Call for Proposals
Growing the Field of Chaplaincy Research in Palliative Care
December 2011

A HealthCare Chaplaincy Initiative
Supported by the John Templeton Foundation

Full Proposal Deadline: March 15, 2012
Program Overview: For details and instructions, please refer to pages noted below.

Purpose

This initiative aims to build capacity in the field of chaplaincy research in palliative care by creating an interdisciplinary network of experienced researchers and board-certified chaplains, promoting career development of participants, and supporting field-advancing research projects to better understand chaplaincy care in palliative care.

Funding Availability (page 5)

Approximately 6 to 10 grants will be made for projects that can be completed within 18 months. Please note that project extensions (also known as no-cost extensions) will not be possible. The maximum award amount of up to $250,000 includes personnel, other direct costs, and indirect costs calculated at a rate not to exceed 15%.

Eligibility Criteria (page 5)

HCC welcomes applications from interdisciplinary research teams comprised of health, behavioral or social scientists, health care providers, and board-certified chaplains with an interest in chaplaincy research who are affiliated with educational or health care institutions, research organizations, or other types of nonprofit organizations located in the United States or Canada. Consortia of such institutions or organizations are also welcome to apply.

Proposal Development – Context and Guidelines (page 6)

Proposal Evaluation and Selection Process (page 7)

Key Dates and Deadlines:

- December 15, 2011 CFP released
- January 12, 2012 Applicant conference call at 2 p.m. ET
- March 15, 2012 (3 p.m. ET) Deadline for receipt of proposals
- May 31, 2012 Applicants notified by email as to whether they have been selected to participate
- July 1, 2012 Project start date

How to Apply (page 8)

Applications must be submitted on-line through our web site for applicants at:
http://www.healthcarechaplaincy.org/Templeton-Research-Project

Resources for Applicants (page 10)

Award Obligations (see page 10)

Each team’s lead investigator(s) and board-certified chaplain (not to exceed a maximum of 3 persons per team) will be required, at HCC’s expense, to actively participate in four to five national colloquia during the grant period.
Contact for Assistance
HCC invites applicants to contact us to discuss their research teams and proposed projects.
For assistance, please contact:
Robert Wolf
Senior Vice President of Innovation and Development
HealthCare Chaplaincy
Email: jtf-applicant@healthcarechaplaincy.org
Phone: 646-597-6934

www.healthcarechaplaincy.org
Background

Spirituality is a universal component of the human experience, regardless of an individual’s religious beliefs or faith, and serious illness tends to elicit or accentuate spiritual needs. Meeting spiritual concerns is a key element of patient and family-centered care and a foundational aspect of palliative care, which seeks to alleviate suffering for those facing the challenges of life-altering illness and death and to mold treatment to patient choice. Board-certified health care chaplains provide care aimed at helping patients and families deal with spiritual issues in their lives, as they address serious health challenges. Chaplains also support other care team members in their spiritually and emotionally demanding work.

Despite its putative centrality, professional chaplaincy remains a marginalized and minimally researched service in much of health care, and to some extent even in palliative care. A barrier to rectifying this deficit of knowledge is that most board-certified chaplains have not been educated within a research culture or integrated within a research enterprise at their place of work, which would provide them with the tools to develop ways to assess the efficacy of their interventions.

HealthCare Chaplaincy (HCC) is an international leader in the research, education and practice of spiritual care and palliative care. With the generous support of a $3 million grant from the John Templeton Foundation, HCC is engaged in a pioneering 3-year initiative to grow the field of chaplaincy research by creating a community of experienced researchers and board-certified chaplains dedicated to the study of chaplaincy care in palliative care. A diverse, interdisciplinary research community of health, social, and behavioral scientists and board-certified chaplains with an interest in palliative care research will serve as the linchpin for this initiative.

Project Objectives

We seek to:

♦ Identify and nurture a cadre of chaplains and other researchers who will identify research imperatives, participate in empirical studies, and grow the field of research on spiritual care in palliative care.

♦ Support approximately 6 to 10 scientifically rigorous projects. Because of the state of the field of chaplaincy research, we are looking for research teams who will propose field-advancing projects that identify and explore hypotheses about chaplains’ contributions to palliative care using qualitative, quantitative or mixed methods. Studies to identify suitable measures for future hypothesis testing research will also be welcome.
Funding Availability and Requirements

HCC expects to award approximately 6 to 10 research grants in 2012. The maximum award amount of up to $250,000 includes personnel, other direct costs, and indirect costs calculated at a rate not to exceed 15%. The exact number of projects and award amounts will depend on the quality of applications and the budget requirements of the projects that are selected for funding.

