

# **Investing in Clinical Neurocritical Care Research (INCLINE) grant** Research Funding Announcement (RFA)

Deadline for Letter of Intent: May 31, 2022

Invitations for Full Applications: June 6, 2022

Deadline for Full application (if invited after letter of intent): June 24, 2022

Scientific Merit Review: Grants review committee

Award date: Flexible per investigator, but must be between 1/1/2023-4/1/2023

Earliest start Date: 1/1/2023

Funding Period: 1 year

## **Aim of INCLINE Grant**

The purpose of the INCLINE grant is to allow collaborative research teams to develop multi-institution pilot research that enhances clinical care in the neuroscience intensive care unit. The scope of this RFA is to provide 1 year of funding to support pilot studies that will enable the awardees to successfully compete for federal funding such as from the NIH, Department of Defense, or PCORI. Only applications which involve multicenter (≥ 3 sites) collaboration will be considered. Although all areas of science in neurocritical care will entertained, applications focused on coma or the treatment of disorders of consciousness will be given special consideration.

#### **Eligibility Criteria:**

The study designed to promote multi-institutional research. As such, more than one PI is acceptable. All PIs must be active NCS members in good standing. Members in <u>all career stages</u> are eligible to apply if the study requirements of this RFA are met. For purposes of career development, early career investigators and trainees are encouraged to apply for the NCS Research Fellowship Training Award. All healthcare professionals providing neurocritical care in different roles, including physicians, advanced practitioners, nurses, pharmacists, and PhD-scientists are encouraged to apply.

#### **General Instructions:**

All documents should be generated using Word<sup>©</sup> processing software (or similar platform) and then converted to PDF. Only PDF documents will be accepted.

Applications must be submitted as a single file and containing ALL the sections indicated in the table below under page limits. *INCOMPLETE APPLICATIONS WILL NOT BE REVIEWED*.

Please submit your application electronically to <a href="mailto:info@neurocriticalcare.org">info@neurocriticalcare.org</a> with the email title "Full INCLINE proposal submission" (It is easiest to copy and paste this statement into the subject line of the email).



If human subjects are to be enrolled or animals used, the candidate must submit a copy of the IRB/IACUC letter of approval prior to receiving the funds. However, such letter is not required with the submission of the application.

#### File Name

Save all files with descriptive file names with the format:

PI last name followed by the title of project.

For example, "Suarez Rhubarb Juice in Subarachnoid Hemorrhage.pdf"

#### **Font**

Prepare the application using Arial or Helvetica typeface in black font color. Font size in each final PDF document must be 11 points or larger.

# **Paper Size and Page Margins**

Final PDF documents should be formatted to be no larger than standard U.S. letter paper size (8  $\frac{1}{2}$ " x 11).

The final PDF document should have at least one-half inch margins (top, bottom, left, and right) for all pages.

# **Page Formatting**

Please use only a standard, single-column format for the text.

# Figures, Graphs, Diagrams, and Tables

You may use a smaller type size but it must be in a black font color, readily legible, and follow the font typeface requirement. Color can be used in figures; however, all text must be in a black font color, clear and legible.

# **General Grantsmanship Style**

Use Standard American English and avoid jargon. Spell out all abbreviations at the first time they are used and note the appropriate abbreviation in parentheses.

# **Page Limits**

10-page limit, excluding cover letter, collaboration letters, biosketches, etc. In the 6-page research page limit must be included: Specific Aims and Research Strategy (including impact and innovation) [blue shaded area in table]. Detailed limits and order of sections as follows:

Section of Grant Application	Strict Page Limit Requirements
Cover Letter	1 page
Specific Aims	1 page
Research Strategy	5 pages
Letters of Support from	As needed
Collaborators, Contributors, and	
Consultants	
Description of Institutional Environment	1 page
Biographical Sketch (newest NIH	5-page maximum format
Biosketch Format)	
Budget	1 page



Budget Justification	1-2 pages
Dudget Justification	1-2 pages

All pages should be numbered in sequential order starting with the Cover letter.

Page numbers should appear at the bottom center part of the page.

## **Specific Instructions**

# **Research Strategy**

A sound research strategy to achieve the specific aims of the project must be provided. The research description should specifically address the impact, innovation, and approach of how the candidates intend to answer the scientific questions proposed in the specific aims. The research idea will be judged on impact and innovation. The approach will be judged primarily on feasibility and the ability to address the proposed specific aims within the 1-year funding period.

The purpose of the **INCLINE** grant is to allow investigators to develop pilot research strategies that enhance clinical care in the neuroscience intensive care unit. The scope of this RFA is to provide 1 year of funding to support pilot studies that will enable the awardees to successfully compete for federal funding such as from the NIH, Department of Defense, or PCORI.

