

Delivering Optimal Cancer Care for All

The science of teams,
healthcare delivery, & implementation at NCI



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Roadmap

1. NCI Division of Cancer Control & Population Sciences (DCCPS)
 - Mission & organization
 - Overarching interests
2. Healthcare Delivery Research Program (HDRP)
 - Healthcare Teams & Teamwork Processes in Cancer Care Delivery
3. Implementation Science (IS)
4. Other opportunities & early career
5. Questions & discussion



NATIONAL CANCER INSTITUTE

Division of Cancer Control & Population Sciences

THE CANCER CONTROL CONTINUUM

FOCUS



Etiology

- Environmental factors
- Genetic factors
- Gene-environment interactions
- Medication (or pharmaceutical) exposure
- Infectious agents
- Health behaviors



Prevention

- Tobacco control
- Diet
- Physical activity
- Sun protection
- HPV vaccine
- Limited alcohol use
- Chemoprevention



Detection

- Pap/HPV testing
- Mammography
- Fecal occult blood test
- Colonoscopy
- Lung cancer screening



Diagnosis

- Shared and informed decision making



Treatment

- Curative treatment
- Non-curative treatment
- Adherence
- Symptom management



Survivorship

- Coping
- Health promotion for survivors

<http://cancercontrol.cancer.gov/>



NATIONAL CANCER INSTITUTE

Division of Cancer Control & Population Sciences

Mission

Advancing research in cancer control and population sciences to eliminate cancer and its consequences for all.

Vision

A world without the burden of cancer.

<http://cancercontrol.cancer.gov/>

Programs and Offices

Surveillance
Research
Program (SRP)

Epidemiology and
Genomics
Research
Program (EGRP)

Behavioral
Research
Program (BRP)

Healthcare
Delivery
Research
Program (HDRP)









Office of Cancer
Survivorship
(OCS)

Health Disparities
and Health Equity
(HDHE)

Implementation
Science (IS)

National Cancer Plan

EIGHT GOALS

-  **Prevent Cancer**
-  **Detect Cancers Early**
-  **Develop Effective Treatments**
-  **Eliminate Inequities**
-  **Deliver Optimal Care**
-  **Engage Every Person**
-  **Maximize Data Utility**
-  **Optimize the Workforce**

A plan for the National Cancer Program to align broad societal engagement and focus on critical needs to end cancer as we know it.

EVERYONE HAS A ROLE!

- The White House
- Congress
- National Cancer Institute
- NIH Institutes and Centers
- U.S. Department of Health and Human Services
- Cancer Cabinet
- Professional Societies
- Advocacy Organizations
- Academia
- Industry
- Foundations
- Health Care Providers
- People with Cancer and Other Individuals

CANCER MOONSHOT

Providing the vision and charge for a whole-of-government approach to stimulate collaboration and accelerate progress across the National Cancer Program

nationalcancerplan.cancer.gov

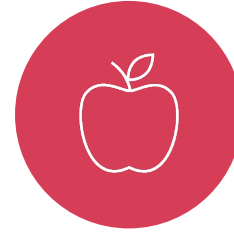
DCCPS Key Cross-Cutting Areas of Focus



Health Equity



Data Strategies



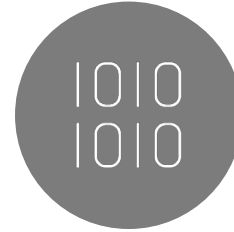
Modifiable Risk Factors



Climate Change



Evidence-based Policy



Digital Health

<https://cancercontrol.cancer.gov/research-emphasis/future-directions>

Behavioral health research support in DCCPS

- **Tobacco, Cannabis, Alcohol**
- **Polysubstance use:** CRAN-supported PAR on integrative research on **polysubstance abuse and disorder**; multiple NOSIs, admin supplements, PARs on behaviors and policies related to **polyuse**
- **Opioids:** NCI participation in the **HEAL Initiative**; webinar series on policy approaches to achieving equity in **cancer pain management**
- **Mental health:** IT-enabled care delivery to improve **depression care in cancer** (NOSI); IT support for systematic **depression screening and treatment** in oncology practices (PA); webinars on **psychosocial health needs** and **SMI** in survivorship
- **Cancer survivorship & mental health (NIH-wide):** 92 grants awarded, 2017-2023, most focused on depression/depressive mood or distress/PTSD symptoms/stress management (Mollica et al., 2023 J Cancer Surviv)





Healthcare Delivery Research Program


- Home
- Funding ▾
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- Areas of Interest ▾
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- About ▾

The mission of the Healthcare Delivery Research Program (HDRP) is to advance innovative research to improve the delivery of cancer-related care, thereby improving health for individuals and populations.

 Follow HDRP on Twitter [@NCICareDelivRes](https://twitter.com/NCICareDelivRes)

 Follow HDRP on [LinkedIn](#)

