Translational Team Application Handbook

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Translational Research Overview

The College of Health Solutions provides funding and support for Translational Team development and research. A Translational Team is a resourced and agile team of faculty, students, and community partners, focused on solving complex health problems/challenges through teaching, research, and community engagement. Translational research or inquiry is defined as moving knowledge and discovery generated in basic science research to application in clinical, population, and community settings (actri.ucsd.edu, ncbi.nlm.nih.gov).

Central to the purpose of translational teams is a focus on health challenges in complex environments with the ultimate goal of improving population health. Each translational team will self-organize around solving a pressing health problem or challenge that is multi-faceted with long-term or downstream impacts on morbidity, mortality and well-being. Translational teams are composed of faculty, staff, community partners, and students who come together as a team, blending their distinct skills, to identify and develop more comprehensive and innovative strategies to address complex health challenges. Community partners are active, vital members of these teams, driving the questions we need to ask, and bringing unique and valuable skills to the process. Students gain crucial experience and knowledge about research, the translational science spectrum, and community engagement and have the opportunity to be involved with a team for their entire educational career.

Transitional Teams (TT) will serve as transdisciplinary units in CHS and will need to complete an application for formal recognition. This application will be reviewed by a college-level committee and requires final approval by the CHS Dean and/or her representatives. Awarded teams will have access to a budget and staff support to accomplish proposed activities. Teams will be reviewed annually to assure they remain relevant and are meeting the goals that they identified during the proposal process.

Translational teams will be evaluated based upon the level of development to maximize support and facilitate progress.
General Translational Team Criteria

Inclusion Criteria

1. Clearly defined health challenge or problem
   a. this may be problem-oriented or systems-oriented with a focus on down-stream
      impacts on mortality, morbidity or well-being.
   b. should be a significant community problem/issue
2. Translational scope of inquiry/research that encompasses:
   a. a defined project plan & goals/objective
   b. one or more research categories (see definition above)
   c. an established timeline and evaluation metric for success
   d. one or more team members with a current funding
   e. a translational vision including all 3 pillars of CHS translational science (re-search,
      community involvement, student engagement)
   f. innovation in the field of inquiry
3. Transdisciplinary Team
   a. strong established leadership
   b. formally designated team roles & responsibilities
   c. project management and communication plans
   d. identified Team Lead with research experience & demonstrated ability to function
      effectively
   e. team members with transdisciplinary expertise in the health problem identified
4. Community Engagement
   a. established current community partners/engagement or plan for community
      engagement
   b. community partners are actively engaged in the research development process (not
      merely advisory or physical site of research)
   c. community partners/expertise aligns with the health challenge, scope of inquiry
5. Student Involvement
   a. defined student involvement
      i. undergraduate and graduate student involvement
   b. mentorship plan
   c. evaluation plan
6. Long-term goals/plans for Sustainability

Exclusion Criteria

1. Topic
   a. concerned with advancing methodology, rather than a health problem
   b. poorly defined or differentiated
   c. No translational scope delineated
   d. There is limited potential for expansion, progression
2. Team membership
   a. is scant, no leader identified, or leadership in flux
b. PI lacks credentials required to lead
   i. not a Ph.D (or other terminal doctorate degree)
   ii. no research experiences
   iii. no expertise in health topic
   iv. not CHS faculty

  c. lacks necessary expertise appropriate to topic identified
  d. does not include junior and senior faculty
  e. has no community partners on the team
  f. few or no active community partners involved

3. No plan for Sustainability
Team Descriptions and Criteria

Early Stage Teams

Early Stage Translational Teams develop along a spectrum and are not required to have active engagement in all areas. These teams demonstrate some evidence of existing collaboration, but they may need additional support to strengthen that collaboration or to implement/strengthen the required community partnerships and student involvement needed to be a functional Translational Team. These teams are eligible for enough funding to implement a pilot project, and will be expected to submit 1-2 proposals for external funding by the end of the year (e.g., R21, R01, etc.). College of Health Solutions Jumpstart funding will be used to support developing teams.

- Clearly defined health issue (or set of integrated health issues)
- Translational scope of inquiry with an overarching research goal.
- A general or defined project plan & objectives (depending upon level of development)
- Formally designated team roles & responsibilities/ project management plan
- Some established and current community partners/engagement and a plan to fill vacancies
- A general or defined student involvement plan (depending upon level of team development)
- Transdisciplinary team membership

Established Teams

These teams demonstrate sufficient development to submit a large grant application (e.g. P50, P30, etc.) proposal within 2 years and have clearly defined key characteristics of successful transdisciplinary translational teams.

- Clearly defined health issue (or set of integrated health issues)
- Translational scope of inquiry with defined project plan & objectives
- One or more team members with a current RO1/funding or equivalent
- Formally designated team roles & responsibilities/ project management plan
- Established and current community partners/engagement
- Defined and established student involvement
- Transdisciplinary membership
- Established timeline and evaluation metrics for success
- Long-term goals/plans
Preparing and Submitting a Successful Application

Eligibility
Applicants must submit either a completed Early Stage or Established Translational Team Application with required supplementary documents. Supplementary documents include: detailed budget with justification (if applying for funding), biographical sketches, letters of support (if present), institutional support, and any grant award notices. Early Stage may not have letters of support or award notices to include.

1. **Eligible principle investigators** are expected to be established investigators with the scientific and administrative skills, knowledge, and leadership to coordinate the team and supervise projects. Teams must have a PI or Co-PI (Project Lead) who is a College of Health Solutions’ researcher. An investigator may not be a PI on more than one team, but may be a member of multiple teams.
   - PI must have a PhD (or other terminal doctorate degree) with a strong research record and a current full-time appointment with CHS
   - PI may be tenure-track or non-tenure track faculty
   - Must not be the PI on another Translational Team.

2. **Team members** should include: CHS researchers and staff, ASU researchers, ASU staff, Community Partners, and students and should have engagement plans for both community and student involvement.

Questions to be Answered
- What is the health problem/challenge the team wants to address and how?
- Is this a community need and why?
- Who will benefit and how?
- What objectives will you accomplish and how will you measure results?
- What is the team make-up and why is this pertinent and significant?
- How is the project(s) translational in scope?

