

**IN STEP**



[instep.ucsd.edu](http://instep.ucsd.edu)

# UC San Diego IN STEP Center Pilot Funding Request for Applications

**Deadline May 4th, 2026, at 5:00PM PT**

# IN STEP Center Leads

**Lauren Brookman-Fraze**

- Center Director
- Admin Core Lead



**Gregory A. Aarons**

- Center Director
- Methods Core Lead



**Shawn Burke**

- Methods Core Co-Lead



**Nicole Stadnick**

- Admin Core Co-Lead



**Marisa Sklar**

- Methods Core Co-Lead



# About the IN STEP Center

- ▶ Children's mental health is a public health priority.
- ▶ Multiple public service systems are involved in caring for children with mental health and developmental needs:
  - ▶ Schools
  - ▶ Outpatient and school-based mental health services
  - ▶ Child welfare services
  - ▶ Medical services

 IN STEP



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*Every child should have access to high-quality, affordable, and culturally competent mental health care.*



Office of the  
U.S. Surgeon General

# About the IN STEP Center

- ▶ Multiple evidence-based practices (EBPs) have been identified as effective to addressing needs but aren't routinely used in routine care.
- ▶ Teams and teamwork are essential to providing services and implementing EBPs.
- ▶ Integrating team effectiveness research and implementation science has the potential to accelerate care quality and effectiveness.



# About the IN STEP Center

▶ Visit our website:  
[instep.ucsd.edu](http://instep.ucsd.edu)



COVID-19 Updates Masking is required in classrooms, clinical areas and on university transportation. Learn more on the [Return to Learn website](#) [Learn More](#)

DEPARTMENT OF PSYCHIATRY UC San Diego

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## IN STEP CHILDREN'S MENTAL HEALTH RESEARCH CENTER

HOME Research Programs & Centers IN STEP Center

**IN STEP Center**

People  
Projects  
Tools and Resources  
Services and Activities

### Implementation Science and Team Effectiveness in Practice (IN STEP) Children's Mental Health Research Center

#### ABOUT US

Directed by Lauren Brookman-Frazer, Ph.D. and Gregory Aarons, Ph.D., the new Implementation Science and Team Effectiveness in Practice (IN STEP) Children's Mental Health Research Center at UC San Diego will develop and test team-based implementation strategies to improve services for children with mental health and developmental needs across systems including schools, specialty mental health, pediatric health care, and child welfare.

The IN STEP Center is co-led by Nicole Stadnick, Ph.D., M.P.H. and Marisa Sklar, Ph.D. both from UC San Diego, and Shawn Burke, Ph.D. of the University of Central Florida. The research team includes investigators from UC San Diego, UC Davis, UCLA, UCSF, San Diego State University, University of Central Florida, and community partners across multiple service systems.

#### CENTER AIMS

1. Establish a highly efficient and well-functioning Center for community-partnered, team-focused children's mental health implementation research.
2. Integrate team effectiveness research (TER) and natural language processing to advance implementation science models, designs, and measures.
3. Leverage the Center's expertise and infrastructure to adapt and test team-based strategies to improve the implementation and effectiveness of evidence based practices (EBPs) across community service systems.

#### HOW WE ARE FUNDED

Funding for the IN STEP Children's Mental Health Research Center comes from the National Institute of Mental Health (NIMH)

- P50MH126231

Photo by Erik Jepsen/University Communications.