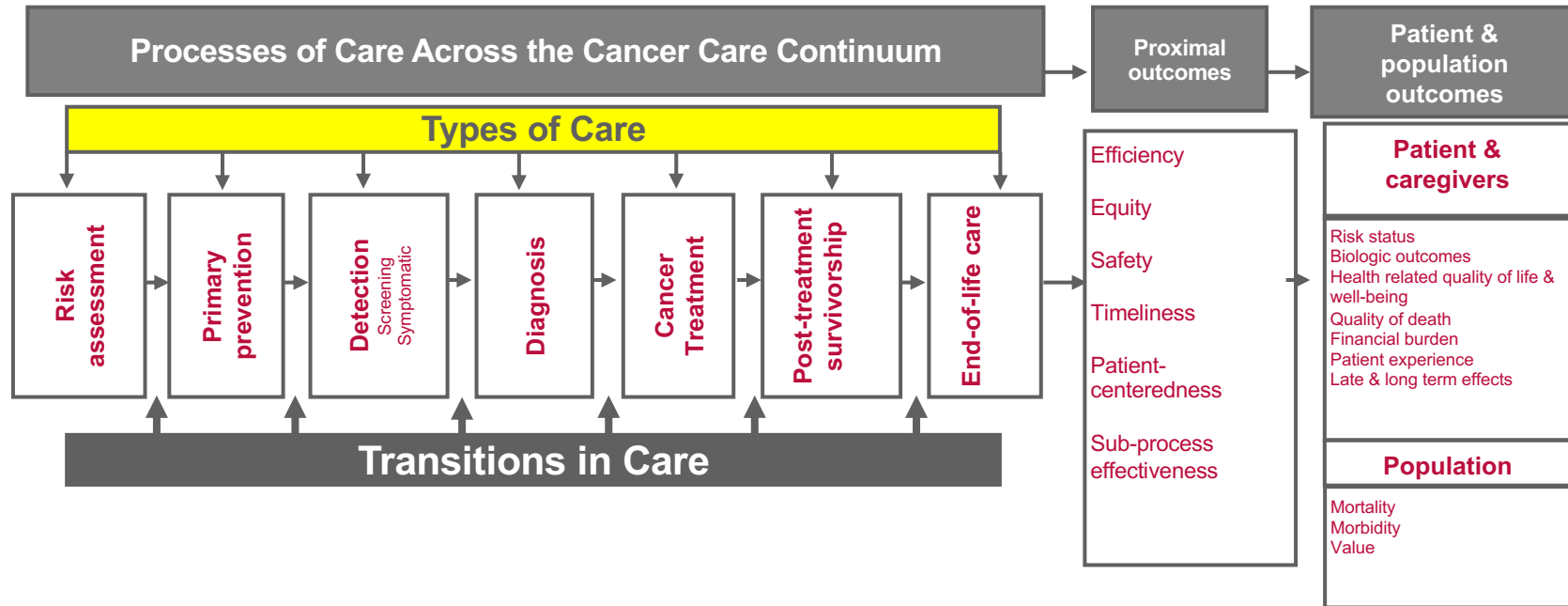
 [Subscribe to the HDRP e-newsletter](#)

 Have questions, comments or feedback? [Contact HDRP directly.](#)



What types of research do we support?

HDRP supports care delivery research across the cancer care continuum



(Taplin et al., 2012)

- Observational research → targets for intervention
- Intervention research developing, testing care delivery interventions
 - Multi-level interventions of particular interest
- Patterns of care studies
- New measures and metrics



Healthcare Delivery Research Program

Home Funding ▾ Data & Tools ▾ Research Networks ▾ Areas of Interest ▾ News & Events About ▾

Healthcare Teams & Teamwork Processes in Cancer Care Delivery

Home Areas of Interest Healthcare Teams

AREAS OF INTEREST

Advancing Rapid Cycle
Research in Cancer Care
Delivery

Addressing Social Risks in
Cancer Care

Cancer Caregiving

Cancer Health Economics
Research

Cancer MoonshotSM Efforts:
Federal Cervical Cancer
Collaborative (FCCC)

Healthcare Teams

Healthcare Teams Cyber
Discussions

NCI-ASCO Teams in Cancer
Care Delivery

Panel Discussion on
Competencies for Teaming
in Multiteam Systems

Health of Sexual and Gender

Background

Reducing cancer morbidity and mortality requires interactions between patients, caregivers, clinicians, and clinical staff from primary care and multiple specialties. Challenges to and breakdowns in communication and coordination across the cancer continuum are common, diminish patient outcomes, and contribute to patient, caregiver, and clinician workload. Improving the function of healthcare teams, defined as two or more people who interact to achieve shared patient care goals, was identified by the [National Academy of Medicine](#) as a vital step toward delivering high-quality, well-coordinated care across the cancer care continuum for all people. The goal of the Healthcare Teams initiative is to advance a program of research that supports the development and implementation of evidence-based strategies that improve healthcare team functioning, care coordination, and cancer-related outcomes.

NCI is conducting several activities in service of building such a program of research. This work aims to:

- Identify principles of team structure and teamwork processes that enhance the delivery of multidisciplinary cancer care
- Promote generation of evidence-based interventions to strengthen teaming and care coordination across the cancer care continuum, particularly among underserved populations and during care transitions
- Develop an interdisciplinary community of investigators whose research furthers an evidence-based understanding of team-based care structures and teamwork process that influence care coordination and equitable access to high-quality cancer care and other collaborators working to facilitate adoption of findings into cancer care practice

Notice of Funding Opportunities (NOFOs)

- NOSI: Research on Interprofessional Teamwork and Coordination During Cancer Diagnosis and Treatment ([NOI-CA-22-014](#))

multidisciplinary care

interprofessional care

patient-centered care

teamlets

Interprofessional collaboration

shared care

Team-based health care is the provision of health services to individuals, families, and/or their communities by at least two health providers who work collaboratively with patients and their caregivers —to the extent preferred by each patient—to accomplish shared goals within and across settings to achieve coordinated, high-quality care

-Mitchell et al., 2012, NASEM/IOM Roundtable on Value & Science Driven Healthcare

team-oriented health care

integrated care

comprehensive care

collaborative care

multispecialty care

coordinated care

medical home

Teams = A structure + behaviors, attitudes, cognitions (teamwork) used to perform interdependent work, achieve shared goals

Group, collectives, or “psuedo-teams”

- ≥ 2 people with common purpose
- Evaluation & accountability structures focus primarily on individual performance
- Often incorrectly labeled as a “team”