Common Reasons Proposals May Take Longer to Become Approved
- Proposal does not meet CHS and TT priorities;
- Proposal does not follow the prescribed format;
- Proposal is poorly written and/or difficult to understand;
- The proposed budget/grant request is not within funding range;
- There is no demonstration of need for the project;
- Objectives were not realistic and incapable of being accomplished within the period outlined;
- Leadership and management of the Team not clearly defined;
- No evidence team/project will be self-sustaining;
- The application was not reviewed and properly submitted prior to the submission deadline.

Preparing your Application
- Ensure that you have reviewed the following sections of the manual
  - Budget Format and Information
Helpful Hints

▪ You may want to engage with Research Engagement, Community Partnerships, and Student Success Liaisons for assistance in these areas. All teams should include community engagement and student involvement plans along with a clear research plan.

▪ Reach out early to community partners to establish need, priorities, and collaboration.

▪ Use Arial 11pt font with at least 0.5” margins, single-spaced.

Before you Submit

▪ Review the required submission items
  o Description of the translational problem/challenge
  o Research Plan
  o Community Partners & Engagement
  o Student Engagement Plan
  o Team Membership & Leadership
  o Communication Plan
  o Timeline
  o Benchmarks & Success Criteria
  o Future Funding
  o Equity and Inclusion

▪ Ensure you submit all supplemental documents
  o Budget with detail & justification
  o Investigator Biosketches
  o Letters of Support (optional)
  o Current grant award notices

Submitting your Application

▪ Translational Teams will apply through the InfoReady portal, housed by ASU Research Development office.

▪ This system provides a high degree of security and access control to both applicants and reviewers.

▪ You may go to https://asu.infoready4.com/ for registration. You will see a list of Funding Calls on the page, along with due dates. Click on the Translational Teams title/link to be routed to a description page with an application link.

▪ New users will need to log in, using their ASURITE login information, to set up an account before you upload your application. Previous users of InfoReady will just log in as usual.

▪ For additional information or assistance, please contact limited.submissions@asu.edu or the ASU Help Desk.
Award Information and Explanations

Funds Available
$3,000–$38,000 is available depending on the type (Early Stage or Established). See breakdown of awards below.

Early Stage Translational Teams
Early stage teams will be eligible for up to $3,000–$18,000 in funding for capacity-building, team development, pilot research projects. Choose this application/call if you are looking for support for the generation of preliminary data for future submission of applications with a larger scope and larger budget (e.g., NIH R21, NIH R01; NSF; PCORI; DOEd, national not-for profit).

Established Translational Teams
The Translational Team program will support teams with funding up to $38,000. Funds may be used for project development, implementation, and team capacity-building with the expectation of submitting at least one large grant proposal to a federal sponsor, foundation, or other funding entity within 1-2 years.

Start Date and Duration
Estimated award dates are January 1, 2019 and July 1, 2019 depending on application date (Spring or Fall). The funding duration is one year (12 months) from start of award.

Funding Restrictions
Awards will vary in size depending on the level of team and project development, number and completeness of key criteria, as well as the availability of funds. Team designation is determined by evidence of satisfactory progress by the team (as documented in reports and interim evaluations). The application can be edited or cancelled.

Submission Notification
The PI or Designated Contact will receive an email notification indicating that the grant application has been submitted and is ready for review.

Under Review
The application is currently being reviewed by the Review Committee.

Modifications Required
The Review Committee has reviewed your application and determined that it requires modifications. You will receive a list of modifications via mail.

Awarded
The Review Committee has awarded your team funds for your project.
Application Guide – Translational Research/Problem Topic

Translational Research/Problem Topic
The College of Health Solutions is an engine that drives knowledge to action to improve health outcomes. A major component of this is a call by our community stakeholders to focus on critical health problems/challenges within Arizona, to identify health problems/challenges that can be effectively addressed through research, to shorten the cycle of discovery to implementation, and to produce improved health outcomes within Arizona communities.

Your problem topic should reflect these goals, and should allow a focus upon solving the issue through community engagement, teaching, and research. Translational teams recognize the complexity of health and the need to bring together a wide array of disciplines to address health problems.

Summary
1. Description of the Problem/Challenge & Significance
   a. Briefly describe the health-related problem/challenge you hope to address. This should include 1) a definition of the community or population of focus; 2) statement of community need/benefit, and; 3) relevance to CHS goals, community partners, and students' educational experiences. Provide evidence of the significance of the problem. This might include incidence, prevalence, morbidity, mortality, health-related quality of life data (if available), and/or trends.

2. Translational Team Vision
   a. This statement should describe your team’s vision as it applies to the three key components of a Translational Team: research, community engagement, and student engagement. This is not a detailed explanation but rather a general vision that allows the review committee to understand how you plan to integrate these components.
   b. What is the scope of your planned research? What is your general plan/vision with regard to engaging community partners? This might be a plan to include partners across multiple sectors as members of your team or you might be planning to form an advisory board. What is your vision for involving students?

3. Existing Projects and Initiatives
   a. This section allows you to situate your team with regard to current research and programmatic efforts.
   b. Identify existing or competing initiatives, projects, centers or working groups addressing your topic of focus. Clearly outline how you will complement and/or leverage these within your translational team/project. Remember that your team should be inclusive and transdisciplinary. Leveraging talent and expertise external to CHS is important in demonstrating this. This might be within ASU or might include public sector initiatives.
   C. Are there existing Intellectual Property (IP) products or patents in this topic area? What are these and explain how you plan to utilize these to address the health problem.
Application Guide – Research Plan

Research Plan
This section of your application will build the foundation for your proposal – one from which all other aspects of your application will be based. It is very important to set your team apart from others. Make this all about your local community and your community’s needs. Help reviewers understand why supporting your team should be a priority when there are so many important needs across the state. Explain how your team and project is translational in scope and integrates the three components of research, community engagement, and student involvement.

