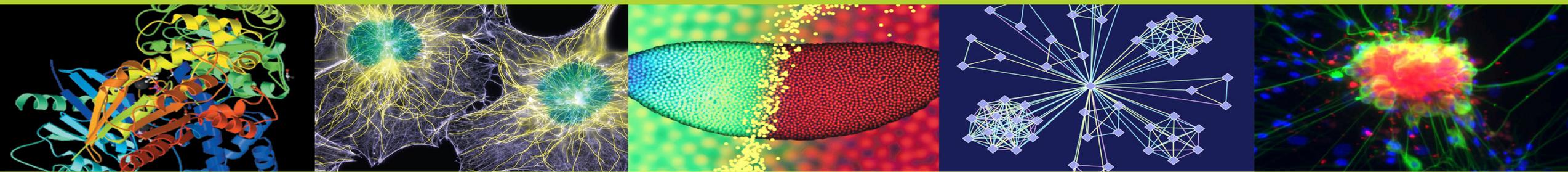


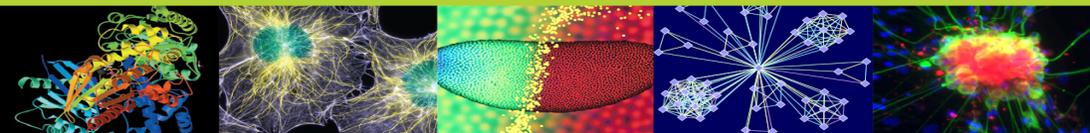
IDeA-CTR Program Pre-application Webinar

August 6, 2020
3:00 – 4:30 PM



IDeA-CTR Program and Grants Management Team

- Hongwei Gao, MD, PhD
Program Officer/IDeA-CTR Program Contact
- Zuzana Justinova, MD, PhD
Program Officer
- Julia Barthold, MD
IDeA-CTR Project Scientist/Project Coordinator
- Christy Leake
Grants Management Team Lead
- Michele McGuirl, PhD
Chief, Research Advancement Programs Branch
- Ming Lei, PhD
Director, Division for Research Capacity Building



Meeting Outline

Presentations (25 mins)

- Overview: the IDeA-CTR Program and the New FOA
- Network Structure and Participating IDeA-CTR Institutions
- Governance and Program Oversight of IDeA-CTRs
- Financial Management of IDeA-CTRs
- Application Instructions

Hongwei Gao

Zuzana Justinova

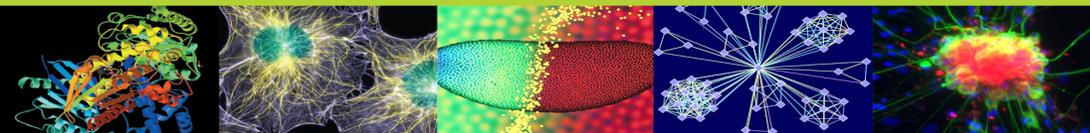
Julia Barthold

Christy Leake

Michele McGuirl

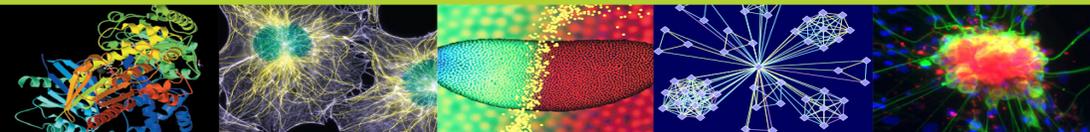
Q&A (60 mins)

Ming Lei (Moderator)



