

CGAP

Competitive Grant Applications Project

Approach and Models

01/08/2003



Major Phases

- **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 potentially other requests

Phase 1: Applications Only



- Analyze and document the e-application standard
- Submit for comments
- Define the technical architecture for
 - Receiving
 - Storing
 - Integrating e-apps into the NIH business flow
- Define the business flows to process e-Apps

Phase 2: Receipt of e-Applications

- Define and implement the transaction receipt and format validation
- Prototype and **TEST** the receipt function with external partners
- Define downstream impact of e-Applications
- Integrate feedback from comments and tests

Phase 3: Applications and B2B

- Define the business to government interchange
- Define and prototype error and change processing for e-Applications
- Define and prototype acceptance and referral by NIH
- Define and prototype registration, delegation of authority, security
- TEST the Application receipt
- PILOT a limited set of live applications

Phase 4: PPF, IPF integration

- Implement changes in business processes downstream from Receipt and Referral
- Define and implement PPF, IPF bi-directional transactions
- Define a receipt stream for FSR, eSNAP
- Construct the production quality systems for e-Applications
- TEST exchange with external partners
- Prepare for production release of CGAP
- PILOT with gradual increase in volume

Target Time Table



- **Phase 1: Now to end of January 03**
 - Standard XML documentation, technology and application receipt flow
 - *Inception, tech architecture and analysis*
- **Phase 2: February – April 03**
 - Application Receipt and validation
 - *Build and test the receipt of XML stream*
- **Phase 3: May – July 03**
 - Business to Government flow and interchange infrastructure
 - *Complete Design and build B to Gov exchange*
 - *Pilot*
- **Phase 4: August – November 03**
 - Integration with bi-directional communications on IPF, PPF, FSR and potentially other requests
 - *Build out the integrated system for e-Applications : Test and Gradual introduction*

