

Research Grant Application 2023

The mission of the Foundation for Health Environments Research (FHER) is to advance the knowledge and effectiveness of those who design healthcare environments by sponsoring research.

Please write your application to contain the sections outlined in this document. The Application Cover Sheet (section I), Budget (section V), Timeline (section VI), and Application Requirement Checklist (section X) can be extracted from this document as fillable forms. For additional details on the FHER grant and application, see the "FHER Grant Application Guidelines 2023". Incomplete applications may be excluded from consideration.

SECTIONS

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I. APPLICATION COVER SHEET

APPLICANT INFORMATIO	N			
PROJECT TITLE:				
PRINCIPAL INVESTIGATOR:				
CO-INVESTIGATOR(S):				
PRIMARY CONTACT:				
NAME OF INSTITUTION(S):				
STREET ADDRESS:				
CITY:	STATE:	ZIP:		COUNTRY:
TELEPHONE:		EMAIL:		
WEBSITE (if applicable):				
FUNDING REQUEST INFO	RMATION	l		
		Amount requested:	\$	
		Committed match (if applicable):	\$	
	Tentative/anticipate match (if applicable		\$	
		Total research budget		

II. ABSTRACT

Please provide an abstract that provides an overview of your research proposal and contains the following sections. Maximum of 350 words.)

Rationale
Research Question(s)
Method
Specific Aim(s)
Significance

III. RESEARCH PROPOSAL

Please provide a brief narrative outlining your proposed research that includes the following sections. Be sure to address the project's anticipated outcomes and potential application to the practice of healthcare or the creation of healthcare environments. Add figures and tables as needed. Include formatted endnotes plus a bibliography. (Maximum of 2,500 words, excluding bibliography.)

- i. Background
- ii. Purpose
- iii. Research Methods
- iv. Expected Outcomes
- v. Significance
- vi. Practical Implications
- vii. Dissemination Plan

IV. RESEARCHER QUALIFICATIONS

Please provide a brief narrative for principal and co- investigators. List any potential conflicts of interest that may exist. If no conflict exists, please state that, 'The investigator declares that there is no conflict of interest.' (Maximum of 150 words per investigator).

Attach a	resume	of a	maximum	of two	nages	f∩r	each	inves	tiaat	or
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Researcher Qualifications
Role
Name

V. BUDGET

RESEARCH TITLE:							
PRINCIPAL INVESTIGATOR:					TELEPHONE:		
NAME OF INSTITUTION(S):					EMAIL:		
PROJECT PERIOD:					FAX:		
A. SALARIES AND FRINGE BENEFITS (ca	alculate salaries b	y using eith	er BILL RA1	E or % of FT	E)		
FIRST AND LAST NAME	TITLE	TOTAL HOURS OR % FTE	RATE	TOTAL WAGES	TOTAL FRINGE	FHER FUNDS	OTHER FUND SOURCES
				TOTAL			
B. CONTRACT SERVICES AND SUBCONT	RACTORS (if an	nlicable)					
B. COMMITTON CERTIFICATION OF CONTROL	TO TO TO TO (III up	ριισαρίο				FHER	OTHER
ITEM		DESCRIF	PTION		TOTAL COST	FUNDS	FUNDS
				TOTAL			
C. OTHER DIRECT EXPENSES							
TRAVEL EXPENSES		DESCRIF	PTION	TOTAL COST	FHER FUNDS	OTHER FUNDS	
				T0=++			
				TOTAL			

D. EQUIPMENT AND SUPPLIES									
		TOTAL	FHER	OTHER					
ITEM	DESCRIPTION	COST	FUNDS	FUNDS					
	TOTAL								
E. OTHER DIRECT PROJEC	T EXPENSES								
		TOTAL	FHER	OTHER					
ITEM	DESCRIPTION	COST	FUNDS	FUNDS					
	TOTAL								
TOTAL	TOTAL								
TOTAL DIRECT COSTS = A + B + C + D + E									

VI. TIMELINE

Please provide a list of anticipated research process steps. Provide an estimate indicating which month you intend to begin each task and when you will complete the task. Most awardees have undertaken studies of about one year.

	ANTICIPATED TASK START AND FINISH (By Month)											
TASK	1	2	3	4	5	6	7	8	9	10	11	12

VII. RESOURCES & ENVIRONMENT

FACILITIES & OTHER RESOURCES

Identify the facilities to be used (e.g., clinical, computer, office, simulation lab, existing datasets). 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 the proposed work. This information is used to assess organizational resources available to perform or support the effort proposed.

OTHER SUPPORT

Provide any letters of support or institutional commitment for the research project. Describe any additional collaborators, consultants or training that will be a part of the research proposal and include supplementary documentation as needed. Note that it is especially helpful to provide documentation demonstrating access to any research sites and/or datasets.

VIII. ETHICS

Designate if human subjects are involved, and if so, whether the proposed activities meet typical criteria for Institutional Review Board exemption. Applications that involve human subjects must include a 'Protection of Human Subjects' section that addresses the points noted below. Applications that are not proposing human subjects research but will use human data or biological specimens must provide a justification for the claim of no involvement of human subjects.

Requirements and Responsibilities. Research proposals that propose to involve human subjects must address:

- 1. the risk to subjects
- 2. the adequacy of protections against risk
- 3. potential benefits of the research to subjects and others
- 4. the importance of the knowledge to be gained
- 5. For clinical trials, data and safety monitoring plan and a data and safety monitoring board for Phase III trials

IX. BIBLIOGRAPHY

Please provide a bibliography in the format of your choice.

X. APPLICATION REQUIREMENTS CHECKLIST

(Please include the completed Application Requirements Checklist with application materials submission)

X	APPLICATION SECTION	COMMENTS						
	Application Cover Sheet							
	Abstract							
	Research Proposal							
	Background							
	Purpose							
	Research Methods							
	Expected Outcomes							
	Researcher Qualifications							
	Budget							
	Timeline							
	Resources & Environment							
	Ethics							
	Bibliography							
	Application Requirements Checklist							