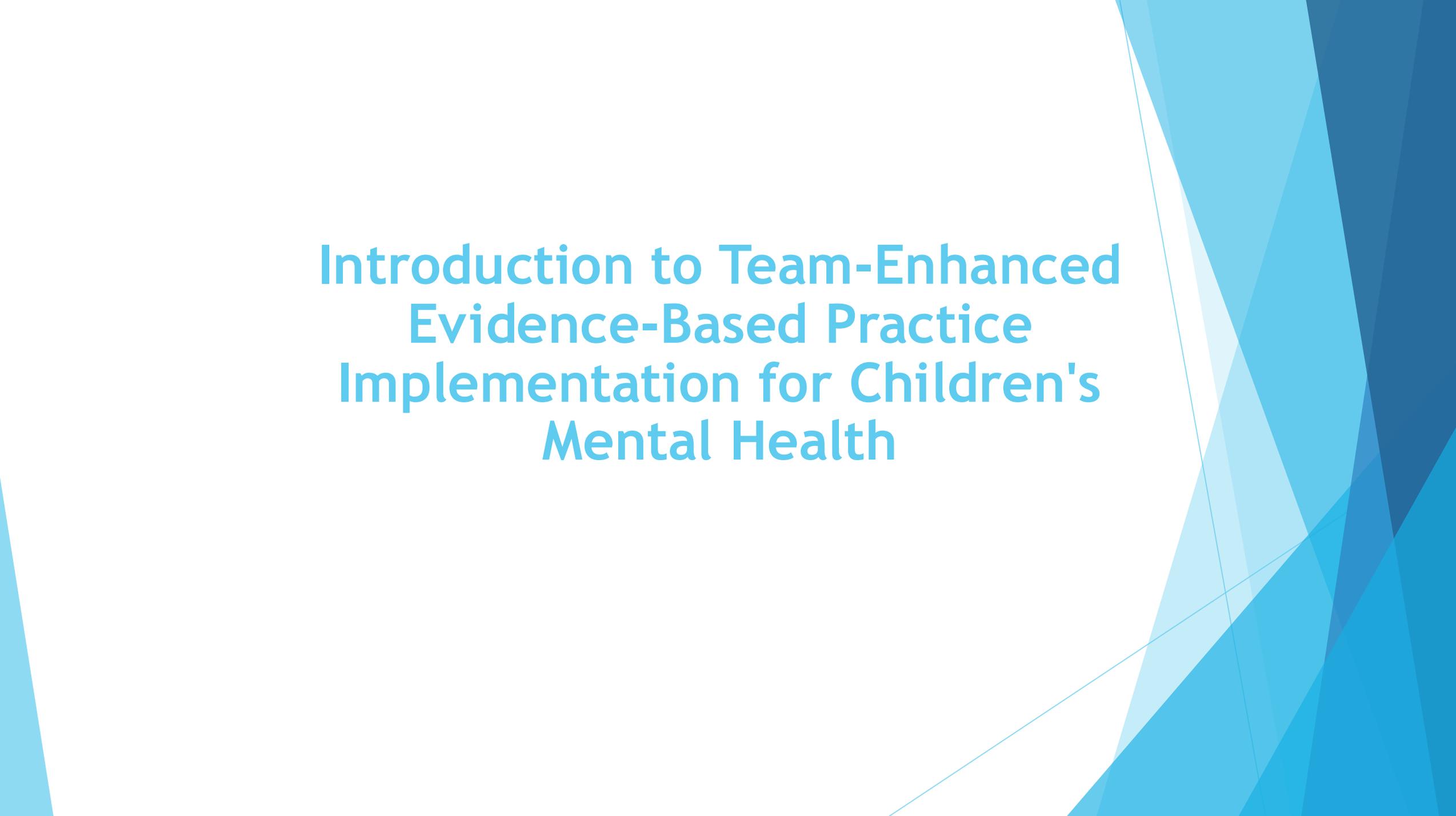


# IN STEP Center Pilot Funding Request for Applications (RFA)

- ▶ For direct access to the RFA, please reference QR code.
- ▶ The RFA, details about the RFA, and the Qualtrics page to submit your application are all available on our website under “Pilot Projects.”

<https://psychiatry.ucsd.edu/research/programs-centers/instep/pilot-projects/index.html>



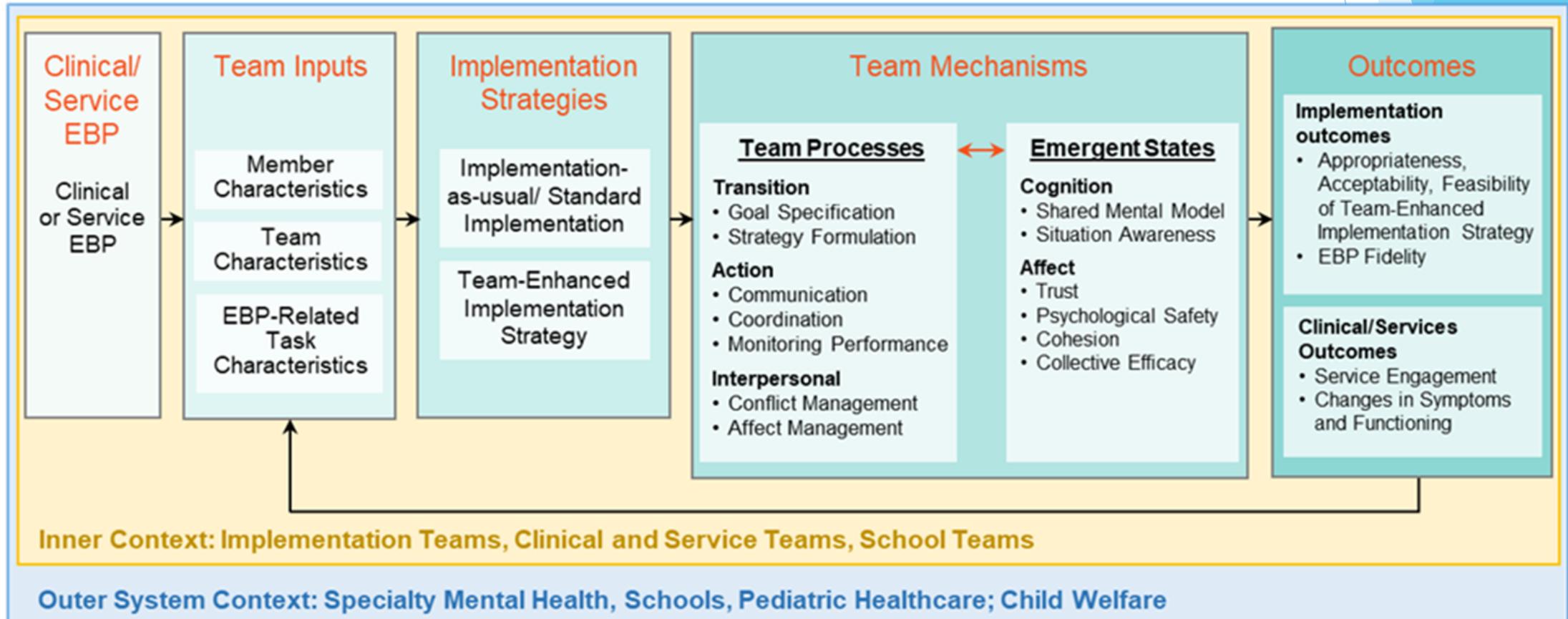
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# **Introduction to Team-Enhanced Evidence-Based Practice Implementation for Children's Mental Health**