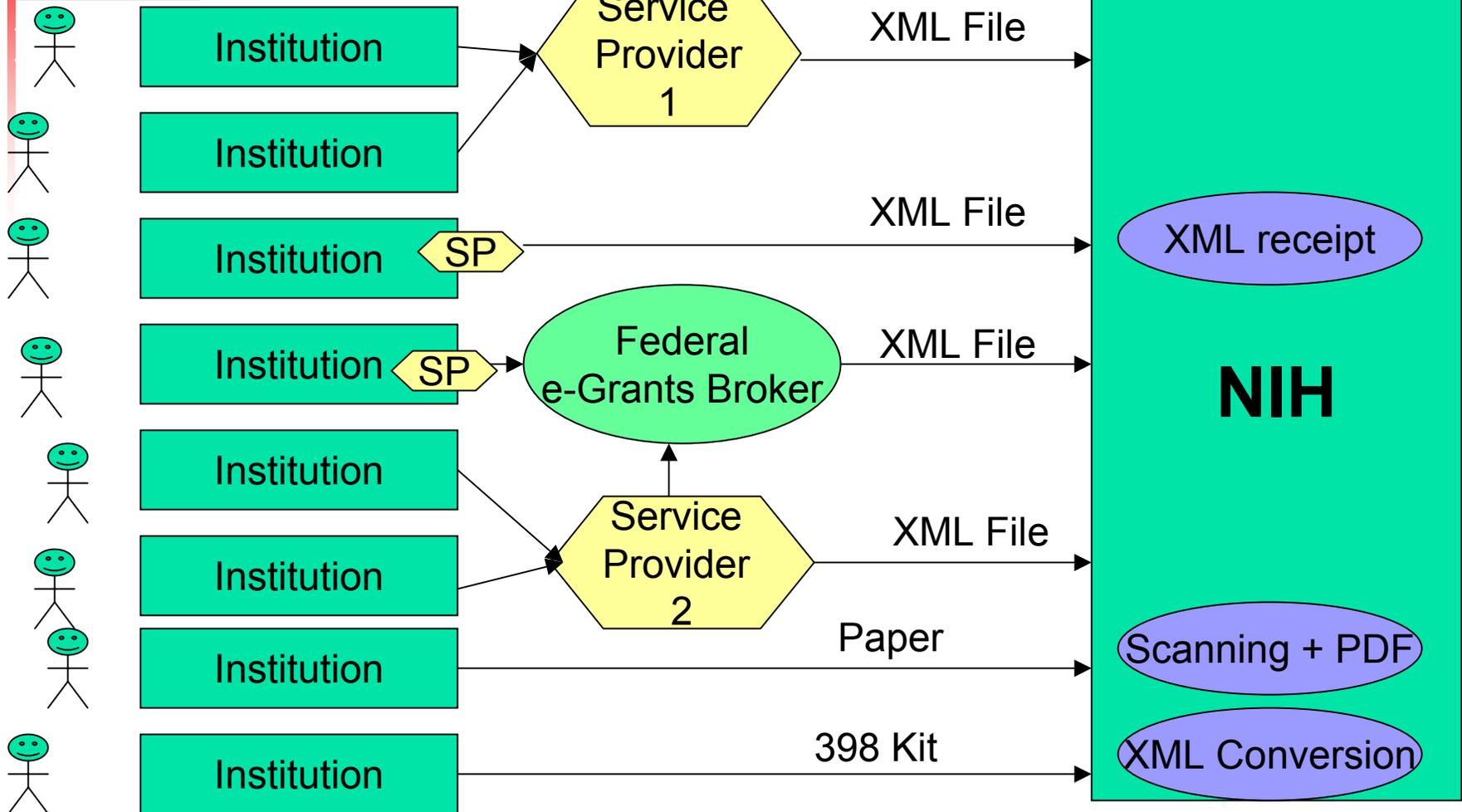
Short term Actions

- 
- More detailed plan under development
 - Activated the focus group for e-Receipt and Referral
 - List internal issues to be addressed
 - Activated the SBIR listserv and communicate approach
 - Technical solution for packaging, transport and storage of XML + Docs started
 - Resources assigned
 - Test hardware procured, received, to be configured

Receipt and Exchange Models

- Receipt Sources
 - Current model
 - Future model
- Exchange architecture
 - One-way communications versus
 - Exchange protocol
- Critical architectural decision

