

# Office of Nursing Research

Volume 2, Issue 1

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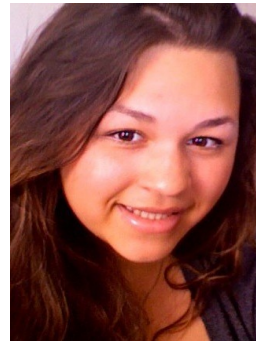
- Entrepreneurial Facts!

## UNDERGRADUATE RESEARCHERS

This year the SoN and the ONR are emphasizing undergraduate research. In the past the School and ONR have subsidized students traveling to do presentations and have funded students doing poster sessions. This year three awards were made to undergraduate students by the Research Committee for mentored research projects. The three awardees are **Magdaline Diaz** (Latino food choices: Relationship to income, access, and culture), **Janan McCormick** (Development of normative vaginal length data with the vaginal sound), and **Xiao Kang** (Nurse job satisfaction, burnout and quality of care in China). We also have been awarded Fuld moneys to help undergraduates and their mentors who are interested in completing a two year emphasis on research (see inside for details).



Xiao Kang



Magdaline Dias



Janan McCormick

UPCOMING RESEARCH  
COLLOQUIA



**1/25/12** *Delirium is a Powerful Expression—Let's Spread the Word!* - Donna Fick, PhD, RN, FGSA, FAAN, Professor of Nursing, School of Nursing (Co-sponsored by the SoN Hartford Center for Geriatric Nursing Excellence)

**2/8/12** *REDCap (Research Electronic Data Capture)* - Marianne R. Chilutti Research Data and Reporting Manager CHOP Center for Biomedical Informatics

**2/15/12** *Autism Research* - Lawrence Scahill, PhD, Professor Yale SoN

**2/22/12** *Sigma Theta Tau Spring Scholarly Program*

**3/14/12** *Gene-Environment Interactions for Hypertension among African American Women across the Lifespan* - Jacquelyn Taylor, PhD, PNP-BC, RN, FAAN Associate Professor, Yale University SoN

**4/4/2012** *Not for Asian Girls: Asian American Women's Perspective on Physical Activity*, Eun-Ok Im, PhD, MPH, RN, CNS, FAAN Professor, SoN UPenn, (Co-sponsored by SoN Office of Diversity)

**4/11/2012** *Targeted Therapies for the Treatment of Chronic Pain*, Susan G. Dorsey, PhD, RN, FAAN, Associate Professor of Nursing University of Maryland Director, University of Maryland Center for Pain Studies.

**Martha Curley, PhD, RN, FAAN (PI)** *Half-pint: Heart and lung failure – Pediatric insulin titration trial and Children’s Hospital of Boston Center of Quality Measurement* funded by Children’s Hospital of Boston.

**Mary Ersek, PhD, RN, FAAN (PI)** *VA comprehensive end-of-life care’s PROMISE Center* funded by the Department of Veteran Affairs.

**Karen Hirschman, PhD, MSW (PI)** *Palliative needs of cognitively impaired patients during health care transitions* funded by NIA(R03).

**Eileen Lake, PhD, RN, FAAN (PI)** *The comparative effectiveness of hospital nursing resource configurations* (KMI Career Development Award).

**Jianghong Liu, PhD, RN (PI)** *Mechanisms that mediate the link between lead exposure and child behavior* funded by NIEHS (Five Year, K02 Independent Scientist Award).

**William McCool, PhD, CNM, RN (PI)** *Educating Nurse-Midwives: An ethnographic qualitative investigation of variables leading to best practices in midwifery in developing nations* funded by University Research Foundation.

**Matthew McHugh, PhD, JD, MPH., RN, CRNP (PI)** *Nurse Faculty Scholar Award* - funded by Robert Wood Johnson Foundation and *Hospital care environment, neighborhood, and racial disparities in elder outcomes* - funded by Office of Behavioral and Social Sciences Research (R01).

**Barbara Medoff-Cooper, PhD, CRNP, FAAN, RN (PI)** *Transitional telehealth home care: REACH* funded by NINR (R01)

**Mary Naylor, PhD, RN, FAAN (PI)** *New care delivery model for older adults with multiple chronic conditions* funded for two years by Gordon and Betty Moore Foundation, the Jonas Center for Excellence, and the Rita and Alex Hillman Foundation.

