

# TriService Nursing Research Program: Implementation of Innovation Evidence-Based Practice Award Program Announcement

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## I. How to Use This Document

This Program Announcement document contains specific information and instructions for the TriService Nursing Research Program (TSNRP) Implementation of Innovation Evidence-Based Practice (EBP) Award. General information and instructions for all grants are located in the Application Instructions. Follow both the instructions contained in this document as well as those in the Application Instructions when preparing and submitting your grant application.

## II. Overview of the Implementation of Innovation EBP Award

### Purpose

The purpose of the Implementation of Innovation EBP Award is to support the implementation and evaluation of one or more evidence-based clinical practice guidelines (CPGs) to help clinicians make important decisions to improve clinical outcomes, standardize patient care, and promote cost-effective care.

### Award Amount

You may request funding up to \$75,000 per year in direct costs, plus indirect costs as appropriate, for up to a two-year performance period. The maximum award is \$150,000 in direct costs.

## III. Eligibility

Active duty military nurses stationed at a military medical facility are eligible to apply for an Implementation of Innovation EBP Award.

## IV. Special Requirements

### Mentoring


If you previously have not received an Implementation of Innovation EBP Award from TSNRP, you must have a **mentor** and a **mentoring plan** for your EBP project. The mentor must be an

active duty, Reserve, National Guard, retired military, or Federal government nurse with a doctoral degree who is assigned to a military medical facility. TSNRP promotes mentoring as a way to achieve its goal of expanding the cadre of military nurse scientists.

A mentor is an experienced EBP and subject matter expert who supports, guides, and assists a novice awardee. Your mentor must be a member of your EBP project team and be available to support you in accordance with your mentoring plan.

Include your mentoring plan in your grant application. This plan must:

- Identify the expected knowledge transfer from your mentor to you.
- Clearly explain the means and frequency of contact between you and your mentor.
- Describe your mentor’s plan to evaluate your progress.



Include your mentor’s evaluation of your EBP project in each [progress report](#) that you submit to TSNRP after receiving your grant award.

## V. Timeline

TSNRP accepts grant applications twice each year. You may choose to submit your grant application during Funding Cycle A or Funding Cycle B. Refer to the table for deadlines and time frames for review and funding decisions.

	Funding Cycle A	Funding Cycle B
Letter of Intent Submission Deadline	2 August 2011	7 December 2011
Grant Application Submission Deadline	4 October 2011	7 February 2012
Scientific Merit Review	December 2011	March 2012
Programmatic Review	January 2012	April 2012
Funding Decision	February 2012	May 2012
Notification of Funding	March 2012	June 2012

If you have not attended a [TSNRP-sponsored EBP Course or EBP Grant Camp](#) previously, TSNRP encourages you to attend before submitting your grant application. These courses are designed to help the novice applicant create a scientifically sound EBP grant application.

## VI. Required Forms and Documents

Include each of the following forms and documents in your grant application. Instructions for completing the forms and other required parts of your grant application are included in [Section VII](#) of this Program Announcement.

## Cover Letter from Applicant Organization

Obtain a signed cover letter from the Applicant Organization of your choice and attach it to the original copy of your grant application. This letter should be on the Applicant Organization's letterhead and should include:

- The title of your proposed project.
- The TSNRP Call for Proposals year, written as “FY201x” (where x denotes the last digit of the year).
- Your complete contact information.
- The name and contact information of your Applicant Organization.



See Section V of the Application Instructions for more information on Applicant Organizations.

## TSNRP Grant Application Cover Packet

Include the TSNRP Grant Application Cover Packet at the beginning of each copy of your grant application. Download this form from the TSNRP [Forms](#) page.

### Relevance to Military Nursing Form

The last page of the TSNRP Grant Application Cover Packet is the Relevance to Military Nursing Form. Each copy of your grant application should include this form as well.

### Table of Contents

This Table of Contents is unique to the TSNRP EBP awards. Download it from the TSNRP [Forms](#) page.

### PHS 398 Forms

These [forms](#), part of the Public Health Service (PHS) grant applications, are used for TSNRP grant applications as well. Be sure to follow TSNRP instructions for each form (given in the following section) rather than the PHS 398 instructions, which might not be the same. You do not need to submit any PHS 398 forms that are not listed here.

- [Form Page 1: Face Page](#)
- [Form Page 2: Summary, Relevance, Project/Performance Sites, Senior/Key Personnel, Other Significant Contributors, and Human Embryonic Stem Cells](#)
- [Form Page 4: Detailed Budget for Initial Budget Period](#)
- [Form Page 5: Budget for Entire Proposed](#)



Section IX of the Application Instructions, subsection “Electronic File Naming,” references the PHS 398 Table of Contents. However, you are using a different Table of Contents form. Use the naming convention described in the Application Instructions to name your Table of Contents electronic file.



The PHS 398 forms have been revised several times. Be certain that you are using the most current version by using only the forms in MS Word format linked from this Program Announcement.

[Project Period](#) (Note: You will use this form to detail your mentoring plan as well as your budget justification.)

- [Biographical Sketch Format Page](#)
- [Resources Format Page](#)
- [Continuation Format Page](#) (Note: You will use this form to write your EBP Project Plan.)
- [Checklist Form Page](#)

Your grant application may also include several [appendices](#), which do not need to be submitted on any particular form.

## VII. Instructions for Completing the Grant Application

When application instructions differ, information contained within this Program Announcement supersedes instructions on the forms themselves.

### General Instructions

Type your name (Last, First, Middle) in the header of each page following the Face Page.

### TSNRP Grant Application Cover Packet

Complete all sections of this cover packet in full as indicated on the form. You may, but are not required to, add a one-page letter with any information unique to your situation that you wish to communicate to the TSNRP Executive Director, members of the Scientific Review Panel, or the Advisory Council.

### Relevance to Military Nursing Form

This form is on the last page of the TSNRP Grant Application Cover Packet. In the box provided, write an abstract that describes in full how the EBP project you are proposing will implement and evaluate one or more evidence-based CPGs that address an issue relevant to military clinical nursing practice, military health care policy, or the military health system.



The relevance abstract that you will write on the Relevance to Military Nursing Form is **military specific** and is different from the EBP abstract that you will write on the PHS 398 Form Page 2.



See Section VIII of the Application Instructions for general instructions on preparing and formatting your grant application.

## Form Page 1: Face Page

### Box 1: Title

Select a title that is specific and appropriate to your proposed EBP project topic. The title should be no more than 81 characters long, including spaces.

### Box 2: Response to Specific Request...

- Check the box indicating “YES.”
- *Number:* N/A.
- *Title:* TriService Nursing Research Program.

### Box 3a: Name

Fill in your name as indicated on the form.

### Box 3b: Degrees

Indicate up to three academic and professional degrees or other credentials, such as licenses (e.g., RN).

### Box 3c: Position Title

List your current title in your organization.

### Box 3d: Mailing Address

Provide the complete information necessary for postal delivery, including your room number, building, street address, and ZIP code.