# IN STEP Center & Team Effectiveness

- ▶ The Center's primary research focuses on team-enhanced EBP implementation
- ▶ Guided by the Conceptual Model of Team Effectiveness for EBP Implementation

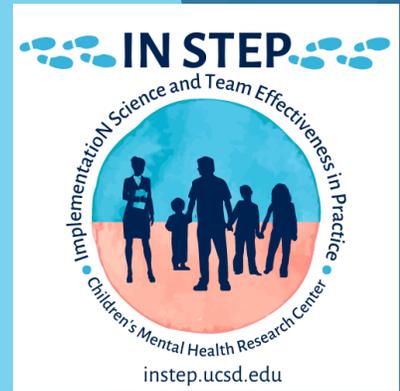
**Figure 1.** Conceptual Model of Team Effectiveness for EBP Implementation



# IN STEP Center & Team Effectiveness

- ▶ Pilot funding applicants may elect to consider the following as targets for their projects
  - ▶ Team inputs
  - ▶ Team-enhanced implementation strategies
  - ▶ Team mechanisms
- ▶ The next few slides provide information on these targets, and how to measure these targets.
- ▶ Our website has many helpful resources!

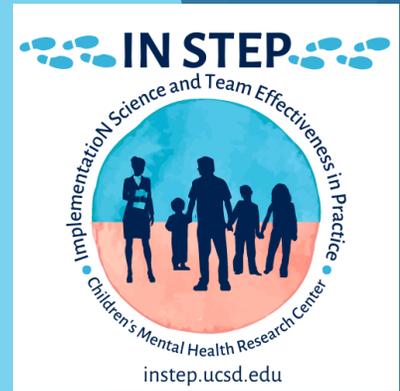
<https://psychiatry.ucsd.edu/research/programs-centers/instep/tools-resource/index.html>



# IN STEP Center & Team Effectiveness

## ▶ Team inputs

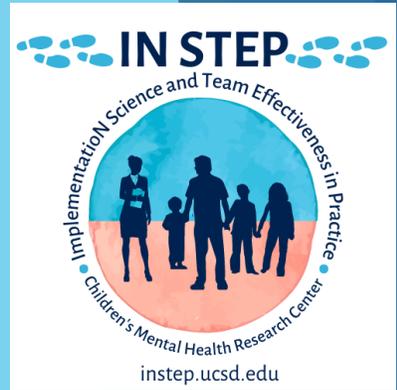
- ▶ Consider the clinical or service-setting EBP.
- ▶ Is the EBP delivered in the context of a “team?”
- ▶ Team - two or more individual who are working adaptively and independently towards a common and valued goal (Salas et al., 1992)
- ▶ Team inputs include *member* (e.g., knowledge, skills, abilities, attitude, motivation), *team* (e.g., member diversity, power distribution), and *task* (e.g., complexity, interdependence) characteristics.
- ▶ Team inputs can influence the development of team-enhanced implementation strategies



# IN STEP Center & Team Effectiveness

- ▶ Team-enhanced implementation strategy
  - ▶ Implementation strategies are “methods or techniques used to enhance the adoption, implementation, and sustainability of a clinical program or practice.” (Proctor et al., 2013)
  - ▶ Team development interventions (TDIs) are planned processes designed to improve a team’s performance and effectiveness.
  - ▶ TDIs can be leveraged as team-enhanced implementation strategies to target mechanisms of successful EBP implementation.





# IN STEP Center & Team Effectiveness

- ▶ Team-enhanced implementation strategy
- ▶ Visit our website for common TDIs

<https://psychiatry.ucsd.edu/research/programs-centers/instep/tools-resource/team-development-interventions/index.html>



## Team Development Interventions (TDI) – Definitions

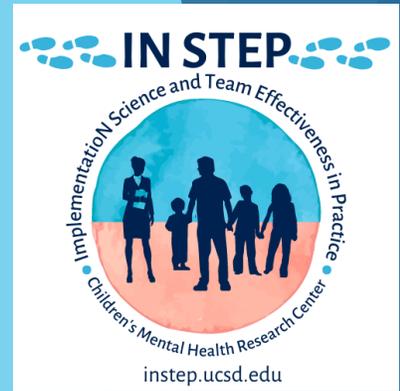
Click on the intervention name listed below to be directed to its individual page.