**Barbara Riegel, DNSc, RN, FAAN, FAHA (Co-I) B. Abella (PI)** *Implementation of cardiopulmonary resuscitation training for at-risk families* funded by NHLBI (R18)

**Diane Spatz, PhD, RN-BC, FAAN (Co-I) D. Torowicz (PI)** *The role of human milk and breastfeeding in the cardiac intensive care unit* funded by National Association of Pediatric Nurse Practitioners and CHOP.

**NRSA**

**Kamila Alexander, PhD(c), MPH, RN**  
**Lauren Massimo, PhD(c), MSN, RN**

**Susan Lysaght, PhD(c), GNP-BC, ACHPN**  
**Matthew Lucas, PhD(c), MS, MA, RN**

## UPDATED PAYLINES\* AND SUCCESS RATES\*\* FOR FEDERAL INSTITUTION

\* Paylines are determined by NIH formula based on number of applications reviewed, amount grant \$, average grant costs and can change within a year. Normally, you will receive the grant if you are below the payline. Paylines can increase at the end of the year if more moneys are available.

\*\*Success rates are defined as the percent of applications awarded compared with the total number of applications received.

| NIH Institute  | R01 New/ Early- Investigator     | R01 Established Investigator | Other R <sub>1</sub> /K <sub>1</sub> /F <sub>1</sub> |
|--|----------------------------------|------------------------------|--|
| <b>National Institute of Nursing Research (NINR)</b>                     | 17%**                            | 17%**                        | R21-9%**;F31-39%**;K99-50%**                         |
| <b>National Cancer Institute (NCI)</b>                                   | 10*                              | 7*                           |  |
| <b>National Health, Lung and Blood Institute (NHLBI)</b>                 | 26*                              | 16*                          | R03/21 16*;K's/F31,32,33-30*                         |
| <b>National Institute on Aging (NIA)</b>                                 | 14-16* < 500k/11<br>13* > \$500k | 11* < 500k<br>8* > 500k      |  |
| <b>Nat. Inst. on Drug Abuse (NIDA)</b>                                   | 20%**                            | 20%**                        | R21-17%**; F31-34%**;K99-31%**                       |
| <b>Nat. Inst. Diabetes &amp; Digestive &amp; Kidney Diseases (NIDDK)</b> | 19*                              | 17*                          |  |
| <b>Nat. Inst. of Mental Health (NIMH)</b>                                | 25%**                            | 25%**                        | R21-16%**; F31-26%**;K99-39%**                       |
| <b>Nat. Inst. Neurological Disorders &amp; Stroke (NINDS)</b>            | 14*                              | 15*                          |  |
| <b>Nat. Inst. Child Health &amp; Human Develop. (NICHD)</b>              | 17%**                            | 17%**                        | F31-43%**;K99-39%**                                  |
| <b>Fogarty International Center (FIC)</b>                                | 30%**                            | 30%**                        | R21-25%**  |
| <b>National Library of Medicine (NLM)</b>                                | Merit Score > 39                 | Merit Score >29              | K99-Merit Score >40                                  |
| <b>Nat. Inst. Health &amp; Health Disparities (NCMHD)</b>                | 7%**                             | 7%**                         | R21-10%**  |

A full list of Paylines and Success Rates can be found on our Intranet page under link <https://share.nursing.upenn.edu/sites/onr/default.aspx>

# F(uld)OUR GRANTS FOR UNDERGRADS

## FOUR (Fuld Opportunity for Undergraduate Research)

The purpose of the FOUR program is to train undergraduates in four research competencies.

1. In depth understanding of the process of hypothesis driven research.
2. In depth knowledge of the way that regulatory compliance fits into the overall research procedure.
3. Knowledge of data collection and analysis techniques using data collected by the students themselves.
4. Knowledge of how to communicate and present research results.

The program is targeted to students who have not had previous research funding or are changing mentors.

This new program funded by the Helene Fuld Health Trust will support five undergraduates. Each student will receive a stipend of \$1,500.00 and an additional \$500 for research supplies to be used to complete the research project. The faculty mentor will receive \$1,000.

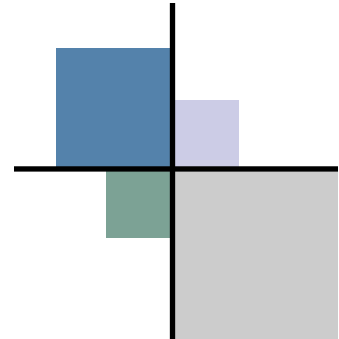
The program is structured to take two years (normally junior and senior years); the student must have received or have had training in statistics and research methods and would take Independent Study and Senior Symposium to complete the project.

Final submission application date is February 15th, 2012.

