

Johns Hopkins Hospitalist Division Innovation Grants

Updated September, 2022

Funding amount: Total dollars spent up to \$75K annually (subject to change), resources permitting (split across 2-4 proposals). Maximum funding per proposal is \$30K.

Source of funds: (1) Hospitalist Gift Account, (2) Flynn Chair funds, (3) Brotman gift account, (4) Other discretionary funds as appropriate

Relationship to Hospitalist Scholars Program: Since the Hospitalist Scholars Program covers things other than salary support, these Innovation Grants can cover salary support (in addition to other non-salary expenses as appropriate). It is acceptable to use both types of funds for a single project (eg, Scholars Program funds to cover research expenses and Gift Account Grant to cover salary support). Additionally, receipt of an Innovation Grant allows the faculty member to use matching funds for salary support from their Scholars Account (see guidance on Hospitalist Scholars Program for full explanation).

Elements of a successful proposal:

- (1) A concise written proposal (1-4 pages) that includes:
 - a. Background
 - b. Specific aims
 - c. Deliverables
 - d. Roles and key stakeholders
 - e. Budget
 - f. Timeline
 - g. Other sections relevant to the proposal
- (2) Articulate how the candidate's project would enhance the Hospitalist Division's academic profile within Hopkins and/or outside Hopkins. Although enhancement of one's own academic profile is one way to accomplish this, preference would be given to proposals that also augment the Division's academic profile
- (3) Define a work product (deliverables), whose quality and timely execution would be a major factor in determining future eligibility to receive Innovation Grants
- (4) Include a plan to present the work product to the hospitalists at a divisional meeting, and at least one other venue (on or off campus)

Eligibility: All full and part-time hospitalist faculty are eligible for consideration, including faculty who are planning to join the program but have not yet started (allowing incoming faculty to come in with a small amount of protected time for a well-defined project)

Timing of application: Proposals can be submitted on a rolling basis, pending funding availability. Proposals that are deemed to be meritorious, but are being submitted at a time when no funds are available may be eligible for funding the subsequent fiscal year (if the faculty member still desires to keep the application active and there is money available). Transparency will be maintained related to available funds to allow faculty to optimize the timing of proposals.

Timing of protected time: No adjustments to a published clinical schedule will be made based on awarded protected time. As such, any protected time would need to be defined in advance of publishing the schedule, which generally occurs in May and November for the upcoming half-year.

Selection process:

- 1) All applicants are expected to “pitch” their idea at a Hospitalist meeting (5-10 minutes) with input from members of the group prior to submitting an actual proposal. Applicants have the option of presenting the proposal multiple times following revision. Formal and informal input from other faculty may be factored into the decision process.
- 2) The Hospitalist Division Director and hospitalist executive group will evaluate proposals (in conjunction with the input received from group members and other stakeholders as appropriate). Reasonable efforts will be made to maintain anonymity of those providing input. Additional input may be sought from potential collaborators, mentors and external stakeholders.

Examples of proposals that may qualify for funding:

- A) A faculty member seeks 7.5% salary support to develop, deploy, and evaluate a new faculty orientation program, including a brief curriculum and set of activities/lectures/conferences that facilitate successful on-boarding of new faculty. This would be accompanied by an evaluation plan, and the candidate would submit a proposal to the SHM annual meeting for a workshop on this topic to help other Hospitalist Programs develop similar on-boarding processes.
- B) A faculty member seeks 10% salary support (5% from the Innovation Grant and 5% from the candidate’s Scholars Fund) to develop a high-value care curriculum for the Osler residents (with appropriate buy-in from the residency program leadership and a letter of support). The impact of this curriculum on inpatient utilization would be measured in a pre-defined fashion, with a goal of publishing the results and presenting the work at the SGIM annual meeting.
- C) A faculty member seeks 5% salary support, in addition to money for providing lunch, to develop, maintain and lead a “research in progress” seminar in collaboration with the Armstrong Institute. The faculty member would plan to highlight successful work-product stemming from this seminar at an AI event.
- D) A mid-career faculty member seeks 7.5% salary support to conduct a research study, with a plan to enlist a junior Hospitalist colleague and a junior Tumulty group faculty member as co-investigators. This faculty member has a track record for publishing, and plans to be senior author on 2 likely manuscripts stemming from the work, with each of the junior faculty member being first author on one of the manuscripts. The work products would be presented at the national SHM meeting. To conduct the research, all 3 faculty members would use their Hospitalist Scholars Funds (subject to the normal approval process) to support associated research expenses.
- E) A faculty member seeks 10% salary support (5% from the Innovation Grant and 5% from the candidate’s Scholars Fund) to perform a QI intervention to improve patient mobility in the DOM, in collaboration with nursing leadership, PM&R leadership, and Physical Therapy. The applicant would seek to present the work (at its various stages) to Hospital and/or health system stakeholders, and ideally present/publish the work depending on the findings and generalizability.

Transparency: Approval of any Hospitalist Innovations Grant application constitutes consent to share the proposal with other Hopkins Hospitalists who may be interested in seeing examples of successful proposals.