Title: **STTI/Virginia Henderson Clinical Research Grant**  
**Sponsor:** Sigma Theta Tau International  
**Abstract:** Allocation of funds is based on a research project ready for implementation, the quality of the proposed research, the future potential of the applicant, appropriateness of the research budget and feasibility of the time frame. Funds for this biennial grant are provided by interest from the Virginia Henderson Clinical Research Endowment Fund. *Funds for this grant do not cover expenses incurred prior to the funding date.*  
**Deadline:** December 1, 2017

Title: **Research Funding**  
**Sponsor:** Sigma Theta Tau International  
**Abstract:** Allocation of funds is based on the quality of the proposed research, the future promise of the applicant, and the applicant's research budget. Applications from novice researchers who have received no other national research funds are encouraged and will receive preference for funding, other aspects being equal. Preference will be given to Sigma Theta Tau members, other qualifications being equal. Annual funding is provided by Sigma Theta Tau International Foundation for Nursing. *Funds for this grant do not cover expenses incurred prior to the funding date.*  
**Deadline:** December 1, 2017

Title: **STTI/American Association of Critical-Care Nursing Grant**  
**Sponsor:** Sigma Theta Tau International  
**Abstract:** The Sigma Theta Tau International/American Association of Critical-Care Nursing (AACN) provides this grant to encourage qualified nurses to contribute to the advancement of nursing through critical care nursing practice research.  
**Deadline:** November 1, 2017

Title: **CHRB Grant Process**  
**Sponsor:** Commonwealth Health Research Board  
**Abstract:** The Commonwealth Health Research Board [CHRB or Board] was created by Virginia Code §32.1-162.23 to provide financial support—in the form of grants, donations, or other assistance—for research efforts having the potential of maximizing human health benefits for the citizens of the Commonwealth. Research efforts eligible for support by the Board shall include traditional medical and biomedical research relating to the causes and cures of diseases, as well as research related to health services and the delivery of health care. Since its inception, the CHRB has made 202 grant awards totaling almost $16.5 million in grant funding to institutions of higher education and other Virginia nonprofit organizations that conduct health, or health-related research in Virginia. CHRB grant recipients have leveraged approximately $32 million in additional private and federal grant funds to further their research studies. Our website at [www.chrb.org](http://www.chrb.org) provides more detail on current and past CHRB Grant Awards.  
**Deadline:** Concept Paper September 14, 2017 at 4:00 p.m.; Full Proposal: Invitation Only
Title: Archiving and Documenting Child Health and Human Development Data Sets (R03)

Sponsor: NIH

Abstract: The purpose of this funding opportunity announcement (FOA) is to invite R03 applications to support archiving and documenting existing data sets in order to enable secondary analysis of these data by the scientific community. The priority of this program is to archive data sets within the scientific mission of the NICHD; highest priority is to archive data collected with NICHD support.


Title: Small Grants for Secondary Analyses of Existing Data Sets and Stored Biospecimens (R03)

Sponsor: NIH

Abstract: This Funding Opportunity Announcement (FOA) encourages applications that propose to conduct secondary analyses of publicly available NICHD-funded data sets or stored biospecimens. The goal of this program is to facilitate innovative yet cost-effective research utilizing data and biospecimens collected with NICHD resources.