Applications are available through the ONR and you can contact

Candice Cozart at [cadicem@nursing.upenn.edu](mailto:cadicem@nursing.upenn.edu)

for paper or electronic applications and program information.



## Responsible Conduct of Research Training

ONR is sponsoring **6 research integrity seminars (1.5 hrs. each)** this year as a pilot program to meet NIH requirements for RCR training.

The policy requires all trainees, fellows, participants and scholars receiving support through any NIH training, career development award, research training grant or dissertation research grant to receive instruction (minimum of 8 hrs.) in Responsible Conduct of Research beyond the broad online training programs (CITI).

The details of the requirements can be found at the following link.

<http://grants.nih.gov/grants/guide/notice-files/NOT-OD-10-019.html>

ONR is required to track compliance with this policy. This pilot program will supplement the training that already occurs within the school's centers and departments. ONR will work with mentors and program directors to document other qualified sessions.

If you attend programs that comply with the policy, you will receive a certificate documenting your compliance.

### Upcoming RCR Training:

12/1/11 Rm. 218

\*Mentee/Mentor Relationships\*

2/2/12 Rm. 213

\*Authorship\*

3/22/12 Rm. 218

\*Conflict of Interest\*

4/19/12 Rm. 213

\*Maintaining Scientific Integrity\*

## Sr. Grants Business Manager: Alicja Nalewajek



Alicja Nalewajek  
Sr. Grants Business Manager  
Years at Penn: 14  
Years at Nursing: 5

Background: Actuarial Science & Management. Prior to coming to the Nursing School, Alicja worked for the Office of Research Services and the Perelman School of Medicine, Division of Endocrinology, Diabetes & Metabolism.

Alicja works specifically with the BHS faculty and students. She also manages the budgets for the IR Lab and the Statistical Services Office.

Alicja lends her expertise to the variety of academics who demonstrate different degrees of experience and levels of understanding of financial and budget processes.

Finally, Alicja's favorite ways to spend her time away from work include exercising and "traveling alone to any island and indulging in the customs of the native islanders".

# How does Statistical Support Work?

## Effective Communication between the Researcher and the Statistician by *Alexandra L. Hanlon, PhD, Research Associate Professor*

Solid quantitative research relies on effective communication between a researcher and the statistician. Several articles have addressed the kind of transaction needed between the scientist and statistician (Moses and Louis, *NEJM Books* 1992; Moses and Louis, *Stat Med* 1984; Boen and Zahn, 1982; Hand and Everitt 1987; Baskerville 1982). I outline points made by Moses and Louis here.

The joint effort may extend over some time and should begin with development of the specific aims. At a recent joint American Statistical Association conference, it was quoted that the preparation of a strong R01 application requires an average of 60 hours dedi-

cated to the clinician scientist-biostatistician cooperative interaction (Matthew Mayo, Professor and Chair, Department of Biostatistics, KU Medical Center, *JSM*, 2011).

Iterative communication is necessary for effective products of scientific inquiry. The statistician must gain a complete understanding of the substantive problem, and the researcher needs to grasp the essential statistical features of the project. Both parties should check their understanding of the underlying concepts by iteratively re-framing their newly acquired knowledge back to their counterpart until an acceptable level of understanding is achieved.

Each partner should have high expectations with respect to clarity. Jargon on either end is an impediment in the communication process. Each collaborator should be prepared to do reading in the other's field, and each partner should take care not to omit topics that appear irrelevant in an effort to

minimize complexity. It may even be advantageous at an appropriate stage in the collaboration for one of the partners to attend a relevant meeting of the other's colleagues; such meetings, as a result of a deeper understanding, often result in novel ideas and/or constructive criticism.

Although thorough communication requires significant time and effort, it is the foundation of good science. Good communication is broad, specific, and iterative. Establishing contact with your statistician early on in the research process as the aims are formulated is essential to minimizing statistical flaws, and could also result in both cost and time savings.

**To request statistical support**, please visit the ONR website and click on the "Request for Statistical Support" link.

## NINR Strategic Goals - New Funding Opportunities

NINR will focus its funding on proposals that match its priorities as evidenced by both the **concept** and **methods** proposed. The SoN researchers can help to increase their likelihood of obtaining funding from NINR by targeting not only the concepts specified but also by paying attention to the methods discussed.

NINR will give priority in funding to the following **methods** of research: clinical interventions; translational and imple-

mentation research approaches; comparative effectiveness studies; and analyses of cost, outcomes, and quality of care.