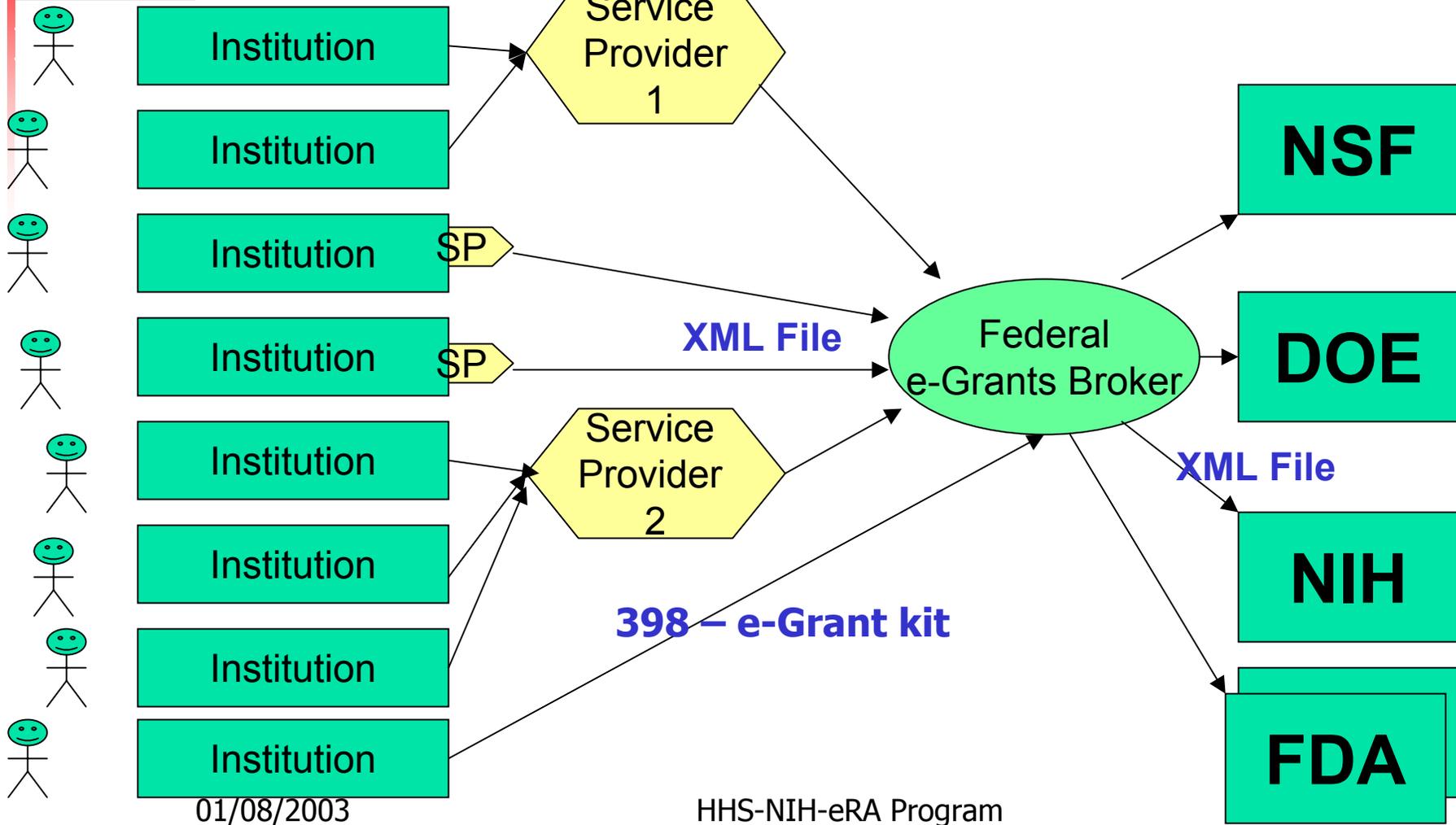
Current: Multi-Source Receipts



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HHS-NIH-eRA Program

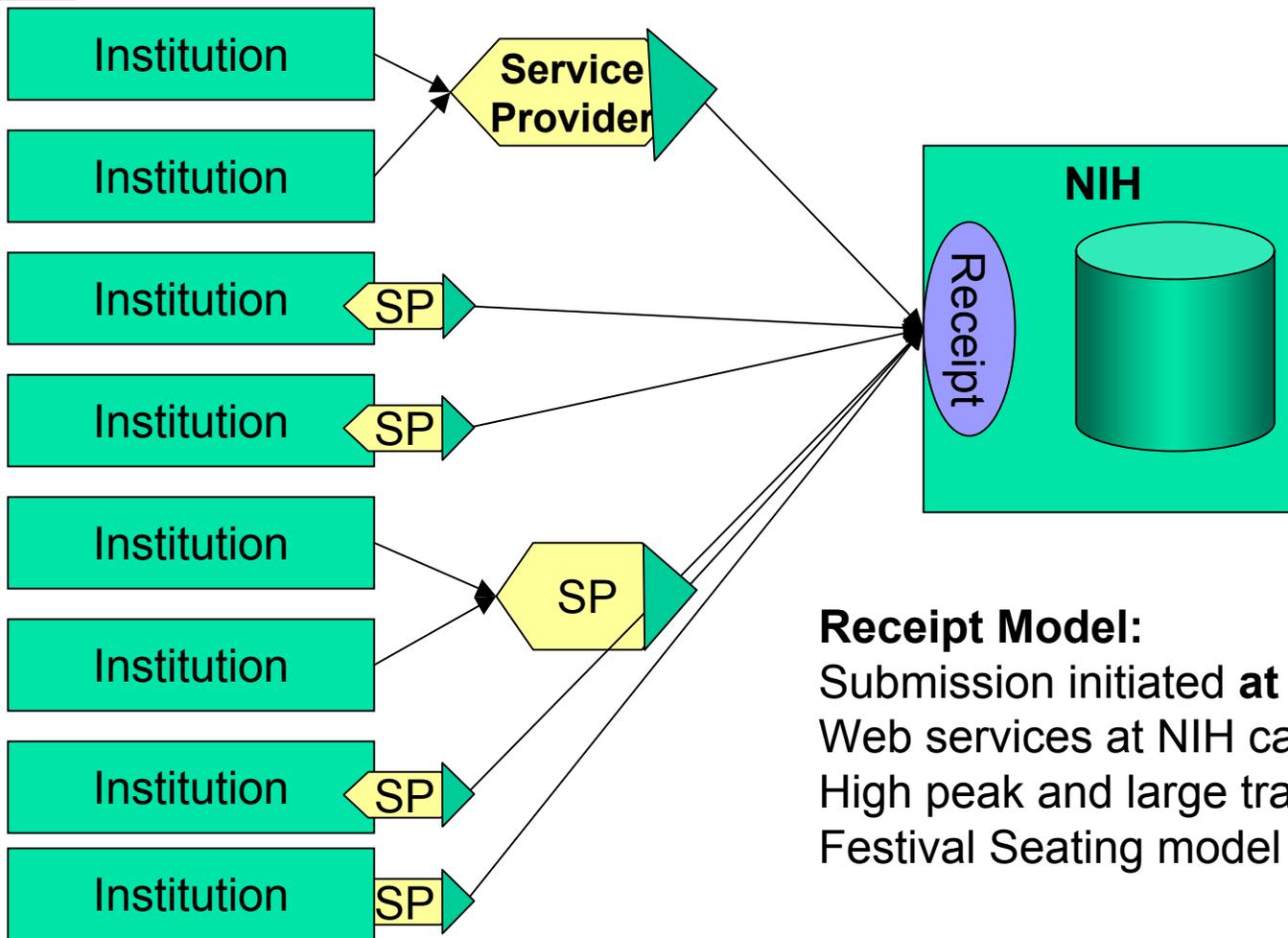
Single Source Receipt for NIH



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HHS-NIH-eRA Program

One-way Communications



Receipt Model:
Submission initiated **at will** by SP
Web services at NIH called by Submitter
High peak and large transactions
Festival Seating model ?

