Research Grant Program

Special Call for Research Proposals:
Early Mobilization or Alarm Fatigue

Grant applications are required to be submitted electronically in one PDF document.
Due date of March 1, 2018
Please visit ARN’s website for new application guidelines @ www.rehabnurse.org - RNF section.

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Call for Research Proposals: Early Mobilization or Alarm Fatigue

The Rehabilitation Nursing Foundation (RNF) of the Association of Rehabilitation Nurses (ARN) is soliciting proposals for one-time funding for research studies that focus on one of two topics: (a) early mobilization or (b) alarm fatigue. Both of these topics address important problems that populations with functional impairments, limitations, and disabilities may experience. In addition to the impact on functional outcomes and quality of life of this population, healthcare providers, caregivers, and family members may directly or indirectly be affected by these issues. Therefore, the overall purpose of this call is to investigate health concerns that are amenable to rehabilitation nursing care and that through the conduction of robust research provide evidence for practice.

Background information for Early and Increased Mobilization follows:

- For patients who experience a major illness, injury or exacerbation, such as a stroke, brain injury, spinal cord injury or other neurologic condition that results in impairments, recovery often occurs over an extended period of time. These patients often experience functional limitations due to the nature of their conditions as well as deconditioning due to prolonged bed rest and treatment requirements. Studies implementing early mobilization programs in intensive care units and long-term care hospitals have found improvements in patients’ short-term and long-term motor and cognitive function. Also welcome are innovative nurse-led interventions that may result in increased mobilization of patients during inpatient rehabilitation or skilled nursing facility stays that could lead to better patient outcomes.

Background information for Alarm Fatigue follows:

- Alarm fatigue is a well-documented problem in critical care due to the intensity of patient monitoring, but recently has become an area of concern across the continuum of care as a result of enhanced technology and patient acuity. Alarms affect nurses and patients, as well as family members. Alarms require nurses and other members of the healthcare team to prioritize, respond, and distinguish actionable from nonactionable interventions.

Innovative, nurse-led strategies that address the complex nature of both of these phenomena are needed to impact functional outcomes, patient safety, and quality of life.

This call for proposals is dedicated to investigations that have the potential of generating data that will lead to further extramural funding and that contribute to the larger body of rehabilitation and health care knowledge. This call does not include quality improvement, program evaluation, and other performance improvement projects. The proposal must address one of the two topics: early mobilization or alarm fatigue.

- Maximum funding available is $30,000
- Number of awards to be funded will depend on the quality of proposals submitted and the amount of funding requested
- Time period for the grant is January 1, 2018 – December 31, 2020
- Preference will be given to applicants who are members of ARN
- Proposals will be reviewed by members of the ARN Research Committee and a panel of reviewers.
- Funded applicants will be expected to disseminate findings by submitting a manuscript for publication in the ARN journal, Rehabilitation Nursing, and an abstract for presentation at the annual ARN Educational Conference
- Proposal must adhere to the attached “Guidelines for Proposals”
Questions
Nurse researchers who have specific questions or concerns not addressed in this packet should contact the RNF office.

Introduction

Rehabilitation Nursing Foundation (RNF)
The Rehabilitation Nursing Foundation (RNF) was formed by the Association of Rehabilitation Nurses (ARN) for the purpose of advancing rehabilitation nursing through education and research. The grant program was established in 1988 to encourage nurses to conduct research.

Mission Statement
The Rehabilitation Nursing Foundation is dedicated to advancing rehabilitation nursing practice by promoting, supporting, conducting and disseminating research to improve the quality of healthcare to individuals with disability or chronic illness.

Rehabilitation Nursing
Rehabilitation nursing is a specialty practice area within the scope of professional nursing practice. Rehabilitation is the diagnosis and treatment of human responses of individuals and groups to actual or potential health problems stemming from altered functional ability and altered life-style.

The goal of rehabilitation nursing is to assist the individual with disability and chronic illness in the restoration and maintenance of maximal health. The rehabilitation nurse should be skilled at treating alterations in functional ability and life-style resulting from physical disability and chronic illness.

Rehabilitation nurses provide comfort and therapy, promote health-conducive adjustments, support adaptive capabilities, and promote achievable independence. This practice takes place in many settings and roles.

