

**2017**

**2018**



The Mission of the Academy of Architecture for Health Foundation is to support the Academy of Architecture for Health and to enhance the knowledge and effectiveness of those who create healthcare environments through the funding of critical educational and research activities

**REQUEST FOR PROPOSAL GUIDELINES**

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## AAHF Background

The Academy of Architecture for Health Foundation (AAHF) is comprised of a volunteer Board of Trustees that serves to uphold the mission of the AAHF. AAHF provides funding to selected research projects that address issues and problems related to the enhancement of knowledge and the effectiveness of those who create healthcare environments.

Our research initiative is closely coordinated with the AIA Academy for Architecture for Health and its research committee.

## Mission

The Mission of the Academy of Architecture for Health Foundation is to support the Academy of Architecture for Health and to enhance the knowledge and effectiveness of those who create healthcare environments through the funding of critical educational and research activities. As such, the AAHF works in collaboration with the American Institute of Architects Academy of Architecture for Health to offer the grants program.

## Funding

The Academy of Architecture for Health Foundation (AAHF) has allocated \$30,000 for research in the FY 2017-2018 program. Favorable consideration will be given to proposals that include committed budgetary match and/or other financial support. Funds will be disbursed incrementally, with 50% of the awarded funds issued upon contract for the research, an additional 25% following the mid-point review and the final 25% upon completion to be released upon receipt of requisite deliverables.

The Foundation is seeking proposals on all areas related to advancing healthcare environments, and especially proposals focusing on the following areas:

1. **Healthcare Guidelines Validation** - Investigating an aspect of the Facility Guidelines Institute's (FGI's) recommendations to determine the impact of that aspect on health or behavioral outcomes. Coordination with FGI is recommended.
2. **Environment and Perception Tool Validation** – The creation and/or validation of instruments for evaluating the built environment and how it impacts outcomes (e.g., evaluation of efficiency, staff perception of the environment, noise).
3. **Primary Care and Federally Qualified Health Centers** – Understanding how the built environment impacts the delivery of whole-person healthcare and the success of interprofessional care teams. Examining the effectiveness of different team centers, collaboration spaces, layouts, approaches, etc.
4. **Surgery Environments** – Examining the environments impact on efficiency, flow, errors and omissions, and infection control (e.g., support spaces, induction rooms, prep/recovery flow, room turn-around). Special focus on outpatient surgical environments.
5. **Behavioral and Mental Health Environments** – Examining the effects of design on safety and therapeutic care effectiveness.
6. **Integration of Human Factors**– Examining the interaction of the built environments with organizational, cultural and human factors in a healthcare or health setting.

The Foundation is open to consideration of other proposal topics germane to healthcare architecture and environments for health.

A component of any proposal should include the presentation of findings at a major conference within two years of the commencement of the grant. Identification of the AAHF as a sponsor in any presentation, written report or publication is required. Findings of the study will be reviewed by the Foundation prior to release of the final payment.

## **Budget Request**

Applicants must complete and submit a budget worksheet as furnished by AAHF. Favorable consideration will be given to proposals that demonstrate committed financial match to help maximize financial support for the selected research project.

### **Allowable Expenses**

Expenses directly related to the funded research are allowed. These direct expenses include faculty/researcher time, research assistant time, research equipment/technology, project-related travel expenses (e.g., travel to project site, field work) and travel to present research findings to the national conference (i.e., Healthcare Design Conference or ASHE Planning Design and Construction Conference) as required in the funding agreement. Other expenses may be considered if appropriate reasons are provided.

### **Disallowed Expenses**

It is the policy of the AAHF to not pay indirect expenses such as program administration and overhead due to the relatively small size of the grants. Indirect expenses include but are not limited to office supplies and overhead, general telephone service, postage, travel to visit research consultants, and administrative/clerical support staff not directly engaged in the funded research.

Exceptions can be made on a case-by-case basis. The AAHF may grant an exception to include funding some overhead expenses if it is documented that the costs are directly related to the funded research. Examples include but are not limited to postage for mail surveys; telephone services acquired and used specifically to conduct a telephone survey, such as dedicated cellular phones and service.

## **Project Duration**

Projects must be completed within twelve (12) months from the signing of the funding contract unless a specific condition exists that would warrant an exception. Conditions include but are not limited to academic calendar conflicts and delays in Institutional Review Board (IRB) approval. If an extension is required, the individual grantee must file for an extension and receive approval from the AAHF Grants Committee.

## **Eligibility**

The AAHF RFP is open to individuals in both the public and private sector. Research studies that are selected and involve human subjects must satisfy the following requirements prior to commencing research:

- Human Subjects Training (such as Collaborative Institutional Training (CITI) or National Institutes of Health (NIH) Human Subjects Training) must be completed for all actively involved investigators.
- Applicants must have an Institutional Review Board (IRB) approval on file and available if requested.

