

Is a Shared Research Administration Model Right for You? Exploring a Collaborative, Creative, and Contemporary Approach to Research Administration

SRAI Annual Meeting

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Duke University School of Medicine

Deborah Martin, Grants and Contracts Manager

Chelsea Penumarthy, Grants and Contracts Manager

Dana Sanders, Director, Research Administration

Objectives

- Be able to identify when an opportunity for a shared services model can work at your institution
- Engage in an example of the creation of a shared services model at Duke University
- Understand challenges of a shared services model
- Understand the institutional benefits of a shared service model
- Identify opportunities to recruit employees into a shared service model





What is your role at your institution?



Does the majority of your staff (or you) do pre-award, post-award, or both?

Pre-Award

Post-Award

Both

Who do your staff report to?

Faculty

Administration



What is your type of institution?

Duke School of Medicine

- \$1.3 billion annual revenue (excludes clinical practice)
- ~ 70% of budget from sponsored funds; above 75th percentile among research intensive schools
- Ranked 9th in NIH grant funding (\$384M)
- Ranked 13th in USNWR
- ~2,400 regular rank faculty and 7,000 staff
- 37 departments, centers, institutes reporting to Dean
- 2 million sq. ft. of total space
 - 1.1 million of research space



Institutional Environment

- School is decentralized in nature
- Research Administration Environment
 - Central Offices
 - Decentralized grant preparation
 - Centralized review and signoff



Challenges with the Environment

- PIs work across disciplines, schools, and centers
- Large volume
- Diverse sponsors and projects
- Standardization with research administration procedures
- Little career growth opportunities within departments



What is RASR?

- Research Administration Support Resource
- Centralized administrative unit reporting to the Dean's office
- Short-term and long-term support
- Cradle to grave, portfolio driven support
- All sponsors
- All funding mechanisms



The Start of RASR

- SOM leadership was a driving force
 - Room for efficiencies, communication, risk management, training opportunities
 - Oversight group includes leadership from many areas
- Departments/Centers *volunteered* to participate
- Diverse recruitment strategies
- Expansion came quickly
- Expectation of cost savings?