Additionally, NINR has indicated that it will "focus on basic research, seeking to improve knowledge of underlying biological systems, including the genetic and genomic contributions to symptoms (such as pain) and to health conditions (such as obesity)".

**Conceptual** areas to be targeted for

funding by NINR will include end of life and palliative care, chronic illnesses, health promotion, preventative care, examining complex systems, health self management and personalized interventions, new technologies and informatics based solutions.

Finally, NINR indicates an interest in interdisciplinary research which means that more competitive proposals could include connections with scientists outside of nursing in areas such as engineering, imaging, and genetics. <http://www.ninr.nih.gov/AboutNINR/NINRMissionandStrategicPlan/>

## Recent Calls for Proposals

**NIH Director's Early Independence Awards (DP5) (RFA-RM-11-007)** supports exceptional investigators pursuing research directly after terminal doctoral degree. **LOI due 12/30/11 App. Due 1/30/12 (5 years, \$250 k per/yr).**

**Implications of the Economic Downturn for Health, Wealth, and Work at Older Ages (R01) (PA-12-009)** National Institute on Aging Application Receipt/ Submission Date(s): Multiple dates, see announcement.

**NIMH Research Education Programs for HIV/AIDS Research (R25)PAR-11-002** Organizations that propose creative and innovative research education programs to facilitate the development of a cadre of investigators in appropriate scientific areas to fulfill the mental health relevant objectives as defined by the Office of Aids Research (OAR) Annual Strategic Plan. **LOI due December 7th; application January 7th.**

If you are interested in having announcement/calls directed specifically to you and your research areas, please email [sherrigk@nursing.upenn.edu](mailto:sherrigk@nursing.upenn.edu).

<http://grants.nih.gov/grants/guide/pa-files/PAR-11-002.html>

OFFICE OF NURSING RESEARCH

# DOES MY RESEARCH NEED INSTITUTIONAL REVIEW (IRB)?

It is always best to assume you need a review for either human or animal (not discussed here) research unless it is clearly outside of the definition of human (animal) research.

**Human research:** Meets the DHHS/FDA definition of "Research" and involves one or more "Human Subjects" as defined by DHHS/FDA regulations.

**Research** -systematic investigation, including research development, and testing and evaluation, designed to develop or contribute to generalizable knowledge.

**Human Subject** - an individual about whom an investigator conducting research obtains data through intervention or interaction with individual or

identifiable private information.

**Student Projects?** Generally, student research involving human subjects falls into one of two categories:

Research Practica, the goal of which is to provide research training and does not require IRB review; and Directed or independent Research Projects (e.g., honors or graduate theses), which employ systematic data collection with the intent to contribute to generalizable knowledge which do require IRB review and approval.

## Oral History?

Oral History is a technique in which researchers conduct interviews with participants in a particular historical event. When such activities are designed to reconstruct the history of an event or period, then the project is not designed to develop or contribute to generalizable knowledge and the project is not research and does not need IRB review. Oral history that involves the



testing or confirmation of a hypothesis may be research. Such activities should be brought to the IRB for a determination of whether the activity is human research.

**Medical Case Reporting?** Per institutional policy, the review of medical records for publication of "case reports" of typically three or fewer patients is not considered human research and does not typically require IRB review.

For more information as to whether an activity is research involving human subjects, go to: [www.hhs.gov/ohrp/humansubjects/guidance/decisioncharts.htm](http://www.hhs.gov/ohrp/humansubjects/guidance/decisioncharts.htm).

## Activities that fit the categories below do NOT need IRB review.

1. Data collection for internal departmental, school, or other University administrative purposes. 2. Information-gathering interviews and research where questions focus on processes, services, or policies and do not gather information about living individuals. 3. Innovative therapies that do not involve investigational test articles (drugs or devices not approved by FDA) except when they involve "research" as defined by the above criteria. An innovative clinical practice is an intervention designed solely to enhance the well being of an individual patient or client. The purpose of an innovative clinical practice is to provide diagnosis, preventative treatment, or therapy to particular individuals. Note: When innovative therapies differ significantly from routine practice it should be viewed and treated as such with appropriate safeguards in place to protect the rights and welfare of the patients. 4. Quality improvement projects are not research unless designed to develop or contribute to generalizable knowledge. 5. Coded private information or biological specimens that were not collected for the currently proposed projects do not need IRB review as long as the investigator cannot link the coded data/specimens back to individual subjects. 6. Research where Penn is not engaged in research does not require IRB review. Some examples include: when an institution's employees or agents act as consultants on research but at no time obtain, receive, or possess identifiable private information, perform commercial services for the investigators, or inform prospective subjects about the availability of research. 7. Research involving cadavers, autopsy material or bio-specimens from deceased individuals.