Overview: the IDeA-CTR Program and the New FOA

Hongwei Gao

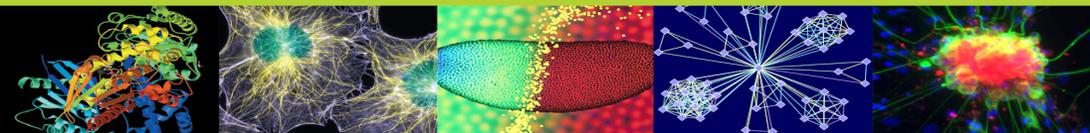
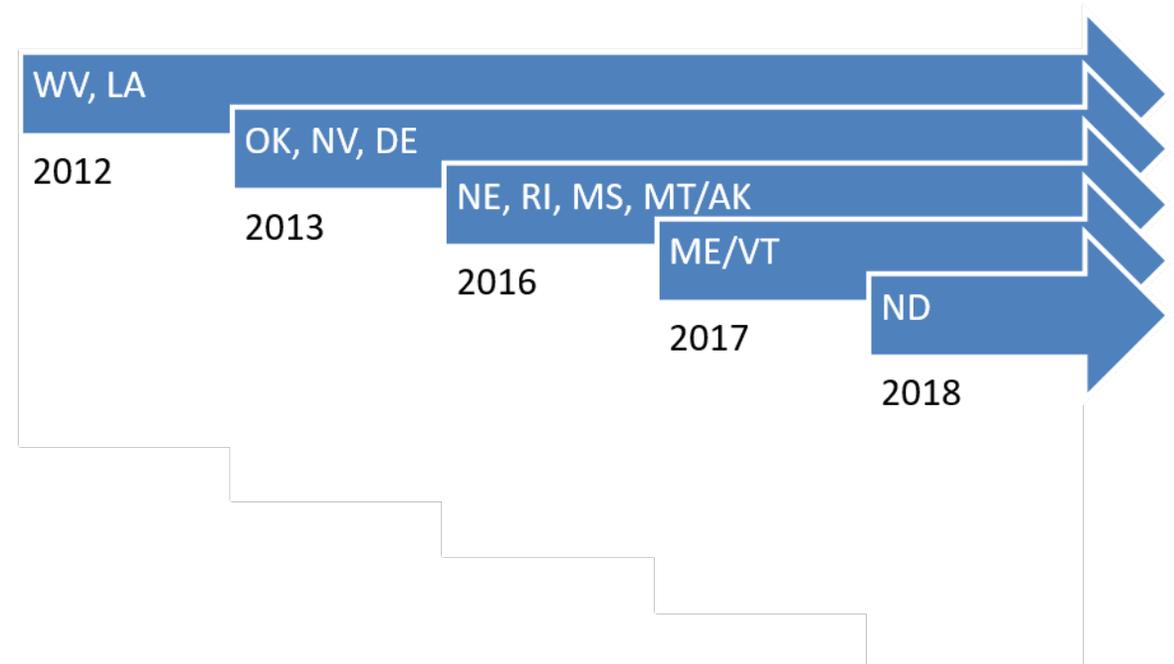


Overview of IDeA-CTR Program

The purpose of the **IDeA-CTR initiative** is to:

- Expand the capacity for clinical and translational research in IDeA-eligible states/jurisdictions
- Enhance competitiveness of investigators to obtain extramural funding for clinical and translational research.

The IDeA-CTR program, initiated in 2012, currently supports 11 awards.



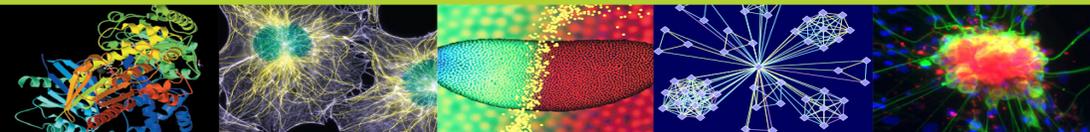
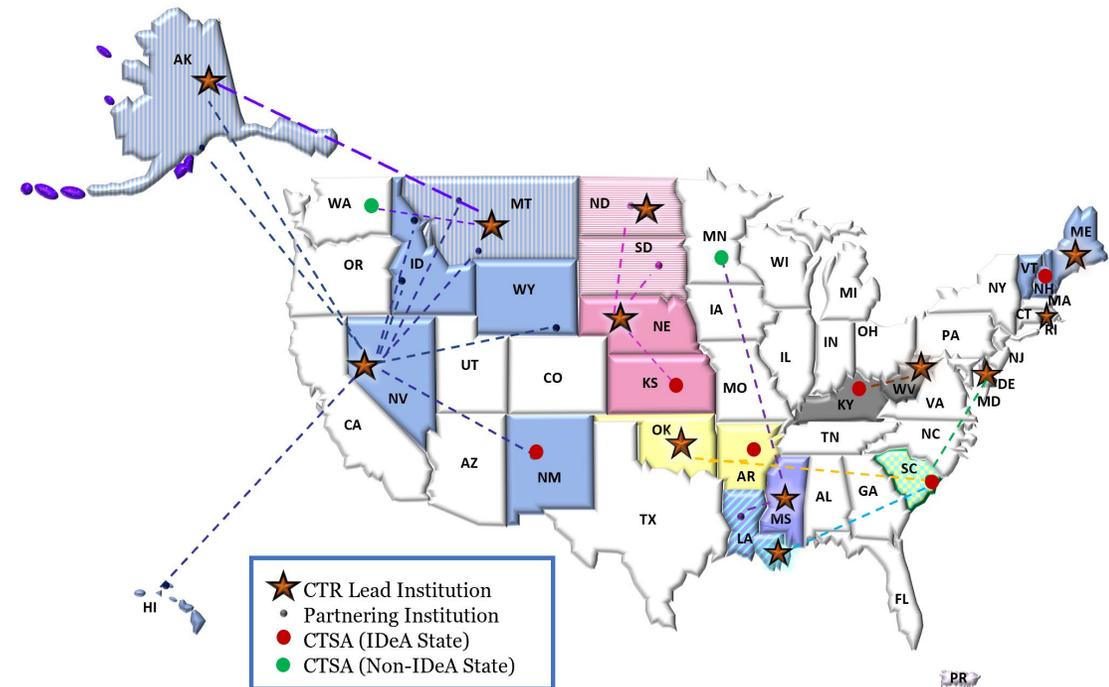
Current Cohort of IDeA-CTR Awardees

