

**DEPARTMENT OF VETERANS AFFAIRS
Veterans Health Administration
Washington DC 20420**

OFFICE OF RESEARCH AND DEVELOPMENT

**SOLICITATION OF APPLICATIONS FOR
HEALTH SERVICES RESEARCH AND DEVELOPMENT
RESEARCH ENHANCEMENT AWARD PROGRAM**

- Purpose.** The Veterans Health Administration (VHA) Health Services Research and Development Service (HSR&D) invites applications for the Research Enhancement Award Program (REAP). HSR&D is interested in promoting and supporting groups of VA funded HSR&D investigators located at VA Medical Centers that do not contain an HSR&D Center of Excellence (COE). The goal of this program is to increase HSR&D capacity by assisting VA sites that already show promise, as demonstrated by a history of HSR&D peer reviewed research and career development funding. Funds provided under this initiative are for maintaining or creating a core program of investigators, statisticians, economists and other social scientists to support and facilitate the development of HSR&D research projects and the training and mentoring of new HSR&D investigators.

This solicitation is open to currently funded HSR&D REAP and Targeted Research Enhancement Program (TREP) Centers and any group of investigators that satisfies the eligibility requirements.

All currently funded TREPs are required to participate in this competitive review and must receive a successful review outcome to be eligible for continued HSR&D support.

All currently funded REAPs interested in continuing their funding are expected to participate in this review if their end date occurs before FY2011. Reviewers will be instructed to consider funding duration and potential when comparing and evaluating the performance of existing REAPs with those not currently funded as a REAP.

- Background.** A REAP center should be multidisciplinary incorporating Health Services Research (HSR), medicine and clinical subspecialties, biostatistics, social science and other appropriate research methodologies. Recipients of HSR&D REAP awards are expected to participate in training/mentoring new investigators and to pursue new avenues of health services research. Activities supported by an HSR&D REAP are to be performed in VA facilities. Descriptions of currently funded REAPs are available at <http://www.hsrd.research.va.gov/about/centers/reap.cfm>.

3. **Goals.** Each funded HSR&D REAP is expected to:

- a. Develop and maintain VA HSR capacity by building on the success of non-COE facilities with significant existing HSR activity.
- b. Build on available expertise and capacity in a selected theme and priority area(s) to advance knowledge and become nationally recognized.
- c. Develop and maintain substantive, mutually beneficial, collaborative partnerships with supporting community institutions (such as schools of medicine and public health, theme-relevant university programs, and research institutes).
- d. Compete successfully for VA and non-VA research project funding (such as grants from National Institutes of Health (NIH), Agency for Healthcare Research and Quality (AHRQ), Department of Defense (DoD), and other federal agencies and private foundations) to leverage core support funding.
- e. Conduct the highest quality health services research relevant to the needs of veterans, build on available expertise and capability in the selected priority area(s), and be nationally recognized.
- f. Support the translation, implementation and dissemination of research results, and demonstrate the impact of the research findings on the veterans' healthcare system, providers and patient health outcomes at the local, VISN, and national level by partnering with clinical segments in VA.
- g. Participate in the Scientific Merit Review Board (SMRB) activities and development of focus area solicitations.
- h. Enhance local capacities to support health services research through the development and maintenance of a program for recruitment, training and career development activities.
- i. Enhance VA national capabilities and contributions in health services research by collaborating with other HSR&D Centers/Programs and VA Central Office to enhance the HSR&D portfolio and its contributions to VHA.
- j. Provide timely and appropriate scientific and technical guidance at VA national, network, and local facility levels.

4. **Eligibility Requirements.** At the time of application, there must be a minimum of two VA HSR&D funded Principal Investigators (PIs) engaged in research projects (IIR, SDR, QUERI, or special solicitations) at the time of application submission, and one or more of the following for a total of three:

- a. One additional VA HSR&D funded Principal Investigator engaged in research projects (IIR, SDR, QUERI, or special solicitations), or
- b. One Research Career Development Scientist (RCD), or Merit Entry Review Program Scientist (MREP) level or CDA-2 level under the new Career Development policy.

Note: Consistent with HSR&D Center Annual Reports, Principal Investigators are defined as individual primary HSR&D funded PIs rather than investigators supported by other funding sources. If an investigator is PI on more than one funded HSR&D project at their location that meets HSR&D criteria (such as an Investigator-Initiated Research (IIR), Service-Directed Research (SDR), or Service-Directed Projects (SDP)), only one of the projects is eligible toward the number of funded PIs at that site. Co-PIs do not count and the projects are expected to have a funding period of approximately two years or greater.

