

COMMUNITY-ENGAGED RESEARCH PILOT (CERP) FUNDING OPPORTUNITY ANNOUNCEMENT

The mission of the Mountain West CTR-IN Program is to increase and enhance clinical and translational research capacity and facilitate extramural funding success among investigators with faculty appointments at its partner institutions in the Mountain West region.

Eligibility. For year 12 **(2024-2025)**, faculty who are eligible to apply are limited to the following 6 universities that are continuing their partnerships and collaboration with MW CTR-IN in the grant renewal application to be submitted to NIGMS on November 9, 2023:

1. Montana State University

- 2. New Mexico State University
- 3. University of Alaska Anchorage
- 4. University of Alaska Fairbanks
- 5. University of Nevada Las Vegas
- 6. University of Nevada Reno

Key Dates:

| Final day for submission of Nominating Packets by Institution partners* | December 8, 2023 |
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| Invitations to investigators to submit full applications will be issued by | December 15, 2023 |
| Application Due Date | March 15, 2024 |
| Announcement of applications selected for Intent to Fund | June 2024 |
| Earliest Start Date** | July 2024 |
| Project Period** | July 2024 – June 2025 |

* The limited competitive nomination process will be determined by each partner institution; earlier internal deadlines may be set by each partner institution.

** Actual start date will be dependent upon receipt of approval from NIGMS.

MW CTR-IN Grant Renewal. The number of grants awarded will be dependent upon the availability of funds. The MW CTR-IN will be applying for grant renewal on November 9, 2023. The funding for this round of grants is not dependent upon receiving the grant renewal award as MW CTR-IN may be able to allocate its unobligated funds to support proposals during a no cost extension period.

Purpose. In the past eleven years, CTR-IN has funded several community-engaged research pilot projects. The purpose of this funding opportunity is to increase the number of community-engaged research pilot projects across the CTR-IN network. This funding opportunity is particularly directed towards faculty who have already established relationships with community partners to engage in research with those communities. The goal of this community-engaged research pilot project is to generate key preliminary data and evidence of robust community-engaged research to support and inform a competitive "R-level" grant application to NIH or other extramural funding sources. Projects must involve community-engaged human subjects research; we do not support pre-clinical research. This mechanism also requires that the PI have a community partner.

Webinar. We will have a webinar about this year's funding mechanisms in **October 2023 (Date: TBA).** Please watch for an announcement with date/time and link. If you cannot join the webinar live, but would like to view the webinar, you can access the recording on the MW CTR-IN website at: <u>https://ctrin.unlv.edu/</u>

Programmatic Priorities. Working in conjunction with our two Regional Community Advisory Boards (CABs) representing all six Mountain West states, we solicited input on funding priorities for health disparities research in the communities we serve. The following specific themes were consistently identified across all CABs:

- Obesity and metabolic conditions including diabetes and other related factors of food security, food sovereignty, and healthy food access.
- Opioid and other substance abuse, mental health / suicide prevention and psycho-social trauma.
- COVID-19 and other emerging diseases, including impacts to healthcare access, associated influences on mental health, and its disproportionate impacts on populations with health disparities.

We recognize that the above areas of health disparities research do not capture all important health priorities in all of the communities that we serve, or that the CABs have identified, and our funding determinations are **not** limited only to these topics. Research must include a focus on one or more NIH-designated populations who experience health disparities in the United States, which include racial and ethnic minority groups (Blacks or African Americans, Hispanics or Latinos, American Indians and Alaska Natives, Asian Americans, Native Hawaiians and other Pacific Islanders), socioeconomically disadvantaged populations, sexual and genderminorities, and underserved rural populations. In September 2023, NIH designated persons with disabilities as a population with health disparities. Please see the following link for further information: https://www.nimhd.nih.gov/docs/advisory-

<u>council/nacmhd_workGrpOnHealthDisparitiesAndPeopleWithDisabilities_report_2023sept.pdf</u> We also anticipate that these programmatic priorities may be revised and updated in forthcoming years as we continue to receive input from our local and regional stakeholders. All applications will undergo the same scientific merit review using standard NIH procedures, regardless of the topic area.

Principal Investigator (PI) Eligibility. The PI must 1) have a faculty-level appointment with a minimum of 0.5 FTE support at a participating CTR-IN Institution; 2) be eligible to submit extramural grant applications from their institution as a PI; and 3) have an established community partnership that is focused on the pilot project topic. The PI must devote at least 20% effort (2.4 person months) to the project. Prior CTR-IN awardees are eligible to apply, but they must be in good standing (i.e., submission of requested progress reports and updates). Per IDeA program policy, an awardee may not concurrently receive funding for their research project through other IDeA mechanisms (e.g., CTR, COBRE or INBRE).

Direct Costs: up to \$90,000 (depending on the availability of funds)

APPLICATION PROCESS

STEP ONE - Limited competition nomination of applicants from eligible institutions:

Applicants must be nominated by their institution and subsequently invited by MW CTR-IN Program to submit a full application. Potential applicants must contact their local MW CTR-IN Concierge and / or Vice President for Research (VPR) Office for instructions on the internal nominating process. Each partner institution may nominate up to a maximum of 10 applicants.

Nominating Packets <u>must include</u> the following for each applicant:

- An NIH format Biographical Sketch for the proposed PI.
- An NIH format Other Support document for the proposed PI.
- A summary of the proposed research of not more than one page with sufficient detail to establish that the community-engaged research is clinical and / or translational.
- A letter of support signed by an appropriate institutional official committing to provide support for half of the requested PI effort if the project is awarded.
- A letter of support from the community partner demonstrating an established relationship with the PI. The community partner must have worked directly and regularly with the participating community.

