 28, 2002

Time: 9:00-11:00 a.m.

Location: 6700 B Rockledge, Room 1205

Chair: John McGowan

Next Meeting: Tuesday, January 14, 9:00 a.m., 6700 B Rockledge, Room 1205

#### **Action Items**

1. (Advocates/Analysts) (Advocates/Analysts) Send 5–10 bullets that walk through the "5 years ago-today-4 years from now, how we do business" scenario for your areas. Due on Tuesday, February 4.

- 2. (Tim Twomey) Present a demo (go through an eSNAP) on the eRA Web development site at the next Project Team meeting.
- 3. (Steve Hausman) Send *Integrated Solutions* magazine article on scanning project to Project Team.

#### **Attachments**

- Integrated Solutions magazine article: Capture Images, Capture Savings featuring Steve Hausman and the eRA project: <a href="http://era.nih.gov/Docs/IntegratedSolMagArticleFinal.pdf">http://era.nih.gov/Docs/IntegratedSolMagArticleFinal.pdf</a>
- CWG Update: http://era.nih.gov/Docs/CWG Update.pdf
- CGAP Update: http://era.nih.gov/Docs/CGAP update 01-27-03.pdf

# **Project Report**

John (JJ) McGowan

EPMC Presentation—JJ complimented the NIH eRA Commons team for its excellent presentation to the EPMC. He also said that David Wright is now coordinating the communications efforts for the NIH eRA Commons.

**DHHS Meeting**—JJ met with Joe Alexander and Charlie Havekost to discuss and present ways for the agency to take advantage of the eRA platform. He said that Joe well understood the complexity of the eRA project, including budget and financing issues. JJ presented three models for working with DHHS and other agencies in regard to the eRA systems:

- Follow our business rules and come on at no cost. CDC would like to use our system but they don't understand the complexity.
- Customize the components for your own use at some cost. This would allow customizable features but the agency would pay for it and contribute their own team.
- Build upon the lessons learned of the eRA project but build an architecturally independent system. This was deemed not an option.

*Clinical Research*—Everyone agrees with the vision but not on how to get there. The overall, long-term goal is to have all clinical research in one database. The eRA project could contribute to this goal by helping out with the infrastructure and rolling out tools. However, this is going to proceed at a very low speed.

**BOG**—The board of governors meets on Wednesday, January 29, at which JJ will make a presentation about the eRA project. Last year there was some misunderstanding regarding the responsibilities of CSR and eRA so that monies were misallocated. Therefore, this year, JJ has prepared a document that clearly spells out the budget justification for FY 2004 and FY 2005.

Some of the key points of the budget report include:

#### FY 2004

- Funds to supplement its approved budget of \$33M for the following:
  - Restore funds mistakenly transferred to CSR.
  - Permanent increase in base to cover unfunded costs of migration to J2EE architecture, integration of LRP and QVR support.
  - Ten-percent contingency fund to cover unfunded mandates.

### **FY 2005**

- One-time equipment expenditure.
- Restore funds mistakenly transferred to CSR.
- Permanent increase in base to cover unfunded costs of migration to J2EE architecture, integration of LRP and QVR support.
- Ten-percent contingency fun to cover unfunded mandates.

The report also spells out the results in failing to increase the eRA budget.

JJ noted that the NIH has a shortfall of \$110M due to the construction of a new building. To cover this and balance the budget, there will be a manipulation of funds to cover expenses. Since this could clearly impact funding for eRA, JJ reiterated how important it is for those holding the purse strings to understand fully the implications in not providing the financial support this project needs. He has 15 minutes at the BOG to get across his point.

JJ will also make a presentation to the Executive Officers, which is being prepared by Carla Flora and Mike Cox. This presentation is intended to show them the rapid change in technology at the NIH: how we did business five years ago, how we do business today and how we anticipate doing business in four years.

Action: (Advocates/Analysts) Send 5–10 bullets that walk through the "5 years ago-today–4 years from now, how we do business" scenario for your areas. Due on Tuesday, February 4.

This presentation can then become the foundation for presentations at the eRA Symposium on April 30, which has a theme of *Institute of the Future*.

# **Commons Working Group Recap**

George Stone and David Wright

The Commons Working Group met on Wednesday, January 8, in Irvine, California, in conjunction with the Federal Demonstration Partnership (FDP). (The Federal Demonstration Partnership (FDP) is a cooperative initiative among federal agencies and institutional recipients of federal funds. It was established to increase research productivity by streamlining the administrative process and minimizing the administrative burden on principal investigators while maintaining effective stewardship of federal funds.)

