Supporting Statement A for

Scientific Information Reporting System (SIRS):
An online reporting system for the collection of supplemental information to annual Research Performance Progress Report (RPPR) submissions

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A. JUSTIFICATION

Abstract:

This is an existing collection in use without an OMB control number. The Scientific Information Reporting System (SIRS) is an online data collection system whose purpose is to obtain supplemental information to the annual Research Performance Progress Report (RPPR, OMB# 0925-0002, Forms approved through 08/31/2015, currently under OMB review) submitted by grantees of the Institutional Development Award (IDeA) Program and the Native American Research Center for Health (NARCH) Program. The SIRS will collect program-specific data not requested in the RPPR data collection system. The data collected by SIRS will provide valuable information for the following purposes: (1) evaluation of progress by individual grantees towards achieving grantee-designated and program-specified goals and objectives, (2) evaluation of the overall program for effectiveness, efficiency, and impact in building biomedical research capacity and capability, and (3) analysis of outcome measures to determine need for refinements and/or adjustments of different program features including but not limited to initiatives and eligibility criteria. Data collected from SIRS will be used for various regular or *ad hoc* reporting requests from interested stakeholders that include members of Congress, state and local officials, other federal agencies, professional societies, media, and other parties.

A.1 Circumstances Making the Collection of Information Necessary

The National Institute of General Medical Sciences (NIGMS) at NIH houses two capacity-building programs with distinct mandates and missions that require the collection of supplemental information from grantees that are not reported in their annual Research Performance Progress Reports (RPPR) submissions. The two programs that are covered in this Supporting Statement include the following:

- Institutional Development Awards (IDeA)
- Native American Research Centers for Health (NARCH)

Prior to moving to NIGMS, the IDeA program was previously at the National Center for Research Resources (NCRR) and collected the supplemental information via an electronic system called the Annual Progress Report Scientific Information System (APRSIS). Since the move to NIGMS, supplemental information continued to be collected as part of the non-competing continuation (Type 5 award) paper submissions. As part of an Intra-Departmental Delegation of Authority (IDDA) and a Memorandum of Agreement (MOU) between the Indian Health Service (HIS) and NIH, annual progress reports, including any supplemental information, were collected from NARCH grantees by IHS then forwarded to the NIGMS program staff administering the program. Current NIGMS program staffs for the IDeA and NARCH programs were operating under the assumption that an OMB number was in place for the collection of supplemental information. Once the oversight was recognized, NIGMS staff has

been working closely with the NIH PRA office to ensure that the collection of information conform to the Paperwork Reduction Act (PRA).

A.1.1 Institutional Development Awards (IDeA) Program

The Institutional Development Awards (IDeA) program at the National Institutes of Health (NIH) was established by the Public Health Service Act, Title IV, Part A, Section 402 as amended by the NIH Revitalization Act of 1993 [P.L. 103-43, 6/10/93]. This authorization language mandated the creation of the IDeA program at the then National Center for Research Resources (NCRR) at NIH with the primary objective of broadening the geographical distribution of NIH funding for biomedical research. In January 2012, the IDeA program was relocated to the National Institute of General Medical Sciences (NIGMS) as required by the Consolidated Appropriations Act, 2012 ([P.L. 112-74, 12/23/11]) (amending the Public Health Service Act to transfer IDeA program authority from section 402 to section 461). Currently, institutions in 23 states[1] and Puerto Rico are eligible for funding from the IDeA Program.

The IDeA program currently supports and collects supplemental information on the following initiatives:

- *IDeA Networks of Biomedical Research Excellence (INBRE)*

The goal of the INBRE initiative is to enhance, extend, and strengthen the research capabilities of biomedical research faculty in IDeA states through a statewide program that links a research-intensive institution with primarily undergraduate institutions. INBRE supports institutional research and infrastructure development; research by faculty, postdoctoral scientists and students at participating institutions; and outreach to build science and technology knowledge in the states' workforces. In FY2014, NIGMS supported 24 INBRE awards.

