Building a Research Administration Infrastructure at the Department Level

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Abstract
Due to the current economic crisis, research administrators at public universities are grappling with declining state funding and are faced with identifying other potential sources of revenue to support operations. Research administrators at all levels are forced to do more with less. Department level research administrators must be innovative since they have the least control over distribution of resources, including fiscal, staffing, and space. They must be adequately trained to deal with periodic shifts in the centralization and decentralization of duties that result from fiscal uncertainty and leadership changes. Therefore, strategically planning to accommodate department level assistance for its faculty who are engaged in or are pursuing extramural funding has become imperative. This article discusses a public university department’s initiative to support both its faculty and the central administrative office by attempting to reduce administrative burdens. This was accomplished through increasing self-sufficiency of department-level research administration staff via professional development efforts and engaging in collaborative efforts with other departments and the central administrative office.

Keywords: research administration, departmental research administrator, management
Introduction

Doing more with less has been the norm for research administrators (e.g., Drummond, 2003; Hexter, 1998; Kirby, 1996; Morris & Hess, 1991; Schweri, 1992). Shambrook & Mintzer (2007) noted that given considerable intellectual demands and tight deadlines, 41.3 percent of research administrators (n= 624) who completed the Research Administrator Stress Perception Survey (RASPerS) reported high work-related stress. Sixty-six percent did not have adequate resources to complete their job in a 40-hour work week. These difficulties are further compounded by the global economic crisis where hiring freezes and potential job loss have placed additional burdens on research administrators. Faced with the same concerns as its mainland counterparts, the University of Hawai’i (UH) medical school has been engaged in various strategic planning and prioritization initiatives to determine how to best utilize limited resources.

In its desire to assist both its faculty and the medical school by reducing administrative burdens, the UH Department of Surgery embarked on an initiative to develop a department level research administrative infrastructure. The intent was not to create a fiefdom or duplicate the efforts of the medical school’s central administration. Even if a department attempted such a feat, its lack of control over resource allocation would render the effort moot. The department is aware of its role in the research administration process and how it must integrate and work closely with the larger organization. As Kirby (1996) notes, a unit, such as a department, is part of a larger system and cannot be viewed in isolation. Additionally, Drummond (2003) emphasizes the need for the responsible unit's mission to be in alignment with the university’s strategic plan.

Within the UH medical school, centralization and decentralization of various research administration tasks have shifted periodically due to changes in available funding, resources, and even leadership. Earlier in this decade, serious concerns about the University of Hawai’i’s research infrastructure, or lack thereof, was formally studied through a research infrastructure task force that was derived from an ad hoc committee – University of Hawai’i Association of Research Investigators (UHARI). The ad hoc committee met periodically to identify problem areas and brainstorm potential solutions. In the task force’s 2001 report, the committee concluded that the university had not adequately projected the administrative needs required to support the increase in research activity (UHARI, 2001). One of the task force’s recommendations was to hire knowledgeable, well-qualified research administrative staff and seat them in as close physical proximity to the principal investigators (PI) as possible. Related to this was delegating administrative decision-making authority far down the university hierarchy.

The UH medical school conducted its own internal reviews of its research administration needs. For example, in 2006, the central office conducted a needs assessment requesting department chairs to note which research administration duties (grouped under preaward, postaward, closeout, audit requirements) they would recommend or request be delegated to the departments. Information on the number of staff requiring training and the specific training needs was also requested. In 2007, the medical school established a formal policy regarding grant proposals, delegating certain administrative responsibilities to the departments (JABSOM Grants Development Office, 2007). For example, the unit directors/department chairs were delegated fiscal responsibility for grants. Specifically, they
are responsible for reviewing budgets for salary and fringe rates, staffing commitments, other resources, and institutional support for any grant proposals submitted. This policy is still in effect, but hiring freezes have forced the medical school’s central office to provide more direct support to departments that lack research administration staff. Consequently, effects of the hiring freeze have trickled down further, placing more responsibility onto the PIs.

Furthermore, properly trained department level staff can assist in compliance matters according to relevant university guidelines as well as state and federal regulations. Compliance is critical not just to protect the individual investigator, but the department and the medical school as a whole. Otherwise, there is the risk of negative sanctions, including jeopardizing future funding opportunities should any fiscal mismanagement occur. Krauser (2003) notes the importance of research administrators in developing a trusting relationship with PIs as an aid in potential negative encounters, such as having to reject a request. If a PI knows that the research administrator has her best interest in mind, she is likely more open to accepting the bad news.

