I. Purpose of Award:

Duke Clinical and Translational Science Institute’s Community Engaged Research Initiative (CERI) and Duke's Center for Research to Advance Healthcare Equity (REACH Equity) are seeking research proposals that address racial and ethnic disparities in health by developing and testing interventions that improve the quality of patient-centered care. Applications should include collaborative community-research teams comprised of Duke faculty and stakeholders such as patients and/or community-based organizations. Funding up to $37,500 (total) will be awarded for a two-year period beginning on July 1, 2020. One award will be granted during the 2020 funding cycle.

II. Key Dates:

- RFA issued: January 17, 2020
- Mandatory Letter of Intent due by February 24, 2020. Submit via email to CeRi@dm.duke.edu and Cheryl.jmiller@duke.edu
- Selected applicants will be invited to apply for funding on or before March 13, 2020
- Application deadline: April 30, 2020
- Announcement of Award: Late May 2020
- Earliest date funding will begin: July 1, 2020

III. Priorities:

Responsive proposals will address the following:

1. Seek to reduce racial and/or ethnic disparities in health/health care or improve minority health.
2. Address existing or emerging health care priorities identified in the community through community-level assessments such as the Durham County Community Health Assessment.
3. Employ research methods to address a question relevant to reducing racial/ethnic disparities or improving minority health by improving the quality of patient-centered care in the clinical encounter. We define the clinical encounter as interactions between patients and/or caregivers and any member or members of the healthcare team (or healthcare system) in any healthcare setting (e.g., hospital, community primary care setting, home health, public health care settings).
4. Engage relevant stakeholders (e.g., patients, community organizations, content experts, and methodologists) in developing and executing a research plan.
5. Show evidence of sustainability or plans for next step funding.
6. Clearly demonstrate how the project will lead to developing and testing an intervention. Projects do not have to propose to develop or test an intervention but must show how the research will lead to future intervention.

Examples of responsive proposals include but are not limited to:

- The addition of an aim or participant sample to a current project which focuses on issues related to the REACH Equity theme [https://sites.duke.edu/reachequity/about/](https://sites.duke.edu/reachequity/about/) as well as community and population health priorities.
- Small primary data collection projects (surveys, interviews, focus groups) or secondary analysis of existing data that focuses on issues related to REACH Equity theme as well as community and population health priorities. Proposals may include any method.
- Research that addresses social determinants of health in the clinical setting to improve a community health priority. This may include the use of existing data to identify potentially high-risk patients (e.g., use of Durham Neighborhood Compass)
• Research that advances patient and/or provider engagement in the clinical encounter to address the REACH Equity theme and community and population health priorities
• Research projects that develop and pilot test interventions that include components delivered through a clinical encounter in an acute or community setting.
• Research helping to elucidate how patients, community members, and other stakeholders can be engaged to address health disparities that emerge during the clinical encounter.

IV. Eligibility:

• **Mandatory Letter of Intent (LOI):** Individuals applying for this award are required to submit a Letter of Intent of no more than 1 page outlining the general aims of their proposal for initial review to ensure responsiveness to this call.
• LOIs are due on February 24, 2020 at 11:59 pm and should be emailed to CeRi@dm.duke.edu and Cheryl.j.miller@duke.edu Invitations to submit full proposals will be issued by March 13, 2020
• Proposed research projects must involve a team that is comprised of both Duke faculty and stakeholders (patients, patient advisory boards, caregivers, organizations). The Duke faculty member must serve as the Principal Investigator of record as she/he will serve as the person with the fiduciary responsibility.
• The Duke PI must be full-time faculty at the rank of Medical Instructor or higher.
• Stakeholders may include:
  ▪ Nonprofits with 501(c)(3) IRS Status (Other than Institutions of Higher Education), particularly community organizations with a focus on public health, social services, caregiving, and patient advocacy and members of practice-based research networks.
  ▪ Eligible agencies of the federal, state, and local governments.
  ▪ Patients, caregivers, community-based healthcare providers.

Consultations:

*Teams considering submitting an application are encouraged to request a consultation with CERI to discuss their ideas and to ensure their projects are in alignment with both Centers’ themes and goals.*

Community Resources:

- **Durham County Community Health Assessment:** The goal of the 2017 Community Health Assessment (CHA) is to provide a comprehensive compilation of valid and reliable information about the health of the Durham community. The CHA process is led by the Partnership for a Healthy Durham, Durham County Department of Public Health and Duke Health.
- **Partnership for a Healthy Durham:** The Partnership for a Healthy Durham is a coalition of local organizations and community members with the goal of collaboratively improving the physical, mental, and social health and well-being of Durham’s residents.
- **Durham Neighborhood Compass:** Originally launched in May 2014, the Neighborhood Compass provides a way for users to learn more about neighborhoods in Durham, to find meaningful connections for community programs, and to guide initiatives aimed at improving quality of life. It includes more than 50 key measures of neighborhood life, from 1970 to the present.

**Applicants invited to submit full applications will receive email notification on or before March 13, 2020.**

**************************************************************************************************

The following guidance is for full proposal submission, which is by invitation. Unsolicited proposals will not be reviewed.

