Duke CTSI Population Health Improvement
Collaboration Seed Awards: $1.5K
Request for Application
Application Deadline: 11:59 p.m. ET, March 29, 2017

Purpose

Provide small 1-year seed awards to community organizations and Duke investigators interested in developing partnerships for co-developing novel solutions that impact community and population health. Duke Clinical Translational Science Institute (CTSI), Duke’s home of the National Institutes of Health’s Clinical and Translational Science Award, will provide small planning awards of $1,500 to community organizations and Duke investigators interested in working with the CTSI’s Community Engagement Core for guidance on developing impactful community-research partnerships and planning collaborative population health improvement research proposals.

Priority will be given to proposals that foster community-research partnerships addressing the following:

- Projects and ideas that show promise and innovation.
- Health care priorities identified in the community through community level assessments such as the Patient-Centered Outcomes Research Institute’s Town Halls on Health Outcomes that Matter, Partnership for a Healthy Durham, and the Durham County Community Health Assessment.
- Proposals that focus on an area of disparity including diabetes, asthma, cardiovascular disease/hypertension, mental health, cancer and kidney disease.
- Proposals that highlight opportunities to gather data and identify key outcomes.

Emphasis is placed on improving local health and the ability to secure follow-on support.

The CTSI’s Community Engagement Core facilitates equitable, authentic, and robust community engaged research via a suite of extensive resources that aims to build capacity, facilitate partnerships and foster authentic communication between academic and community partners to improve community and population health across the translational research spectrum.

**Technical Assistance** is available to all awardees and includes a variety of engagement support services including capacity building, tools for sustainable and equitable partnerships, and ongoing feedback and input as needed.
Key Dates

Posted Date: February 23
**Optional** Letter of intent Due: March 6
Application Submission Deadline: March 29
Review Process Ends: April
Selection of Awardees: May
IRB and NIH Approval: May - June
Notice of Awards: July 2017

*IRB and NIH approval key dates apply only to proposals involving research participants.*

Eligibility Information

Eligible Applicants

- Nonprofits with 501(c)(3) IRS Status (Other than Institutions of Higher Education)
- Nonprofits without 501(c)(3) IRS Status
- Community organizations, especially those with a focus on public health, social services, caregiving, and patient advocacy
- Members of practiced-based research networks
- Eligible agencies of the federal, state, or local government
- Permanent, full-time, Duke faculty in professional ranks (assistant, associate, or full)
- Permanent, full-time, Duke faculty in non-tenure track (lecturer, instructor, contract, or fixed-term)
- Duke doctoral students, and postdoctoral trainees, including clinical fellows

Requirements

- Proposed projects must have at least one investigator from Duke University and at least one community partner.
- Community-initiated projects without an investigator from Duke should consult with the Duke CTSI Community Engagement Core to facilitate matching with a Duke investigator. The community partner and Duke investigator will be required to apply jointly.
- The proposal must focus on community-research partnerships that aim to co-develop solutions to improve community and population health.
- Applicants may be involved in more than one proposal, but can only serve as the community lead or lead investigator in one application during the funding cycle.
- Community partners who need assistance in identifying research collaborators at Duke can contact the Duke CTSI Community Engagement Core ([http://www.c4partners.org/](http://www.c4partners.org/))
**Funding**

Each award will be funded by Duke’s CTSI and will provide a total of $1,500, with an expected start date of July 1, 2017 and ending on June 30, 2018 (direct costs, plus indirect cost rate of 10 percent).

Community project leads and lead investigators may budget award funds for the following purposes:
- Support personnel
- Local travel that is necessary for conducting the project
- Meals or travel expenses directly related to conduct of the project.
- Expenses related to conducting engagement activities with patients and other stakeholders
- Equipment, research supplies (not office supplies)
- Indirect costs capped at 10%

Pilot Award funds may not be budgeted for the following purposes or resources:
- Office supplies or communication costs
- Meals or travel expenses not related to the project
- Professional education or training
- Computers or audiovisual equipment
- Manuscript preparation and submission

Funds cannot be carried over from one fiscal year to the next.

**Budget Tips**

- The maximum budget is $1,500, to be expended over a maximum of 12 months and with appropriate budget justification.
- Refrain from providing a 1-line budget or asking for $1,500 for one particular resource or task.
- Provide a realistic estimate of costs. The overall project budget may exceed the $1,500 award limit; however, the source for the extra required funds must be stated.
- If the overall project budget is substantially greater than the $1,500 award, explain how the Seed Award makes a critical difference towards completing the project.
- If travel is involved, the budget should include locations, number of participants traveling to each location and per unit cost details for airfare, mileage, lodging, meal per diems, etc.