“Real” Teams & crews

- ≥ 2 people
- Shared goal(s), interdependence, shared accountability
- Use teamwork process to coordinate work
- Ideally, reflect on performance and progress toward to collective goals
- Crews: Role-based, less impacted by membership change



Multi-team System (MTS)

- Interdependent “team-of-teams”
- Working toward at least one overarching system-level goal
- Each site/team working toward both local goals and overarching MTS goals
- Use teamwork process to coordinate their work



Teaming

- Teaming = verb
- Applying the mindset and practices of effective teamwork to situations without stable team structures



(Lyubovnikova et al., 2015; Hackman, 2002; Mathieu et al., 2001; Edmondson, 2012)

Thinking about teams & teaming along the cancer continuum

- **Characteristics vary by activity, phase of continuum, care transition of interest**
 - Screening, follow-up, MCCs, survivorship (pcp/MA, imaging, pathology, oncology & other specialists)
 - Multidisciplinary clinic models and/or tumor board/conference
 - Health professionals working a specific pediatric oncology unit or infusion clinic
 - Patient navigator as boundary spanner collaborating with community food bank
 - Transitions: surgery at cancer center, adjuvant therapy at local outpatient clinic
- **Intra-professional, inter-professional, and/or multidisciplinary**
 - [2021 Proposed Lexicon for the Interprofessional Field](#), J of Interprofessional Care definitions
- **Advance, learn from teaming, collaboration, crews, multi-team systems (MTS) research**
- **Unfolds in multilevel context (policy, health system, hospital/clinic, team, individual)**
- **Person + caregiver(s)/loved ones are critical, but understudied team in this MTS**

E.g., R01CA268004 (PI: Donna Posluszny, U of Pittsburgh) Dyadic Intervention to Improve Patient-Family Caregiver Team-Based Management of Medical Regimen after Allogeneic Hematopoietic Cell Transplantation

Key tools to advance science

- Thinking big: Identifying scientific gaps, trends, where evidence is needed
- Funding research through grants, supplements, contracts
- Developing & housing large data resources & measurement tools
E.g., SEER-Medicare (cancer registry data + Medicare claims), -Medicaid, -MHOS, -CAHPS
- Supporting research networks
- Convening & partnering with the extramural research community & key stakeholders
E.g., ASCO, ACS, President's Cancer Panel, NASEM

Example activities: Papers

- SEER-Medicare analyses of clinical team composition, impact on care quality
- Conceptual & primary data collection
- Nov 2016 & Jan 2023 JCO Oncology Practice special issues: Teams in Cancer Care

SPECIAL SERIES: TEAMS IN CANCER CARE

Clinical Multiteam System Composition and Complexity Among Newly Diagnosed Early-Stage Breast, Colorectal, and Lung Cancer Patients With Multiple Chronic Conditions: A SEER-Medicare Analysis

Michelle Doose, PhD, MPH¹; Dana Verhoeven, PhD, MS¹; Janeth I. Sanchez, PhD, MPH¹; Jennifer K. McGee-Avila, PhD, MPH¹; Veronica Chollette, RN, MS¹; and Sallie J. Weaver, PhD, MHS²

The Anatomy and Physiology of Teaming in Cancer Care Delivery: A Conceptual Framework

Dana C Verhoeven, PhD , Veronica Chollette, RN, MS, Elizabeth H Lazzara, PhD, Marissa L Shuffler, PhD, Raymond U Osarogiagbon, MD, Sallie J Weaver, PhD

JNCI: *Journal of the National Cancer Institute*, Volume 113, Issue 4, April 2021, Pages 360–370, <https://doi.org/10.1093/jnci/djaa166>

JCO® Oncology Practice
An American Society of Clinical Oncology Journal



Prospective Comparative Effectiveness Trial of Multidisciplinary Lung Cancer Care Within a Community-Based Health Care System

M.P. Smeltzer et al





<p>Toward Team-Based Cancer Care in the United States: 6 Years Later M.P. Kosty et al</p>	<p>Scoping Review to Inform the Future Development of a Measure for Team-Based Care in Oncology R. Zurich et al</p>	<p>Fostering a High-Functioning Team in Cancer Care Using the 4R Oncology Model: Assessment in a Large Health System and a Blueprint for Other Institutions R. Liu et al</p>
<p>Pancreatic Adenocarcinoma Management Y. Jiang and D.P.S. Sohail</p>	<p>Impact of Merging Into a Comprehensive Cancer Center on Health Care Teams and Subsequent Team-Member and Patient Experiences D. Majumdar et al</p>	<p>Using Teamwork to Bridge the Adolescent and Young Adult Gap J.A. Wolfson et al</p>

ASCO® AMERICAN SOCIETY OF CLINICAL ONCOLOGY KNOWLEDGE CONSULTANTS CANCER

Wolters Kluwer ascopubs.org/journal/op

RESEARCH ARTICLE

Multilevel factors associated with inequities in multidisciplinary cancer consultation

Janeth I. Sanchez PhD, MPH¹  | Michelle Doose PhD, MPH²  | Chris Z...
Veronica Chollette RN, MS¹  | Natalie Gasca PhD⁴ | Dana Verhoeven PhD
Sallie J. Weaver PhD, MHS¹ 

Identifying Cancer Care Team Competencies to Improve Care Coordination in Multiteam Systems: A Modified Delphi Study

Authors: Veronica Chollette, RN, MS  Sallie J. Weaver, PhD, MHS, Grace Huang, MPH, PhD, Sophia Tsakrisidou, PhD, and Shen-Hyng Tu, MD, MPH 