## **Non-Discrimination Policy**

The AAHF is an independent 501(c)(3) non-profit corporation. The AAHF does not discriminate based on gender, race, creed, disability, age or marital status.

## **Conflict of Interest**

The Academy of Architecture for Health Foundation Board of Trustees and its consultants are not eligible to serve as principal investigators. AAHF Board Trustees, consultants and volunteers may serve as consultants to projects led by other researchers.

Applications that include participation by AAHF or the AIA Academy of Architecture for Health Board members must be clearly identified. Those participants will be recused from the evaluation and selection process. Other potential conflicts of interests with other organizations or companies should be identified in the application.

All proposals must adhere to the application process of the RFP. All research results will be broadly disseminated and therefore are required to be non-proprietary. Organizations or individuals that submit more than one proposal are eligible to have only one proposal funded per organization/individual.

## **Evaluation Criteria**

AAHF trustees evaluate proposals that directly address the mission of the AAHF. AAHF seeks proposals that are well conceived and demonstrate sound research methodology. Specifically, AAHF seeks proposals that:

- Propose outcomes supportive of the mission of the Academy of Architecture for Health Foundation.
- Present a research design and methodology that can answer proposed research questions.
- Demonstrate that the research team is knowledgeable on the research topic and qualified to complete a high-quality research project.
- Include matched funds or in-kind contributions to strengthen the feasibility of conducting the research and completing it within the contracted time line.
- Relate to the practice of healthcare architecture or the creation of healthcare environments.

Examples of past grant recipients can be found on the AAHF website:

<http://aahfoundation.org/research/research-summaries/>

## **Application and Schedule**

**Applications must be received by 11:59 p.m., Eastern Time, October 2, 2017.**

A team designated by the Board of Trustees will review applications. The application review team will recommend selected projects for approval to the Board. The Board of Trustees will announce the successful applicant(s) on or before Monday, December 18, 2017.

In the event the Board needs additional time to review the proposals, the AAHF will make every effort to communicate with the project contact person(s) for each submitted proposal via email and will provide

information regarding the length of the delay and when applicants should reasonably expect a funding decision.

## **Application Submittal**

Applications shall be submitted electronically as Adobe PDF files to [architectureforhealth@gmail.com](mailto:architectureforhealth@gmail.com), to be received no later than **11:59 p.m., Eastern Time, Monday, October 2<sup>nd</sup>, 2017.**

AAHF Research & Grants Committee includes Erin Peavey-Hsieh and Sheila Elijah-Barnwell.

Questions regarding the submission can be sent to:

**Erin Peavey-Hsieh**

Chair, AAHF Research & Grants Committee

[architectureforhealth@gmail.com](mailto:architectureforhealth@gmail.com)

## Acceptance of Proposals

The Academy of Architecture for Health Foundation reserves the right to reject any or all proposals that are judged to be unsatisfactory.

## Funding Source

Funding to support this research is provided by the Academy of Architecture for Health Foundation thus appropriate recognition should be given in all advertising, printed materials, etc. The first payment installment, 50% of the total amount awarded, will be paid upon commencement of work starting January 1, 2018 and after an invoice has been received. The second payment of 25% will be paid following the 50% review and upon receipt of an invoice, and the balance of the total will be paid after a final report is submitted to the AAHF and approved by the Research Committee and the AAHF Board of Trustees.

## Project Duration

Projects must be completed within twelve (12) months from the signing of the funding contract unless a specific condition exists that would warrant an exception. The grantee must submit a request for extension and receive approval from the Research Committee to extend the grant period beyond 12 months. The AAHF reserves the right to approve or deny any requested exceptions at their discretion.

## Research Mid-Term Report

A mid-term progress report needs to be submitted by the grantee to the AAHF Grants Committee six months from the official start date (for example June 30th if a January 1st start date). The intent of this mid-term report is to update the Board on progress to date as well as determine the specific date and location for the final presentation. This mid-term report needs to be submitted to the Chair of the Research Grants Committee.

## Research Final Report

Final reports must be completed and submitted to the AAHF Board of Trustees for review and approval no later than **11:59 p.m. Eastern Time, Monday, January 22, 2019**, unless a specific condition exists that would warrant an exception. The AAHF Board of Trustees must approve an exception requested by the grantee prior to the final report submission due date. Final reports can be submitted to the Chair of the Research Grants Committee. Final reports are subject to review and approval by the AAHF Board of Trustees.

## Research Finding Presentation

The first public presentation of your final, accepted research will occur at the Healthcare Design 2019 Conference (October-November 2019), ASHE/PDC (February-March 2020), or other agreed upon venue. Information regarding the guidelines for submitting the research abstract and presentation will be provided as it becomes available.

## Rights Reserved

Researchers are obligated to provide proper attribution for research and funding sources, specifically the Academy of Architecture for Health Foundation (AAHF) in all published material.