Grant funds may be used for project staff salary, consulting expertise, data collection and analysis, other reasonable research and training expenses, supplies, project-related travel, and a limited amount of equipment deemed essential to the project. Projects must be completed within 18 months. Please note that project extensions (even no-cost extensions) will not be possible.

The lead investigator(s) of funded projects and each team’s board-certified chaplain (total not to exceed 3 persons) will be expected to actively participate in approximately five national colloquia during the grant period. These colloquia are expected to serve two purposes: (1) to provide research groups with a resourced forum in which to discuss the progress of their individual work, test and exchange ideas, and access support from project faculty; (2) to deepen networking relationships and collaboration between and among the health-related research community and professional chaplains, with the aims of promoting chaplaincy career development and establishing an ongoing interdisciplinary partnership for future research in chaplaincy care.

Project directors will also be expected to ensure that all IRB requirements within their host institutions are met no later than September 30, 2012 and communicated to HCC.

Eligibility Criteria for Research Teams

HCC invites applications from interdisciplinary research teams comprised of health, behavioral, or social scientists, health care providers, and board-certified chaplains who are affiliated with educational institutions; academic medical centers; for-profit or non-profit hospitals, health care systems, or research organizations; or other nonprofit health care, mental health or minority- or disability-serving organizations located in the United States or Canada. Consortia of such institutions or organizations are also welcome to apply.

Given HCC’s intent to develop sustainable, collaborative research networks focused on chaplaincy care, teams must include, in a participatory and engaged role, one or more board-certified chaplains who are interested and involved in palliative care, and committed to developing their research skills, and to conducting research as a significant focus of their work.

We seek wide-ranging diversity among applicants including, but not limited to, gender, ethnicity, religious denomination or spiritual tradition, under-represented groups, career stage, discipline/field, and institutional affiliation.
Proposal Development - Context and Guidelines

In planning this initiative, HCC undertook a comprehensive review of the literature and produced a gap analysis that identified as a cross-cutting shortcoming the scientific investigation of chaplaincy care [visit the HCC website at http://www.healthcarechaplaincy.org/Templeton-Research-Project to access the literature review]. Conspicuously absent from published research studies are empirically-grounded conceptual and service-delivery models of chaplaincy care. This deficiency extends to the field of palliative care, where spiritual care is considered an essential, defining, yet virtually unexamined, element of palliative care.

Through this initiative, HCC seeks to support scientifically rigorous research projects that develop and explore hypotheses, which will be foundational to advancing the understanding and assessment of chaplaincy in palliative care. Research into suitable measures for evaluating such hypotheses will also be welcome. Applicants may focus proposals on areas of inquiry relevant to examining the provision, value and effectiveness of chaplaincy care in palliative care. Examples of areas of inquiry follow:

- Spiritual functioning and spiritual dysfunctioning.
- Spiritual screening and assessment.
- Differential diagnoses for types of spiritual need/suffering such as guilt, concerns about afterlife, personal relationship to a higher power or cosmos, and consideration of coping resources related to facing serious illness.
- Referral mechanisms including requests initiated by patients, families and staff.
- Integration of chaplains into the palliative care team.
- Patient/family communication including the chaplain’s role in facilitating decision-making related to treatment choices and goals of care.
- Interventions, perhaps classified by theoretical approach [e.g. psychodynamic therapy or family systems]; religious/spiritual practice [e.g. meditation, use of sacred texts, end-of-life rituals]; specific protocol [e.g. dignity therapy] or type of treatment modality [e.g. music therapy].
- Other possible areas of focus might include how board-certified chaplains participate in and have an influence on palliative teams; or ways to more fully integrate spiritual care and palliative care within healthcare delivery.
- Outcomes: These can be drawn from wide-ranging areas, from patient and family-centered outcomes that contribute to the patient experience [e.g., meeting spiritual needs, peace level, type of family bereavement, improved family/care team communication, more informed medical decision-making, and satisfaction with care], to examining chaplains’ effectiveness in the health care team, to health system outcomes [e.g., better coordination of palliative care across settings, lower resource utilization and costs, responsiveness to the spiritual needs and interests of vulnerable populations, or reduced disparities in the seeking or provision of spiritual care in palliative care].
These examples are not meant to be prescriptive, only illustrative – proposals can also be based on investigator-initiated ideas consistent with this initiative’s objective. Investigators should describe their research plan including the methods they will use to generate hypotheses and the measures that will be used to assess them.

