

■ CALL FOR PROPOSALS



**Assessing new tools for chronic disease
management and health behavior change**

THE
ROBERT WOOD JOHNSON
FOUNDATION

Summary

The *Health e-Technologies Initiative* is a new \$10-million national program of The Robert Wood Johnson Foundation® (RWJF) that supports research to evaluate the effectiveness of eHealth applications in improving health behaviors and chronic disease management. Health e-Technologies will explore the unique evidence-based capabilities of these new technologies (i.e., personalized and tailored communications) to support actual health behavior change and chronic disease management, as well as enhancing patient-provider interactions.

A total of \$7.25 million will be awarded under this program in two categories: short-term, six- to 12-month grants of up to \$100,000 to help address methodology and design challenges related to the scientific evaluation of eHealth applications; and longer-term, grants of up to \$600,000 for as many as three years to evaluate the efficacy of applications designed to produce and/or maintain health behavior change or to enhance patient self-management of chronic disease. Approximately two-thirds of the overall funds will be awarded through this 2002 Call for Proposals (CFP). The remaining funds will be awarded in 2003 through a second CFP.

The *Health e-Technologies Initiative* will accept applications from public and private institutions (no individuals), including both nonprofit and for-profit organizations. The applicant organization and the proposed program under evaluation must be based in the United States or its territories.

Background

Consumers, patients and providers are increasingly using eHealth applications, particularly the Internet, to seek health information for themselves or family and friends, communicate with others who have a similar disease or illness, and to be in contact with their health care providers. For the purpose of this program, eHealth is specifically defined as the use of emerging information and communication technologies (e.g., the Internet, interactive TV, interactive voice response systems, kiosks, personal digital assistants [PDAs], CD-ROMs, DVD-ROMs) to enable and improve health and health care services. These technologies offer people the ability to obtain and use reliable health information at relatively low cost. They hold special promise for those who have limited or no access to health care professionals or services, and for historically underserved populations.

According to a recent *Cyber Dialogue* report, Internet users seeking health information and health care services will more than double from 2000 to 2005, involving 88.5 million people. In addition, the increasing use of Internet-based devices, cellular phones and PDAs creates unique opportunities for both patients and providers to benefit from ready access to eHealth applications for health behavior modification and chronic disease management in nontraditional settings. In addition, health care organizations are using these technologies to improve the reach and efficacy of self-management programs and to enable enhanced communication between patients and providers.

Although numerous health Web sites are available and some eHealth applications and interactive technologies look promising, greater understanding and more rigorous evaluation are needed to assess the quality and effects of those that are designed specifically to change health behaviors and improve chronic disease management. Research is also needed on the behavior of providers in adopting and utilizing these technologies with their patients. The *Health e-Technologies Initiative* will evaluate promising new interventions and provide the evidence base and knowledge required to build better eHealth programs.

The Program

The goals of the *Health e-Technologies Initiative* are to expand the body of knowledge about the efficacy, costs, cost-effectiveness and overall quality of eHealth applications currently in use for health behavior change and chronic disease management, and to expand the body of knowledge about how to evaluate, compare and improve them. The program will therefore support research that evaluates existing eHealth applications, research that results in new methods and measures for evaluating eHealth programs, and research that furthers our understanding of how to assess and compare the costs and cost-effectiveness of eHealth programs. **Funds are not available for the development of eHealth applications.**

The *Health e-Technologies Initiative* will support scientific research on promising eHealth applications that are designed to improve interactions between consumers and patients and (1) providers or provider-based networks, (2) health care organizations, (3) voluntary and community organizations, and (4) partnerships among any of these entities. Studies that assess efforts to reach specific populations, including ethnic and racial minorities, older adults, low-income families and disabled people, are particularly encouraged.

There are two funding categories: **Methodology and Design Grants** and **Outcome Evaluation Grants**.

1. **Methodology and Design Grants**
Duration: six to 12 months
Amount: Up to \$100,000 per grant

Funds awarded in this category will support research that explores methodological and design questions relating to the evaluation of eHealth applications for health behavior change and chronic disease management. Proposals should focus on one of the following priorities:

- Refining or developing methods, measures, instruments and data analysis approaches for evaluating the effectiveness and efficacy of eHealth applications.
- Refining or developing research designs that accommodate unique aspects of eHealth applications.
- Evaluating innovative research paradigms.
- Developing strategies and methods that increase access to eHealth applications for specific, and often underserved, populations.