### Box 3e: Department

Specify the department you belong to in your organization.

### Box 3f: Major Subdivision

Identify your subdivision or subdepartment, if applicable.

### Box 3g: Telephone and Fax Numbers

Provide your daytime telephone number and fax number, if available.

### Box 4: Human Subjects Research



See [45 CFR 46.102](#) and [21 CFR 50.3](#) for the Department of Health and Human Services (HHS) and Food and Drug Administration (FDA) definitions of human subjects research.

#### Box 4a: Research Exempt

Check the box indicating “Yes” if all your proposed project activities are exempt from the human subjects research regulations.

Check the box indicating “Yes” if you plan to conduct any activities involving human subjects at any time during the proposed project period, **even if** your research is exempt from regulations for the protection of human subjects.

Check the box indicating “No” if you do not plan any activities involving human subjects at any time during the proposed project period.



Ask your Institutional Review Board (IRB) administrator or chairperson to review your project and tell you whether any part of your EBP project is considered human subjects research.

If you checked “Yes,” specify your exemption number. Your exemption number corresponds to one of six [exemption categories](#).



Only the project performance site IRB can determine if your EBP project is exempt; you cannot make this determination. Nonetheless, those who evaluate the grant application may find this information useful. See the instructions for the [EBP Project Plan](#) for more information about TSNRP IRB requirements.

**Box 4b: Federal-Wide Assurance No.**

If your Applicant Organization has a current Federalwide Assurance (FWA) on file with the Office of Human Research Protections (OHRP), enter the number in the space provided.

**Box 5: Vertebrate Animals**

Check the box indicating “No;” you may not perform any animal research with an EBP Award.

**Box 5a: Animal Welfare Assurance No.**

Leave this box blank.

**Box 6: Dates of Proposed Period of Support**

Enter the beginning and end dates of the TSNRP funding you are requesting, as indicated on the form.

**Box 7a: Direct Costs (\$)**

Enter the “Total Direct Costs for Initial Budget Period” from “Form Page 4: Detailed Budget for Initial Budget Period” in this space.

**Box 7b: Total Costs (\$)**

Enter the sum of: (1) the “Total Direct Costs for Initial Budget Period” from “Form Page 4: Detailed Budget for Initial Budget Period,” and (2) the Facilities and Administrative Costs (F&A)/Indirect Costs for the “initial budget period,” as calculated in #3a on the “Checklist Form Page.”

**Box 8a: Direct Costs (\$)**

Enter the “Total Direct Costs for Entire Proposed Project Period” from “Form Page 5: Budget for Entire Proposed Project Period.”

**Box 8b: Total Costs (\$)**

Enter the sum of: (1) “Total Direct Costs for Entire Proposed Project Period” from “Form Page 5: Budget for Entire Proposed Project Period,” and (2) the “Total F&A Costs” for all years, as calculated in #3 on the “Checklist Form Page.”

Note the “Total Direct Costs” used to calculate this item includes any consortium F&A costs.

**Box 9: Applicant Organization**

Enter the name and address of your Applicant Organization. This organization will be legally and financially responsible for the conduct of activities supported by your award.



You must have an Applicant Organization to receive a TSNRP award. This organization must be a non-University, nonprofit organization. See Section V of the Application Instructions for more information.

**Box 10: Type of Organization**

Check the box indicating the type of organization that best describes your Applicant Organization. Your Applicant Organization may not be a for-profit organization.

**Box 11: Entity Identification Number, DUNS Number, Congressional District**

Enter each of these numbers for your Applicant Organization.

**Box 12: Administrative Official to Be Notified If Award Is Made**

Name the official at your Applicant Organization who TSNRP will notify in the event that you are awarded an Implementation of Innovation EBP Award. Include the person’s complete address for postal delivery, telephone number, fax number, and e-mail address, as indicated.

**Box 13: Official Signing for the Applicant Organization**

Provide the complete name and contact information for the institutional official who will sign this form. This individual must have formal designation or delegated authority to sign on behalf of the organization.

**Box 14: Applicant Organization Certification and Acceptance**

Ask the official named in Box 13 to sign and date in Box 14.

By signing the grant application’s Form Page 1: Face Page, the Authorized Organizational Representative of the Applicant Organization certifies that the organization will comply with all applicable policies, assurances, or certifications referenced in your grant application.



See Section VI of the Application Instructions for more information on policies, assurances, and certifications.

The Applicant Organization is responsible for verifying its eligibility and the accuracy, validity, and conformity with the most current institutional guidelines of all the administrative, fiscal, and scientific information in your grant application, including the F&A rate. Deliberate withholding, falsification, or misrepresentation of information could result in such administrative actions as withdrawal of a grant application, suspension or termination of an award, or debarment of individuals as well as possible criminal penalties.

The signer further certifies that the Applicant Organization will be accountable both for the appropriate use of any funds awarded and for the performance of the grant-supported EBP

project resulting from your grant application. The Applicant Organization may be liable for the reimbursement of funds associated with any inappropriate or fraudulent conduct of the project.



Submit the original copy of your application (with original ink signatures) to TSNRP.

## Form Page 2: Summary, Relevance, Project/Performance Sites, Senior/Key Personnel, Other Significant Contributors, and Human Embryonic Stem Cells

Use this form to describe the project you are proposing, your project sites, and the people on your EBP project team.

### Project Summary

Use this section to write your EBP abstract. Your EBP abstract should:

- Succinctly and accurately describe the EBP project you are proposing.
- Provide a complete overview of the entire project to a reader who does not read the rest of your grant application.
- State the broad long-term objectives of the proposed project.
- State the specific aims of the proposed project.
- Briefly describe the proposed EBP project design, rationale, and methods for achieving your project's objectives and aims.



The EBP abstract that you will write on Form Page 2 is different from the relevance abstract that you will write on the [Relevance to Military Nursing Form](#). The EBP abstract will discuss only the EBP project that you propose to conduct, without the emphasis on your project's impact on military nursing.

### Relevance

In two or three sentences, describe how your proposed EBP project is relevant to the body of military clinical nursing practice.

### Project/Performance Site(s)

List each site where you will perform the work for your proposed EBP project. Depending on your project, you may have more than one performance site which may not necessarily be your assigned duty station.



On the [Resources Format Page](#), you will justify your choice of performance site(s).



**Do not** fill in your performance site(s) DUNS number(s). **Do** provide all other requested information.

## Scientific/Key Personnel

Scientific/key personnel are people who:

- Contribute substantively to the scientific development or execution of the project.
- Devote measurable effort to the project, not occasional or as-needed effort.



Include another person who has agreed to continue the EBP project in the event that you are away for more than 3 months. Include a [letter of support](#) from this person as an appendix to your grant application.



TSNRP does not allow co-PIs. You will be the only PI on your project, though you may include associate investigators (AIs).

