

## **CRICO Announces Request for Grant Applications to Improve Patient Safety**

*July 6, 2021* - CRICO, a recognized leader in evidence-based risk management, owned by and serving the Harvard medical community, is pleased to announce its **2022 Request for Applications (RFA) program** to advance our commitment to patient safety.

This RFA is designed to support identification, evaluation, and implementation of patient safety solutions aligned with identified areas of malpractice risk. Priority will be given to proposals that are original; evidence-based; aimed at improving patient safety and reducing malpractice risk; designed for operational sustainability within the investigator's organization; and have potential to be spread to other CRICO member organizations.

### **Project Duration and Funding**

Support will be provided for no more than two years, with a total budget not to exceed \$200,000 per award. Applicants with proposals requiring greater than \$200,000 to meet the project's aims will need to demonstrate proof of supplemental funding.

### **Project Requirements**

Principal Investigators must agree to dedicate at least five percent annualized effort to approved projects during the grant cycle. All research is to be conducted at CRICO-member healthcare organizations, with written notification from these organizations acknowledging their support and approval.

### **Application Submission Process and Deadline**

As the first step in the process, applicants submit a formal Letter of Intent detailing their proposed project objectives and need for support. **Applications must be submitted via CRICO's online grants management system here: <https://www.grantinterface.com/Home/Login?urlkey=crico>**

Applications should be submitted by the Principal Investigator leading the project. Applicants that have not used CRICO's online grants management system must first register by clicking 'Create New Account' and following the prompts. Returning users do not need to register. To re-set a password, click 'Forgot your Password?' and follow the prompts. After logging into the system, click 'Apply' (top of screen) to view the 2022 Request for Applications opportunity.

For detailed instructions on how to register and begin the application process via this system, please go to: <https://docs.google.com/document/d/1jhTielsMEw161dCRYaEWpt-SZnup0ncse148VvcT5xc/edit>

Please reach out to CRICO Grants Administration ([grants@rmf.harvard.edu](mailto:grants@rmf.harvard.edu)) with any questions on use of this system.

**Applications are due no later than 5:00pm on September 15, 2021. CRICO cannot accept applications submitted after this deadline.**

## RFA Timeline

July 6, 2021	RFA announcement
<b>September 15, 2021 5:00 pm</b>	<b>Deadline for Letter of Intent submission; CRICO cannot accept applications submitted after this deadline</b>
On or about October 11, 2021	Invitations for full proposals
November 15, 2021	Deadline for full proposals
March 2022	Final proposals presented for Board approval
April 2022	Notice of Grant Awards

## Application Review Process

Submitted Letters of Intent (LOI) are reviewed internally by CRICO to determine alignment with CRICO's mission and RFA focus areas. Those deemed most congruent will be invited to submit a full proposal. All LOI and appendix materials initially submitted will then become part of the Principal Investigator's final grant application.

Institutional subject matter experts within each focus area will evaluate all full proposals. Proposals selected by this review committee will be submitted to the CRICO Board of Directors in March 2022 for funding consideration and approval.

## Preparing the Letter of Intent

The LOI must not exceed two pages (items **A-D** below) using 12-pt font, 1.5 line spacing, and 1-inch margins. Please include the following information in your submission:

### A. Specific malpractice/patient safety issue addressed:

1. Type of grant (*select one*):
  - Examine specific domains of malpractice risk and patient harm
  - Investigate strategic interventions
  - Disseminate proven solutions
2. Select one CRICO Focus Area (*see pgs 5-7 below for Focus Area details*)
3. Identify the target population
4. Evaluate the importance of the problem, risk, or critical barrier to patient care being investigated
5. Describe how the project is original and innovative

### B. Specific Aims

### C. Overview of Methodology

### D. Impact Statement:

1. What impact will these results have on mitigating malpractice risk and improving patient safety?
2. How will this project advance the department/institution or contribute broadly to the field of malpractice risk mitigation and patient safety?
3. How will this project affect how care is delivered by provider members?

## Required Letter of Intent Appendices

The following information must be included as an appendix to your LOI:

A. Detailed Budget of all proposed direct and indirect costs. **The CRICO budget template must be used.** Please provide and submit a separate, detailed budget for all subcontract or consortia costs (if applicable). *Please see the Budget Guidelines on pgs 8-9 below for detailed information.*

B. Budget Justification explaining all budget line-items including a brief description of any Significant Contributors, subcontractors, partnerships, or other project affiliations. *Please see the Budget Guidelines on pgs 8-9 below for detailed information.*

C. Curriculum Vitae (max. 5 pages each) or NIH Biosketch of PI and all other Key Personnel, including subcontractors.

D. Active Other Support of all Key Personnel including the project title, annual effort, award amount, and start-end dates.