The following are some examples of HSR&D projects that could potentially be considered toward eligibility by HSR&D and the reviewers at the review:

- If a proposed Center PI received a funding approval notification letter for an HSR&D project, but may not have started the project yet.
- If a PI receives an approval notification letter for a conditional response submission, HSR&D and the reviewers may consider that for eligibility as well.
- If a project from the March 2008 HSR&D SMRB review meeting, is approved for funding prior to the CoE review meeting, it will be considered one of the projects to meet the eligibility criteria.
- If an investigator receives approval for a Research Career Development Scientist (RCD), or Merit Entry Review Program Scientist (MREP) level or CDA-2 level under the new Career Development policy prior to the CoE review meeting, **and** the proposed Center has not already counted one of these currently funded Career Development awards toward the minimum eligibility criteria .

5. Application Requirements.

- a. **Focus.** Each REAP application is expected to identify a clear primary theme with rationale for selection. The selected thematic area should be well justified in terms of its relevance to the needs of veterans and how it complements the foci of existing HSR&D REAPs and Centers of Excellence. There is particular emphasis on health systems approaches to addressing the needs of the 21st century veteran population, including those veterans who have served or are serving in Operations Enduring Freedom and Iraqi Freedom (OEF/OIF). Investigators should clearly document in their application the “added value” that REAP funds will provide to current HSR efforts.
- b. **Center Leadership.** Each REAP must have a REAP Principal Investigator (PI) responsible for all aspects of REAP activity, including assuming responsibility for compliance with applicable VA requirements for human subjects research, information security, and privacy. The proposed REAP Principal Investigator must:
 - i. Have at least a 5/8ths appointment.

- ii. Report to the Associate Chief of Staff for Research and Development (ACOS/R&D).
 - iii. Devote at least .30 full time employee equivalent effort (FTEE) to REAP activities (i.e., administrative oversight, mentoring, program development, recruiting and other leadership tasks). This time allocation cannot overlap with other research activities such as funded research projects.
 - iv. HSR&D strongly encourages Center key leadership to include a clinical investigator (MD) to ensure development of a multidisciplinary team with FTEE support from the ACOS/R&D and local facility.
- c. **Center Investigators.** REAPs are expected to incorporate plans for a core group of investigators who will be at least 5/8ths VA employees (eligible to be VA principal investigators). Some projected co-investigators, consultants, and support staff may be non-VA employees reimbursed through various mechanisms, such as contracts and Intergovernmental Personnel Act (IPA) agreements (not greater than 15 percent of the maximum core budget excluding travel), but REAP plans should incorporate efforts to make most if not all personnel VA employees.
- d. **Local and VISN Support.** The VA medical center and VISN are expected to endorse the REAP application and provide the following:
- i. Protected time for the REAP Principal Investigator and salary support, if the Principal Investigator has a clinical appointment (i.e., Program 870 funds).
 - ii. Contiguous space and related facility support (including but not limited to: selected personnel, electricity, heating, air conditioning, telephones, housekeeping, fiscal and human resource services).
 - iii. Shared support by the VA Medical Center, VISN, or affiliated institution is encouraged and should be documented. Shared support may include cost sharing, facility renovation or equipment costs, service contracts on equipment, or personnel costs.
 - iv. Commitment to support the information processing, storage, and security needs of the REAP, including a letter or memorandum of support signed by the facility Information Security Officer and Privacy Officer.
 - v. Ensure no more than two applications from any VISN are endorsed by the VISN Director.
- e. **Health Services Research Capacity and Academic Collaborators.** Applicants are expected to develop significant health services research capacity and establish partnerships with academic collaborators who provide resident expertise in health services research methodologies.
- f. **Expected Contributions, including Planned Projects.** Applicants are expected to have clear plans for how the REAP will contribute significantly to key

health services research issues in their chosen focus area over the initial five-year funding period, including well-developed ideas for specific research projects.

