

# The grant funding game:

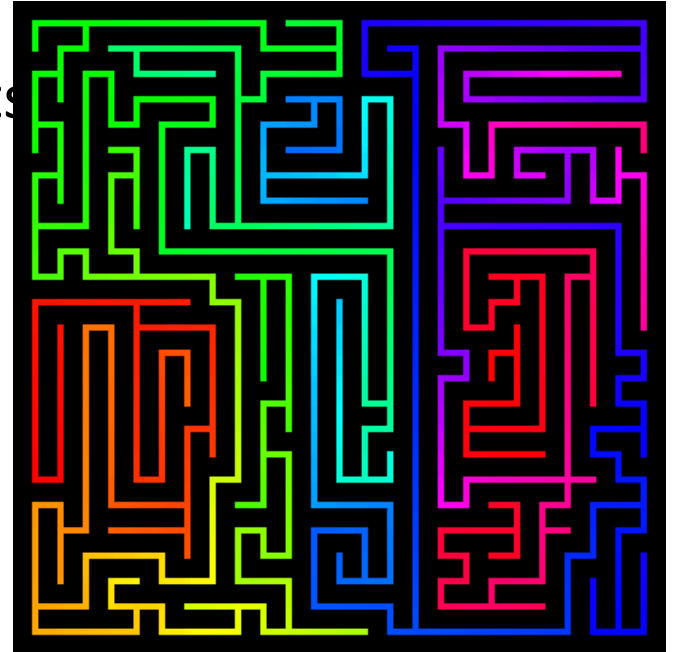
Strategies that might help your funding applications

William Ghali

Scientific Director, CIPPH

# Overview

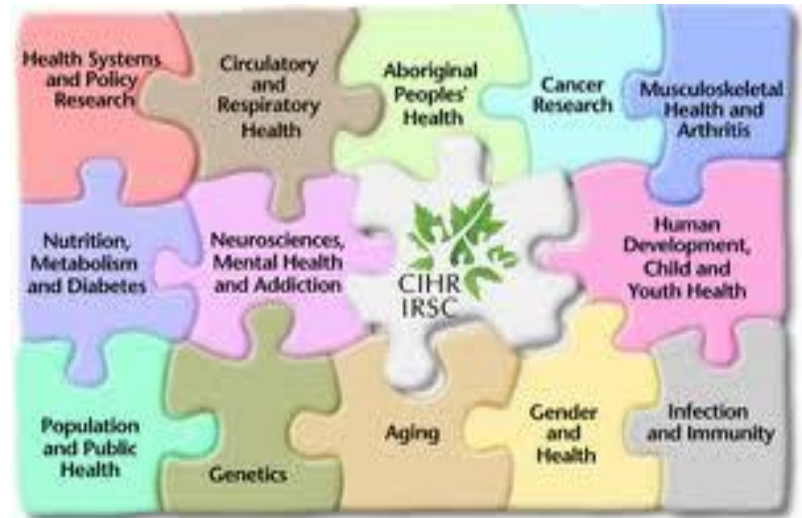
- CIHR – general points
- Special competitions vs. open grants
- Choosing a committee
- Priority announcements
- Agencies other than CIHR
- Progress pages
- Response to reviews
- Renewals & rolling of grants
- External reviewers
- Main proposal: miscellaneous suggestions
- U of C internal peer review





# Canadian Institutes of Health Research

- Established in 2000
- Broadened mandate
- 4 pillars of inquiry
  - Biomedical
  - Clinical
  - Health systems
  - Population health
- 13 institutes
- Multiple competitions





Canadian Institutes  
of Health Research

Instituts de recherche  
en santé du Canada

## Canadian Institutes of Health Research Instituts de recherche en santé du Canada



**English**

[Important Notices](#)

**Français**

[Avis importants](#)

Canada





Canadian Institutes  
of Health Research

Instituts de recherche  
en santé du Canada



Canadian Institutes of Health Research  
www.cihr-irsc.gc.ca

Français

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### Public Involvement

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- [Take Part in Café Scientifique](#)

### Outcomes and Impacts

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## Canadian Research Data Summit

[Learn more](#)

- Canadian Research Data Summit
- Arthritis research moving in the right direction
- Transplantation Research Initiative
- A Rural Way to Health
- CIHR makes recommendations on Canadian MS research priorities

