

Terms of Reference for CIORA Grants

Revised July 2011

Goals:

1. To support research initiatives related to Inflammatory Arthritis in one or more of these 3 categories:
 - a. Awareness/Advocacy/Education
 - b. Early Access for Inflammatory Arthritis Patients
 - c. Multi-Disciplinary Care Teams
(See following pages for more detail)
2. To establish Inflammatory Arthritis as important disease in Canada.

Scope:

CIORA has established funds for the conduct and evaluation of endeavors in Canada for Inflammatory Arthritis. The stipend attached to the grant will depend on the merit and budget of the project. Grant funding is awarded for one year only to a maximum of \$60,000 per grant cycle. Recipients of grant funding may reapply annually for additional funding. All grants are peer reviewed and grants are awarded based on the recommendation of the CIORA Steering Committee and dependent on available funds. A member of the CRA (in good standing) must be the PI or co-PI for submitted grants.

Structure:

The grant application deadline is midnight on **October 18th, 2011**.
Awarded grants will be announced in late **December 2011**.

CIORA reserves the right to approve or decline awards without explanation or justification.

The grant application must be no more than 3000 words including references and appendices (excluding cover page and CVs).

Components of the grant proposal:

1. Research Question [Note – this question should yield a numerical/statistical result and thus lead to a clear conclusion.]
2. Lay Summary
3. Scientific Abstract (maximum 500 words)

4. Proposed project
5. Background
6. Methods [Note – there must be measurable outcomes (it must be clear what the measures of success or failure are) and an analysis plan (describe in detail what data will be obtained and how the data will be analyzed/evaluated)]
7. Expected Results
8. Limitations
9. Feasibility (including a detailed budget) [Note: CIORA provides one-year funding only. If you are submitting a proposal that is part of a multi-year project, the submitted proposal should represent a meaningful/fundable one year component. Applicants can reapply for funding for subsequent project phases; the application should describe the probability of this project to secure additional funding if required and have a sustainable impact.]
10. Timeline
11. Description of how this project leverages other funding (if applicable). [Note if the proposal submitted is part of a larger project that has received prior CIORA funding or funding from another source, be clear about how the two (or more) sources of funding fund different aspects of the project (i.e. do NOT overlap). Please include a declaration of any other sources of funding, if the applicant or co-investigators have applied for or received other funding].]
12. Budget – detailing the total funds required for the endeavour and the amount requested from CIORA. Upload one budget per grant in either word or excel format. Budgets must be well-justified and for a maximum of one year of funding only.
13. References
14. CVs - An abbreviated CV from all applicants (maximum 6 pages for each applicant), which should include the applicant's credentials, all awarded grant funding and publications (total and those over the last 5 years).
15. Acknowledgement of participation of all Investigators – the PI/application submitter must answer the question that confirms that all investigators are aware of the application and agree to be an applicant or co-applicant on the CIORA grant as submitted.

Terms of Reference:

All proposed projects must be conducted in Canada. The principal applicant or co-applicant **must be a rheumatologist practicing in Canada and a member of the CRA**. Preference will be given to applications from areas of greatest need.

Criteria for Judging:

The research project will be reviewed by the CIORA Review and Steering Committees and must be pertinent to IA in one of the three categories outlined below. If the proposed project is outside the scope of the declared categories it will not be considered. The applicant or co-applicants will not be involved in the peer review process. Priority may be given to grants that can leverage additional funding.

Sustainability:

The objective is to ensure that all projects are sustainable. For example, a hospital might provide space, time from Allied Health Professional; a local charity might join as a partner. Letters confirming support are highly recommended.

Accountability:

A one-page progress report must be submitted to the CIORA Steering Committee 18 months after the grant is awarded. The form will be provided to successful applicants prior to the due date. This progress report should clearly state the outcomes achieved to date. 10% of the approved Grant will be withheld until the progress report is submitted and approved as sufficient.

Grant Maximum:

The limit of the grant will be **\$60,000**. *As this is a peer reviewed grant from CIORA, no institutional overhead will be paid.*

Acknowledgement:

All presentations and publications made possible by this grant must acknowledge CIORA funding.

Specific Terms of Reference for Each Category:

a. Awareness/Advocacy/Education:

Awareness: Proposals should build awareness and understanding for Inflammatory Arthritis similar to other chronic disorders such as cancer, diabetes and multiple sclerosis.

Advocacy: Proposals should impact government policy to ensure support for IA initiatives.

Education: Proposals should involve the development of educational tools and curriculum for medical schools, education of allied health professionals, co-

management educational strategies for other physicians / health care professionals for rheumatology patients, education of patients with inflammatory arthritis and or education for rheumatologists to do any of: 1) improve knowledge and or care in Inflammatory Arthritis; 2) attract more physicians to the specialty of Rheumatology, 3) develop co-management tools / strategies, and 4) develop patient education programs for Inflammatory Arthritis.

Possible Outcomes:

More appropriate referrals to Rheumatologists, increased number of patients diagnosed with Inflammatory Arthritis, improved care for patients with inflammatory arthritis, increase the number of Rheumatologists, better understanding by patients, the public and government.

b. Early Access for Inflammatory Arthritis Patients:

Develop early access programs for people with Inflammatory Arthritis across Canada. Preference will be given to areas of greatest need.

Possible Outcomes:

More patients will be diagnosed with Inflammatory Arthritis at an early stage as compared with regions where the pilot programs are not in place.

c. Multi-Disciplinary Care Teams:

Establish the multi-disciplinary approach to the treatment of Inflammatory Arthritis in Rheumatology practices across Canada. There must be a physician committed to the team with an interest in Rheumatology (Physician Champion).

Possible Outcomes:

This approach should result in timely treatment and regular patient follow-up by enlisting the involvement of supportive health professionals. Better care of patients with Inflammatory Arthritis should be demonstrated.

Proposals must contain the following:

Also, there must be a combination of a minimum of two disciplines from the following list as part of a core multi-disciplinary team. Preference will be given to therapist(s) with post-graduate training in Rheumatology:

- Occupational therapist
- Physical therapist
- Registered nurse, nurse practitioner
- Pharmacist

- Social Worker
- Kinesiologist
- Psychologist
- Dietician

For the above, there should be an Administrative Champion to facilitate Program development and outcome monitoring and responsiveness to the Committee.

The measurements and outcomes identified must be explicitly stated and a timetable of milestones committed to.

If you have any questions or require further information, please contact

**Christine Charnock
Manager
Canadian Rheumatology Association
905-952-0698
cra@rogers.com**