Funding Opportunity Announcement: Ending the HIV Epidemic (EHE) Planning Awards

The Third Coast CFAR will support the work of the Innovation and Implementation for Impact on EHE Scientific Working Group (I3 EHE SWG) with EHE planning awards.

This funding will enable teams to form new collaborations, or to expand ongoing ones. These collaborations will plan future proposals for implementation research, evaluation, or innovative direct services in response to EHE (Ending the HIV Epidemic: A Plan for America).

NIH (via CFARs), HRSA, and CDC (possibly in collaboration with CDPH or IDPH) are expected to release RFA/RFPs over the next year to support the EHE initiative and there may be a short timeline from request to proposal due date. EHE planning awards are intended to help local teams be prepared to rapidly respond to these opportunities.

- Project period will be limited to 4 - 6 months and must be completed by 3/31/2020.
- Up to $10,000 - $20,000 in direct costs may be requested.
- Applications are accepted on a rolling basis.
- Number of awards will be determined by available funds.

To streamline the application and award process, teams must work closely with SWG leadership prior to submission, starting as early as possible.

Team eligibility

Projects must be led by a collaborative, co-principal investigator team:

- One Co-PI must be a PI-eligible Third Coast CFAR faculty member who is either an early-stage investigator (never received an R01-equivalent award from NIH) or an established investigator who is new to HIV research. A faculty member who has current or previous NIH funding for HIV research as a PI may participate as co-investigator, but not as a Co-PI.
- One Co-PI must be employed at a community-based organization in the Chicagoland area that is either: (a) engaged in NIH-funded HIV research, (b) providing HRSA-funded services, or (c) providing CDC-funded services. Organizations that receive HRSA or CDC funds through CDPH or IDPH are eligible.

Planning project requirements

A proposal must be for a new project or idea that is distinct from, but could build upon, prior or ongoing work. The goal of the project should be to establish or enhance partnerships by planning how the team will respond to EHE RFA/RFPs in the future. Planning projects should innovate, enhance implementation, or address high priority gaps in one or more of the four pillars of the EHE initiative:

- Diagnose
- Treat
- Prevent
- Respond

Allowable scope of work

The primary purpose of these awards is to plan a research-practice partnership. Therefore, collecting new pilot data and/or human subjects research are not required or an advantage. Teams are encouraged to formulate their plans by examing existing programmatic or clinical data and/or by soliciting feedback from stakeholders (staff or community). Exceptions to allow pilot data collection and/or human subjects research may be made for projects that already have IRB approval, maximizing feasibility in the short time frame required for these projects.

Funding mechanisms

Community-based organizations will receive fixed payments based on completion of deliverables, which must be described in the application. Examples of deliverables may include:

- An initial timeline with next steps
- Completion of analyses or review of existing programmatic or clinical data
  Obtaining and summarizing stakeholder feedback
- Final report on the planning phase of the partnership that formulates a team and intended response to a future RFA/RFP from NIH, CDC, or HRSA.

Academic institutions will receive funding via subcontract (if external to NU) or a new subproject on a cost-reimbursement basis. The personnel and other direct expenses for academic institutions must be submitted in the budget format described in the "Required Components" section.

The academic and community Co-PIs will work together ensure deliverables and timelines are met.

Submission process

A pre-submission consultation is required to ensure the proposed project is eligible, feasible in the allowed timeline, and aligns with the SWG's goals. The consultation will also help applicants with proposal preparation. It will also efficiently identify existing resources and services (e.g. project design, collaboration building, implementation research, biostats) that will support rapid development of the proposal and, if funded, help the project be completed rapidly. Interested applicants should contact Justin Schmandt (justin.schmandt@northwestern.edu), to schedule consultation. The request should include brief (less than one-half page total), draft responses to the items on the eligibility checklist (below).

Eligibility checklist:
1. Briefly describe the personnel and organizations in the planned EHE planning partnership.

2. What is the goal of this planning project, and how will accomplishing it prepare the team to pursue EHE-related funding in 2020 (from CFAR, NIH, HRSA, or CDC)?
3. Eligibility – what is current or previous HRSA or CDC funding that makes the non-academic organization eligible?
4. Regulatory status. If IRB covered activities at an academic institution are proposed, please send: a) the current IRB approval letter (and, if needed, brief plan to amend an existing protocol), or b) plan to gather or analyze information that will be eligible for requesting IRB exemption as not being human subjects research. Human subjects research at a community based organization or not currently IRB-approved at an academic institution is not allowed.

