



Prototyping Assistive Technology with Community and Health Partners (PATCHES) Pilot Award Program

Do you have a prototype for technology that may benefit the health and function of older adults?

Are you interested in getting specific feedback from older adults from a variety of backgrounds to help refine and test its feasibility and usability?

Then this new funding opportunity from the UW-Madison Community-Academic Aging Research Network (CAARN) is for you!

Key Dates and Info	
Funding	\$50,000 (direct costs) 12 months (6 months No-Cost Extension possible)
Live Q&A Sessions	Thursday, December 4, 2025, from 2:00 – 3:00PM CST Via Zoom, register here
Letter of Intent Due	Tuesday, January 13, 2026, 11:59pm CST
Full Application Due	Tuesday, March 10, 2026, 11:59pm CST
Review Period	March 18 – June 12, 2026
Notification of Award	July 16, 2026
Earliest Project Start	August 20, 2026
Contact	caarn@medicine.wisc.edu
More Information	www.caarn.wisc.edu/pilot-funding/

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Request for Applications

PATCHES Pilot Award



Community-Academic Aging
Research Network (CAARN)

UNIVERSITY OF WISCONSIN
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PROGRAM OVERVIEW

What are the goals of this Pilot Award Program?

- To facilitate community-engaged research by supporting academic and community partners as they develop new – or define existing – assistive technologies that decrease negative health outcomes and improve the health, function, and quality of life of older adults.
- To fund activities to refine an assistive technology prototype through continuous input from community partners with a broad range of lived experience, to determine acceptability and feasibility in meeting the needs and priorities of the populations served.
- To help investigators conduct initial tests of the feasibility and usability of the proposed technology with human users prior to large-scale and clinical testing of usability and health outcomes, and eventual application into practice.
- To support projects with a high likelihood of extramural funding. Early career investigators with limited PI experience are strongly encouraged to submit proposals as the Contact PI in partnership with senior investigators who have relevant research expertise to serve as Co-Investigators, collaborators, or mentors.
- This funding mechanism excludes clinical trial projects. [Per the NIH](#), a study is a clinical trial if it meets **all** of the following criteria:
 - Involves human participants.
 - Human participants are prospectively assigned to receive one or more interventions.
 - The study evaluates the effect of an intervention on the participants.
 - The effect being evaluated is a health-related biomedical or behavioral outcome.

If you are unsure whether your proposed project is a clinical trial, contact CAARN (caarn@medicine.wisc.edu).

- This funding opportunity does **not** support basic scientific or engineering research that aims to improve theory or prove the concept of a new technology. The assistive technology in question must be 1) intended for use by older adults and/or their caregivers and 2) provide direct benefit for older adults.

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How does this call for proposals define Assistive Technology (AT)?

Our Pilot Program defines AT broadly, as any innovations in hardware or software, or integration of both that provides any of the below:

- Helps individuals maximize their function and health, enabling people to live productive and independent lives for as long as possible.
- Helps individuals communicate, function mentally, hear, see, move, or care for themselves.
- Enables people to participate in education, work, leisure activities, health self-management, family and community activities, to communicate care preferences, or to live independently.
- Reduces burden of caregiver support.

What are the characteristics of a successful application?

- This Pilot Award supports meaningful community-engaged methodologies in user-centered design using iterative cycles of input and testing, as a foundation for successful product development. We define meaningful engagement as involvement of patients, caregivers, engineers and computer scientists, health scientists, clinicians, and other healthcare or community care partners throughout the design and research process.
- Addresses critical and emerging health needs that are important to community partners.
- Advances health and function for various populations of older adults in Wisconsin.
- Leverages a wide range of identified community assets.
- Uses clearly defined, rigorous research methods.
- Creates sustainable collaborations between health systems and/or researchers and/or communities.
- Propels research and education innovations into clinical and community practice.
- Utilizes a sound community and user-engagement methodology, including engaging populations with historically low participation.
- Clearly describes long-term goals for practical application through subsequent research that builds directly upon the proposed work.

What is CAARN and how can it help me?

The Community-Academic Aging Research Network (CAARN) helps build capacity for UW-Madison researchers by:

- Providing funding, community engagement opportunities, and pre-proposal consultation to help researchers develop collaborative partnerships with older adults, caregivers, community organizations, and health care providers to co-design, refine, and test new AT.
- Helping investigators to prepare community engagement budgets and letters of support.

CAARN's model is rooted in meaningful community engagement, which should be prioritized before, during, and after funded research activities.

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CAARN supports trust-building between UW-Madison investigators and organizations serving older adults with a variety of lived experience in Madison, Milwaukee and rural communities across the state. Our goal is to increase the number and quality of community-academic research partnerships.

Will I need IRB approval if I receive this Pilot Award?