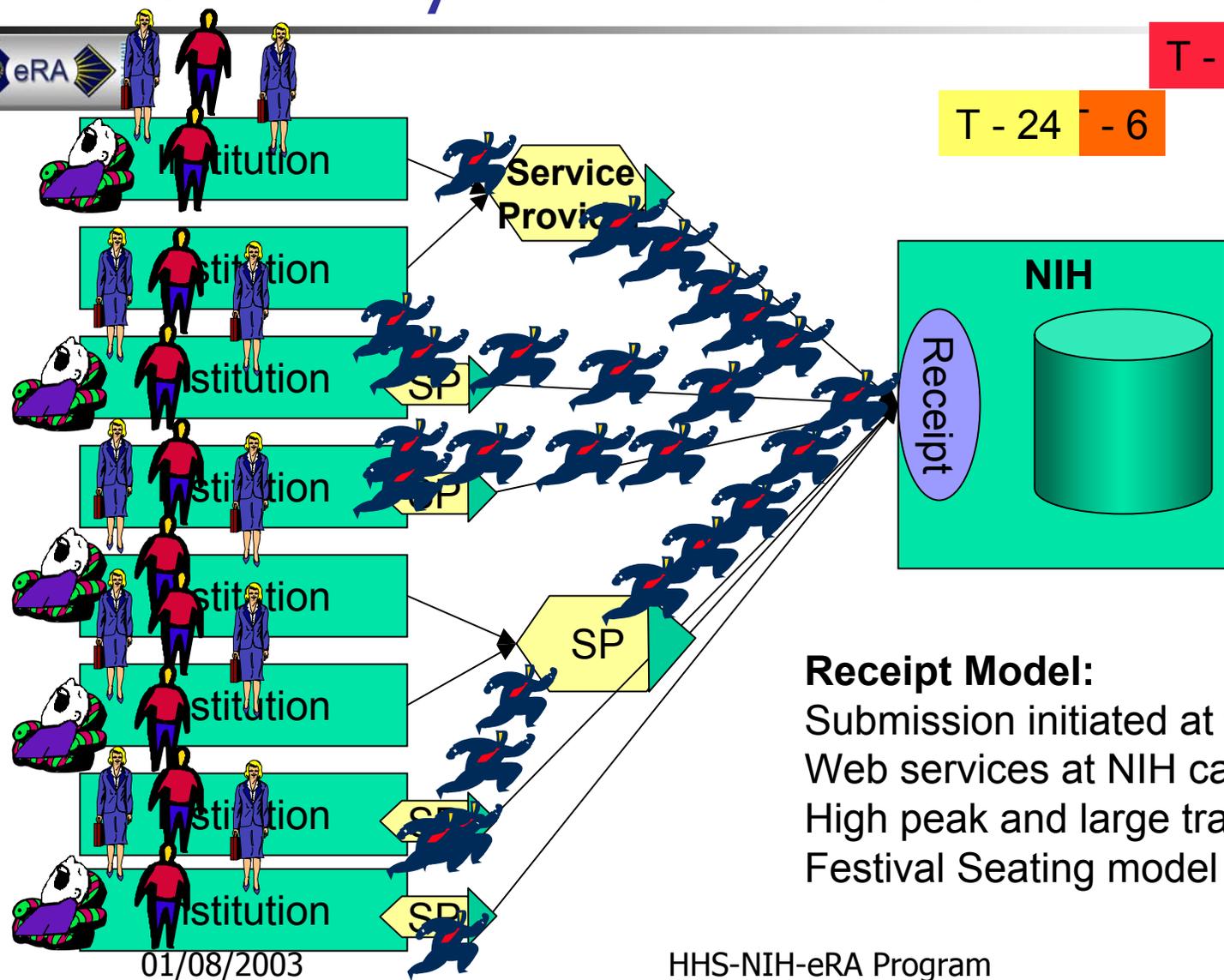
One-way Communications

Commons



T - 2

T - 24 - 6



Receipt Model:
 Submission initiated at will by SP
 Web services at NIH called by Submitter
 High peak and large transactions
 Festival Seating model ?

