Translation Support Proposal

APPLICATION INSTRUCTIONS

Research Project Letters of Intent are currently accepted on a ROLLING SUBMISSION basis.

Applications must be submitted electronically in WORD format* to:
The Center for Innovation and Research by email at: Sharon.Baer@Sparrow.Org

*Your application in its entirety (to include Biosketches, Letters of Support, etc.) MUST be scanned into ONE PDF; however, the following pages must also be submitted in Word: Abstract Page, Purpose and Specific Aims/Innovation Page, and Pages 2-7.
TRANSLATION PROJECTS OVERVIEW

DEADLINE DATES:
- Rolling Submissions

1) THE PRACTICE QUESTION.
   b. List of objectives or aims of the translation project for direct patient care.
   c. Determine appropriateness and feasibility to your desired practice setting and describe how patient care will be improved.
   d. Describe the overall strategy and protocol in detail for how it will be implemented. Create an action plan and consider cost and resources, disruption to patient care flow. List specific activities that are needed to be translated into practice.
   e. Changes in system that will need to be made to implement. Is the system ready?
   f. Will need to describe current status/practice that will be changed. What is the significance for patient care and how will you document improvement from current practices?
   g. What are the threats and barriers to implementation?
   h. Provide evidence that unit administrators and managers will support implementing the protocol.

2) IMPACT ON PATIENT, NURSES, SYSTEM (Outcomes)
   a. How will outcomes be measured? Include description of tools or instruments to be used. Patient outcomes. Improve quality, cost, and safety. Data will need to be collected on outcomes. Pre-measures should be compared with post outcomes

3) Team members to be involved. Responsibility chart. Who is responsible for implementing each component? What team members are involved?

4) Provide a detailed evaluation plan to determine the value for the patient, staff and system.

5) Timelines for project.

TRANSLATION PROPOSAL

DEADLINE DATES:
- Rolling Submissions
- Submit by email to: Center for Innovation and Research at: Sharon.Baer@Sparrow.org
- Notification of Funding: Approximately eight (8) weeks following due date.
- Funding Available: Typically up to $25,000.00

PURPOSE OF GRANT:
The purpose of the Center for Innovation and Research is to support the translation of innovative health care delivery research that will affect patient outcomes, safety, quality and cost. The translation project must address the Mission and Vision of the Center of Innovation and Research and Sparrow Health System. The strong evidence should be from clinical trials that have efficacy documented.

All research grant awards are typically up to $25,000.

Training or educational grants, marketing, staffing, or equipment purchase grants will not be supported. We want to have translation projects directly related to patient care.
ELIGIBILITY:
The principal investigator must actively be a clinician or researcher from MSU or Sparrow. The team has to show clear evidence of working together. Funding preference will be given to translation projects that focus on health care quality, patient outcomes (including safety), and cost. Outcome variables must be specific and clear, and processes for implementation must be clear.

FUNDING PERIOD:
The maximum funding period is one (1) year from the receipt of the award notification. “No cost” extensions will be considered on a case-by-case basis. Requests for no-cost extensions should be made during the final three months of the grant project.

GENERAL INSTRUCTIONS:
• Should have a scientist as a co-investigator who has an established track record of independent (extramural) research funding. The team should include investigators from MSU and Sparrow. One of the goals of the Center for Innovation and Research is to develop partnerships of researchers/clinicians at MSU and Sparrow. If not going for extramural funding, include a description of how, if successful, this can be implemented broadly in the Sparrow Health System. It is important to have statistical support to know that the data meets scientific rigor.
• Partners from MSU and Sparrow need to have a specific role and not just be a consultant or honorarium, they need to be an integral team member.

ROLE OF CONTRIBUTOR(S)
• Substantial contributions to the conception or design of the project; or the acquisition, analysis, or interpretation of data for the work; AND
• Drafting the proposal or revising it critically for important intellectual content; AND
• Final approval of the version to be submitted; AND
• Agreement to be accountable for all aspects of the proposal in ensuring that questions related to the accuracy or integrity of any part of the project are appropriately investigated and resolved.