A UW Institutional Review Board (IRB) approval is a formal clearance that a research project needs before it can involve people as participants. This helps protect the rights, safety, and well-being of human research participants and ensures that the research is being conducted in an ethical and responsible manner.

All **funded applications** must obtain IRB approval.

The approved IRB protocol must be for this specific Pilot project, using the same project title as listed in the official Notice of Grant Award. **Amending an IRB approval from another existing project is NOT sufficient.**

IRB approval is **not** required at the time of application, but award funds will not be disbursed until a letter of Protocol Development Activities (PDA), Approval, or Exemption is issued from the Health Sciences Institutional Review Board.

CAARN can provide consultation regarding submitting your protocol to IRB.

WHO IS ELIGIBLE TO SERVE AS A PATCHES PRINCIPAL INVESTIGATOR?

The Contact PI must hold a UW-Madison faculty appointment or scientist title

- Must have an appointment greater than or equal to 0.5 FTE at UW-Madison (the award funding account will be managed through the Contact PI's UW-Madison department)
- Faculty or Scientist with any title, in any track (clinical health sciences, clinician teacher, tenure, research professor, teaching professor or clinical adjunct) is eligible, if they have the capacity to conduct the research according to UW-Madison policy.

Individuals who do not meet the criteria for PI may serve as Co-Investigators or other Key Personnel

Proposals that include multiple PIs (MPIs) must designate one person as the Contact PI. The Contact PI must hold a UW-Madison faculty appointment or scientist title.

A Contact PI may **not**:

- Be the Contact PI or MPI on an active CAARN grant award (serving as Co-I or other Key Personnel is not exclusionary).
- Have been the Contact PI or MPI on another CAARN grant award application submitted during the current calendar year (serving as Co-I or other Key Personnel is not exclusionary).

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APPLICATION AND SUBMISSION INSTRUCTIONS

Please review and follow these instructions carefully. Deadlines and contact information are summarized on the table on Page 1 of this RFA.

Resources available for developing a competitive application are included at the end of this RFA:

- **Appendix A:** “Aging-Related Resources of Campus” provides descriptions and contact information for established programs on campus that may provide consultation or collaboration.
- **Appendix B:** “References and Additional Resources” provides information and resources regarding the ideas that are related to this RFA.

Letter of Intent (LOI) – REQUIRED

The LOI serves to determine eligibility and to assist in the identification of appropriate peer reviewers. The LOI will not be used for final review or ranking of the full application.

Before submitting the LOI

It is strongly recommended that investigators interested in submitting an LOI contact the CAARN program manager for an initial (no-cost) consultation (caarn@medicine.wisc.edu). The initial consultation will help the investigator identify resources to support community engagement.

LOI format

PDF, 1 page maximum, single spaced, 0.75” minimum margins, Arial 11-point font

Please include the following information, **in this order**:

1. Title of proposed research project
2. Names, titles, and email addresses of the Contact PI and any Co-PIs.
3. Names and roles of Co-Investigators and/or other key personnel crucial to the design and conduct of the proposed research.
4. A brief summary of the proposal, including specific aims, general research design, and methods.
5. A brief description of the knowledge and/or gap(s) this proposal intends to address, including specific population-level data of any population groups in Wisconsin with whom you seek to partner.
6. A list of anticipated contributors, collaborators, organizations, community partners, consultants, and/or invested groups, including a brief description of how they will be involved. If community partners are not already involved, describe your plans for identifying and engaging them.
7. Identify any specific resources that have agreed to help with engaging community partners. A letter of support is **not** required from this resource for the LOI.
8. Indicate whether this proposal serves specific groups or populations with historically reduced access to resources, such as:
 - People in rural communities
 - People experiencing poverty
 - People with disabilities
 - People with low education and/or health literacy
 - People with cognitive impairment

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How to submit the LOI

An LOI must be submitted by email to caarn@medicine.wisc.edu (see the Key Dates and Info on page 1). Once the LOI is received, the applicant will receive an email acknowledgment.

What happens after submitting the LOI

LOIs will be reviewed within 5 business days to determine eligibility. If eligible, the Contact PI will be invited via email to submit a full application. A link to the online application submission form will be provided in that confirmation email.

Full Application – REQUIRED

Eligible Contact PIs who have submitted LOIs will receive confirmation via email that contains a link to the online application submission form. All application materials should be submitted via this online form.

Application instructions:

- Online form fields: the submission form contains fields that collect academic (required) and demographic (optional) information about the Contact PI. The Contact PI should enter their information first and then add information about a Co-PI (if applicable) in the “Partner PI Information” section.
- If there is more than one PI, both must enter: ORCID, eRA Commons ID, and institutional email address.
- Include items 1-9 below.
- Please insert page numbers on the full application.
- Use CAARN’s Template for the Budget, available [here](#). There is no need to convert this spreadsheet into a PDF.
- Page/word limits (if applicable) are specified in each section.