Research Goal(s) & Objective(s)
   a. Explain how the team/research will address the health problem. What are your overarching goals and objectives. Identify the needs the proposal strives to address. Briefly, but clearly, describe the research project(s)’ purpose and discuss program components which address the identified problem. For each overarching goal, include (if identified) your specific aim and any associated measurable objectives. Specific, measurable, time-sensitive objectives should be included as a subset of each of the aims above. An example of how this might look is below:
      i. Research Goal #1
         1. Specific aim #1
            a. Measurable objective
      ii. Research Goal #2
         1. Specific aim #1
            a. Measurable objective
         2. Specific aim #2
            a. Measurable objective

TIP: When describing your aims, please distinguish between process and outcome objectives.
   ▪ State your objectives in quantifiable terms.
   ▪ State your objectives in terms of outcomes, not process.
   ▪ Objectives should specify the result of an activity.
   ▪ Objectives should identify the target audience or community being served.
   ▪ Objectives need to be realistic and possible to accomplish within the grant period.

Research Program Components
Describe the elements/components of your research program as planned. Are there multiple, interrelated projects? What methods do you plan to use to conduct your project(s) and what sampling is planned? Include a description of any multi- or trans-disciplinary methodologies that will be used and how you will integrate these. Transdisciplinarity is integral to translational science. A successful application integrates methods and theories from multiple disciplines to achieve translational scope and solutions.

Translational Scope
Describe in detail how this research is translational, at what levels, and why your approach will be effective in addressing the health problem.
Translational research facilitates the movement between discovery and implementation at the population/community level. Not all projects will encompass the entire breadth of this scope; however, teams should span one or more stages in order to be considered translational (see definition of terms, page 10). Describe what translational levels within which your team operate.

**Dissemination and Implementation**
Describe how the project team will successfully implement the research and disseminate project outcomes across CHS and the wider body of stakeholders. Discuss how the results will be integrated into and scaled across the wider health system. How will community partners and students be involved in this?

**Innovation**
How is the overall approach novel and innovative? Innovation may include new or creative applications of existing approaches or products. The integration of multiple disciplinary theories, approaches, or methods could be included in this, as well as methods, concepts, or approaches that have never been utilized.

You should also discuss how the innovation would impact your project and facilitate your goals, in the context of addressing your health topic. If there are competing or existing initiatives discussed in Section 2, how will your team leverage them?

**Current Funding**
Do any of the team members have current funding that relates to the work you propose? Describe this funding and how it relates to your team and project(s). This is a chance for your team to showcase that you have existing resources to bring to the team and how this adds to your potential success.
Application Guide – Community Partners & Stakeholders

Community Partners & Stakeholders
Community engagement is a key component of translational teams. Community partners should be included as vital team members and should reflect the expertise needed either within a particular community/population, and/or the health problem identified.

Hospitals, health care clinics, dental clinics, schools, charitable organizations, grass-roots organizations - these are just a few of our community partners. However, our community partners are not only defined by the services they provide. They are our eyes and ears regarding the challenges of health care today. Within a translational team, a community partner works together with ASU faculty and students to address a specific health care issue.

Good communication is essential and a plan should be outlined to demonstrate how, when, where you will communicate with your community partners.

Community Partners
Describe your community partner(s). You should include what they do, who they serve, where they are located and how their work aligns with the mission of the college. Please discuss any current projects you have active with these partners and how you have engaged them thus far.

Individuals and institutions may be engaged in anything from an advisory role to actual membership on the Translational Team. Please note the type of engagement planned.

Stakeholder Engagement Plan
A clear, concise plan to engage with community stakeholders should be outlined. While the entire plan might not be finalized, you should include your vision, work to date, and tentative plan as referenced above.

Describe the function of the team’s community members, engagement frequency and type, and justification for involvement; you can include both proposed and confirmed members. If there are patients involved, be sure to include patient advocates/advisors. Please include the community partner’s name, organizational affiliation, professional title and applicable credentials, and a justification for their inclusion on the team.

Utilize the tables provided in the application to detail your plan. Note that Early Stage teams may not have designated stakeholders, but may include potential partners (listed as such) or sectors that they envision being involved.
Student Engagement Plan
Translational Teams provide students with a unique opportunity to learn valuable research skills, translate science into real-world scenarios, and engage with communities in finding solutions. Student engagement and retention are key components of our college’s mission. As such, you are encouraged to work closely with the Student Success Liaison to engage and mentor students within your teams.

Students on Translational Teams
When thinking about involving students on your Translational Team, consider how you will engage them and what your specific goals are as a team. Perhaps more importantly, it should include student development goals and learning objectives and what skills and competencies students will gain. Consider if you want to recruit from specific majors, if prerequisites will be needed, if they will earn course credit, volunteer hours, or be paid for their time.

What is a Student Engagement Plan?
A Student Engagement Plan describes the number of students you plan to have on your team, what roles and responsibilities students will participate in, where they will be working, for how long, who will be supervising them, and how their efforts will be recognized (course credit, volunteer, or paid). Student roles might include: research and/or data entry, program-based engagement with the community, or perhaps community outreach. Other roles might also be planned. The duration of engagement will probably vary based upon the student role, scholastic level (undergraduate or graduate) and the stage of research or activity. While you might not know all of these variables, describe those you do.

A mentorship plan is also an important component. How and who will select, mentor, train, and supervise students? How will students be evaluated? This might be a graduate student supervising several undergraduates and being mentored in turn by junior faculty. Think about when and how you will evaluate students (i.e., are there formal evaluations distinct from grading, especially if they are volunteering and not earning course credit).
Application Guide – Team Membership and Leadership

Team Membership and Leadership
Team membership should reflect the complex nature of the health problem/challenge and include expertise from multiple disciplines and sectors that are relevant to the problem topic and research plan. In this section, you will include those people who will have an active, day-to-day engagement with the team. For example, these individuals may be involved in strategic planning, decision making processes, project design, dissemination, and implementation. At least some individuals listed in Tables Section 4B (community partners and stakeholders) and 5B (faculty) should be included in this section as they will be actively involved in the team activities. Do not include individuals whose only engagement is advisory only.

Early Stage Teams may not have completely filled out their teams but should have a core membership. Include all identified team members and list those who you hope to incorporate (scientists, faculty, staff, community partners), identifying them as prospective or unverified. If you only know disciplines or sectors that you would like to involve, you may indicate these in the table as well.