Growth of RASR Team

Administrators



Management



Growth of RASR Team

Administrators

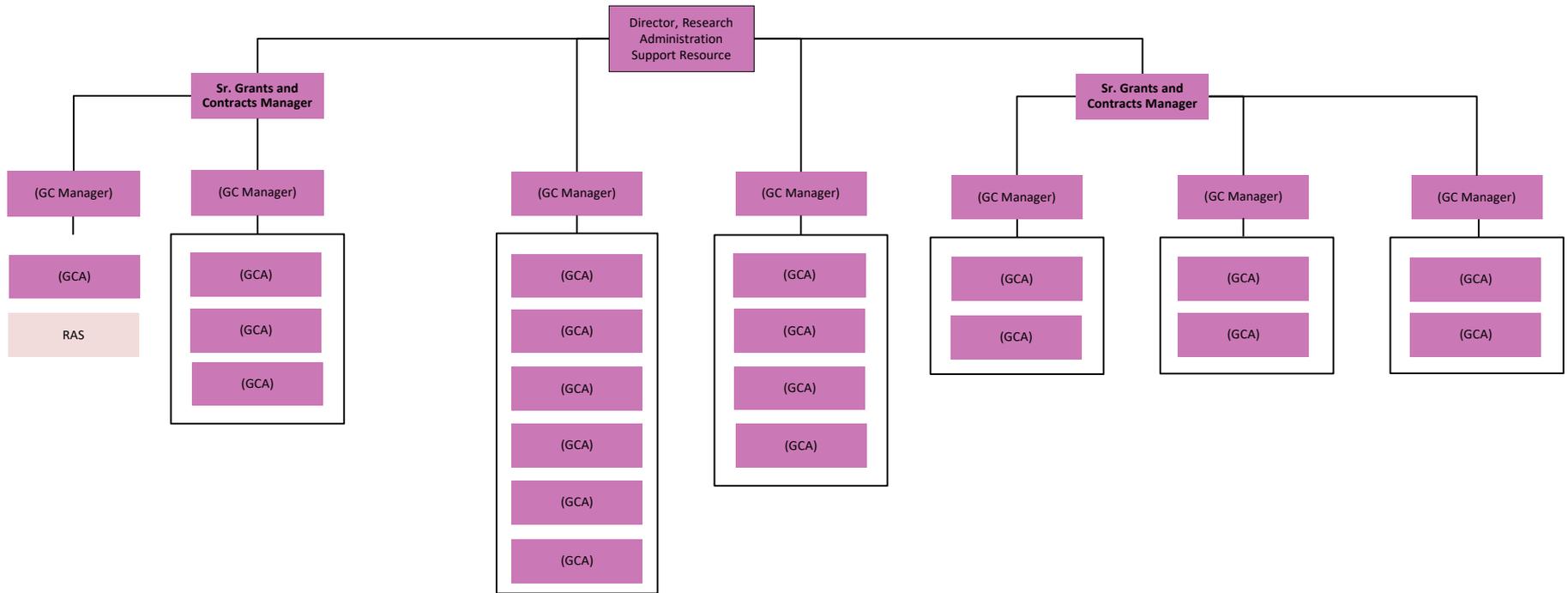


Management

- Radiology
- Institutional Awards
- Orthaopaedic Surgery
- Dermatology
- Neurology
- Center for Comput. Biology
 - Biostatistics
 - Pathology
 - Heart Center
- Family Medicine
- Marcus Center
- Neurosurgery
- Population Health
- OB/GYN
- Radiation Oncology



What does RASR look like now?



Why this model works

- Commitment to consistent, high level customer service
- Managed expectations
 - Departmental
 - RASR team
- Development of relationships
 - Departments
 - Faculty
- Community of administrators
- Portfolio and Project Management



How do we know it works?

We see it...

- Improved metrics
- Consistency in portfolio management
- Increased compliance/reduction of risk
- Increased demand from departments



FY17Q2

Research Administration						
Regular meeting with ORA leadership	Annual (with 2Q status update to be provided)					
Grant Quality - Return for Changes	Green = <20% returned for RFC changes; Yellow = 21-40% returned for RFC changes; >40% returned for RFC changes					
Clinical Research - Internal Cost Assessment (ICA)	Green = achieving at least 3 out of 4 quality metrics on sample; Yellow = none; Red = <3-4 completed		n/a	n/a		n/a
FAM Sample Validation (restricted codes)	Percentage of sample validated each month in quarter (restricted funds only)	n/a	n/a	n/a	n/a	n/a
Untimely Non-Salary Cost Transfer	90% submitted on time = green; <10%, 1 untimely = yellow; >10% untimely or >10% >2 untimely = red					
Closeout Backlog	0 codes >120 days = green; 1-4 codes >120 days = yellow; >4 codes >120 days					
Information for FY17						
Non-Salary Cost Transfers to Total Transactions	<15% = green; 15%-25% = yellow; >25% red					
Grant Waivers	<10% = green; 10%-20% = yellow; >20% = red					
Unapproved CAS Charges	<10% = green; 10%-25% = yellow; >25% = red			n/a	n/a	n/a
FAM Error Analysis				n/a	n/a	n/a
Closeout - Clean Close Achievement	Clean Close Timelin <5% = green; >5% and <10% = yellow; >10% = red					n/a
	Late Activity Payroll 0 = green; 1-3 = yellow; >3 = red					