NOTE:
* Prior to finalization of the budget, you should make contact with Nancy Miller, Director of Research, Sparrow Clinical Research Institute (SCRI). She can assist with activities that occur at Sparrow or involving Sparrow medical records that may or may not have related budget issues. Nancy.Miller@Sparrow.org

INSTRUCTIONS FOR COMPLETION OF THE TRANSLATION APPLICATION:
*Please use the provided formats of the attached templates to complete these sections and follow page limits.

COVER PAGE:
• Name of the applicant(s).
• Team of Investigators with Institutional affiliation for each person identified.

ACKNOWLEDGEMENT CHECK OFF LIST (See Forms Section)

ABSTRACT:
Provide the following information on the project: (See Forms Section)
• At the top of the abstract page, list the title of the project. Limit to 75 characters.
• The abstract should be limited to one page (500 words), using a 1 inch or ½ inch margin. Indicate the number of words in the abstract at the bottom of the page.
• Practice Questions or Objectives.
• Strong Existing Evidence to be Translated, show Strength of Evidence.
• Significance to Practice and Patient Outcomes.
• Rationale/Significance of Study.
• Approaches, Detailed Action Plan, Design, Setting, Methods. (Protocol for Implementation.)
• Potential for Future Broad-Scale Implementation at Sparrow.

PROPOSAL:
Format:
• The narrative (Purpose/Practice Questions through Data Analysis) is not to exceed 6 single-spaced typewritten pages using an 11-point font (preferably Times New Roman, Arial, or Courier)
• Half-inch margins top/bottom, right, and a ¾ inch left margin.
• The consistent use of one format (American Psychological Association [APA], American Medical Association [AMA], etc.) for the text, citations and reference list is required.
• Please number all pages of the narrative.

PRESENT THE PROJECT NARRATIVE INFORMATION IN THE FOLLOWING ORDER:

TITLE OF PROJECT. Limit to 75 characters.
Purpose/Specific Aims. (SEE FORMS SECTION)
  ▪ Purpose and Specific Aims. Clearly state the purpose of the study and list objectives in numerical sequence.
  ▪ Practice Question
  ▪ Innovation: How will this transform Current Care? Evidence that this deals with a gap in existing science. (SEE FORM, NEXT PAGE)
    • Describe how the application challenges and seeks to shift current or existing clinical practice at Sparrow paradigms by utilizing novel approaches or methodologies, or interventions. Describe how refinement, improvement, new application of approaches to care processes, or interventions, will be proposed.

Background Significance, Rationale, and Review of Literature Approach – (SEE FORMS SECTION, Proposal Pages 2-7.
  ▪ Description should indicate effect on patient outcomes, safety, cost, quality of care, impact on nurses and system.
  ▪ Describe how the project will address an important problem or a critical barrier to direct patient care.
  ▪ Explain how, if the objectives of the project are achieved, patient care will be improved, and/or clinical practice will be improved or transformed.
  ▪ Describe how successful completion of the objectives will change the methods, technologies, treatments, services, or interventions that drive patient care, i.e. quality, patient engagement, safety, cost, and outcomes. Clearly articulate the strength of the evidence.
  ▪ Identify how the study will contribute to the change or improvement of patient care at Sparrow Health System.

Evidence Work.
  ▪ Describe previous evidence on the topic that has been done in clinical trials, what has worked, and what have been the outcomes (summary of evidence). Is it feasible? How will clinical care be improved? Patient outcomes.
  ▪ Is it built on strong research evidence? Is evidence provided for translation? Provide strong evidence of benefit.
  ▪ The service/care recipients need to be in the Sparrow Health Care System

APPROACH, METHODS AND DESIGN. Use the following subheadings:
  ▪ Design. Describe the action plan in detail (a protocol): threats and barriers to implementation/Plan for Implementation. Protocol to be followed to translate and then implement in practice.
  ▪ Sample. Describe the number and type of participants. Evidence that patients are available and would participate. Eligibility criteria should be specified.
  ▪ Describe the process for implementation with nurses and patients. Provide a rationale for the use of the selected setting(s) and patient population. How will fidelity of the protocol be assured?
▪ **What adverse events might occur?** What will be required of the practicing nurses, and what changes in the unit/staffing, etc. will be needed to implement?

