Webinar Questions

DxQI
Seed Grant Program
An initiative of the Society to Improve Diagnosis in Medicine

The following questions for submitted prior and during the Seed Grant Program Informational Webinar on February 24, 2021. Some questions have been combined or edited for clarity.

You mention in the FAQ that grant funding shall not be used for major capital expenses, but what about other equipment necessary to complete a project such as [medical devices]?
Purchase would need to be tied to a specific QI intervention and justified in your proposal. The grant award is not intended to supplement your organization's capital budget.

Are the bi-monthly reports due twice a month, or every other month?
Bi-monthly reports are due every other month. They are brief, informal reports submitted via online form.

Our project aims to address diagnostic error by improving provider/patient communication. As such, it isn't targeted toward any one area for improvement, but should impact the "Big 3," health disparities, and other areas. Do you recommend that we attempt to target it to only one area or submit in all three?
You will have the opportunity to select both the "Big 3" and Disparities in the application. In the "Intervention and Rationale" section of the application you will need to describe how your intervention will impact these areas and will need to commit to stratifying your results based on the areas specified.

Relating to the four categories of intervention (see #2 under "What are we looking for?" tab), our intervention is defined but needs resources to build it out before it can be tested. Do you recommend we submit in the first category and use the discovery period to build out the intervention or would the second category make more sense?
In fairness to all applicants, SIDM will not provide comment on the content of any individual grant application. If the intervention has been defined, select the second category in the application and address the time needed for "build out" in your project plan. Keep in mind that although the first six months of the one year project can be used discovery or development, if the reviewers do not have high confidence that a testable intervention will emerge it is unlikely that the proposal would be approved.

If contracted services are included in our budget, does SIDM have any requirements for how contractors are selected, or is that at our discretion?
We have no requirements for contractor selection. A contractor would be considered a third party whose role will need to be described in the application supplemented with letter of support from the contractor.

Can we submit a project scoped for more than $50,000 and supplement from another source? If yes, how would you like that reflected in the budget?
Your budget should be scoped to describe the component or intervention that is supported by the grant award funding and in what amounts. The grant funding is intended to fund a proposal that would not be implemented without the funding so in the application (see Step by Step Guide), you must attest that no additional external funding is available to do this work. In the narrative of the proposal you can address the larger scope of the project or the context in which it is being implemented.

Will there be grant writing coaches who we can seek advice from as we develop our proposals?
SIDM is not providing assistance for grant writing. Several suggestions were provided during the Informational Webinar and general resources are available on the internet (inclusion here does not imply endorsement).

- UC Berkeley "Grant-Writing Resources": https://ls.berkeley.edu/faculty-and-staff-resources/grant-writing-resources
- Foundation Center "Introduction to Proposal Writing" free online course: http://foundationcenter.org/getstarted/tutorials/shortcourse/index.html

We can respond to questions about the application process but cannot advise on interventions or ideas.

Is preliminary data required for the proposal?
Preliminary data on a proposed intervention is not required but would help establish the rationale for the project and a baseline for your measurement. In the application you must describe the problem you are trying to solve supported by data that demonstrates the magnitude of the problem and its importance to improving diagnosis (see "Problem and Background" section in Step by Step Guide).

Can the budget be used for indirect or only for direct costs? Can the budget support PI or personnel time or is it only for materials?
See FAQ's and Step by Step Guide for guidance on indirect and direct costs, personnel, and materials.

Is the grant mechanism more interested in under-diagnosis and missed diagnoses than on over diagnosis? Would overdiagnosis count as an area of concern?
This grant is intended to support quality improvement in diagnostic medicine. Your proposal must establish the relationship between overdiagnosis to diagnostic accuracy, timeliness, or communication of the diagnosis to the patient.

The bulk of our budget would be allocated to a [specified] position who will run the day-to-day duties of our pilot program. Funding this position, which is fundamental to our program, is the reason for our grant proposal. Is such a position considered an indirect cost (limited to 12.5%) or direct cost?
In this case, funding for such a person would be considered a direct cost.