Guidelines for Proposals

Eligible Applicants
The principal investigator (PI) for the research grant must have a research doctorate or be enrolled in a research doctoral program, be a registered nurse who is active in rehabilitation or who demonstrates a strong interest in rehabilitation nursing and has made significant contributions to rehabilitation nursing.

Preferences will be given to members of the Association of Rehabilitation Nurses (ARN).

Responsibilities of Principal Investigator
1. Completion of the project within 2 years of initial funding;
2. Submission of a progress report to the ARN Research Committee every 6 months until the research is completed;
3. Submission of a publishable manuscript presenting the findings to the ARN journal, Rehabilitation Nursing, within 2 years of completed research;
4. Presentation of a paper or poster pertaining to the research at an Association of Rehabilitation Nurses educational conference within 1 year of completed research;
5. Acknowledgment in any publication, paper, or poster that the research was supported by the Rehabilitation Nursing Foundation of the Association of Rehabilitation Nurses.

Required Information
Prepare the proposal according to the Publication Manual of the American Psychological Association (6th Ed.). The proposal narrative is limited to 10 typed, double-spaced pages using 12-point, Times New Roman font, and 8 ½” x 11” paper with 1 inch margins. Sections not included in the 10-page proposal are references, project budget, appendices, and RNF required forms.

The following RNF forms/materials are required and must be completed upon submission:

1. Research Checklist – the form verifies inclusion of all required materials
2. Summary Data Form – the form includes title of the study and contact information of PI and co-investigators.
3. Administrative Approval Form – the form indicates that the principal investigator (PI) has his or her employer’s approval to conduct the proposed study.

4. Abstract Form – using the form, the abstract must be typed, double-spaced, limited to 350 words, and should address the purpose and significance of the research, the research methodology, and the plan for analysis.

5. IRB Approval Letter - the IRB or Protection of Human Subjects Committee approval letter may be pending at the time of submission, but written approval must be received by ARN before any funds will be awarded.

Proposal Headings
The proposal must include and address the following National Institutes of Health (NIH) headings:

1. **Significance**
   This section includes the description of the problem, its significance to rehabilitation nursing, and a concise and critical review of current literature.

2. **Investigators**
   Clearly specify the investigator who will be responsible for the conduct of the study (i.e., the PI) and his/her contributions. Describe the functions of all personnel involved with the project (e.g., co-investigators, consultants, or other key personnel). Include a NIH Biosketch (Appendix D) of the PI, all co-investigators, and consultants. Please see NIH Biosketch form and instructions or go to this link for the form and instructions: [http://grants.nih.gov/grants/funding/phs398/phs398.html](http://grants.nih.gov/grants/funding/phs398/phs398.html)

3. **Innovation**
   This section provides a description of the study’s potential for challenging or shifting the current research or clinical practice paradigms through the use of such venues as novel theoretical concepts, approaches or methodologies, instrumentation, or interventions.

4. **Approach**
   This section describes the overall strategy, methodology, and analyses appropriate to accomplishing the study aims or purpose. At a minimum, include a discussion of the design, sample, protection of human subjects, data collection, procedures, instrumentation, analysis, and potential limitations.

5. **Environment**
   This section describes the scientific environment in which the study will be conducted and ways in which the surroundings contribute to success of the study. Include institutional support, equipment and other physical resources available to the investigator. Additionally, obtain written approval of the appropriate administrator of the institution or agency in which the PI is employed. ([Administrative Approval Form](#))

6. **Timeline**
   A precise timeline illustrating project tasks and objectives to be completed in less than 2 years is required.

Additional Sections (separate from proposal)

References
References address the bibliographic information of sources cited in the proposal.

Project Budget
A budget for the entire project must be submitted. If RNF funds are to be used for only a portion of the budget, identify the specific items for which you seek support. Identify remaining items to be funded from other sources and in-kind contributions. Clearly describe those sources of funding or support in addition to the amount you are seeking from each entity. Salaries are acceptable costs.

This section must specify the direct costs associated with the research. Travel expenses to the ARN Annual Educational conference for presentations should be included in the budget. Indirect costs and travel expenses for other meeting presentations will not be funded by RNF. The purchase of a computer will not be funded unless significant justification is provided in the proposal. Include notation of contributed funds, personnel, or indirect allowances. The budget must represent sufficient funds to complete the project.