Team Membership
Fill out the table provided in the application as indicated above. Summarize how the team is transdisciplinary in composition and discuss how this impacts the envisioned research/project. Explain the special skills the team members have that will contribute to a successful team experience.

Also discuss whether or not the team has collaborated together previously. What were the results of that/those collaboration(s)? This might be publications, presentations, program development, proposals or even new collaborations.

NOTE: You should also think through and develop a mentorship plan that includes junior faculty, as discussed in the previous section with regard to graduate students and undergraduate students. How will each of these members engage and receive mentorship. Think critically about what junior faculty need from this experience. Upon acceptance, a mentoring plan for all Junior faculty will be requested.

Team Design: A review of multiple translational science programs suggests successful teams are those that display engaged leadership, are able to integrate multiple disciplines, have strong community partner networks, communicate effectively, and focus on translational outcomes (adapted from UTMB). Below is a recommended guide to developing your team:

- Team Lead/Principle Investigator (PI)
  - CHS faculty with PhD (or other terminal doctorate degree) and a strong research record
  - Role: Functions as overall leader
  - Responsibilities: leadership including communicating project goals, safety/ethical practices, and deadlines to team; conducts team meetings to update members on best practices, policies, continuing expectations; research expert; facilitates new
collaborations; generates comprehensive, detailed progress reports; developmental planning; motivates team members and assesses performance.

- **Project Manager (not required)**
  - Research faculty (may be senior or junior)
  - Role: functions to bridge communication and effectiveness between all members/groups, day-to-day management, tasked with actual execution
  - Responsibilities: project management including budget, monitoring/supervision of projects, developmental planning, on-going training, communication with internal and external stakeholders; assists with reporting, utilizes project management tools.

- **Team Members**
  - Research: Junior & senior scientists with expertise in multiple disciplines relevant to the health topic and projects
  - ASU staff: relevant staff with expertise to implement relevant components of project.
  - Community Team Members: relevant community partners with expertise in specific communities of need, implementation, or the health topic.
  - Student Members: undergraduate and graduate students who assist in project implementation (data collection/management), are trained in relevant research skills and are mentored by senior members.

**Best Practices**

- Build your team purposefully. Each team member should bring specific expertise to address the health problem. Teams should include multiple disciplines and sectors to deal with complex issues.
- Successful teams have a shared vision, goal, or purpose.
- Develop team work plans with clear roles, responsibilities, and timelines.
- Collaboration guidelines should be clearly communicated and agreed upon.
- Successful teams require effective, fair leadership and strategic management. Decision-making should be equitable and shared.

Some helpful links:

- [https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3652225/](https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3652225/)
- [https://www.hopkinsmedicine.org/women_science_medicine/_pdfs/team%20science%20field%20guide.pdf](https://www.hopkinsmedicine.org/women_science_medicine/_pdfs/team%20science%20field%20guide.pdf)
Application Guide – Communications

Communication Plan
There are several key components to any good communication plan. In this section, please include how you will communicate the following information and to whom by filling in the table below. Examples are providing for each information type to help you in completing your plan.

Also, please describe in a short paragraph, how you plan to document your progress and communicate between team members and the community? This is part of the dissemination process and an important part of translational research.

<table>
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<tr>
<th>Type of information communicated</th>
<th>Audience</th>
<th>Possible Format for communication</th>
<th>Timing/Dates</th>
<th>Notes:</th>
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<tbody>
<tr>
<td>Decision making about project design and activities</td>
<td>All TT members</td>
<td>In person meetings</td>
<td>Once a month</td>
<td></td>
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<tr>
<td>Information about upcoming deliverables</td>
<td>ALL TT members</td>
<td>Video and phone conferencing</td>
<td>Bi weekly</td>
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<tr>
<td>Keep informed about progress</td>
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<tr>
<td>Present initial/internal findings</td>
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<tr>
<td>Present final findings</td>
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**Best Practices**

1. Determine your communication strategy. Include when and how you should communicate (weekly, monthly, email, in-person) and what should be communicated.
2. Meet regularly and be inclusive. Make sure external partners are included in the process.
3. Be transparent, clear, and concise.
4. Encourage different points of view, but have a process for conflict resolution in place.
5. Management software can be an effective tool for communication and engagement.
Application Guide – Timeline

Timeline
Research/Project Activities should be detailed in a timeline. The timeline should document the “who, what, when and where” of your project(s). Provide details about project planning, community partner engagement, student recruitment/involvement, pilot testing or data collection, project implementation, dissemination, and evaluation.

1. Enter the Research/Project Timeline of Activities. (you can choose the format you prefer)
   For example, the months that the project will operate (July 2019 through June 2020) should be identified and what the project will do during those months (hire staff, train staff, recruit and train volunteers, attend trainings/conferences/workshops, collaborative partnership meetings, outreach events, etc.) should also be briefly described.
   Example:
   July – post position vacancy
   August – September – purchase equipment and office supplies for employee to be added
   September – conduct interviews and make hiring decision
   September-October – new employee is trained
   October, ongoing – new employee delivers services
   December – conduct regional meetings
   January – mid-year assessment
   April – conduct second round of regional meetings
   June – close of year evaluation
Benchmarks and Success Criteria

Evaluation
The purpose of performance evaluation is to link the activities of the project to the research/team goals. Imposing performance measurements ensures results through performance monitoring. Performance and evaluation methods establish a process to determine whether the activities of the project are successful in meeting the overall goal of the project. The information gathered through evaluation may assist in improving future activities and processes for greater success.

Metrics
Metrics should detail how your team will measure EACH Objective.

Evaluation Methods
Evaluation Methods should explain how your team plans to gather, record, and analyze your Performance Measures to help you understand how services are working.

Briefly discuss important indicators of success in each of the following domains of your translational team: team development, research plan, community engagement, and student engagement. Include both short and long term goals. Specify the timeline for measurement of specific metrics. For potential indicators of translational team success, please see the TT Evaluation Rubric.
Sample Evaluation Metrics
These are some sample metrics to input into the “Benchmarks and Success Criteria” section of the Translational Team Application. Some of these are based off of evaluation criteria for the Established Team application and may not be applicable to your application. You can use some of these, all of these, or add your own when you fill out your application.

