**Accelerating Innovations into CarE for Aging and Brain Health (AICE-ABH)**

**Submission Deadline: December 17, 2018 3:00pm MST**

Please refer to the Funding Guide on our website: [https://www.albertainnovates.ca](https://albertainnovates.ca/funding-health-innovations/health-research-funding/accelerating-innovations-into-care-initiatives/aging-and-brain-health/)

**General Instructions**

* The application form must be completed in its entirety (including signatures) when applying. Electronic, faxed, PDF or original copies of signature pages are acceptable. Signatures may be submitted on multiple pages.
* Online applications will be accepted until the competition deadline of December 17, 2018 at 3:00 pm MST.
* It is the **applicant’s** responsibility to ensure that the application is COMPLETE and submitted (**as a PDF attachment**) via the online portal by the deadline.
	+ **CREATING AN ACCOUNT**
		- To submit an application the applicant must first register at the [AI online application portal](https://ai.smartsimple.ca/s_Login.jsp?lang=1&prole=0).
		- Once all fields are completed, an email will be sent to the applicant with their login information and instructions to access the portal.
* Incomplete applications (including those lacking any of the required signatures) may be considered ineligible.
* The application is to be completed using 12 point font size for all parts of the application. Margins should NOT be less than 0.5 inches on all additional pages provided.
* Applicants are required to use the space provided on the form for each item of information. Additional pages may only be attached where indicated.
* Tables provided in the application form should NOT be modified or reproduced.
* Copies of publications should NOT be included in any section of the application package.
* One copy of the application and all attachments must be submitted to Alberta Innovates.
* Please review the [AICE-ABH Funding Guide on our website](https://albertainnovates.ca/funding-health-innovations/health-research-funding/accelerating-innovations-into-care-initiatives/aging-and-brain-health/) for more detailed program information, including eligibility.

When complete, submit 1 PDF copy of the **application within the online portal**

[AI online health application portal](https://ai.smartsimple.ca/s_Login.jsp?lang=1&prole=0)

ALBERTA INNOVATES

Suite 1500, 10104 – 103 Avenue, Edmonton, AB T5J 4A7

Phone: (780) 423-5727

Email (inquiries): grants.health@albertainnovates.ca

**Accelerating Innovations into CarE for Brain Health (AICE-ABH)**

**Submission Deadline:**

Please refer to the Funding Guide on our website: [https://www.albertainnovates.ca](https://albertainnovates.ca/funding-health-innovations/health-research-funding/accelerating-innovations-into-care-initiatives/aging-and-brain-health/)

**Section 1: Proposal Title and personal Data:** Use additional pages if required.

1. **Proposal Title**

|  |
| --- |
| Click here to enter text. |

1. **Personal Data:** Please complete for Lead and Co-Lead(s).

**Lead**

|  |  |
| --- | --- |
| Name: | Click here to enter text. |
| Title: | Click here to enter text. | Mailing Address: | Click here to enter text. |
| Institution: | Click here to enter text. | Phone: | Click here to enter text. |
| Email: | Click here to enter text. |

**Co-Lead (if applicable)**

|  |  |
| --- | --- |
| Name: | Click here to enter text. |
| Title: | Click here to enter text. | Mailing Address: | Click here to enter text. |
| Institution/Organization: | Click here to enter text. | Phone: | Click here to enter text. |
| Email: | Click here to enter text. |

**SME**

By signing below, the SME is confirming that it will participate in the project as described in this application and provide the stated contributions in Section 4 towards the project. The SME also hereby agrees to provide Alberta Innovates with any requested information to verify the contribution value and to participate in regular project status updates and any post-project surveys or evaluation processes with Alberta innovates to measure the outcomes and impacts of the project in relation to the company’s growth including financial, product development and/or sales, employment metrics, etc.

|  |  |  |  |
| --- | --- | --- | --- |
| Legal Company Name: | Click here to enter text. | Signature of CEO or President: |  |
| SME Project Contact Name: | Click here to enter text. | SME Key Contact Title: | Click here to enter text. |
| Year Company was Registered: | Click here to enter text. | Mailing Address: | Click here to enter text. |
| BN Number: | Click here to enter text. | Phone: | Click here to enter text. |
| Email: | Click here to enter text. |

**Relationship to SME**

Describe any prior relationships between the SME and the project team members and/or potential conflicts of interest that could be perceived and how they will be managed.

|  |
| --- |
| Click here to enter text. |

**Collaborators:** List any anticipated Collaborators. Use additional pages if necessary. The signature of each collaborator is required to indicate their willingness to participate in the proposed activities.

|  |  |  |  |
| --- | --- | --- | --- |
| **Collaborator’s Name** | **Title and Affiliation** | **Area(s) of Expertise** | **Signature** |
| 1. Click here to enter text.
 | Click here to enter text. | Click here to enter text. |  |
| 1. Click here to enter text.
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| 1. Click here to enter text.
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1. **Pan-Provincial affiliations (if applicable)**