Application components (1-9):

1. Scientific Abstract (500 words, maximum)

Please provide a concise description of the proposed research written for scientific audiences. The Scientific Abstract must include:

- Scientific rationale supporting the proposed research
- Specific hypothesis or hypotheses to be generated or tested
- Research aim(s)
- Research design or framework
- How the project uniquely advances health and/or function for older adults
- Brief description of how this project will inform your next grant, including potential funders who have identified your research topic as a health priority

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2. **Community Abstract** (500 words, maximum)

Please provide a description of the proposed research written for community reviewers. This abstract should **not** reiterate the Scientific Abstract but should tell a story that addresses the importance of this research, whose lives will be impacted, and how.

The Community Abstract could include topics such as:

- Magnitude of the health issue for the intended population
 - How many individuals are affected? Does the intended population experience inequities related to the issue? Does the intended population perceive the issue to be important?
 - What evidence indicates that research addressing the health problem is sought by potential end-users?
- How and when the project (including anticipated future work) directly helps the population involved?
- Knowledge gap/Assistive technology gap
 - What gap will the proposed research address?
 - What will the anticipated project results provide that is new?
- What does the project propose to do? What steps will be taken to address the gap?
- What specific resource(s) is the investigator working with to engage community partners during the project?
 - What has that resource done so far to support the research idea or project?
 - What will they do if the project is awarded?
- What community partners/organizations will be engaged in the project?
 - How were community partners/organizations or members identified and invited to collaborate? If they are not already identified and invited, how will they be?
 - How have community partners/organizations been involved to date and how will they be involved in the project if funded?
 - Who are the proposed users of the assistive technology and how will they be involved in the project?
 - How will the project ensure the involvement of community partners/organizations is meaningful, respectful, and non-transactional?
- Other partners: Describe the engagement and roles of the relevant health care providers or advocacy groups with this project

3. **Biosketches for all investigators and Key Personnel listed in the budget**

Please use the current NIH template: <https://grants.nih.gov/grants/forms/biosketch.htm>

4. **Narrative** (7 pages, maximum)

Must include all the following sections (A-I), in this order:

- A. **Specific Aim(s).** Include clearly defined and measurable objectives.
- B. **Background and Significance**

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- Describe the problem older adults are facing that your developed AT addresses.
- Describe the knowledge and/or gap(s) this proposal intends to address, including specific population-level data in Wisconsin for the population groups with whom the research team will partner.
- Describe who the intended users for your developed AT are (e.g. older adults themselves, care partners, etc) and the potential benefit to older adults that will accrue from the AT
- Describe and/or provide evidence showing that the end-user feels the work is important and that they are willing to be engaged.
 - Include any involvement/engagement that older adults, caregivers, community, clinical providers, and/or other impacted entities have had in developing the research question or AT to date.
 - Describe any feedback to date from community partners and/or the study population related to the proposed AT. If no feedback has been collected, describe why.
- Describe the potential long-term impact of this research.
 - How might this project improve function, health or well-being of older adults in Wisconsin and/or reduce caregiver burden. How might it benefit specific older adult populations with reduced access to health resources?
 - How might this program of research translate new and existing findings into improvements in clinical practice and/or community health?
 - What will happen next if this pilot is successful?
 - How might this research inform or impact organizational or public policies?

C. Innovation

- Describe how this project addresses the specific aims in a new way.
- Describe any challenges to current AT, research practices, clinical practices, or community living that this project helps address.
- Describe how this project improves upon existing methodologies for addressing AT needs.
- Describe how this project proposes to address and reduce equity gap(s) in the use of the developed AT.

D. Investigator

- Describe how the Contact PI, research team, and collaborators are especially suited to this project.
- If the Contact PI is an early-career investigator, describe experience, training, and mentorship related to the proposed work.
- If the Contact PI is an established investigator, describe accomplishments (i.e. publications, external funding, sustained practice, and/or policy change) related to the proposed work.
- Describe previous experience of the research team working directly with the community organizations, patients, and/or other entities involved in this application.
 - If the research team has not had direct experience working with end-users and other relevant community or clinical entities, describe the experience of the research team with the specific resource(s) that will facilitate community-academic partnerships for the project.
- Identify and describe how this proposal incorporates any of the following circumstances:

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- New Junior - Senior Investigator collaboration – The project involves a new partnership between an early career investigator, as the Contact PI, and a senior investigator. A new partnership refers to two investigators who have not co-authored a manuscript.
- Interdisciplinary collaboration – The project involves collaboration among faculty investigators from different UW-Madison schools or colleges or different departments in the same school or college.

E. Environment

- Describe the scientific environment in which the work will be done.
- Describe how this environment will contribute to the success of the project.
- Describe how the project will benefit from the unique features of the environment.