[Click here to access a pdf version of the information below](#)

- **Team Training:** "Formalized, structured learning experience[s] with preset objectives and curriculum that target specific team competencies" (Lacerenza et al., 2018, p. 519).
- **Feedback:** "Information provided to a team to guide its activities" (Handke et al. 2022 p. 42)
- **Team Building:** "An intervention designed to foster improvement within a team, providing individuals closely involved with the task with the strategies and information needed to solve their own problems... [through] (a) goal setting, (b) interpersonal-relationship management, (c) role clarification, and (d) problem solving" (Lacerenza et al., 2018, p. 523).
- **Team Charters:** "An intervention which focuses on the development of team processes and in turn the development of emergent states...Some common content addressed in [team charters] includes purpose/mission statements, operating guidelines, behavioral norms, and performance management processes" (Shuffler et al., 2018, p. 719).
- **Team Task Analysis:** "A tool through which critical taskwork and teamwork KSAOs can be identified. Typically subsumed under the umbrella of "job analysis," a task analysis is a critical part of the process whereby job tasks are defined in terms of objectively identifiable activities" (Burke & Howell, R., 2018, p. 21).
- **Team Composition:** "The process of selecting, excluding, or removing individuals for a team based on individual member attributes relevant to and necessary for team effectiveness" (Shuffler et al., 2018, p. 51).
- **Team Work Design:** "A definition and structure of a team's tasks, goals, and members' roles; and the creation of organizational support for the team and link to the broader organizational context" (Morgeson & Humphrey, 2008, p. 46).

# IN STEP Center & Team Effectiveness

- ▶ Team-enhanced implementation strategies may improve implementation outcomes through *team mechanisms*
  - ▶ Team Processes
    - ▶ Transition phase (i.e., goal specification)
    - ▶ Action phase (i.e., coordination, goal progress monitoring)
    - ▶ Interpersonal phase (i.e., conflict management)
  - ▶ Team Emergent states
    - ▶ Affect (i.e., psychological safety, trust)
    - ▶ Cognition (i.e., shared mental model)



# IN STEP Center & Team Effectiveness

- ▶ Team mechanisms
  - ▶ Processes
    - ▶ Transition phase
    - ▶ Action phase
    - ▶ Interpersonal phase

<https://psychiatry.ucsd.edu/research/programs-centers/instep/tools-resource/definitions/team-processes/index.html>



## Action Phase Processes:

"Periods of time when teams conduct activities leading directly to goal accomplishment." (Marks et al., 2001, p. 360)

- **Goal Progress Monitoring:** "Tracking task and progress toward mission accomplishment, interpreting system information in terms of what needs to be accomplished for goal attainment, and transmitting progress to team members." (Marks et al., 2001, p. 363)
- **Systems Monitoring:** "Tracking team resources and environmental conditions as they relate to mission accomplishment which involves (1) Internal systems monitoring (tracking team resources such as personnel, equipment, and other information that is generated or contained within the team), and (2) Environmental monitoring (tracking the environmental conditions relevant to the team)." (Marks et al., 2001, p. 363)
- **Team Monitoring/Backup Behavior:** "Assisting team members to perform their tasks. Assistance may occur by (1) Providing a teammate verbal feedback or coaching, (2) Helping a teammate behaviorally in carrying out action, or (3) Assuming and completing a task for a teammate." (Marks et al., 2001, p. 363)
- **Coordination:** "Orchestrating the sequence and timing of interdependent actions." (Marks et al., 2001, p. 363)

# IN STEP Center & Team Effectiveness

- ▶ Team mechanisms
  - ▶ Emergent states
    - ▶ Affect
    - ▶ Cognition

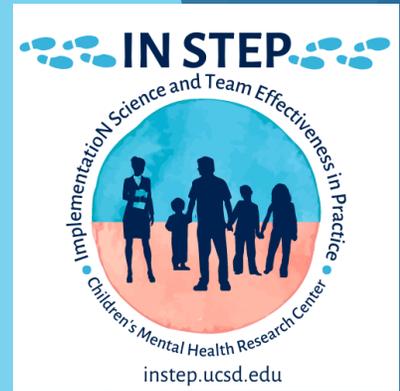
<https://psychiatry.ucsd.edu/research/programs-centers/instep/tools-resource/definitions/emergent-states/index.html>



## Affective Emergent States:

"Emergent states focusing on member's feelings, attitudes, and emotions." (Rapp et.al, 2021, p. 71)