1. Research Plan
   a. Identify specific aims and measurable objectives for your research goals
   b. Specific data collection milestones
   c. Physical deliverables such as submitted pilot grants, white papers, papers, conference presentations.
   d. Define pathway for translation of research into health system change or health outcomes change
   e. Create a defined research plan ready for implementation

2. Community Engagement
   a. Convene X number of meetings
   b. Involve X number of community partners in an advisory role
   c. Actively engage X number of community partners in the team
   d. Engage X number of sectors related to your health problem
   e. Community partners or representatives engaged will directly be linked to the health problem of focus
   f. Community partners or representatives engaged will be representative of target communities

3. Student Engagement
   a. Determine X number of types of student engagement opportunities and which students in which academic programs will be a good fit (i.e., internships, research assistantships)
   b. Determine X number of student engagement opportunities (i.e., aim for 4 opportunities total?)
   c. Work with academic liaisons to set up engagement plan and advertise on student placement platform
   d. X number of students engaged (undergraduate and graduate)
4. Team Development
   a. Team leadership has been identified
   b. Team roles have been further delineated (i.e., 2 new roles with specific definitions)
   c. Engage partners and faculty leadership in team
   d. There has been growth or change in team (i.e., fully developed research team).
   e. The team has transdisciplinary membership (can be measured by number of sectors, number of disciplines, etc.)
   f. The team has included or improved upon membership appropriate to the health problem identified
   g. Team includes community members/partners and students
   h. Team has begun successful collaboration (can be linked to deliverables, number of team meetings, general engagement)
Diversity & Inclusion
Translational Teams should have a diverse group of team members to assure that they include multiple perspectives, ideas, and concerns. Transdisciplinarity requires this integration.

Discuss how you will engage a representative and diverse group of student, community, and faculty throughout the team process (150 words).
Below is a definition of diversity to help you.

Diversity may take into consideration race, ethnicity, religion, national origin, citizenship, sex, sexual orientation, gender identity, age, disability and qualified veteran status. Representation reflects the extent to which our students, staff, faculty and administrators proportionately reflect the regional and national populations served by our public institution. Inclusion encompasses empowerment and voice among all members of the team and community in the areas of scholarship, teaching, learning and governance.

Please also discuss how your project will contribute to the achievement of health equity. According to the CDC, “Health equity is achieved when every person has the opportunity to ‘attain his or her full health potential’ and no one is ‘disadvantaged from achieving this potential because of social position or other socially determined circumstances.’”
Application Guide – Additional Documents

Application Attachments
The Application Attachment page is designed to allow you to upload any required documents electronically. This eliminates the need to send in copies of these documents directly.

Attachments due at the time of Application
1. **Application**: Please upload the completed application as a PDF.
2. **Member Biosketches**: This should be for all known team members and uploaded as one PDF.
3. **Detailed Budget & Narrative**: All applicant teams applying for funding are required to attach a detailed budget narrative. Please use the Budget Sheet provided in Appendix A and include calculations for each line item.
4. **Letters of Support**: Include letters of support from community members, including those actively serving on the team and those serving in an advisory capacity.
5. **Grant Award Notices**: Please include award notices on any current grants the members of your team have received that directly relate to the health problem discussed in this application and may be used in support of the team’s activities.
Budget
Please include a Budget Summary page containing an overview of the budget, an explanation on how you plan to utilize funds, and a justification. You should make sure to tie your budget items back to your project objectives, specific aims and methods.

**PLEASE NOTE ALL BUDGET REQUESTS MUST INCLUDE 8.5% ADMINISTRATIVE COSTS.**

**Budget Justification:** This is to provide additional information and explanation to support your request. Please follow the guidelines used by NIH and the Jumpstart Competition.

Program Director/Principal Investigator (Last, First, Middle):

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<th>NAME</th>
<th>ROLE ON PROJECT</th>
<th>Cal. Mnths</th>
<th>Acad. Mnths</th>
<th>Summer Mnths</th>
<th>INST.BASE SALARY</th>
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### Future Funding
What future funding do you anticipate being able to receive? What kind of funding do you think you will be able to apply for in the future? How will the team’s anticipated outcomes help secure funding? Please include potential philanthropic funding, and list funding agencies and specific Funding Opportunity Announcements (FOAs) if relevant. Please do not include college or university funds.
### Sample Team Evaluation Criteria for Early Stage Translational Teams

#### Section II. Translational Team Topic

<table>
<thead>
<tr>
<th>The team clearly defined the health-related problem, population of focus, how it is relevant to CHS and community partner goals.</th>
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<tr>
<td>The proposal clearly defines a statement of community need or potential benefit (can be through letters of support or through data).</td>
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<tr>
<td>Sufficient evidence was provided to support the significance of the problem (through demonstration of prevalence, impact on mortality, quality of life, etc.)</td>
</tr>
<tr>
<td>The specific aims provided directly address the health problem and are likely to positively impact it.</td>
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</table>

#### Section III: Research Plan

1. The overall research goals and associated objectives are clear and feasible.

2. The research program components are
   - well explained
   - explanation include how components are likely to impact the health problem identified in a positive way.

3. There is high potential for the research and work to
   - be translatable into practice
   - be effective in addressing the identified health problem

4. The team provides evidence of
   - history of conducting preliminary studies in this health area
   - existing projects in place with a plan to integrate with the team
   - the ability to successfully implement and disseminate

#### Section IV: Community Engagement

A. Community Partners and Stakeholders

The team has:
   - identified established community members
   - explained how the representatives work aligns with the mission of the college and the proposed project
   - explained current projects underway with these partners
   - explained how the partner will benefit the team (why chosen)

B. Stakeholder Engagement Table

   - The team has chosen a comprehensive group (across sectors, considering diverse interests roles)
   - Stakeholder interest/perspective and role on team align
   - Stakeholder role on team is well defined
   - How and when stakeholders will be engaged is well planned

C. The team is currently engaging with or has reasonable plans to engage with the community partners/stakeholders listed.
Section V. Student and Academic Engagement Plan

1. To ensure student engagement and development:
   - There are specific goals related to student engagement
   - There are specific goals related to student development.
   - The team lists defines potential skills that students are expected to gain are defined.