F. Approach

- Describe any preliminary research and experience relevant to this proposal.
 - Include any preliminary evidence of the functionality of the proposed AT. Include any evidence, if available, that suggests this AT could be effective with the intended users of the technology.
 - How have community partners been engaged to date?
- Describe study design, including study procedures and data collection.
 - How will user-centered design cycles be used to support the refinement of the developed AT?
 - How will community partners support the conduct of this research? This description can be brief, as we ask for more details in Section G.
- Describe qualitative and/or quantitative methodologies for data collection.
- Describe plans for data analysis.
 - Describe how qualitative and quantitative data, as applicable, will be evaluated and interpreted.
 - Describe how the results and findings will be used to support AT further refinement and testing.
 - Describe how data evaluation methods and techniques were selected.
 - Describe sample size justification, if applicable.
- Describe potential difficulties and limitations, and how to overcome or mitigate them.
- Describe any plans to ensure the development and refinement of the proposed AT will be culturally and/or linguistically aligned with community norms for the intended users and older adult beneficiaries of the AT.
- Describe how this line of research will address gaps in access for one or more populations of older adults in Wisconsin.
 - Are the research plans justified for the (1) protection of human research participants from research-related risks, and (2) inclusion of individuals with a variety of lived experiences, members of all sexes and/or genders, and/or vulnerable subjects?

G. Community Engagement and Collaboration Plan

- Describe how 1) organizational partners (i.e. collaborating community and/or clinical organizations) and/or 2) relevant individual community members (e.g., older adults, caregivers and partners, community care professionals) will be meaningfully involved in the proposed work.
 - Describe the roles that organizations and individuals will play in the project and at what stages.

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- Describe how community and/or clinical partners will be identified, recruited, and engaged, if they have not already been. Give evidence of the feasibility of recruitment and engagement.
- What are the proposed recruitment sites for participation and how are they appropriate to engage older adults?
- Describe ways in which the project will benefit from the unique features of the community partners' organizations
- Describe how community partners' preferences will be taken into consideration in planning and conducting project activities. Provide plans for meaningful engagement of community partners during the project, and afterwards if applicable.

H. Dissemination Plan

- Describe the audience(s) to which results from this project will be disseminated (e.g. older adults, community partners, clinical practices, advocacy groups, etc, as well as academic audiences).
- Describe how and when the results of this project will reach the specified audience(s).
- Identify the dissemination scale (local, national, international).

I. Future Considerations

- What is the next step in this research project's trajectory, for the proposed AT?
 - What is the potential for generalizability of this work? What kinds of collaborators and/or community partners will need to be engaged for future work?
 - What are your plans for acquiring subsequent external funding for further research and development of the proposed AT?

5. Citations

List all citations referenced. No specific formatting style is required (e.g., APA or MLA); however, the style must be consistent within the list and full citations must be referenced for all relevant and cited literature. Include the Digital Object Identifier (DOI), where applicable.

6. Timeline

Describe how all proposed activities are feasible within the 12-month grant period, which begins with UW IRB approval. Include a table that shows all project activities and milestones after receiving IRB approval.

7. Other Financial Support

Provide a list of other sources of funding for all PI and Co-Investigators listed in the Budget, using the current NIH template: <https://grants.nih.gov/grants/forms/othersupport.htm>. If applicable, include a statement of overlap between previously funded projects and the proposed research.

8. Letters of Support (LOS)

Please include signed (ink or electronic) letters of support from all collaborators.

Letters from collaborators and/or community partners should specify the following:

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- The support they are offering the project
- Their specific, meaningful role(s)
- Why they are well-suited to fulfill their specified role on the project

PIs in a Scientist track must include a letter of support from the mentor and/or department chair or dean expressing strong support for their independence and an outline of the PI's proposed academic trajectory.

9. **Budget and Justification**

Budgets must be submitted using the following [template](#) and include all expenses that directly support the proposed project. Total budgets may not exceed \$50,000 in direct costs.

Faculty/Scientist PI, Co-PI, and mentor salaries are not allowed.

Budgets are subject to review and approval by CAARN.

