**LDI Small Grants Program**

**CALL FOR PROPOSALS IN HEALTH SYSTEMS AND HEALTH POLICY**

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| **Project Title:** |

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| **Principal Investigator(s):** |

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| **Co-Investigators:** |

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| 1. **Abstract** (Maximum 250 words)   *Briefly summarize the proposed project, including specific aims, research design, and methods for achieving these aims. The section is meant to serve as a succinct and accurate description of the proposed project.* |

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| **2. Background and Significance** (Maximum 350 words; may include figures)  *Briefly summarize the medical, economic, social, and/or policy issue(s) that your project will investigate and why the issue(s) is/are important. Include sufficient background information to allow non-subject matter experts to assess the proposal.* |

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| 1. **Plain-Language Summary** (Maximum 200 words)   *Briefly explain in plain language why your proposed project matters and is significant.* |

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| **4. Specific Aim(s)**  *Briefly state the specific aim(s) of the project along with hypotheses being tested (if applicable).* |

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| **5. Impact** (Maximum 350 words)  *Describe the potential for new insights and how these insights will have a meaningful impact on health policy or practice.* *Include* t*he project’s alignment with one or more of LDI’s five priority themes, if applicable (health care access and coverage, health equity, improving care for older adults, the opioid epidemic, and population health).* |

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| **6. Research design, methods, and analytical plan** (Maximum 700 words)  *Provide a description of the research plan and methods that will be used. Explain why you chose these methods. Include a clear discussion of how data will be collected or description of existing data you are proposing to analyze; how key variables will be measured; and how these data will be analyzed. Describe how the project activities will be structured so that the project accomplishes the proposed aims within the grant timeline. Describe potential limitations to proposed approach and plans to address or overcome these limitations.* |

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| **7. Next steps** (Maximum 100 words)  *Provide information on future plans upon completion of the proposed pilot project, e.g., how results from the proposed pilot will lead to new external funding and/or a new research program.* |

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| **8. Project Timeline**  *Add/delete rows as needed.*   |  |  |  |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | | **Activity** | **Jan** | **Feb** | **Mar** | **Apr** | **May** | **Jun** | **Jul** | **Aug** | **Sep** | **Oct** | **Nov** | **Dec** | |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  |  |  |  |  | |

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| **9.**  **Literature Cited** |

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| **10. For Associate Fellows Only: Mentorship Plan** (Maximum 1 page)  *Please describe your mentorship team and how that team will support your efforts on and the successful completion of this project. Support can include tangible (ex. access to data, in-kind facilities or personnel support) and intangible (ex. knowledge sharing, regular check-ins) items.* |

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| **11. Project Budget**  *Please list and clearly describe and justify the specific items to be funded by the grant. Add/delete rows as needed.*  *Funds may be used to support LDI Associate Fellow and project staff salaries and benefits, consultant fees, data management, supplies, and other direct expenses. Funds may not support faculty salaries, or travel to meetings to present work. Equipment purchases are discouraged but may be allowed with sufficient justification. No indirect costs are permitted. No internal service center fees tied to faculty effort are permitted unless independently justified.*  *The total budget for a Senior Fellow pilot project grant is limited to $20,000. The total budget for an Associate Fellow pilot project grant is limited to $5,000.*   |  |  |  |  |  | | --- | --- | --- | --- | --- | | **Item** | **Unit** | **Cost per unit** | **Total** | **Description / Justification** | |  |  |  |  |  | |  |  |  |  |  | |  |  |  |  |  | |  |  |  |  |  | | **TOTAL EXPENSES:** | | | |  | |

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| **12.**  **Pending or Funded Grant Proposals**  *Please list any other pending or funded grant proposals for the same or similar project and any overlap* |

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| **13. Study Team**  *Please provide the names, affiliations, and roles of the study team members.* |

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| **14. PRINCIPAL INVESTIGATOR (PI)’S BIOSKETCH**  *Please use the* [*NIH biosketch template*](https://grants.nih.gov/grants/forms/biosketch-blank-format-rev-10-2021.docx)*, and follow current* [*NIH biosketch guidelines*](https://grants.nih.gov/grants/how-to-apply-application-guide/forms-g/general/g.240-r&r-seniorkey-person-profile-(expanded)-form.htm#Instructions) |

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| **15. CO-INVESTIGATORS’ ABBREVIATED BIOSKETCH(ES)**  *Please use the* [*NIH biosketch template*](https://grants.nih.gov/grants/forms/biosketch-blank-format-rev-10-2021.docx)*, and follow current* [*NIH biosketch guidelines*](https://grants.nih.gov/grants/how-to-apply-application-guide/forms-g/general/g.240-r&r-seniorkey-person-profile-(expanded)-form.htm#Instructions)*, with selected relevant publications, but not to exceed* ***two*** *pages.* |

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| **16. APPENDICES**  *Please limit these to essential information that is directly relevant to the proposal, e.g. a pilot survey form or an outside collaborator’s support letter* |