



APPLICATION FOR

INDIANA ADDICTIONS DATA COMMONS: Collaboratory Funding for Dataset Development



1101 WEST 10TH STREET, INDIANAPOLIS, IN 46202
www.regenstrief.org



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Indiana Addictions Data Commons: Collaboratory Funding for Dataset Development

KEY DATES:

REQUEST FOR APPLICATION
RELEASE DATE:

06/07/2019

APPLICATION DUE DATE:

08/01/2019

NOTIFICATION OF AWARD:

NO LATER THAN

09/01/2019

EXPECTED START DATE:

12/01/2019

APPLICATIONS WILL BE SUBMITTED THROUGH:

REDCap <http://j.mp/2Z48ZDk>

PRIMARY POINT OF CONTACT:

Daniel Hood

T: 317-274-9349

E: danhood@regenstrief.org



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INTRODUCTION:

The Indiana Addictions Data Commons (IADC), funded through the IU Addictions Grand Challenge, enables access to clinical and social determinants of health data aimed at supporting opioid related research. Data resources support examining opioid related events (e.g. overdoses, prescribing, etc.) as well a range of other health care and non-health related events relevant to opioid use, their behaviors and their environment. In an effort to accelerate the use and promote the utility of the IADC, pilot funding will be awarded to proposals that seek to leverage this new resource to study the addictions crisis in Indiana.

The purpose of this funding opportunity is to enable data collection and integration efforts necessary to use and augment research ready datasets. This opportunity will also enable collaboration with subject matter experts in these data areas to translate research questions into specific data needs. Awardees will receive support at no cost to the investigator to define and create a dataset that furthers the proposed research.

Awardees will be selected based on:

- Potential to advance research focused on the addiction crisis
- Potential to generate extramural funding
- Fit of research questions and approach with current IADC data assets

BACKGROUND OF IADC:

The IADC was formed with the support of the Indiana University Addictions Grand Challenge and serves as the access point for researchers who require diverse datasets necessary to study the opioid crisis. The IADC is led by a team of informatics professionals from the Regenstrief Institute Center for Biomedical Informatics as well as a diverse set of community stakeholders and data partners. Recognizing the need to integrate and access data resources which span the clinical and social determinants of health spectrum, the IADC provides a framework with which to expand the capabilities of opioid related research.

The Regenstrief Institute has partnered with several IADC participant organizations, many with expertise in robust data resources. To integrate these distinct data resources, Regenstrief serves as the Honest Data Broker and as a single point of contact for data handoff, for the purposes of this RFA. The data resources outlined below can all be linked via a unique individual or geographic boundary, informed by the granularity of the data available.

WHO MAY APPLY:



This opportunity is open to any IU researcher. Strong consideration given to junior faculty.

KEYS TO A SUCCESSFUL PROPOSAL:

The IADC is looking to support enthusiastic research teams who seek to use data in novel, innovative ways. Successful applications will be reviewed based on:

- Applications must demonstrate how their project will help address the addiction crisis.
- Strong consideration will go to those applications that highlight innovative approaches and have potential for future extramural funding.
- Applications are expected to demonstrate how the integration of distinct data sets that can be used to better answer the proposed research questions.
- Applications will be assessed on the overall feasibility of the proposal. Are the data needs of your project in alignment with what can currently be integrated through the IADC? See below of additional data resource details.
- Applications that propose the development and testing of a custom index to measure social determinants of health are welcome.
- Applications are expected to clearly outline the population of interest, exposures, outcomes to be measured and/or other data needs to sufficiently answer the research question. Applicants are not expected to have intimate knowledge of each variable within the available data sources. If awarded, the IADC data partners will work with the applicant to define the precise data needs of the project.
- Applications are expected to highlight the timeframe during which data needs to be available as well as the geographic coverage (i.e. statewide, Marion County, zip code, census tract etc.).

DATA ACCESS:

For the purposes of this RFA, the IADC will facilitate access to data sources provided by the Regenstrief Institute, Indiana Management Performance Hub, and the Polis Center. Specific data sources are highlighted below with additional information available in the IADC Metadata Dictionary.

Regenstrief Institute

Indiana Network for Patient Care (INPC)

The Indiana Network for Patient Care research database (INPCR) represents over 100 separate healthcare entities providing data which includes: major hospitals, health networks, and insurance providers. Per the INPC terms and conditions agreement, the Regenstrief Data Core acts as the custodian of these records and only they are allowed direct access to the identifiable patient data contained within the INPC research database. Within the structured data, the INPC has several ways to



string data across years, institutions, between patients, and even with outside data sources.

Eskenazi Health and Indiana University Health Data Warehouses

In addition to INPC data, the Regenstrief Data Core has business agreements in place with Eskenazi Health and IU Health to access their patient data for approved research purposes, allowing access to greater variety and depth of clinical data than that which is contributed to the INPC database.

