

REQUEST FOR APPLICATIONS: Great Plains IDeA-CTR Community-Academic Partnership Program

Application Deadline: November 17, 2023 | 5:00 PM

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The Community Engagement and Outreach (CEO) Core of the Great Plains IDeA-CTR Network is pleased to announce an opportunity for Community-Engaged Research funding through an NIH/NIGMS grant. Earliest starting date will be July 1st, 2024.

The Great Plains IDeA-CTR Network (GP IDeA-CTR) is a collaboration of eight participating institutions which include: Boys Town National Research Hospital, Children's Hospital and Medical Center, Creighton University, Omaha Veterans Administration Medical Center, University of Nebraska Kearney, University of Nebraska Lincoln, University of Nebraska Medical Center, and University of Nebraska Omaha.

The goal of this funding program is to achieve community impact and advance science through partnerships between community organizations and Clinical and Translational Research (CTR) investigators. Proposals that are responsive to this call will include community partners as active collaborators across the span of idea generation, proposal development, study implementation, analysis and interpretation of the results, dissemination of results, and development of future directions—for both research and community impact. This will produce research that is relevant to communities, addresses local needs, and is generalizable to other community or clinical settings.

The intent of the Community-Academic Partnership (CAP) Program is to improve health and wellness in communities through the development or testing of programs and interventions that are impactful and sustainable in a community setting. There are **two funding awards** available through this program:

- <u>Community-Engaged Research Pilot Project Award</u>: A total of \$25,000 is available for one or two award(s). The applications must detail an existing or forming community-academic partnership and how the partnership will use the funds to improve community health. The intent of this award is the generation of preliminary data for feasibility and acceptability trials.
- <u>Community-Engaged Capacity Development Award</u>: a total of \$15,000 is available for three small awards at \$5,000 each. The purpose is to provide project development seed funding for investigators working to (1) develop or engage community partnerships for project design or planning purposes or (2) engage Practice Based Research Networks (PBRN) to identify local priorities and begin project planning. The proposal needs to explicitly lay out how funds will be used to build community capacity and contribute to the development of the project and how planning will take place with your community partner(s). Research is NOT required as part of the capacity development award.

Applicable Research: Proposed projects must be community-engaged translational research and considered T1 to T4 in nature. The GP IDeA-CTR does not fund basic research projects. While there are many definitions of translational research, the GP IDeA-CTR uses the following definition:

<u>Translational research</u> is centered on moving applications for <u>treatments</u>, <u>diagnostics</u>, and <u>prevention</u> from pre-clinical work to population level impact. Applicants are required to identify the level of translational research proposed using the T1 to T4 descriptions below.

- T1 Translation to humans Seeks to move fundamental discovery into health application.
- *T2 Translation to patients* Develops health applications with implications for evidence-based practice.
- T3 Translation to practice Investigates the movement of evidence-based guidelines to health practices.
- *T4 Translation to communities* Investigates the impact of evidence-practice and policies to population health impact/investigators providing communities with the optimal intervention.

<u>Community Engagement</u> occurs on a continuum. Applicants are required to identify the level of community engagement and how they plan to utilize throughout their research project.

Outreach	Consult	Involve	Collaborate	Shared Leadership
Some Community Involvement Communication flows from one to the other, to inform Provides community with information. Entities coexist. Outcomes: Optimally, establishes communica- tion channels and chan- nels for outreach.	More Community Involvement Communication flows to the community and then back, answer seeking Gets information or feed- back from the community. Entities share information. Outcomes: Develops con- nections.	Better Community Involvement Communication flows both ways, participatory form of communication Involves more participa- tion with community on issues. Entities cooperate with each other. Outcomes: Visibility of partnership established with increased coopera- tion.	Community Involvement Communication flow is bidirectional Forms partnerships with community on each aspect of project from development to solution. Entities form bidirectional communication channels. Outcomes: Partnership building, trust building.	Strong Bidirectional Relationship Final decision making is at community level. Entities have formed strong partnership structures. Outcomes: Broader health outcomes affect- ing broader community. Strong bidirectional trust built.

Reference: Modified by the authors from the International Association for Public Participation.

Research Priorities: Priorities include a combination of scientific and regional needs developed by the GP IDeA-CTR Community Advisory Board (CAB).