List yourself on the first line of scientific/key personnel, because you are the Principal Investigator (PI) of the project. List all other scientific/key personnel after you in alphabetical order by last name. Provide all requested information for each individual. ERA Commons information is not necessary.

If you have a [mentor](#), list him or her among your key personnel.

## Other Significant Contributors

In this section list the names, affiliations, and roles of any individuals who have committed to contribute to the scientific development or execution of your project but who will not commit any specified measurable effort to it. These might include an assistant who provides a small amount of help for conducting literature searches or a consultant who spends minimal effort on the project.



You will provide biographical sketches for all scientific/key personnel and other significant contributors on the [Biographical Sketch Format Page](#).

## Human Embryonic Stem Cells

Check the box indicating “no.” You may not conduct research on human embryonic stem cells in an EBP project.

## Form Page 4: Detailed Budget for Initial Budget Period, Direct Costs Only

Use this form to detail the **direct costs** on which you will spend your grant award money during the first year of your grant.

The budget you list on this form must be:

- Complete.
- Accurate.
- Reasonable.
- Total \$150,000 or less in direct costs.



Direct costs do not include F&A costs.



## **Common Budget Items for Implementation of Innovation EBP Awardees**

This list contains many items that TSNRP grantees often include in their budgets; however, it is not exhaustive or prescriptive:

- Computer equipment and software.
- Specialized training courses (e.g., EBP training course).
- Postage.
- Copyrighted references that must be purchased because they are unavailable in the applicant's local or online libraries.
- Use of a copyrighted research instrument or data collection tool.
- Patient care costs.
- Office supplies.
- Printing and duplicating.
- Conference attendance (including travel and registration fee) to disseminate results (U.S. only).
- Poster preparation and printing.
- Manuscript preparation, including editorial support.
- Consultant fees.
- Project assistant salaries.
- Project director salary.
- AIs' salaries.

### **Personnel**

In this section, list each person involved in your proposed EBP project, beginning with you (the PI). Also include any individuals who will not receive compensation. Designate each person's role on the project, avoiding any duplication of roles or responsibilities.

Enter the number of months that each person will spend on the project. This number must be greater than zero, and cannot be "as needed" or another non-number. Use only the column labeled "Cal. Mnths" (calendar months) for each individual, unless the person in question has different appointments throughout the calendar year. If the person will have one appointment during academic months and another during the summer months, complete the columns labeled "Acad. Mnths" (academic months) and "Summer Mnths" (summer months) with the months during each period the individual will spend on your project; leave the calendar month column blank.

Ignore the heading "Inst. Base Salary" for active duty and Federal employees. Instead, use this column to specify the time on station, projected permanent change of station/assignment date, or

end of time in service for all military personnel on your EBP project team to demonstrate the last date at which they will be able to participate directly in your project. Under “Inst. Base Salary,” enter the salaries for any personnel on the project who are neither Federal employees nor active duty military personnel.

Indicate the salary requested for each person listed in the column labeled “Salary Requested.” Regardless of the number of months each individual will devote to the EBP project, indicate only the amount of salary for this budget period for each individual.

In the column labeled “Fringe Benefits,” list the benefits for each individual that are included with his or her salary. Your Applicant Organization will provide you with this information.

Total the amounts listed in the “Salary Requested” and “Fringe Benefits” columns in the column indicated.



You may not use a TSNRP grant award to pay salaries to active duty personnel or Federal employees. For each such individual involved in your EBP study, list their salary as “WOC” (without compensation).

### Consultant Costs



List “WOC” (without compensation) for each consultant involved in your research who is on active duty or is a Federal employee.

Whether or not costs are involved, provide the names and organizational affiliations of all consultants, other than those involved in consortium/contractual arrangements. Include any consultant physicians in connection with patient care. Include the number of days of anticipated consultation, the expected rate of compensation, travel, per diem, and other related costs.



You will describe each consultant’s services in the [Budget Justification](#) on Form Page 5.

### Equipment

List each item of equipment you will purchase with the award and its cost. List each item and cost separately.

### Supplies

List each category of supplies that you will purchase with the award, along with the total cost for the category, if the category total is less than \$1,000. If the total is greater than \$1,000, list each item and cost in that category individually.



### Computer and Software Requests

- The maximum allowable cost for computer equipment and software is \$3,000.
- Some Applicant Organizations consider computers and software to be equipment; other Applicant Organizations consider them to be supplies. Check with your Applicant Organization on which classification to use on your grant application.
- Any computer equipment or software that you request should be based on the needs of the project that you propose and should be well justified.

### Travel

List each travel request and travel cost separately. This travel should be necessary for the completion or dissemination of the project that you propose. You may only include *domestic* dissemination-related travel.

For each travel request and for each individual, list:

- The purpose of the travel.
- The potential destination.
- Estimated round-trip airfare or car mileage.
- Estimated hotel prices.
- Estimated per diem costs.
- Registration fee, if applicable.



A maximum of \$2,000 per award may be budgeted for travel to scientific conferences or meetings for the purpose of project outcomes dissemination within the U.S. Note that dissemination activities typically occur in the last year of the proposed project.

If you have multiple trips, you may create a table for this section and include it as an appendix to your grant application.

### Inpatient Care Costs/Outpatient Care Costs

Itemize any patient participation costs in your proposed EBP project. These costs may only be patient care costs associated with participation in your project.

### Other Expenses

Itemize any other direct costs that you anticipate in your EBP project, such as publication and communication costs.



TSNRP awards do not pay for Cooperative Research and Development Agreement (CRADA) or IRB fees.



You may request no more than \$500 for the preparation of dissemination materials.

Provide the hours and rates for all services you list.

## Consortium/Contractual Costs



If you will be conducting a multisite EBP project, each additional site beyond that at which you will work must enter into a consortium/contractual arrangement with you and with your Applicant Organization. This is a formalized agreement whereby you and one or more other organizations that are separate legal entities carry out a project. Each of these other organizations must have a lead AI who will be in charge of the project at his or her site. Under the agreement, you must perform a substantive role in the conduct of the planned EBP project and not merely serve as a conduit of funds to another party or parties. These agreements typically involve a specific percent of effort from the consortium organization's lead AI and a categorical breakdown of costs, such as personnel, supplies, and other allowable expenses, including F&A costs. Provide the details of any consortium/contractual arrangements in your [EBP Project Plan](#).

Each participating consortium/contractual organization must submit a separate detailed budget for both the initial budget period (Form Page 4) and the entire proposed project period (Form Page 5).

Consortium arrangements may involve personnel costs, supplies, and other allowable costs, including Facilities and Administrative (F&A) costs. Contractual costs for support services, such as the laboratory testing of biological materials, clinical services, or data processing, are occasionally sufficiently high to warrant a similar categorical breakdown of costs.

For each budget from a participating consortium/contractual organization, leave the "Consortium/Contractual Direct Costs" category blank and use the "Subtotal Direct Costs" category to total the consortium direct costs. When F&A costs are requested by a consortium organization, enter those costs in the "Consortium/Contractual F&A Costs" category for each supplementary budget. Provide the F&A cost base and rate information in the budget justification section. The "Total Direct Costs for Initial Budget Period" category can be used for the consortium/contractual Total Costs (Direct Costs plus F&A).

