Greater Value Portfolio FAQs

May I submit more than one LOI?
Yes. However if more than one LOI is approved, each PI will only be able to submit one application. Also, we do not have a limit on the number of applications that we may request from an institution.

May I speak with someone at the foundation about my idea before the LOI deadline?
Because the letters of intent phase will be blinded, the Foundation cannot receive questions via phone calls, so please be sure to email Stacy Cloud at cloud@donaghue.org if you have any questions. If a call is needed, we will schedule one with you.

One of the standards for selection is the “project’s potential for practical benefit in bringing greater value to health and healthcare.” How do you assess this?
There’s no defined rubric to judge this, but reviewers consider the following:
- Does the study design include multiple sites or systems to increase the external generalizability?
- Is it likely or unlikely that this intervention could be adopted given the structures of most healthcare systems in the U.S.?
- Are the applicant and their institution well-positioned to gain the attention of healthcare leaders and policy makers?
- Is the lack of research a barrier to the adoption of this intervention? Or will additional research not be adequate to overcome barriers to adoption?
- Is it likely that this intervention will be adopted? Is it currently being adopted without additional research being required?
- Is the intervention still being formed and would therefore benefit more from smaller, more exploratory studies?

Does the application allow for dual PIs or just one PI per application?
Yes.

Why can only research institutions be the applicant organization?
After applications have been reviewed and decisions made about which project it will fund, Donaghue works with the principal investigator’s institution to develop a funding agreement. We expect that agreement will not only support the PI in being able to conduct their proposed research (i.e., protecting the staff time that is written into the project, honoring any subcontracts that are developed between institutions, providing basic infrastructure), but we also expect that institution will work to help protect Donaghue’s investment by having the expertise and specialized resources dedicated to maintaining high standards of research subject protection, research integrity, and management of grant funds. The foundation is confident that organizations that have research as a core mission will be able to provide this support.
Can current Donaghue grantees apply for GVP?
Current Donaghue grantees cannot apply for a GVP award if their existing grant would still be active at the time the GVP grant would begin.

Does the grant award include an indirect?
Yes. The Foundation will allow up to a maximum of 10% indirect on top of the grant award. For the GVP program, this would be a total maximum award of $440,000.

How do you define healthcare services? Does this mean only organizations that deliver clinical services qualify as applicants or partnering organizations?
The Foundation defines healthcare service as encompassing activities that may be broader than medical care. For example, payers such as employer or state sponsors of benefits plans or other organization that design, direct or evaluate health services delivery may be suitable as a partnering organization. To see the types of organizations represented in current GVP grants, please review the list of past awardees.

Can I serve as both the PI and the Project Lead of the partnering organization?
We would not accept an application where the applicant serves as both the PI and the Project Lead of the partnering organization. Even within a health system that has research capacity, we anticipate a successful proposal including the researcher (PI) and someone with direct clinical or operational positions who would be using or implementing the intervention.

I read through the GVP online information and did not notice any changes due to the coronavirus pandemic. Is the Donaghue Foundation changing its focus during this unusual time? Will research projects that focus on COVID be looked upon favorably?
We have not changed our focus on value but believe there are many research questions related to our nation’s response to the COVID-19 pandemic that could fit within this topic. Some examples include questions related to variation in prices of tests and equipment, lack of transparency in prices and outcomes, variation in quality (of screening protocols), impact on equity, and how all these are affected by different payment models across health systems.

At this point we are not planning on changing our guidance to reviewers about whether research topics related to COVID-19 would be weighted more favorably.

We will be adding to this FAQ list as we receive additional questions. If you have a question, please email your question to cloud@donaghue.org.