This initiative will support secondary analyses of NICHD-supported data as well as data that can advance the scientific priorities of NICHD extramural branches, including but not limited to:
- Physiological factors affecting change (e.g., endocrine, musculoskeletal health, reproductive health, intellectual function, and behaviors) at different points in the life span, including factors contributing to health and healthy development across the life course;
- Determinants, including genetic determinants, of health, human development, disability, and disease in conditions of interest to the NICHD;
- How positive and negative risk factors for health, health behaviors, and healthy development differ by age;
- How positive and negative risk factors differ for health and developmental outcomes differ across stages of disease or condition progression, and/or in the presence or absence of co-existing conditions;
- Early exposures and conditions, including those experienced prenatally and/or by prior generations, that influence health, development, or risk of disease and injury in later life, including later in childhood, adolescence, and young adulthood;
- Long-term effects of interventions aimed at addressing conditions related to health, development, disability, or injury, including both the long-term effects on the targeted condition itself and other health-related outcomes;
- Health effects, direct and/or indirect, resulting from exposure to a traumatic event or chronic and persistent exposure to trauma;
- How alternative treatment regimens or health care management strategies influence the effectiveness and safety of treatment;
- How the effects of interventions in clinical trials differ by age, race, gender, disability, or other factors;
- Exploratory analysis, including assays on stored biospecimens, to explore effects of interventions on additional outcomes;
- Analysis and meta-analysis of existing data sets to inform designs of future clinical trials (e.g., to determine prevalence of a disease or condition, or a combination of conditions in a population of interest; to estimate effects size of an intervention and duration of treatment in a population of interest, etc.);
- Analysis or meta-analysis of existing data sets to explore opportunities for and determine the need for comparative effectiveness clinical trials in a topic area;
- Methodology development: Single or multiple data sets may be used to develop and test new analytic approaches for any of the above topics;
- Natural history studies of rare or common disorders or conditions that may inform stratification of cohorts for biomarker discovery or development of treatments or interventions;
- Identifying biomarkers of disease or injury progression, functional impairment, treatment response, and functional recovery;
- Environmental factors that support or challenge health maintenance and/or recovery following injury or illness;
- Analyses defining outcomes related to disability or injury effective at different time points after onset;
- Pharmacokinetics analysis of existing data sets that will help improve pharmacotherapy for neonatal and pediatric populations;
- Genotyping utilizing existing samples to assist in pediatric personalized medicine;
- Genotype-phenotype correlations based on existing data and samples to assist setting up primary outcomes for pediatric clinical trials;
- Analysis of maternal blood or imaging data to establish differences between normal versus pathological placental development and/or function across pregnancy.

Applicants are encouraged to contact NICHD Scientific/Research staff in their scientific area prior to submission.

Title: Advancing the Science of Geriatric Palliative Care (R03)
Sponsor: NIH
Abstract: This Funding Opportunity Announcement (FOA) encourages research grant applications focused on palliative care in geriatric populations. This R03 announcement specifically encourages projects primarily aimed at collection of pilot data, demonstration of feasibility, development of new methodology, or other goals of limited scope requiring short-term support. This FOA emphasizes studies in a variety of settings including ambulatory care, hospitals (and specific sites within hospitals including specialty wards, intensive care units and emergency departments), assisted living facilities, and short- and long-term care facilities; however, hospice and end-of-life settings are not included within the scope of this FOA, as they are the subject of other NIH programs. Rather, this FOA highlights research on palliative care in settings and at time points earlier in geriatric patients' disease or disability trajectories. Types of studies may include observational, quasi-experimental, or pilot interventional studies using primary data collection and/or secondary analyses. Leveraging on-going cohorts, intervention studies, networks, data and specimen repositories, and other existing resources and infrastructure are encouraged.
Deadline: October 16, 2017

Title: HPA
Sponsor: American Physical Therapy Association
Abstract: The purpose of the Section Health Policy and Administration Grant Program is to stimulate, encourage and support research activities that enhance the body of knowledge related to health policy, clinical administration, global health, and the use of technology in physical therapy. The grants provide funding to assist new physical therapist investigators, or established investigators who are embarking on a new research agenda in these areas of physical therapist practice, leadership, administration, or education. Through this grant program, the Section hopes to encourage the development of proposals that will seek financial support from external agencies.