6. Budget.

- a. **Expected Annual Budget.** In addition to facility contributions, the REAP's core budget (recurring costs) is expected to range up to \$300,000 annually if there are four or more HSR&D funded investigators or \$250,000 if there are three funded investigators. Travel funds are limited to \$6000 per year in addition to core funds. The REAP Principal Investigator is expected to attend the HSR&D National Meeting using these funds. Any additional travel funding requests must be approved by HSR&D Operations. Each REAP will be required to submit an annual budget using VA forms 10-1313-3 and 10-1313-4. Fringe benefits for personnel should be calculated into the annual total core budget requests. Other guidance will be provided for specific budget issues prior to each annual due date.
 - i. Application budgets should be submitted at the maximum funding level (\$300,000). The review process will determine what final level of funding will be awarded if approved.
 - ii. Consultants are rarely included in Center budgets. However, Handbook 1204.5, "Operational Guidelines for Activities Sponsored by HSR&D" may be referenced for questions.
 - iii. Occasionally, Centers enter into Intergovernmental Personnel Agreements (IPA) for services from professionals such as a biostatistician, economist or academic expert for mentoring of trainees. Although discouraged, new Centers may need to seek these services outside their core staff. These agreements should be very few and be listed under "All Other Expenses" on VA forms 10-1313-3 and 4. These agreements should not use a significant portion of the Center annual budget allocation.

7. **Potential Start-up Supplements.** Up to \$100,000 may be added to REAP core funding in year one for initial infrastructure expenses (primarily equipment). Start-up supplements are only available to new REAPs, not renewals. Currently funded TREPs will receive up to \$50,000 in new infrastructure support. ***Because information technology (IT) needs cannot be directly funded by the Medical and Prosthetics Research Appropriation, proposed IT infrastructure needs must be separately documented and included within each facility's proposed IT spend plan.***

Note: Any proposed pilot projects anticipated to be funded from the core budget **are not** to be of a nature that requires oversight by Central Office (i.e., clinical trial registration with clinicaltrials.gov, data safety monitoring (DSMB) or OMB survey review). IRB issues for pilots must be managed locally according to VA guidelines.

8. **Annual Reporting Requirements.** Annual REAP reports will be reviewed administratively by HSR&D to ensure that the REAP's performance meets expectations (see section 3 "Goals") and eligibility requirements (see section 4 "Eligibility"). A standardized HSR&D Annual Report Template is used to collect information on revenues and expenditures, investigator capacity and productivity, VA and non-VA funding, publications, and a summary of major activities and accomplishments.
9. **Anticipated Awards and Funding Period.** HSR&D expects to approve proposals that receive fundable scores based upon scientific merit, VA priorities and programmatic needs. Approved REAPs are expected to be funded for **four** years, beginning **Fiscal Year 2009, October 1, 2008 through September 30, 2012**, contingent on available funds. Before funding may begin, REAPs are required to submit an IRB waiver (or letter from the IRB stating no need for review) including currently funded sites. The next competitive review is anticipated to occur in Fiscal Year 2011 when all funded Centers will be required to apply.
 - a. **Early Termination.** If a center does not satisfy the eligibility requirements or performance does not meet expectations as compared to other HSR&D centers, the Principal Investigator will be notified and a plan must be submitted to Central Office describing how the deficiency will be addressed. If the deficiency is not corrected, funding will be phased out.
 - b. **Non-Renewal.** Currently funded REAPs or TREPs that are not approved for funding are expected to continue to receive funding for the remainder of the Fiscal Year or until their established end date, whichever is longer.
10. **Evaluation Criteria.** Applications will be evaluated on the basis of the following criteria.
 - a. **Administrative Review Criteria.** Applications are expected to meet the following minimum administrative review criteria to be considered for scientific merit review:
 - i. Eligibility requirements (section 4 above).
 - ii. Principal Investigator should have at least a 5/8ths VA appointment and plans to dedicate at least 30 percent time to center leadership.
 - iii. Application endorsement by medical center Director and VISN Director.
 - iv. No more than two endorsed applications from any VISN Director.
 - b. **Scientific Review Criteria.** Application evaluations will include an assessment of both past achievements, future activities (emphasizing the selected priority area(s)), inclusion of women and minorities in research, and the relationship of

these to the strategic plans regardless of new or existing center status. Reviewers will be instructed to weigh their reviews according to the following criteria and relevance to VA, HSR&D, and impact on veteran's health care. For new applications, reviewers will emphasize health services research development efforts described to date (emphasizing the selected priority area(s)) and the potential for future contributions. For existing centers, reviewers will emphasize performance during the previous funding period (emphasizing the selected priority area(s)) in terms of value added relative to HSR&D and the potential of proposed future contributions.