▪ **Intervention characteristics.** What is the intervention? Describe the protocol. What is the primary outcome? Will need pre and post measures to show improvement over current practice. Describe the strength of the outcomes measure.

▪ **A more complete description of the intervention may be appended for further clarification.**

▪ **Measures.** List and describe all data collection measures, and include a discussion of the validity and reliability of each or other psychometric properties. Append a copy of all assessment measures and citation of use in clinical practice. Rationale for use of measure should be included.

▪ **Data Collection Schedule and Procedures.** Describe how and when data will be collected and procedures for data collection and protection of patients. Source of data? What patient record data will be collected?

▪ **Data Analysis and Interpretation.** Describe the statistical or analytic techniques that will be used to address each objective or practice question of the project. Include statistical support person and role.

▪ **Team.** Need to have clinicians and researchers. Include responsibility chart. (At least one team member from MSU and one from Sparrow.) Must have team members actively involved project.

▪ **Staff needed/Who are the team members?** What will be the change in requirements for staffing or staffing needed?

▪ **Implement Research-Tested Interventions** (previously tested in clinical trials) Used broadly in clinical practice elsewhere. Should have the potential to be more widely (than one unit) disseminated within the Sparrow Health System. What barriers do you anticipate?

▪ **Protocol for how it will be implemented should be included (may be in appendix).**

▪ **Evaluation Plan.** How will success be determined? Specify outcomes for cost, quality, and safety.

**OTHER COMPONENTS OF THE PROPOSAL SUBMISSION PROCESS:** (Not part of the 6-page narrative)

**Priorities and Implications for Practice and Research.** *(See Forms Section)*

Describe how the project addresses the Priorities of the Center for Innovation and Research and Sparrow Health System.

▪ Describe the implications for quality, patient care outcome, cost, and safety.

**Future Dissemination.** *(See Forms Section)*

▪ Detail fully how completion of this project will lead to other benefits to Sparrow and MSU.

**Provide 1-2 paragraphs addressing each of the following areas:**

▪ **Research on Human/Animal Subjects.** The principal investigator must obtain approval from an Institutional Review Board (IRB) or Animal Welfare Committee if the proposed project pertains to human or animal research. The IRB must be registered with the office for Human Research Protections, DHHS and the assurance identification number must be provided as instructed in the application submission process. If approval has been received, list the approval date and upload the approval letter.

▪ Describe how informed consent will be obtained and steps taken to protect participants’ rights or the welfare of animals. Identify any potential risks associated with participation in the project.
▪ **Women, Children and Minority Inclusion.** Provide information on the composition of the proposed study population in terms of sex/gender and racial/ethnic group. Provide a rationale for selection of such subjects.

▪ **Facilities and Resources (Environment).** Describe the facilities and resources available to carry out the project at all research sites, e.g., computers, statistical and data management support, access to patients, if relevant.

**APPENDICES (Not included as part of the 6-page narrative)**

▪ **Reference List.** The reference list should follow the format chosen for the project narrative (APA, AMA, Chicago, etc.). Should include evidence activities describing trials.

▪ **Timetable for Accomplishing the Work.**
  The project should be confined to a maximum of one year. Please include a time line with details for benchmarks. The timetable should reflect a realistic work schedule so the project can be completed within the funding period. All major activities should be on the timeline.

▪ **Mandatory Letters of Support:**
  ▪ Partners from MSU and Sparrow need to have a specific and active role and not just be a consultant or receive an honorarium. They need to be an integral, active, and on-going team member.
  ▪ **Consultants can be included; they just do not count as the desired partnership.**
  ▪ Include letters of support from key administrators and consultants, as necessary, about time and fund allocation.
  ▪ Letters of support should document access to performance sites and research participants, institutional resources committed to the project, and matching funds, if any.
  ▪ Any consultants should describe their role and involvement with the research project.
  ▪ Salary Support or in-kind Personnel. [If requesting salary support for the PI or Co-PI, submit a letter from the individual’s immediate supervisor] that gives assurance that release time will be provided from existing job responsibilities.
  ▪ The period of release time must be specified. The percentage of release time must reflect and discuss the percentage of salary support requested in the budget and/or in-kind personnel contributions.
  ▪ Provide a letter from an appropriate administrator that shows effort will be supported.
  ▪ If there is going to be a change in the kind of personnel used in a department (a new type of personnel), a letter of support from the Department Manager must be supplied.