Because funds are not distributed in one sum, the principal investigator should propose a strategy for the receipt and distribution of funds during the length of
the project. The strategy should facilitate the conduct of the study and may be done on a semiannual basis, by expense voucher, by task or objective, or by another means. The funding year shall begin January 1, 2019.

Appendices
Include all of the following in the Appendices:

Appendix A: Measurement Instruments
Appendix B: Institutional Review Board Approval
Appendix C: Participant Consent Forms
Appendix D: NIH Biosketches and Other Supporting Documents

Submission Requirements

1. Submit the entire packet electronically as a single pdf file.

2. Complete all proposal materials. Incomplete proposals will not be considered.

3. Email proposals to:
Rehabilitation Nursing Foundation
info@rehabnurse.org

4. **Deadline - Proposals must be emailed by March 1, 2018 (Noon Central Time).**

   Proposals received after this time will not be considered. An email confirmation will be sent within 48 hours of receiving your proposal. There are no exceptions to the deadline based on failure to receive application materials.

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Evaluation Procedures

Proposals will be reviewed by members of the Research Fund Committee and a peer review panel. Proposals will be rated according to the NIH criteria for proposal review. For more information see: [http://grants.nih.gov/grants/peer_review_process.htm](http://grants.nih.gov/grants/peer_review_process.htm).

The Research Fund Committee members will make funding recommendations to the RNF Board of Trustees. The RNF Board of Trustees has the final authority on funding decisions.

All applicants will be notified of the disposition of their proposals after action by the RNF Board of Trustees. Principal investigators will receive a summary critique of their proposal from the review committee.

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Notification of Award

Grant recipient(s) will be notified in July 2018.

Funds will be awarded to the institution, agency, or investigator at the discretion of the RNF Board of Trustees and will be based on the recommendations of the Research Fund Committee. The strategy for funding proposed by the principal investigator will be considered in the decision. Proof of review and approval the Human Subjects Review Board or Institutional Review Board (IRB) from the PI’s institution must be received by ARN before any funds are awarded.
Proposals Funded by RNF

1988
Developmental Competence in Adolescents with an Acquired Disability

1989
Health-promoting Knowledge, Attitudes, and Behaviors of Adults with Disabilities

1990
Managing the Trajectory: Determinants of Self-Care in Individuals with Parkinson’s Disease

1991
Quality of Life in Spinal Cord Injured Persons after Colostomy

1992
Levels of Functioning in the Chronically Mentally Ill: Norms and Psychometrics

1993
The Effects of Pulmonary Rehabilitation on Self-Efficacy, Physical Health, Quality of Life and Activity Level in Individuals with Chronic Obstructive Pulmonary Disease

1994
A Description of Hope by Older Adults Following a Cerebrovascular Accident

1995
Ethical Conflicts Facing Certified Rehabilitation Nurses (CRRNs)
Factors Influencing Self-Care and Actualization for Rural Residing Puerto Rican Children with Spina Bifida
Differences in Perceived Post-Stroke Quality of Life Among Stroke Survivors, their Significant Other, and Nurse

1996
An Analysis of Patients’ Values Before and Six Months After Coronary Artery Bypass Graft Surgery in Relation to Psychosocial Adjustment to Surgery
Effectiveness of Memory in Older Adults
Rehabilitation of Memory in Older Adults
Effectiveness of Pain Management Interventions for Older Persons with Arthritis

1997
The Experience and Meaning of Caring for Urban Family Caregivers of Persons with Stroke
Trajectory Phases and Management in Rural Stroke Survivors and Their Caregivers
Validation of the Rehabilitation Nursing Standards of Practice

1998
Older Adults and Cardiac Rehabilitation Outcomes
Understanding the Consumer’s Perspective of Disability and Quality of Life: Implications for Service Delivery
A Feasibility Study of Exercise, Fatigue, and Breast Cancer

1999
Having Courage: The Experience of Persons Living with Spinal Cord Injury
A Descriptive Study of Neurologic & Neuroendocrine Differences Between Inmates Convicted of Violent versus Nonviolent Crimes in a Women’s Correctional Facility
The Experience of Nursing Care in Rehabilitation