- **Geographical Coverage**

- All IDeA states, except those with CTSA or RCMI, are supported.
- Some states/Institutions participate in more than one CTR.
- Some CTRs have significant investment in CTSA institutions located in different IDeA states.

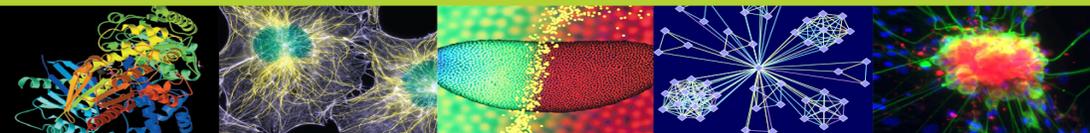
- **Scientific Scope**

- A critical presence of clinical and translational research that addresses IDeA states' health challenges
- Most CTRs support broad spectrum capacity and infrastructure building.
- Some CTRs focus on specific diseases or populations



PAR-20-175: For New and Renewal Applications

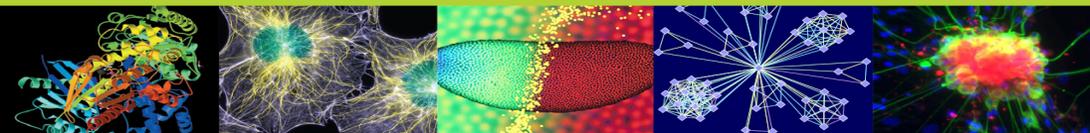
Renewal	PIs	States
2020	VOYICH, JOVANKA/RASMUS, STACY	Montana-Alaska
	PADBURY, JAMES	Rhode Island
	RIZZO, MATTHEW	Nebraska
	GRANGER, JOEY	Mississippi
2021	HODDER, SALLY	West Virginia
	KIRWAN, JOHN	Louisiana
	ROSEN, CLIFFORD/STEIN, GARY	Maine-Vermont
2022	HICKS, GREGORY	Delaware
	KUMAR, PARVESH	Nevada
	JAMES, JUDITH	Oklahoma
	BASSON, MARC	North Dakota



Key Changes to the IDeA-CTR FOA

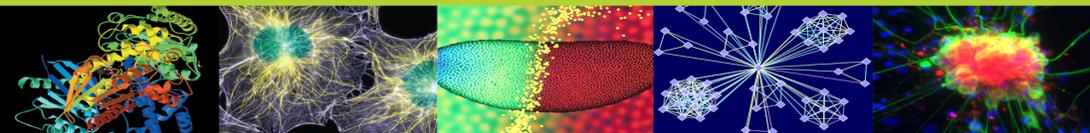
To maximize the research capacity building impact of CTRs, the new FOA includes clarifications on the structure and programmatic priorities of the program:

- Support IDeA-CTR as statewide or interstate regional **networks**
 - Include partner institutions within the state or region
 - Minimize duplication of clinical and translational research capacity-building investment made by other NIH programs
- Build the capacity to address the **broad spectrum** of health challenges faced by populations in the state or region



Network Structure and Participating IDeA-CTR Institutions

Zuzana Justinova

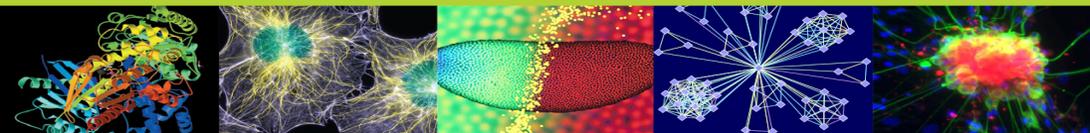


Network Participating Institutions

An institution may participate in **one IDeA-CTR network** at any given time, either as the *lead institution* or a *partner institution*.

