

# Mentored Award Internal Supplements Program (MAINS) – Physician-Scientists

The UK College of Medicine Office of Research intends to provide the opportunity to support the success of early career physician-scientists who receive career development awards with limited research funds (NIH K-Awards OR similar society-based mentored career development awards) with an internal supplement from the College of Medicine. The MAINS Program is designed to assist physician-scientist career development extramural awardees by providing support for their successful transition from mentored junior investigator to independent researcher.

Although the K-Award (or similar mechanism) provides considerable salary support and protected research time for the awardee, the maximum allowed funding for project-related activities (exclusive of salary, including supplies, biospecimen analysis, etc.) is often insufficient for the level of work required to yield pilot data necessary for future R-level or equivalent proposals. The purpose of the MAINS program is to support project-related expenses necessary to conduct research leading to the submission of an R-award or equivalent.

# **GUIDELINES**

#### **ELIGIBILITY:**

- Limited to full-time Assistant Professor rank physician-scientists at the UK College of Medicine.
- Applicants must be a part of the clinical compensation plan and provide clinical services in addition to their research activities.
- Applicants must hold an M.D., M.D./Ph.D. or equivalent clinical degree (e.g. DO, MBBS, etc.).
- Applicants must have been awarded an NIH K-Award or similar society-based career development award
- The awarded career development award must provide at least \$80,000 per year toward the salary of the awardee for a minimum of 2 years.
- Applicants must have Department Chair or relevant Vice-Chair support.
- Applicant's affiliated department, multi-disciplinary research center, Alliance, RPA or other unit is expected to contribute support such as salary cost share, match funds, etc.

# FUNDING INFORMATION:

- The amount of support will be based on the College of Medicine Office of Research available funds.
- College of Medicine support will include an initial award in the first 12 months, with one additional distribution in the second 12 months, depending on meeting metrics related to research progress Benchmarks (see Appendix A).

- Awards will be up to \$50,000 per year for up to 2 years. Additional time will be considered for career development awards extending beyond 2 years. Awards of higher than \$50,000 per year will be considered case-by-case based on demonstrated need.
- Amount of the award will be based on clear justification in the budget (see Appendix B.)

# ALLOWABLE COSTS:

- Funds are to be used for the conduct of the research project associated with the mentored award such as supplies, subject payments, assays, etc. Please note that the research conducted with these funds must align with the aims of the funded career development award.
- Travel funds that are needed for study conduct are allowed, if essential and clearly justified.
- Funds can be used for salary support for technicians, research assistants, or other laboratory personnel, but cannot be used for faculty salary support.

Questions and <u>proposal submissions</u> for the MAINS Program should be directed to the College of Medicine Office of Research at <u>Sabrina.brewer@uky.edu</u>.

# **APPLICATION INSTRUCTIONS**

# **REQUIRED DOCUMENTS:**

- Current Biosketch
- Specific Aims page from the extramurally-supported mentored career development award that will be supplemented.
- Review summary statement for the original proposal, if applicable.
- Written statement describing the progress already achieved.
- Other Support (no page limit) to include a description of other support from all external and internal funding sources including, but not limited to grants, contracts, endowments, gift accounts, departmental reserves, and departmental start-up funds and the amounts and dates covered by such support.
- Progress Benchmarks, including the target date for submission for independent research award NIH R01 or equivalent (Appendix A).
- Proposed supplement budget (Appendix B).
- Letter of Support from Department Chair.

# AWARDEE RESPONSIBILITIES:

- Successful applicants must provide semi-annual progress reports, including PROGRESS Benchmark metrics (Appendix A.) and funding expenditure reports.
- A final written report describing project accomplishments must be submitted within 60 days of the project end date.
- College of Medicine support must be acknowledged in publications, presentations, etc.

# **RELEASE OF FUNDS:**

• Funding for successful applications will be released upon receipt of applicable IRB/IACUC approval as appropriate.

• If required IRB/IACUC approval is not provided within a period of 90-days after the notification of the award, THE SUPPLEMENTAL AWARD MAY BE CANCELLED.

#### APPENDICES

#### **APPENDIX A. Benchmarks of Progress**

#### PROGRESS BENCHMARKS

Please include a list of benchmarks for the duration of this supplement award. These milestones will also be reviewed with each semi-annual progress report. The purpose of Benchmarks is to aid the investigator in establishing timeframes for completing research components to ensure pilot data is ready for a R01-level submission at the conclusion of the supplement funding. **Timeline for the submission of an application for independent research funding is a required Benchmark.** 

| <b>Benchmark</b><br>(List in order of priority) | Metrics for Success<br>(Projected end points) | Expected Completion Dates |
|---|---|---------------------------|
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#### **APPENDIX B. Supplement Budget Template – Year 1 and Year 2**

Applicants must outline a budget not to exceed \$50,000 per year, for up to 2 years. Funding for Year 2 is contingent on progress achieved in year 1 (see Appendix A. Benchmarks for Progress).

| Budget (Direct Costs Only)<br>Award Year: 1 (add dates)        |                                      |         |  |
|--|--------------------------------------|---------|--|
| Year 1 Expenses:   | Description:                         | Amount: |  |
|  |                                      |         |  |
|  |                                      |         |  |
|  |                                      |         |  |
|  |                                      |         |  |
| Year 1 JUSTIFICATION (for the a                                | bove expenses):                      |         |  |
| YEAR 1 - Total Direct Cost                                     | s (Not to exceed \$50,000 each year) | \$      |  |
| Award Year: 2 (add dates)                                      |                                      |         |  |
| Year 2 Expenses:   | Description:                         | Amount: |  |
|  |                                      |         |  |
| _  |                                      |         |  |
|  |                                      |         |  |
|  |                                      |         |  |
| JUSTIFICATION (for the above ex                                | penses).                             |         |  |
|  |                                      |         |  |
|  |                                      |         |  |
|  |                                      |         |  |
|  |                                      |         |  |
| YEAR 2 - Total Direct Costs (Not to exceed \$50,000 each year) |                                      | \$      |  |