The remainder of this article discusses the UH Department of Surgery’s research administration project. The first section discusses the initial project, which was initiated in the fall of 2007. The second section presents the project’s outcomes and the current state of affairs.

**Project Initiation: Fall 2007**

In keeping with the Chair of the Department of Surgery’s desire to operate the department on sound business and management principles, an associate chair position was created to assist in the oversight of administrative and fiscal matters. Reporting directly to the chair, the incumbent started in April 2006. The department has a number of funding sources: a little over $1 million in state general funds to cover departmental personnel and operational costs; several million dollars in private funds through various hospital contracts that cover physician salary and fringe; and several hundred thousand dollars in federal and private grant funds. Thus, the area with the most potential for growth, and receiving the highest level of focus, was development of the department’s research enterprise through increased grant funds.

The chair mandated that half of the department’s 46 compensated faculty members submit a competitive grant proposal to contribute to its evolution into a mature academic surgery department, fulfilling the tripartite mission of patient care, education, and research. The department was actively administering three grants for three different PIs by serving as the liaison with oversight entities, processing paperwork, and ensuring compliance with guidelines and deadlines. In addition, there was oversight of three other grants that were nearing completion.

All research projects administratively supported by the department are conducted in Hawaii with the intent of improving the quality of life for Hawai’i’s citizens. The department’s draft strategic plan includes a research focus on three major killers – mitigation of Hawai’i’s obesity and related diseases (e.g., diabetes, hypertension, heart disease and strokes), trauma (e.g., injury prevention and improving care of the critically ill or injured), and cancer. Current research endeavors include a study of the use of unique ultrasound
techniques in the early detection of breast cancer, an evaluation on the impact of blood volume measurement in the care of critically ill patients, development of a multidisciplinary approach to fall prevention in the elderly, and creation of validated assessment tools to measure cultural competency in surgical resident education. To undertake such critical research, more direct administrative support was needed at the department level.

As part of a needs assessment, the associate chair attempted to collect existing resources on research administration at the University of Hawaii. Particularly, she focused on formal guidelines regarding department level responsibilities. After confirming with the medical school’s central office that it did not have a research administration manual, she contacted the UH’s Office of Research Services (ORS). ORS referred her to a Roles and Responsibilities Matrix for Research Administration (UH ORS, 2007) that lists department level responsibilities such as developing and revising budgets, providing guidance to PIs on proposal preparation, reviewing and approving proposals before sending to ORS, revising and correcting proposals after institutional review, mailing proposals to sponsors, setting up accounts in the financial accounting system, ensuring expenditures/cost transfers have been posted to accounts, resolving issues related to unreconciled accounts, and ensuring compliance with circulars and sponsor conditions at the transaction level. At the medical school, the Grants Development Office handles preaward activities, such as informing faculty of funding announcements via e-mail and assisting with proposal preparation. The central office staff provides oversight of postaward activities and reminds department staff of reporting requirements and deadlines. Department staff serves as the liaison between the PIs and the central office, and have the responsibility of processing paperwork. Additionally, given that accountability is placed at the department and PI levels, the department’s research administration staff must take an active role in oversight as well.

To aid with the development of its research administration infrastructure, the department submitted a grant proposal to a local foundation. As required by the grantor, the project did not directly support a specific research project, but would facilitate organizational change by creating general administrative support for the department’s research endeavors. The funds would be used to hire a part-time student assistant and to cover costs related to the development of a departmental grants administration manual since no official university guidance on grants administration existed. The remainder of the funds would be used for the professional development of staff to attend conferences and purchase educational materials for self-study. At the time, there was limited formal training available on research administration at the medical school and the university. Therefore, the project had two goals: 1) to increase the department’s administrative and fiscal staff’s knowledge of research administration in order to be prepared to assist the department’s current and future PIs; and 2) to develop tools to assist the PIs via the collection, review, and synthesis of information on university, school, and department level policies, as well as review best practices in research administration at other universities. Specific outcomes were: 1) have the associate chair provide an orientation as well as follow-up training of the department’s research administration process to current and new PIs; and 2) have the part-time student assistant develop a departmental grants administration manual for distribution to all PIs and potentially shared with other interested departments at the medical school.

The timeline for the project was as follows:
Year 1 (July 1, 2008 to June 30, 2009)

a. Hiring of a part-time student assistant to help with development and
distribution of a department grants administration manual;
b. Group meetings for initial training of current PIs and their respective
administrative staff; and
c. At least two grant applications submitted with the department’s assistance.