- **Psychological Safety:** "A shared belief held by members of a team that the team is safe for interpersonal risk taking." (Edmondson, 1999, p. 354)
- **Team Efficacy:** "Individual team member's belief and confidence that the team can mobilize its resources for successful task performance." (Chan, 1998, p. 238)
- **Team Identification:** "The emotional significance that members of a given group attach to their membership in that group." (Van Der Vegt & Bunderson, 2005, p. 533)
- **Team Cohesion:** "The bonding together of members of a unit in such a way as to sustain their will and commitment to each other, their unit, and the mission." (Johns, et al., 1984, p. 4)
  - **Social Cohesion:** "Nature and quality of the emotional bonds of friendship, liking, caring, and closeness among group members, which reflects a general preference for spending time with those with whom one shares an emotional bond." (MacCoun, 1993, p. 157)
  - **Task Cohesion:** "An individual's attraction to the group because of shared commitment to the group task" (van Vianen & De Dreu, 2001, p. 100)
- **Trust:** "The willingness of a party to be vulnerable to the actions of another party based on the expectation that the other party will perform a particular action important to the trustor, irrespective of the ability to monitor or control the other party." (Meyer et al., 1995, p. 712)



# IN STEP Center & Team Effectiveness

## ▶ Measurement

- ▶ The center has aligned its measurement of team mechanisms across its research projects.

<https://psychiatry.ucsd.edu/research/programs-centers/instep/center-projects/index.html>

- ▶ Information on common measures for each mechanism can be accessed from our website!



### The Development and Construct Validity of a Team Processes Survey Measure

- Mathieu et al. (2020): This paper provides definitions of goal specification, strategy formulation, and coordination. Additionally, it also represents the validation effort of a scale that measures action, transition, and interpersonal processes from the original Marks et al. conceptualization.

# IN STEP Center & Team Effectiveness

- ▶ Visit our website for more information on pilot funding and previously awarded proposals

<https://psychiatry.ucsd.edu/research/programs-centers/instep/pilot-projects/index.html>



## Pilot Projects

Year 1 - Joel Crume, PhD

Year 1- Alison Jobin, PhD

Year 1- Perna Martin, PhD

Year 2 - Melina Melgarejo,  
PhD

Year 2 - Rachel Schuck,  
PhD

Year 2 - Ryan Singh, PhD

Year 3 - Sara Chung, PhD,  
and Yesenia Mejia, PhD

## Team Effectiveness Processes in Child Welfare Services Child and Family Team Meetings

**Awardee:** Henry Joel Crume, Ph.D. - UCSD

**Co-Investigator(s):** Danielle Fettes, Ph.D., Marisa Sklar, Ph.D.

### Specific Aims

1. Evaluate whether CFT members' views of team mechanisms (goal specification, goal formulation, communication, coordination, trust, cohesion, and a sense of collective efficacy) are associated with how they understand the CFT meeting's ability to connect youth and families to appropriate mental and behavioral health services.
2. Compare how CFT members' views of team mechanisms differ by meeting platforms (i.e., in-person, phone-based, video-based, or hybrid), platform preferences, and team characteristics (e.g., service providers, youth, families, or social workers).
3. Explore responses to open-ended survey items wherein CFT members identified opportunities for improving mental and behavioral health service linkages for youth and families through the team decision-making process.

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# **IN STEP Center Pilot Funding Aims & Logistics**

# IN STEP Center Pilot Funding Aims

1. Stimulate Dissemination and Implementation (D&I) research focused on optimizing team effectiveness in the implementation of EBPs in community-based systems serving children with mental health needs;
2. Generate data that will lead to success in garnering major research funding (e.g., NIH, PCORI, IES) or other agencies or foundations that fund implementation science for children's mental health;
3. Support the career development of early career investigators in D&I, particularly among individuals from groups underrepresented in federally funded health services research.
4. Increase the public health impact of EBP implementation efforts in community care settings that serve children with mental health concerns.

# Criteria for Review

Proposals will be evaluated by 4 reviewers (2 research reviewers, and 2 community reviewers) using the following 2 scoring systems:

## 1. NIH Simplified Peer Review Framework (SRF)

- Factor 1. Importance of the research
- Factor 2. Rigor and feasibility
- Factor 3. Expertise and resources

<https://grants.nih.gov/policy-and-compliance/policy-topics/peer-review/simplifying-review/framework>



## 2. Community Based Review

- Strength of community engagement
- Potential impact on community
- Impact on human health

# NIH SRF Criteria

## Review Criteria

### OVERALL IMPACT

The likelihood for the project to exert a sustained, powerful influence on the research field(s) involved, considering the **3 Factors** and **Additional Review Criteria** (as applicable)

#### Additional Review Considerations (no effect on Overall Impact score)

- Authentication of Key Biological/Chemical Resources
- Budget and Period of Support

### 3 Factors (Simplified Review Framework)

- **Factor 1:** Importance of the Research (Significance & Innovation)
- **Factor 2:** Rigor and Feasibility (Approach)
- **Factor 3:** Expertise and Resources (Investigator & Environment)

### Additional Review Criteria

- Protections for Human Subjects
- Vertebrate Animals
- Biohazards
- Resubmissions, Renewals, Revisions

# NIH SRF Criteria

## Reviewers Address 3 Key Questions about the Proposed Project

### *1. Should it be done?*

- **Factor 1:** Importance of the Research (Significance and Innovation)

### *2. Can it be done well?*

- **Factor 2:** Rigor and Feasibility (Approach)

### *3. Are the expertise and resources in place to do it?*

- **Factor 3:** Expertise and Resources (Investigator and Environment)



# NIH SRF Criteria

Scoring factor 3.