George and David reviewed the agenda and key sections of the CWG meeting. The agenda for the meeting covered the following:

- eRA Status
- NIH eRA Commons
- Internet Assisted Review (IAR)
- Competitive Grants Application Process (CGAP)
- SBIR eRA Initiative
- Progress on Streamlining CGAP

JJ McGowan said that there was a good response from the CWG regarding the direction taken with the SBIR initiative. Also, as an update to this project, he said that the RAMS Company (John Rodman) already have a PDF form that is being used in a few institutions. Apparently, institutions are viewing this type of product as coming from the NIH but being released through an SBIR grantee company.

At the CWG meeting, Steve Dowdy (assistant director of Network and Information Systems, Office of Sponsored Programs, MIT) said that 10–12 schools already have established a common data set, which would be smart to leverage. They took the lead in establishing the data set when it was clear that the NIH was not. He said that there are many business tools and other applications in the extramural community that it might be good to identify and leverage.

The importance of the FDA being involved with NIH in the grants initiative was discussed and agreed upon. The FDP has written a letter asking the NIH and the FDA to get involved with the FDP.

Tim Twomey's report on the deployment schedule of the NIH eRA Commons was favorably received by the CWG.

Dan Hall provided the scope of the IAR. He emphasized that AAs won't need to take responsibility for IAR accounts because the permissions to IAR are linked to the NIH eRA Commons registration and profiles, which they do manage.

JJ Maurer presented a new "ticket" grant submission system, which was very well received. The timeline was deemed very realistic. The group wanted to be sure that there is compatibility with E-Grants. They were assured that E-Grants is on board with the direction of the eRA project. The 424 data set of E-Grants will be offered with the Adobe products and data stream, which SBIRs also can market to other agencies.

JJ McGowan asked whether or not grant applications now are available in IAR. Tracy Soto targeted next summer for them to be available. It was agreed, however, that until the grant applications can be accessed by a PDA, they should be made available on a CD for mobile access (working on a computer on a plane, for example).

## **Reviewer Meeting**

David Wright reported that four to five reviewers met prior to the CWG meeting to discuss the IAR and the NIH eRA Commons. Many issues were discussed. The viewpoints were interesting in that those in attendance had, at one time, been both an applicant and a reviewer. This was a very productive meeting.

# **Competitive Grants Application Process (CGAP) Update**

J.J Maurer

JJ Maurer presented the same CGAP update to the Project Team as at the CWG meeting. He reviewed and discussed the four phases of the CGAP development process.

- Phase 1: Standard XML documentation, technology and application receipt flow
- Phase 2: Application receipt and validation
- Phase 3: Business-to-government flow and interchange infrastructure
- **Phase 4:** Integration with bi-directional communications on IPF, PPF, FSR and other possible requests

He reviewed the timetable, which is not part of the eRA release schedule, and accomplishments thus far. He noted that the CWG was pleased with the timeline, saying it was very realistic.

JJ also reviewed the current, multi-source grant receipt structure. By October 2003, institutions will be able to submit grant data to the NIH through a service provider (SBIR application or service), Federal E-Grants broker, or 398 kit (the forms, which will be resident on the user's computer, will be submitted to the NIH at which time relevant data will be extracted, parsed and transferred to the database). In the future, if current federal plans come to fruition, all grants will be submitted to the NIH through a Federal E-Grants broker. However, in that plan, the Service Provider and 398 kit will still be in place but between the institution and the Broker instead of between the institution and the NIH.

JJ presented a way to eliminate the problems related to the rush to submit grant applications at the last minute, which is based on one-way communication—here is the due date, submit by then. This would put undue stress on our servers with so many last-minute applications being submitted. In his proposed scenario, when an institution is ready to submit, it communicates that to the NIH and is given an "e-ticket." This "e-ticket" assigns an accession number and a place in the submission queue. Later, the NIH signals for the institution download of its submission data. This process accommodates the reality of late submissions AND the need for a more orderly, less intensive electronic submission process.

One outstanding issue in regard to working with E-Grants is that E-Grants has not hired an integrator yet. There will be a briefing for Charlie Havecost in July.

The current status of the project includes:

Preparation of the Summary Report This week

Analysis of the XML data stream Behind schedule

List of issues Being prepared

## **Technical Architecture Capacity Roadmap for March 2003**

Brad Sachar

Jim Cain introduced this topic by saying that it was inspired by our discussion of the NIH eRA Commons at the last meeting. He thought the presentation was excellent but was puzzled by the subsequent discussion regarding open registration. Consequently, Jim concluded that the Project Team needed a good overview of the infrastructure that is being constructed for this project.

PI Access—The subject of how much PI access to the system is good was raised in that there was some feedback that lines of responsibility may be cut if the PI is allowed more access. Della Hann noted that the line of communication to the PI and then to the SO is not clear in the NIH eRA Commons. She suggested that it be clarified and communicated. George Stone commented that the system is being architected to give the institution the responsibility for determining how much access a PI has to the system. Being practical, JJ McGowan said that, in fact, sometimes we have to drive the PIs to drive the institution instead of the other way around to make the system and process changes necessary.