Budget sections **must** include:

- UW-Madison Personnel
 - Include the percent effort to be committed to the project for all contributors, with fringe benefit where applicable, including Co-Investigators, collaborators, staff, and students.
 - Graduate student and post-doctoral associate stipends are allowed for work related to the pilot, with justification. Include any proposed tuition remission in the budget, per UW-Madison policy.
 - List all contributors, even those with in-kind or zero-dollar contributions (such as the PI(s)).
 - The utilization of staff (i.e. research coordinators or project coordinators) is highly recommended.
- Community Collaborators and/or Contractual Costs
 - List all non-UW-Madison collaborators, including the organization they represent, their role on the project, and their qualification to serve in that role
 - Include payments to individuals and/or organizations that are outside of UW-Madison. Payments could be in the form of stipends or fees for services.
 - Compensation to community and/or patient partners, individuals and/or organizations must be commensurate with their contributions to the proposed work. Please describe how the partner compensation was determined (we encourage you to work with your partner organization(s) to co-develop an appropriate compensation plan).
 - If the budget does not include financial payment to any community individuals or organizations that are collaborating, describe other potential benefits (tangible or intangible) that these partners may receive from their participation in this work in the Budget Justification section (below).
- Research Participant Costs
 - Include any costs associated with paying research participants for their participation and/or food, travel, parking, childcare, or other items provided directly to participants for the purpose of contributing to this research. (Note: All research participant incentives ultimately will require approval by the Institutional Review Board (IRB)).

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- Supplies and Materials
 - You may request laboratory and computing supplies, research equipment, office supplies, software, etc., that are essential, solely for the study, and not otherwise available.
 - Large equipment expenditures (> \$5,000) are not allowed.
- Travel
 - Include any travel, made by UW-Madison personnel, which is necessary for the conduct of the research at community sites.
- Other Expenses
 - List any expenses that do not fit into any of the previous categories.
- Budget Justification
 - Include cost-based information for all listed expenses.
 - Create a list of justifications in the same order as the Detailed Budget Table.
 - All categories that have proposed spending must be justified in this section.

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REVIEW CRITERIA

Eligible proposals will first be reviewed and scored by a Scientific Review Committee (SRC). Meritorious proposals will then be reviewed, scored, and ranked by an External Community Review Committee (ECRC).

Applications with highest scores from both SRC and ECRC will be recommended for funding. This recommendation may be subject to approval from NIA.

The review criteria for each of these committees is described below.

Scientific Review

All applicants, regardless of funding decisions, will receive a summary statement and aggregate comments, explaining the rationale for the scores following completion of the entire review process.

Each application will be evaluated by three independent peer reviewers with appropriate expertise using the NIH 9-point (1 = exceptional; 9 = poor) scoring system, using the new simplified peer review framework of five core criteria (Significance, Investigators, Innovation, Approach, Environment). Reviewers will receive guidance on specific factors to consider for each criteria, all of which are listed below.

Each application receives a score for Overall Impact based on four factors (three of which are scored):

- **Factor 1:** Importance of the Research (Significance, Innovation), scored 1-9
- **Factor 2:** Approach (Rigor, Feasibility), scored 1-9
- **Factor 3:** Expertise and Resources (Investigator, Environment), evaluated as either sufficient for the proposed research or not (in which case reviewers must provide an explanation)
- **Factor 4:** Community Collaboration, scored 1-9

Scientific merit will be determined by averaging the Overall Impact scores provided confidentially by each non-conflicted member of the Scientific Review Committee following discussion of the proposal by the three independent reviewers and the Scientific Review Committee members

The SRC will strongly consider whether the budget is reasonable and justified in relation to the proposed research and collaboration(s) and may request further clarification and/or modifications.

Overall Impact

Reviewers provide an overall assessment of the likelihood for the project to achieve the proposed aims as well as contribute to future AT refinement that is responsive to community needs and has potential to improve health access for the intended target group, in consideration of the following review criteria:

- **Significance:** Does the project address an important problem or a critical barrier to progress in the field of AT development that is responsive to community needs? Is there evidence that the problem is deemed important by the community? If the aims of the project are achieved, how might this work contribute to a subsequent grant application? How will successful completion of the aims change the concepts, methods, technologies, treatments, services, and/or preventative interventions that drive this field? Does the proposal directly address unfair/unequal access to health resources? Does the application describe the implications and impact of the project for populations with lack of access to resources?

