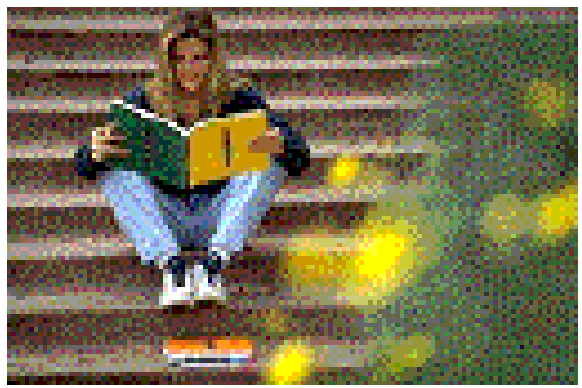
Expectations



IMPAC I and IMPAC II Requirements

- were originally designed for individual grant processing.
- and to provide reporting capability on each individual grant.

IMPAC I and IMPAC II Requirements

- At the time of these system's inception:
  - **other requirements were not obvious,**
  - **were being met by other systems, or**
  - **were developed internally by individual IC's as extension systems to meet local needs not defined by the NIH enterprise.**

eRA Vision in FY 2000

- post award administrative data for end-to-end electronic processing and reporting between research organizations.
- reexamine the business processes of grants management,
- the ability to link the outside applicant/grantee community with NIH staff in one common database,
- the ability to do business in an aggregate fashion rather than grant by grant.

eRA Vision Needs Re-examination

- the desire among NIH ICs to drop extension systems as eRA meets requirements that fulfill the enterprise need while maintaining flexibility on how they are implemented for each IC and functional area.
- the need to build into the enterprise reporting tools
- the desire by the NIH OD and the ICs to meet certain objectives for better data quality, system reporting tools and new objectives in defined by the current Road Map effort.
- the potential use of eRA as the system for all DHHS OPDIV's research grant, receipt, award, and processing.
- the potential use of eRA as the system for all grants within DHHS.
- the OPDIVs (AHRQ, CDC, SAMSA, HRSA, FDA and others) to meet requirements identified but not currently part of the enterprise at a minimal cost by having them built into the enterprise or adapting systems currently within NIH IC's or other OPDIVs.
- the migration of the data in legacy systems in the other OPDIV's to one common system.
- The new opportunities for reducing burden and increase efficiencies by having a common system used within the Department.

Examples of High Level Requirements

- A Scientific Initiative Management System (SIMS) – Provides the ability of IT staff to track every stage of an initiative from concept development to development of the early alert notification of an intiaitive that would be published in the the NIH Guide.
- A document generator (DG) for PAs and RFAs – a module integrated into SIMS that provides flexibility in the scientific write up and management design of an initiative that standardizes the appropriate language in law or policy for each OPDIV, so the initiative can be announced in the NIH Guide.
- Integration of the NIH Guide with eRA to link NIH Guide announcements with applications received, grants funded, scientific summaries and costs.
- Integration of the assurance process for animal and human protection into the Commons and the eRA database. This will reduce burden to applicants by providing one common reporting system and improving quality by sharing assurance data with contract and grant files.
- IC and OPDIV Enterprise Budget and Finance Reports – currently, extensive local manipulations of data are needed for trends analysis, average costs determinations, lmulti-year data analysis, budget under mechanism code analysis, and mapping by type to council. A Budget Data Module would provide simplified reporting that is standardized across the NIH (e.g., an RPG report, a RPG competing or non-competing reports)
- Reconciliation and data reporting between eRA and the financial systems.

Examples of High Level Requirements

- Development of a flexible workflow design that can be implemented by all ICs.
- Council Operations Module – module for use on an operational level to link in a continuum of the business process between program, grants management, and budget staff the results of peer review, pre-council reviews, council data, funding plans, and pay lists for decision making, giving managers key reports to monitor funds throughout the year within an IC.
- Integration of an electronic Contract Management System (eCMS) for research and development contracts into eRA, for review, award, tracking, and reporting of research activities across all mechanisms at NIH.
- Integration of knowledge discovery tools for better portfolio management and business intelligence tools for improving efficiencies in business processes.
- Development of an enterprise-wide coding system which establishes a meta layer that allows each IC to have its own set of coding system that maps into common elements defined by each OPDIV for system wide reporting and trend analysis.
- Development, as part of the Clinical Road Map effort, a system for use by the extramural research community for the reporting of adverse events using a common electronic interface between agencies that require the event be reported to them.
- Other requirements related to the Clinical Road Map effort that need to be integrated into electronic grants and contracts administration