- Improving methods for evaluating the costs and cost-effectiveness of the adoption and use of eHealth applications.

2. *Outcome Evaluation Grants*

Duration: Up to 36 months

Amount: Up to \$600,000 per grant

Funds awarded under this category may be used to conduct systematic outcome evaluations of existing eHealth applications for health behavior change and chronic disease management. Outcomes of interest include changes in consumer/patient and clinician behaviors and relationships, individual and population health status, cost and societal impact, and organizational changes. Proposals that include multiple outcome measures are highly encouraged. Proposals should focus on evaluation of one of the following types of applications:

- *Behavior Change* – applications that teach/communicate/support specific health behaviors, such as physical activity, proper nutrition, tobacco cessation, nonviolence, use of safety devices and healthy sexual behaviors.
- *Chronic Disease Management* – applications that enhance self-management skills and strategies for coping with and managing chronic diseases and conditions (e.g., heart disease, asthma, HIV/AIDS, cancer, diabetes, mental illness, pain). Ideally, applications should enable consumers and patients to take a more active, primary role in monitoring and controlling their own condition.

Because the initiative seeks to broaden the scope of dialogue and scientific inquiry in the field of eHealth applications for health behavior change and chronic disease management, in order to be funded, all grantees must agree to make public specific data from their projects. These will include:

- A description of the project being funded including experimental design, a general explanation of the technology under review and aggregate data about study participants.
- The organizations, grant partners and the principal investigator to whom funds have been awarded.
- The amount of funds awarded.
- All results and data generated under the grant

(i.e., sample characteristics, attrition rates, outcomes) subject to RWJF's general requirement for producing data files for public use.

- Measures, instruments, tools, models or methodologies developed under the grant.

Applicants will be responsible for complying with their host organization's Institutional Review Board policies and procedures, as well as federal Health Insurance Portability and Accountability Act regulations, where applicable.

RWJF recognizes the importance of protecting proprietary and patented technologies that might be utilized for grants under this program. Grantees will not be required to provide data regarding the research and development stages of any technologies being tested (i.e., activities that occurred prior to the funding period). However, all events and activities outlined in proposal applications, as well as data generated from the work, are considered appropriate information that may be shared. Any proprietary concerns about data sharing for technologies being tested under this program should be specifically addressed in the application process. Applicants will be instructed to identify those sections of their proposals that contain proprietary information.

While the *Health e-Technologies Initiative* will help grantees disseminate the results from studies funded under this program, grantees are strongly encouraged to publish their findings under their own auspices.

Eligibility Criteria

The *Health e-Technologies Initiative* will accept applications from public and private institutions (no individuals), including nonprofit and for-profit organizations. The applicant organization and the proposed program under evaluation must be based in the United States or its territories.

Selection Criteria

In addition to the criteria listed below, the *Health e-Technologies Initiative* will try to achieve a diversity of grantees based upon funding categories, types of technologies studied, prevention goals, and health behaviors and chronic disease topics targeted.

Criteria used to assess eligible proposals for both funding categories described above will include how clearly, completely and vigorously the proposal:

- Demonstrates the purpose and significance of the topic and potential benefits of the proposed study.
- Documents the strength, skill set and experience level of the principal investigator and/or the research team.
- Delineates the basis for and nature of all collaborations/partnerships, if any are proposed.
- Documents the financial viability of the host organization for successfully completing the proposed project.

For Methodology and Design Grants, additional criteria include how well the proposal:

- Focuses on a methodological or design topic relevant to the evaluation of eHealth applications.
- Includes an appropriate methodology within the scope of work.
- Makes a compelling case for the potential utility of the methodology or design advance, including the likelihood that the resulting measure/methodology could be used by other researchers.
- Describes a dissemination strategy for the measure or methodology.

For Outcome Evaluation Grants, additional criteria include how the proposal:

- Defines the methodology and evaluation plan (design, measures, analysis) and establishes its feasibility for the topic and technologies under study.
- Is likely to produce generalizable and replicable results.
- Describes plans for sustainability of the eHealth application under review, if it is shown to be effective.

For both categories of funding, in-kind resources and collaborations with other funding sources are strongly encouraged, but are not necessary for grants to be awarded. However, the initiative recommends collaborations as a

means of pooling human and financial resources and knowledge, and will look favorably upon proposals with convincing and clearly delineated cooperative efforts.