- If sufficient expertise and resources are in place, choose **“appropriate”**.
  - **No comments are allowed.**

Appropriate  
 Additional expertise and/or resources needed

- If there are **any gaps in the expertise and/or the resources** needed for the project, choose **“additional expertise and/or resources needed”**.
  - **Describe the gaps.**

Appropriate  
 Additional expertise and/or resources needed

Address specific gaps in expertise or resources needed to carry out the project:

The binary rating provides the NIH with critical input about needed expertise and resources without leaving room for reputational bias.

# Community Based Review

Review Criteria	Considerations
Strength of Community Engagement	Evaluate the strength and appropriateness of the community partnership and/or community engagement approach. Do community partners share in the design, and conduct of the project? The project oversight? The funding? Will both partners benefit from the work, and from future research, treatments or interventions based on the work? Does the community partner represent, in a meaningful way, the population under study?
Potential Impact on Community	Evaluate the potential for the research to have a significant positive impact on the individuals who are the participants in the community that is the focus of the proposed research. Consider the potential immediate, short-term and long-term impact of the work.
Impact on Human Health	How important is funding this research to improving human health, either in the near future, or distant future?

 **IN STEP**



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## IN STEP Pilot Funding Application Process

# IN STEP Center Pilot Funding Application Process

- ▶ Applications are submitted via [Qualtrics](#)
- ▶ Questions about the application platform and/or technical difficulties may be directed to [instep@health.ucsd.edu](mailto:instep@health.ucsd.edu).

<https://bit.ly/3PlaKLy>



# IN STEP Center Pilot Funding Application Process

- ▶ Applications must include the following
  1. Specific aims (1 page)
  2. Research strategy (6 pages, excluding references)
  3. Community impact statement (1 page)
  4. Dissemination plan (1 page)
  5. Biosketches
  6. Human subjects report

# 1. Specific Aims

- Prepare a one-page document that addresses the following:
  - State concisely the goals of the proposed research and summarize the expected outcome(s), including the impact that the results of the proposed research will have on the research field(s) involved.
  - List succinctly the specific objectives of the research proposed (e.g., to test a stated hypothesis, create a novel design, solve a specific problem, challenge an existing paradigm or clinical practice, address a critical barrier to progress in the field, or develop new technology).

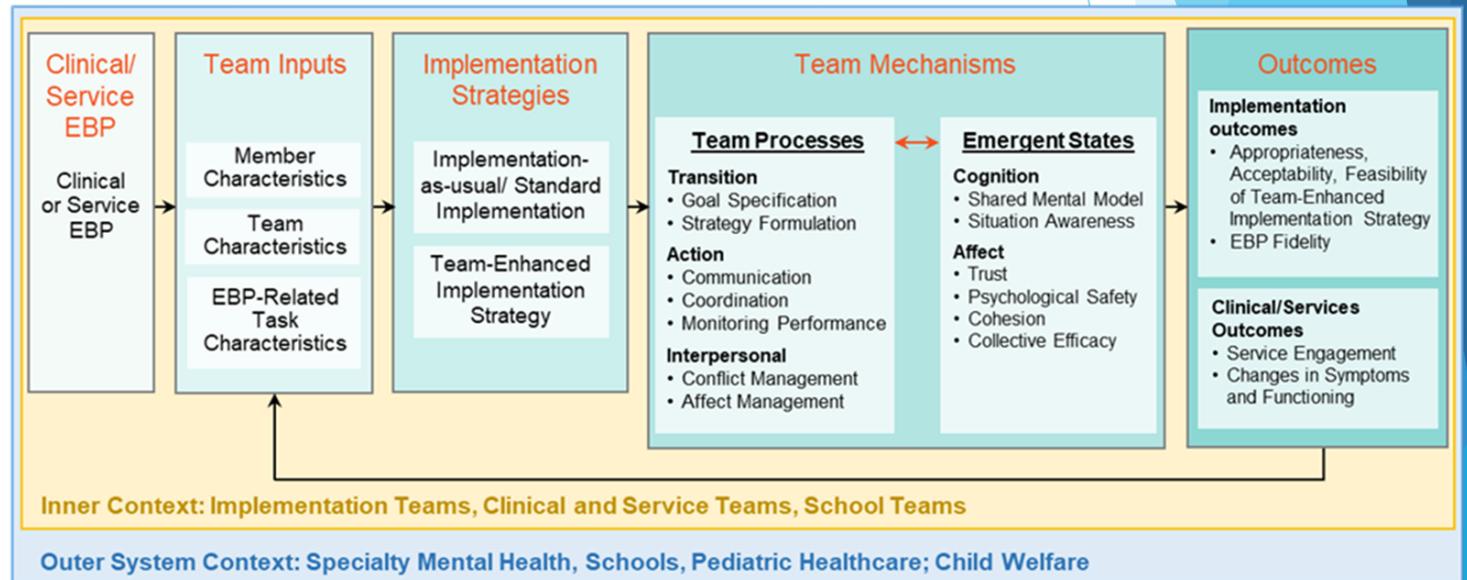
## 2. Research Strategy

- Provide a maximum 6-page application (not including references) describing the project:
  - Organize the Research Strategy in the specified order listed below. Please reference the RFA for further detailed instructions.
    - Significance
    - Innovation
    - Approach
    - References

# Incorporate Conceptual Model of Team Effectiveness for EBP Implementation

It is expected that this model be used throughout the proposal in guiding the research questions, design, measure selection, analysis, interpretation, and reporting of the research findings.

