**UVM Larner College of Medicine**

**Health Services Research Pilot Grant Awards**

***Request for proposals: Due May 1, 2017***

The Larner College of Medicine (COM) Health Services Research Pilot Grant Award will support faculty engaged in research focused towards the following areas: healthcare delivery models, chronic disease prevention and management, organization and financing of healthcare, integrated healthcare information systems, health policies or other health services domains. Applications will be subject to competitive review, with major consideration given to the ability of the proposed studies, if successful, to lead to competitive extramural grant applications. **The budget period for the 2017 funding cycle will begin July 1, 2017 and will run for one calendar year.** Carry-forward will be considered under appropriate circumstances upon written requests to the Dean. Awardees will present their findings to the Health Services Working Group and provide a final progress report to the Senior Associate Dean for Research within 3 months of completion of the project.

*Application Guidelines*

Applicants must follow the format detailed below, which includes the NIH-style biographical sketch and budget, a list of current funding, letter of support from their Department Chair and any relevant supplemental materials. Applications that fail to follow the guidelines below will not be considered for review.

* All **full-time/salaried College of Medicine faculty members (0.75 FTE or greater) are eligible**.
* **PI/Co-I salary is not be allowed**, but funds can be used to support of technical staff, fellows or trainees, as long as their effort is directed towards the research goals and well-justified.
* **Funds up to $50,000 are available when matched by $25,000 departmental/center contribution (total $75,000 2:1 match).**
* Applications must clearly describe **how results from the pilot project will enhance upcoming extraumural grant applications** and provide a plan for future grant submissions.
* Applications must **follow instructions below for grant sections, page limitations and all other relevant materials.** Applications that fail to comply with these guidelines will not be reviewed.

*Application Instructions*

**APPLICATION PROCESS** – An **electronic version** of the full application **in PDF format** should be submitted to the Committee Chair ([michael.toth@uvm.edu](file:///%5C%5CMed53-HomedirsX%5CStaffAdmin_HomeDirsX%24%5Ccwhitake%5CMyDocs%5Cmichael.toth%40uvm.edu)) by the due date (midnight **May 1, 2017**). Paper applications will not be accepted and late applications will not be considered. It is the PI's responsibility to assure that all necessary components of the application are included and the application is submitted on time.If there are any questions regarding logistical, scientific or administrative aspects of the application process, please contact the chair of the committee prior to the deadline.

**INSTRUCTIONS**

1. COVER LETTER: Submit a cover letter briefly describing the submission (Title of application, category - **Health Services Research Pilot Grant Awards**, dollars requested) and how the funds will be used to enhance extramural funding applications. This letter is not a substitute for more in depth discussions of these issues in other sections of the application, but provides an overview of this information.
2. FACING PAGE: Complete Face Page, Itemized Budget Page and Other Support.
3. BODY OF APPLICATION: The proposal **should not exceed 10 pages**, which addresses each of the items listed below (A to C). The format, including type size, is to follow the standard NIH PHS grant (PHS-SF424). That is, “type should be 10-12 points (approximately 1/8” in height for capital letters). If constant spacing is used, there should be no more than 15 cpi, whereas proportional spacing should *average* no more than 15 cpi. Finally, there must be no more than 6 lines of text within a vertical inch.” Leave 1/2” margins.

A. Specific Aims and Hypotheses (1 page); we recommend that you limit to 1 or, at most, 2 Specific Aims that can reasonably be completed within the 1 year grant period.

B. Significance and Innovation (~1-3 pages); state the significance of the research problem and its innovative aspects.

C. Approach (6-8 pages); include relevant preliminary data, review of the state of knowledge in the field and outline the methods used to address the proposed studies.

