

**REQUEST FOR APPLICATIONS:**

# Great Plains IDeA-CTR Community-Academic Partnership Program

**Application Deadline: January 31, 2018 | 5:00 PM**

[https://gpctr.unmc.edu](https://gpctr.unmc.edu/)

The Great Plains IDeA-CTR Network (GP IDeA-CTR) is a collaboration of 8 institutions which include: Boys Town National Research Hospital, North Dakota State University, University of Nebraska Kearney, University of Nebraska Lincoln, University of Nebraska Medical Center, University of Nebraska Omaha, University of North Dakota, and University of South Dakota.

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, and development of future directions—for both research and community impact. This will produce research that is relevant to communities, resolves local needs, and is generalizable to other community or clinical settings.

Our intent with 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:

* Community-engagement Project Award: a total of $50,000 is available for one or two award(s). The applications must detail an existing or forming community-academic partnership and how the funds will be used to improve community health. The intent of this award is the generation of preliminary data for feasibility and acceptability trials.
* Community-engagement Planning Award: a total of $15,000 is available for small awards averaging approximately $2,500. The purpose is to provide seed funding for investigators working to (1) develop or engage community advisory boards for project design or planning purposes or (2) engage Practice Based Research Networks to identify local priorities and begin project planning. The proposal needs to explicitly lay out how funds contribute to the development of the board or the project.

**Applicable Research:** Proposed projects must be translational research and considered T2 to T4 in nature. While there are many definitions of translational research, the GP IDeA-CTR uses the following definition:

Translational research is about moving applications for treatments, diagnostics and prevention 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.

For additional questions regarding whether your research satisfies this definition, please contact your local institutional program coordinator (see ‘Eligible Institutions and Contacts’ below). Alternatively, if you have questions about whether your research applies, you may also contact Dr. Paul Estabrooks at [paul.estabrooks@unmc.edu](mailto:paul.estabrooks@unmc.edu) or Sean Navarrette at [sean.navarrette@unmc.edu](mailto:sean.navarrette@unmc.edu).

**Health Priorities:** Applicants must propose work conducted within a partnership between academic researchers and community organizations or individuals. Special attention will be given to projects that address regional priorities as defined by the GP IDeA-CTR Community Advisory Board. Priority areas are:

* Behavioral health including, mental health, substance abuse (e.g., opioids and alcohol), and violence as a public health issue
* Obesity treatment and prevention
* Injury prevention
* Technologies and models to improve health access including the evaluation of new or existing tools (e.g., telehealth) with a focus on rural populations
* Connecting clinical care and community services (e.g., schools, food banks, YMCAs, etc.)
* Addressing health disparities based on social determinants, race, ethnicity, and geography

In addition, projects that address aging and age-related cognitive impairment or medically disadvantaged, underrepresented minority, and/or geographically or clinically isolated populations—and can introduce or evaluate new tools or technologies useful in these populations—are of high interest.

**Eligibility**

* Current full-time faculty appointment at a participating institution or an individual employed by a community organization.
* Has a focus on relevant clinical-translational or community-translational research,
* At least one team member must be eligible to apply for NIH funds (i.e. US citizen or a permanent resident).
* Letter of Support from a community organization or community partner(s) defined as a set of persons with shared commonalities, such as demographic or geographic, and health-based focus.
* Applicants can only apply to one of the two awards available.
* 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.

**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 reduce health disparities.
* Research conducted outside of the Great Plains region (Nebraska, South Dakota, and North Dakota).
* Applications that are submitted without a Letter of Support from the community organization or partners cited within the proposal.

**Eligible Institutions and Contacts:**

* Boys Town Natl. Research Hospital (BTNRH) – Lori Leibold ([lori.leibold@boystown.org](mailto:lori.leibold@boystown.org))
* North Dakota State University (NDSU) – Mark McCourt ([mark.mccourt@ndsu.edu](mailto:mark.mccourt@ndsu.edu))
* University of Nebraska at Kearney (UNK) – Kimberly Carlson ([carlsonka1@unk.edu](mailto:carlsonka1@unk.edu))
* University of Nebraska-Lincoln (UNL) – David Hansen ([dhansen1@unl.edu](mailto:dhansen1@unl.edu))
* University of Nebraska Medical Center (UNMC) – Paul Estabrooks ([paul.estabrooks@unmc.edu](mailto:paul.estabrooks@unmc.edu))
* University of Nebraska at Omaha (UNO) – Sara Myers ([samyers@unomaha.edu](mailto:samyers@unomaha.edu))
* University of North Dakota (UND) – Jonathan Geiger ([jonathan.geiger@med.und.edu](mailto:jonathan.geiger@med.und.edu))
* University of South Dakota (USD) – Robin Miskimins ([robin.miskimins@usd.edu](mailto:robin.miskimins@usd.edu))

