Pilot Funding Opportunity

The Center for Outcomes and Effectiveness Research and Education (COERE), the Office of the Chief Physician Executive of the UAB Health System, and the UAB School of Medicine are soliciting proposals to fund **two pilot projects in Health Systems Interventions.**

Purpose: The ability to collaborate and breakdown silos is critical to achieving the institutional mission to improve patient care and outcomes. In an effort to meet the School of Medicine and the UAB Health System's target to **become the Preferred Academic Medical Center of the 21st Century,** this pilot program is to seed research aimed at testing methods to improve health care quality and reduce disparities in our state and region. The overall goal of the program is to generate pilot data for a future larger scale study that might lead to extramural funding, and ultimately help our institution build a learning healthcare system (LHS; see 1 page overview below). Research teams are **required** to engage or implement the proposed research within the UAB Health System affiliate or other regional health systems. Pilot study teams should include members of these health systems (practitioners and/or leaders in health care organization) and individuals with expertise in health services/outcomes research. Health care systems often implement interventions without formally evaluating the effectiveness of the intervention on patient outcomes, and rarely perform iterative testing for improvement,[1] Scientific rigor and reproducibility of future study design will be important criteria for such projects.

Eligibility: This opportunity targets collaborative teams who will use the preliminary data generated from these pilot awards to be competitive for R01, R21, external K, program project proposals, or equivalent independent funding in the near future. The overall theme of the proposed health system research should be relevant to at least one of the four research focus areas: 1) Outcomes; 2) Comparative Effectiveness, 3) Health Inequities; or 4) Population Health.

Funding Available: Contingent on sufficient meritorious applications, up to $120,000 will be available to support **two pilot projects** (up to **$60,000 maximum** each) for up to 12 months. Funding will be begin Spring 2020.

Please prepare a proposal that includes the following information:
- Name of PI, academic rank, division, department and school **(NOTE: PI of the pilot grant must be a UAB faculty member)**
- Title of proposed project (*if project is in support of a future funding application include a link to external RFA)*
- Specific aims or equivalent (**no more than 1 page**)
- Research Strategy **(no more than 4 total pages)**--Explanation of the scientific methods for how pilot funds will expand work towards the specific aims and will support the development of a more competitive proposal for submission
- Overview of the proposed team and the interactions among individual team members **(no more than 1 page). Interprofessional interactions will be judged favorably**
- Budget and budget justification on how pilot funds (**not to exceed $60K**) will be used. Funds will be available starting Spring 2020
- PI's and co-investigators NIH Biosketches including the total number of publications
- IMPORTANT: An overall timeline, which shows progress milestones (include planning meetings, collaborative manuscripts, discussion of preparation of the external application, and anticipated date for submission)

Please submit proposals using the following link: COERE-UWIRC 2020 Pilot Portal. Submission portal will be open beginning February 25th, 2020 and all proposals will be due on March 13th, 2020 by 5:00pm Central Time. Please contact Jeff Foster (pjfoster@uabmc.edu; 6-6086) with any questions.

1. Horwitz Leora I., Kuznetsova Masha, Jones Simon A. Creating a Learning Health System through Rapid-Cycle, Randomized Testing. New England Journal of Medicine. 2019;381(12):1175-9. 10.1056/NEJMsb1900856.

The concept of a Learning Health System (LHS) has been elucidated and promoted by a number of key organizations, including the Institute of Medicine (IOM) and the Agency for Healthcare Research and Quality (AHRQ). The IOM defines a LHS as one where "science, informatics, incentives and culture are aligned for continuous improvement and innovation, with best practices seamlessly embedded in the delivery process and new knowledge captured as an integral by-product of the delivery experience".[1] In this context, *knowledge generation* can include data analysis for process and quality improvement as well as a range of research activities.[2] Utilizing similar components or features, AHRQ describes a LHS as "a health system in which internal data and experience are systematically integrated with external evidence, and that knowledge is put into practice".[3] As depicted in the image below, the components of a LHS are conceptualized to align in a continuous cycle that is integrated into the culture and everyday practice of the healthcare setting. AHRQ further emphasizes the hypothesis that a true LHS will result in patient care that is higher quality, safer, and more efficient, as well as greater professional satisfaction among care providers and the broader health care team.

Learning Health Systems

1. Institute of Medicine, IOM Roundtable on Evidence-Based Medicine. Olsen L, Aisner D, McGinnis Je. The Learning Health Care System: Workshop Summary. 2007.
2. Johnson, K., C. Grossmann, J. Anau, S. Greene, K. Kimbel, E. Larson, K. Newton. 2014. Integrating Research into Health Care Systems: Executives' Views. Discussion paper.
3. About Learning Health Systems. Agency for Healthcare Research and Quality. https://www.ahrq.gov/learning-health-systems/about.html. Published 2019. Accessed January 27, 2020.

Investigator Last name, First Name: _____

Instructions

Provide the information requested below. Upload the completed template as a single PDF submitted to the COERE-UWIRC 2020 Pilot Portal. Describe your pilot project strategy and plan in detail, and demonstrate how the proposed project responds to mission and strategic plan of UAB and UAB Health System and how pilot funding/support will lead to a future R01, R21, external K, program project proposals, or equivalent mechanism. **DO NOT EXCEED 4 total pages** (excluding cover page, specific aims, research team, budget, and references).

Document Format
  1. Font size: must be 11 points or larger (smaller text in figures, graphs, diagrams and charts is acceptable as long as it is legible when the page is viewed at 100%)
  2. Type density: must be no more than 15 characters per linear inch (including characters and spaces)
  3. Line spacing: must be no more than six lines per vertical inch
  4. Margins: 0.5" (minimum) all sides per standard NIH guidelines

Final PDF upload should be saved in the following format: PI Last Name_Department_Division_Date (e.g. Saag_Medicine_Rheumatology_200225)
==Please delete this section, and all instructional text from your submitted application.==

Cover Page
Name of PI, academic rank, division, department and school

Name of Collaborators

Title of proposal:

Pilot Project Plan
A. Specific Aims (*1 page: Does not count towards 4 page limit*)

B. Research Strategy (*No more than 4 pages. Explanation of how pilot funds will expand work towards the specific aims and will support the development of a more competitive proposal. Additional subheadings are allowed*)
  1. Background and Significance (*1 page maximum*)

  2. Innovation (1/2 page maximum)

  3. Approach *(Describe planned research methods and state team members experience with it.*

  4. Plans for future development (*Emphasis will be placed on scientific merit and likelihood that the work will advance to a R01, R21, external K, program project proposals, or equivalent mechanism. Applications responsive to this RFA should focus on outcomes, comparative effectiveness, health disparities, population health research, methodology or any combination thereof. If the future full scale study will not be a randomized study please describe what other study design approaches will be used to control for observational effects (e.g. quasi-experimental approach such as step wedge, interrupted time series)*

  5. Overall Timeline--*Outline project milestones include planning meetings, collaborative manuscripts, discussion of preparation of the full scale external application, and anticipated date for submission)*

C. Overview of Proposed team and interactions (*No more than 1 page; Note collaborations between health system care providers and research team with expertise in trial design/outcomes research*)

D. Budget and Budget Justification (*Does not count towards Research Strategy 4 page limit*)