Funding News

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## Funding

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- View Decisions

## Public Involvement

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## Outcomes and Impacts

- Milestones in Research
- Research Profiles
- Research Results

[All Funding Opportunities](#)

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## Opportunity Name

[Catalyst Grant](#) [News Feed](#)

[Catalyst Grant: CEEHRC Epigenetics, Environment and Health](#)

[Catalyst Grant: Drug Safety & Effectiveness in Underrepresented Population](#)

[Catalyst Grant: HIV/AIDS \(Community-Based Research\) \(2011-2012\)](#)

[Catalyst Grant: HIV/AIDS and Aboriginal Health](#)

[Catalyst Grant: Official Language Minority Communities \(2011\)](#)

[Clinician-Scientist Salary Award](#) [News Feed](#)

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[Clinician-Scientist Training Award: 2011-2012](#)

# Impetus to Apply...

- Two common scenarios:
  - Competition in need of a grant
  - Grant in need of a competition





# Impetus to Apply...

- Two common scenarios:
  - Competition in need of a grant
  - Grant in need of a competition
  - (both entirely OK)



# Special Competitions vs. Open Grants?

- Pros and cons
- Consider
  - Fit with competition?
  - Recurring competition?
  - Number of awards in special competition?
  - Timing of deadline?
  - Other factors?
- Team grant opportunities



# Choosing the Peer Review Committee?

- Health services
- Health policy & management
- Population health




# Choosing the Peer Review Committee?

- Aboriginal health
- Behavioural sciences
- Aging
- Social dimensions of aging
- Humanities, SS, Law, Ethics
- Knowledge translation
- Nutrition and food
- Palliative & end-of-life
- RCT
- Social & developmental for children & youth
- Others




[Meetings, Planning and Dissemination Grant: 2011-2012](#)

**New Investigator Salary Award** [News Feed](#) | 

[New Investigator Salary Award: 2011-2012](#)

[New Investigator Salary Award: Fall 2011 Priority Announcement \(Specific Research Areas\)](#)

**Operating Grant** [News Feed](#) | 

[Operating Grant: 2011-2012](#)

[Operating Grant: Advancing Theoretical and Methodological Innovations \(2011\)](#)

[Operating Grant: Child and Youth Health](#)

[Operating Grant: Collaborative Health Research Projects \(NSERC Partnered\) \(2011-2012\)](#)

[Operating Grant: Disease Management \(2011\)](#)

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[Operating Grant: Industry-Partnered Collaborative Research \(2011-2012\)](#)

[Operating Grant: Knowledge to Action \(2011-2012\)](#)

[Operating Grant: Knowledge to Action - Fall 2011 Priority Announcements \(Specific Research Areas\)](#)

[Operating Grant: Population Health Intervention Research \(Fall 2011 Competition\)](#)

**Other** [News Feed](#) | 

[Other: Best Brains Exchange Travel Awards](#)

[Other: CEEHRC Epigenomics Platform](#)

[Other: Canada Graduate Scholarships – Michael Smith Foreign Study Supplement \(2011-2012\)](#)


[Other: HIV/AIDS Community-Based Research](#)

[Other: Health Professional Student \(2011-2012\)](#)

[Other: Health Professional Student \(2011-2012\)](#)




[Meetings, Planning and Dissemination Grant: 2011-2012](#)

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http://www.researchnet-recherchenet.ca/rnr16/vwOpprtntyDtls.do?prog=1321&&view=currentOpps&org=CIHR&type=AND&resultCount=25&sort=program&all=1&masterList...

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In this competition, funds are available to encourage and support applications in specific areas that are aligned with CIHR's research priorities as the maximum amounts per grant that can be requested is found in the "[Objectives](#)" section.