Please identify any provincial teams/networks/initiatives including Strategic Clinical Networks involved in the development and implementation of this proposal:

|  |  |
| --- | --- |
| **Name of groups involved** | **Lead/Co-Lead’s Affiliation to group** |
| 1. Click here to enter text.
 | Click here to enter text. |
| 1. Click here to enter text.
 | Click here to enter text. |
| 1. Click here to enter text.
 | Click here to enter text. |

**Section 2: Signatures.** This application may be executed in one or more counterparts, all of which when taken together shall constitute a fully executed version of this application. This application or a counterpart thereof may be executed and delivered by facsimile or electronic transmission and the facsimile or electronic transmission of a signature to another Party or Parties (or to their respective solicitors) shall be of the same force and effect as the delivery of an original signature

Alberta Innovates supports Alberta based organizations in their efforts to promote and ensure the highest standards of research and scholarship practice and behavior. By signing this application, the applicant asserts that this application adheres to all policies and procedures in place at his/her institution, including those regarding integrity in innovation and scholarship. Alberta Innovates reserves the right to confirm this assertion through independent means. Alberta Innovates wishes to alert applicants to the possibility of misrepresentation in this application including misrepresentations of authorship, credentials or support. In the event of material deviations of the information in this application from reference sources, including citation sources (in the case of authorship), issuing organization(s) (in the case of credentials), or granting agencies, Alberta Innovates reserves the right to disqualify the applicant for the competition in question. Further Alberta Innovates actions may include disqualifying the applicant from future Alberta Innovates competitions for a time period to be set at Alberta Innovates’ sole discretion, withdrawal of any remaining installments of support for any existing Alberta Innovates grant or award for which misrepresentation appears in the submission, and seeking partial or full repayment of any past financial support under any Alberta Innovates grant or award for which misrepresentation appears in the submission.

1. **Project Lead Signatures (attach additional pages if more co-leads/collaborators need to be listed)**

|  |  |  |  |
| --- | --- | --- | --- |
|  | **Printed Name** | **Signatures** | **Date (YYYY/MM/DD)** |
| **Lead** | Click here to enter text. |  |  |
| **Co-Lead** | Click here to enter text. |  |  |
|  |  |  |  |
|  |  |  |  |

1. **Signatures of Institution/Organization administering funds:**

|  |  |
| --- | --- |
| **Name of Organization** | Click here to enter text. |
|  | **Printed Name** | **Signature** | **Date (YYYY/MM/DD)** |
| **Authority to bind the Organization (Operations)** | Click here to enter text. |  |  |
| **Authority to bind the Organization (Financial)** | Click here to enter text. |  |  |
| **Other:** Click here to enter text. | Click here to enter text. |  |  |

**Section 3: Non-confidential Scientific Abstract**

Using scientific terminology, please provide a high-level non-confidential overview of the proposed project and identify the problem you are trying to solve and its potential impact on Alberta’s health care system. **Please Note: This section may be provided to a diverse set of stakeholders including the public.** Do not exceed the space below.

Where appropriate, the text may be structured using the following headings:

* Introduction or Objectives, including the health problem that the technology is aimed at
* Method for implementation, testing and measuring outcomes/success
* Results, including the potential impact on Alberta’s health care system in quantitative terms
* Conclusions

|  |
| --- |
| Click here to enter text. |

**Section 4: Budget**

1. **Estimated Budget Information (Total Budget Breakdown by Expense)**

Please refer to the AICE-ABH Funding Guide for allowable costs and expenditure guidelines.

|  |  |  |  |
| --- | --- | --- | --- |
|  | **Funds Request from AI & CABHI** (max 50% total project budget) | **SME Contributions**(min 25% total project budget) | **Other Contributions** |
| **Cash** | **In Kind** | **Cash** | **In Kind** |
| 1. Data Analysts
 | $Click here to enter text. | $Click here to enter text. | $Click here to enter text. | $Click here to enter text. | $Click here to enter text. |
| 1. Management/

Administration | $Click here to enter text. | $Click here to enter text. | $Click here to enter text. | $Click here to enter text. | $Click here to enter text. |
| 1. Other personnel
 | $Click here to enter text. | $Click here to enter text. | $Click here to enter text. | $Click here to enter text. | $Click here to enter text. |
| 1. Equipment
 | $Click here to enter text. | $Click here to enter text. | $Click here to enter text. | $Click here to enter text. | $Click here to enter text. |
| 1. General Supplies
 | $Click here to enter text. | $Click here to enter text. | $Click here to enter text. | $Click here to enter text. | $Click here to enter text. |
| 1. Travel
 | $Click here to enter text. | $Click here to enter text. | $Click here to enter text. | $Click here to enter text. | $Click here to enter text. |
| 1. Other Costs (list)
2. Click here to enter text.
3. Click here to enter text.
4. Click here to enter text.
 | $Click here to enter text. | $Click here to enter text. | $Click here to enter text. | $Click here to enter text. | $Click here to enter text. |
| Total (items 1 to7) | $Click here to enter text. | $Click here to enter text. | $Click here to enter text. | $Click here to enter text. | $Click here to enter text. |
| **Total Project Budget** | $Click here to enter text. |

