



**CRN**

CANCER RESEARCH NETWORK

# **2014 Informational Webinar: Letters of Intent for CRN Scholars**

31 July 2014  
CRN Webinar

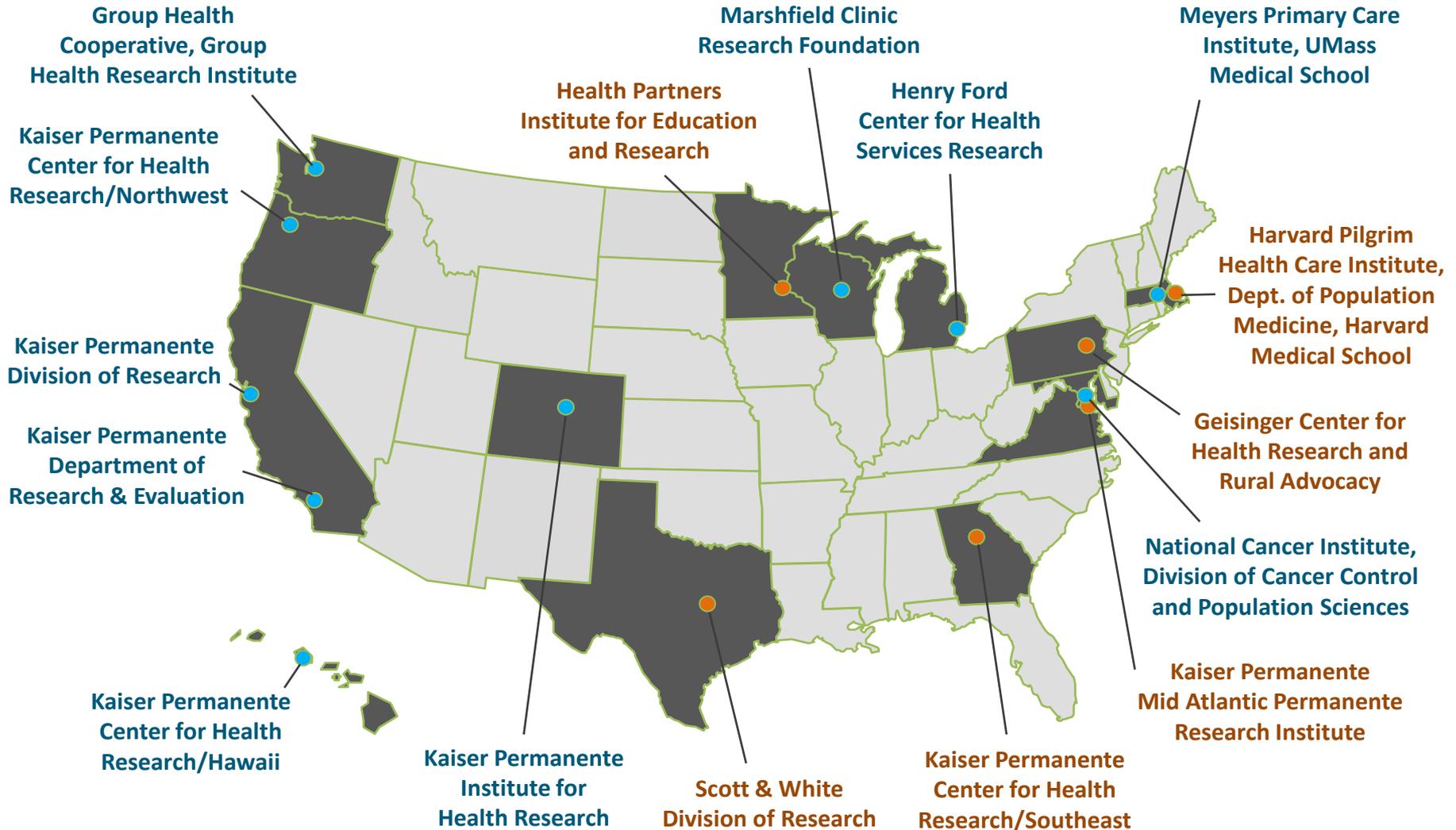
- What is the CRN
- CRN Scholars program overview
- CRN Scientific working group strategic directions
- Q&A