Figure 1. Conceptual Model of Team Effectiveness for EBP Implementation



# 3. Community Impact Statement

- Prepare a one-page (maximum) statement articulating the Community Relevance/Impact of your Proposal
- Include project title, and ensure eighth-grade reading level (non-scientist reviewer). Statement should answer the following questions:
  - Briefly summarize the proposed research study.
  - How are you engaging and/or partnering with the community to achieve the goals of the project?
  - Will both partners benefit from the work, and from future research, treatments or interventions based on the work?
  - Does the community partner represent, in a meaningful way, the population under study?
  - How does the research impact the individuals/participants in the community that is the focus of the proposed research?
  - How important is funding this research to improving human health overall, either in the near or distant future?

## 4. Dissemination Plan

- Prepare a 1-page (maximum) description that outlines your dissemination plan and next steps that addresses the following:
  - Explain briefly your plan for the dissemination of NIH-funded clinical trial information (if appropriate), and address how the expectations of the policy will be met.
  - Plans for follow-up grants/proposals.
  - Dissemination products like toolkits/playbooks, decision aids, community-facing resources, academic publications. Specify target audience.

# 5. NIH Biosketch



OMB No. 0925-0001/0002 (Rev. 08/12 Approved Through)

**BIOGRAPHICAL SKETCH**  
Provide the following information for the Senior/key personnel and other significant contributors.  
Follow this format for each person. DO NOT EXCEED FIVE PAGES.

NAME: Vucovich, Lee A  
eRA COMMONS USER NAME (agency login): LVUCOVI  
POSITION TITLE: Assistant Director for Reference Services, Associate Professor  
EDUCATION TRAINING (Begin with baccalaureate or other initial professional education, such as nursing, include postdoctoral training and residency training if applicable.)

INSTITUTION AND LOCATION	DEGREE (if applicable)	Completion Date MM/YYYY	FIELD OF STUDY
University of Michigan	MOTHS	1971	Chemistry
Indiana University	MLS	2003	

**A. PERSONAL STATEMENT**  
I would describe the experiences and qualifications that make me well suited for the role of this grant.

- Smith KH, MacCall S, Vucovich L. MedlinePlus ;Go Local, and Consumer Health Collection Development. Journal of Consumer Health on the Internet. 2007; 11(2):453.
- Vucovich LA, Baker JB, Smith JT. Analyzing the impact of an author's publications. J Assoc. 2008 Jan;96(1):63-6. PubMed PMID: [18219384](#); PubMed Central PMCID: [PMC22](#)
- Vucovich LA, Powell TE, Wilhelm CL. Librarians in the Outpatient Clinic, a Five-Year Retrospective. Journal of Consumer Health on the Internet. 2013 April; 17(2):117-138.
- Vucovich LA. Health Sciences Librarianship. Wood S, editor. Lanham: Rowen and Little 2014. Chapter 9, Research Services and Database Searching

**B. POSITIONS AND HONORS**

**Positions and Employment**

2005 - 2013 Assistant Director for Reference Services, Assistant Professor, University of Alabama at Birmingham, Birmingham, AL  
2014 - Assistant Director for Reference Services, Associate Professor, University of Alabama at Birmingham, Birmingham, AL

**Other Experience and Professional Memberships**

2001 - Member, American Library Association  
2003 - Member, Medical Library Association

**Honors**

**C. Contribution to Science**

- Contribution. 1/2 page detailing the historical background that frames the scientific profile, the central finding(s); the influence of the finding(s) on the progress of science or the application of those finding(s) to health or technology; and your specific role in the work.
  - Vucovich L, Lorbeer L. InfoRetriever with infoPOEMs. The Charleston Advisor. 2007 October; 9(2):35-37.

- Provide NIH biosketch for each of the following: the principal investigator(s), any co-investigators, and any postdoctoral fellows, residents, graduate or medical students you know will be involved in the proposed project.
- Biosketches need to be compiled into a single combined PDF for upload.
- <https://bit.ly/3Oto5if>

# 6. Budget



- Budget – Provide a detailed budget ([using NIH Budget Form “page 4” only](#))
- <https://bit.ly/3TeyfmX>
- PIs can request \$25,000 or \$50,000 in total costs (i.e., including both direct and indirect costs). For internal, UC San Diego, proposals, total funding does not need to include indirect costs.
- The funding period is 12 months. Requests for carry forward for up to 6 months will be considered. Any unspent funds will be returned to UC San Diego. Investigators must have IRB approval in place before the beginning of the funding cycle.
- If any funds in the budget are designated for a community agency, provide a letter from that agency, on their letterhead, that describes: (a) the agency’s support for the proposed project, (b) the agency’s role in the project, (c) the name, address, contact information (e-mail and telephone) of the agency representative who has primary responsibility for that portion of the project.

