Purpose

The Office of Mental Health Promotion invites proposals from faculty-community teams, to pursue **new collaborations that aim to improve the mental health of community populations.** These proposals are intended to help us reach beyond current capabilities in serving patients, families and community members. The goal is to promote innovative, community-faculty engagement in ways that can strengthen intervention or service outcomes. For instance, a proposed innovation may be one aimed at improving effectiveness, accessibility or culturally competent care to address a community mental health objective mutually defined by community-academic partner leads.

The CPDA will provide development funds to a working group co-led by at least one faculty member of the Department of Psychiatry at the University of Rochester and one community member from outside of the University (e.g., superintendent, lawyer, social worker, religious or civic leader, etc.). The objective is to promote new research, intervention or service that addresses mutually defined community mental health needs. These community-partnered activities must have as their goal health promotion and recovery while preventing or treating illness.

The CPDA is designed to stimulate **new collaborative activities** that bring together Psychiatry faculty and community members from many disciplines, including but not limited to education, public policy, government, law, medicine, public health, psychology, arts and humanities. Health care providers are encouraged – but not required – to be members of the project team. This award **will not** support existing activities but can support innovative expansion (including research) of related services. A central element for review will be the inclusion of specific steps that lay out a plan to sustain the effort following the award.

Proposals that are focused on clinical program development must include an explanation of how the proposed activities will establish an infrastructure for future participatory research activities with communities, the nature of the research that will or has potential to result, and an evaluation plan to evaluate progress towards those ends.

Funds Available and Allowable Costs

Grant(s) up to $20,000 will cover project-specific expenses such as meeting and consultant costs, salaries (e.g., for faculty, staff or assistants), training, appropriate equipment, travel, or items necessary for the successful completion of the proposed activities. The number and size of grants awarded in this review cycle will depend on available resources. Applications will be considered once this year, and if the review committee determines an application merits funding as is proposed – it will be awarded upon notification.

This mechanism does not cover any capital equipment or any institutional indirect costs. These grant funds are not expected to cover the total cost of the proposed project. Such items as secretarial support and space must be negotiated by the principal investigators with their program head(s).

Budgets must be a realistic estimate of the funds required for the proposed project. The investigators may make minor alterations within the approved budget toward successful completion of the project’s aims. As the purpose of this award is to foster collaborative efforts with the community that intervene to help address pressing mental health needs and to promote health – the proposed budget should reflect this goal (e.g., detail equitable sharing of resources, as evidenced by in-kind contributions and cost-sharing if applicable, how community members will be compensated, etc.).

If a request for support of similar aims is simultaneously submitted to an external granting agency, proposals should reflect this
and the investigators should have the understanding that if funding is granted by the alternative source, the application for department funds should be withdrawn or unspent money should be returned. Where the proposed project requires supplementation with funds or services from another source, the application must specify the facilities and services to be utilized and the sources of their funding.

**How to Apply**

**Announcement:** November 25, 2013

**Letters of Intent:** February 3, 2014

**Applications:** March 24, 2014

**Implementation Start Date:** Before June 1, 2014

Note: If needed, this start date can be adjusted for Awardees who plan to reduce their clinical or other efforts to arrange coverage in conjunction with their service chiefs, supervisors and mentors.
Consistent with the PHS 398 application instructions for NIH grants (see http://grants2.nih.gov/grants/funding/phs398/phs398.html), each application should include a:

1. **Face page** (see attached).
2. **Project Abstract** (see p. 2 of the fillable individual PHS 398 forms)
3. **Budget** specifying direct costs for personnel, equipment and supplies, travel and other expenses (see p. 4 of the PHS 398 fillable forms). Please attach a budget justification for each item and also outline additional resources obtained or sought for this effort (e.g., other funding sought, in-kind contributions, etc.). Costs for community partners are to be administered as a subcontract.
4. **Biosketches** of both project PIs are required, along with biosketches of other major collaborators (see PHS 398 fillable forms).
5. **Letter of Support** from the community-based organization co-leading the application is required. In addition to the letters of support needed to demonstrate the feasibility of the study, any junior faculty or faculty members who will be the Primary Investigator on this proposal and are new to research careers, must also include a letter from the mentor that describes his/her role.
6. **Project Plan** – detailing these sections (A-H not to exceed 10 pages, appendices are allowed):
   A. Specific Aims – include overall goals as well as specific aims, detail anticipated outcomes (ideally at a level that can be operationalized) in terms of the community impact sought from the intervention or clinical innovations.
   B. Background and Significance – include community-defined needs and research context.
   C. Activities Planned - detail how objectives are to be obtained, the anticipated reach into target populations, project timelines, and resulting products or deliverables.
   D. List of Project Personnel and Community Collaborators – also include a description of the partnership interactions planned to ensure equitable participation in the leadership of this project, and how the partnership development will be monitored and evaluated.
   E. Preliminary Studies (if applicable)
   F. Research Design and Methods (if applicable)
   G. Evaluation – Method to be used to measure quantifiable short and long term outcomes, including partnership progress.
   H. Advance Planning – describe a plan for (1) sustaining or developing the initiative in the future (e.g., how this award may facilitate an extramural grant application noting possible mechanisms), and (2) how these activities establish infrastructure for future research, including community-based participatory research.
I. Human Subjects (if applicable) – e.g., indicate results or status of human subjects review.
J. Literature Cited

Proposals should emphasize:
(a) The collaborative, interdisciplinary nature of the work with community members, the processes and products of equitable community participation in the design and implementation of this proposal, the merit and significance of the proposed intervention or service innovation, feasibility, and how planned activities break new ground in addressing issues of relevance to community members.
(b) How the project complements the strategic priorities of the faculty member’s academic development plan and the strategic priorities and mission of the community (or organization co-leading the effort).
(c) The team’s history of joint activity – examples include, but are not limited to, the prior conduct of planning activities, feasibility or pilot testing, preliminary research, education, etc.