▪ **Evidence Tables**
  ▪ Optional, but could be in appendix to document evidence.
  ▪ Using evidence tables will help to prepare literature reviews for translation projects. Please see the CFIR website for examples of evidence tables (listed under the Resource section):
    http://sparrowmsuinnovations.msu.edu/

▪ **Biographical Sketches for All Key Personnel. (SEE FORMS SECTION)**
  ▪ (INVESTIGATORS) Use the PHS Form 398 (6/09) biographical sketch form. Submit a biosketch for the PI and any key participants, e.g., all co-investigator(s), consultant(s), clinician collaborators and mentors. Each biosketch is limited to 2-4 pages. Note that the biosketch personnel statement needs to include the contributions (role) of that person to the grant proposal. (Consultants and statisticians)
  ▪ Name the one individual who is primarily responsible for implementing this proposal and for reporting. Enter your position and institutional address.

▪ **Instrument(s)/Measure(s).** Include all instruments or measures that will be used to collect outcome data.
The Center for Innovation and Research will not support:

- Payment of tuition
- Publication costs
- Journal subscriptions or books
- Travel costs to professional meetings
- Institutional indirect costs
- Travel for conference attendance or presentation
- Patient Care Costs
- Educational Training
- Equipment purchase, except in situations where that will support better patient outcomes and is central to the proposal. Equipment must be justified and directly related to care.
- Marketing or advertising
- Licenses
- **Total Budget Requested.** Budget requested is typically up to $25,000.00. See the section entitled “Line Item Budget and Budget Justification”. For one year. We need the details.
- **No funds will be released until Institutional Review Board [IRB], Institutional Animal Care and Use Committee [IACUC], or other approvals have been confirmed. If these are intellectual property areas of concern, these will need to be resolved before the proposal is submitted if possible. Funding will not occur until resolved.**

**Budget Justification/ Line Item Budget:** *(Please refer to the separate CFIR Budget Worksheet [Excel spreadsheet] and attach along with the Budget Justification.)*

The justification is a description that includes a justification for all itemized expenses including personnel. Each section of the justification should: (1) list the specific items or project personnel noted below, (2) describe why the items or personnel are essential to the conduct of the study, and (3) include any cost calculations.

One line item budget may be submitted for the entire project or separate budgets are permitted from each performance site. Consortium or contractual arrangements and costs should be itemized. Items labeled as miscellaneous will not be funded. The line item budgets may include the following:

**Personnel:** These funds are not to support summary salaries or salaries to carry over staff while other funding is being sought.
- A description of the activities and role of each person involved in the research project including the principal investigator, co-investigators, consultants, research assistants, secretaries, data collection and data management staff, statistician, etc. Include the percentage of time devoted by each person. If a percentage of any person’s time is to be supported by the institution/another grant or as “in-kind”, indicate and explain in the justification of the budget request for the position.
- All research project personnel, consultants. Include the name, position, % time devoted to project, fringe benefit percent and amount, total fringe requested, and total salary requested.

**Supplies:**
- Details are needed. Supplies are defined as items with a unit cost of $500 or less. Examples include: photocopying, telephone, postage, computer time, paper, envelopes, transcription machines, cassette tapes, floppy disks, etc.

**Equipment:** Details and Specs are needed.
- Equipment requests should not represent a major portion of the budget or the only budget item. The narrative for equipment requests should: (1) identify the availability of matching funds, if any, or other funds that will contribute to the purchase of the item, (2) explain why the item is absolutely essential to the study, (3) Ownership of the item at the completion of the study will be individually assessed, but will belong to Sparrow or MSU.
- Equipment is defined as items with a unit cost greater than $500.
Travel.
  • Only for data collection and study costs will be considered. Specify the purpose, personnel involved, distance, number of trips, mode of travel, and cost of travel. Conference travel and expenses will not be supported.
  • Conference travel and expenses will not be supported.