The team has listed the following in relation to the proposed Translational Teams:
   - potential student roles and
   - potential student activities
   - duration of involvement

Section VI. Team Membership and Leadership

A. The team membership and leadership table includes all possible roles.
   - There is a clear plan to fill gaps in possible roles.
   - The membership has the leadership and research experience to carry out the core functions of a team.
   - The team has both junior and senior faculty involved.

B. Transdisciplinarity:
   - The team is transdisciplinary in a way that helps achieve TT goals.
   - There are community members included on the team.

C. The team has collaborated together previously.

Section VII. Communication Plan

The team’s communication plan is well-defined. Table includes information on:
   - Type of information to be communicated
   - Audience
   - Format for communication
   - Timing/Dates

Section VIII. Benchmarks and Success Criteria

The team has identified specific and useful quality metrics for community engagement. At least some are related to translatability.

The team has identified specific and useful quality metrics for research success. At least some are related to translatability.

The team has identified specific and useful quality metrics for educational involvement and attainment of skills and competencies.

The team has identified specific and useful quality metrics for team development.

Section IV. Anticipated Future Funding

The plan for future funding includes multiple, diverse potential future funding sources. (Y/N)

Sample Team Evaluation Criteria for Established Translational Teams
### Section II: Translational Team Topic

1. **The team clearly defined the health-related problem or challenge:**
   - population of focus,
   - statement of community need/benefit,
   - how it is relevant to CHS, community partners, and student educational experiences.

2. **The team provided:**
   - evidence of the significance of the problem,
   - including pilot data previously supported by CHS or external funding.

3. **The team vision:**
   - directly address translational research and
   - directly address community engagement and
   - Student engagement.

### Section III: Research Plan

1. The overall research goals and associated specific aims are:
   - Clear and well-defined
   - Feasible
   - Include measurable objectives

2. The research program components are
   - well explained
   - explanation includes how components are likely to impact the health problem identified in a positive way.

3. There is high potential for the research and work to be translatable into practice and reach the populations for which it is intended.
   - fosters the multidirectional integration of basic research, patient-oriented research, and population-based research, with the long-term aim of improving the health of the public.
   - blends together different disciplinary perspectives, theories, and methods

4-6. There is a high likelihood that the team will be able to successfully implement and disseminate the research or project.
   - Implementation: process of turning results into interventions, policies, practice, or solutions in public health settings. Strategies used to adopt and integrate evidence-based health interventions and change practice patterns within specific settings.
   - Dissemination: process of sharing research findings or products with those who will utilize the information in practice (health services, policy, or decision-making) or daily life

### Section IV: Community Engagement

**A. Community Partners and Stakeholders**
The team has:
   - identified established community members
   - explained how the representatives' work aligns with the mission of the college and the proposed project
   - explained current projects underway with these partners
   - explained how the partner will benefit the team (why chosen)
B. The team is currently engaging with or has reasonable plans to engage with some or all of the community partners/stakeholders listed.
   • have relationships
   • related to project at hand
   • currently active ongoing projects

C. The team is currently engaging with or has reasonable plans to engage with the community partners/stakeholders listed.

Section V. Student and Academic Engagement Plan
1. To ensure student engagement and development:
   ● There are specific goals related to student engagement
   ● There are specific goals related to student development.
   ● The team lists defines potential skills that students are expected to gain are defined.

The team has listed the following in relation to the proposed Translational Teams:
   • potential student roles and
   • potential student activities
   • duration of involvement

Section VI. Team Membership and Leadership
A.  
   • The team membership and leadership table includes all possible roles.
   • There is a clear plan to fill gaps in possible roles.
   • The membership has the leadership and research experience to carry out the core functions of a team.
   • The team has both junior and senior faculty involved.

B. Transdisciplinarity:
   • The team is transdisciplinary in a way that helps achieve TT goals.
   • There are community members included on the team.

C. The team has collaborated together previously.

Section VII. Communication Plan
The team's communication plan is well-defined. Table includes information on:
   • Type of information to be communicated
   • Audience
   • Format for communication
   • Timing/Dates

Section VIII. Benchmarks and Success Criteria
The team has identified specific and useful quality metrics for community engagement. At least some are related to translatability.

The team has identified specific and useful quality metrics for research success. At least some are related to translatability.
| The team has identified specific and useful quality metrics for educational involvement and attainment of skills and competencies. |
| The team has identified specific and useful quality metrics for team development. |
| **Section IV. Anticipated Future Funding** |
| The plan for future funding includes multiple, diverse potential future funding sources. (Y/N) |
FAQS (for more FAQs, see the CHS Intranet site)

Can anyone develop a Translational Team?

College of Health Solutions (CHS) faculty, staff, and students are all eligible to develop a Translational Team. This includes both junior and senior faculty as well as non-tenure and tenure-eligible faculty. ASU faculty, researchers, and staff may also develop a team, but the Lead/PI on the team must be a faculty member in good standing in the College of Health Solutions with a strong research background.

What if the team is missing a few components?

Teams with key components missing or un-developed may still apply for Formative or Developing Translational Team status. CHS recognizes that early stage or beginning teams need different types of support than established or fully-developed teams. However, even Established TTs need to more fully develop components of their team, so applying to become a designated Translational Team will have the potential to benefit teams at all levels of their evolution. As a major thrust of the Translational Team initiative is to catalyze development of new teams. CHS support is differentiated based upon the phase of development and needs.

Can a team only apply once?

Teams may apply multiple times.

What is the deadline for application?

There are two application cycles, Fall and Spring. For more information about deadlines please check the CHS Intranet.

Are there resources available to assist teams in the development process?

Teams may meet with the TT Core Committee to assist in proposal development. A Training Program is being developed and will be available on Canvas for faculty and staff. Workshops in transdisciplinary team development and community engagement are planned as well, in collaboration with the Interdisciplinary Translational and Integration Sciences Initiative. Additional resources are also available. Please see the Resources Appendix at the back of this handbook.

Who reviews the applications and what are the evaluation metrics?