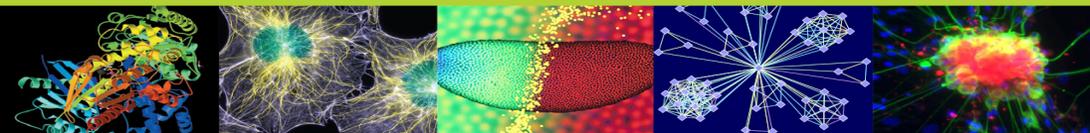
Lead/Co-Lead Institution(s)

- Academic Health Centers in an IDeA-eligible state with strategic priorities that align with the goal of the IDeA-CTR.
 - CTR lead institution(s) cannot lead active CTSA award.
 - An application from an IDeA state that holds a CTSA award must include **compelling justification** for a new clinical and translational research network in the state.
- Must have extramurally funded multidisciplinary clinical and translational research.



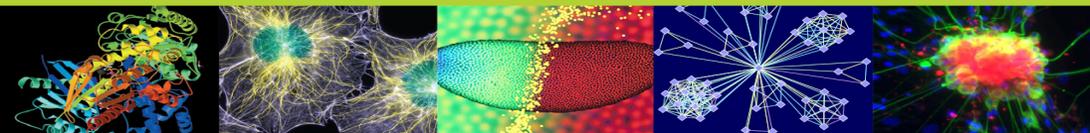
Partner Institutions

- Integral components that are committed to and make critical contribution to the network's goals and objectives.
- Receive personnel and infrastructure support from the network.
- Adequate cooperative arrangements with network partners to enable effective network function across institutional boundaries.
- Can be from a state different from that of the lead institution.
- CTSA institutions in IDeA states may be included as partners with **compelling justifications** but **cannot lead cores** of the IDeA-CTR.



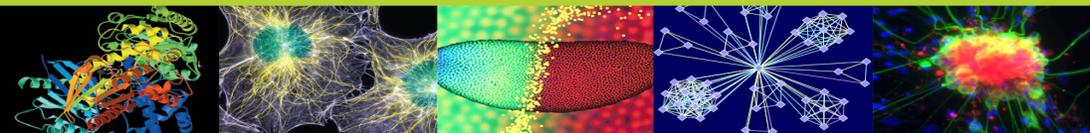
Collaborators (in contrast to Partners)

- Institutions or programs that collaborate with CTRs on research initiatives or projects.
- Any institution and/or programs outside of the CTR
 - Other IDeA-supported programs (i.e., CTR, INBRE, and COBRE)
 - Other NIH-funded clinical/translational programs (e.g., CTSA, RCMI, ISPCTN)
 - Other institutions
- Collaborators can receive CTR funds for **consultant or fee-for-service** activities but not infrastructure or personnel support.



Governance and Program Oversight of IDeA-CTRs

Julia Barthold



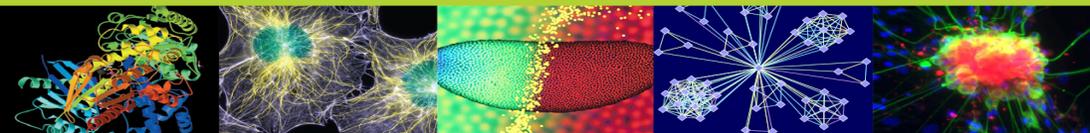
IDeA-CTR PD/PI Eligibility and Roles

PD/PI Requirements:

- Current senior-level faculty appointment at the lead institution with demonstrated leadership experience and skills; Established clinical scientist with ongoing extramurally-supported research program
- Must devote 3.6 – 6.0 person months, including role as Administrative Core Lead

PD/PI Roles

- Ensure implementation of all decisions approved by the Steering Committee
- Oversee and manage all approved network components, personnel, resources and budgets
- Program Coordinator (PC): an *optional* position that may be proposed to assist the PI with administrative activities