Publication: JCO Oncology Practice • Volume 18, Number 11 • <https://doi.org/10.1200/JOP.20.00001>

Healthcare organization characteristics in cancer care delivery: an integrated conceptual framework with content validation

Sallie J Weaver, PhD, MHS , Erica S Breslau, PhD, MPH, Lauren E Russell, MPH, MPP, Allen Zhang, BS, Ritu Sharma, BSc, Eric B Bass, MD, MPH, Jill A Marsteller, PhD, MPP, Claire Snyder, MHS, PhD

JNCI: *Journal of the National Cancer Institute*, djae048, <https://doi.org/10.1093/jnci/djae048>

Example activities: Workshops



Where we are: Measuring teaming and coordination in cancer care delivery

Survey & qualitative

EHR-based measures & methods

Population & claims-based

Agenda, recordings, conference summary here:

<https://healthcaresdelivery.cancer.gov/media/measures-and-methods.html>

2024 Advanced Practice Providers across the Cancer Continuum

July 18, 2024, 1p-2p ET: *Optimizing APP Integration into Multidisciplinary Cancer Care Teams*



Todd Pickard, MMSc, PA-C,
DFAAPA, FASCO
Unv. Of Texas MD Anderson
Cancer Center



Siu-Fun Wong, PharmD,
FASHP, FCHP
Unv. Of California, Irvine
College of Medicine



Al B. Benson, MD, FACP,
FACC, FASCO
Robert H. Lurie Comprehensive
Cancer Center
Northwestern Unv.

Nov 21, 2024, 11a-12p ET: *Advanced Practice Providers' Impact on Cancer Care Delivery:
Bridging Research and Practice*

Register here:

<https://healthcaredelivery.cancer.gov/cyberseminars/>

Previous series topics

2023 Toward disaster resilient healthcare teams

2022 Interprofessional collaboration to address social risks and cancer care

2021 Telehealth & cancer care delivery

2020 Interprofessional approaches to address financial hardship among individuals with cancer

Recordings here:

<https://healthcaredelivery.cancer.gov/media/webinars.html>

Example funding opportunities

- **NOT-CA-22-014 Notice of Special Interest (NOSI): Research on Interprofessional Teamwork and Coordination During Cancer Diagnosis and Treatment (R01, R21, R03, P01; Clinical Trials Optional)**
- PAR-22-092 Health Care Models for Persons with Multiple Chronic Conditions from Populations that Experience Health Disparities: Advancing Health Care towards Health Equity (R01 - Clinical Trials Optional)
- NOT-HD-027 Notice of Special Interest (NOSI): Navigating Pediatric to Adult Health Care: Lost in Transition (R01, R21, SBIR/STTR)
- NOT-CA-24-033 Notice of Special Interest (NOSI): Telehealth Research in Cancer Care (R01, R21, R03; Clinical Trials Optional)
- PAR-23-292 Improving Care and Outcomes for Cancer Survivors from Sexual and Gender Minority (SGM) Populations (R01 Clinical Trial Optional)

MANY MORE:

<https://healthcaredelivery.cancer.gov/funding/opportunities.html>

NOT-CA-22-014 Notice of Special Interest (NOSI): **Research on Interprofessional Teamwork and Coordination During Cancer Diagnosis and Treatment**

Highlight interest in receiving applications focused on understanding, improving interprofessional teamwork and coordination during cancer diagnosis, treatment

Focus: Mature (R01, P01), exploratory/developmental (R21), or small (R03) research projects that...

- Identify effective strategies for improving performance of interprofessional cancer care teams during cancer diagnosis and treatment
- Address care coordination challenges:
 - Within and/or between care settings (e.g., between tertiary care and community settings)
- Advance measurement of constructs relevant to cancer care delivery research on interprofessional teamwork and care coordination

Example areas of scientific interest

Research encouraged through this Notice includes, but is not limited to, studies that:

- Identify modifiable features of care team **structure** (e.g., care team composition or organization), associated with differences in cancer care quality and patient outcomes
- Identify modifiable features of care team **processes** (e.g., decision making, communication, coordination behaviors, collaboration, leadership) associated with differences in cancer care quality and patient outcomes
- Advance measurement of constructs relevant to cancer care delivery research on interprofessional teamwork and care coordination for people being diagnosed or treated for cancer
- Identify characteristics at the patient, caregiver, care team, delivery organization, health system, and/or community levels that influence the functioning and effectiveness of interprofessional cancer care teams

Example areas of scientific interest (cont.)

- Develop, test interventions designed to improve cancer care quality and patient outcomes by...
 - **modifying** the structure and/or functioning of interprofessional teams
 - **engaging** patients and caregivers as members of their cancer care team
- Test interprofessional approaches to **reduce disparities** in diagnosis and treatment
- Test interprofessional approaches to **improve clinical trial participation** of populations underrepresented in cancer control and care delivery clinical trials
- Understand, improve implementation, sustained impact of interventions addressing team composition, teamwork, coordination

How do I submit an application in response to this NOSI?