Health Priorities List:

- Behavioral health, defined as "emotions and behaviors that affect your overall wellbeing" –CMS (e.g., mental health, substance use (opioids and alcohol), sexual health, and suicide)
- Chronic diseases and leading causes of death (e.g., heart disease, cancer, chronic lower respiratory disease, cerebrovascular disease, Alzheimer's disease and age-related cognitive impairment, COVID-19) and associated risk factors (e.g., obesity, diabetes, hypertension). For State-specific data, please visit <u>Nebraska (cdc.gov)</u>
- Injury prevention and violence (e.g., sex trafficking, abduction of women in native populations)

Please strongly consider addressing the health priorities, above, using approaches such as:

- 1. Telehealth or innovative technology (e.g., electronic medical records, registries, databases, machine learning)
- 2. Clinical care (i.e., working with the Great Plains Primary Care Practice-Based Research Network)

- 3. Community services
- 4. Health literacy
- 5. Social determinants of health (e.g., race/ethnicity, cultural practices, gender, age, sexual orientation, or geography)

Highest priority will be given to the strongest science and projects that focus on priority areas which are most likely to lead to successful extramural funding. Projects that make an impact on medically disadvantaged, underrepresented minority, and/or geographically or clinically isolated populations are of high interest. In addition, projects that can introduce or evaluate new tools or technologies useful in these populations are strongly encouraged.

For additional questions regarding whether your research satisfies these requirements, please contact your institutional program coordinator (see "Eligible Institutions and Contacts" below). Alternatively, you may contact Emily Frankel at <u>emily.frankel@unmc.edu</u>.

Eligibility

- At least one of the Principal Investigators must be current full-time faculty at a participating institution. Co-PI(s) from a community partner or community organization are encouraged.
- Eligible to apply for NIH research grants.
- Has a focus on relevant clinical-translational or community-translational research.
- Organization must have the administrative and accounting capabilities to manage the grant funds and have an Employer Identification Number (EIN) from the Internal Revenue Service.
- **Note:** You are not eligible if you have funding from any other IDeA-CTR program that will overlap <u>at the time of this award</u>.

Exclusions

- Projects that do not involve community engagement within the affected community or population.
- Projects designed to demonstrate that health disparities exist rather than address or eliminate health disparities.
- Research conducted outside of the Great Plains region.
- Applications that are submitted without a Letter of Support from the community organization and partners cited within the proposal.

Eligible Institutions and Contacts:

- Boys Town National Research Hospital (BTNRH) Chris Stecker (<u>chris.stecker@boystown.org</u>)
- Children's Hospital and Medical Center (CHMC) Ann Anderson Berry (alanders@unmc.edu)
- Creighton University (CU) Peter Steyger (<u>petersteyger@creighton.edu</u>)
- Omaha VA Medical Center (O-VAMC) Fred Hamel (fghamel@unmc.edu)
- University of Nebraska at Kearney (UNK) Kimberly Carlson (carlsonka1@unk.edu)
- University of Nebraska-Lincoln (UNL) Jennifer Nelson (inelson18@unl.edu)
- University of Nebraska Medical Center (UNMC) Sarah Holstein (sarah.holstein@unmc.edu)
- University of Nebraska at Omaha (UNO) Roni Reiter-Palmon (<u>rreiter-palmon@unomaha.edu</u>)

Application Process and Requirements (including key dates)

- 1. Call for applications (September 2023)
- 2. Application Deadline (November 17, 2023)
- 3. CAB reviews (November 2023)
- 4. Selection Announcement (December 2023)
- 5. IRB Submission
- 6. CITI Training

- 7. NIH review
- 8. Earliest project start date (July 1, 2024) pending review, NIH, and all other regulatory approvals
- 9. Attend the Community-Engaged Research Institute (October 2024)
- 10. Attend the Great Plains IDeA-CTR Annual Scientific Meeting (October 2024)

Proposal Format and Guidelines:

Below are required documents for the two funding awards. Please be sure your proposal includes all content related to the award you are applying for.

Community-Engaged Research Pilot Project	Community-Engaged Capacity Development
Award	Award
Cover Letter	Cover Letter
NIH face page	NIH Biosketch from all research and community
	partners
NIH Biosketch from all research and community	Overall Project Summary (1/2 page)
partners	
Overall Project Summary (1/2 page)	Narrative (sections c and e only)
Narrative (all sections, no appendices)	Letter of Support from partner and/or organization
Letter of Support from partner and/or organization	Budget and Justification (note: salary support for
	faculty not allowed)
References	Subaward Budget and Justification (if applicable)
Human Subjects (if applicable)	
Vertebrate (if applicable)	
Regulatory Approvals (if applicable)	
Budget and Justification (note: salary support for	
faculty not allowed)	
Subaward Budget and Justification (if applicable)	

1. Cover Letter:

- a Project name (note: IRB/IACUC approval titles need to match the project name)
- b Name of Academic Partner
- c Academic Partner's institution
- d Name of Community Partner and/or organization
- 2. NIH face page
- 3. NIH Biosketch from all research partners
- 4. Overall Project Summary (1/2 page)
- 5. Narrative (no appendices):
 - a Significance (1/2 page) To what extent does the problem affect a community? How well does the project relate to a topic outlined in the Great Plains IDeA-CTR Community Advisory Board's <u>Health Priority List</u>? Are there other factors which make this a significant research study (e.g., an emerging issue)?
 - b Innovation (1/2 page) Does the application challenge and seek to shift current research paradigms by utilizing novel concepts, approaches or methodologies, instrumentation, or interventions?
 - c Description of the Partnership and Development Plans (1/2 page) What is the role and level of engagement of the community organization? How do they play a significant role in the research study?
 - d Approach (1 page) Are the overall strategy, methodology, and analyses well-reasoned and appropriate to accomplish the specific aims of the project? Are the project strategies sustainable moving forward?