All submissions will be reviewed by a Review Committee that includes at least one tenure-track faculty, one non-tenure track faculty, one community partner and one graduate student. Committee members are selected from a Study Section roster, similar to the NIH review process. See Appendix E for sample evaluation metrics.
Definition of Terms

**Community Advisory Board**
A type of advisory group consisting of members of the general public or community who provides strategic information and advice to the team. The board also facilitates research by serving as a link between the community and researchers. (NCI Dictionary)

**Community Partner(ship)**
A formal arrangement with an individual, association, private sector organization, or public institution (local, state, national or international) in which the partner and academic unit agree to work together to educate, open discussion, address and solve problems, usually with all parties involved as well as stakeholders in all parts of the problems/issues and solutions. (ALA Special Committee)

**Competency**
The combination of observable and measurable knowledge, skills, abilities, and personal attributes that contribute to enable a person to perform well in a given situation or job. (University of Nebraska)

**Dissemination**
A planned process that involves consideration of target audiences and the settings in which research findings are to be received and, where appropriate, communicating and interacting with wider policy and health service audiences in ways that will facilitate research uptake in decision-making processes and practice. The process of sharing research findings or products with those who will utilize the information in practice or daily life. This is a key part of collaborative, translational research. (NCBI Resources, Wilson et al 2010)

**Diversity**
The inclusion of individuals representing more than one national origin, ethnicity, race, color, religion, social class, gender, sexual orientation, age, political beliefs, physical attributes, etc. into an inclusive environment that accepts each individual’s differences, embraces their strengths, and provides opportunities for all to achieve their potential. (ADCQ)

Diversity is defined in terms of representation and inclusion. Representation reflects the extent to which our students, staff, faculty and administrators proportionately reflect the regional and national populations served by our public institution. Inclusion encompasses empowerment and voice among all members of the university community in the areas of scholarship, teaching, learning and governance. (ASU)

**Equity**
Justice according to natural law or right, specifically freedom from bias, discrimination, or favoritism.

**Implementation**
The process of turning strategies and results into interventions, policies, practice, or solutions in public health settings. The use of strategies to adopt and integrate evidence-based health interventions and change practice patterns within specific settings. (Koorts et al 2018)

**Inclusion**

The involvement and empowerment of individuals, recognizing the inherent worth and dignity of all and promoting a sense of belonging and respect for talents, beliefs, backgrounds, and ways of living. ASU promotes equal opportunity through affirmative action in employment and educational programs and activities. Discrimination is prohibited on the basis of race, color, religion, national origin, citizenship, sex, sexual orientation, gender identity, age, disability and qualified veteran status. (ASU Office of Equity and Inclusion)

**Innovate/Innovative/Innovation**

The introduction or use of new methods, techniques, ideas, or products to solve a problem or provide a new way to accomplish something. This may include new applications of existing approaches and is a process, involving multiple activities and possibly multiple actors to arrive at something new. (Merriam-Webster; Gemeunden, Innovation CC)

**Interdisciplinary**

Actively Integrating, synthesizing, and linking two or more fields of study (disciplines) to create new conceptual, theoretical, methodological innovations that integrate and move beyond discipline-specific approaches to a common problem.

Integrating diverse perspectives, concepts and theories from several disciplines and fields of expertise to advance our understanding of complex fundamental problems and create innovative solutions. (ASU College of Liberal Arts & Sciences; Choi & Pak 2006)

**Mentorship**

Guidance provide by CHS faculty/researchers to assist students in developing the requisite skills and knowledge. Mentoring can be faculty to student, graduate student to undergraduate student, or senior faculty to junior faculty. Mentorship is usually a long-term, one-on-one relationship that goes beyond simply providing information. (ncbi.nlm.nih.gov)

**Scalability**

The potential of an intervention or product to be delivered to an increasing number of participants or settings, while retaining effectiveness. (Koortz et al 2018)

**Sustainability**

The ability of an intervention, practice, product or policy to be maintained through time at a viable rate or level, without compromising other systems, individuals, practices, etc. (Merriam-Webster)

**Transdisciplinary**

Connotes a research strategy that crosses many disciplinary boundaries to create a holistic approach. It applies to research efforts focused on problems that cross the boundaries of two or more disciplines or
methods that were originally developed by one discipline, but are now used by several others, such as ethnography, a field research method originally developed in anthropology but now widely used by other disciplines. The Belmont Forum elaborated that a transdisciplinary approach is enabling inputs and scoping across scientific and non-scientific stakeholder communities and facilitating a systemic way of addressing a challenge. This includes initiatives that support the capacity building required for the successful transdisciplinary formulation and implementation of research actions.

Translation

The process of turning observations in the laboratory, clinic, and community into interventions that improve the health of individuals and the public — from diagnostics and therapeutics to medical procedures and behavioral changes. It fosters the multidirectional integration of basic research, patient-oriented research, and population-based research, with the long-term aim of improving the health of the public. This type of research blends together different disciplinary perspectives, theories, and methods to arrive at a unique approach to the problem.

Translational science

The field of investigation focused on understanding the scientific and operational principles underlying each step of the translational process.

More recently, there is a move away from a staged process. The illustration below depicts this iterative process.

![Translational Science Diagram](image)

**Figure Source**


**Definition References**

Altman Clinical and Translational Research Institute, UC San Diego. [https://medschool.ucsd.edu/research/actri/about/Pages/AboutTranslationalResearch.aspx](https://medschool.ucsd.edu/research/actri/about/Pages/AboutTranslationalResearch.aspx)
Anti-Discrimination Commission-Queensland  

ALA Special Presidential Committee  
http://library.austincc.edu/presentations/CommunityPartnerships/communitypartnerships1.html

ASU Office of Inclusion and Community Engagement  
https://inclusion.asu.edu/diversity  
https://cfo.asu.edu/equity-and-inclusion

Belmont Forum  
http://www.belmontforum.org/


Merriam-Webster  
https://www.merriam-webster.com/dictionary/

NCBI Resources  
ncbi.nlm.nih.gov

National Cancer Institute (NCI)  

National Institutes of Health  
https://www.nih.gov/


University of Nebraska  
https://hr.unl.edu/compensation/nuvalues/corecompetencies.shtml/

https://www.ncbi.nlm.nih.gov/pmc/articles/PMC2994786/
Guidelines for Collaborative Analysis and Publication

Transdisciplinary teams often are a nexus of several large transdisciplinary projects funded from multiple sources that together engage collaborators from dozens of very different academic fields, government agencies, and community groups, across multiple institutions and countries. The following guidelines are meant to help smooth the collaborative use of data and the process of publication in order:

- to encourage and assist individuals interested in using data to gain access;
- to avoid overlap between manuscripts;
- to bridge differences between disciplinary norms about how publication and authorship is determined;
- to ensure that the main research questions that drove relevant research funding are addressed;
- to ensure that manuscripts are completed in a timely manner;
- to ensure that manuscripts are of high quality;
- to ensure that individuals are adequately recognized for their contributions and hard work.