## Roadmap

Brad Sachar showed how the project is progressing to establish a foundation. He said that Operations is aggressively adding capacity and tools, all of which will come together at the March release. They are putting capacity and hardware-load balancing in the middle tier so that processing is transparent to the user as we increase traffic. In March, the NIH eRA Commons database will be gone and all of its data will be part of the IMPAC II database, which will then be called the *eRA database*.

Client-server tools, report servers, database server operating system and the application server operating system have been upgraded. The application server software and database server software are in the process of being upgraded. New servers are being added to the architecture. In March, there will be three additional servers and a load balancer in the production configuration and two additional servers and a load balancer in the development configuration.

In July, Operations will add a failover infrastructure server for external configuration and a failover infrastructure server for internal configuration for a scheme called *real application clustering failover*. This employs two servers. If one crashes, all processes move to the other server, which is transparent to the user other than a second or two of hangup. This brings a big change to the infrastructure—from a single box to a multi-box with failover and load balancing.

In summary, the technology upgrade provides a strong foundation for the infrastructure, providing:

- Single sign-on
- Stronger security
- Higher availability with less downtime

- Increased performance
- Increased J2EE functionality

## **General Discussion and Round Robin**

**Single Sign-on**—JJ McGowan wondered about the status of single sign-on. The impetus for this originated with the NIH Business System (NBS), which had several business applications, all of which required a sign-on. It clearly would be an advantage to access any of the applications after signing on to the system once. A pilot was launched. Although, technically, single sign-on isn't complicated for the eRA project, there are major issues with the data, i.e., authorizations and permissions. It will probably be 2004 before a unique grantee name across all eRA systems will be in place.

*Training Materials*—Jim Cain reported that he was not sure when PowerPoint demo slides would be available but that, instead, they are considering a demo Web site. Sherry Zucker said that one already exists. It's important all of the modules have a similar look and feel, and that they work together seamlessly. We must all work together on the prototypes and get them out.

Action: (Tim Twomey) Present a demo (go through an eSNAP) on the eRA Web development site at the next Project Team meeting.

**SQL Slammer Virus**—There was one laptop that was infected with this virus.

**Paper vs. Image**—Steve Hausman is working with the Office of Management Assistance to get approval for acceptance of an electronic grant application image as equal to a paper copy for processing and archiving purposes. He hopes to get approval soon.

*Magazine PR*—Steve Hausman reported that the scanning project was featured in the *Integrated Solutions* magazine, December 2002 issue (article attached). Steve's photo is on the cover of the magazine and he is widely quoted in the article.

Action: (Steve Hausman) Send *Integrated Solutions* magazine article on scanning project to Project Team.

*New Team Member*—Carla Flora introduced Sheri Cummins, the newest member of the OCO group. Sheri will work part-time and will provide meeting support to the eRA Project Team, Operations, and Management Communications meetings.

**eRA Symposium**—Carla will kick off the Symposium with a meeting immediately following the Project Team meeting today. All those interested in being part of the organization of the Symposium are invited to attend.

#### **Attendees**

Albrecht, Lyn (LTS/OCO)	Copeland Sewell, Zoe-Ann	Grandy, Vanessa (Z-Tech)
Austin, Patricia (OER)	(OER)	Hahn, Marcia (OER/OPERA)
Caban, Carlos (OER)	Cox, Mike (OER)	Hall, Dan (Z-Tech)
Cain, Jim (OER)	Erickson, Bud (NCI)	Hann, Della (OER)
Carter, Dave (OER)	Flora, Carla (OCO)	Hausman, Steve (NIAMS)
Collie, Krishna (RN Solutions)	Geaney, Stefanie (SOZA)	Martin, Carol (NHGRI)
	Gibb, Scarlett (OER)	Maurer, JJ (Ekagra)

McGowan, JJ (NIAID)		
Morton, Larry (OER)		
Morton, Pete (CIT)		
Panniers, Richard (CSR)		
Patel, Kalpesh (Ekagra)		
Pearson, Johnnie (Z-Tech)		
Sachar, Brad (Oracle)		
Seppala, Sandy (LTS/OCO)		

Silver, Sara (Z-Tech)
Silverman, Jay (NGIT)
Sinnett, Ev (CSR)
Snouffer, Anna (OD/OFACP)
Soto, Tracy (DEIS)
Spitzberg, Bobbi (OER)
Stone, George (OER/OPERA)

Tucker, Jim (OER)

Twomey, Tim (OD) Van Brunt, Virginia (LTS) Wallace, Patrick (LTS) Walker, Catherine (OER) Wilson, Mike (NGIT) Wright, David OPERA)