Management Performance Hub

The Indiana Management Performance Hub is the nation's first standalone state data agency with the power to collect, analyze, and exchange data across all state agencies, thereby cementing the state's data-driven culture. By breaking down data silos, Indiana's most complex challenges are being combatted with a holistic, collaborative effort from leadership, state agencies, community organizations and the private sector.

At the forefront of confronting the opioid epidemic, aligning education programs with future workforce needs or helping to reduce recidivism, MPH stands with its partners in the fight to improve outcomes for Hoosiers.

MPH has enabled access to numerous data sets which can be used in conjunction with other IADC resources. These data include patient level information related to education, workforce and emergency medical service utilization.

Polis Center

SAVI Community Information System

The Polis Center is dedicated to building the capacity of its partners to use data to measure, understand, and improve the health, wellbeing, and resiliency of communities. The SAVI community information system (SAVI) was developed by Polis to provide open access to a wealth of data describing the demographics, social, economic, and physical conditions of Indiana communities. Polis curates SAVI data from dozens of government entities and nonprofits and transforms the data into formats useful for research, including custom social indicators and indices.

SAVI data tools can be explored using <http://www.savi.org/data-tools/>. A reference to the SAVI data sources and data catalog can be found using <http://www.savi.org/support-training/data-sources/>.

Publicly Available Microdata

American Community Survey

Eviction Lab

Other public data sources as identified



In order to better understand the granularity of some of the data resources mentioned above please reference the IADC Metadata Dictionary.

APPLICATION EXPECTATIONS:

- This funding is intended to be focused on addictions related research.
- Data from the IADC can be used to supplement an ongoing project or a developing project. Applicants are expected to describe how the data will aid in either “jump-starting” a project or strengthening a planned or pending submission.
- If the intent is to use person level data, IRB and corresponding governance may be required.
- Documentation will be submitted to the IADC that includes reports on publications, presentations, new awards and job promotions which result from the data made accessible through this opportunity.

REVIEW PROCESS:

All applications will initially be reviewed by the Regenstrief Institute IADC team. Proposals which highlight the need for data from the Polis Center and/or the Management Performance Hub will receive a secondary review to confirm feasibility and alignment with funding goals.

APPLICATION SUBMISSION GUIDELINES:

- Intake to be completed via REDCap <http://j.mp/2Z48ZDk>
- Published on June 7, 2019
- Due by Aug. 1, 2019
- Awardees will be notified by Sept. 1, 2019
- Expected project start date is Dec. 1, 2019

PROJECT SUMMARY/ABSTRACT

Provide a brief (one paragraph) summary of your project. Please do not include proprietary information, as this summary may be used to publicly highlight your project.

RESEARCH PLAN (not to exceed 5 pages total)

(items A-E below) should be typed on 8 ½ x 11 white paper with at least 1/2 inch margins and is not to exceed 5 pages. Type size should follow NIH guidelines: Arial, Helvetica, Palatino Linotype or Georgia typeface and a font size of 11 points or larger. Type must be clear and readily legible, reasonable size and single spaced. The Research Plan should address the scope of the project, specifically as it relates to the data needs and support from the IADC. Relevant parts of an extramural proposal may be included, if desired, to show the scope of the overall project and to justify how the funding



requested will aid in either “jump-starting” a project or strengthening a planned or pending submission.

A. Specific Aims: This section should include objective, rationale, central hypothesis, and specific aims of the proposal. Follow NIH R01 format.

B. Significance: This section should include background and importance of proposed work as well as its potential for extramural support. Follow NIH R01 format.

C. Innovation: How does the proposed project seek to challenge existing paradigms including novel concepts, approaches, methodologies, instrumentation, or inventions of current research or clinical practice? Are these innovations new to one field of research or unique in a broad sense? Follow NIH R01 format.

D. Approach: This section should include preliminary data and research strategy. Research strategy should include for each separate specific aim, rationale, proposed experiments and anticipate results/alternate strategies. Please follow NIH R01 format.

E. Wildly successful outcome: As a thought exercise, please consider that this project has become wildly successful and has matured for several years. What impact will this work ultimately have on the addictions crisis and how will that impact translate to the individuals who suffer from this affliction?

Collaborative Arrangements: If the proposed project requires collaboration with other investigators, describe the nature of the collaboration and provide details as to how the project stands to benefit from a collaborative approach.

Supporting Information: Letters of support are not required but can be included with each submission.

Biographical sketches: Principal investigator and any senior / key personnel in newly published NIH format (5-page maximum for each individual).

BUDGET:

Budget component not required. Awardees will work with the IADC team to assess resources needs at time of funding. Resources provided will be limited to Regenstrief personnel necessary to create the customized dataset. Financial support will not be provided for non-Regenstrief personnel (e.g. students, RAs, etc). The award does not support investigator time or effort.