**Selection Process and Review Criteria**

A Review Committee comprising community members and researchers will perform a detailed review of the applications and select the finalists. The Review Committee will consider the following criteria when reviewing and scoring applications:
• Program fit
• Project plan and timeline (including reasonableness of project approach, milestones, deliverables, outcomes, and metrics)
• Qualifications of the Project Lead(s)
• Potential to leverage follow-on support

Application Procedure

An optional Letter of Intent may be submitted at your earliest convenience and no later than March 6. Please email the letter to johanne.laboy@duke.edu with the words “Population Health Awards” on the subject line, and include the following items:

Descriptive title of proposed research
  a. Descriptive title of proposed research
  b. Name, address, and telephone number of the Project Lead’s(s)
  c. Names of other key personnel
  d. Participating organizations

Proposal is submitted via Duke’s MyResearchProposal online submission system.

• To apply, visit http://bit.ly/myresearchproposal click on “Create New User” (or log in if already have an account). Proposals must be submitted under the community partner’s name.
• A step-by-step user’s guide for applying via the MyResearchProposal software is available - Please review this document.
• Enter Access Code CTSI then select the “Duke CTSI Population Health Improvement Seed Award 2017” funding opportunity and follow the instructions.

Other Guidelines

Duke’s Clinical Translational Science Institute is funded through a CTSA Award available from NIH’s National Center for Advancing Translational Sciences (NCATS). Prior to the release of Award funds, NCATS requires the review and approval of all Duke CTSI pilot Awards involving human research participants. Thus, if your proposal is funded and involves human research participants, the CTSI will require additional documentation for NCATS. NCATS reviews take approximately 30 days. The NCATS review can occur concurrently with the IRB review, but final NCATS approval is dependent on IRB approval.

1. Prior to receiving funds, research involving human participants must have appropriate approvals from the Duke CTSI IRB. Either an IRB approval letter or an IRB response to a “Determination Whether Research or Similar Activities Require IRB Approval” must be submitted to Duke CTSI prior to funds being released. For
research involving human participants, all key personnel listed in the eIRB must have certification of training in the protection of human participants prior to the start of the award period.

2. If the research includes animals, the appropriate IACUC animal research forms must also be approved.

3. Human participant or animal research must be reviewed in accordance with the university’s general assurances and HIPAA.

4. Research involving human participant must also be approved by the National Center for Advancing Translational Sciences (NCATS) prior to receiving funds. The Duke CTSI will request required documents from the PIs and submit a regulatory package to NCATS for review and approval.

5. CTSI staff will work closely with funded teams throughout the award period to monitor progress and, when necessary, provide assistance. A six-month interim progress report and a final progress report will be required. CTSI expect Project Leads to report over the lifetime of the work, the outcomes achieved due to the pilot award, e.g., subsequent external funding, publications, presentations, and patents.

6. Duke’s CTSA grant UL1TR001117 notice of grant award included both federal funding and our institutional commitment. The institutional funds used in our CTSA pilot funding programs take on the identity of federal funds in this award mechanism and therefore should be treated as such with regards to IRB, IACUC, and tech transfer office reporting. NCATS approval is required prior to initiating research involving human participant, and inventions resulting from pilot awards must be reported in iEdison and include UL1TR001117 as the source of federal funding.

7. All publications that are the direct result of this funding must reference: “Research reported in this publication was supported by the National Center for Advancing Translational Sciences of the National Institutes of Health under Award Number UL1TR001117. The content is solely the responsibility of the authors and does not necessarily represent the official views of the National Institutes of Health.” Publications must also be registered in PubMed Central.

8. CTSI will judge the success of this funding program by tracking ("translational units") required to translate a scientific discovery from laboratory, clinical or population studies into clinical or population-based applications to improve health by reducing disease incidence, morbidity and mortality. The CTSI will contact investigators annually to determine if any translational units have been achieved as a result of this award. Examples include:

   - Abstracts/presentations, manuscripts, published guidelines
   - Follow-on funding (e.g., grants, SBIR/STTR, angel investment)
   - Milestones achieved in animal models, manufacturing and toxicity campaigns
   - Regulatory meetings and filings (e.g., 510K, IDE, IND, BLA, NDA)
   - Initiation of appropriate clinical studies
   - Improved diagnosis or treatment of disease
   - Implementation in clinical practice and community
• Translation of models to other geographical areas
• Translation of models to other therapeutic areas
• Clinical outcomes in practice and communities
• Agreements with partners and strategic collaborators to translate more broadly
• Commercialization (e.g., new intellectual property, patent applications, license, commercial partnerships, start-up company)
• Direct-to-consumer interactions (e.g., mobile health apps)

General questions, not answered in the RFA, about the proposals and the review process should be addressed to johanne.laboy@duke.edu before submission.

For technical or My Research Proposal account questions, please contact Anita Brantley: 919-668-4774 or anita.grissom@duke.edu