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"Ticket" Process



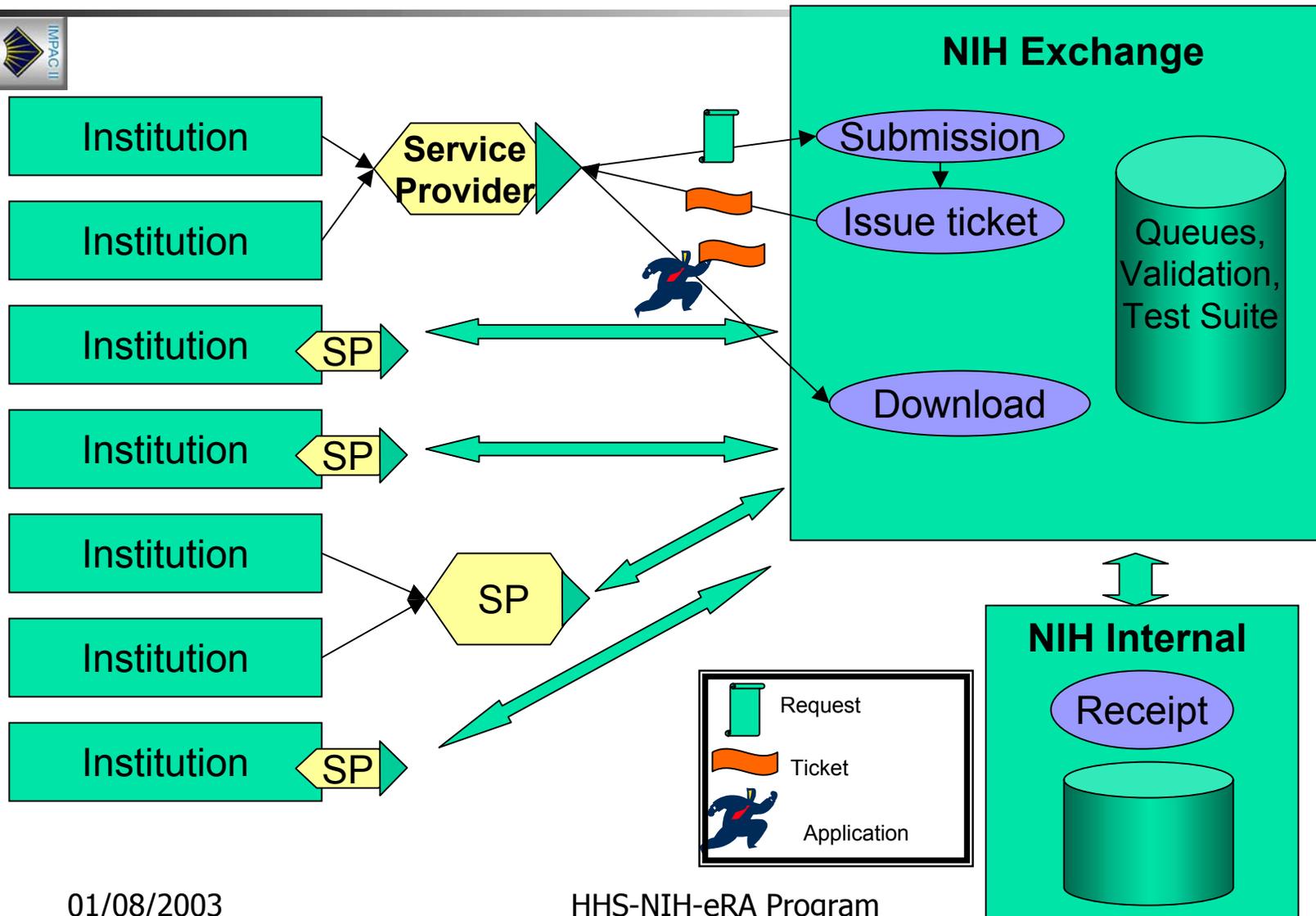
SUBMISSION

- Request for submission issued with application identifier and file characteristics
- NIH issues an accession number and a place in queue
- NIH records submission request and file characteristics