The most successful collaborations also, of course, require both communication and flexibility, so these guidelines should also be applied with that in mind.

**DATA USE**

1. A very brief proposal should be completed for each proposed manuscript or thesis/dissertation (see form). The proposal should be submitted to, and discussed with, the relevant Principal Investigator for that project. The PI is often the person taking the lead in any IRB approval, and/or the PI(s) on the grant providing funding for the relevant data collection. As deemed appropriate, the proposal would then be circulated to other relevant investigators/staff.
2. The PI will keep a running list of all published manuscripts, proposed manuscripts, and ideas for manuscripts related to each project. This list should be sent to the Translational Team Manager and updated regularly. It will be available for others to review.
3. Highest priority will be given to analysis and publication of the major research questions that the grant paying for data collection and analysis was designed to address.
4. Highest priority will be given to investigators on the original proposal and/or those involved in running the study; however, in order to encourage wide use of the data set, others are welcome and encouraged to use the data in preparing manuscripts.
5. High priority will also be given to analyses being done for a thesis/dissertation (with an extended timeline permitted—as decided upon between the student and the PI or other investigator serving as the advisor).
6. All key personnel directly involved in design and execution of the study will have access to the complete dataset, pending relevant IRB approvals. Only the relevant subset of the data will be sent to authors not involved in the execution of the study, with that dataset constructed depending on the research questions to be addressed in the manuscript.
7. It is the responsibility of first authors to ensure all IRB requirements are being met.

**AUTHORSHIP AND CREDIT**
1. Following ICJME guidelines, authorship credit requires 1) substantial contributions to conception and design, or acquisition of data, or analysis and interpretation of data, 2) active engagement in drafting the article or revising it critically for important intellectual content, and 3) final approval of the version to be published. Clerical or mechanical contributions (e.g., data entry and checking) to an intellectual product are not grounds for ascribing authorship. Participation solely in the acquisition of funding or overall supervision of the project is also insufficient for authorship.

2. All persons who qualify for authorship should be listed. However, in practical terms, a maximum of six authors per article is expected.

3. Along with authorship credit goes the responsibility for the work, and all authors should have participated sufficiently in the work to take public responsibility for appropriate portions of the content. The lead author has responsibility for the integrity of the work as a whole. Usually the PI(s) will be a co-author on all manuscripts unless agreed upon otherwise; their input on the papers will be expected to ensure quality and consistency of the paper in the context of the wider project.

4. With regard to authorship—the individual who takes the major role in writing the manuscript will be the senior (first) author—unless agreed upon otherwise prior to beginning the work—or unless the work is not progressing in a timely manner or substantial revisions are needed that are not being made in a timely manner.

5. There is no way to objectively formulate guidelines for who should be listed first, second, etc., but authorship order should always be determined solely by magnitude of contribution to the project. Decisions about order of authorship result from open communication and discussions, recognizing that there are very different disciplinary standards e.g., usually first/second author in social science, last author in science/medicine) so the field in which the work is being published may also be a guide to order.

PUBLICATION PROCESSES

1. The expected time from date of proposal submission to manuscript submission is four months. Longer time periods must be discussed and agreed upon with the PI. In order to ensure timely publications; another interested individual may take the role as lead author if there is delay.

2. Co-authors should get back to lead authors with their comments of drafts of papers within a 2 week period.

3. It is the responsibility of the lead author to notify co-authors on status of manuscripts (e.g., in press) and involve co-authors in the development of manuscripts. Lead authors should not submit papers at any stage of the submission process without co-authors having the opportunity to provide feedback.

4. Electronic copies of all submitted and published manuscripts and conference abstracts should be sent to the PI and Translational Team Lead, because these are needed to allow reporting back to the relevant funding agency. For projects funded by NIH and NSF, etc., all final, peer reviewed manuscripts must be shared in a way to comply with the agency public access policies.

5. Publications should be uploaded and/or reported to Research Gate with co-authors tagged. Notice should be sent to all co-authors. This is crucial in circulating your research, verifying your efforts in reporting and in maintaining access and communication for all parties involved.
6. Revisions and resubmissions of manuscripts should be done within a one-month period. In order to ensure timely publications, another interested individual may take the role as lead author if there is delay.

7. Lead authors are encouraged to discuss their ideas with members of the research team in order to lead to a better product. Teamwork on papers is strongly encouraged.

8. All authors need to review and give their approval on outgoing manuscripts, abstracts, or other types of publications. Lead authors should notify other authors about tight timelines (e.g., abstracts for conferences) ahead of time. Proofs of manuscripts should be carefully reviewed by the lead author and where relevant by the primary analyst (e.g., biostatistician).

9. All published manuscripts should include an acknowledgement of the relevant funding source, with text provided by the PI. E.g., “This study was supported by the College of Health Solutions” or “This project was supported in part by an award from the College of Health Solutions Translational Team Initiative.” All others who supported, assisted with, and aided the research should be acknowledged as inclusively as space allows.

10. For students using datasets for theses or dissertations, they will normally have significant autonomy in preparation of the work so they can be fairly graded. However, in moving from a thesis to external publication, a further request and review process will occur to ensure adequate quality and correct final authorships.

These guidelines were adapted from Project EAT (PI: D. Neumark-Sztainer; Division of Epidemiology and Community Health, School of Public Health, University of Minnesota). Revised March, 2015 and Mayo Clinic-ASU Obesity Solutions with last revision July 11, 2018, College of Health Solutions.