During the consultation process, the SWG leadership will facilitate completion of final responses to items on the eligibility checklist. SWG endorsement and the finalized checklist will be included in the application.

When proceeding to a full application, please submit the following components as Word documents by email to cfar@northwestern.edu

Required Component	Format and Notes
Cover Page: • Project title • Names, Titles, and Institutions for co-PIs • Names, Titles, Roles and Institutions for other team members • Identify the EHE pillar(s) addressed by the project Identify the OAR research priority addressed by the project	1 page limit No form
Narrative Proposal (to be organized in the five sections below) 1. Goals: State concisely the goals of the proposed planning partnership 2. Partnership: Describe the Co-PIs' expertise and the partnering organizations' resources, roles and consituents as related to the project. 3. Approach: Describe project activities in sufficient detail to allow reviewers to understand the team's strategy to accomplish its stated goal(s). 4. Communication: Describe how the Co-PIs will communicate and share decision-making authority to ensure the project is completed successfully and on time. 5. Next Steps: Briefly explain how this project will position the team to apply for anticipated calls for proposasl for NIH, CDC, or HRSA funding in response to the EHE initiative. Citations are included in the narrative.	Up to 2-4 pages (applications under 2 pages are welcome as long as they adequately respond to the items required in the RFA) No form
Deliverables	1 page limit

Clearly identify the deliverables and timeline for completion. The SWG recommends that the first deliverable be an initial timeline with next steps so that CBOs may invoice for the first payment early in the partnership (preferably at day 1). The final deliverable, which must include a progress report, must be completed by March 31, 2020.	Form generated during consultation
Detailed Budget for Direct Costs • Up to $20,000 in direct costs may be requested • Expenses such as personnel support, data collection and analysis, and core services in support of preliminary data generation are allowed. A very limited budget for meeting expenses (space rental, refreshments) may be allowed with justification. • Minimal costs for software/licenses directly applicable to the EHE pilot and travel for local meetings with collaborators may be allowed with justification. Costs for equipment and similar items associated with longer-term projects will not be allowed. • Expenses at non-university sites will be handled as fixed payment for deliverables/milestones. Activities considered human subjects research are not allowed on the CBO budget and only permissible on a budget for a University-based partner.	PHS 398 Form Page 4
Budget Justification Provide brief justification for each line item on the Budget.	No limit No form
NIH-style biosketches for all key/senior academic personnel CV or resume in any form are appropriate and completely satisfactory for key/senior personnel at CBOs	NIH Biosketch Template or CV/resume (no specific format required for CV/resume)
Letter of Intent The non-academic institution must provide a signed letter, commiting to the proposed deliverables and timeline.	1 page is sufficient No form
SWG Endorsement / Eligibility Checklist Include the endorsed eligibility checklist provided by the SWG.	Form provided during pre-submission consultation No limit

Selection criteria

- Alignment with NIH Office of AIDS Research priorities
- Alignment with EHE program objectives
- Feasibility to complete the proposed activities in the time available
- Feasibility of poising the team to submit an external grant application (CFAR administrative supplement or other NIH, CDC, or HRSA mechanism) on a rapid timeline responding to a future RFA
- Consideration will also be given to the likelihood that the proposal will advance innovation or enable implementation research, in either case for an application for a TC CFAR Developmental Core Pilot Project Award (to gather preliminary data for an NIH grant application) or an investigatror-initiated NIH research grant application.

Selection process

Proposals will be reviewed by the Third Coast CFAR developmental core and funding decisions made on a competitive, rolling basis. Applicants will receive decisions ASAP, ideally within 2 weeks after submission.

Award disbursement: Third Coast CFAR Administrative Core will coordinate all awards.

Reporting: Final report will be required within 30 days of project end date.

Contact: For additional information contact the I3 EHE SWG leadership.

    Director - Lisa Hirschhorn, lisa.hirschhorn@northwestern.edu

    Co-director - Inger Burnett-Zeigler, iburnett.nm.org

    Co-director - Gregory Phillips II, glp2@northwestern.edu

    Administrator - Justin Schmandt, justin.schmandt@northwestern.edu