1. FUTURE STUDIES/APPLICATIONS FOR EXTRAMURAL SUPPORT: Explain how the results of the proposed studies will be used in an upcoming extramural grant application(s) (<2 pages). This should include the title of the grant application, the funding organization and the expected date of submission.
2. PRIOR COM FUNDING: If the applicant received prior funding through any COM funding mechanism (eg, BSP/IGP Awards), a separate section should be added to the new request for funding specifically outlining whether extramural support was obtained from the proposed studies
3. CURRICULUM VITAE: Include a curriculum vitae of the PI in current NIH format (maximum 5 pages see the following link for details: <http://grants1.nih.gov/grants/funding/424/index.htm#inst> )
4. DEPARTMENT CHAIR LETTER: A letter from the PI’s Department Chair must be included acknowledging that matching funds will be provided during the award period to supplement COM monies. Matching funds can include salary support for the PI/co-I/technical support/etc, project support or other financial/material support to complete the proposed studies.
5. APPENDICES: Only letters of support or reprints or their equivalents should be included that are germane to judging the science of the application or support for the proposed work/PI.

**A one page narrative progress report is required within 3 month of the termination of the award and should be submitted to the Senior Associate Dean for Research, Larner COM Dean’s Office, as well as presentation of study findings to the Health Services Working Group.**

**Application Checklist**

* Cover letter
* Face Page, Itemized Budget, Other Support Information
* Body of Application
* Future studies/applications for extramural support
* Explanation of use of prior COM funds (if applicable)
* CV (current NIH format)
* Department Chair Letter (required)
* Appendices

**APPLICATION FOR HEALTH SERVICES RESEARCH PILOT GRANT AWARD FUNDS**

|  |  |
| --- | --- |
| Proposed Title:  |  |

Principal Investigator:

Department: Extension:

Co-Investigator, if any:

Department: Extension:

Name of qualified local expert who could help the Committee as an ad hoc reviewer:

Amount Requested: $

Estimated Start Date: Estimated End Date:

PI ASSURANCE: I certify that the statements herein are true and accurate to the best of my knowledge and that the research proposal reflects original work by myself and has not been submitted to other funding sources by students, trainees or junior faculty under my direct supervision. I am aware that any false, fictitious or fraudulent statements or claims may subject me to disciplinary action according to the bylaws of the College of Medicine and/or University of Vermont. I agree and accept responsibility for the scientific conduct of the project and to provide the required progress reports if the grant is awarded.

Signatures:

Principal Investigator:

Department Chair:

**Record of Committee Action**
Received on: Acted on:
Approved for: $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Dates of Award: From: \_\_\_\_\_\_\_\_\_\_\_\_\_ To:
Notification to Applicant: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
Comments:

**BUDGET REQUEST**

Please itemize individual categories in your budget using sections such as personnel, equipment, consumable supplies, patient costs, animal costs, and whatever else is necessary for the review committee to understand how you determined your budget; please provide justification for budget items on a separate page. The form below is a general template – please add categories as needed. **Note that funds cannot be used for faculty salary support.**

PERSONNEL (non-faculty)

|  |
| --- |
|  Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  |
| Monthly Salary - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - -  | $\_\_\_\_\_\_\_\_\_\_\_\_\_\_  |
| Fringe Benefits - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - -  | $\_\_\_\_\_\_\_\_\_\_\_\_\_\_  |
| Total Salary Requested - - - - - - - - - - - - - - - - - - - - - -  | $\_\_\_\_\_\_\_\_\_\_\_\_\_\_  |

Consumable Supplies ----------------------------------------------------------------------- $ \_\_\_\_\_\_\_\_\_\_

Other Expenses ------------------------------------------------------------------------------ $ \_\_\_\_\_\_\_\_\_\_

BUDGET TOTAL --------------------------- $\_\_\_\_\_\_\_\_\_\_\_

**OTHER RESEARCH SUPPORT**

Please list below all other research support (current, pending and planned) regardless of relevance to this application. Indicate and provide explanation for any overlap between this proposal and current or pending support. (INFORMATION SHOULD COVER THE PAST THREE YEARS). Any overlap between the current request for funds and any on-going or pending applications **must** be clearly described.

Previous Research Support from College of Medicine:
Grant # Project Title Amount/year Dates of Award

All Current Research Support:
Source/Agency Project Title Amount/year Dates of Award

Pending Requests for Research Support:
Source/Agency Project Title Amount/year Dates of Award

Other Requests for Research Support not funded:
Source/Agency Project Title Amount/year Dates of Award