Would you be able to give case examples in which data is readily available versus not? It is not quite clear in my mind what is meant by "the required data."
Accessibility to required data refers to the project team being able to access data needed for the project. Projects that depend on IT or other non-team resources to provide data are considered riskier to execute than projects where all needed data is readily available to the team. Clinicians on the project team, for example, can readily access their patients' EMR data. .

Please clarify the details around the member obligations. Member organizations are asked to attend two annual QI Summits and SIDM annual conferences. First is this a total of two conferences or two annual QI Summits and an SIDM conference. What is the time commitment for these conferences? What is the time commitment for the online community work?
The annual QI summit is intended to be a half-day meeting of grantees to share successes and barriers, occurring immediately prior to the SIDM annual meeting. The annual meeting is usually three days. We expect engagement and participation in the online community to foster a supportive QI collaborative cohort. Please refer to the FAQ for guidance on budgeting for travel and the annual conference. You will be expected to have a team member at the QI Summit during your grant year and the conference approximately six months following the conclusion of your grant year.

I have a question about whether our project idea would fit with the scope/priorities of this RFP. Our clinic sees individuals with [high risk for specific disease or condition]. We provide initial risk assessments to determine risk level [followed by a QI intervention]. The goal is to do [a QI intervention using a specific method to address identified needs or improve communication with patients].
SIDM will not be providing comment on any individual grant proposal content. If any proposal will include a discovery period followed by a time for an intervention to be tested and improved, both the discovery period and intervention need to be well-defined. The discovery period would have to take place within six months, followed by implementation and multiple cycles of testing and improvement during the next six months. The Seed Grant Program is not intended to fund discovery projects.

Which project personnel are expected to attend quarterly calls, the online community, QI summits and SIDM annual conferences?
It is up to the organization to decide which members of the team to engage and participate in the various activities.

Can an eligible institution submit multiple applications? The applications would be different interventions led by different investigators/researchers.
Yes, we will accept multiple proposals from the same institution as long as each application: a) names a different project lead and b) focuses on a different problem/intervention combination. Please note that while we will accept multiple proposals from the same institution, we are unlikely to fund more than one.

We are considering a project that involves a network of health care providers. Can the lead applicant make sub-awards to project partners to compensate their participation (within the $50k budget)?
Yes, they can be included in the budget and the applicant will be responsible for managing the project partner agreements.

Regarding the budget, can you clarify if the 12.5% permitted for indirect costs are to be part of the $50,000 budget (up to $6,250) or in addition to the budget.
The 12.5% for indirect costs is an optional part of the total amount of funds in the grant award and will not exceed $50,000.

Are you expecting an approval from IRB before submission or by time of award?
Ideally, approval will be obtained by the time of the award but reasonable accommodations can be made. In general, QI projects should not require an IRB review, but that is a system-specific decision.

How many grants are still available?
SIDM will fund approximately 20 qualified proposals in this cohort.

What are the application component page limits?
The application fields are limited by word count. Please refer to the application Step by Step Guide.

Do you have examples of prior grants funded?
The grant awardees from 2020, including a summary of their projects is available on the DxQI Seed Grant web page.

Can you please explain what is meant by "deliverables" under the project timeline section of the application?
"Deliverables" on the timeline refers to expected outputs by the specified time. For example, if you are building a new dashboard for clinical decision support one of your early deliverables will be to convene the implementation team to develop workflows and deployment plans. Midway through a deliverable could be the results of pilot testing. You define the deliverable but whatever it is has to be an output that demonstrates achievement of a milestone.

A group of providers is pulling together a proposal that would involve a network of FQHCs and one hospital. In the online application, will it be acceptable for the lead applicant to be listed as the healthcare facility (project/performance site) and the other partners listed in the narrative?
Yes, as long as the applicant is one of the performance sites and provides direct patient care.

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