For the applicant organization budget, list the sum of all consortium/contractual costs (direct and F&A). Insert additional budget page(s) after Form Page 5, numbering them sequentially. (Do not use 5a, 5b, 5c, etc.)

### **Form Page 5: Budget for Entire Proposed Project Period: Direct Costs Only**

Complete this table with your requested budget items for the entire period of your proposed project, as well as the subtotals and totals requested. The first column, "Initial Budget Period," will contain the information you entered in Form Page 4.

## Justification

In this space, and on extra pages if needed, justify your request for:

- Each budget item on Form Pages 4 and 5.
- The inclusion of each individual listed on the project. Describe each individual's specific function. This includes any "to-be-appointed" positions.
- The inclusion of any consultants, other than those involved in consortium/contractual arrangements. Describe the services each will perform. Include the number of days of anticipated consultation.
- Any significant increase in budget between subsequent years of your proposed project.
- Inclusion of active duty, Reserve, or National Guard personnel. For each project team member (including the PI) who is an active duty, Reserve, or National Guard member, provide details about his or her deployment or permanent change of station/assignment dates and the plan for continuing his or her project role in the event of deployment or assignment away from the performance site. Include another military nurse who has agreed to continue the EBP project in the event that you are away for more than three months and describe the contingency plan. Include a letter of support from this person as an appendix to your application.

## Mentoring Plan

If you previously have not received an Implementation of Innovation EBP Award from TSNRP, in the Justification section in Form Page 5 (or on following pages as needed), include your [mentoring plan](#).



Applicants who previously have not received an Implementation of Innovation EBP Award from TSNRP are required to have a mentor for their EBP project. See [Section IV](#) of this Program Announcement for more details.

## Table of Contents

Complete the table of contents with the correct page numbers for the sections that apply to your grant application.

Check the box indicating that you have an Appendix. In the space below the checkbox, list each appendix and its contents. For example:

Appendix I: Instruments XYZ

Appendix II: Survey

Appendix III: Publications

## Biographical Sketch Format Page

*Page limit for this section:* Four pages for each person.

Include a biographical sketch for each person you listed as Key Personnel or Other Significant Contributors, in the order in which you listed them on Form Page 2. Complete the education block at the top of the format page beginning with baccalaureate or other initial professional education, such as nursing, and include postdoctoral training, separately referencing residency training when applicable. For each entry, provide the name and location of the institution, the degree received (if applicable), the month and year the degree was received, and the field of study. For residency entries, the field of study section should reflect the area of residency. ERA Commons information is not necessary.

For each individual, create a biographical sketch that includes the following four parts:

- A. **Personal statement.** Briefly describe why the individual's experience and qualifications make him or her particularly well-suited for the role (e.g., PI, mentor) in the EBP project proposed in your grant application.
- B. **Positions and honors.** List previous positions in chronological order, concluding with the present position. List any honors. Include present membership on any Federal government public advisory committee and any military assignments.
- C. **Peer-reviewed publications or manuscripts in press.** Limit the list of selected peer-reviewed publications or manuscripts in press to no more than 15. Do not include manuscripts submitted or in preparation. You may choose to include selected publications based on recency, importance to the field, or relevance to the proposed project. When citing articles that fall under the Public Access Policy, provide the PubMed Central (PMC) reference number (e.g., PMCID234567) for each article, if available. For articles that are not covered by the Public Access Policy but that are publicly available in a free, online format, you may include URLs or PMCID numbers along with the full reference (note that copies of publicly available publications are not acceptable as appendix material).
- D. **EBP project and research support.** List both selected ongoing and completed research studies and EBP projects for the past 3 years. Begin with the studies or projects that are most relevant to the EBP project proposed in your grant application. Briefly indicate the overall goals of the studies or projects and the responsibilities of the key person identified on the Biographical Sketch. Do not include the number of person months or direct costs.



More information on the Public Access Policy can be found at <http://publicaccess.nih.gov/>.

This part defines each individual's scientific expertise and emphasizes his or her professional accomplishments. Reviewers will use this information to assess each

individual’s qualifications for his or her designated role on the project and the overall qualifications of the project team.

### Resources Format Page

Use this page to describe the resources at each performance site that are available for your proposed EBP project. Reviewers will use this information to assess the capability of the organizational resources available to perform your project.

Identify the facilities that you and your collaborators will use (e.g., laboratory, clinical, computer, office). If appropriate, indicate their capacities, pertinent capabilities, relative proximity and extent of availability to the project. Describe only those resources that are **directly applicable** to your proposed project.

Provide any information describing the Other Resources available to your project (e.g., library) and the extent to which they would be available, if applicable.

Describe how the clinical environment in which you will conduct the EBP project contributes to the probability of success (e.g., institutional support, physical resources, intellectual rapport). In describing this environment, discuss ways in which your proposed project will benefit from unique features of the scientific environment or subject populations or will employ useful collaborative arrangements.

Describe your Applicant Organization’s investment in your success as an investigator (e.g., resources for classes, travel, and training; collegial support such as career enrichment programs, assistance and guidance in the supervision of trainees involved with your project, and availability of organized peer groups; logistical support such as administrative management and oversight and best practices training; and financial support such as protected time for your project with salary support).

If there are multiple performance sites, describe the resources available at each site.

Describe any special facilities used for working with biohazards or other potentially dangerous substances, if applicable.

### Continuation Format Page (EBP Project Plan)

*Page limit for this section:* 12 pages total for items 3–5 (below), which includes any figures or tables. (Some items have their own page limits, as indicated below.)

Use this form to write your **Implementation of Innovation EBP Project Plan**. Your EBP Project Plan will contain the following items:

1. *For resubmitted or revised grant applications only:* Introduction. Also include the “Recommendations and



See the Application Instructions, Section X, for more information on resubmission.

Revisions for FY\_\_ Submission” form here. Use this form to respond to reviewer comments on your previously submitted grant application.

2. Specific Aims. (If you are not resubmitting a revised grant application, this item will be the first in your EBP Project Plan.)
3. Background and Significance.
4. Preliminary Studies/Prior Work.
5. Project Plan.
6. Bibliography and References Cited.
7. Protection of Human Subjects.
8. Inclusion of Children.
9. Consortium/Contractual Arrangements.

### Specific Aims

*Page limit for this item:* One page.

This item is the foundation on which the rest of your grant application is built. Your Specific Aims should present direct relationships between your problem statement for the project, objectives, project activities, and evaluation plan.

Specifically, the Specific Aims should:

- Be easy to read and be presented logically.
- Suggest the relevance of the project you propose to TSNRP’s mission and to military nursing practice.
- Provide an overview of (1) the current state of knowledge in the area of nursing practice you propose to work in and (2) how your project will implement and evaluate one or more evidence-based CPGs that will narrow the gap between evidence and practice.
- List the expected outcomes of your project and the expected impact of those outcomes.