1. **Estimated Budget Information (Annual Budget Breakdown by Source)**

Please refer to the AICE-ABH Funding Guide for allowable costs and expenditure guidelines.

|  |  |  |  |
| --- | --- | --- | --- |
|  | **Year 1** | **Year 2** | **Total** |
| **Funds Request from AI & CABHI** | $Click here to enter text. | $Click here to enter text. | $Click here to enter text. |
| **SME Contributions (Cash + In Kind)** | $Click here to enter text. | $Click here to enter text. | $Click here to enter text. |
| **Other Contributions (Cash + In Kind)** | $Click here to enter text. | $Click here to enter text. | $Click here to enter text. |
| **Annual Total** | $Click here to enter text. | $Click here to enter text. | $Click here to enter text. |

1. **Budget justification**

Provide a detailed breakdown of each budget line, who is incurring the cost and which funding source (AI/CABHI, applicant’s or partner’s) will be used to cover the cost. Provide a clear justification of the budget ask, including the other contribution details. Strong justification for the valuation (how this is calculated) of the in-kind contribution by the SME and others (if applicable) is required. **Do not exceed the space below.**

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| --- |
| Click here to enter text. |

**Section 5: Project Description**

Attach a clear description of the proposed AICE-ABH Project in no more than eight (8) pages. **See the AICE-ABH Funding Guide for more information** to ensure the proposal addresses the Evaluation Criteria and guiding questions.

In your description, please be sure to outline how your proposal will meet the objectives outlined for AICE-ABH and ensure you address the following:

* **Strategic Alignment, Alberta Pull & Impact (max 2 pages):** Clearly describe how this project is in line with the Innovation Theme areas, and the priorities of Alberta’s health care needs. Clearly identify the current state of the problem in Alberta the proposed project will address in terms of prevalence, costs and quality of care. The proposal should demonstrate how the technology is anticipated to address the above stated problem and affect disease pathways or workflow to improve the quality of care for Albertans relative to existing standards of care. A summary of the clinical evidence to date of the technology should be provided. Explain why the particular technology was chosen in this project over other competing technologies (a thorough review of competing technologies should be included). Explain how innovative, unique or breakthrough the solution proposed is and why the health system is likely to adopt this technology in the near future based on the evidence generated by the project;
* **Methodology & Deliverables (2-4 pages):** The proposal should identify clear measures to evaluate the SME technology’s performance compared to a competitor product and/or the standard of care on patient outcomes, expected impact on operations, other technology that could be displaced, and patient care. Provide details on the research methodology used, number of participants and statistical methods that will be utilized. The proposal should clearly describe how the project will be implemented, timelines, milestones, and how and what data and metrics (and the rationale for using those metrics) will be collected. Provide a clear list of deliverables as a result of completing the proposed projects and how those deliverables will inform the path to procurement of the technology. The deliverables should include what the health outcomes of the technology was relative to the standard of care or comparator product and the anticipated operational impact within the health system of the product or technology, including costs of operating the technology (accounting for any additional personnel and infrastructure costs);
* **Feasibility, Governance, Sustainability (max 2 pages):** Describe the team’s ability to complete the proposed project given the available resources, health system related obstacles, data required and timelines. Describe how the team is positioned to generate evidence to inform health system adoption beyond the test site(s) and capabilities of championing the evidence generated from the project to decision makers within the broader health system. Provide an overview of the partnerships involved, other funding/contributions, and engagement with relevant operational decision makers (e.g. zone leaders, procurement, IT, privacy office, etc.). Describe the role and responsibilities of the parties involved, project governance and oversight and how next level decision makers are engaged in the project. **It should be clear from the proposal that the applicants have engaged all relevant decision makers and have designed the study to assess and address their respective needs so projects are positioned for next stage adoption.**

**PLEASE SEE** [**AICE-ABH FUNDING GUIDE ON OUR WEBSITE**](https://albertainnovates.ca/funding-health-innovations/health-research-funding/accelerating-innovations-into-care-initiatives/aging-and-brain-health/) **FOR MORE DETAILS**

A **maximum of eight (8)** pages is permitted for this section, not including references. As a single appendix, you may attach a **maximum of three (3)** additional pages that include figures, charts, tables, graphs, surveys/questionnaires. All figure/chart/table/graph legends are to be limited to five lines. This section is to be completed using 12 point font, and all margins should NOT be less than 0.5 inches.

**Section 6: Technology and SME Go to Market Strategy**

Provide a **maximum of three pages** to describe the technology, evidence to date generated for the technology in terms of safety, efficacy, health system impact, costing, and its value proposition in terms of impact to Alberta. Please include an overview of the company’s overall commercialization strategy, its governance structure, financial situation, role in the project, how it will finance its part of the project, and how the project will influence future business plans.

All figure/chart/table/graph legends are to be limited to five lines. This section is to be completed using 12 point font, and all margins should NOT be less than 0.5 inches.