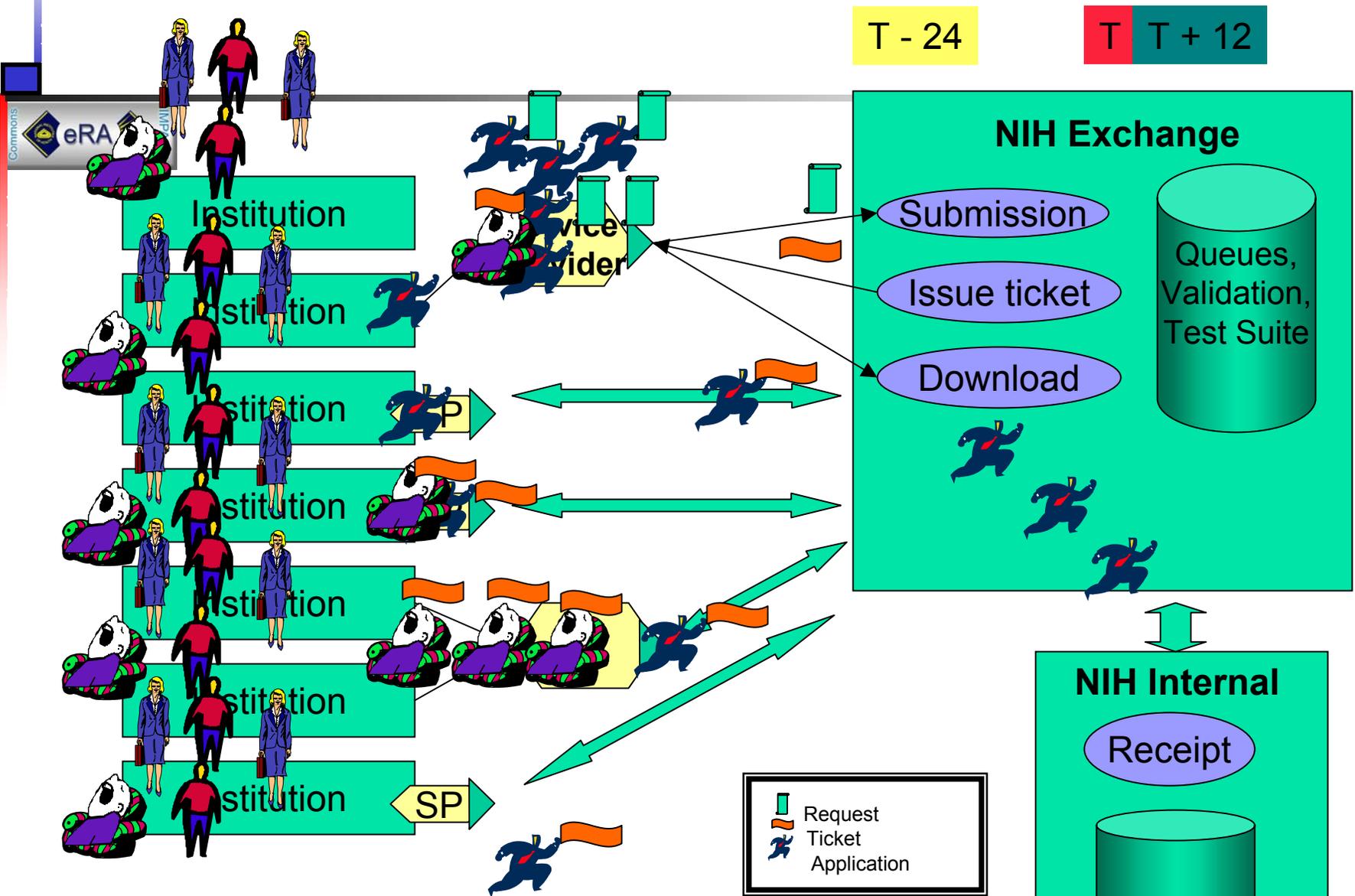
LATER

- NIH signals for download
- SP sends file or NIH gets it
- NIH processes file

"Ticket" Process



"Ticket" Model



T - 24

T T + 12

Exchange



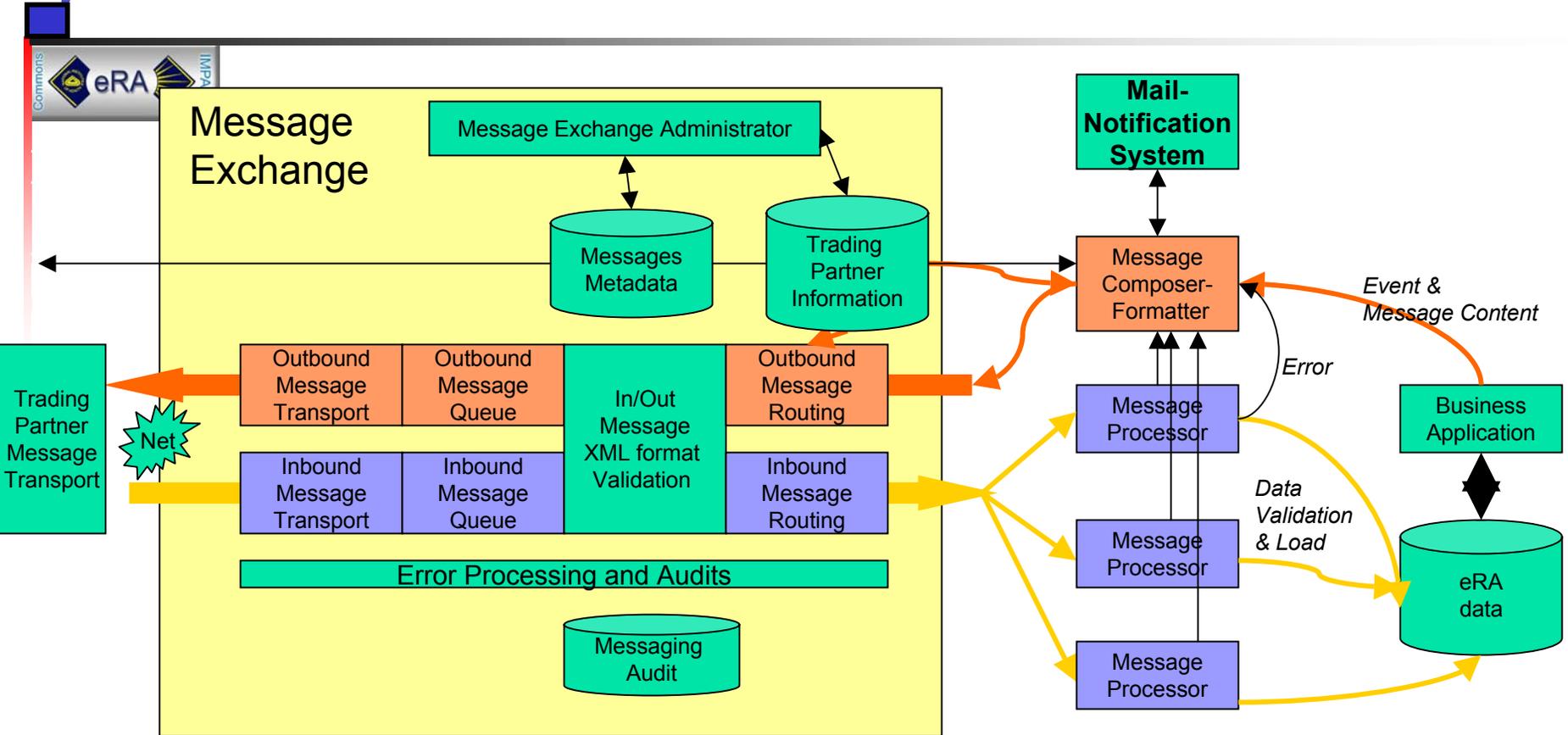
- Two-way communications
- A protocol to send and receive messages
- A “Hand Shake” computer to computer
- Controlled transfer of the large transaction