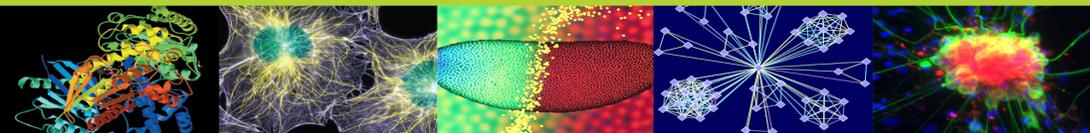
IDeA-CTR Steering Committee

Role:

- **Governing body:** makes all major strategic and operational decisions, with consideration of EAC and IAC recommendations

Membership: each member has 1 vote

- PI: Chair
- PC, if proposed
- Senior Institutional Official from the lead institution
- Representative from each partner institution
- NIH Project Coordinator (formerly known as Project Scientist)
- Optional: others from lead or partner institutions as justified

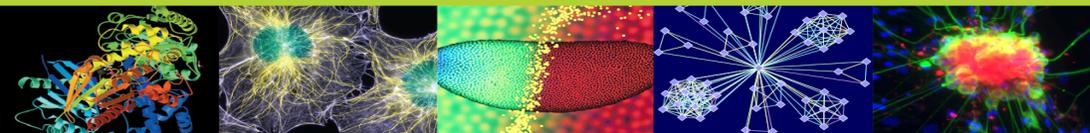


NIH Project Coordinator Roles

Steering Committee member

Provides input on important programmatic decisions:

- Network participation and organization
- Advisory committee membership
- Major research initiatives and Component/Core activities
- Interactions and collaborations with IDeA-CTR Networks and other NIH programs (e.g. INBREs, COBREs, CTSAAs)



IDeA-CTR Advisory Committees

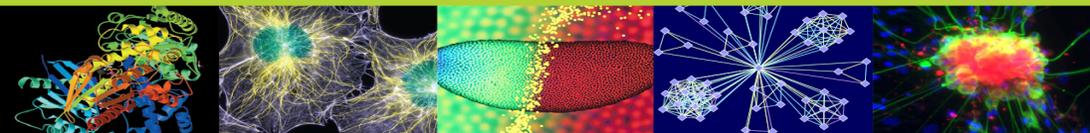
Role: Provide advice and offer recommendations to the Steering Committee and PI

External Advisory Committee

- Multi-component clinical and translational research network leadership experience
- Review progress and approve pilot projects
- New members remain undefined and not approached until after an award is made

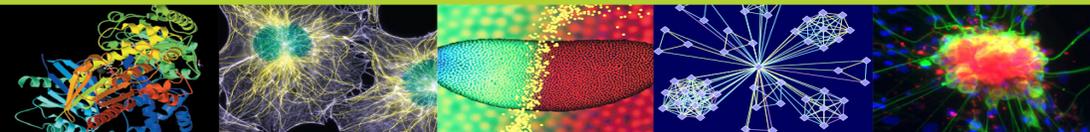
Internal Advisory Committee

- 6-8 named members
- Senior officials from lead and partner institutions



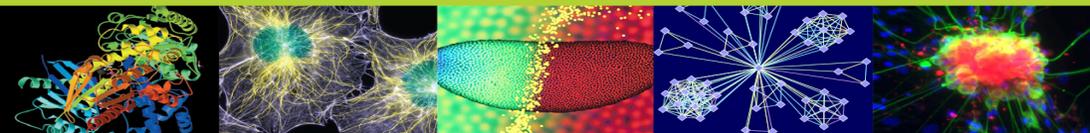
Financial Management of IDeA-CTRs

Christy Leake



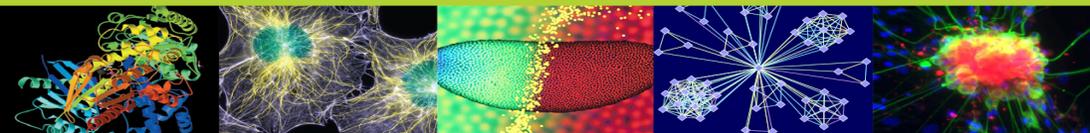
Financial Management of IDeA-CTRs - 1

- The application may request up to \$4,000,000 total costs per year
- An additional one-time cost of up to \$300,000 in direct costs in year one for Alterations and Renovations
- Funds cannot be used at institutions in non-IDeA states. However, funds may be used in other IDeA and non-IDeA states for fee-for-service activities
- A direct cost is any cost that can be specifically identified with a particular project that can be directly assigned to such activities relatively easily and with a high degree of accuracy