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- **Innovation:** Does the proposed research seek to enhance functioning, health, and/or quality of life for older adults? Does it seek to improve current research, clinical, or community health practice through application of novel technologies as tools for safe and healthy living? Is this a refinement, improvement, or new application of AT concepts, approaches or methodologies proposed? Does the proposed research seek to tailor the developed AT for a group that has had historically low support and research participation?
- **Rigor:** Does the project have potential for producing unbiased, reproducible, robust data? Is the sample size sufficient and well-justified? Are there adequate plans for analysis, interpretation, and reporting of results, including adequate plans to address relevant biological variables (sex, age, etc.) in the design, analysis, and reporting? If the project involves research with human subjects also consider the rigor of the intervention, whether variables are justified, whether the results will be generalizable (or, in the case of a rare disease/special group, relevant to the particular subgroup), whether the sample is appropriate and sufficiently diverse to address the proposed question(s), whether the inclusion plans are appropriate for the scientific goals, whether the plans for protection of human subjects are justified, whether potential problems/alternative strategies/benchmarks for success are clearly presented. Applicants are not expected to identify and present mitigation plans for every potential obstacle but rather identify major risks and compare that with the potential for advancement that the proposed project presents.
- **Feasibility:** Are the overall strategy, study design, methodology, and data analysis plans (qualitative and/or quantitative) well-reasoned, rigorous, and appropriate to accomplish the specific aims of the project? Is the proposed approach sound and achievable, including plans to address problems or new challenges that emerge in the work? For human subjects, does the project have an adequate and feasible plan to recruit and retain a population of participants that represents a broad range of perspectives? How likely is it that the project can enroll the proposed population? Is there evidence of a clear plan to evaluate that this proposed technology would be feasible and acceptable for the intended users and beneficiaries? Will the strategy establish feasibility for subsequent research?
- **Investigator(s):** Are the PIs, mentors, collaborators, and other researchers well suited to the project? Is the project truly collaborative, do the investigators have complementary and integrated expertise, and are their leadership approach, governance, and organizational structures appropriate for the project? Are investigators or collaborators included to address methods or analysis? Are there any gaps in the expertise of background/training of the research team?
- **Environment:** Will the environment in which the scientific work will be done contribute to the probability of success? Are the institutional support and resources available to the investigators adequate for the project proposed? Will the project benefit from unique features of the scientific environment, subject populations, and/or collaborative arrangements? Are the community collaborators and recruitment sites/partners appropriate to engage the older adult users?
- **Community Collaboration:** Does the research team meaningfully engage community members who represent the intended users of the technology? Is the engagement plan appropriate to engage with the intended users? Does the collaboration plan articulate meaningful engagement of relevant community organizational partners? Are the roles and areas of responsibility delineated for all organizational collaborators, including channels of communication and decision-making? Is there a plan to ensure the study materials, methods, and developed AT will be appropriate for the intended users? Are the recruitment

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sites appropriate to engage with the intended audience (or is there a plan to address limitations and potential challenges)? Are community collaborators compensated appropriately (that is, is the compensation of community-based collaborators fair and commensurate with their project contributions)?

An application does not need to be strong in all categories to be judged likely to have major impact. For example, a project that by its nature is not innovative may be essential to advance a field or of great need.

Community Review

Applications meeting a high threshold of scientific merit are forwarded for review by the External Community Review Committee (ECRC). The ECRC includes representatives from agencies and organizations throughout the state who are committed to improving health, function, and quality of life for Wisconsin's older adults. The ECRC ensures that a strong community voice is represented in funding decisions and makes final funding recommendations to CAARN leadership.

Proposals are scored using a two-part system:

- **Part 1:** using a 1-9 rating scale, reviewers evaluate the project's potential to have a positive impact on the intended users of the technology.
- **Part 2:** reviewers evaluate five specific factors related to the likelihood of the project to positively impact intended users. These are:
 - Is the research team meaningfully engaging, or does it have robust plans to meaningfully engage community members who represent the intended users of the technology?
 - Are the community partners/patients or collaborators actively working on the topic OR is there evidence that the innovation has been identified as a need for the intended users and might be sustainable beyond this grant?
 - Are study materials/methods/intervention appropriate for the intended users or are there robust plans to ensure they will be appropriate?
 - Is there evidence that the proposed approach would be feasible and acceptable for the intended users, or are there robust plans to ensure that it will be feasible and acceptable?
 - Is the engagement plan appropriate to engage with the intended users, or are there robust plans to ensure it will be appropriate to engage with intended users?

AWARD ADMINISTRATION INFORMATION

All applicants receiving CAARN funding must adhere to the following administrative requirements:

- **Pre-award consultation:** Awardees meet with CAARN staff to learn about grant requirements and share their experience with the application process.
- **Regulatory approvals:** Copies of all human subjects approval documents (including updates) must be forwarded to CAARN award administrators.
- **Semi-Annual Progress Report:** PIs complete a brief report via online survey describing progress to date, what is going well, spending projections, and barriers/obstacles to progress.

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- **Timely account closure:** Within 60 days of the project end date, PI's submit any final invoices along with a written description of accomplishments, including conference abstracts, publications, grant applications, and plans to further develop the project.
- **Surveys** will be requested annually for 5 years beyond the end date of the project. These will be collected via online survey, and address metrics of populations/communities involved in the research, grants and dissemination products, and steps taken with assistive technology development since the project end date.
- Awardees must **adhere to the NIH Public Access Policy** and obtain PMCID numbers for every publication utilizing pilot data.
- Awardees must **acknowledge NIA and CAARN (pilot award funders)** in NIH biosketches and all publications, presentations, and dissemination activities and notify CAARN of such publication submissions/acceptances, as well as any grant submissions/awards, that use data generated from the pilot project. Specific instructions will be provided in the Notice of Grant Award Letter.