### Background and Significance

First, identify the clinical topics that are the basis of your project and discuss why you chose to pursue an EBP project in this area or areas. Describe how your EBP project will improve care delivery for clients in the military health care system.

Then, discuss the **background** of the topic(s) on which your EBP project is based. This



It is your scientific and scholarly responsibility to cite and give specific credit for other authors’ work. In addition to citing facts, you may also cite *expert* opinion, such as position statements, commentary, or case reports.

Remember to include all cited references in the bibliography.

discussion should include:

- A description of the scientific and clinical literature that is directly relevant to the CPG(s) you propose to implement in your EBP project.
- A description of the conceptual framework or model that will guide your proposed project and a statement of how this framework or model is related to the project that you propose.
- An overview of the current clinical culture and practice at the implementation site, including institutional support for EBP.
- A description of **either**:
  - How you carried out evidence synthesis in a previous project in order to develop the CPG(s) that you propose to implement and evaluate in your grant application;  
**or**
  - How you chose the CPG(s) you propose to implement and evaluate.
- A discussion of the results of any data collection during CPG development, if applicable.
- Results from a quality appraisal of the selected guideline, using an instrument such as the [Appraisal of Guidelines for Research & Evaluation \(AGREE\) Instrument](#).



The AGREE Instrument is a generic instrument designed to help CPG developers and users evaluate the methodological quality of a CPG. You can [download](#) a copy of the instrument for free at the AGREE Research Trust's Web site.

### **Preliminary Studies/Prior Work**

Highlight any prior experience that you or any members of your project team have in EBP.

Include relevant data that demonstrate the impact of these past EBP projects.



Include enough detail in your description of prior EBP work to convince reviewers that you and your team will carry out your proposed project successfully.



The project design and methods you propose in your Project Plan should logically follow from the Specific Aims. Organize the Project Plan section carefully to make this connection obvious to reviewers.

### **Project Plan**

In the Project Plan, use enough detail to make clear what will be done, how it will be done, who will do it, and how data will be interpreted, fully describing every step of the project.

## Methods

The methods for your proposed project are a key part of your grant application. In your methods, be sure to include your implementation strategies, evaluation strategies, sustainability plan, and dissemination plan (described below).

### *Implementation Strategies*

Describe in detail how you will implement the practice recommendations from synthesized evidence at your project site. Include:

- Both individual and organizational implementation strategies.
- The potential number and type of patients who could benefit annually from your EBP project.
- The number and type of clinicians who will implement the CPG(s) from your project in their practices.
- Methods for gaining the support for the evidence-based practices you are introducing from key stakeholders. These methods may include educational strategies and system changes.
- The rationale for the strategies you will use to gain stakeholder support.
- Challenges you anticipate during implementation and strategies for overcoming these challenges.



Include enough detail in your description of your implementation strategies to enable others to replicate your project at another site.



[Letters of support](#) for your access to places and populations needed for your project are critical to the success of your grant application. Include these letters in an appendix.

### *Evaluation Strategies*

Discuss how you will determine the success of your evidence-based practice implementation. You should employ a variety of evaluation methods throughout your project. Describe:

- The outcome and process variables or indicators you will use.
- The rationale for using the methods you describe.
- Your data collection plan, including data collection methodology, data sources, and a table of instrument reliability and validity.



In an appendix to your grant application, include samples of any existing data collection tools, instruments, or surveys that you will use in your project.

- Methods for data analysis, including statistical methods.
- Methods for evaluating implementation success or failure.
- Plans for overcome potential organizational obstacles to evaluation.

### **Sustainability Plan**

Describe the strategies you will use to ensure that the evidence-based practices you implement during your project will continue after the end of the project period. Your strategies should include a plan for institutionalizing the practices in the specific contexts of care in which you implemented the practices. Discuss other settings within the project site that might benefit from adopting the practices.

### **Dissemination Plan**

Describe your plan for disseminating project outcomes to stakeholders at your military project site(s) and elsewhere in the military health care system.



TSNRP expects all grantees to publish the results of their projects in a peer-reviewed journal. Posters or presentations at national meetings—such as military medicine, clinical, or policy meetings—are also good ways to disseminate your project results.

### **Bibliography and References Cited**

Use a consistent style of your choice for the bibliography, one which includes the article and journal or book titles, volume number, page numbers, and year of publication in the bibliographical references.

Provide the PMC reference number (e.g., PMCID234567) for each citation that falls under the NIH Public Access Policy. You may include URLs or PMCID numbers, along with the full reference, for citations that are not covered by the Public Access Policy but that are publicly available in a free, online format.



Make sure that all references in the text appear in the bibliography in the same sequence in which they appear in the text.

### **Protection of Human Subjects**

If applicable, use this section to describe any potential risks to your subjects caused by participation in your project and the actions that you and your team will take to minimize these risks. Include discussion of:

- Confidentiality.
- Coercion.
- Volunteerism.
- Data safety.
- Your monitoring plan.
- Health Insurance Portability and Accountability Act (HIPAA) compliance.
- Any other issue related to the protection of human subjects.



Refer to Section XIII of the Application Instructions for helpful references regarding human subjects protection.

Consult the current DoD Service- and site-specific human subjects protection requirements and ensure that your plan for human protection meets those requirements. Projects involving human subjects must be conducted in full compliance with all applicable Federal regulations and DoD policies.



If applicable, include a draft of your **informed consent document** in the appendix. It must contain the following under the section labeled “Confidentiality”: “The Institutional Review Board of [the specified study site]; the Uniformed Services University of the Health Sciences, Bethesda, MD; and other Federal agencies that provide oversight for human subject protection may see your records.”

**IRBs.** Consult your local IRB for its determination of whether your EBP project is considered human subjects research. If your project is deemed human subjects research, your local IRB must approve your project. Because the Uniformed Services University of the Health Sciences (USU) is the grantor, its IRB will conduct a secondary review of your project, in addition to the performance site(s) IRB(s). Note that if you plan on including vulnerable populations, your project will be subject to strict scrutiny; obtaining approval for your project may be a lengthy and difficult process.

Documented evidence of IRB approval of your project is not required with your grant application, but you must provide this documentation to TSNRP for each performance site if you receive an award.

Note that only an IRB can determine if your project is exempt from human subjects regulations.

### **Inclusion of Children**

If your proposed project involves vulnerable populations, such as children, it must follow the additional protections and regulations described in Subparts B, C, and D of [45 CFR Part 46](#). A child is a person who has not attained the legal age for consent to treatment or procedures involved in your project under the applicable laws.

If your EBP project involves children, describe:

- The rationale for selecting a specific age range of children.
- Planned procedures for protecting against or minimizing potential risks to the children.

This plan must include a description of:

- Your investigative team’s expertise in working with children of the age you include.
- The appropriateness of the available facilities to accommodate the children.
- The inclusion of a sufficient number of children to allow for a meaningful analysis.