- Submit applications via funding opportunities listed in NOT-CA-22-014 or NOT-22-102
- Exploratory, developmental: R03, R21; More mature projects: R01, P01
- Includes Dissemination & Implementation Research in Health R01, R21, R03 funding opportunities
- **Must include “NOT-CA-22-014” (without quotation marks) in the Agency Routing Identifier field (box 4B) of the SF424 application form.** Applications without this information in box 4B will not be considered for this initiative
- [Recording: Preapplication webinar](#)
- NCI Contacts:
 - Sallie Weaver (sallie.weaver@nih.gov)
 - Veronica Chollette (cholletv@mail.nih.gov)

Examples from my NCI portfolio

Measurement

- Smart EHR Data Analytics to Enhance Cancer Care Multiteam Systems (R01CA270454, MPIs: Kwan-Liu Ma, Shin-Ping Tu, Univ. of California-Davis)
- Claims-based measures of care coordination and long-term health among older women with endometrial cancer (R03CA267327, PI: Hazel Nichols, UNC)

Interventions

- A Type I Hybrid Effectiveness-Implementation Trial to Evaluate a Navigation-Based Multilevel Intervention to Decrease Delays Starting Adjuvant Therapy Among Patients with Head and Neck Cancer (R01CA282165, PI: Evan Graboyes, Medical Univ. Of South Carolina)
- TEAMSPORT to Community TEAMSPORT: Validating and Adapting a Precision Oncology Reflex Testing Team Intervention to Reduce Rural Disparities in Cancer Care Delivery (R01CA274560, MPIs: Shellie Ellis, Andrew Godwin, Univ. Of Kansas Medical Center)
- IMProving Adherence to Colonoscopy through Teams and Technology (IMPACTT) (R01CA271031, MPIs: Urmimala Sarkar, Ma Somsouk, Univ. of California-San Francisco)
- Advancing Palliative Care in Northern Plains American Indians (R01CA2420080, MPIs: Katrina Armstrong, Daniel Petereit, Columbia Univ. & Mass General)



Implementation Science



Implementation Science

[IS Home](#)

[Funding Opportunities](#) ▾

[Initiatives](#) ▾

[Training](#)

[Research & Practice Tools](#) ▾

[About IS](#) ▾

Improving the impact of cancer control and population science on the health and health care of the population, and fostering the rapid integration of research, practice, and policy.



Stay up-to-date on everything from the IS Team [@NCI_ImplSci](#)



Stay up-to-date on everything from [DCCPS LinkedIn](#)



[Subscribe to the monthly e-newsletter from IS.](#)

VISION & MISSION

The mission of the IS team at the NCI is to develop and apply the implementation science knowledge base to improve the impact of cancer control and population science on the health and health care of the population, and foster rapid integration of research, practice, and policy.

IS works with the ultimate goal of improving the effect of research on cancer outcomes and promoting health across individual, organizational and community levels.

THE TEAM



The IS team seeks to:

- Advance the science of implementation
- Integrate implementation science into research across the cancer control continuum to improve the relevance to healthcare systems and population and public health
- Foster engagement among research, practice, and policy stakeholders to systematically improve uptake of evidence and evidence-based interventions

To contact the IS team, email us: NCIdccpsISteam@mail.nih.gov.

Funding Opportunities

[Implementation Science](#) / [Funding Opportunities](#)

The NCI, along with institutes and centers across the National Institutes of Health, supports rigorous, cutting-edge implementation science (also referred to as “dissemination and implementation research”) grants through a variety of funding opportunities. The program supports investigator-initiated research grants and sponsors or co-sponsors a variety of targeted notices of funding opportunities (NOFOs). Learn more about these opportunities and find resources for prospective IS applicants.

NIH-wide PAR, Dissemination and Implementation Research in Health

R01, Dissemination and Implementation Research in Health (PAR-22-105, Clinical Trial Optional)

NCI, NCCIH, NHGRI, NHLBI, NIA, NIAAA, NIDA, NIAID, NIAMS, NICHD, NIDDK, NIDCD, NIDCR, NIEHS, NIMH, NIMHD, NINDS, NEI, NINR, ODP, OBSSR, ORWH

R03, Dissemination and Implementation Research in Health (PAR-22-106, Clinical Trial Not Allowed)

NCI, NHGRI, NIA, NIAAA, NICHD, NIDA, NIDCR, NIEHS, NIMH, NINDS, Fogarty, ODP, OBSSR, ORWH

R21, Dissemination and Implementation Research in Health (PAR-22-109, Clinical Trial Optional)

NCI, NCCIH, NHGRI, NIA, NIAAA, NIAID, NIAMS, NICHD, NIDA, NIDCD, NIEHS, NIMH, NINDS, NINR, Fogarty, ODP, OBSSR, ORWH

Successful Grant Applications

View excerpts from successfully funded research grant applications to help prepare applications for NCI funding.

[Sample Grant Applications](#)

Funding Inquiry Staff Contact



[Gila Neta, PhD, MPP](#)

Program Director

gila.neta@nih.gov



[Wynne E. Norton, PhD](#)

