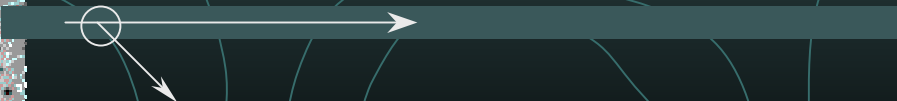# Looking at Shadows:

Finding Current Practices in IMPAC II Extension (i.e., "Shadow") Systems

Presentation Expectations

1. Who we are
2. How we got here
3. Project goals
4. Project benefits
5. Summary

Who We Are. . .
Agency for Healthcare Research and Quality (AHRQ)

- Is an HHS OPDIV that focuses on improving medical treatment for citizens

  "…the lead agency charged with supporting research designed to improve the quality of healthcare, reduce its cost, improve patient safety, decrease medical errors, and broaden access to essential services. AHRQ sponsors and conducts research that provides evidence-based information on healthcare outcomes; quality; and cost, use, and access."

Who We Are . . .
Xcalibur Software

- Delivers solutions and enhances service as a small business focused on health care and government systems, including solutions delivery
- Brings extensive experience with the:
    - National Cancer Institute (CTEP via CTIS)
    - Coalition of National Cancer Cooperatives
    - U.S. Navy
    - USAID
    - among others
- Retains an extensive knowledge of NIH through Nathan Faut, who formerly worked at NCI, CC, & CIT
    - Former lead for Special Services Team
    - At Team maturity, SST covered 12 ICs, 24 programs w/ 35 techs

AHRQ hired Xcalibur to survey NIH's IMPAC II shadow systems

- AHRQ recently adopted NIH's IMPAC II system
    - Used IMPAC I until the sunset date was announced, about two years ago
- AHRQ pulls its grants information nightly into an AHRQ specific shadow system, GIAnT
- Both IMPAC II and GIAnT lack specific capabilities that AHRQ requires to carry out its specific grants activities
    - Grants portfolio management
    - Uploading non-CSR-cleared grants
    - Matching fund tracking
    - Generating funding recommendation documents
    - Intramural grants tracking
    - Free text search

AHRQ is aware that many NIH ICs have shadow systems, a potential area to save in development costs

The project is a targeted survey, looking at:

- Reporting tools (CR, SQL, Access, Excel, ?)
- How the IC adjusts the extension sys. to master IMPAC II changes
- Does the extension system generate recommendation docs?
- Portfolio management of grants, including Congressionally mandated Moyer and FoS
- Does the extension system have free-text search capabilities?
- Unusual grants:
  - Co-funded (private, public, or other orgs)
  - Intramural grants
  - From other processes, i.e., uploaded to I-2 vs. processed at CSR first

We propose the following next steps –

1. Establish IC contacts and schedule appointments
2. Collect answers from interviewees
3. Integrate the information and write the final report for AHRQ and NIH use

How does this project benefit eRA and NIH?

- Provides a master survey of NIH ICs and the state of IMPAC II extension systems
- Permits extension system knowledge pooling and sharing through a single report
  - "All boats rise" effect – Encourages cross-functionality (use module A from IC A in system B at IC B), increasing usability across ICs
- The survey as it stands is being paid for by AHRQ

Thank You

- For further information or questions related to this project, contact:

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Questions . . . comments?