#### A. CIHR Research Priority Areas:

- [Aging \(Bridge Funding\)](#)
- [Blood Supply Risk](#)
- [Blood Utilization and Conservation](#)
- [Breast Cancer Research \(Bridge Funding\)](#)
- [Drug Safety and Effectiveness - Innovative RCTs](#)
- [Drug Safety and Effectiveness \(Bridge Funding\)](#)
- [Ethics](#)
- [Health Services and Policy Research](#)
- [HIV/AIDS](#)
- [HIV/AIDS - Comorbidity](#)
- [Inflammatory Bowel Disease \(Updated: 2011-07-25\)](#)
- [Nutrition, Metabolism and Diabetes Start Up Funds \(Bridge Funding\)](#)
- [Knowledge Translation](#)
- [Obesity - Interventions to Prevent or Treat](#)
- [Ovarian Cancer \(Bridge Funding\)](#)
- [Pathways to Health Equity](#)
- [Population Health Interventions](#)
- [Regional Partnerships Program](#)
  - [Manitoba](#)
  - [New Brunswick](#)
  - [Newfoundland and Labrador](#)
  - [Nova Scotia](#)
  - [Prince Edward Island](#)
  - [Saskatchewan](#)
- [Reproductive and Child Health \(Start-up Grants\)](#)
- [Sodium and Health](#)
- [Transfusion Related Acute Lung Injury \(TRALI\)](#)

# Agencies other than CIHR?

- Many (many) other possibilities:
  - HSFC, CDA, Kidney Foundation, etc.
  - PHAC, CIHI
  - Private foundations
  - Others
- Instead of CIHR?
- or...in addition to CIHR?
- Diversify to optimize your chances



# The summary of progress page

- A single page
- Opportunity to show that you are READY!
- Can include:
  - Prior studies
  - Networking
  - Collaborations
  - Pilot work
  - Training/skills obtained
  - Etc.



The work that we propose in this funding application is an advanced step in a program of work for which considerable progress has already been made. This progress relates to four key elements of work that we briefly highlight here. These include: 1) creation of the Medical Ward of the 21<sup>st</sup> Century (W21C) research and innovation ‘platform’; 2) environmental scanning and a completed systematic review of computer-enabled discharged communication interventions; 3) iterative prototype tool development through multi-disciplinary focus groups; and 4) a productive and highly collaborative working relationship with Alberta Health Services, such that the prototype tool that we developed through focus groups is now being constructed in the hospital information systems of Calgary region hospitals. We elaborate on each of these below.

- 1) *Creation of the Medical Ward of the 21<sup>st</sup> Century (W21C):* The applicant’s team members are all members of the W21C research and innovation network. This is a multidisciplinary team of investigators based at the University of Calgary, with national and international collaborative linkages. The team’s thematic focus is on innovation for enhancing health system safety and quality of care. The program provides the network of researchers with state-of-the-art clinical and research infrastructure within which to undertake innovative research, and opportunities for unique interdisciplinary linkages that would not ordinarily occur in more traditional research environments. Reviewers can learn more about the W21C at [www.w21c.org](http://www.w21c.org).
- 2) *Completed environmental scanning and systematic review of existing seamless discharge tools:* Prior to beginning our own work in computerized tool development, we undertook a market scan to determine if there were any existing commercially available tools that possess the functionality that we envisioned for our seamless discharge tool. This exercise revealed that there were no existing



# Responding to prior reviews



# Responding to prior reviews

- (almost) always reapply!
- Do NOT focus on grant score or ranking
- Rather – the wording of your SO notes
- Ask mentors/colleagues
- Some strategic nuances
- Usually much less work than original submission



**William Ghali, MD, MPH**

**RESPONSE TO REVIEWS**

**\$146,440**

This is a revised protocol, with adjustments made in response to the reviews provided by the Health Services Evaluation and Interventions Committee in the September 2010 competition. We were encouraged by the Scientific Officer notes explicitly indicating that “resubmission is recommended”, and are doing so with this revised application. We believe that we have made revisions that fully address the comments provided to us. Below, we outline the committee and reviewer comments/questions, followed by a description of how we have revised the proposal:

**1. Choice of primary endpoint and its impact on sample size calculations:** We notice that there was discussion within the committee around what our primary endpoint should be. The prior version of the protocol indicated that readmission to hospital within 3 months was the primary endpoint. One reviewer indicated that the primary endpoint should be mortality. However, that same reviewer then submitted an addendum comment to their review acknowledging that it may not be feasible to power the study for that less frequent endpoint. In the addendum, the reviewer modified their recommendation to suggest that a composite endpoint of death or readmission could be a reasonable primary endpoint. We agree with this suggestion and have modified the proposal to indicate this. This change brings two

# Renewals and rolling of grants

- Projects are usually part of a program...
- CIHR renewals
- Rolling of grants
- Maintaining cadence



# Recommending external reviewers

- Causes some anxiety
- Can be tricky:
  - Smart vs. too smart
  - Expert vs. competitor
  - Conflict of interest issue