E. Two Letters of Support

1. Please follow the instructions in CRICO's online grants management system to have your identified support individuals **submit their letters via this system**. The system will send each identified individual the general instructions as noted below.
2. **Note:** you will need to identify at least **two people** to submit Letters of Support. These letters must be from senior staff at the applicant Institution and any partner organization(s) listed in the LOI. The support letters must state that:
  - i. The organization supports the Principal Investigator's proposed project and request to obtain CRICO support.
  - ii. The organization(s) involved are fully capable of providing the necessary resources to undertake this proposed project plus any obligations that might exceed CRICO financial support, if awarded.
3. This letter must be written on the organization's letterhead, dated, and contain the following signatures:
  - i. Division/Department Chief or Chair
  - ii. Division/Department Chief or Chair of any collaborating departments or institutions whose efforts are critical to the success of this project or which the project has significant dependencies or is committing substantial resources during the conduct of this project.
4. Address letters to: CRICO Grants Review Committee

## Focus Areas

Applications must align with one of the following Focus Areas:

- Patient Assessment
- Management and Performance of Medical Treatment/Procedural Safety (*procedures performed outside of the Operating Room*)
- Emergency Medicine
- OB/GYN
- Surgery
- Data Analytics
- Emerging Health Care Delivery Models
- Employment Practice Liability
- Documentation

### ***Patient Assessment***

We are interested in proposals that address “clinical situations which present vulnerabilities to frontline clinicians and predispose them to diagnostic errors” (Reyes, 2016). Issues to be addressed include:

- Factors (system or individual) that contribute to a provider’s failure or inability to identify, address, or synthesize relevant clinical information—e.g., symptoms, history, physical findings, diagnostic tests, imaging results—leading to missed or delayed diagnosis. This category also includes failures or delays in ordering or interpreting diagnostic studies.
- Factors related to narrow diagnostic focus (includes reliance on previous assessment or diagnosis, atypical presentations, and inadequate patient assessment).
- Failure to rescue, defined as a clinician’s or provider’s delay in or lack of appropriate and timely response to a patient’s deteriorating clinical condition.
- Factors (system or individual) that contribute to a provider’s failure or inability to provide equitable patient care. The Institute of Medicine (IOM) defines health equity as “providing care that does not vary in quality because of personal characteristics such as gender, ethnicity, geographic location, and socioeconomic status.”

We are interested in applications that explore risks in Patient Assessment for the following clinical domains: *Emergency Medicine; Radiology; General and Internal Medicine; Medicine Subspecialties;* and *Advanced Practice Clinicians* (i.e. Physician Assistants and Nurse Practitioners).

***Management and Performance of Medical Treatment/Procedural Safety*** (procedures performed outside the operating room)

We are interested in proposals that address the management and performance of medical treatment (procedures performed outside the operating room) by Emergency Medicine, General and Internal Medicine, Interventional Radiology, Radiology, and Nursing. Issues to be addressed include:

- Ways to reduce the risk of improper technical performance of specific procedures or treatments, e.g., cardiac catheterization, endoscopy, and interventional radiology.
- Risks associated with improper management of a patient's medical treatment course before, during, or after a procedure, e.g., delays, failure or mismanagement of acute and/or chronic conditions, improper medication management, improper monitoring.
- Risks associated with a failure or inability to provide equitable patient care. The Institute of Medicine (IOM) defines health equity as "providing care that does not vary in quality because of personal characteristics such as gender, ethnicity, geographic location, and socioeconomic status."

**Emergency Medicine** - We are interested in proposals that address risks and challenges associated with patient throughput, capacity management (patient surge), clinical processes for the management of complex patients, and the clinical responsibilities and associated risks of Advanced Practice Clinicians (i.e. Physician Assistants and Nurse Practitioners). Priority will be given to proposals that establish collaborations between/among academic medical centers and community hospitals.

**OB/GYN**- We are interested in proposals that include the design, evaluation or dissemination of interventions aimed at addressing risks associated with the recognition and management of fetal distress, and the clinical responsibilities and associated risks of Advanced Practice Clinicians (i.e. Physician Assistants and Nurse Practitioners). Priority will be given to proposals that establish collaborations between/among academic medical centers and community hospitals.