Also describe your process for meeting parental permission and child assent requirements, including:

- The circumstances under which you will seek and obtain consent.
- Who will seek and obtain consent, and, if applicable, assent.
- The nature of the information that you will provide to prospective child subjects.
- The method for documenting consent.

### **Consortium/Contractual Arrangements**

Explain the programmatic, fiscal, and administrative arrangements to be made between your Applicant Organization and any consortium organization(s). Include letters of collaboration and budget plans for each contractual agreement (including PHS 398 budget pages for both the initial budget period and the entire proposed period). Place the letters of collaboration in an appendix to your grant application. See the instructions for Form Page 4, [Consortium/Contractual Costs](#), for more information on Consortium/Contractual Arrangements.

### **Checklist Form Page**

#### **Type of Application**

Check each box that applies to your grant application. (Check the box labeled “NEW application” if you are submitting this application to TSNRP for the first time.)

#### **Program Income**

Indicate here in the format requested the amount of gross income your Applicant Organization expects to earn that is directly generated by a supported activity or earned as a result of this award. If the amount is zero, state “none.”

#### **Assurances and Certifications**



See Section VI of the Application Instructions for more information on assurances and certifications.

This section ensures that your Applicant Organization’s authorized representative (who signed Form Page 1: Face Page of your grant application) agrees to comply with any policies, assurances, or certifications required by your proposed project.

#### **Facilities and Administrative Costs (F&A)/Indirect Costs**

If you are requesting funding for F&A costs, check the appropriate box indicating the rate agreement your Applicant Organization has negotiated (is negotiating) and provide the date on which the agreement was established, if applicable.

Calculate your F&A costs for the initial and all future budget periods using the formulae provided. The “rate applied” is the current negotiated F&A rate minus exclusions. You do not need to list the exclusions on the checklist or anywhere in your grant application. However, both

the F&A rate and the direct cost base used to calculate the F&A costs must be included for each year.

The indirect cost rate itemized by your Applicant Organization on the Checklist Form Page should correspond to the rate on the budget pages and the Face Page of your grant application.

## Appendices

Include one set of appendices with each copy of your grant application.

Include in an appendix any material relevant to your grant application but not suited for the main body of the grant application, such as:

- Copies and/or detailed descriptions of tools, instruments, surveys, or other measures used for data collection.
- The use of any instruments not in the public domain requires the **authors' permission**. If you are using any such instrument, include letters from the authors or their legal representatives granting permission to you for their use.
- Informed consent document, if applicable.
- HIPAA authorization form, if applicable.
- Published papers that you've authored showing expertise in the project topic, preliminary work, or completion of previous EBP projects or research studies.
- Letters of support and any other letters (see below).
- Timeline (see below).



Don't use your appendix to circumvent the page limits of the EBP Project Plan. Except when indicated otherwise, include any graphs, diagrams, tables, or charts in the body of the EBP Project Plan, not in the appendix.

## Letters of Support

Include original, signed letters of support on letterhead from:

- **Commander, director, supervisor, or manager of the military installation, medical facility, department, or unit that might be affected by any aspect of your EBP project.** These letters should demonstrate that you and your project team have access to the population and facilities that you need to conduct the project. (*Example:* a letter of support to access a military treatment facility or other clinical site.)
- **AIs.**

- **Consultants.** These letters should include the scope of the consultants’ work and responsibilities, level of commitment and percentage effort, and duration of the commitment.
- **Site commanders** (if relevant).

### Timeline

Provide a detailed timeline that delineates how your project will progress. This timeline should include major tasks and milestones as well as the time periods within which you will accomplish them. The timeline should include IRB processing, if applicable; note that if you plan to use multiple performance sites, IRB processing will be slowed. See the [sample timeline](#) for an example.



See Sections VIII and IX of the Application Instructions for information on formatting and submitting your completed grant application.

## VIII. Grant Application Evaluation

All grant applications undergo a two-tiered review process:

- Scientific merit review, conducted by members of the Scientific Review Panel (SRP).
- Programmatic review, conducted by members of the Advisory Council.

These reviews’ outcomes guide the final funding decisions made by TSNRP’s Executive Board of Directors.

Throughout the review and decision process, confidentiality and conflict-of-interest measures are enforced.

### Scientific Merit Review

The scientific merit review is a *criteria*-based process by which the Scientific Review Panel evaluates and scores individual grant applications. The panel evaluates each grant application for scientific and technical merit, independent of the other grant applications under consideration.

#### The Scientific Review Panel

The SRP is responsible for reviewing, discussing, and scoring grant applications’ scientific merit.

An SRP consists of:



In some cases, the Executive Director may request that experienced nurse scientists conduct a field review of a grant application (using the same evaluative criteria and scoring system), in lieu of convening a full Scientific Review Panel.

- A panel chairperson.
- Civilian nurse scientists.
- Military nurse scientists from each of the three uniformed Services.

Panel members are selected from the nursing and health care communities based on their EBP expertise, professional experience, and publication history.

### **Scientific Merit Review Procedures**

For each grant application, TSNRP staff designates one panel member as *primary reviewer* and one panel member as *secondary reviewer*. These individuals evaluate the science of the proposed project by reviewing, scoring, and preparing evaluative comments for their assigned grant applications.

The military reviewers are non-voting members of the SRP. They provide valuable insight and comments that:

- Augment the other reviewers' evaluation regarding the feasibility of conducting the proposed project.
- Address military relevance of the proposed study.
- Address the stability of the project team.

### **Presentations by Reviewers**

First, any panel member(s) with an actual, apparent, or potential conflict of interest exits the room, recording the date and time on the official recusal log.

Then, the assigned primary and secondary reviewers express their levels of enthusiasm for the grant application and announce their initial scores for it. The primary reviewer summarizes the grant application and presents his or her review with a focus on the major strengths and weaknesses that influenced the score. Subsequently, the secondary reviewer presents only those parts of his or her review that differ from the primary reviewer. Next, the military reviewer presents his or her review of the grant application's military feasibility and military relevance and the stability of the project team.

### **Panel Discussion**

After presentations from the primary, secondary, and military reviewers, all panel members discuss the grant application. During the discussion period, the panel members review and discuss the grant application's budget. The panel determines whether the requested budget is:

- Realistic and necessary for the conduct of the proposed project.
- Well justified.
- Appropriate considering the projected scope of work and requests for personnel.

If the panel members recommend budget changes, the recommendations must be specific and well justified.

### Scoring

After discussion of the grant application concludes, the primary and secondary reviewers may verbally change their initial scores. Subsequently, the full panel, except military reviewers, privately records a numeric global score on individual score sheets. The reviewers' scores are based on a grant application's content as submitted, not on the basis of its potential after improvements suggested by the panel.

Reviewers score grant applications on a scale of 0–9 (in whole number intervals), with the exception of grant applications submitted in the wrong funding category (see below).