2000
Social Capital as a Family Health Resource: Instrument Development
Impact of a Restorative Care Training Program: Improving Quality of Assistance provided by Nursing Assistants at Mealtimes
Take Control: A Group-Based, Self-Management Program for Women with Urinary Incontinence
Blood Pressure and Heart Rate Variability for Exercise Decision Making in Stroke Rehabilitation

2001
Caring-Web: A Pilot Study of In-home, On-line Support for Rural Caregivers of Persons with Stroke
Rehabilitation Nurses Online: An Analysis of the Breadth and Depth of the Listserv Experience
Orientation and the Onset of Neurological Complications in Brain Injury and Stroke

2001
Strategies Used by Community-Dwelling Elders with Chronic Health Problems to Manage Personal Integrity
Stroke Impact: Quality of Life and Resources
Evaluation of the Internet as a Media for Information and Group Support Among Those with Urinary Management Needs

2002
Rehabilitation Needs of Women with Spinal Cord Injuries
Life changes in Individuals Diagnosed with Sleep Apnea While Accommodating to Continuous Positive Airway (CPAP) Devices

2003
Wrist Actigraphy During Pulmonary Rehabilitation in Persons with Chronic Obstructive Pulmonary Disease
Changes in Continuity/Discontinuity of Self in Stroke Survivors: A Reliability, Stability, and Validity Study
Urologic Outcomes and Quality of Life in Children and Adolescents with Neurogenic Bladder: A Pilot Study

2004
Pelvis Floor Care Needs and Preferences in Older Women
The Development of a Normalization Assessment Measure
The Effect of Using the Adaptive Crawler™ on the Development of Infants with Spina Bifida, Age 6-12 Months
Examining Adherence to Anthrombotic Therapy: A Telephone Intervention

2005
New Caregivers’ Experience of Caring
Wheelchair Seating and Pulmonary Function in Children; Rehabilitation Nursing

2006
Women's Rehabilitation Experiences Following Breast Cancer Surgery
Caregiver and Nurse Expectations Regarding the Recovery of the Patient with Acquired Brain Injury
The Early Impact of the Inpatient Rehabilitation Facility “75 percent rule”

2007
Nurse Staffing and Patient Outcomes in Inpatient Rehabilitation Settings
Community Integration after Spinal Cord Injury: Identifying Barriers and Facilitators through Photovoice
Measuring Health Related Quality of Life in Stroke Survivors and Spousal Caregivers

2008
The experience of community-living men with fecal incontinence
Web-based Psychosocial Assessment for Caregivers of Persons with Dementia: A Feasibility Study
Understanding Caregivers' Decision Process When Choosing to Institutionalize a Relative with Parkinson's Disease
Impact of an Oral care Protocol on Post-Stroke Survivors: A Pilot Study

2009
A Feasibility Study to Determine the Effect of Omega-3 Fatty Acids on Urogenital Atrophy
Nursing Care Practices and Other Factors Associated with Physical Function in Hospitalized Older Adults
Caregivers of Persons on Prolonged Mechanical Ventilation: Mind-Body Interaction Model
Quality of Life during Rehabilitation: Rectal Cancer Partner Experiences with Altered Bowl Function

2010
Quality of Life in Persons with Dysphagia; Does the Frazier Free Water Protocol Make a Difference?
Understanding Maternal Expectations & Needs Following Neonatal Hemorrhage

2011
Discharge Preparedness Instruments and Post-Discharge Outcomes on Two Inpatient Rehabilitation Units

2012
Rehabilitation Nurses’ Experiences When an Institutionalized Older Person Falls

2013
Nurse Staffing and Patient Outcomes in the Rehabilitation Setting

2014
A Pilot Study of Falls and Near Falls in Women with Ovarian Cancer Receiving Neurotoxic Chemotherapy

2015
The Effect of Social Networks on Self-Care Behaviors and Health Outcomes Among Older Adults Living with Multiple Chronic Conditions
Is the CABIC Clean Intermittent Catheterization Patient Education Effective (ICP Pee)?
Phase Two of a Novel Interdisciplinary Teamwork intervention at an Acute Rehabilitation Unit: Effect on Team Vitality and Patient Functional Outcomes

2016
Preparedness Assessment for the Transition Home after Stroke (PATH-s): Testing of Psychometric Properties