Proposal Evaluation and Selection Process

An Advisory Committee of experts, drawn from the fields of medicine, nursing, palliative care, epidemiology, psychiatry, psychology, public health, social psychology, religion, chaplaincy, health services research, social work, and related disciplines will evaluate proposals according to the following criteria:

Aims, Significance, and Innovation

Does the proposed study have the potential to advance scientific knowledge about chaplains’ contributions to palliative care? Does the proposed project take into account and build upon the most salient findings of prior research or upon the concepts or methods that have influenced research in chaplaincy care and related fields? In examining current chaplaincy practice, does the project suggest new ways of thinking or identify creative concepts, approaches, methods, or data for measuring chaplaincy care? Does it challenge, innovate, or synthesize in significant ways, existing frameworks and processes, or adapt methodologies or analyses from other disciplines in inventive or novel ways?

Investigators and Research Team

Are the researchers well-qualified to execute the project and have they demonstrated the requisite expertise to carry forward the research plan? Do they demonstrate interest and involvement in palliative care and in chaplaincy care? Does the project include active participation of a board-certified chaplain with an interest in research, and will the project help advance the research careers of chaplains and other scholars to conduct future chaplaincy care research? Does the team have a coherent plan for how its members will work together? How will participating chaplains share their experience with other chaplains?

Institutional and Collateral Support

Is there sufficient evidence of institutional commitment to the project? Is support for the necessary release time to complete the full requirements [i.e., participation in all colloquia] of this grant documented? Is there evidence of support and agreement by any collaborators and/or partner organizations?

Approach and Methods

Are the research questions, research design, data collection, and methods of analysis adequately described and/or specified, and are they appropriate and sufficient to achieve the specific goals of the project? If the topic of study calls for new or pioneering methods, are those methods adequately specified, sound and warranted? Do the applicants understand the potential problems and challenges involved in their approach and how these challenges might be addressed? Are benchmarks of success and contingency plans identified?
Feasibility and Financial Responsibility

Can the project be completed within the timeframe proposed (not more than 18 months)? Does the project employ effective collaborative arrangements or take advantage of special opportunities or available synergies in the research enterprise? Do the project budget and budget narrative propose appropriate funds to meet the stated objectives of the proposed project and present a reasonable plan for the allocation and accounting of funds received?

Potential Scholarly and Public Influence

How publishable will the results of the project be? What scholarly networks or communities will the results engage and influence? Do the investigators have the ability to communicate the significance of their research findings? What is the potential for sustaining future research in this area and leveraging future funding? In what ways might the project help to build larger momentum of interest in research on chaplaincy, including impact on the participating institutions/organizations and the professional chaplaincy community?

Following evaluation of proposals, the Advisory Committee will make funding recommendations to HCC. HCC will ultimately select approximately 6 to 10 projects for funding, make the awards, and oversee the project grants.

In addition, HCC will invite a small group of promising researchers whose proposals were not funded to remain related to the “community” during the grant period and attend the capstone conference at the conclusion of the project.

Please note that HCC will not provide feedback on individual applications. Following the selection of grantees, HCC will post general comments on proposal quality at http://www.healthcarechaplaincy.org/Templeton-Research-Project.

How to Apply

Applications must be submitted online no later than 3 p.m. ET on March 15, 2012.

To complete and submit your application, please visit http://www.healthcarechaplaincy.org/Templeton-Research-Project which will be live no later than January 3, 2012. Download the application templates, instructions, and checklist, and review the frequently asked questions (FAQs). You will need to submit the following information:

♦ cover letter on letterhead signed by an authorized official at your institution;
♦ contact information for the project director, co-principal investigator (if any), board-certified chaplain, and a list of other members of your research team;
♦ one-page project abstract;
a proposal narrative of up to 12 pages, excluding cited references, that describes your project as clearly, thoroughly, and concisely as possible and includes a brief personal statement describing the interests of key project personnel in the field of chaplaincy research in palliative care;

a biosketch (4 pages maximum) for each project director, co-principal investigator (if applicable), and board-certified chaplain using the current NIH format;

a project budget and budget narrative justifying the requested line items for conducting the project and showing how those requested amounts were arithmetically determined;

a copy of your organization’s IRS determination letter;

letter(s) of support from top leadership at the sponsoring institution and commitment letters from any research partners, collaborators, consultants, or partnering organizations.