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Appendix A: Campus aging-related centers and programs

Center / Program	How they engage people on campus	How they engage people in the community
Alzheimer's Disease Research Center (ADRC) School of Medicine and Public Health https://www.adrc.wisc.edu/ The Wisconsin Alzheimer's Disease Research Center supports researchers in their pursuit of answers that will lead to improved diagnosis and care for patients while, at the same time, focusing on the program's long-term goal — finding a way to prevent and effectively treat Alzheimer's disease.	• Maintain a pool of research volunteers, a repository of cognitive test data, brain tissue samples, cerebral spinal fluid and blood samples, and brain scans • Offer training and mentoring for young doctors and researchers who study Alzheimer's disease and aging • Host an annual research day and educational lecture series	• Connect people with opportunities to participate in studies • Offer educational events and classes for research participants and members of the public • Hold community-based educational events • Organize the Precious Memories Choir for people with memory loss and their caregivers • Organize the Mind Readers book club, exercise, and other events
Center for Aging Research and Education (CARE) School of Nursing https://care.nursing.wisc.edu/ CARE supports discoveries that improve aging, and builds the skills and capacity of those who care for older adults	• Involve faculty, staff, and graduate students across disciplines in discussions and collaborations furthering aging research, education, and workforce training through the CARE Network and Affiliate program • Develop and facilitate opportunities to learn about older adult health for nursing and health sciences students, including through clinical placements, community-based learning, and Careers in Aging Week • Connect campus partners to resources and opportunities related to aging research, education, workforce training, and community service	• Organize and facilitate Madison and Rural Boards of Older Adult Advisors, providing input on health research • Recruit care settings as clinical sites, organizations as service-learning partners, and individuals as participants in course activities • Provide training resources to the eldercare workforce, including workshops for direct care staff; an online geriatric care residency program for nurses in long term care; and toolkits for audiences ranging from hospital staff, health sciences instructors, group home staff, family caregivers, and community planners

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Center / Program	How they engage people on campus	How they engage people in the community
Center for Demography of Health and Aging (CDHA) College of Letters & Science, Office of Vice Chancellor for Research https://cdha.wisc.edu/ Through the integration of research, training, and teaching, CDHA aims to increase the understanding of social and behavioral processes related to health and aging.	• Support research and graduate training relating to the demography, economics, and epidemiology of aging • Through a faculty affiliate program, offers pilot research grants to seed new lines of research in the demography of aging and health; develop innovative research networks within and beyond CDHA; and help affiliates produce strong NIH grant applications through project management, technical support, and mentorship • Offer pre- and post-doctoral training, including two seminar series	• Host a weekly Demography Seminar bringing in scholars from across the globe to share their research and insights • Host several special events and conferences annually, bringing scholars at the forefront of a number of aging research areas to campus
Community Academic Aging Research Network (CAARN) Division of Geriatrics and Gerontology, Department of Medicine, School of Medicine and Public Health https://caarn.wisc.edu/ CAARN brings together academic researchers and community partners to conduct research related to assistive technology for safe and healthy aging. CAARN has expertise in geriatrics, engineering, public health, translational, recruitment science, and community engaged equity research.	Provide training; venues for networking; assistance with grant writing, research design, recruitment, and retention strategies; and resources to facilitate engagement in community-engaged aging research	Serve and work with communities with historically low participation in research, through local organizational partnerships, including: • Rural aging offices, Aging and Disability Resource Centers (ADRCs), and public health agencies • African American churches, advocacy groups, clinics, and foundations in Dane and Milwaukee counties

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Center / Program	How they engage people on campus	How they engage people in the community
Institute on Aging (IOA) Office of Vice Chancellor for Research, School of Medicine and Public Health https://aging.wisc.edu/ IOA promotes the health and well-being of the adult and aging populations in our local community, state, and society at large through excellence in multidisciplinary research, education, and outreach. Underscoring the salience of this mission is the demographic context: the fastest growing segment of the U.S. population is aging adults.	• Have IOA faculty affiliates across campus • Administer the Midlife in the U.S. (MIDUS) longitudinal study funded by NIA, which provides training opportunities • IOA affiliates and MIDUS investigators (faculty, graduate students, and postdocs) lead studies on integrative pathways to morbidity (e.g., cardiovascular disease, Alzheimer's, osteoporosis) and mortality, while filling in sociodemographic factors, stress exposures, psychosocial factors, biomarkers (including genomics), and brain-based assessments	• Organize the annual Colloquium on Aging, which includes a health resource fair and poster session • Host "Eloquence and Eminence," a lecture series featuring emeritus faculty known for their teaching excellence and scholarship • Translate research findings for public audiences, via the <i>Aging News</i> newsletter and <i>Recent Findings from MIDUS</i> webpage
Life Span Division of Extension https://aging.extension.wisc.edu/ Life Span programs support individuals and families as they transition through the aging process by providing programming and resources on family caregiving, healthy aging, end-of-life programming, and by building local partnerships to create aging-friendly communities.	• Connect campus partners to community members and stakeholders across the state to support research and program development in the field of aging • Partner with investigators and centers to disseminate research-informed information to communities and elevate community needs and perspectives	• Offer programs on aging mastery, caregiver support, planning for end-of-life needs, and general interest topics • Catalyze policy / systems / environment change through education and facilitation in partnership with community leaders, organizations, and coalitions