Applications will be reviewed in terms of the following criteria:

- i. Research Focus and Potential for Future Contributions: Relevance and importance of research focus to improve the health of the nation's veterans. Proposed future contributions should be consistent with the outline provided for an anticipated four-year strategic plan.
 - ii. Productivity: Existing achievements and potential to obtain intra and extra-mural project funding, career development awards, and producing publications emphasizing an evaluation of contributions in context with the selected priority area(s).
 - iii. Quality of Research and Key Impacts: Existing quality of research and potential as measured by publications in top peer-reviewed journals, significant press, and system improvements, particularly in the selected priority area(s). Includes the unique value provided by the center and other clear evidence of impact beyond publications through formal and informal dissemination mechanisms.
 - iv. Collaboration and Service: Existing efforts and potential to collaborate with other VA researchers and centers, and service to HSR&D, VA/ORD, and national non-VA institutions as reviewers, advisors, and leaders emphasizing relevance to the selected priority area(s).
 - v. Facilities and Capacity: Space and resources allocated to the REAP by the Medical Center, VISN, and plan of shared programmatic support provided by the academic affiliate. Documented health services research qualifications of the team, the proposed leadership, and the steering committee including relevance to the selected priority area(s).
- c. **Scoring Ranges.** Reviewers will be instructed to provide one score that incorporates their assessment according to the above criteria.

10-15 Excellent = Proposed Center addresses important scientific focus relevant to veteran's health [criterion i] and there is **very high probability of success** [considering criteria ii-v].

16-22 Very Good = Proposed Center addresses important scientific focus [criterion i] and there is a **high probability of success** [considering criteria ii-v].

23-28 Good = Proposed Center addresses important scientific focus [criterion i] but there is **uncertain probability of success** [considering criteria ii-v].

29-34 Fair = Proposed Center addresses a valid scientific focus [criterion i] but there is **limited potential for success** [considering criteria ii-v].

34-50 Poor = Proposed Center does not address an important scientific question/area [criterion i], and there is **limited potential for success** [considering criteria ii-v].

- d. **Site Visits.** Reviewers may request a site visit to inform the final funding decision.
- e. **Funding Decisions.** Funding decisions will be made by the Director, HSR&D, based upon an applicants potential for making a substantial contribution to HSR&D and VHA.

11. Submission Guidelines

- a. **Notification of Intent to Apply.** Applications will be accepted only from facilities that provide by **March 1, 2008**, written notification to HSR&D of their intent to apply. Notification should come from the ACOS/R&D and should specify the proposed REAP Principal Investigator, medical facility (or lead medical facility if consortium), contact person with telephone number and e-mail address, and tentative REAP title. A draft abstract on VA form 10-1313-2 should also be included. *The proposed Principal Investigator should plan to be available through their contact person on the days of review (see Section 13.d).* Notification should be sent via e-mail to: susan.schiffner@va.gov.
- b. **Application Submission.** Attachment A contains instructions for the full application submission. For delivery by **March 31, 2008**, submit an electronic copy in pdf format (one file) on CD by courier service to:

**Department of Veterans Affairs
Health Services Research and Development Service (124-C)**

**810 Vermont Avenue, NW
Washington, DC 20420**

- c. **Administrative Checklist.** Attachment B contains the checklist used by HSR&D to verify that the application is complete. Applicants and ACOS/R&D offices are advised to review the application and complete the checklist to ensure that the requested information is provided.

12. **Schedule.** The following award schedule is projected:

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|--|-----------------|
| a. Program Announcement Issued | 11/1/2007 |
| b. Notification of Intent to Apply Due | 3/1/08 |
| c. Applications Due | 3/31/08 |
| d. Anticipated Scientific Review Meeting | Week of 5/12/08 |

***Proposed REAP PIs should be available during the review meeting dates for phone contact, if needed for discussion-see Section 9.a.**

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| e. Selected Site Visits Conducted (if needed) | 5/19/2008 – 6/6/2008 |
| f. Final Notification Letters Mailed | 6/30/2008 |
| g. Funding FY2009 | 10/1/2008 |

13. **Inquiries.** Questions may be directed to Susan Schiffner, HSO at 202-254-0209 or Susan.Schiffner@va.gov .