Messages-Web Services



- A message is an XML file sent and received by a computer
- A message may have attachments
- Each message type has its own XML schema and workflow paths
- Example Message Types are:
 - Form 398 with PDF project plan and CV attachments
 - Appendices to a Form 398
 - Request for submission of 398
 - Queue ticket
 - Notification of receipt of XML file
 - Notification of acceptance of application by NIH
 - Notification of IRG and IC assignment
 - FSR, eSNAP, Profile Submission
 - Protocols
 - and so on

Functional Components of the Exchange



Components



- Trading partner agreement
- Message transport
- Message queues
- Message validation
- Message metadata
- Trading partner database
- Message content processors
- Notification, audits, error processing

Issues



- Approach not validated with E-Grants
- Each service provider must have a listener
- Each service provider must write the interfaces to their own systems and NIH exchange
- Standards may change
- Protocol and technology not defined
 - SOAP with attachments ?
 - ebXML? Or JAX APIS, COTS product ?

Major Tech Drivers

- Avoid a huge peak a few times a year
- Minimize footprint at the service provider site
- Pick a standard that may be stable
- Look ahead for B 2 G interchanges and other transactions

Advantages of exchange



- Commercial models exists
- Lots of standard components exists
- No huge peak load problem to solve
- Generalized interface suitable for streamlining all exchanges
 - Post receipt processes can be automated
- Could be kept relatively simple and nimble

Questions to audience



- Is it feasible ?
 - Can NIH send a message, computer to computer, to an institution or service provider and expect an answer (not e-mail) ?
 - Will Institutions or SP write interfaces in a specific protocol or using a set of Web services ?

Question about **applications** transfers

- **Model 1:** *Submitter says: Here it is, go get it when you are ready*
 - With submission Service Provider (SP) indicates where the file is. Later NIH initiates transfer.
- **Model 2:** *NIH says: Its your turn, give it to me*
 - When place in queue is reached, NIH requests transfer and SP initiates transfer (synchronized).
- **Model 3:** *Submitter asks: Is it my turn yet ? OK here it is*
 - SP polls the NIH exchange for place in queue, when green light then SP initiates transfer.
- **Model 4:** *NIH gives a time frame for download with the ticket*
 - When ticket is issued, the NIH provides a time slot in which the application is scheduled to be transferred. The SP will download in that time frame or lose the place in queue

Current Status (Jan 03)



- Preparation of a Summary report: Feb. 3, 2003
 - Analysis of suitable technologies
 - Processing steps for receipt of applications
 - Proposed technologies for
 - Packaging, Transport of message
 - Exchange architecture
- Analysis of XML stream
 - Approach for handling core and non-core elements
 - Data element analysis, cross walk to 194, 424, 398, IMPAC II
- List of issues, action items and resolutions

Short term steps

- Publish the draft approach
- Request comments
- Work out and document the business rules for receipt, referral and review for e-applications for the Pilot
- Complete and publish the XML schema and SOAP envelope specification