Your proposal narrative (up to 12 pages excluding references) must include:

the title of the proposed research project;

a brief description of challenges being addressed and how the proposed project fits this initiative’s aims;

specific research questions and issues to be explored and their significance;

a description of a research plan, the methods and/or measures you propose to use, how they could illuminate the subject matter you seek to understand, and any limitations or potential challenges and how they will be addressed;

a statement of what is innovative or creative about the proposed research in its examination of current chaplaincy practice;

the anticipated contribution of the proposed study to advancing knowledge about the contributions of board-certified chaplains to palliative care;

a brief description of your qualifications and track record, and for projects with co-principal investigators, a description of complementary expertise and any prior experience working together on research projects;

a brief description of the research team and of how it will collaborate;

a short personal statement describing the project leaders’ and board certified chaplain’s interest in and commitment to growing the field of chaplaincy research and to helping advance the research career of one or more board-certified chaplains;

a project timeline of up to 18 months (project extensions will not be possible);

a description of the project’s expected products and outcomes;

plans for disseminating results, sustaining future research in this area, and options for leveraging future funding;
list of cited references.

It is the project director's responsibility to ensure that submitted applications are complete. In fairness to all applicants, **we will not consider applications that are submitted later than 3 p.m. ET on March 15, 2012**. We will not accept paper applications or applications sent by email or fax.

HCC encourages applicants to contact us to discuss their research teams and proposed projects. Please direct inquiries to:

Robert Wolf  
Senior Vice President of Innovation and Development  
HealthCare Chaplaincy  
Email: jtf-applicant@healthcarechaplaincy.org  
Phone: 646-597-6934

**Resources for Applicants**

Visit [http://www.healthcarechaplaincy.org/Templeton-Research-Project](http://www.healthcarechaplaincy.org/Templeton-Research-Project) for additional resources including a list of the initiative's advisors, downloadable application templates and instructions, an application checklist, the NIH biosketch form and a sample of a completed biosketch, FAQs, HCC's literature review on chaplaincy care research (this research was not linked specifically to palliative care and should be read understanding its more general scope that that of this CFP), and links to web sites containing information or tools that applicants might find useful.

**Award Obligations**

Project directors of research teams are required to submit periodic progress and financial reports and final narrative and financial reports necessary for grants management and monitoring. They will also be expected to meet all IRB requirements of their institutions by September 30, 2012 and to report achievement of this requirement in writing to HCC. The lead investigators and board-certified chaplains (not to exceed a total of 3 persons per research team) of funded projects are expected to attend, at HCC's expense, four to five national colloquia over the course of the initiative to network with and share their research and findings with other scholars, mentors, and advisors. Acceptance of project funding commits grantees to prepare for, be present at, and participate in these colloquia, which will afford opportunities for networking, career development, and collaborations aimed at continuing to grow the emerging discipline of chaplaincy research.
Initiative Direction

HCC serves as the program office and provides direction and technical assistance for this initiative.

Co-Principal Investigators
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Contact Information
Please direct inquiries about this initiative or your application to:

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Timeline

December 15, 2011  CFP issued
January 12, 2012 (2 p.m. ET)  Applicant conference call
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July 1, 2012  Project start date

About HealthCare Chaplaincy

HealthCare Chaplaincy is an international leader in the research, education and practice of palliative care, which relieves suffering and improves one’s quality of life. We provide professional chaplaincy services—arguably the most cost-effective resource to increase patient satisfaction— in numerous hospitals in metropolitan New York. During the past 50 years, our professional chaplains have helped more than 5 million patients, loved ones and hospital staff find meaning and comfort regardless of religion or beliefs. We collaborate with other national organizations to advance best practices in health care delivery and palliative care. HealthCare Chaplaincy is developing a National Center for Palliative Care Innovation, including a large enhanced assisted living residence for people with life-limiting illnesses. This
national demonstration project will deliver care that is compassionate, comprehensive, evidence-based and cost-effective.

About the John Templeton Foundation

Sir John Templeton founded the John Templeton Foundation (www.templeton.org) in 1987. Current assets are approximately $1.5 billion. Its vision is derived from the late Sir John Templeton’s optimism about the possibility of acquiring “new spiritual information” and from his commitment to rigorous scientific research and related scholarship. The Foundation’s motto, “How little we know, how eager to learn,” exemplifies its support for open-minded inquiry and hope for advancing human progress through breakthrough discoveries.

The Foundation has a long-standing interest in funding projects regarding spirituality and health and has partnered with HealthCare Chaplaincy since 1998.