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Center / Program	How they engage people on campus	How they engage people in the community
VA Geriatric Research Education and Clinical Center (GRECC) U.S. Department of Veterans Affairs Partners with the UW-Madison Division of Geriatrics and Gerontology https://www.va.gov/GRECC/index.asp The GRECC aims: • To build new knowledge in geriatric care through research • To improve health care for older Veterans through the development of innovative clinical models of care • To provide training and education on best practices in caring for older adults, for students in healthcare disciplines and VA staff • To staff and support geriatric primary care and specialty care clinics at VA	• Offer a two-year VA Fellowship in Advanced Geriatrics providing opportunities for physicians, dentists, and post-doctoral associated health professionals to develop expertise in geriatrics • Conduct collaborative research • Oversee weekly geriatric core curriculum seminar and other geriatrics and aging conferences (open to campus)	• Offer the Geriatric Scholars Program workforce development program • Participate and serve on multiple national VA networks that focus on geriatric telemedicine, transitional care, dementia care, and dysphagia care best practices • Participate in outreach work promoting health equity (education, consultation) with Wisconsin Tribal Nations to improve geriatric and dementia care
Wisconsin Alzheimer's Institute (WAI) School of Medicine and Public Health https://wai.wisc.edu/ WAI advances health equity through research, education, clinical care, and community engagement for all people impacted by Alzheimer's disease and related disorders.	• Through the Summer Externship program, offer education, preceptor, service learning, and internships for health professions students • Organize the New Friends Program, which pairs UW–Madison students and people living with a diagnosis of mild cognitive impairment, Alzheimer's disease, or other dementias	• Offer continuing medical education, lectures, webcasts, and other information to health professionals • Support memory clinics statewide to promote early diagnosis and treatment, and to support caregivers • Deliver culturally appropriate education, training, and outreach programs to providers, people living with dementia, and family caregivers in the Milwaukee area

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Center / Program	How they engage people on campus	How they engage people in the community
	- House WRAP, one of the largest and longest-running studies of individuals at risk for Alzheimer's disease - Partner with ADRC on the IEA Innovation Fund, which provides direct seed funding to ADRC, WAI, and Division of Geriatrics and Gerontology investigators, staff, and program teams	- Facilitate the WAI Milwaukee Community Advisory Board, which provides input on research and community projects and includes family caregivers, research participants, community gatekeepers, and people living with dementia - Provide training to healthcare and social services professionals on addressing behavioral and psychological symptoms of dementia - In affiliation with the Wisconsin Department of Health Services, provide training and technical assistance to county, Tribal nations, and other providers of services to persons with Alzheimer's disease; collaborate to create needed services; and collect and disseminate information on Alzheimer's disease, including public awareness and public policy initiatives

Appendix B: References and additional resources

References and Additional Resources	
CAARN Intake Form and Templates	https://caarn.wisc.edu/resources/ - Community-Engaged Research Intake Form - Scope of Work Template - Community Partner Budget Template
CAARN Library of Recommend Measures	https://caarn.wisc.edu/measurement-tools/ <i>*Note this pilot funding is not intended to assess clinical health outcome measures, but researchers should consider these for subsequent research</i>

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ICTR Collaboration Planning and Team Science	Steps Model: https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5449250 FREE CONSULT: https://ictr.wisc.edu/team-science/team-science-collaboration-planning Team Science Community Toolkit: https://www.teamscience.net
ICTR Dissemination and Implementation Launchpad	Design for Dissemination Tools: https://ictr.wisc.edu/program/dissemination-implementation-launchpad/ FREE CONSULT: https://ictr.wisc.edu/service/dissemination-implementation-consultation-service/
Intellectual Property Policies	UW-Madison IP Policy: https://policy.wisc.edu/library/UW-4008
NIH Biosketch Template	https://grants.nih.gov/grants/forms/biosketch.htm
NIH Other Support Template	https://grants.nih.gov/grants/forms/othersupport.htm
UW-Madison Budget Policies	Allowable costs: https://rsp.wisc.edu/awardmgt/directcosts.cfm Tuition Remission: https://rsp.wisc.edu/policies/tuitionremission_faq.cfm
What is “rural”?	Rural Health Info Hub: https://www.ruralhealthinfo.org/topics/what-is-rural

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