- *Centers of Biomedical Research Excellence (COBRE – Phases I, II, and III)*

The goal of the COBRE initiative is to strengthen institutional biomedical research capabilities in IDeA states through three consecutive 5-year phases of infrastructure and faculty development of thematic and multidisciplinary research centers. In FY2014, NIGMS supported 112 COBRE awards.

- *IDeA Program Infrastructure for Clinical and Translational Research (IDeA-CTR)*

The IDeA-CTR initiative develops network infrastructure and capacity in eligible states to conduct clinical and translational research focused on health concerns that affect medically underserved populations and/or that are prevalent in IDeA states. IDeA-CTR awards support mentoring and career development activities in

[1] Alaska, Arkansas, Delaware, Hawaii, Idaho, Kansas, Kentucky, Louisiana, Maine, Mississippi, Montana, Nebraska, Nevada, New Hampshire, New Mexico, North Dakota, Oklahoma, Rhode Island, South Carolina, South Dakota, Vermont, West Virginia, Wyoming.

clinical and translational research. In FY2014, NIGMS supported 5 IDeA-CTR awards.

A.1.2 Native American Research Centers for Health (NARCH)

The Native American Research Centers for Health (NARCH) is an initiative of the Indian Health Service (IHS) working in full partnership with NIGMS/NIH to provide continuing awards to American Indian and Alaska Native (AI/AN) tribes and organizations for conducting research in their communities. The authorization for this Agreement is Public Health Service Act as amended (42 USC, section 241) and FY 2003 Appropriation Act (P.L. 108-5). The NARCH initiative supports partnerships of AI/AN Tribes, Tribal organizations or non-profit national or area Indian Health Boards, with institutions that conduct intensive academic level biomedical and behavioral research. The objectives of the NARCH initiative are the following:

- To encourage competitive research linked to addressing health disparities
- To develop a cadre of AI/AN scientists and health professional engaged in biomedical, clinical, and behavioral research that is competitive to National Institutes of Health (NIH) funding
- To increase the capacity of both research-intensive institutions and the AI/AN organizations to work in partnership to increase trust by AI/AN communities and people toward research.

These objectives are achieved by supporting research projects (including pilot projects), capacity building projects, biomedical student development projects, and faculty development projects developed by each NARCH partnership. In FY2014, IHS/NIGMS supported 19 NARCH awards.

A.2 Purpose and Use of the Information Collection

Data collected from SIRS will be used for various regular or *ad hoc* reporting requests from interested stakeholders that include members of Congress, state and local officials, other federal agencies, professional societies, media, and other parties.

Since their inception, the IDeA and NARCH Programs have both enjoyed a steady and strong interest by legislators indicating that they are high priorities. The IDeA Program has had a line-item budget in yearly Appropriations language from when it was established by Congress in 1993. Proof of high congressional interest in the program is The America COMPETES Reauthorization Act of 2010 (P.L. 111-358, signed 01/04/11) which directed the National Science Foundation (NSF) Director to contract the National Academy of Sciences (NAS) to conduct a study of the IDeA Program and all other programs in other Federal agencies that fall under the EPSCoR (Experimental Program to Stimulate Competitive Research) umbrella. The committee convened by NAS to conduct the study released their report on November 14, 2013. The conclusions of the report took into account outcomes data provided by IDeA Program Staff from information collected from grantees. As recently as March this Fiscal Year, staff members for

the IDeA and NARCH programs were asked to draft responses to Questions for the Record from the House Appropriations Subcommittee following a hearing on the NIH held on March 3rd.

As research capacity-building programs, demonstration of impact and success would include the following indicators: (1) biomedical research pipeline and workforce development, (2) development of biomedical research competence, (3) biomedical research productivity, (4) increasing biomedical research competitiveness, (5) biomedical research infrastructure and other resources development, (6) internal and external qualitative measures of program impact, and (7) significant scientific impact of the programs.