The scientific review scoring scale is as follows:

Score	Descriptor	Strengths/Weaknesses
1	Exceptional	Exceptionally strong with essentially no weaknesses
2	Outstanding	Extremely strong with negligible weaknesses
3	Excellent	Very strong with only some minor weaknesses
4	Very Good	Strong but with numerous minor weaknesses
5	Good	Strong but with at least one moderate weakness
6	Satisfactory	Some strengths but also some moderate weaknesses
7	Fair	Some strengths but with at least one major weakness
8	Marginal	A few strengths and a few major weaknesses
9	Poor	Very few strengths and numerous major weaknesses
0	Zero Score	Fails to meet established standards and formatting
--	No Score	Submitted in the wrong funding category
<b>Minor Weaknesses:</b> An easily addressable weakness that does not substantially lessen impact.		
<b>Moderate Weakness:</b> A weakness that lessens impact.		
<b>Major Weakness:</b> A weakness that severely lessens impact.		

A grant application receives a “Zero Score” when it fails to meet established standards as determined by consensus vote of the SRP. Grant applications that receive a “Zero Score” will not receive a subsequent programmatic review. A grant application receives a “No Score” when it meets established standards but was submitted in the wrong funding category. Grant applications receiving a “No Score” will continue through the scientific and programmatic review process.

### Scientific Merit Review Criteria

*Primary and secondary reviewers* evaluate the merit of grant applications using the following criteria:

- **Seven core review criteria.** Feedback from reviewers on these criteria allows the applicant to identify reasons for the grant application's score and to improve or strengthen the grant application on a potential resubmission.

1. **Scientific approach and technical merit.** This criterion is crucial because it assesses:

- The project design. This includes: purpose, use of an EBP model to organize the project and to facilitate implementation and evaluation of the CPG(s), method, definitions, procedures, feasibility, adequacy of the approach to appraise the CPG(s), measures, sampling strategy, data management and analysis plan, timeline, limitations, and dissemination plan.
- Whether there is sufficient evidence to support the quality of the CPG(s) to be implemented and evaluated. This includes how the proposed guideline was assessed with a guideline assessment tool (e.g., AGREE) and its strength.
- Whether the overall strategy, methodology, and analyses are well reasoned and appropriate to accomplish the specific aims of the EBP project.
- The likelihood that the applicant will achieve the goal of the EBP project.

If any part of the project does not merit support, the reviewer may recommend its deletion and a corresponding adjustment to the budget.

Reviewers note whether the application is revised from a previously submitted TSNRP grant application. For resubmissions, reviewers comment on how the applicant addressed feedback from a previous scientific and programmatic review(s), improvements, and any remaining weaknesses.

2. **Qualifications, expertise, and EBP experience of the PI and project team.** This criterion evaluates all key personnel's training and record of accomplishments. Reviewers note the following for each key individual: name, degree, title, field of training or experience, publication record, and whether the PI and team are well suited to conduct the project. Reviewers also note any missing expertise that is required to complete the project.

3. **Originality and innovative nature of the grant application; applicability of previous findings.** This criterion assesses:

- The originality of the clinical nursing, military health care policy, or military health system problem. This includes the use of new concepts, approaches, or methods in the proposed EBP project.

- The innovation in translation or application of evidence to shift current clinical practice and solve nursing or health care problems.
4. **Significance and relevance to nursing practice.** This criterion evaluates the proposed project’s potential contribution to nursing practice, healthcare policy, the military health system, and the importance of the problem it addresses. Reviewers:
- Comment on whether the proposed EBP project addresses an important problem or critical barrier in nursing practice.
  - Discuss whether successful completion of the proposed project’s aims has the potential to standardize patient care, improve patient outcomes, and promote cost-effective care.
  - Discuss the plan to sustain the new evidence-based practice(s) and evaluate long-term outcomes.
  - Address the strengths and weaknesses of the grant application.
5. **Availability of institutional resources and adequacy of the environment to support the project.** This criterion assesses the appropriateness and adequacy of the environment for the proposed EBP project; the quality and extent of institutional, leadership, and stakeholder support; and the availability and accessibility to facilities and equipment, such as clinics, inpatient units, office or laboratory space, conference rooms, computers, and the library. In addition, personnel factors are considered, including the opportunity to interact with scientists and clinical experts and the quality and value of collaborative arrangements.
6. **Protection of human subjects** (*if applicable*). This criterion evaluates the risks to subjects, the adequacy of protection against these risks, the potential benefits to the subjects and others, the importance of the knowledge to be gained, and the data and safety monitoring plan.
7. **The mentoring plan** (*if applicable*). Reviewers assess:
- The quality of the mentoring plan.
  - The credentials of the mentor.
  - Whether there is evidence that interaction between the mentor and the applicant will be sufficient to transfer the mentor’s knowledge to the applicant.
- **Budget and project duration.** This additional review criterion assesses the reasonableness of the budget and proposed project duration. Reviewers provide specific recommendations and rationale for any budget modifications they make. Similarly, reviewers make specific recommendations regarding project duration.

*Military reviewers* evaluate the merit of grant applications using the following criteria:

1. **Military feasibility.** This criterion assesses the likelihood that the military project team will achieve the goal of the EBP project. Reviewers address accessibility to evidence, the feasibility of collecting data (if applicable), institutional support for the project, and adequacy of the environment and resources where the project will be conducted.
2. **Military relevance.** This criterion evaluates the potential contribution of the proposed EBP project to military nursing and the importance of the project to military health care.
3. **Stability of the project team.** This criterion evaluates the EBP project team's ability to carry out the project as proposed. Reviewers assess whether the project team includes built-in redundancy or overlap of roles and expertise; this would help to compensate for any team members' move to a new duty location, temporary duty assignment to another location, or deployment. In addition, reviewers note any type of military expertise required for the project that is missing.

*All reviewers* address the following:

1. **Level of enthusiasm.** Reviewers rate their level of enthusiasm for the proposed project as high, moderate, or low.
2. **Title of the grant application.** Reviewers evaluate how well the title of the grant application reflects the actual grant application and categorize as a good match, partial match, or poor match.

### **Reviewers' Comments**

Reviewers' written evaluations are key documents that provide the rationale for the panel's recommendations and score. TSNRP provides all applicants with an unedited copy of the reviewers' written evaluations to provide feedback on the strengths and weaknesses of their grant applications. In addition, the TSNRP Advisory Council uses the document as it conducts Programmatic Review (second-tier review) of the grant application, scores each grant application, and makes a funding recommendation to the Executive Board of Directors.

### **Programmatic Review**

The programmatic review is both a *criteria-* and *comparison-*based process in which the TSNRP Advisory Council evaluates grant applications on their relevance to the TSNRP portfolio. The TSNRP Advisory Council consists of one active duty and one Reserve member from each Service.

### **Programmatic Review Process**

Advisory Council members review portions of the grant applications and the outcomes of the scientific merit review. During the programmatic review, the primary reviewer presents the grant application, the review, and the score to the entire panel; the secondary reviewer presents the

grant application’s score and its justification. The entire council discusses the grant application and then agrees on a final score.