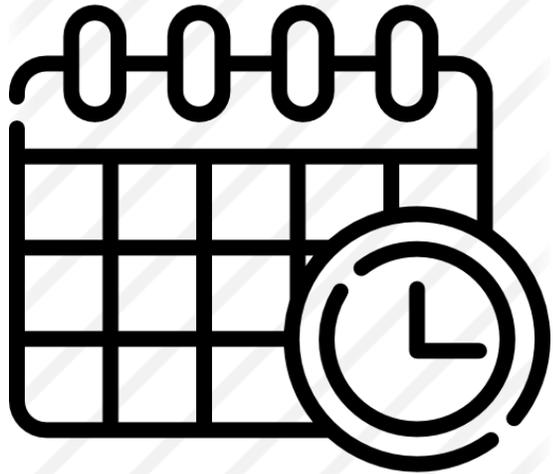
## 7. Human Subjects Report

- For projects recruiting human subjects, you will be required to submit human subjects enrollment report information ([Instructions Here](#)).
- For projects not recruiting human subjects, please provide a brief explanation (1-2 sentences maximum) describing why your project is not considered human subjects research.

# IRB

Although not required by the application deadline, funding is contingent on successful IRB approval. We highly recommend that you submit an IRB application to your home institution at the same time the pilot application is submitted to the IN STEP Center.

# KEY DATES



- Applications due: May 4th, 2026
- Funding period: June 1st, 2026 - May 31st, 2027

# IN STEP Pilot Awards Project Requirements



[instep.ucsd.edu](http://instep.ucsd.edu)

# Project Requirements

- 6-Month Interim Presentation-The principal investigator(s) selected to receive funding will be required to present their project at a Center webinar at the 6-month period of funding.
- NIH RPPR Reporting-The principal investigator(s) is expected to share human subjects data with IN STEP for annual RPPR reporting by March 1<sup>st</sup>, 2025. This includes individual participant data, and enrollment tables. Additionally, the principal investigator(s) must submit a narrative report of progress to date.
- Final Report and Survey-The principal investigator(s) will be required to complete a final report and evaluation survey. This survey will ask for a description of progress to date and a listing of all submitted publications and grant applications (pending or funded), meeting abstracts, and seminars relating to the pilot project and evaluation of the IN STEP pilot grant experience.
- Final Presentation-The principal investigator(s) selected to receive funding will be required to present their project at a Center webinar upon the completion of their project.
- Awardees are expected to publish their findings in one or more scholarly peer-reviewed journals and present this research at professional research, clinical, and/or community meetings.
- Investigators are expected to cite the IN STEP Center grant in all publications/presentations resulting from this pilot award using the following language: “Funding for this work was supported by a grant from the National Institutes of Health (P50MH126231). Opinions expressed herein are the views of the authors and do not necessarily reflect the official policy or position of the National Institutes of Health and/or National Institute of Mental Health.”

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# Frequently Asked Questions

# How much funding is available?

PIs can request funds of \$25,000 or \$50,000 in total costs (i.e., including both direct and indirect costs) which is to be spent within the designated 12-month award period. The funding period for the 2026 application cycle is June 1, 2026 - May 31, 2027.

# What if my project is in a formative phase rather than an implementation phase?

We will review project proposals at any stage of the research process. Projects in formative and developmental phases are appropriate for D&I study. We also understand that pilot proposals need to have appropriate scope and feasible aims for the 1-year duration.

# Can I ask for a meeting or consultation about my proposal?

Yes! You may request a 30-minute pre-submission consultation. IN STEP Center Methods Core can meet with you to refine your team effectiveness and implementation science methods and ensure your proposal is clear and comprehensive. You may request consultation by visiting the following: <https://bit.ly/3scyN0F>. Consultation requests must be received by April 20th, 2026.



# Do I need to have a TER expert on my proposal to be successful?

You do not need to have a Team Effectiveness Research (TER) expert on your proposal to be successful. Once your proposal is funded, you will obtain support from the IN STEP Center Methods Core to refine your team effectiveness and implementation science methods and ensure your proposal is clear and comprehensive. You may also request a 30-minute pre-submission consultation to ensure that your proposal is responsive to the RFA.

# When is the Deadline to Submit?

The deadline for 2026 applications is May 4th at 5pm PT.

# Can IN STEP Center Members Serve as Co- Investigators?

Yes! You are welcome to invite IN STEP Center members (Directors, Investigators) to be Co-Is (contributed time) on your proposal. This may be particularly relevant for those proposing secondary data analysis based on existing Center member research.

# Questions? Comments?

- Email: [instep@health.ucsd.edu](mailto:instep@health.ucsd.edu)
- Request for Applications
- Web: [instep.ucsd.edu](http://instep.ucsd.edu)
- Want to keep up-to-date with the IN STEP Center? Join our email list!