Software:
  • Request software only if the institution does not provide it. Include the name, version number, and unit cost.

Other Expenses:
  • Do not list as miscellaneous. These must be listed very specifically, i.e., lab fees or supplies, lab assays, standardized testing, or reimbursement of study participants.

Other Support:
  • Identify total amount of other sources of funding for the study. Specify source, amount and funding period.
  • Identify any additional funding that has already been awarded for the proposed study, including any funding obtained by a co-investigator. Explain how the work supported by other sources is different from the present request. Overlaps in funding are generally not funded.

Pending Funding:
  • If there is other pending funding for the proposed project, identify the amount, agency, and date the funding is expected to be initiated, if awarded. If no additional funding is available or pending for the project, write “Not Applicable” in this section of the narrative. The USPHS Form 398 Page entitled, “Other Support” may be submitted.

Total Funds Requested – there are no indirect funds.

EXPECTATIONS FOR RECIPIENTS:
  ▪ PROGRESS AND FINAL REPORTS: For all funded projects, six (6) month progress reports are required for release of final funds. A final report of expenditures and a final scientific report must be submitted 30 days following the project funding period/scheduled completion of the grant. Guidelines for submitting these reports will be provided to all grant recipients, to include achievement of the aims/objectives of the grant, findings from the study, and recommendations for next steps in implementation in practice. Unexpended funds revert to the Center for Innovation and Research.
  ▪ Six (6) month Progress Reports to include the following information:
    ▪ Date of report.
    ▪ Timeline achievement.
    ▪ Report on activities in statement of work and details on status.
    ▪ Budget spending progress.
    ▪ Summary of achieving Specific Aims.
    ▪ Barriers to implementing study.

  ▪ Recipients will agree to complete a follow-up survey at one, three, and five years after the completion of the funding project. The purpose of the survey is to track dissemination activities and additional funding which have occurred.
  ▪ Reports may be requested at more frequent intervals by Advisory Board and/or Governing Board.
  ▪ ACKNOWLEDGEMENT OF FUNDING: Investigators must acknowledge that this research was funded by the Sparrow Health System/Michigan State University Center for Innovation and Research. This must be on all dissemination formats, posters, manuscripts, presentations, etc. Poster templates are available at the CFIR office, and are also hosted on the CFIR website: http://sparrowmsuinnovations.msu.edu/.

FORMS – see attached
Sparrow/MSU Center for Innovation & Research
Application Instructions Acknowledgement Checklist (to immediately follow the cover page)

We acknowledge that the following information has been reviewed, and confirm that the application has been given proper consideration in the development of the project entitled:

___________________________________________

Principal Investigator: ________________________________

Please check the following items as confirmation of your documents review (fillable form):

☐ The Principal Investigator has read the application instructions in their entirety.

☐ We acknowledge that the team includes investigators from both Michigan State University and Sparrow Health System. We have read and agree to the Role of the Contributor(s) definition.

☐ Team member names, including credentials (if any), and their affiliations (Sparrow Health System, Michigan State University, College, Department, Unit, etc.) have been clearly identified.

☐ We acknowledge that all team members have participated in development of this proposal and agree to its content.

☐ We acknowledge that the proposal itself does not exceed 6 single-spaced, typewritten pages (Background Significance, Rationale, and Review of Literature).

☐ We have attached the following pages: Abstract page, Purpose/Specific Aims and Innovation page, and Research Priorities/Implications and Future Funding Sources page.

☐ We have included our budget using the CFIR Budget Worksheet, as well as a budget justification.

☐ We have included Letters of Support for team members from key administrators regarding salary support, and/or in-kind support, which address issues such as release time, salary, responsibilities, etc.

☐ We have included Biosketches (or resumes, if applicable) for the PI and key participants.