<u>STEP TWO - Invitation to submitgrant application</u>: Nominating Packets will undergo administrative review by MW CTR-IN Program to ensure that they are responsive to the respective funding opportunity. OSP representatives will be notified of any nominations that are found to be non-responsive. A Nominating Packet that is determined to be non-responsive may be replaced with another while the Nomination phase is open. *Thus. early submission of Nominating Packets is encouraged* in order to allow adequate time to prepare a replacement nomination where applicable. Applicants with approved Nominating Packets will be invited to submit a full application.

STEP THREE - Full application: Detailed application instructions will be provided to applicants that are invited to submit full applications. At that time, applicants will also automatically have "tickets" generated to their biostatistical, community engagement and outreach, and professional development team members from the CTR-IN Program. With respect to preparing the research strategy and budget, the following requirements will apply:

- Cover page- use PHS Form Page 1
- Project Summary Form Page 2
- Specific Aims 1 page
- Research Strategy 4 pages. Note: in addition to Significance, Innovation and Approach sections, the Research Strategy should include timeline, interim milestones and plans for developing and submitting a subsequent extramural grant application. The Research Strategy should also describe how the community partner is involved in the development and/or implementation/dissemination of the project. Note that projects adhering to accepted principles of Community-Based Participatory Research (CBPR) are highly encouraged, but not required.
- Budget details and Justification PHS Form Page 4
 - Facilities and Administration Costs are limited to the federal/NIH *de minimus* rate of 10%.
 - $\,\circ\,$ All expenses must be allowable under NIH guidelines.
 - Travel expenses are allowed, including expenses for conducting field work as part of the project or accessing experts or other resources such as meeting with a formal mentor. Note: mentors are not required for the CERPs. Budgets <u>must</u> include costs for the PI and a community member to attend the CTR-IN Annual Meeting in Las Vegas. This will likely be two and a half days of meetings. Travel expenses may be requested for the PI to present this work at one national or regional meeting, providing the meeting date is within the project period and far enough into the project for data to be available.
 - Special requirements regarding PI support: <u>PIs must devote at least 20% effort to the proposed research</u> (i.e., 2.4 calendar months); up to 50% effort may be proposed. While the budget narrative must reference the full amount of effort required to accomplish the proposed scope of work, the budget may include CTR-IN funds for not more than half of the PI effort. Per prior agreement with CTR-IN partner institutions, the balance of PI effort is to be covered by institutional support in the form of release from teaching, direct salary support, assignment of time provided to pursue scholarly activity, or other mechanism appropriate to

the institution. This support is not a formal cost share, and no recording/reporting requirements exist. Budgets should list the full PI effort proposed as appropriate for their appointment in calendar months, or academic and summer months.

- A minimum of 5% of the total direct cost must be devoted to supporting the community partner(s) engagement with the project.
- Subcontracts to institutions located in non-IDeA states are not allowable. However, services provided in non-IDeA states can be purchased on a fee-for-service basis.
- Community partner's Letter of Support (This can be the same letter included in the Nomination Packet.)
- Human Subjects Forms H
- IRB approval or a timeline of how IRB will be obtained before May 4, 2024 must be included with application. If the IRB approval is not obtained by May 4, 2024 the application will not be considered for funding regardless of the Overall Impact Score.
- Dissemination Plan for how the results of the project will be disseminated back into the community.
- Other Support for PI
- If the PI has received prior MW CTR-IN funding, include a 1-page summary of the results of that previously funded pilot project.

OTHER IMPORTANT INFORMATION

Eligible Mountain West Clinical & Translational Research Infrastructure Network Partner Institutions:Montana State UniversityUniversity of Alaska, AnchorageUniversity of Nevada, Las VegasNew Mexico State UniversityUniversity of Alaska, FairbanksUniversity of Nevada, Reno

The types of clinical or translational research we fund:

Projects must be clinical and / or translational research (CTR). Clinical research, as defined by NIH, is research with human subjects that is:

- (1) patient-oriented research;
- (2) epidemiological or behavioral studies; or
- (3) outcomes or health services research.

Translational research has been interpreted in a variety of ways in recent years, and CTR-IN characterizes translational research according to the recent review on this topic. For this funding mechanism, we do not support pre-clinical research, sometimes referred to at T0 research. CTR-IN supports four main areas of translational research, defined as follows:

- T1: Translation of basic science to early testing in humans;
- T2: Early phase clinical trial; efficacy; establishment of clinical guidelines;
- T3: Implementation and dissemination research; and
- $T4: Outcomes \, and \, effectiveness \, research.$

<u>MW CTR-IN Professional Development Core (PD Core)</u>:

The PD Core offers <u>several resources to enhance your application and facilitate career advancement</u>. For nominees, the PD Core can help identify an appropriate mentor for your project. For eventual awardees, the PD Core offers critical educational resources that are often required by NIH and that will enhance your project, such as Good Clinical Practice and Responsible Conduct of Research training. These resources are available to MW CTR-IN investigators regardless of whether or not their project is selected for funding. Finally, GrantWritingWorkshops (GWW) and the Advance To Funding (ATF) Program (a pre-review study section service offered for first time R-level applicants) are offered annually.

CTR-IN programmatic resources are available to assist with application submissions:

- For questions about the nomination process, contact <u>your institutional CTR-IN concierge</u>
- For questions about the portal, contact KathreneConway Kathrene.Conway@unlv.edu
- For questions on the CTR-IN pilot grant program, contact Dr. Jeffrey Ebersole (jeffrey.ebersole@unlv.edu) or Dr. Jay Shen (jay.shen@unlv.edu).