

Social Interventions Research & Evaluation Network

SIREN Innovation Grants Frequently Asked Questions

What are you looking to fund?

We are interested in funding studies that evaluate the cost or utilization impacts of interventions that address patients' social and economic needs in the context of health care delivery. To be eligible for funding, some or all of the intervention has to be initiated in, or otherwise be part of, an encounter with a health care provider or an interaction with a health care entity (e.g., delivery system or payer). If you are planning on studying an intervention that addresses social and economic needs as part of a larger suite of efforts, your study design should allow you to isolate the impact of addressing the social and economic needs. We will give preference to projects with strong study designs that maximize the ability to draw conclusions about the impact of the intervention studied.

What's a clinical social determinant of health intervention?

A clinical social determinant of health intervention is a program that identifies and/or addresses patients' social and economic needs in the context of clinical care, often but not necessarily in partnership with community partners.

Can you provide some examples of clinical interventions that would meet the grant criteria?

Any intervention that helps patients address social or economic hardships and that takes place in part or wholly in a clinical setting would qualify. Examples of interventions that meet grant criteria are those that screen patients for one or more social or economic needs (e.g. food insecurity, utilities, housing needs, employment, safety, etc.) and help patients address any identified needs by connecting them with community or government services, or on-site services. To be eligible for this grant opportunity, some portion of the intervention (typically the screening or referral services) must be conducted in the context of health care delivery, whether performed by a clinician or an adjunct member of the care team (community health workers, community care coordinators, social workers, etc.).

Do the clinical interventions studied have to be implemented by hospitals and clinics?

Some portion of the target intervention has to be initiated in or otherwise be part of an encounter with a health care provider or an interaction with a health care entity (e.g., delivery system or payer).

What constitutes a health care setting for the purposes of this grant?

Health care settings include any site where health care delivery activities occur, whether or not the site exclusively provides health care services.

Are there priority social determinants of health for this CFP?

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We do not have priority social or economic hardships. Domains that we are interested in include but are not limited to: child care, criminal justice, discrimination, economic security, education/literacy, employment, food/hunger, housing quality, housing stability, immigration, legal services, public benefits, social support, transportation, utilities, and violence/safety.

Would you consider quality improvement projects to fall under your definition of an intervention?

All projects must go through the applicant's institutional IRB process prior to funds disbursement. Though QI projects generally are not subject to IRB review, there is no specific exclusion for them if they pass institutional review. In these cases, other eligibility criteria are the same: the quality improvement project must focus on intervening on patients' social and economic hardships and the study design should enable researchers to rigorously assess the health care cost or utilization impacts of intervening on these needs.

Do the outcome measures need to include both health care utilization and cost? Outcome measures need to include at least one health care utilization OR health care cost outcome. Evaluations do not need to include both outcomes.

What is the preferred methodology for measuring cost?

There is no preferred evaluation methodology to measure cost impacts. It is important to explain the rationale for choosing the methodology you propose.

Do the interventions need to have already been demonstrated to be effective in changing other types of patient outcomes?

No, intervention impacts on patient or process outcomes do not need to have been studied previously. However, the proposal should include evidence demonstrating there is a reasonable expectation that there will be some health care cost or utilization impacts.

Do the studies also need to show clinical or process outcomes of the target intervention?

While we would expect that any intervention would need to collect some process outcomes (e.g. number of people in the study, etc.), studies are only required to examine either health care cost or utilization impacts.

Are you seeking studies that go beyond immediate monetary benefits to show long-term impacts and assess non-traditional metrics?

Health care cost or utilization is the only required impact outcome. If your budget allows, you can include additional metrics and analyses, including costs and savings accrued outside the health sector, as long as either health care cost or utilization outcomes are being analyzed.

Would the use of a natural control group (those we served before or after the intervention) be considered rigorous enough for this grant opportunity?

We will consider a wide range of study designs. It is critical to include in your proposal the rationale behind the study design selected, why it is appropriate for the population being served by the intervention, how study bias will be avoided, and how you will ensure that study impacts can be distinguished from other changes that occur over time (regression to the mean, etc.).

Can the intervention and/or evaluation planning have already begun and be designed or are you looking for a brand-new initiative?

We do not require that the proposed work be part of a new initiative. Given the relatively small maximum award size, we encourage applicants to think about how to leverage other funded projects. However, health care cost or utilization data need to be available to be eligible for funding. If these measures were not included as part of the original design or evaluation, you will need to ensure access to those data and obtain permission from your committee on human research to utilize them.

What kind of scale are you looking for? Is there a required sample size?

Under this CFP, there are no minimum or maximum sample sizes. We do recommend including a power estimate in your proposals to demonstrate that the proposed study is large enough to detect meaningful effects and can contribute to the literature in this area.

Are there payer mix requirements?

There are no payer mix requirements.

What are the deliverables you are expecting during the grant timeline or at the end of the grant?

Besides carrying out the proposed research project, the two required grant activities are participation in a Works-In-Progress webinar with SIREN's Research Advisory Committee early in the grant timeline, a final grant report describing the project outcomes and funds usage, and, if the project is for two years, a first-year report describing the project progress and funds usage in year 1. We hope study results will ultimately be published in academic manuscripts and other forums, but these are not required during the grant timeline.

Are there any requirements around the experience or academic credentials of the Principal Investigator?

There are not requirements for Principal investigator credentials. They do need to demonstrate that they have the experience necessary to carry out the proposed study. This experience can be demonstrated by the successful participation in or leadership on other studies or initiatives. This information should be documented in the investigators' CVs and the description of the research team.

Would an embedded research team inside of a health care delivery organization be eligible for the grant?

Yes. Again, the team just has to demonstrate in the proposal that they have the capacity to carry out the research project.

Are local health departments working in partnership with health care delivery organizations (hospitals, FQHCs, CHCs) eligible to apply?

Yes. Applicants can be local health departments, health care delivery agencies, or social service partners. The applicant must have the capacity to lead the proposed research study.

Can an applicant submit more than one proposal or be listed as an investigator on more than one submission?

An individual can be listed as an investigator on more than one proposal but can only be listed as the Principal Investigator on one proposal.

Can the funding be used to support staff salaries – screeners, intervention conductors, etc.?

There are no limitations on using grant funds to support staff salaries.

Does this CFP allow for awardees to also include subcontractors?

Yes, subcontractors are allowed. Note, if the costs for consultants and contractors exceeds 33% of direct costs, the limit for indirect expenses on the consultant/contractor portion is 4% (vs. 12% otherwise).

Is it okay to request the full \$150k even if the project period is shorter than maximum of 24 months?

Yes, you may request the maximum grant award of \$150k no matter the duration of your grant. All applicants are required to provide a budget justification using the budget narrative template.