# Application Process and Requirements (including key dates)

1. Call for applications (December 2017)
2. Consult with BERD Core before submitting application (project awards only). Request a consultation via this link: <https://www.unmc.edu/publichealth/centers/ccorda/request.html>
3. Application Deadline (January 31, 2018)
4. IRB Submission Due Date (before NIH approval)
5. Selection Announcement (April 2018)
6. CITI Training Due Date (before end of April 2018)
7. Dissemination and Implementation Workshop (June 2018)
   1. Funds are released after completion of all training and submission requirements
8. Project Begin Date (July 1, 2018)
9. Annual Science Meeting (October 2018)

**Proposal Format and Guidelines:**

1. Cover Letter:
   1. Project name
   2. Name of Academic Partner
   3. Academic Partner’s institution
   4. Name of Community Partner and/or organization
2. Proposal (no appendices):
   1. Significance (1/2 page)
   2. Innovation (1/2 page)
   3. Description of the Partnership and Development Plans (1/2 page)
   4. Approach (1 page)
   5. Expected Outcomes and Future Directions (1/2 page)
3. Letter of Support from partner and/or organization
4. Proposed budget (see below for form and guidelines) and budget justification
5. NIH Biosketch from all research partners

**Application Submission:**

Applications should be saved in pdf format and submitted via REDCap, using this link: <https://unmcredcap.unmc.edu/redcap/surveys/?s=3DLW8W4TN9>. Deadline is 5 pm CST on January 31, 2018. Should you have difficulty with your submission, contact Sean Navarrette at [sean.navarrette@unmc.edu](mailto:sean.navarrette@unmc.edu) or 402.559.9322.

**Review Process and Scoring**

1. Proposals are presented to GP IDeA-CTR Community Advisory Board members during meeting.
2. Proposals and scores are submitted to the GP IDeA-CTR Steering Committee.
3. Highest reviewed proposals are sent to NIH for approval (IRB approval is required by NIH).
4. Selections are announced.

Proposals are scored 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 Community Advisory Board (listed on second page).

**Post-Selection Requirements:**

All members of the research team will need to complete CITI Training if they’ve not done so already. Additionally, selected proposals will be required to submit a six month progress report as well as a final report once the project is complete. Academic partners will also be expected to attend the GP IDeA-CTR Dissemination and Implementation Workshop prior to the project start date. Lastly, CAP Program projects will be required to attend the GP IDeA-CTR Annual Science Meeting in October and may be invited to present their project.

**Questions**

For questions, contact Sean Navarrette, [sean.navarrette@unmc.edu](mailto:sean.navarrette@unmc.edu) or 402.559.9322 or the Great Plains IDeA-CTR Office at [gpctr@unmc.edu](mailto:gpctr@unmc.edu) or 402.552.2260.

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| **DETAILED BUDGET FOR FULL PROPOSAL** | | **Dates:**  **FROM** | | **THROUGH** |
| **NAME** | **Fringe Rate\*** | **SALARY**  **REQUESTED** | **FRINGE**  **BENEFITS**  **\*** | **TOTAL COST** |
|  |  |  |  |  |
|  |  |  |  |  |
| *\*Not to exceed fringe allowable rate from applicant’s institution; Must provide institutional documentation of fringe rate* | | | | |
| **SALARY SUBTOTAL** | | | | $ |
| RESEARCH EXPENSES *(Itemize by category) \*\**    CONSULTANT COSTS    EQUIPMENT    SUPPLIES    TRAVEL    OTHER EXPENSES      BUDGET JUSTIFICATION: | | | |  |
| OTHER EXPENSES SUBTOTAL | | | | $ |
| **TOTAL DIRECT COSTS FOR BUDGET PERIOD (NOT TO EXCEED $50,000 FOR THE PROJECT AWARD OR $2,500 FOR THE PLANNING AWARD)** | | | | $ |
| *Applications must include an itemized budget and budget justification. Allowable costs include the following types of expenses: research supplies, equipment, technical personnel, travel, and consulting, participant reimbursement. These funds may not be used for salary support for administrative personnel. Funds may not be used for foreign travel or to support construction/renovations. Although stipends for graduate students and post-doctoral trainees are not allowed, wages and salary support is allowed.*  *For questions concerning the budget or budget justification, contact Melissa Welch-Lazoritz at m.welchlazoritz@unmc.edu* | | | | |
| **Institutional F&A Rate: Total Indirects:** $  **Grand Total:** $ | | | | |