The Scientific Information System (SIRS) is an online electronic system that will collect the supplemental information to the RPPR submissions as Web Forms (Please see also **Attachment 1 [SIRS Data Elements] and Attachment 2 [SIRS Web forms]**):

A.3 Use of Information Technology and Burden Reduction

All information is collected electronically to minimize respondent time and burden. A Systems of Record Notice (SORN) and a Privacy Impact Assessment have been conducted by the NIGMS Privacy Officer and the NIGMS Information Systems Security Officer (ISSO). Two contractors serve as web administrator for this electronic system, one for operations and one for maintenance.

A.4 Efforts to Identify Duplication and Use of Similar Information

The SIRS electronic system will only collect supplemental information that are not already collected in RPPR. Currently, there are no other similar systems that collect the information at the NIH.

A.5 Impact on Small Businesses or Other Small Entities

The respondents are primarily biomedical research investigators and/or administrators. The submission process is not anticipated to have any impact on small businesses or other small entities.

A.6 Consequences of Collecting the Information Less Frequently

Each respondent has a specific annual submission date that coincides with their yearly RPPR submission deadline. Information will not be collected more or less frequently than once yearly.

A.7 Special Circumstances Relating to the Guidelines of 5 CFR 1320.5

The proposed data collection is consistent with 5 CFR 1320.5

A.8 Comments in Response to the Federal Register Notice and Efforts to Consult Outside Agency

The 60-day notice was published in the Federal Register (pp. 48549-48550, volume 80) on August 13, 2015. One comment was received within the 60-day period. Please see NIGMS 60 day public comment log.

No consultation with persons outside the agency was necessary to create or develop the content of any of the applications referenced herein.

A.9 Explanation of Any Payment of Gift to Respondents

No incentives, payments, nor gifts will be given to the respondents.

A.10 Assurance of Confidentiality Provided to Respondents

The web forms are in accordance with the provisions of the Privacy Act. The completed forms will be housed in databases and the information stored in servers maintained by the Information Resources Management Branch (IRMB) of NIGMS. Physical safeguards include maintaining the information in computers and servers that are password protected. Further, procedural safeguards include restricting access to files to individuals who have been instructed in the privacy Act requirements. Authorized users of the information are NIGMS Program staff overseeing the IDeA and NARCH programs. Records will be retained under the authority of the NIH Records Control Schedule contained in NIH Manual Chapter 1743, Appendix 1 "Keeping and Destroying Records" (HHS Records Management Manual, Appendix B-361), item 2300-320-2(a). We certify that the information collected complies with the Privacy Act of 1974 and OMB-Circular A-108 "Responsibility for the Maintenance of Records about Individuals by Federal Agencies". NIH Privacy Act Systems of Record Notice (SORN) 09-25-0036 entitled *"Extramural Awards and Chartered Advisory Committees (IMPAC 2), Contract Information (DCIS), and Cooperative Agreement Information, HHS/NIH"* was last published in the Federal Register, Vol. 67, No. 187/ September 26, 2002, pages 60742-60784.

Each online submission will be reviewed and evaluated for completeness by the assigned IDeA or NARCH program staff. A disclaimer notice in the web forms is prominently displayed indicating that the information provided is strictly confidential.

The Performance Work Statement for the contractors that host and maintain the database has been reviewed and approved by the NIGMS/IRMB.

A.11 Justification for Sensitive Questions

Sensitive questions are not included in these applications. Such questions are not required for the evaluation of progress by grantees in meeting Program Goals and Objectives.

A.12 Estimates of Hour Burden Including Annualized Hourly Costs

The estimated number of respondents in the table below (Table A.12-1) is based on the numbers of grantees for each initiative in FY2014. The number of respondents may vary slightly annually depending on the number of successful competing new and continuing applications for the different initiatives. The average burden hours per response was determined by calculating the estimated times for completing the different web forms (see **Attachment 3 [SIRS Web Forms Time Estimates]**). The estimated total burden hours incurred by all respondents is about 613 hours.