Program Director

wynne.norton@nih.gov

Funding Opportunity Purpose

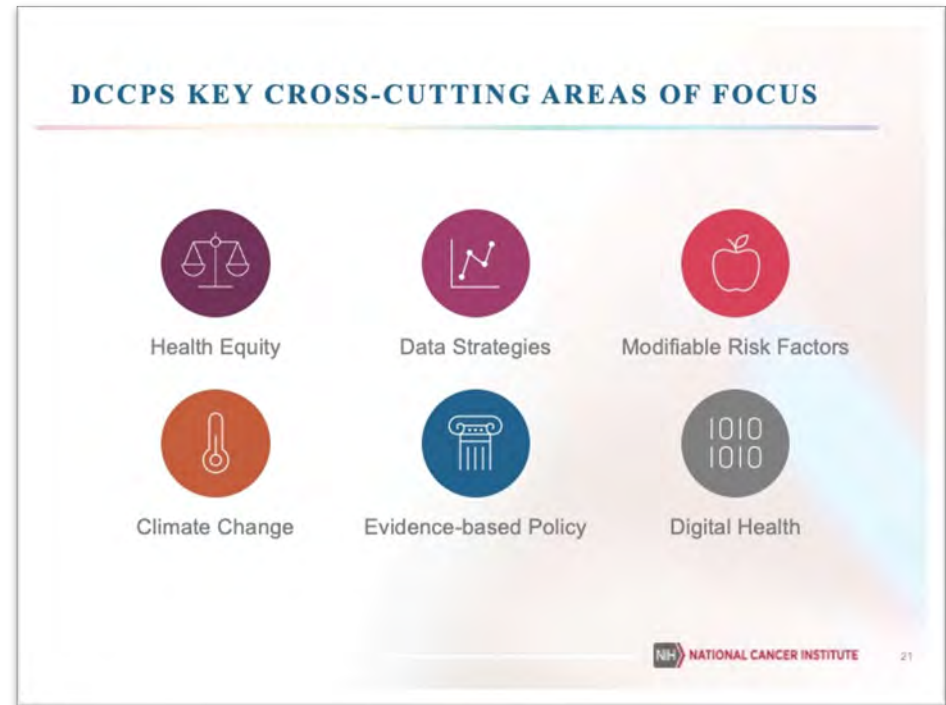
- Studies to identify, develop, and **test strategies for overcoming barriers** to the adoption, adaptation, integration, scale-up, and sustainability of evidence-based interventions, programs, tools, treatments, guidelines, and policies.
- Studies to promote **equitable** implementation of evidence-based interventions among underrepresented communities are encouraged.
- Studies of strategies to stop or reduce (“**de-implement**”) the use of practices that are ineffective, unproven, low-value, or harmful
- Studies to advance implementation research **methods and measures**

NCI-specific interests

- Strategies to **promote sustainability and scale up** of effective cancer control interventions across the cancer care continuum and in diverse settings
- Sustainable approaches to **coordinate cancer treatment across fragmented systems**
- Approaches **optimizing survivorship care among oncology and non-oncology providers**
- Studies that **promote equitable reach and implementation** of evidence-based interventions in/with communities and populations experiencing health disparities
- Studies of **policy implementation**

Key Scientific Areas Team Members are Leading

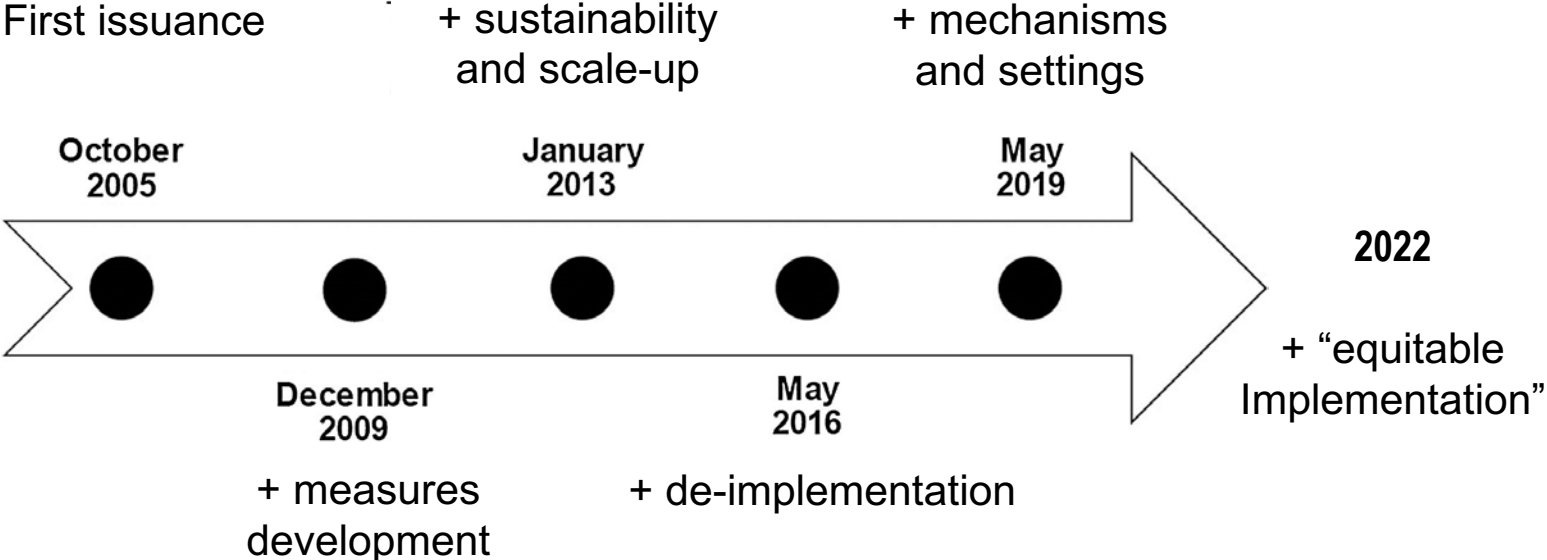
- Adaptation of evidence-based interventions
- Health Equity*
- Global Implementation Science
- Scale-up
- De-implementation
- Policy Implementation Science*
- Braiding/Bundling Interventions
- Environmental Health and IS*



**Aligns with DCCPS priorities*

Dissemination and Implementation Research at the National Cancer Institute: A Review of Funded Studies (2006–2019) and Opportunities to Advance the Field

Cancer Epidemiol Biomarkers Prev. 2021;30(2):260-267. doi:10.1158/1055-9965.EPI-20-0795



Examples of Leveraging DIRH PARs

- Notice of Special Interest (NOSI):
Research on Interprofessional Teamwork and Coordination During Cancer Diagnosis and Treatment

PURPOSE: To highlight NCI Healthcare Delivery Research Program's interest in receiving applications focused on understanding and improving interprofessional teamwork and coordination during cancer diagnosis and treatment.