CANCER RESEARCH NETWORK

# The Cancer Research Network

## Participating & Affiliate HMO Sites



- 26-month training program
  - 2 cohorts of 8 Scholars (this is the 2<sup>nd</sup> cohort in this funding cycle)
- Assist Scholars in achieving two career landmarks:
  - 1<sup>st</sup> author on original research
  - PI on a successful R01 or equivalent grant set in the CRN
- Foster research careers that use integrated health care delivery systems
- Develop collaborations with researchers from non-CRN institutions to support use of CRN resources in their research

- Mentoring & linkages team
- In-person meetings
- Group conference calls
- Development of collaborative work
- Large group sessions at HMORN conferences
- Proposals for pilot study funding

# Required elements

- Meet NIH definition for junior investigator
  - Doctoral-level (MD/PhD or equivalent) researcher who is eligible to serve as a new investigator on an NIH R01 or equivalent grant
- 20% FTE available to participate
  - 10% FTE commitment from your Institution, 10% from NCI grant
- Mentoring team
  - Clear demonstration of commitment to your career and to your conduct of population-based cancer research within the CRN; supportive of collaboration with the CRN; commitment to your project from within the CRN
- Application is aligned with CRN research priorities
  - Prevention and Screening, Health Care Quality and Cost, Communication and Dissemination/Implementation, Epidemiology of Prognosis and Outcomes, and Informatics

- Meetings
  - 2 in person Scholars meetings/year
  - Twice monthly 90 minute Scholars webinars
  - Once monthly 60 minute 1:1 call with CRN Scholars Mentor (Terry or Diana)
  - Attendance at 2 in-person meetings per year
    - March 10, 2015 in Long Beach, CA, in conjunction with the HMO Research Network Conference, March 11-13
    - October 21, 2015 in Bethesda, MD, in conjunction with the CRN Steering Committee meeting, October 22-23 (Preliminary schedule, dates may change)
    - April 12, 2016 in Atlanta, GA, in conjunction with the HMO Research Network Conference, April 13-15
    - October 19, 2016, in Oakland, CA, in conjunction with the CRN Steering Committee meeting, October 20-21 (Preliminary schedule, dates may change)



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## CRN Scientific Working Group Strategic Directions

Alignment with these is an important  
review criteria for LOI and full  
application

## Research Priorities

- Communication: clinician-patient, intra-team, peer-to-peer communication; health literacy
- Decision Making: cognitive, social, and contextual factors that influence decision making
- Dissemination: communication practices to achieve awareness, interest, and adoption of interventions/innovations
- Implementation: barriers, facilitators, processes, and strategies that facilitate practice change and sustained use of interventions/innovations

*Co-led by Kathy Mazor (MPCI), Brian Mittman (KPSC/VA), and Russ Glasgow (University of Colorado)*

# Prevention & Screening Scientific Working Group

***Our mission is to facilitate research within the CRN to reduce the human and economic burden of cancer through improved prevention and early detection.***

**Douglas A. Corley, MD, PhD, MPH,**  
Division of Research, Kaiser  
Permanente Northern California

**Virginia P. Quinn, PhD, MPH,**  
Department of Research and Evaluation, Kaiser  
Permanente Southern California

**Tom Vaughan, MD, MPH,**  
Fred Hutchinson Cancer Research Center

## Research Priorities

- Interventions to promote healthy behaviors and improve adherence to medications
- Effectiveness studies on recommendations for screening
- Surveillance of diffusion of evidence-based screening technologies and vaccines
- Research to promote translation of effective interventions into usual care
- Etiological studies on environmental and drug exposures and cancer incidence

## Sample Study Topics

Breast, colon, cervical and lung cancer screening, prevention of breast and bladder cancer recurrence, tobacco control, diet, physical activity, obesity prevention, HPV vaccine, immunosuppressant and hormonal drug exposures.