Scores are on a scale of 0–9 (in whole numbers). The scoring scale is as follows:

Score	Descriptor	Strengths/Weaknesses
1	Exceptional	Exceptionally strong with essentially no weaknesses
2	Outstanding	Extremely strong with negligible weaknesses
3	Excellent	Very strong with only some minor weaknesses
4	Very Good	Strong but with numerous minor weaknesses
5	Good	Strong but with at least one moderate weakness
6	Satisfactory	Some strengths but also some moderate weaknesses
7	Fair	Some strengths but with at least one major weakness
8	Marginal	A few strengths and a few major weaknesses
9	Poor	Very few strengths and numerous major weaknesses
0	Zero Score	Fails to meet established standards and formatting
--	No Score	Submitted in the wrong funding category
<p><b>Minor Weaknesses:</b> An easily addressable weakness that does not substantially lessen impact.</p> <p><b>Moderate Weakness:</b> A weakness that lessens impact.</p> <p><b>Major Weakness:</b> A weakness that severely lessens impact.</p>		

### Programmatic Review Criteria

- Scientific merit.
- Relevance to military nursing practice.
- Relevance to TSNRP portfolio/programmatic priorities.
- The likelihood that the EBP project will contribute to important changes in military nursing clinical practice and improved outcomes.
- Sustainability of the new evidence-based practice(s).
- Strengths and stability of the EBP project team.
- Quality of the mentorship plan (if applicable).
- Potential benefit of the proposed project relative to the proposed budget.
- Performance history (applicants who have received a previous grant award from TSNRP) or mentor support for the novice investigator (applicants who have not received a previous grant award from TSNRP).

### *Previously Funded PIs*

In the event that the applicant previously received a TSNRP award, the Advisory Council will also evaluate the applicant's past performance history as a TSNRP grantee during the Programmatic Review. The Advisory Council will consider:

- The applicant's compliance with Federal, USU, and TSNRP requirements, such as timely submission of IRB approval documents, progress reports, final reports, and other items specified by the study's terms and conditions.
- The applicant's efforts to disseminate TSNRP-funded research or project findings in peer-reviewed journals and at scientific conferences.



TSNRP expects timely publication of research findings in peer-reviewed journals.

### **Funding Decisions**

The TSNRP Executive Board of Directors makes final funding decisions based on:

- The mission, research priorities, and goals of TSNRP.
- Outcomes of the scientific merit and programmatic reviews.
- Recommendations of the Advisory Council.



The Executive Board of Directors' funding decisions are final and cannot be appealed.

The Executive Board of Directors is composed of the Assistant Surgeon General, Medical Force Development and Assistant Surgeon General, Nursing Services (U.S. Air Force); the Chief, U.S. Army Nurse Corps; and the Director, U.S. Navy Nurse Corps.

## Appendix 1. Sample Timeline

The sample below was created for a research study employing survey and focus group methodology. You should create timelines that are specific to your proposed EBP project. Be sure to identify the calendar year in addition to the project year. Place your timeline in an [appendix](#), where indicated.

	YEAR 1 (2009)				YEAR 2 (2010)			
	Oct-Dec	Jan-Mar	Apr-Jun	Jul-Sep	Oct-Dec	Jan-Mar	Apr-Jun	Jul-Sep
Recruit & Hire Study Personnel	■							
Print Questionnaires & Create Database		■						
Establish Liaison with Units		■						
Prepare Questionnaire Mailing		■						
Send 1 <sup>st</sup> Mailing of Questionnaires			■					
Send Reminder Postcards			■					
Send 2 <sup>nd</sup> Mailing of Questionnaires			■					
Obtain APFT Results & Enter in Database			■					
Scan Questionnaire into Database			■					
Questionnaire Data Cleaning					■			
Questionnaire & APFT Data Analysis					■			
Data Interpretation					■			
Focus Group Training and Planning					■			
Focus Groups						■		
Focus Group Data Interpretation						■		
Identify Intervention Strategies to Increase Exercise Participation								■
Report & Manuscript Preparation					■			■

Adapted from timeline provided courtesy of COL (Ret.) Laura R. Brosch, ANC.

## Appendix 2. Exemptions from HHS Human Subject Protections

The six categories of research exempt from the HHS human subject regulations are:

### Exemption 1

Research conducted in established or commonly accepted educational settings involving normal educational practices, such as (i) research on regular and special education instructional strategies or (ii) research on the effectiveness of or the comparison among instructional techniques, curricula, or classroom management methods.

### Exemption 2

Research involving the use of educational tests (cognitive, diagnostic, aptitude, achievement), survey procedures, interview procedures, or observation of public behavior unless: (i) information obtained is recorded in such a manner that human subjects can be identified directly or through identifiers linked to the subjects and (ii) any disclosure of the human subjects' responses outside the research could reasonably place the subjects at risk of criminal or civil liability or be damaging to the subjects' financial standing, employability, or reputation.



Exemption 2, for research involving survey or interview procedures or observation of public behavior, does not apply to research with children (see [45 CFR Part 46, Subpart D](#)), except for research involving observations of public behavior when the investigator(s) do not participate in the activities being observed.

### Exemption 3

Research involving the use of educational tests (cognitive, diagnostic, aptitude, achievement), survey procedures, interview procedures, or observation of public behavior that is not exempt under paragraph (b)(2) of this section if: (i) the human subjects are elected or appointed public officials or candidates for public office or (ii) Federal statute(s) require(s) without exception that the confidentiality of the personally identifiable information will be maintained throughout the research and thereafter.

### Exemption 4

Research involving the collection or study of existing data, documents, records, pathological specimens, or diagnostic specimens, if these sources are publicly available or if the information is recorded by the investigator in such a manner that subjects cannot be identified directly or through identifiers linked to the subjects.

The [human subjects regulations decision charts](#) of the Office for Human Research Protection (OHRP) will determine whether the research falls under the human subjects regulations and if so, whether it meets the criteria for Exemption 4. The [NIH Office of Extramural Research Web site](#) also contains information that is helpful for determining whether human subjects research meets the criteria for Exemption 4.

### **Exemption 5**

Research and demonstration projects that are conducted by or subject to the approval of Department or Agency heads and that are designed to study, evaluate, or otherwise examine: (i) public benefit or service programs (ii) procedures for obtaining benefits or services under those programs (iii) possible changes in or alternatives to those programs or procedures or (iv) possible changes in methods or levels of payment for benefits or services under those programs.

### **Exemption 6**

Taste and food quality evaluation and consumer acceptance studies: (i) if wholesome foods without additives are consumed or (ii) if a food is consumed that contains a food ingredient at or below the level and for a use found to be safe, or an agricultural, chemical, or environmental contaminant at or below the level found to be safe, by the Food and Drug Administration or approved by the Environmental Protection Agency or the Food Safety and Inspection Service of the U.S. Department of Agriculture.