Scientific/Research Contact(s)



Sallie Weaver



Veronica Chollette

- Notice of Special Interest (NOSI):
Dissemination and Implementation Science for Cancer Prevention and Control in Low Resource Settings

PURPOSE: To highlight the NCI Center for Global Health interest in supporting implementation research applications related to cancer prevention and control in low- and middle-income countries (LMICs)

Scientific/Research Contact(s)



Mark Parascandola




Marie Ricciardone

Sample grants

SAMPLE GRANT APPLICATIONS


R37: Sustainability Determinants of an Intervention to Identify Clinical Deterioration and Improve Childhood Cancer Survival in Low-Resource Hospitals

Principal Investigator **NOFO****



Asya Agulnik, MD, MPH
ST. JUDE CHILDREN'S RESEARCH HOSPITAL*

PAR-19-274
Award Number
1R37CA276215-01




Virginia McKay, MA, PhD
RESEARCH ASSISTANT
PROFESSOR*

[View Funded Grant \(PDF, 7.75MB\)](#)

R21: Policy Implementation Research on Health Benefit Mandates for Fertility Preservation Services to Improve Access to Care in Young Cancer Survivors

Principal Investigator **NOFO****




Hui-Chun Irene Su, MD, MSCE
UNIVERSITY OF CALIFORNIA SAN DIEGO HEALTH*

PAR-19-275
Award Number
R21#CA271184-01A1

[View Funded Grant \(PDF, 3.27MB\)](#)

R01: Establishing Smoke-Free Homes with Families Involved in Child Protective Services: An Effectiveness-Implementation Trial of an Integrated Program

Principal Investigator **NOFO****




Shannon R. Self-Brown, PhD
GEORGIA STATE UNIVERSITY SCHOOL OF PUBLIC HEALTH*

PAR 18-559
Award Number
R01#CA248551-01A1

[View Funded Grant \(PDF, 7.612MB\)](#)

R37: Testing an Adaptive Implementation Strategy to Optimize Delivery of Obesity Prevention Practices in Early Care and Education Settings

Principal Investigator **NOFO****




Taren Swindle, PhD
UNIVERSITY OF ARKANSAS FOR MEDICAL SCIENCES*

PAR 19-274
Award Number
R37#CA252113-01A1

[View Funded Grant \(PDF, 2.97MB\)](#)

R37: De-implementation of low value castration for men with prostate cancer

Principal Investigator **NOFO****




Ted Skolarus, MD, MPH, FACS
UNIVERSITY OF MICHIGAN AT ANN ARBOR*

PAR 16-238
Award Number
R37#CA222885-01

R21: Improving HPV Vaccination Using Implementation Strategies in Community Pharmacies

Principal Investigator **NOFO****



Benjamin Teeter, PhD, MS
UNIVERSITY OF ARKANSAS FOR MEDICAL SCIENCES*

PAR 18-017
Award Number
R21#CA231180-01A1

Pragmatic Trials Funding Opportunity

- **Pragmatic Trials across the Cancer Control Continuum** (UG3/UH3 clinical trial required; PAR-22-256)
- Applications are expected to propose to test the effect of a cancer-related intervention on at least one cancer-related outcome representing at least one stage of the cancer control continuum using a **pragmatic trial study design**.
 - Interventions: behavioral, technology-mediated, community-based, multilevel, *implementation strategies*
 - Outcomes: Health status, health behaviors, quality of care, *implementation outcomes*
 - Contexts: Communities, healthcare systems, clinics, public health departments

Climate Change Funding Opportunity

- **Impacts of Climate Change across the Cancer Control Continuum** (R01, R21 clinical trial optional; PAR-23-152, PAR-23-153)
- Applications are expected to propose to advance the understanding of the effects of climate change on cancer risks, control, and survivorship, **and ways to prevent or mitigate negative health effects.**
 - Understand the impacts of climate change on cancer risk, behaviors, and outcomes
 - Mitigate the impacts of climate-related cancer care delivery disruptions
 - Develop and test interventions to reduce cancer risks and improve environmental health
 - Reduce cancer health inequities related to the effects of climate change
 - Create new collaborations to further research and action in this area

Integrating Team Effectiveness Science & Implementation Science (IS)

- The EBP to implement
 - PACT teams in the VA health system
 - TeamSTEPPS
- Team-based implementation strategies to improve delivery of interventions
 - **Create, reorganize** teams (e.g., implementation team)
 - **Target** teams (e.g., audit/feedback on team level performance)
 - **Improve** teaming (e.g., teamwork training for implementation team)

Table 1

Common team archetypes in implementation science

Team type	Description
Implementation support team	The team is created to facilitate the implementation of an innovation. Members share responsibility for implementation. Teams may be within or across organizations/systems. Membership may be voluntary. Teams are typically time-limited.
Existing care team	Members share responsibility and work together to provide care. Implementation of an innovation requires participation and change from all members.
New care team	Implementation of the innovation requires providers to shift from individual responsibilities and tasks to sharing responsibility and working together.
Quality improvement (QI) team	Members share responsibility for improving care. QI teams may be existing teams or new teams created for specific projects; teams typically exist within organizations. Membership may be voluntary.
Multiteam system	Networks of interdependent teams working toward shared goals as well as individual team goals.