**Surgery** - We are interested in proposals that address risks associated with, and potential interventions for, the technical performance of general, orthopedic, neuro, and plastic surgery. We are also interested in proposals that address risks associated with and the clinical responsibilities and associated risks of Advanced Practice Clinicians (i.e. Physician Assistants and Nurse Practitioners). Priority will be given to proposals that establish collaborations between/among academic medical centers and community hospitals.

**Emerging Health Care Delivery Models** - We are interested in proposals that examine and evaluate the application of innovative health care delivery models including the impact of telehealth and virtual visits.

**Data Analytics** - We are interested in proposals that investigate new and innovative ways to leverage internal malpractice data with external data sources such as administrative data, billing data, EHR data, clinical data repositories, and other referential data sets to identify leading indicators of safety and malpractice risk.

**Employment Practices Liability** - We are interested in proposals that investigate new and innovative ways to identify risk mitigation opportunities for Employment Practices Liability (EPL), which includes, but is not limited to, claims of discrimination, retaliation, and wrongful termination. Issues to be addressed may include ways to reduce EPL risk such as programs to:

- Implement processes to effectively receive, track, and respond to employee reports of EPL-related issues
- Develop, and communicate with stakeholders, meaningful reports regarding allegations of employee misconduct and/or effective response to such allegations
- Educate supervisors on employment matters (e.g. laws they must comply with, performance reviews, disability accommodation, support provided by the organization)

**Documentation** – We are interested in proposals that address risks associated with documentation, including insufficient or incomplete documentation, use of medical scribes, use of templates, use of voice recognition, impact of the 21st Century Cures Act’s prohibition of information blocking, and failure or inability to provide equitable patient care.

## Grant Budget Guidelines

Please include identifying project information on all budget materials, such as:

- Name of Principal Investigator
- Applicant institution
- Project title
- Start and end dates of project's budget period
- Total dollar amount requested
- Subcontractors (if applicable)

## Detailed Budget

The detailed budget **must be on the CRICO-provided spreadsheet** and list all direct and indirect costs associated with the proposed project for the entire project period, including a breakdown of these costs and how the total requested award amount was determined. Proposals that include modification to the budget template formulas will be declined and investigators will be asked to resubmit using an unmodified CRICO budget template. Please use appropriate budget categories as outlined in the example below (add more/less if necessary):

### Personnel

Base salaries of personnel may not exceed the [NIH salary cap](#) in effect at the time of application. Please list the following for each person involved in the proposed project (include paid and unpaid staff):

- Name
- Degree(s)
- Role on project
- Annual % Effort
- Annual Base Salary
- Institutional Fringe Rate
- Total Salary requested
- Total Fringe requested

### Travel

Travel by project staff that is directly related and beneficial to the project. Please detail expected costs per person, dates, location, the reason for the travel, and the research purpose as beneficial to the project.

### Purchased Services

Please detail all vendor costs, service agreements, and any consultant wages paid (including names, rates and number of hours services will be performed on the proposed project).

### Other Direct Costs / Resources

These non-personnel direct costs might include educational materials, teaching or office supplies, meeting necessities, etc.

### \*Indirect Costs

CRICO/RMF has established an indirect cost rate of 15%. The total award will include both direct and indirect costs *combined*. Please note: Subcontractors may collect up to 15% of their total direct costs but subcontract costs may not qualify as an additional direct cost for the applicant/prime institution.

## Budget Justification

On a separate page, describe how grant funds will be spent on each of the outlined budget categories. Please briefly describe here the role, demonstrated expertise, and qualifications of all people involved in the grant including effort levels to be contributed over the course of the project. Also provide a breakdown of how other cost items were determined as they pertain to the completion of specific aims and other project objectives.



## Grant Budget Restrictions

- Base Salaries may not exceed the [NIH Executive Level II Salary Cap](#) in effect at the time of the grant's commencement.
- Principal Investigators must commit minimum 5% annualized effort to the proposed project.
- All funding awarded includes Direct Costs plus 15% Indirect Costs combined. *\*See subcontract policy on pg 8.*
- CRICO/RMF grant funds may not be used to support the purchase of capital equipment, as defined by the [NIH](#).