Use of Grant Funds

Project funding will be commensurate with the size and scope of the proposed activities. Grant funds may be used for project staff salaries, consultant fees, data collection and analysis, meetings, supplies, project-related travel, and other direct costs, including a limited amount of essential equipment. Funds under the *Health e-Technologies Initiative* may not be used for the development of eHealth applications. In keeping with RWJF policy, grant funds may not be used to subsidize individuals for the costs of their health care, to support clinical trials of unapproved drugs or devices, to construct or renovate facilities, for lobbying, or as a substitute for funds currently being used to support similar activities. Principal investigators are expected to participate in annual grantee meetings, and funds for such meetings should be included in the proposed budget.

Program Direction

Direction and technical assistance for the *Health e-Technologies Initiative* are provided by Brigham and Women's Hospital, which serves as the National Program Office (NPO). David K. Ahern, Ph.D., Assistant Professor of Psychology, Harvard Medical School, is the director. Judy Phalen, M.P.H., is the deputy director. Jen Neiley, M.A., is the communications specialist. Aasha Cameron is the administrative coordinator.

This program addresses a grantmaking priority of the Clinical Care Management team at The Robert Wood Johnson Foundation. Responsible staff are Robin E. Mockenhaupt, Ph.D., senior program officer (lead staff officer for the project); Stephen Downs, S.M., senior program officer; Sara L. Thier, M.P.H., program associate; Paul Tarini, senior communications officer; Fred Hunter, Jr., financial analyst; and Fran G. Ferrara, program assistant.

Evaluation and Monitoring

An independent research group selected and funded by RWJF will conduct an assessment of the program. As a condition of accepting Foundation funds, all grantees will be required to participate in this process.

Grantees are also expected to meet RWJF requirements for the submission of narrative and financial reports, and to submit periodic information as needed for overall project and performance monitoring and management. Project directors may be asked to attend periodic meetings and give progress reports on their grants. At the close of each grant, the lead agency is expected to provide a written report on the project and its findings suitable for wide dissemination.

How to Apply

There are two stages in the competitive application process: submission of a letter of intent (LOI) that briefly describes the project; then, if invited, submission of a full proposal and line-item budget for a grant.

Organizations wishing to apply for grant funds must complete the online LOI application on the program's Web site, www.hetinitiative.org. **No hard-copy applications will be accepted.** LOIs that do not address one of the research topics listed in this CFP will not be reviewed, nor will LOIs that are not submitted by the deadline and that do not follow format instructions or are incomplete. The Foundation does not provide individual critiques of letters of intent or proposals submitted. A Timetable that includes deadlines for the application process is located at the end of this document.

All prospective applicants are encouraged to visit the program Web site, www.hetinitiative.org, for answers to frequently asked questions about the application process. In addition, the Initiative will host applicant teleconference calls (listed in the Timetable) to answer questions about the program and the application and selection processes. Participation in these calls is strongly encouraged, but is not required. NPO staff will also be available to answer questions and provide technical assistance to potential applicants in the development of proposals.

Inquiries

For additional information, please visit the program Web site at www.hetinitiative.org. Please direct other inquiries regarding this program to:

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Timetable

November 25, 2002 (2 p.m. ET)

Group teleconference for potential LOI applicants*
Participants must preregister by November 22, 2002 (2 p.m. ET) by calling (617) 732-9727.
Teleconference details will be provided at this time.

December 4, 2002 (2 p.m. ET)

Group teleconference for potential LOI applicants*
Participants must preregister by December 3, 2002 (2 p.m. ET) by calling (617) 732-9727.
Teleconference details will be provided at this time.

** Please note: Both teleconferences will cover the same information. They are being offered on different dates to accommodate applicants' varying schedules.*

January 8, 2003 (2 p.m. ET)

Deadline for receipt of letters of intent (submitted online).

February 2003

Applicants will be notified whether they have been selected to submit a full proposal.

April 2003

Deadline for receipt of full proposals.

June 2003

Notification of awards.

July 2003

Grants begin.

October 2003

Grantee meetings.

About RWJF

The Robert Wood Johnson Foundation® is the nation's largest philanthropy devoted exclusively to health and health care. It concentrates its grantmaking in four goal areas:

- To assure that all Americans have access to basic health care at reasonable cost.
- To improve care and support for people with chronic health conditions.
- To promote healthy communities and lifestyles.
- To reduce the personal, social and economic harm caused by substance abuse—tobacco, alcohol and illicit drugs.

This document, as well as many other Foundation publications and resources, is available on the Foundation's Web site:
www.rwjf.org

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