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**CHILDHOOD APRAXIA OF SPEECH CLINICAL RESEARCH GRANT**

**REQUEST FOR APPLICATIONS 2024-25**

**DOCTORAL STUDENT CLINICAL GRANT APPLICATION**

Apraxia Kids is pleased to offer the Doctoral Student Clinical Research Grant competition for Ph.D. students. The Doctoral Student Clinical Research Grant competition award is for up to $10,000 and will be awarded in August 2024.

**APPLICANT REQUIREMENTS**

* Doctoral student applicants must indicate who their committee/advisor(s)/mentor(s) are. They must also submit a letter of support from their mentor. The mentor of the project must show research experience with a history of funding and record of publications in high quality peer reviewed journals.
* One team member must demonstrate specific knowledge/expertise in CAS and severe speech sound disorders through publications and/or scholarly presentations.
* Collaborations between clinical and academic professionals are encouraged.

* Collaborations across research groups and locations are encouraged.
* People with lived experience of a condition such as CAS should be pro-active research partners rather than solely research participants or recipients. Apraxia Kids aims to broaden the clinical applicability of funded research projects by promoting and funding projects that meet the definition of community engaged research (PCORI) or patient and public involvement (Smits et al (2020); Frank, L. et al (2020)). Such research would include one team member who is a “consumer” (a teenager/adult with a diagnosis of CAS or a parent of a child with a diagnosis of CAS). This consumer would be involved with the project from the beginning to the end to help determine outcomes, provide their perspective of the project, and give input on procedures, methodology, and conclusions/recommendations. The outcome of such engagement in research would be results that are more patient centered, applicable, and relevant so that they will be more quickly adopted into clinical practice. Since this is a new initiative for Apraxia Kids funded grants, this will not be required, but is highly encouraged and those proposals that do include a consumer will be awarded more points within the review rubric (See Table 1).
* Previous successful applicants must wait two (2) full funding cycles to reapply. An applicant can be on more than one application in any single cycle. A person might be a PI on one or two proposals, or a PI on one and a co-investigator on another proposal.
* Grant projects are expected to be for a 12-month period following initial grant distribution. However, longer projects can also be approved.

**TOPICS OF INTEREST FOR RESEARCH PROPOSALS**:

Apraxia Kids’ primary interest is in high quality scientific research that, upon completion, will be suitable and acceptable for peer-reviewed publications. All topics relevant to childhood apraxia of speech will be considered. However, Apraxia Kids is particularly interested in funding proposals that address one or more of the following topics across diverse populations including race/ethnicity, socio-economic status, language, age, and comorbidity:

* Early diagnosis and treatment of children with CAS.
* Treatment approaches for CAS that include biophysical evidence alongside behavioral evidence.
* Looking at the whole child, especially comorbid conditions and social emotional aspects of CAS across the lifespan including teens and young adults.
* The effects of CAS on early phonological awareness skills and literacy development.
* The role of perception in the development of speech sound production in children with CAS.
* Prognosis for children with CAS.
* Child and parent reported outcome measures.

**TIMELINE FOR DOCTORAL STUDENT CLINICAL RESEARCH GRANT APPLICATIONS**

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| 3-11-2024 | LETTER OF INTENT DUE |
| 3-25-2024 | INVITATIONS TO APPLY OUT TO APPLICANTS |
| 5-27-2024 | FULL PROPOSALS DUE TO APRAXIA KIDS |
| 7-29-2024 | DECISION LETTERS OUT TO APPLICANTS |
| 8-1-2024 | AWARD GRANT(S) |
| 2-1-2025 | 6 MONTH PROGRESS REPORT DUE |

**APPLICATION PROCESS**

**Letter of Intent:** Potential applicants must submit a letter of intent (LOI) from the principal investigator and a mentor’s letter of support via email to [**research@apraxia-kids.org**](mailto:research@apraxia-kids.org) by **March 11, 2024.**

The letter of intent should include:

* which research grant the applicant is applying for (Doctoral Student Clinical Research Grant)
* the title and brief description of the proposal
* name(s) and credentials of all investigators on the team: PI(s), co-I(s), consultants, consumers, and mentors (as applicable)

A mentor’s letter of support is to be submitted with the LOI.

LOIs will be reviewed and Apraxia Kids will send an email that will indicate whether or not a full grant application is invited by March 25, 2024.

**Full Application**: Applicants with approved LOIs will be invited by email to submit a full application. In that invitation, specific instructions will be provided with a link to a Google submission folder where the full application will be submitted.

Applicants will upload all required documents into the assigned Google folder and then email Apraxia Kids saying it is complete by end of day **May 27, 2024** ([**research@apraxia-kids.org**](mailto:research@apraxia-kids.org))**.**  Applicants will be notified of funding decisions by July 29, 2024. Funding for grants will be distributed after August 1, 2024 upon receipt of a signed funding agreement.