Opportunities to integrate Team Effectiveness Science & IS

- Understand, address relationships between (implementation & clinical) team composition and functioning, practice change, and implementation outcomes
 - Especially **sustainment and de-implementation**
- Understand, address impact of (implementation & clinical) team membership change on implementation outcomes
 - E.g., practice champion turnover is a common, significant challenge
- Develop and test strategies to foster (implementation & clinical) team effectiveness to improve **scale up** of EBPs
 - E.g., leadership, communication methods, social networks, learning and data systems
- Specification of team members and understanding their interactions and processes to facilitate delivery of **bundled, multilevel** interventions and strategies

Implementation Science Team

Staff

Implementation Science · About IS · Staff

The Implementation Science team is housed within the Office of the Director (OD) in the Division for Cancer Control and Population Sciences (DCCPS) at the National Cancer Institute (NCI). Collectively, we work with a variety of researchers, practitioners and policymakers in cancer prevention, diagnosis, treatment, and survivorship as well as other related health areas.



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Interests:

- Intervention adaptation/revolvability
- Sustainability
- Learning healthcare systems
- Implementation research networks
- De-implementation



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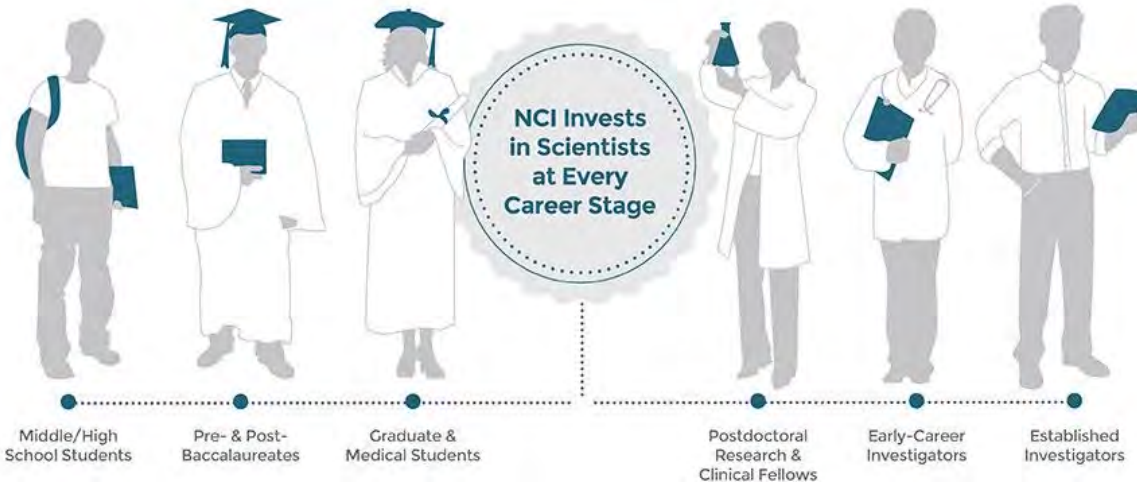


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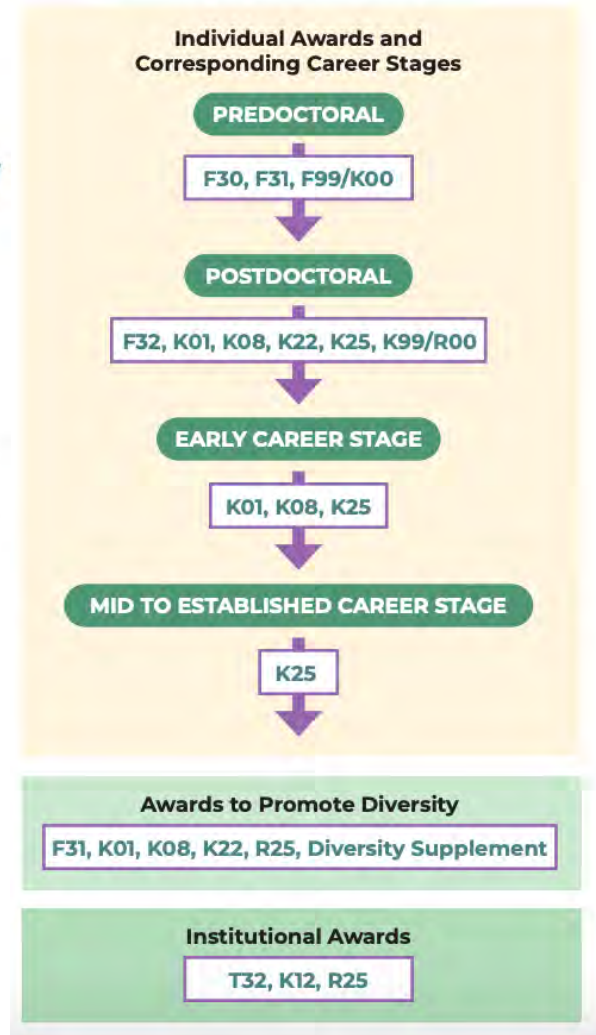
Students, fellows, junior & mid-career faculty...



<https://www.cancer.gov/grants-training/training>

- Appointee on mentor's grant: Research Supplements to Promote Diversity in Health-Related Research (PA-20-222)
- K99/R00: Pathway to independence Award in Cancer Research
- Early career faculty? KL2 & K12 (through university CTSA)
- NCI K01: Post-doc & early career faculty

FUNDING OPPORTUNITIES



NCI Mentored Research Scientist Development Award (K01)

Notice Number:
NOT-CA-24-022

PA-24-175
PA-24-176
PA-24-177

Scientific Contact:
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Key Dates

Release Date:	December 20, 2023
First Available Due Date:	February 12, 2024
Expiration Date:	May 08, 2029



- Eligible candidates include postdoctoral scholars and non-tenured junior faculty (e.g., Assistant Professor or equivalent). U.S. citizenship or permanent residency required.
- 3-5 years of support (salary up to \$100,000/yr; research up to \$50,000/yr)
- Candidate must commit a minimum of 9 person months (75%) full-time professional effort

THANK YOU, Let's Stay Connected

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