## **Research Objectives**

The INCLINE grant is designed to promote creative and collaborative research to improve clinical outcomes in neuroscience critical care. In 2016, the leaders of the Neurocritical Care Research Central (NCRC) and the Neurocritical Care Research Network (NCRN) identified important gaps in our research portfolio and envisioned an approach to begin to work constructively on these gaps. The mission-critical topic that has been embraced after much deliberation is "Curing Coma." The goal is to develop an understanding of the mechanisms that underlie coma in critically ill patients and discover preventive and novel therapeutic measures. Moreover, this is a broad endeavor that should eventually lead to the intersections between scientific discovery, implementation, education, and advocacy that are necessary to fundamentally change the care of patients with acute disorders of consciousness. To this end, the INCLINE grant will focus on facilitating collaborative research to address the mission of the "Curing Coma Campaign" and proposals enhancing this line of research will be given special consideration.

It should be noted that coma-related research is broad and includes conditions such as delirium, and encephalopathy which lie along the spectrum of disorders of consciousness, as well as a diverse group of etiologies of disordered consciousness. There are many areas of research within Neurocritical Care that are within the domain of the "Curing Coma" mission. For specific questions about the Curing Coma Campaign as it relates to this RFA, please contact Claude Hemphill (claude.hemphill@ucsf.edu), or Daiwai Olson (Daiwai.Olson@UTSouthwestern.edu).

The INCLINE RFA has a distinct clinical focus; however, translational science with direct application to clinical care is also broadly within the scope. NCS wishes to foster longitudinally



meaningful scientific projects that will be competitive for future funding from NIH, DOD or similar; and which serve to create a pipeline of research and enhance one of more scientific lines of research. NCS desires to enhance collaborative research and team science and enhance the rigor and visibility of neuroscience intensive care among existing and future team science collaborations.

# Types of studies include, but are not limited to:

- 1) Point prevalence studies, which describe a fundamental clinical care intervention and/or practice in the neuroscience intensive care unit
- 2) Informatics/data analytics studies, which describe the fundamental aspects of data acquisition, monitoring, storage, analyses, or processing in the neuroscience intensive care unit.
- 3) Pilot clinical trials which foster novel treatment for common diseases seen in the neuroscience intensive care unit using translational approach, with emphasis on proof of concept in a targeted patient population, conducted in a small multicenter study.
- 4) Pilot observational studies, which determine feasibility of conducting a future observational or interventional study in the neuroscience intensive care unit.
- 5) Multidisciplinary process-oriented research, which directly impact patient-centered care and outcomes
- 6) Population health studies, which will directly enhance the care of neurocritical care critically ill patients.

# The following will not be considered:

- Retrospective studies
- Focused self-reported surveys
- Mechanistic physiological studies in a laboratory setting
- Computational Algorithm development in a laboratory setting using preexisting data
- Infrastructure or registry development proposals

# Collaboration Objectives that are desired for this application:

- 1) Facilitate a future multicenter center approach to enhance scientific rigor and generalizability.
- 2) Create data formats, which can be used as models for national networks.
- 3) Enhance the opportunities for the NCRN to conduct early-phase studies.
- 4) Studies conducted within NCRN will be viewed favorably. The expectation is that official NCRN endorsement, while not necessary for the application, will be sought for the successful application and before the study start.

# **Letters of Support from Collaborators and Consultants (IMPORTANT)**



Only applications which involve multicenter ( $\geq 3$  sites) collaboration will be considered. Applications must contain signed letters on their letterhead from ALL individuals listed as collaborators or consultants confirming their participation in the project and describing their specific roles. Collaborators and consultants do not need to provide their biographical sketches, but information should be provided clearly documenting the appropriate expertise in the proposed areas of consulting/collaboration. Letters written and signed collaborators and consultants are not included in page limits.

# **Description of Institutional Environment**

The institutional environment is extremely important in the success of a project. This section should outline the institutions' commitment to the continued success of clinician-researchers, including specific information about the facilities and resources that will be brought to bear for the candidate in the award period.

There must be clear documentation that the sponsoring institutions have a strong interest in the research candidate's area of interest, including a high-quality research environment. The application must include a clear description of the resources and facilities that will be available and how the institutional research environment is particularly suited for the candidate's proposed research.

# **Budget Justification**

The maximum award, including indirect costs up to 10%, will be \$100,000. A single award will be issued each year for a 1-year award period. The award must be spent within period of the award notice, with a no-cost extension permissible with appropriate justification. In the case of multiple PIs from different institutions, one institution will be designated as the administrative center and all funds will be disbursed to that institution.

Budget Constraints: The budget is constrained to the following:

- \$15,000 maximum salary support for the PI
- Patient enrollment costs, including potential incentives for patients
- Max. \$10,000 for equipment or computer software
- Max. \$5,000 for travel to facilitate multi-center collaboration

No limits are set for research staff support.

For all questions related to this RFA, please email <a href="mailto:info@neurocriticalcare.org">info@neurocriticalcare.org</a> <a href="mailto:jp3b@virginia.edu">jp3b@virginia.edu</a>