/s/ Joel Kupersmith, MD
Chief Research and Development Officer

Attachments:

- A. Instruction for Application Submission
- B. Administrative Checklist

ATTACHMENT A

INSTRUCTIONS FOR APPLICATIONS

1. **General.** Applications must be complete and comprehensive as submitted. Applications will be considered incomplete and returned if they are illegible, fail to follow instructions, or if the material presented is insufficient to permit an adequate review. HSR&D REAP applications must conform to the standardized format as outlined below and contain all pertinent information. Limit the narrative to twenty-eight pages (28) (see Roman numerals I-VI). Do not submit copies of funded or pending research applications of investigators.
2. **Format.**
 - a. **Forms Required.** Use VA Forms 10-1313-1 through 8, "Merit Review Application," and VA Form 10-1436, "Research and Development Information System Project Data Sheet." These forms are available through each VA medical facility's Office of Research and Development (or equivalent).
 - b. **Printing, Reproduction, and Assembly.** Use standard 8-1/2" by 11" white paper for pages other than forms. Type material single-spaced. Type must be easy to read (and photocopy). The minimum size for computer-generated print is 11 point (approximately 1/8 inch in height for capital letters). There may be no more than six lines of text per vertical inch and page margins must be a minimum of 1 inch. No other copies should be sent to Central Office other than the one electronic copy on CD (all SSNs must be removed from the application).
 - c. **Pagination.** Each page should be identified by the last name of the proposed Principal Investigator coordinating the proposed REAP and page number. Type the name in the lower right portion of each page, followed by the sequential page number.
3. **Ordering and Content of Materials.**
 - a. **Table of Contents** (First page of the application)
 - b. **VA Form 10-1313-1** (Second page of the application) provides brief identifying information. Items that may require clarification are discussed below.
 - i. **Item 1.** Leave blank.
 - ii. **Item 2.** Leave blank.
 - iii. **Item 3.** Identify review group as "HREAP."
 - iv. **Item 4.** Insert "May 2008" as review date.
 - v. **Item 5.** Insert the number of the facility (or lead facility if a consortium).
 - vi. **Item 6.** Specify the location of the facility (or lead facility if a consortium).

- vii. Item 7. Leave blank-**DO NOT** enter an SSN.
 - viii. Item 8. Leave blank.
 - ix. Item 9. Type the last name of the proposed HSR&D REAP PI in capital letters, followed by the first name and initial(s). Specify the individual's degrees and list their telephone number and e-mail address.
 - x. Item 10. The title should not exceed 72 typewritten spaces. It should assist the reader in quickly identifying the theme of the REAP. Existing Centers wishing to change the name of their REAP may do so in this section. A brief explanation for name change should be included in the abstract (10-1313-2) sent with the Intent to Apply and in the proposal narrative.
 - xi. Item 11. The amount requested each year should be the same as the totals for individual fiscal years, as listed on VA Form 10-1313-4. The total is the total funding (in direct costs only) that is being requested for all years (not to exceed 5 years).
 - xii. Item 12. Check the appropriate box for the PI's VA employment.
 - xiii. Item 13. Check the box for PI's salary source.
 - xiv. Item 14. Check the appropriate box for "new" if not currently a REAP. Check "ongoing" if currently a REAP. Currently funded REAP and TREP centers should check "new".
 - xv. Item 16. Insert the code(s) for the primary research program and the primary specialty area that apply to the proposed center theme. The code(s) should be the same as that reported to VA's Research and Development Information System (RDIS).
 - xvi. Items 17,18, 20, and 21. Provide information for proposed PI.
 - xvii. Item 19. Complete fully.
 - xviii. Signatures. An original, dated signature of the proposed PI is required. This date should provide sufficient subsequent time for review by the ACOS/R&D or equivalent. An original, dated signature of the ACOS/R&D, or designee, also is required. In signing, this person certifies that the proposal is administratively complete and all required reviews have been conducted. Type in telephone number and e-mail address of ACOS/R&D or other individual to contact for any administrative issues (insert name in parentheses if not ACOS/R&D).
- c. **VA Form 10-1313-2** (Third page of the application).
- i. Identifying Information. Check the appropriate box to indicate that you are describing a program. Provide the identifying information requested: PI; facility name and location; and program title (maximum of 72 characters and spaces). Abstract (500 words maximum in HSR&D ART format). The

abstract should provide a clear, concise overview of the proposed center: theme and research focus; initial strategic goals and objectives; and general approach for addressing goals and objectives. List KEY WORDS that best describe the program's scientific discipline(s) and research focus.

- d. **Proposal Narrative** (Fourth and subsequent pages) Use the following designated Roman numerals and headings for the Table of Contents and Narrative. Specify the beginning page number for each of the required sections, as ordered below, in the Table of Contents. Use the suggested page allocations as a guide for the narrative section (unless specified as a maximum), but **do not exceed 28 total maximum narrative pages, including organization chart, tables and lists specified below but exclusive of VA forms, appendices, and table of contents.**

Note: Since this program exists to support HSR&D Service research activities, the application should clearly identify and disentangle activities related to HSR&D funding from other VA and extra-mural funding.