FY19Q3

RASR Metrics FY18/19	Pass Criteria	RASR YTD-2018	Baylor			Orthopedics			Dermatology			Neurology			GCR			Pop Health			M&D			Pediatrics			
			10/18	11/18	12/18	10/18	11/18	12/18	10/18	11/18	12/18	10/18	11/18	12/18	10/18	11/18	12/18	10/18	11/18	12/18	10/18	11/18	12/18	10/18	11/18	12/18	
Research Administration																											
Closeout: Past Due	<ul style="list-style-type: none"> ≥ 95% reportable codes submitted on or before the closeout due date. Exclusions: <ul style="list-style-type: none"> • Pending extensions/modifications • PI Transfers • Sponsor and other institution decisions (extensions, modifications, reporting) • Shortened deadlines (sponsor due date within 30 days of closing WISSI end date) 			L	G	G	L	G	F	S	G	G	G	L	F	G	G	G	F	G	G	G	G	F	L	G	
Closeout: Effort/Payroll	<ul style="list-style-type: none"> 100% effort/payroll cost distribution changes for all reportable sponsored projects are completed in a timely manner. The objective is to ensure that no additional salary and fringe benefits post after the WISSI end date. Measure is of outstanding effort/payroll for any individual belonging to org unit, regardless of ownership of the ending WISSI(s). Exclusions: <ul style="list-style-type: none"> • Pending extensions/modifications • PI Transfers • Sponsor and other institution decisions (extensions, modifications, reporting) 			G	G	G	F	G	F	G	G	G	F	F	G	G	G	F	G	G	F	G	F	G	F	G	
Clinical Research - Patient Care Charge Financial Reconciliation and Validation	RESTRICTED (Close = 100%, Value = 95.00%, Eff = 100%)			G	G	G	N/A	N/A	N/A	N/A	N/A	G	G	G	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	
	UNRESTRICTED (Close = 100%, Value = 95.00%, Eff = 100%)			G	G	A	G	F	F	A	G	F	F	F	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	
Finance/General Management																											
FAM Sample Validation	<ul style="list-style-type: none"> ≥95% of sample validated for each month by deadline in quarter (restricted funds only); must complete each month by deadline in at least 11 out of 12 months 			G	G	A	F	F	G	G	F	F	F	F	F	F	F	F	F	F	F	F	F	F	F	F	
FAM Error Analysis	<ul style="list-style-type: none"> Sample sizes expanded for 100% of failed samples (transaction category error rate > 15%, restricted funds only) by monthly deadline 			N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	G	N/A	N/A	N/A	N/A	N/A	G	G	N/A	N/A	N/A	N/A		
Information for FY19																											



How do we know it works?

We hear it...

- Positive feedback directly from faculty
- Enthusiasm from departments over improved collaboration
- Appreciation from school leadership over increased transparency with research administrators



"I don't have enough words to tell you how much we all appreciate your efforts to keep us on track with your responsiveness, patience and of course great professionalism while working with our team within this timeframe"

"Let me just say that I love Mark Ferguson and his energy. This is a homerun. Go with it. Thank you Mark."

"I'd like to let you know that I've had a fantastic experience working with LaMonda during this cycle's submission of an R21 and R03. She is efficient, quick to respond and has truly improved the processes for DPT within Orthopaedics."

"Ashley, Thank you for working on this. You've been extremely helpful and committed."

"I cannot tell you how much I appreciate all the help. It takes a true team effort to get these grants, and without your help, this would not be possible."

"I have been extremely impressed by how quickly LaMonda has driven to get things done in a professional manner, and the fact that she always has a positive attitude."

"WOW – we are so thankful to have Kristie."

"Whitney, thank you so much for being on top of things! It's a pleasure to work with you."



How do we know it works?

We feel it...

- Greater understanding of and appreciation for the mission of the University
- Increased collaboration
- Genuine internal support network
- Enhanced skill development
- Reduced frustration
- Decreased burnout
- Professional Development opportunities



External Challenges

- Managing departmental expectations
- Defining roles and responsibilities
 - Execution of “Service Level Agreement”
- Easing fears of a “centralized model”



Internal Challenges

- Rapid departmental growth
 - Recruitment
- Onboarding
- Timing
 - Weeks to months between initial request for help and ability to provide help
- Vast span of Research Administration workload
 - Can we possibly master it all?
- More Complex Portfolios



Lessons Learned

- Infrastructure
 - Must be a school or organizational initiative
 - Due to growth of group, needed more managers than we initially thought



Lessons Learned

- Recruitment
 - Specialized recruitment without taking away from current Duke resources
 - Identified talent from other institutions
 - Research Administration Fellowship program
 - Open to recent college graduates with an interest in the research field
 - Promote from within



Lessons Learned

- Recruitment
 - Don't fill position with less than ideal candidate
 - Hiring multiple staff at once helped create a cohort approach to onboarding
 - Onboarding needs to be dispersed among management
 - Mix of backgrounds, levels of experience, and internal/external recruits was beneficial



Lessons Learned

- Culture
 - Heavy team building
 - Collaboration between RASR staff
 - Collaboration and proximity with Central offices
 - Professional growth opportunities
 - Variety of work resulted in increased collaboration



Lessons Learned

- Intentional distribution of resources
 - Dispersed this responsibility among management
 - Different approach to large vs. small clinical departments
 - Project management approach for complex portfolios





What are your questions?

Top