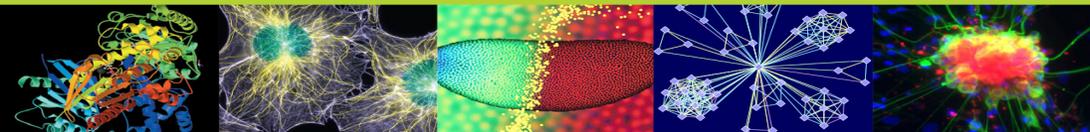
Financial Management of IDeA-CTRs - 2

- An institution may receive infrastructure or personnel support from one IDeA-CTR network at any given time.
- If CTSA institutions are included as partners in an IDeA-CTR network, they may not lead components/cores.



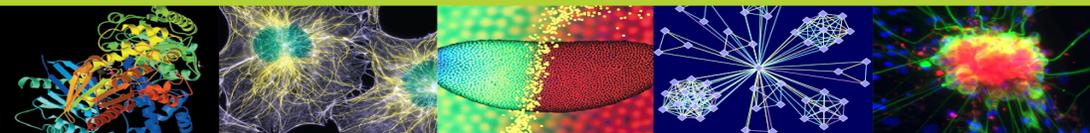
Application Instructions

Michele McGuirl



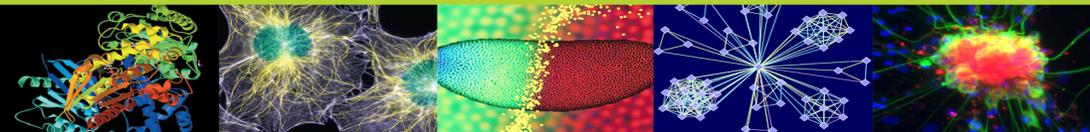
Overall - Background & Goal

- Current landscape of C&T research infrastructure in the state(s)
 - Lead & Partner institutions: what each can contribute to C&T research and network
 - Lead institution: alignment of institution's strategic priorities with the goal of the IDeA-CTR
- Expected impact of the proposed IDeA-CTR
 - Impact on health conditions that disproportionately affect populations in the state(s)
 - Scientific and structural obstacles the CTR is expected to address
 - For applications from a CTSA state, describe the CTSA's effort and contributions on these fronts and provide justification for an additional C&T research network



Organizational Structure & Strategy

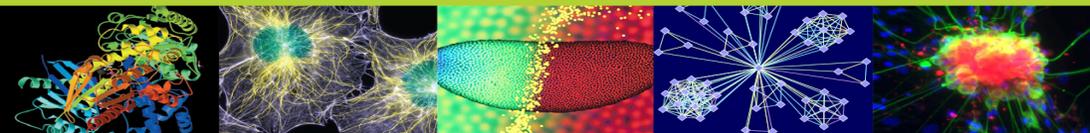
- Details of the structure and roles of each partner
 - Administrative and scientific relationships between the lead and partner institutions
- Strategies to strengthen the network
 - Institution can be a partner in only one CTR
 - The CEO Core **requires** a PBRN component - Practice-Based Research Networks
<https://pbrn.ahrq.gov/>



Institutional Letters of Support

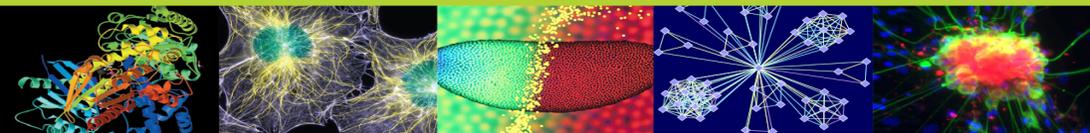
From a senior official at *each* lead and partner institution

- Commit to goals of the IDeA-CTR
- Specify the institution's commitment to resources – some examples:
 - Financial, Space, Release Time, Personnel, Core Support
- Define the IDeA-CTR PI's authority/influence over resource commitments and the reporting line



Renewal: Progress and Accomplishments

- Progress on developing C&T research relative to baseline
 - Prior accomplishments and impact on the major health concerns
 - Administrative challenges and lessons learned
- Acknowledge changes in the participation of partner institutions



Thank you!

Please enter your questions into the
chat box.