- i. Executive Summary. (One page) Provide a clear and concise overview of the proposed REAP research focus. Identify key health services research issues to be addressed during the funding period. Highlight recent productivity, strengths of the REAP leadership, proposed infrastructure, and plans for addressing any weaknesses. Conclude by highlighting the perceived “added value” of the proposed REAP for HSR&D and VHA.
- ii. Research Focus and Potential for Future Contributions: (Five Pages) Discuss the relevance and importance of the REAP's research focus to the overall HSR&D portfolio and relevance to the nation's veterans and their health care. Explain center history if previously or currently funded as a CoE, REAP, or TREP. Outline anticipated strategic goals and objectives for the five-year funding period and the operational plan envisioned for integrating clinical, educational, and research resources to accomplish these goals and objectives. Proposed future contributions should be consistent with the strategic plan outline.
- iii. Productivity: (Six Pages) Discuss existing achievements and potential for obtaining intra and extra-mural project funding, career development awards, and producing publications focusing on existing and potential achievements, and other future activities based on the proposed, continued or new focus of the center.
 - (a) For existing achievements (funded projects, projects that ended in the past fiscal year, and submitted proposals), specify the nature of the item (funded, submitted), funding source (e.g., VA HSR&D, NIH, AHRQ), funding amount and funding period. Include in Appendix 2; 1) the project abstracts and 2) a concise table of the achievements (for example, a project with start and end dates, status of funding, VA and non-VA funding source and list of publications from the project). For existing REAPs, a Center project report created through the ART reporter at <http://art.puget-sound.med.va.gov/> may be used for the table.

- (i) **Renewal Applications.** Currently funded centers must format their response regarding existing achievements in context with the strategic plan in place during the most recent funding cycle. Explain variations from the existing strategic plan. Briefly contrast key portions of the current plan to the proposed strategic plan (i.e., explain why key portions were retained, revised, or replaced).
 - (b) For potential achievements, briefly describe one to three specific research ideas planned for the REAP and the proposed investigators for each. Include in Appendix 2, a concise table of achievements (as described in III. a.), if applicable.
 - (c) For future activities, briefly describe one to three specific research activities (i.e., seminars, collaborations, workshops, presentations, programs, etc.) planned for the REAP and the proposed investigators for each. Include in Appendix 2, a concise table of activities (as described in III. a.), if applicable.
- iv. **Quality of Research and Key Impacts:** (Two Pages) Existing and potential to produce quality research as measured by publications in top peer-reviewed journals, significant press, and system improvements. Discuss the unique “added value” provided by the REAP both from prior funding and the future payoff if funded such as, translation and implementation of research findings or programs that emphasize the importance of health services research.
- v. **Collaboration and Service:** (One Page) Existing efforts and potential to collaborate with other VA researchers and centers and service to HSR&D, VA/ORD, and national non-VA institutions as reviewers, advisors, and leaders. Future efforts should be consistent with proposed strategic plan.
- vi. **Facilities and Capacity.** (Twelve pages, exclusive of VA forms) This section is designed to document the center’s health services research qualifications and capability to meet the identified objectives and contribute to local and national health services research capacity and training activities.
 - (a) Summarize the proposed REAP’s current (and expected) health services research capabilities and how they will contribute to meeting identified objectives and contribute to local and national health services research capacity, mentoring and training activities. (One page)
 - (b) Provide an organization chart depicting key staff and their relationships within the REAP and medical facility. (One page)
 - (c) List REAP core staff (proposed and/or identified in the proposed budget pages including TBN positions) and provide a one-paragraph description of their positions, related responsibilities and related research or other pertinent expertise. (One-two pages)

- (d) Present an overview of staff in table form (see example, Table 1), emphasizing his/her relevance to the selected priority area(s), academic field (education), professional experience (teaching, research, etc as applicable), research interests, and expected Center FTEE participation. DO NOT include personal identifier information such as SSNs. FTEE information should reflect what is stated on the Center budget pages for each core staff member. (One page)

TABLE 1: HSR&D REAP CORE STAFF ORGANIZATION (example)