☐ We will scan our application in its entirety (to include Biosketches, Letters of Support, etc.) into ONE PDF file.

☐ We will also submit in Word: Abstract Page, Purpose and Specific Aims/Innovation Page, and Pages 2-7.

☐ This project requires Intellectual Property determination.
<table>
<thead>
<tr>
<th>Abstract (Limited to one page [500 words] – indicate number of words at bottom of page)</th>
</tr>
</thead>
<tbody>
<tr>
<td>To include: 1) Name of Applicant(s)/Institutional affiliation for each person identified. 2) Purpose/Practice Questions or Objectives. 3) Strong Existing Evidence to be Translated, show Strength of Evidence. 4) Significance to Practice and Patient Outcomes. 5) Rationale/Significance of Study. 6) Approaches, Detailed Action Plan, Design, Setting, Methods. 7) Potential for Future Broad-Scale Implementation at Sparrow.</td>
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Number of words:
• **Innovation: Evidence** (An existing science and evidence base from clinical trials.) What is the strength of the evidence, how can it be applied at Sparrow, and why?
Proposal: Background and Significance, Evidence, Approach
**Priorities and Relevance to Practice. (½ page)**


**Future Dissemination Plans. Plan for Implementation. (½ page)**
### BIOGRAPHICAL SKETCH

Provide the following information for the Senior/key personnel and other significant contributors. Follow this format for each person. DO NOT EXCEED FIVE PAGES.

<table>
<thead>
<tr>
<th>NAME:</th>
<th></th>
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<tbody>
<tr>
<td>eRA COMMONS USER NAME (credential, e.g., agency login):</td>
<td></td>
</tr>
<tr>
<td>POSITION TITLE:</td>
<td></td>
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**EDUCATION/TRAINING** *(Begin with baccalaureate or other initial professional education, such as nursing, include postdoctoral training and residency training if applicable. Add/delete rows as necessary.)*

<table>
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<th>DEGREE (if applicable)</th>
<th>Completion Date MM/YYYY</th>
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**NOTE:** The Biographical Sketch may not exceed five pages. Follow the formats and instructions below.

**A. Personal Statement**

Briefly describe why you are well-suited for your role(s) in the project described in this application. The relevant factors may include aspects of your training; your previous experimental work on this specific topic or related topics; your technical expertise; your collaborators or scientific environment; and your past performance in this or related fields (you may mention specific contributions to science that are not included in Section C). Also, you may identify up to four peer reviewed publications that specifically highlight your experience and qualifications for this project. If you wish to explain impediments to your past productivity, you may include a description of factors such as family care responsibilities, illness, disability, and active duty military service.

**B. Positions and Honors**

List in chronological order previous positions, concluding with the present position. List any honors. Include present membership on any Federal Government public advisory committee.

**C. Contribution to Science**

Briefly describe up to five of your most significant contributions to science. For each contribution, indicate the historical background that frames the scientific problem; the central finding(s); the influence of the finding(s) on the progress of science or the application of those finding(s) to health or technology; and your specific role in the described work. For each of these contributions, reference up to four peer-reviewed publications or other non-publication research products (can include audio or video products; patents; data and research materials;
databases; educational aids or curricula; instruments or equipment; models; protocols; and software or netware) that are relevant to the described contribution. The description of each contribution should be no longer than one half page including figures and citations. Also provide a URL to a full list of your published work as found in a publicly available digital database such as SciENcv or My Bibliography, which are maintained by the US National Library of Medicine.

D. Research Support

List both selected ongoing and completed research projects for the past three years (Federal or non-Federally-supported). Begin with the projects that are most relevant to the research proposed in the application. Briefly indicate the overall goals of the projects and responsibilities of the key person identified on the Biographical Sketch. Do not include number of person months or direct costs.
BIOGRAPHICAL SKETCH

Provide the following information for the Senior/key personnel and other significant contributors.
Follow this format for each person. DO NOT EXCEED FIVE PAGES.

NAME:

eRA COMMONS USER NAME (credential, e.g., agency login):

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A. Personal Statement

B. Positions and Honors

C. Contribution to Science

D. Research Support