A.12-1 Estimates of Burden Hours

Respondents	Estimated Number of Respondents	Number of Responses per Respondent	Average Burden Hours per Response	Total Annual Burden Hours
Principal Investigators, COBRE Phase I	37	1	3.5	130
Principal Investigators, COBRE Phase II	36	1	3.5	126
Principal Investigators, COBRE Phase III	35	1	3.5	123
Principal Investigators, INBRE	24	1	5.5	132
Principal Investigators, IDeA-CTR	5	1	3.5	18
Principal Investigators, NARCH	19	1	4.5	86
TOTAL	156	156		615

The annualized costs to respondents (Table A12-2) was calculated using the 2012-2013 annual salary figures reported by The College and University Professional Association for Human Resources (CUPA-HR) for Full Professors in the Biological and Biomedical Sciences, the typical academic appointment of the Principal Investigators. Hourly wages were calculated assuming a 40-hour work week. The estimated total annualized cost incurred by all respondents is $28,279.

A.12-2 Annualized Cost to Respondents

Respondents	Estimated Number of Respondents	Number of Responses per Respondent	Average Burden Hours per Response	Hourly Wage Rate	Respondent Costs
Principal Investigators, COBRE Phase I	37	1	3.5	$46	$6,070
Principal Investigators, COBRE Phase II	36	1	3.5	$46	$5,906
Principal Investigators, COBRE Phase III	35	1	3.5	$46	$5,608
Principal Investigators, INBRE	24	1	5.5	$46	$5,980
Principal Investigators, IDeA-CTR	5	1	3.5	$46	$855
Principal Investigators, NARCH	19	1	4.5	$46	$3,860

A.13 Estimate of Other Total Annual Cost Burden to Respondents or Record Keepers

There is no additional cost burden to the respondents or record keepers.

A.14 Annualized Cost to the Federal Government

The annualized cost to the Federal Government for the proposed data collection effort is estimated to be approximately $56,954.

Item	Salary	Fringe Rate	% Effort	Annualized Cost
SIRS Project Oversight Officer - GS13-10	110,000	20%	3.5%	4,620
2 in-house contractor staff	190,000		15%	28,500
Maintenance Costs for the electronic system, non-labor				12,961
Other Contractual costs for maintaining SIRS, non-labor				5,673
Other costs, non-labor				5,200
Total				56,954

A.15 Explanation for Program Changes or Adjustments

This is an existing collection in use without an OMB control number. Current NIGMS program staff for the IDeA program was operating under the assumption that an OMB number was in place for the collection of supplemental information which started when the program was previously at the National Center for Research Resources (NCRR). Once the infraction was recognized, NIGMS staff has worked closely with the NIH PRA office to ensure that the collection of information conform to the Paperwork Reduction Act (PRA).

A.16 Plans for Tabulation and Publication and Project Time Schedule

Submissions of supplemental information are only for internal use by NIH Program staff for assessing and evaluating the progress of grantees towards achieving program goals and objectives. There are no plans for statistical analyses of the collected information for publication.

The time schedule for evaluating submissions will be as follows:

A.16.1 Time Schedule

Activity	Schedule
SIRS sends reminder notification to Principal Investigators for online submission of data	One month before RPPR submission deadline (or 3 months before the end of the current budget/reporting period)
Electronic submission period	90 - 30 days before the end of the current budget/reporting period
SIRS sends 2nd reminder notification to PIs that have not completed online submission	15 days before electronic submission deadline
Electronic submission deadline	30 days before the end of the current budget/reporting period
Programmatic evaluation and final approval of submissions	8 - 2 weeks before the end of the current budget/reporting period

A.17 Reason(s) Display of OMB Expiration Date is Inappropriate

OMB number and expiration date will be displayed prominently on the electronic web form pages.

A.18 Exceptions to Certification for Paperwork Reduction Act Submissions

This information collection adheres to the provisions of the Certification Requirements for Paperwork Reduction Act submissions. No exceptions are requested.