<u>Name/Position</u>	<u>Personnel Qualifications</u>	<u>Priority Area</u>	<u>FTEE</u>
SUSAN S. SMITH, PhD, MD GS level Principal Investigator	Biostatistics/Preventive Medicine 32 years, teaching 17 years, clinical 16 years, research Major research interests: Practice Patterns, Cardiovascular Diseases, Diabetes	*Enter the Center defined priority area this investigator is identified with such as "comorbid chronic disease"	0.5 (contributed)
JOHN D. DOE, PhD, MPH, GS level Biostatistician	Academic Field Biostatistics/Health Services Administration 5 years, teaching 7 years, research Major research interests: Dynamic Modeling, Quality of Care Measures, Benchmarking, Databases, Medical Informatics	"	0.6

- (e) Provide a brief statement regarding the planned role(s) of the REAP Steering Committee. (One page) Put in Appendix 3 the following:
- (i) A brief description of the Steering Committee's structure, membership, functions, meeting schedule (of the whole and for subcommittees), and relationship(s) to the medical facility Director, the REAP, and other faculty committees.
 - (ii) A listing of Steering Committee members (actual and anticipated), differentiating Regular (such as facility/Network, affiliations/consultants) and Ex Officio (such as REAP leadership and other key staff) members, and the rationale for selecting the individual (emphasizing relevance to the selected priority area(s)). Provide the name, position or title, institution, and telephone numbers for each person listed.
- (f) Elaborate on additional organizational/operational details. These should include:
- (i) Describe the REAP Principal Investigator's reporting relationship to the ACOS/R&D.

- (ii) Describe local review procedures for research projects and reports. (One-half page)
- (iii) Describe the REAP mechanism (individual locale approaches and/or quality measures) for center program evaluation and quality assurance. (One-half page)
- (iv) Briefly discuss career paths for non-clinician professional staff (such as PhD junior investigators), including affiliated university practices for REAP core staff who may also be university faculty members. (One-half page)
- (v) Describe the nature of the affiliation with the academic partner. Briefly discuss how involved the REAP will be with the affiliate and, conversely, the affiliate with the REAP. Include how the relationship is meaningful to the center, medical centers, health services research and VA. (One page)
- (vi) Describe and document the commitment of the medical facility (or consortium of facilities) to the REAP for support such as dedicated FTE positions, administrative services, protected research time, etc. For established Centers, this section may include a description of support for designated contiguous space, equipment, planned renovations, conference facilities, etc. The same may be applicable for new Centers, but may include floor plans for intended Center space, donated major equipment such as copiers or printers, maintenance support for building or IT services, etc. (One-two pages)

vii. Facilities and Other Resources.(One page)

- (a) List community institutions--including academic collaborators with well-established expertise in health services research methodologies--that are expected to support the REAP's activities (emphasizing relevance to the selected priority area(s)). In Appendix 5, provide the name, telephone number, and mailing address of the expected liaison person for each institution. Also append any negotiated memoranda of understanding (MOU), signed by the appropriate officials of each participating institution and indicate how the involvement of the collaborating scientific groups (or facilities) will be routinely managed. MOUs may be in place or anticipated for shared support such as recruiting, FTE support, faculty appointments, data analysis support, shared accommodations for conferences/lectures, mentoring, etc.
- (b) Describe available facilities for the REAP (including plans for new or renovated space, if applicable), major items of equipment, and maintenance requirements. Provide estimates of contributed costs and also costs associated with the startup supplement, if any.
- (c) Describe VA institutional and other sector support committed to (or expected for) the REAP, beyond that requested through this application.

Briefly discuss how this support will help accomplish the REAP's objectives (e.g., availability of large-scale databases for analyses, access to technical capabilities or databases residing in affiliated facilities, and other VISN capabilities or capacities).

- e. **Total Core Budget Request.** Use VA Forms 10-1313-3 and 10-1313-4, to summarize and justify the requested budget. Insert one set of forms here.
- f. **Biographical Sketches and Individual Support.** Provide a biographical sketch and a list of recent or significant publications for each of the REAP's key VA and non-VA collaborating staff (key staff including consultants or IPAs unable to convert to VA employment at the time of application), using VA Form 10-1313-5/6. Note: Be selective and avoid submitting excessively long publication lists (in most cases, 10 should be sufficient; emphasizing relevance to the selected priority area(s)).

Note: Training certificates in Good Clinical Practice for REAP personnel are not required in the application submission. If approved for funding, appropriated training certificates will be requested.