The full application will include the following sections:

* Title page
* Research plan
* Budget and justification
* Qualifications of investigators (Biosketch)
* Description of organization and capacity
* Letter of support from their academic institution

**REPORTING REQUIREMENTS**

PIs on funded applications must present:

* IRB Approval Letter within two months of initial funding distribution.
* A participant recruitment flyer will be submitted to Apraxia Kids to distribute on social media platforms and/or email as applicable to [**research@apraxia-kids.org**](mailto:research@apraxia-kids.org).
* A progress report (including a financial report) to Apraxia Kids 6 months after initiation of the project. Note: failure to provide the required progress report may result in cancellation of the project.
* A final report (including a financial report) in addition to a separate “lay person” overview of the project will be due within 6 weeks of completion of the project. Basic information regarding the project may be shared via posting on the Apraxia Kids website.
* Notification to Apraxia Kids of any publication of articles regarding outcomes of the study along with a brief plain English summary of the article is due within a month of the publication.
  + All publications and presentations resulting from this funded research will acknowledge the funding received from Apraxia Kids.
  + Apraxia Kids requires (1) open access publication or (2) the post-print version to be made easily accessible.

**FUND DISTRIBUTION**

The first distribution of funds will occur upon receipt of a signed funding agreement and will include ½ of the total grant award unless otherwise noted in the funding agreement. Failure to obtain IRB approval will result in elimination of the project from the grant-funding process and the awarded funds will be returned to Apraxia Kids. Remaining funds will be distributed for the second six-month period pending satisfactory progress on the project as reported on the 6-month progress report.

**APPLICATION REVIEW**  
  
Applications meeting the technical requirements above will be reviewed based on merit by scientific reviewers with expertise in pediatric speech disorders. Final funding decisions will be based on the reviewers’ scores in the categories in Table 1, the compatibility of the project with the stated goals of the Apraxia Kids Research Grant competition, and feasibility for successful completion of the proposed work and publication of results in a high-quality peer reviewed journal. Reviewers will independently evaluate and score five different criteria (i.e., Significance, Investigator(s), Innovation, Approach, Environment) for each application, similar to the review system used by the National Institutes of Health (NIH) (see Table 1). Each reviewer also provides an overall impact score, indicating the reviewer’s judgment of the probability that the project will have a significant impact on clinical practice and research in CAS. Once all reviewers have submitted their independent initial scores and reviews, a final score is awarded to each proposal. Applicants will receive scores and narrative review comments with the notification of funding decisions. Investigators of promising proposals may be invited to submit revised applications with a response to the reviews before final funding decisions are made.

**Table 1. Review categories (adapted from NIH) and relative weighting of each**

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| **Category** | **Description / Considerations** |
| Significance (20%) | * How important is this research to the mission of advancing the clinical or basic knowledge base in CAS, including diagnosis, treatment, quality of life, or biophysical evidence? * Are the purpose, research questions, and hypotheses clearly stated and motivated, and supported by current research? * How will the findings of the project improve identification, diagnosis, and/or treatment of CAS? |
| Investigator(s) (5%) | * Is the investigator/team adequately prepared to conduct this project? * What are the investigator qualifications and training (clinical and research)? * How likely is it that the investigator(s) will successfully complete the project and disseminate the findings? * For collaborative projects, is there evidence of a productive collaborative relationship? * Does the investigation team include a consumer (not required)? |
| Innovation (5%) | * How innovative is this project? * Does it use novel methods, treatment approaches, and/or theoretical concepts? |
| Approach (60%) | * Are the research methodology and design appropriate to accomplish the stated goals? * What are the inclusionary/exclusionary criteria for participants? * Are relevant potential confounds considered and controlled for? * Are reliability and fidelity adequately addressed? * Is the data analysis plan adequate? * How likely is it that the project will yield valuable, clinically applicable, and interpretable data relative to identification, diagnosis, and/or treatment of CAS? |
| Environment (10%) | * How feasible is this project given the institutional environment? * Is there adequate support from the institution and mentor if appropriate? * Is there adequate availability of population, resources? * Is the proposed time-frame realistic to complete the project? * Is the budget appropriate and realistic to accomplish the project? |

References

Frank L, Basch E, Selby JV. The PCORI perspective on patient-centered outcomes research. *Journal of American Medical Association*. 2014;312(15):1513-4.

Frank, L., Morton, S. C., Guise, J. M., Jull, J., Concannon, T. W., Tugwell, P., & Multi Stakeholder Engagement (MuSE) Consortium. (2020). Engaging patients and other non-researchers in health research: defining research engagement. *Journal of General Internal Medicine*, 35, 307-314. <https://doi.org/10.1007/s11606-019-05436-2>

Patient-Centered Outcomes Research Institute (PCORI)

Smits, D. W., Van Meeteren, K., Klem, M., Alsem, M., & Ketelaar, M. (2020). Designing a tool to support patient and public involvement in research projects: The Involvement Matrix. *Research Involvement and Engagement*, 6(1), 1-7. <https://doi.org/10.1186/s40900-020-00188-4>