

Grant Application with Instructions to Complete a DxQI Grant Application



Please note that in order to support a fair and equitable process for proposal review, we ask you to limit all identifying information about the team or the institution to the demographics section or the organizational rationale section. Identifying information included in any other section will be redacted without consent even if it weakens the proposal.

*(required)

DEMOGRAPHICS

Facility

Name of Facility *

Enter the name of the brick and mortar facility where the project will be conducted. It could be the name of a clinic, a hospital, or some other designation normally found in a directory or online or in the US mail system.

Address *

Street: Line2: City:
Country Code: State: Zip:

For non-US locations, use a postal code instead of a ZIP code. State might refer to a province or other designation in your country.

Describe the "brick and mortar" facility where the project will occur. *

(Check all that apply) Select one or more options

- Office-based primary care
- Office-based specialty care
- Clinic (e.g. Urgent Care, Acute Care)
- Other Ambulatory Center (e.g., Surgical, Imaging)
- Hospital

Hospitals *

Please select the type of hospital from the list below. Select one or more options

- community hospital
- academic medical center
- psychiatric hospital
- safety net hospital
- VA & Military Centers
- Member of Integrated Delivery System
- Federally Qualified Health Center
- Rehab facility
- Skilled Nursing Facility
- Other (please describe)

It is possible that more than one designation will be appropriate e.g., the facility could be a hospital or clinic within an Integrated Delivery System. In that case, check both.

Application submitter

First Name *

Last Name *

Email Address *

Phone #

The application submitter could be the project lead, but could also be support staff. This individual establishes a log-on simply to be able to work on and submit an application. The project lead will be entered (or reentered) later in the application process.

PROPOSAL SUMMARY

Proposal title * (15 words max)

Title should be descriptive, but there is no special requirement.

Priority categories *

Select one or more options

- Big 3" Diseases (see descriptions in RFP)
- Disparities-focused diagnostic quality project
- None of the above

Check this box if your project's aim is to directly impact one of the "Big 3" disease categories as described in the RFP and FAQ documents.

Check this box if your project's aim is to directly benefit the diagnostic outcomes of underserved populations or those impacted by bias as described in the RFP and FAQ documents.

Which of the four categories best describes your intervention? *

(must select one to qualify for this grant) Select one option

- A well-defined problem and discovery period (maximum six months) followed by a to-be defined intervention that will be tested and improved
- A well-defined intervention that will be tested and improved
- An implemented, but unevaluated intervention with a well-defined evaluation plan and an opportunity to improve
- An implemented, evaluated intervention that will be tested and improved in a novel setting or with a novel population

Total Dollar Amount Requested *

Please make sure the number entered here matches the total on the budget justification page.

AIMS, BACKGROUND, and APPROACH

Describe the aim(s) of the project using SMART attributes (100 words max) *
(Specific, Measurable, Achievable, Realistic, Timely). Refer to FAQ for examples of SMART aims.

Projects will typically have only 1 or 2 AIMS. Each AIM would probably have only 1 or 2 sentences.

Problem and Background (500 words max) *

Describe the problem you are trying to solve supported by whatever data demonstrates the magnitude of the problem and its importance to improving diagnosis. Your comments should address the importance for both your site and the nation-at-large. International locations, in particular, must address the importance of the problem to the U.S. healthcare system. Cite key literature that demonstrates what is known about the problem relative to the targeted population (you will have an opportunity to upload a short bibliography later in the application process)

It is important to demonstrate the importance of the problem and to demonstrate that you have familiarized yourself with at least some of the literature that describes it.

Intervention and Rationale (500 words max) *

Describe the intervention and the rationale for selecting this intervention indicating your theory of change or logic model and how it relates to the factors that you believe cause the problem. If you have indicated your application will address a priority category (Big 3, Disparities), ensure your rationale indicates how it will impact the priority area. International locations should demonstrate that the proposed intervention would be applicable in the U.S. Cite key literature, if any is available, that demonstrates what is known about this intervention (you will have an opportunity to upload a short bibliography later in the application process).

(500 words max) This should be self-explanatory. It is important to demonstrate the viability and potential value of the intervention, and to demonstrate that you have familiarized yourself with at least some of the literature that describes it.

PROJECT PLAN**Methodology**

Define the population (100 words max) *

Define the population, whether patient, family or clinical staff, that will be exposed to the intervention (inclusion/exclusion criteria). If the project will be limited to one portion of a facility, e.g. memory unit, ICU or ER, include that in your description of the population

Describe how the intervention will be tested and improved. (300 words max) *

Include a description of the roles for healthcare professionals that are not part of the core project team but involved in implementing the intervention.

How will you measure the effectiveness of your intervention? (300 words max) *

What is the comparator? If different from the diagnostic outcomes you are seeking to impact, how do your measures relate to the targeted outcomes? What type of evaluation is proposed (e.g. pre/post, control group) to determine if desired change(s) occurred? Where will the data come from?

Describe the negative consequences (200 words max) *

Improvement activities can have unintended consequences, both positive and negative. Describe the negative consequences you have considered and what balance measures you will use to evaluate whether any negative consequences occur.