V. Application Procedures:

Application requirements (Due on April 30, 2020, by invitation only - further instructions will be provided to invited applicants):

A. **Brief abstract** (250 words)
B. **Specific aims** (one page)

C. **Research Plan**: The research plan (5-page limit) should include the following sections:

- Purpose: background, and rationale for the research project – approximately ½ page.
- Significance: Include a clear statement of how the research is relevant and aligns with REACH Equity theme, upholds principles of stakeholder engagement, and addresses local community and population health priorities – approximately ½ page.
  - The REACH Equity theme and conceptual model are available here: [https://sites.duke.edu/reachequity/about](https://sites.duke.edu/reachequity/about).
  - The community priorities may be accessed at the Durham County Community Health Assessment web site: [https://healthydurham.org/health-data](https://healthydurham.org/health-data).
  - Suggested principles of community engagement are available here: [https://www.pcori.org/research-results/about-our-research/research-we-support/national-priorities-and-research-agenda](https://www.pcori.org/research-results/about-our-research/research-we-support/national-priorities-and-research-agenda).
- Innovation: Project design/research plan includes innovative elements - approximately ½ page.
- Approach, Methods & Analysis: Outlines project design and project management plan, key roles and responsibilities, procedures, sample, recruitment, methods/measures, and analysis plan – approximately 2 pages
- Timeline: Project timeline - approximately ½ page
- Stakeholder engagement plan: Plan to disseminate findings – approximately ½ page
- Sustainability plan: Preliminary plans for sustainability or future grant submission – approximately ½ page
- The 5-page limit includes tables and figures. References do not count toward the page limit; single line spacing, font no smaller than Arial 11, 1-inch margins.

D. **Budgets and Budget Justifications**:

- Submit annual budgets for Years 1 and 2 on NIH PHS 398 budget forms and justification for each budget item. Year 1 form is available [here](https://www.hrsa.gov/grants/budget_forms.html). Year 2 form is available [here](https://www.hrsa.gov/grants/budget_forms.html). Note: budget forms and letters of recommendation are not included in page limits.
- Total available: up to $37,500 total direct costs over two years.
- Duke Principal Investigator effort is allowed in this mechanism.
- Funds may be split between partners and used for personnel, research supplies, event costs, and honorariums.
- Budget justifications should include sufficient detail for reviewers to assess whether appropriate resources have been requested and shared equitably. Clearly state whether requested funds will be used by the community stakeholder organization or by Duke.

E. **Human and/or Animal Subjects Protections**: Institutional Review Board (IRB) approval is not required prior to submission but will be required prior to funding. Briefly describe any human and/or animal subject issues. If human subjects are involved, provide a description of their involvement and characteristics, specific risks to subjects who will participate, and protection against those risks. Describe the sources of materials that will be obtained from human subjects as part of their study participation. Provide assurance that the project will be reviewed and approved by the Duke IRB and comply with HIPAA. If vertebrate animals are to be used, provide a description of the proposed use of the animals in the work outlined and procedures for ensuring that discomfort, distress, pain and injury will be limited. In addition, if the research involves human subjects, all personnel named on the budget pages must have certification of training in the protection of human subjects prior to the start of the grant period.

F. **NIH Biosketch for faculty investigators and Biosketch, resume (no format), or CV (no format) for community partner investigators** and other key members of the research team, as needed (combine all files and upload as a single PDF) - [click here for NIH Biosketch details](https://www.nihbiographicaldata.nih.gov).

VI. **Budget Guidelines**

**Note for Duke Investigators**: This award is internally funded and does not need to be routed through the Office of Research Administration.
Please note the following when preparing budgets:

1. The budget period is for a maximum 24 months beginning as early as July 1, 2020, and ending no later than August 31, 2022. Applicants may request up to a total of $37,500 in direct costs (indirect costs will not be awarded). Funding will not be available until applicable IRB documentation is provided to Duke CTSI, the entity managing the disbursement of funds.

2. General budget guidelines:
   A. Grant funds may be budgeted for:
      • Support personnel
      • Use of CTSI’s core services, including salary support for core faculty, such as biostatistics, metrics and evaluation, and emerging technologies
      • Local travel that is necessary for conducting the research project
      • Meals or travel expenses directly related to conducting of the research planning or implementation
      • Expenses related to conducting engagement activities with patients and other stakeholders
      • Equipment, research supplies (not office supplies) and core lab costs
   B. Grant funds may not typically be budgeted for:
      • General consumable supplies
      • Meals or travel expenses incurred for personal or social purposes not related to the project
      • Professional education or training
      • Travel to meetings
      • Computers or audiovisual equipment
      • Manuscript preparation and submission
      • Effort for post-doctoral trainees or fellows on training grant equivalents
      • Capital equipment
      • Print advertising
      • Office supplies or communication costs, including printing, postage and cell phones, or Foreign components, as defined in the NIH Grants Policy Statement