- g. **Appendices.** Appendices are limited as follows, and should be inserted, numbered, and labeled as specified below. Appendices, exclusive of VA forms, should not exceed thirty (30) pages.
 - i. Appendix 1. Current and Pending VA and Non-VA Research Support. For proposed staff, list each person's current and pending total VA and non-VA research support (if applicable), including funding period dates for all items listed, using **VA Form 10-1313-7** (emphasizing relevance to the selected priority area(s)). Pending requests should be included, even if there is no current support. Add **VA Form 10-1313-8** only when needed to elaborate information as requested in Form 10-1313-7. These forms are not required for proposal submission; however, are required for the REAP application.
 - ii. Appendix 2. Related Ongoing Projects. Insert project abstracts or VA Form 10-1436 for submitted and funded VA proposals related to the selected priority area for the proposed Center, and table of achievements and future activities, if applicable. The table may also include other projects for REAP investigators that may not be in the exact research focus of the Center. These should be labeled accordingly. The table should reflect the project annual funding amount that can be directly attributed to Center/investigator activities from VA and non-VA funding sources (reflecting the amount that could be credited to the investigator for VERA allocations).
 - iii. Appendix 3. Steering Committee. Description of role, membership.
 - iv. Appendix 4. Letters of Commitment. Append a formal letter of commitment for all non-VA investigators who will become active collaborators with the Center's research program. Include their academic title. List consultants and indicate for each: nature of the service to be performed; fee and amount of travel and per diem for each consultant; and the number of consultations to

be provided. Append a letter from each consultant who has agreed to perform this service (excluding steering committee members).

- v. Appendix 5. Memoranda of Understanding. Append Memoranda of Understanding with collaborating institutions (VA and non-VA). If MOUs are extremely lengthy, provide a copy of the cover to the MOU, table of contents, and signature page. In the main proposal table of contents for this appendix include a notation such as the following to clarify the exclusion: *“MOU with USA University-modified version (MOU has xx pgs-full document will be provided upon request)”*
- vi. Appendix 6. Additional Information. Append any additional information (not to exceed two pages) that you believe is essential for appropriate consideration of the application.
- vii. Appendix 7. Medical Facility Endorsement. Append endorsement letter from the medical facility Director (lead facility and any other involved medical facilities). This should include a statement of commitment to support the information processing, storage, and security needs of the REAP from the Director.
- viii. Appendix 8. VISN Director Endorsement. Append endorsement letter from the VISN Director including a statement of commitment from the VISN CIO to support the information processing, storage, and security needs of the REAP.

Note: No other letters of endorsement should be sought or included; if included, they will not be considered.

- ix. Appendix 9. Authorization to Share Materials for Review. It is expected that applications will be reviewed by VA and non-VA reviewers. Please append the following statement, signed by the applicant(s): *“VA is authorized to share copies of all materials included in this application, for the purpose of review.”*
4. **Submission.** All proposals must be submitted in electronic format. In order to submit proposals electronically, the proposal text must be converted into a PDF file, as opposed to scanning in the document. *Merit review pages which can not be converted or contain original signatures may be scanned; however, they must be incorporated into a single pdf file along with the converted text.*

- a. Submit on CD by courier service to:

**Department of Veterans Affairs
HSR&D (124C)
810 Vermont Avenue, NW
Washington, DC 20420**

- b. The contact number for courier delivery is: 202-254-0207.

5. **Due Date.** Proposals received after the due date of **March 31, 2008** and applications from facilities that fail to notify HSR&D by **March 1st** of their intent to

apply will not be reviewed. HSR&D will confirm receipt of intent to apply and proposals via facsimile or e-mail to the proposed REAP Principal Investigator and ACOS/R&D (or designated contact listed beside ACOS/R&D signature at the end of VA form 10-1313-1, first application page). Proposals will be reviewed in April. Approved sites will be notified approximately no later than **June 30, 2008**. The funding period for each approved center will begin at the start of **Fiscal Year 2009 (October 1, 2008)**.

6. **Availability During The Review Process.** Scientific review is expected to occur over a two-day period during the month of **May 2008**. Once the specific dates are scheduled, applicants will be informed and asked to identify a contact who can reach the proposed REAP Principal Investigator to respond to reviewer questions that may arise. Applicants are advised to make flexible plans (when the application is submitted) for a potential site visit during the period of **May 19-June 6, 2008**. The proposed key REAP staff, Associate Chief of Staff for Research and Development (ACOD/R&D), and medical facility Director (or appropriate representatives) are expected to be available during the site visit. Site visitors will make an effort within this period to accommodate major conflicts, but scheduling is expected to be tight and may not be finalized until the scientific review is completed in early May.