Project Timeline

List major milestones (200 words max) *

Please list your major milestones and associated deliverables including pre-intervention phase (start-up work) e.g. root cause analysis or training, the intervention phase, and the assessment phase. Do you expect multiple improvement cycles? If so, describe how many cycles you hope to accomplish during the grant period.

A one-year QI project should not have too many milestones, but at a minimum we would expect to see the project kick-off, completion of any discovery work that must be done, the start-date for the first intervention cycle, the end of the first cycle (if known), the submission of the mid-

ORGANIZATIONAL RATIONALE

Core Team

Provide the core project team roster and their relevant quality improvement experience.

First Name *

Last Name *

Title *

Departmental affiliation *

Phone number *

Email Address *

Bio (200 words max) *

You will be able to use the ADD TEAM MEMBER button to cover everyone on the CORE project team.

Some titles don't really tell the responsibility of the individual that would be relevant to this initiative. In that case, indicate both title & more descriptive role (this is not the same as the role on the project, e.g. Lead)

We wish to know the departmental home of the project lead which might not be clear from their title and role. For example, someone could be in an embedded research center, or risk management or the ED. This response helps us judge the appropriateness of the executive sponsor.

List up to 5 additional team members

Describe why this team is well-suited to successfully carry out this improvement project *

The response could consider previous QI work, previous work as a team, domain expertise, etc.

Key Stakeholders (200 words max) *

How will you involve key stakeholders (e.g. patients or families) in your project? If you do not plan to involve patients, please explain why not.

It is possible that there will not be an appropriate role for a patient in the design and execution of this initiative, but our bias is that there is a role. If there will be no patient engagement, clearly describe why it would add no value.

RISKS and RISK MITIGATION

Is the required data readily available? *

Select one option

- Yes, all required data is readily available
- No, not all required data is readily available.

If this intervention requires data access that is not already readily available, describe how you will ensure necessary access to these resources. (200 words max) *

All projects experience challenges, and the most successful projects anticipate and plan for likely challenges (350 words max) *

What types of challenges do you imagine facing in project operations and what strategies do you have to address them? (Please note, challenges described here should refer to the global project and not to the intervention itself.)

BUDGET JUSTIFICATION

Total amount entered cannot exceed \$50,000.

I. Core Project Team *

Input must be a whole number

Core Project Team Description

Provide a short description of how these dollars will be used e.g., protected time for project lead.

II. Other Personnel *

Input must be a whole number

Other Personnel Description

Provide a short description e.g., purchase data analysis support from an internal department.

III. Materials * → *Input must be a whole number*

Materials Description → *Please provide a short description*

IV. Travel * →
Transportation, lodging, meals for 3 nights

If awarded a grant, you will be required to use part of the grant proceeds to attend a one-day QI Summit followed by a 3-day SIDM conference in the middle of the grant period and one approximately six months after the grant period. You should budget for transportation, lodging and meals. We have suggested \$2,000 per Summit/Conference (\$4,000 total), but you can modify that number if you believe something else would be more appropriate, but no less than \$2,000 total. In 2000, the QI Summit and the SIDM conference will be held in Minneapolis. No information is available about the location for 2021. No additional description is necessary.

V. Registration * →
Registration to attend two adjacent SIDM conferences

(non-editable at \$1,000) - We are providing a discounted registration fee for the conference of \$500 per year. Description is already provided. If you wish to add a second person to the adjacent SIDM conference, you can do so at \$500 per person and include that sum in the "Other" line.

VI. Other (please describe) * →
Sub-Total *

Input must be a whole number. Provide a short description of how these dollars will be used.

VII. Indirects * →
Indirects (if any) (Additional guidance can be found in the FAQs)

Input must be a number and cannot exceed 12.5% of the total of lines I – VI. Description is not required.

VIII. Total (cannot exceed \$50k) * →
This field should auto-calculate.

ACKNOWLEDGEMENTS and ATTACHMENTS

Acknowledgements

Acknowledgement *

We acknowledge that, should we be granted this award, the core project team commits to:

- 1) submitting bi-monthly status reports as described in RFP,
- 2) submitting formal 6-month mid-project and year-end final reports,
- 3) participating in quarterly calls,
- 4) participating in the online Community and
- 5) attending two designated QI Summits at future Diagnostic Errors in Medicine National Conferences.

By acknowledging this statement, we also confirm that

- a) no additional external funding is available to do this work and
- b) the IRB is aware of this project and appropriate authorization, if required, has been or will be obtained prior to the start of the project.

We agree → *(check agree box)*

Attachments

Executive sponsor support letter* PDF only [File Upload] → *The executive sponsor must commit to specific support. See the RFP for more details.*

Short bibliography (PDF only) [File Upload] →
Please upload a short bibliography of key articles that support the importance of the problem and/or the suitability of the intervention, if available.

In earlier sections of the proposal, you were asked to cite literature. The full citations should be added to a bibliography and uploaded.

Letter of support from 3rd party partner, if critical to project plan. PDF only [File Upload] →
Most proposals will not involve third parties, such as for-profit vendors or professional societies or other healthcare entities, but if you will use a third party and they are a key component of your work, then they should provide a letter of support.