## For More Information

If you have any questions regarding this announcement, please contact Jeff Timperi, Grants Manager, at [jtimperi@rmf.harvard.edu](mailto:jtimperi@rmf.harvard.edu) or 617.450.6887, or Fred Essieh, Grants Administrator, at [fessieh@rmf.harvard.edu](mailto:fessieh@rmf.harvard.edu) or 617.450.5527.

CRICO's Grants Administration may also be reached at [grants@rmf.harvard.edu](mailto:grants@rmf.harvard.edu)

## General Information Sessions

To assist prospective applicants, CRICO will conduct four general information sessions via Zoom (see details below). Attendance is optional and all sessions will provide the same materials.

DATE	TIME	TO REGISTER
7/21/21	11am*- 12noon	<p>Join Zoom Meeting  <a href="https://rmf-harvard-edu.zoom.us/j/97036438567?pwd=U041N2E4YnlzdzlyNHIUd3lCYU1lUT09">https://rmf-harvard-edu.zoom.us/j/97036438567?pwd=U041N2E4YnlzdzlyNHIUd3lCYU1lUT09</a></p> <p>Meeting ID: 970 3643 8567            Passcode: 68427243            One tap mobile            +19294362866,,97036438567#,,,,*68427243# US (New York)            +13126266799,,97036438567#,,,,*68427243# US (Chicago)</p> <p>Dial by your location            +1 929 436 2866 US (New York)            +1 312 626 6799 US (Chicago)            +1 301 715 8592 US (Washington DC)            +1 669 900 6833 US (San Jose)            +1 253 215 8782 US (Tacoma)            +1 346 248 7799 US (Houston)</p> <p>Find your local number: <a href="https://rmf-harvard-edu.zoom.us/u/avjhUQwd1">https://rmf-harvard-edu.zoom.us/u/avjhUQwd1</a></p>

8/11/21	11am*- 12noon	<p>Join Zoom Meeting  <a href="https://rmf-harvard-edu.zoom.us/j/95624900283?pwd=bllGQ1Zic3I2Wk5NNjVKdHNKOUhndz09">https://rmf-harvard-edu.zoom.us/j/95624900283?pwd=bllGQ1Zic3I2Wk5NNjVKdHNKOUhndz09</a></p> <p>Meeting ID: 956 2490 0283  Passcode: 58124846  One tap mobile  +19294362866,,95624900283#,,,,*58124846# US (New York)  +13126266799,,95624900283#,,,,*58124846# US (Chicago)</p> <p>Dial by your location (see above)  Find your local number: <a href="https://rmf-harvard-edu.zoom.us/u/ah2WIT8P7">https://rmf-harvard-edu.zoom.us/u/ah2WIT8P7</a></p>
8/25/21	11am*- 12noon	<p>Join Zoom Meeting  <a href="https://rmf-harvard-edu.zoom.us/j/94054639916?pwd=dENCv1V6UzFzHhobXIYaxNhUEJjUT09">https://rmf-harvard-edu.zoom.us/j/94054639916?pwd=dENCv1V6UzFzHhobXIYaxNhUEJjUT09</a></p> <p>Meeting ID: 940 5463 9916  Passcode: 96686804  One tap mobile  +19294362866,,94054639916#,,,,*96686804# US (New York)  +13017158592,,94054639916#,,,,*96686804# US (Washington DC)</p> <p>Dial by your location (see above)  Find your local number: <a href="https://rmf-harvard-edu.zoom.us/u/abjUTsJ3jc">https://rmf-harvard-edu.zoom.us/u/abjUTsJ3jc</a></p>
9/8/21	11am*- 12noon	<p>Join Zoom Meeting  <a href="https://rmf-harvard-edu.zoom.us/j/99625323938?pwd=SlFBMnJ6OUNnenhxZzMrUUhqK3dhUT09">https://rmf-harvard-edu.zoom.us/j/99625323938?pwd=SlFBMnJ6OUNnenhxZzMrUUhqK3dhUT09</a></p> <p>Meeting ID: 996 2532 3938  Passcode: 47671122  One tap mobile  +19294362866,,99625323938#,,,,*47671122# US (New York)  +13017158592,,99625323938#,,,,*47671122# US (Washington DC)</p> <p>Dial by your location (see above)  Find your local number: <a href="https://rmf-harvard-edu.zoom.us/u/a5W6W8mPg">https://rmf-harvard-edu.zoom.us/u/a5W6W8mPg</a></p>

\* To allow time to connect, it is recommended to log-in 10 minutes early