## Entrepreneur's Corner

### Did You Know...? Disclosing an invention to CTT will NOT prevent you from publishing or disclosing your research.

CTT will review your disclosure and if necessary, file a Provisional Application in accordance with your publication plans. Once it is filed, your invention is protected and you can carry on with any publications or other disclosures. Any CTT licensing officer would be happy to discuss these issues with you individually.

*What is a Provisional Application?* A **Provisional application** allows the applicant to establish a filing date by "locking in" potential patent rights while the invention is further developed. It does not mature into an issued patent, and automatically expires one year after it is filed. A non-provisional application must be filed, claiming benefit of the provisional prior to its expiration.

If any questions arise, please feel free to contact CTT at 215-898-9591 or ORS at 215-898-7293. <http://www.ctt.upenn.edu/>



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**SCHOOL OF NURSING**

we're on the web at

[http://  
 www.nursing.upenn.edu/  
 research/Pages/default.aspx](http://www.nursing.upenn.edu/research/Pages/default.aspx)

## RESEARCH NEWS

- **Publication of the Revised NIH Grants Policy Statement (Rev. 10/1/2011): Policy Changes, Clarifications and Document Enhancements** This revision does not introduce any new material for the first time; it incorporates new and modified requirements, clarifies certain policies, and implements changes in statutes, regulations, and policies. [http://grants.nih.gov/grants/policy/nihgps\\_2011/index.htm](http://grants.nih.gov/grants/policy/nihgps_2011/index.htm)
- **Notice of New NIH Term of Award on Transparency Act Subaward and Executive Compensation Reporting Requirements (NOT-OD-11-005)** The Transparency Act also includes a requirement for recipients of Federal grants to report information about first-tier subawards and executive compensation under Federal assistance awards. All recipients of applicable NIH grants and cooperative agreements are required to report on all subawards over \$25,000 to the Federal Subaward Reporting System (FSRS) available at [www.FSRS.gov](http://www.FSRS.gov). This must occur no later than the end of the month following the month in which the obligation was made. <http://grants.nih.gov/grants/guide/notice-files/NOT-OD-11-005.html>
- **Update of NIH Late Application Policy to Reflect Change in Due Dates for New Investigator R01 Resubmission Applications**  
 NIH will not consider accepting late applications for RFAs and PARs that have special receipt dates. This includes the special receipt dates (March 20, July 20, and November 20) for resubmission applications that are part of the New Investigator Initiative (<http://grants.nih.gov/grants/guide/notice-files/NOT-OD-07-083.html>). However, there is a new timetable for the New Investigator resubmission applications as announced in NIH Guide Notice OD-11-057 (<http://grants.nih.gov/grants/guide/notice-files/NOT-OD-11-057.html>) and those dates are the ones that apply as special receipt dates with no window of consideration for late applications.
- **NINR Strategic Plan Announced:** A copy can be found at <http://www.ninr.nih.gov/AboutNINR/NINRMissionandStrategicPlan/>

## NIH Submission Dates

| Mechanism(s)   | Cycle I Due Date          | Cycle II Due Date                     | Cycle III Due Date                |
|--|---------------------------|---------------------------------------|-----------------------------------|
| R01 (new)  | February 5                | June 5                                | October 5                         |
| K Series (new)   | February 12               | June 12                               | October 12                        |
| R03, R21, R33, R21/R33, R34, R36   | February 16               | June 16                               | October 16                        |
| R01 (renewal, resubmission, revision)  | March 5                   | July 5                                | November 5                        |
| F Series Fellowships (new, renewal, resubmission)  | April 8                   | August 8                              | December 8                        |
| F31 Diversity Fellowships (new, renewal, resubmission)   | April 13                  | August 13                             | December 13                       |
| AIDS and AIDS-Related Applications (All Mechanisms Cited Above [new, renewal, resubmission, revision]) | May 7<br>(old date May 1) | September 7<br>(old date September 1) | January 7<br>(old date January 2) |
| <b>Review and Award Cycles</b>   | <b>Cycle I</b>            | <b>Cycle II</b>                       | <b>Cycle III</b>                  |
| Scientific Merit Review  | June - July               | October - November                    | February - March                  |
| Advisory Council Review  | October                   | January                               | May                               |
| Earliest Project Start Date  | December                  | April                                 | July                              |