Year 2 (July 1, 2009 to June 30, 2010)

a. Certification in research administration for the associate chair;
b. Dependent upon availability of university or other grant funds, hire one full-
time administrative, professional, and technical (APT) staff member to develop
and maintain a departmental grants database to track both preaward and
postaward activities, as well assist with the processing of forms and requests;
c. Restructure the research administration process to more accurately reflect
departmental oversight to ensure compliance with university, federal, and other
relevant guidelines; and
d. Submit at least four grant applications with the department’s assistance.

Year 3 (July 1, 2010 to June 30, 2011)

a. With approval from the dean, initiation of a School of Medicine “support
network” of department level research administrators to assist with updating
and maintaining the grants manual and looking for possible inter-departmental
research collaborations; and
b. Submit at least six grant applications with the department’s assistance.

Unfortunately, the department was not awarded the grant. Although the reviewers
felt that the proposal was promising, they felt it was the medical school’s responsibility to
find funding to support these efforts. Regardless, the chair firmly believed in the project and
allowed the associate chair to continue developing the department’s research administration
infrastructure. In the spring of 2007 the associate chair had received certification as a
contracts and grants administrator through the UH ORS’s new training program, which
provides an overview of the entire research administration process, both generically and
specific to UH. In July 2008, a UH Department of Surgery Grants Administration Manual
was authored by the associate chair with input from the staff of the medical school’s central
office and other academic offices. The manual was distributed to both faculty and staff
within the department. During that same month, the medical school granted the department
an APT staff person whose duties include processing research administration paperwork
in addition to other departmental fiscal transactions. This staff person was immediately
enrolled in the same course as the associate chair so that he, too, could be certified. Both staff
also received certification as fiscal officers so that administrative and fiscal assistance can be
provided beyond contracts and grants (e.g., purchasing and procurement).
Through a combination of department and personal funds, the associate chair attended the Society of Research Administrators (SRA) International’s conference in National Harbor, Maryland, in October 2008. This experience exponentially increased her knowledge of available resources via formal sessions and networking. Atkinson (2002) notes that research administrators are still trying to forge an identity and legitimization as a profession. Therefore, much of the innovations and best practices in the field stem from conversations among research administrators at other institutions. For example, while conducting background research, the associate chair learned of similar projects at other universities. Wiersema (2002) described her project in the Department of Geography at the University of Maryland. The department chair hired a director of administration to alleviate the administrative burden, allowing him to be more engaged in planning for the department’s future rather than responding to daily minor crises. After conducting a needs assessment, the director engaged in a reorganization that involved the modification of job descriptions with the provision of skills training as needed for staff in adjusting to their new job duties. Wiersema (2002) reported that after this restructuring, her department became heavily involved with the university and other research and political communities.

Most recently, the associate chair was surprised at how many research administrators at other institutions across the United States share the same desire for more guidance at the department level. She recently sent an e-mail to a department research administrators’ listserv asking if anyone had any grants administration manuals they could share to obtain feedback on the UH manual. In response, close to 50 research administration staff at various universities and organizations requested a copy of her department’s manual. One institution sent a copy of its preaward manual and several others offered to review hers. Due to the demand, the manual is now posted on the National Council of University Research Administrators’ (NCURA) website in the Department Administration Neighborhood. The associate chair was also invited to join the Departmental Administration Neighborhood Committee.

Additionally, with the department chair’s encouragement, the associate chair anticipates participating in the medical school’s efforts to invite “field level” (i.e., departmental) input regarding how the medical school approaches research administration. This promotes a systemic approach encompassing interactions both within the university and with the federal government with how to best administer NIH grants. At a higher level, the dean and his executive committee are strategically planning the school’s approach to both research and research administration.

The department’s faculty has begun to actively seek extramural funding, with several grant proposals submitted and in preparation. Due to this project, the department is now better prepared to assist faculty with their efforts. Even though the department’s research administration infrastructure is in its infancy as compared to more established institutions, this experience demonstrates that small steps can lead to larger initiatives.
Conclusion

The department’s research administration project demonstrated that, with strong support, desire and dedication can overcome funding constraints. The current economic crisis has led to the tenuous nature of staffing and resources, with departments forced to take on more responsibilities. The commitment to research administration comes in the form of continuing professional development to keep current with the field, keep updated on internal and external policies and procedures, promote positive communication with the central office, and continue development of relationships with other departments. Also critical is the role of networking with other institutions, both nationally and internationally, to obtain both insight and feedback.

References