VII. Selection Process and Review Criteria:
CTSI CERI and REACH Equity faculty and staff, and stakeholders will review all proposals and evaluate the following:
• Significance of the work
• Innovation of the research
• Relevance and alignment with REACH Equity and CTSI CERI goals
• Potential for the project to lead to future external funding, implementation, and sustainability
• The soundness of the proposed methods
• Feasibility of accomplishing the stated project goals within the two-year project period
• Level of the patient, community organization, and stakeholder engagement

VIII. Terms of the Award (if funded):
Duke CTSI and Duke’s Center for REsearch to AdvanCe Healthcare Equity (REACH Equity) will fund the research activities, up to $37,500 indirect costs for one project (no indirect costs will be awarded) for a maximum 24-month period. The project will begin when applicable IRB documentation is provided to Duke’s CTSI and the Duke fiduciary PI / Project Lead indicates that everything is in place for the project to commence. If more than three months pass after notification of funding and the project is still not ready to start, this grant program reserves the right to retract the award. At the end of the 24-month project period, any unexpended funds will be retained by the grant program.

The primary sources of this award funding are from the Duke School of Medicine, the Duke Chancellor for Health Affairs, and the National Institutes of Health (NIH) National Center for Advancing Translational Sciences (NCATS) Clinical and Translational Science Award UL1TR002553. Grant recipients must acknowledge these funding sources, along with
the National Institute of Minority Health and Health Disparities (NIMHD) Award U54MD012530 (REACH Equity Center), on any projects that flow from this work, either directly or subsequently (follow on studies).

Awarded funds must be used to conduct the work proposed. All direct charges to this award must adhere to federal regulations and requirements regarding the use of CTSA and REACH Equity funds. Duke CTSI and REACH Equity Center reserve the right to revoke funding in the event it is determined that funds were not spent in accordance with the approved proposal. “The general criteria for determining allowable direct costs on federally-sponsored projects is set forth in 2 CFR Part 200: Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards (The Uniform Guidance). The Duke General Accounting Procedure (GAP) 200.320 is a resource to determine whether or not a particular cost item would be considered an allowable direct cost for budgeting and/or charging on a federally sponsored project.”

*Requests for no-cost extensions will not be approved.

**Approvals Required Prior to Funding Start Date**
- Prior to receiving funds, research involving human subjects must have appropriate approvals from the Duke 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. Human subjects or animal research must be reviewed in accordance with the university’s general assurances and HIPAA. In addition, if the research involves human subjects, **all personnel named on the budget pages must have certification of training in the protection of human subjects prior to the start of the grant period**. [https://aboutctiprogram.org/en/homepage/](https://aboutctiprogram.org/en/homepage/)
- Fully executed appropriate legal agreement(s) between Duke and community partners must be in place prior to the start of work on the research project.
- Failure to submit documents in the requested timeframe may result in the cancellation of funding.

**Project Execution**
- It is understood that grant recipients will develop a project management plan that delineates roles and responsibilities. Duke CTSI and Duke’s Center for REsearch to AdvanCe Healthcare Equity (REACH Equity) staff will work closely with funded teams throughout the grant period to monitor progress and, when necessary, provide assistance. Periodic progress reports and a final progress report will be required. Duke CTSI and the Reach Equity Center expect Duke Investigators and community partners 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.
- Assistance from the Community Engaged Research Initiative will be 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.
- Duke CTSI staff members will interact regularly with the awardees regarding budgets, timelines, reporting progress relative to planned milestones, and will serve to help identify support and resources to fulfill unmet project goals.
- Duke’s CTSA grants UL1TR002553 notice of grant awards includes 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, and tech transfer office reporting.
- All publications that are the direct result of this funding must note: “Research reported in this publication was supported by the National Center for Advancing Translational Sciences of the National Institutes of Health under Award Number UL1TR002553, and the National Institute of Minority Health and Health Disparities (NIMHD) Award U54MD012530 (REACH Equity Center). 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 be registered in PubMed Central. After your publication is accepted, [click here](#) for a guide to complying with the NIH Public Access Policy.
Any Awardee who leaves his or her position should contact the CTSI funding Program Officer to discuss future plans for the project.

Awardees will be invited and are encouraged to serve as reviewers for future Duke CTSI and REACH Equity funding opportunities.

Awardees are invited to participate in REACH Equity and CTSI Community-Engaged Research Initiative activities to the extent possible, including: Research Works in Progress seminar, annual colloquium, Health Disparities Research Curriculum, Annual Community Engaged Research Forum.

Post-Award Reporting
Duke CTSI and REACH Equity Center track significant events (“translational units”) that are required to translate a scientific discovery from a laboratory, clinical or population studies into clinical or population-based applications to improve health by reducing disease incidence, morbidity and mortality. When requested, all awardees will be expected to provide updates of publications and other translational units that originated from the award.

Examples include:

• Abstracts/presentations, manuscripts, published guidelines
• Follow-on funding (e.g., grants, contracts, angel and venture capital investment)
• 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. apps)

CONTACT INFORMATION: For additional information on this funding opportunity, please contact Eve Marion 919-668-5969 eve.marion@duke.edu