**The vision of the HCQC SWG is  
accessible, effective,  
equitable, and affordable  
patient-centered cancer  
prevention and care**

## **Scientific Leadership**

**Mark C. Hornbrook, PhD**

Center for Health Research, Kaiser  
Permanente NorthWest

**Debra P. Ritzwoller, PhD**

Institute for Health Research,  
Kaiser Permanente Colorado

**Deborah Schrag, MD, MPH**

Chief, Division of Population  
Sciences, Department of Medical  
Oncology, Dana Farber Cancer  
Institute

## **Research Priorities**

- Quality of Care: measures, comparative effectiveness research
- Costs: data and measures of standardized costs; cost-effectiveness of cancer screening, treatment, or survivorship programs; effects of different organizational structures and delivery of cancer care on outcomes and costs
- Health-related Quality of Life: data and measures for research and clinical care
- Patient-Centered Outcomes Research: cost-utility analysis; patient preferences for decision-making, treatment, and survivorship

## **Examples of current HCQC SWG supported initiatives:**

CRN Scholar: “Lifetime costs of cancer care among U.S. patients in an integrated health care setting: Top 4 cancers,” (Mateo Banegas PhD, NCI Fellow).

CRN Pilots: “Identifying patients with elevated risk of chemotherapy-related hospitalization: validation and pilot testing of an EMR-based predictive tool” (Gabe Brooks, MD, MPH, Fellow, DFCI); and “Patterns of Care and Recurrence of Prostate Cancer” (Ramzi Salloum, PhD, Assistant Prof, Univ. So. Carolina)

# Epidemiology of Prognosis and Outcomes (EPO) SWG

- **Leadership:**
  - EPO SWG Co-leads: Heather Feigelson PhD (KPCO), Elizabeth Loggers, MD PhD (GHRI)
  - EPO SWG External Co-lead: James Cerhan PhD (Mayo)
  - Project manager: Sarah Madrid
- **Research interests:**
  - Personalized cancer medicine
    - Prognostic and predictive data (including genetic, genomic, molecular, and bio-specimen data), risk stratification
    - Pharmaco-genomics
    - Risk factors and lifestyle
    - Comparative effectiveness and traditional CRN data
  - Development and evaluation of (multi-level) interventions and comparative effectiveness research in cancer treatment
  - Patient reported measures and outcomes
  - Cancer survivorship
    - Long-term consequences of cancer treatment
    - Care coordination and survivorship care
    - Recurrence
    - Quality of life, communication and family burden
  - Supportive and palliative cancer care

- Support development and understand of CRN data resources
- Data quality assessment, improvement, and expansion
- Data Users Guide
- Preparatory-to-research requests
  - SAS programs
  - CRNnet query tool
- Guidance on appropriate use of CRN data resources

*Co-led by Jeff Brown (HPHCI), Jessica Chubak (GHRI), and  
Diana Miglioretti (UC Davis)*

Date	Event
Jul 22, 2014	Call for Applications released
Jul 31, 2014	Informational Webinar (today)
Sep 15, 2014, 5 pm PDT	Required Letters of Intent due
Oct 9, 2014	Peer review of LOI due
Oct 13, 2014	LOI applicants notified of decision
Oct 27, 2014	Connections for applicants with CRN collaborators
Dec 1, 2014, 5 pm PST	Full applications due
Jan 14, 2015	Peer review process completed
Jan 15, 2015	Applicants notified of decision
Mar 10, 2015	Project Start Date

# Letter of Intent: Submitted through online portal

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- Letter of Intent (LOI) is required
- Not all those who submit a Letter of Intent will be invited to submit a Full Application