1-2 research grant awards of up to $15,000 are available to Section members to assist with a 1-year research study that investigates a question or questions of importance to health policy or clinical administration. Grants may be renewable (no-cost extension) for up to 1 year.
Deadline: December 31, 2017
Title: Board Grants
Sponsor: Josiah Macy Foundation, Jr.
Abstract: Board grants are selected three times each year at the foundation’s board meetings. The foundation is dedicated to improving the health of the public by advancing the education and training of health professionals. The foundation’s grantmaking is focused primarily in five priority areas. 1. Projects that demonstrate or encourage interprofessional education and teamwork among health care professionals. We have strong evidence that health care delivered by well-functioning teams leads to better outcomes, but we still educate our health professionals in silos. We need more planned and rigorous interprofessional education. 2. Projects that provide new curriculum content for health professional education, including patient safety, quality improvement, systems performance and professionalism. We do a very good job of teaching the biologic and physical sciences as the basis for the practice of medicine, but we have not done as well incorporating other content such as patient safety, quality improvement and population health in our teaching. We need to broaden and integrate our curriculum across the educational continuum. 3. Projects that develop new models for clinical education, including graduate medical education reform. The management of chronic diseases over time, primarily in outpatient or community-based settings, is the predominant work of health care professionals today, but clinical education is still largely focused on episodic care and is predominately hospital-based. We need new sites and longitudinal models for clinical education and training. 4. Projects that improve education for the care of underserved populations, with an emphasis on primary care. In developing the next generation of national leaders in health professions education, creative faculty members devoted to educational reform must be nurtured. In addition, while we have made progress, we need to diversify the health professions if we are to achieve our goal of uniform excellence in health care. 5. Projects that increase faculty skills in health professions education with a special emphasis on the career development of underrepresented minorities. A large number of people enter the health professions each year, but an insufficient number of health professionals choose to serve in rural and inner-city areas and some of the most vulnerable people in society - racial and ethnic minorities, elderly people, low-income patients and others - are not receiving the care they need. We need to provide training and incentives that support and promote care that meets the needs of these underserved populations.
Due Date: Letter of Inquiry – Continuous

Title: Grants
Sponsor: John A. Hartford Foundation
Abstract: Under a strategic plan adopted in 2012, the Foundation will make grants and initiate programs that will put geriatrics expertise to work in all health care settings by:
- advancing practice change and innovation;
- supporting team-based care through interdisciplinary education of all health care providers;
- supporting policies and regulations that promote better care; and
- developing and disseminating new evidence-based models that deliver better, more cost-effective health care.

The Foundation will organize its grantmaking under five strategy areas:
- Interprofessional Leadership in Action
- Linking Education and Practice
- Developing and Disseminating Models of Care
- Tools and Measures for Quality Care
- Communications/ Policy

Criteria for each strategy area are still under development. Overall criteria for funding include:
- Focus on the older adult population and inclusion of geriatrics expertise;
- Potential for national scale and impact; and
- Potential for leveraging other initiatives and funding sources.

Current funds and strategies are:
1. Medical Education:
A cornerstone of the Foundation’s medicine programming is the Centers of Excellence in Geriatric Medicine and Training initiative, created to address the critical shortage of geriatric faculty members in the nation’s medical schools. The Foundation has also supported the development of core competencies that physicians in training should hold in order to provide safe, quality care to older adults. As the nation’s health care system changes and the population ages, more remains to be accomplished to raise the quality of care that physicians, as part of multiprofessional teams, provide to older adults, particularly those experiencing multiple chronic conditions, cognitive impairment, frailty, and other complex health needs.

2. Nursing Education:
The main goal of the grants has been to ensure all nurses have the competence and skills to provide quality care to older Americans. Therefore, nursing grants have historically focused on two main strategies: growing the gerontology expert nursing faculty and infusing aging into the nursing curriculum.

3. Social Work Education:
While the need for social workers trained in geriatrics is escalating, not enough social workers choose this career path. The aim of the initiative is to increase the competence of social workers to improve the care and well-being of older adults and their families. To accomplish this, the initiative employs innovative strategies aimed at educating all social workers in aging issues, recruiting more social work students to specialize in geriatrics, and supporting academic social workers who conduct research and teach.

4. Integrating & Improving Services
Through these grants the foundation aims to transform the care of older adults while measuring the impact on health and healthcare spending. Services grants can be categorized as either developing & testing new models of
care, or dissemination grants, which move proven innovations into practice. The Foundation is also deeply committed to the development of aging-focused leaders who are both prepared and positioned to effectively drive change in health care delivery.

5. Other Grants in Aging & Health:
The foundation recognizes that a few cross cutting grantmaking approaches offer additional leverage in pursuit of its objectives. Communications and education of policymakers creates an environment that facilitates the foundation's work and raises awareness of the importance of Aging in America. In addition, when natural or man-made disaster strikes, the Foundation has used this category as a vehicle for its response. Accordingly, a small proportion of the foundation's grant dollars is allocated to this category.

**Deadline: Letter of Inquiry**