Please submit the original and three hard-copies of the cover page and all application documents by 4 pm on March 24, 2014.

Applications and requests for further information can be directed to:
Ann Marie White, Ed.D
Office of Mental Health Promotion
University of Rochester Medical Center
300 Crittenden Blvd, Box PSYCH
Rochester, NY 14642-8409
Eligibility

All full-time faculty in Psychiatry are eligible PIs. Note: Advanced trainees (post-docs, residents, etc.) may be eligible - but will first need to indicate the likelihood of their or the Department’s long-term involvement. Faculty members with primary appointments outside of Psychiatry may also be eligible if the proposed effort is primarily affiliated with Psychiatry and relates to mental health concerns. Senior staff members in Psychiatry who have terminal degrees in their field (e.g., PhD in Nursing) may also be eligible but must demonstrate how the project can lead to research (e.g., list a researcher as key personnel, etc.).

Community-based PIs can be community members, persons affected by condition/issue under study and other key stakeholders in a community's health, including community-based health practitioners. Any professional with a primary academic appointment with URMC or another academic institution such as an academic medical center is excluded. Communities need not be exclusive to Monroe County, but can involve other geographic regions.

Application Review

An ad-hoc committee, led by the Director of the Office of Mental Health Promotion, will review applications. Reviewers will include faculty members in URMC and community members engaged with URMC. Reviewers with a potential conflict of interest will not submit a written review of that application, but may participate in the discussion.

Applications will be judged on the following criteria: responsiveness, significance (e.g., potential community impact), approach, innovation, investigators, environment, evaluation, and sustainability. If the application involves research, the protection of human subjects from research risk will be considered.

Terms of Award

Grants may be sought for up to eighteen months and are not renewable. Funding will begin immediately after the award is announced (within 6-8 weeks of receipt date). Proposed activities should be completed within the proposed dates, however, the termination date may be extended for up to one year without additional funds upon written request from both principal investigators prior to the expiration of the grant.

While teams who already have been granted an award may submit another distinct application, preference will be given to others who have not yet received this award.

Any equipment purchased will be considered the property of the Department.

While the faculty co-PI will oversee the award, costs to community organizations can be administered as a subcontract.

Transfer

Grants may not be transferred from the Department to any other institution.

Financial Records and Reports

Documentation of expenses should be available from the principal investigators for audit at any time. The Department is not responsible for the over-expenditure of grant funds, for commitments against a grant not paid within sixty days after termination, or for expenditures made before the starting date of a grant, other than through specific prior arrangements.

Within three months of the grant’s termination, the investigators must submit to the Office of Mental Health Promotion a brief summary report (three page maximum) detailing the group’s activities, participants, products (e.g., presentations, results pending, etc.), evaluation findings, and implications of the effort (e.g., faculty’s future academic development, additional support to be sought, etc.).

Additional Resources

CCPH’s Principles of Good Community-Campus Partnerships and additional resources for partnership development can be found at [http://depts.washington.edu/ccph/principles.html](http://depts.washington.edu/ccph/principles.html)

**Definitions**

**Equitable** – Fitting of the resources currently available to each partner, the resources that will come available if awarded this grant, and of the role expectations each partner desires in leading this project from design to completion.

**Gatekeepers** – People who live and work in the community, who in the course of their daily activities come into frequent contact with others and are in a position to recognize early changes in the behavior of local residents that might indicate the beginnings of mental or emotional distress.

**Participatory intervention** research uses structured strategies for changing individual and group practice to improve quality of life on both individual and community levels (Potvin et al., 2003; Schultz et al., 2002). PIR methodology is developed and disseminated through collaborations between community organizations, individual research participants and formally trained researchers. Community organizations and individual research participants have a stake both in the research design and in the knowledge achieved. PIR also includes a focus on educating important publics about the nature of the research process and outcomes.
Grant Application Cover Page

URMC Department of Psychiatry’s Office of Mental Health Promotion
Community Partnership Development Award

Deadline: March 24, 2014

Project Title: _______________________________________________

________________________________________________________________

Co-Principle Investigators/Co-Leaders (required)

Community-Based Organization (or Community Representative) Project Leader

Name: 
Organization: 
Address: 
Phone: 
Email: 

Signature ___________________________ Date __________

Psychiatry Faculty (or Faculty working in Psychiatry) Project Leader

Name: 
Organization: 
Address: 
Phone: 
Email: 

Signature ___________________________ Date __________

For Office use only:

Reviewer 1: 
Reviewer 2: 

1 Multiple community PIs may be added – however, a leadership plan must then be submitted. For more information on leadership plans, see http://grants1.nih.gov/grants/multi_pi/sample_leadership_plans.pdf