**LOI due date: Monday, September 15, 2014, 5 pm PDT**

Online LOI submission form:

<https://adobeformscentral.com/?f=t3BIJbW9jgTS68BfCvCRCQ#>

# LOI Specifics

Component	Instructions
<b>Applicant and mentor information</b>	<ul style="list-style-type: none"> <li>• Use online submission form</li> <li>• Applicant education and experience</li> <li>• Mentoring team</li> </ul>
<b>Statement of research interests and career goals</b>	<ul style="list-style-type: none"> <li>• Page limit: 1 page</li> <li>• Describe your research interests and career goals as they relate to conducting population-based research for the Scholars Program</li> <li>• Outline how your research is aligned with one or more CRN strategic focus areas.</li> </ul>
<b>Proposed project</b>	<ul style="list-style-type: none"> <li>• Page limit: 1 page</li> <li>• Describe the project or grant application you plan to work on during the CRN Scholars Program, including:               <ul style="list-style-type: none"> <li>○ Significance and approach</li> </ul> </li> </ul>
<b>Applicant CV</b>	<ul style="list-style-type: none"> <li>• Include all publications (including submitted manuscripts) and grants (either submitted or funded, with organization, type of grant, and your role)</li> </ul>
<b>Biosketches</b>	<ul style="list-style-type: none"> <li>• Provide biosketches for all mentors named on the cover page.</li> <li>• Use NIH format, no more than 4 pages per biosketch.</li> <li>• Mentors should provide a statement of the commitment to mentoring the applicant for the applicant in Section A, Personal Statement.</li> </ul>

- Screened for eligibility
  - Meets NIH criteria for New and Early Stage Investigator status
- Responsiveness to basic program elements
  - Commitment to career in population-based cancer research
  - Research interests aligned with CRN SWG strategic focus

Reviewed by team including representatives from SWGs, NCI programmatic staff, CRN Executive Committee and Scholars co-directors

# Mentoring team

- The strength of the mentoring team is critical to Scholars' success and is an important review criteria for LOI and full application. **The mentoring team should include at least one individual and all of the following roles:**
  - Primary local mentor – based at your institution, clear demonstration of commitment to your career and to your conduct of population-based cancer research within the CRN, supportive of collaboration with the CRN
  - Content expert – has expertise in your research area
  - CRN collaborator – based at a CRN/HMORN site, experienced in multi-site CRN/HMORN studies, is enthusiastic about your proposed project and committed to helping you move it forward

# Full application

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- Applicant information
- Research interests and career goals
- Proposed project
- Mentoring plan
- Biosketches:
  - CRN Collaborator
  - Additional members of mentoring team
- Letters of support:
  - Department head
  - Primary local mentor
  - CRN collaborator
- Applicant CV
- Primary mentor CV

- Who
  - 3 or more reviewers: internal and external to CRN, including at least 1 content expert and NCI representative
- How:
  - Evaluation using NIH training grant criteria
  - Independent review with full selection committee evaluating the independent evaluations and scoring
  - Final recommendations will be reviewed by the CRN Steering Committee for approval

- CRN collaborator:
  - Required member of the mentoring team
  - Investigator at a CRN or HMORN site with experience in multi-site studies
  - Committed to working with the applicant on their project over the course of the program
  - Not required to be an expert in the applicant's area of interest
  - Must be identified on full application, not required for LOI. Letter of support from CRN collaborator is recommended.
- Process for linking:
  - CRN will identify potential CRN collaborators for applicants who are invited to submit full applications whose primary appointment is not at a CRN site
  - Applicants are responsible for following up with contacts and determining who will be included on application (gauge commitment, etc.)
    - Invitations to submit full applications – Oct 13
    - Introductions to potential CRN Collaborators – Oct 27
    - Full applications due – Dec 1



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## Questions?

FYI: Responses to FAQs will be  
continuously updated:

<http://crn.cancer.gov/about/faq.html>