- e Expected Outcomes and Future Directions (1/2 page) What are the expected results of this project? Are these results realistic? Do the projected findings move this issue closer to a solution? List and describe opportunities for external funding and how this project will lend itself to future funding.
- 6. Letter of Support from partner and/or organization
- 7. References
- 8. Human Subjects (if applicable)
- 9. Vertebrate (if applicable)
- 10. Regulatory Approvals (if available)
- 11. Budget and Justification (note: salary support for faculty not allowed)
- 12. Subaward Budget and Justification (if applicable)

Application Submission:

Applications should be saved in pdf format and submitted via REDCap, using this link: <u>https://redcap.link/CAPProgram</u>. Deadline is November 17, 2023 by 5 PM CST. Should you have difficulty with your submission, contact CEO Core co-director, Emily Frankel at <u>emily.frankel@unmc.edu</u> or 402.836.9283.

Review Process and Scoring

- 1. Proposals will undergo review by the CEO Core. In addition to the five proposal sections outlined above, the CEO Core reviewers will also score proposals based on Community Impact the degree to which projected findings could move this issue closer to a solution.
- 2. Highest scored proposals are presented to GP IDeA-CTR CAB members during a scheduled meeting. Feedback from CAB members will be provided to applicants. CAB members may require updates to a proposal to move forward in the selection process.
- 3. Proposals, scores, and CAB recommendations are submitted to the GP IDeA-CTR Steering Committee.
- 4. Highest reviewed proposals are sent to NIH for final approval (IRB approval is required by NIH).
 - a NIH will require the IRB approval letter, all relevant CITI Training documents, a Face Sheet, a biosketch for the PI, and a completed PHS Inclusion Enrollment form (for human subjects research).
- 5. Selections are announced in February 2024.

Proposals are scored using the NIH review criteria on a scale of 1 (exceptional) to 9 (poor). All five sections outlined within the proposal are scored based on this method. In addition, applications will be scored according to how well the project addresses a Research Priority indicated by our CAB (listed on second page).

Post-Selection Requirements:

- 1. Become a member of the GP IDeA-CTR via our <u>website</u>.
- 2. Remain current on all regulatory training and approvals, provide all updated approvals to Emily Frankel (emily.frankel@unmc.edu)
- 3. Complete a final report at the conclusion of the funding period
- 4. Complete the NIH bi-annual progress report
- 5. Attend the Annual Scientific Meeting where you will provide a poster of your project and progress
- 6. Provide follow-up for the duration of the parent grant
- 7. Watch the Engagement and Dissemination webinar hosted by the Community Engagement and Outreach (CEO) core to discuss best practices
- 8. <u>Cite</u> the GPCTR/NIGMS grant in funding, publications, and presentations
- 9. If your application is selected for funding details from you application may be made public. Therefore, if your application involves intellectual property and/or innovations with commercial potential, please

reach out to your technology transfer office. Failure to do so prior to a public disclosure may result in a loss of intellectual property rights.

- a. UNeMed-Matthew Boehm for UNMC and UNO investigators
- b. NUtech Ventures-Cheryl Horst for UNL and UNK investigators
- c. <u>Stuart Martens</u> for CU investigators
- d. Ryan McCreery for BTNRH investigators
- 10. In addition to the reporting required for any adverse event, as a courtesy, we ask that you notify the Emily Frankel (<u>emily.frankel@unmc.edu</u>) if the study has any adverse events (AE's)

All members of the research team will need to complete appropriate CITI Training if they've not done so already. Additionally, awardees will need to sign an award agreement outlining project expectations and will be required to submit a six-month progress report as well as a final report once the project is complete. All research personnel should become <u>a member of the GP IDeA-CTR Network</u> to receive communications about education and training opportunities. Academic and community partners will also be expected to attend the GP IDeA-CTR Community-Engaged Research Institute in October 2024. Lastly, CAP Program awardees will be required to attend the GP IDeA-CTR Annual Science Meeting in October 2024 and may be invited to present their project.

Questions

For questions, contact Emily Frankel, emily.frankel@unmc.edu or 402.836.9283