CCS Collaborative Innovation Pilot Award
Request for Applications

This award is being announced to foster innovative, high-impact research combining expertise in cancer control and survivorship research with basic science, clinical science, or community partnership components in projects with relevance to cancer control and survivorship. Cancer control and survivorship research seeks to reduce the burden of cancer and improve cancer outcomes from the time of diagnosis to long-term survivorship or end of life. For example, it may involve:

- Understanding and reducing cancer disparities
- Increasing adherence to treatments
- Clarifying biological, cognitive, and psychological mechanisms of effective interventions or treatments
- Facilitating communication about cancer care
- Understanding and/or improving decision making in patients and clinicians
- Improving symptom management in people affected by cancer.

Other topics are possible. Our overarching goal is to build inter-disciplinary and community collaborations and increase translational research to our clinics and communities. This award is intended to enable collection of preliminary or pilot data needed to obtain R01 or equivalent extramural funding for a definitive study. Funding for this award is provided by the Robert H. Lurie Comprehensive Cancer Center (RHLCCC). Applicant teams will be expected to design and execute a project targeting a specific cancer type or addressing a gap in existing research.

**Terms of the Award.** Each award will consist of up to $25,000 for projects of up to 12 months. Applications will be due by 5:00 pm, September 15, 2023, and will have an expected start date of November 1, 2023. Funds should be expended within 18 months of this start date. A report summarizing financial expenditures and a brief summary of the scientific outcome of the project is required two months after the end of funding. When requested, all awardees will be expected to provide updates of publications and long-term grant support or other accomplishments that originated from the award.

**Eligibility**
- The proposal must include a research plan representing a collaboration between a CCS researcher and at least one researcher from one of the RHLCCC basic or clinical research programs and/or a community partner from the RHLCCC catchment area. Other investigators may also be part of the team. Project leadership (principal investigators) must include an investigator from the CCS program and at least one member of an RHLCCC basic or clinical science program.
- The proposal should have a clear plan for submission of an R01 or equivalent grant application in the short term as well as a plan to produce a collaborative paper for peer review (e.g., a report of pilot study results, a review paper, etc.).
- The research project should have the potential for translation (e.g., to benefit the RHLCCC clinical practices and/or its catchment area).
• Use of an RHLCCC core resource is strongly recommended. We can help teams apply for vouchers of up to $5,000 to cover the costs of core usage.

**Application instructions.** Applications are limited to three pages including scientific rationale, specific aims and hypotheses, significance/impact, innovation, approach, plans for collaboration, milestones, and plans for submission of an R01 or equivalent grant application and a peer reviewed publication. Investigators funded though this mechanism are required to submit a progress report at the end of the funding period and, when requested, to provide updates of publications and long-term grant support or other accomplishments that originated from the award.

**Criteria**
Proposals will be judged by the following criteria:
• Scientific merit;
• Relevance to award criteria;
• Qualifications, experience, and productivity of the applicants;
• Project feasibility given facilities, budget, time, and other resources available; and
• Potential for future external funding and publications. Priority will be given to projects that can have a publication ready for submission by June, 2024.

**Restrictions**
A. Projects must be completed in 12 months or less. Applicants may apply for change in start/end dates. No cost extensions must be formally requested and approved.

B. Funds may be budgeted for any standard grant application categories and for purposes deemed necessary for the successful execution of the proposed project. Costs are limited to those directly related to the research proposed; overhead/indirects are not allowed.

The following additional restrictions apply:
• Faculty salary: Requests for salary support of faculty as principal investigators or co-investigators are not allowed. Requests for non-tenure track faculty who direct labs or projects and requests for consulting biostatistics faculty support (for data analysis) can be considered; however, requests for this kind of support should be appropriate for the level of effort required. Salary, tuition, and other funds for non-faculty named on the budget are allowed in amounts appropriate for the level of effort.

• Travel: Requests for travel support should be limited to funds directly related to project performance.

• Equipment: Requests for equipment should be limited to items directly related to project performance. For example, a laptop for a research assistant to use in clinic to collect data would be appropriate.

Unused funds will revert to the supporting funding source. All proposed expenses must conform to the general policies of the University. Projects that use the RHLCCC core resources are encouraged to consult with those cores prior to submission.

Applications accompanied by biosketches of investigators should be submitted to Cassie Bloodgood – cassie.bloodgood@northwestern.edu