



**ACGME *Back to Bedside* Initiative  
Request for Grant Proposal (RFP) 2024-2026  
Open Innovation Proposal**

The Accreditation Council for Graduate Medical Education (ACGME) announces continued support of its *Back to Bedside* initiative for a fourth funding cycle to begin August 1, 2024. The aim of *Back to Bedside* is to empower residents and fellows to develop transformative projects that foster meaning and joy in work and allow them to engage on a deeper level with what is at the heart of medicine: their patients. Ultimately, the goal of this initiative is to improve clinical learning environments in equitable and impactful ways with lessons that can be widely disseminated and solutions that can be implemented broadly.

**Key Dates**

Announcement	December 4, 2023
RFP Submission Deadline	April 22, 2024
Awardees Notified	June 12-14, 2024
Acceptance Deadline	June 21, 2024
Public Announcement of Awardees	June 24, 2024
<b>Award Start Date</b>	<b>August 1, 2024</b>
Learning Collaborative 1	August 4-5, 2024
Virtual Check-In 1	January 2025
Virtual Check-In 2	May 2025
Learning Collaborative 2	October 2025
Virtual Check-In 3	January 2026
ACGME Annual Educational Conference	February 19-21, 2026
<b>Award End Date</b>	<b>July 31, 2026</b>

### **Principal Aim of *Back to Bedside***

The overarching aim of *Back to Bedside* is to cultivate joy and meaning in work by improving the physician-patient relationship. Recognizing that residents and fellows are uniquely equipped to identify areas for improvement in graduate medical education (GME), *Back to Bedside* supports residents and fellows across a diverse range of Sponsoring Institutions and programs to lead transformative projects that address the ongoing desire for learners to connect deeply with patients despite a rapidly changing health care environment. In addition, *Back to Bedside* creates a Learning Collaborative for the awardees to support programmatic and institutional change while establishing a framework to scale innovations for national dissemination.

*Back to Bedside* hopes to support processes, initiatives, curricula, projects, or other activities designed and implemented by and for residents and fellows. By fostering activities that build a sense of meaning in work and reminding residents and fellows of the reason they entered the profession in the first place, this initiative hopes to encourage all residents and fellows to look at how they can improve their learning environment.

### **Background**

In May 2016, the ACGME Council of Review Committee Residents (CRCR) held a meeting with the focused topic of “Meaning in Work.” The session opened with an introduction to the theories of Daniel Pink, among others, on internal motivation and personal satisfaction. Central to these theories is that satisfaction in work and life is attained when three conditions are met: (1) personal autonomy; (2) potential for or attainment of mastery; and (3) meaning in work.<sup>1</sup> The CRCR undertook an exploration of how residents and fellows can find meaning in their daily work. A consensus emerged that the patient-doctor relationship was central to meaning in work during medical education and training and professional life, and the *Back to Bedside* initiative was born.

The success of *Back to Bedside* has been overwhelming. In the first three cycles, 84 projects at GME programs across the country have been funded. The outcomes of projects have been disseminated through numerous presentations, posters, and peer-reviewed publications, fueling the growth of *Back to Bedside* into a larger movement to keep joy and meaning through patient connection at the forefront of GME.

1. Pink D. *Drive: The Surprising Truth About What Motivates Us*. Riverhead Books; 2009.

## **Opportunity Description**

The ACGME seeks proposals for funding awards to support two-year projects. These projects must study the implementation of a resident-/fellow-developed intervention to enhance meaning in clinical learning environments by fostering the physician-patient relationship.

Awardees will receive mentorship and education from the ACGME in the form of two Learning Collaborative meetings held at the ACGME office in Chicago, Illinois. These interactive gatherings are designed to build necessary skills for project management and implementation, as well as facilitate opportunities for networking and collaboration with other awardees and with ACGME leaders. The awardee group will convene one last time at the 2026 ACGME Annual Educational Conference in San Diego, California.

Awardees will also participate in virtual check-ins in between Learning Collaborative meetings.

Awardees and mentors will be expected to implement their projects, provide quarterly project updates, attend all Learning Collaborative meetings, and report on their findings at the 2026 ACGME Annual Educational Conference.

## **Assessment Criteria for a Proposed Activity**

Initiative Goal: Promote resident- or fellow-initiated projects to improve the meaning in daily work by enhancing the patient-physician relationship.

### *Key Elements*

1. Resident- or fellow-developed and led
2. Patient-centered
3. Sustainable
4. Supported by an ACGME-accredited Sponsoring Institution or clinical site with ACGME-accredited programs (see FAQ for details of expected support)
5. Evaluated using a well-defined outcome measure
6. Supported by a Faculty Mentor (see FAQ for definition of this role)

Special consideration will be given to proposals that address the intersection of meaning in work, enhanced patient contact, addressing inequities, and improving inclusion.

## **Award Tiers**

Teams may apply for funding at one of three different levels depending on the scope of their proposal. Applicants should carefully consider the appropriate funding level for the needs of their project.

- Tier 1 - \$15,000
- Tier 2 - \$10,000
- Tier 3 - \$ 5,000

Fifty percent of funds will be distributed on August 1, 2024. The remaining funds will be distributed on August 1, 2025, contingent upon completion of quarterly updates,

participation in Virtual Check-Ins, attendance at Learning Collaboratives, and overall project progress.

### **Evaluation and Assessment**

Each proposal should include an evaluation plan that focuses on those outcomes or activities the project leader would consider evidence of successful implementation of the project. No standard outcome measures are being mandated across all projects; however, use of validated tools is recommended. Applicants are encouraged to utilize measures that assess residents'/fellows' sense of autonomy, meaning or joy in work, and/or patient-focused outcomes as primary project outcomes.

Proposals should clearly specify the design (including if quality improvement) and methods (quantitative, qualitative, or mixed). For quantitative and qualitative projects, Institutional Review Board (IRB) approval/exemption is not required prior to submission of the proposal but is expected to occur in a timely fashion to allow project completion. Quality improvement projects must be appropriately approved at the clinical site (e.g., the project should receive Non-Human Subjects Research determination by appropriate institutional personnel).

### **Sponsoring Institution Responsibilities**

Sponsoring Institutions, participating sites, or programs must support these innovations through investment in time, mentoring, facilities, and funding.

Specifically, institutions will be asked to provide confirmation of a commitment to support awarded residents and fellows with:

- allotted time and administrative resources commensurate with the project needs;
- funds for travel and lodging for the Resident/Fellow Project Lead and Faculty Mentor to attend two Learning Collaborative meetings (two days in length) with other awardees at the ACGME office in Chicago, Illinois over the course of the award funding period; up to three additional resident/fellow project members may attend; and,
- funds for registration fees, travel, and lodging expenses for the Resident/Fellow Project Lead and Faculty Mentor to attend the 2026 ACGME Annual Educational Conference in San Diego, California; the Sponsoring Institution is encouraged to support additional team members' attendance.

## Submission Instructions

Use the template below to draft your proposal and submit final answers via [THIS SURVEY](#) by 11:59 p.m. on April 22, 2024. Late submissions will not be accepted.

To be considered responsive to this RFP, each applicant must answer all of the questions in the Survey Monkey linked above and ensure that each answer does not exceed the specified length (word total) noted, or to indicate if a question does not apply.

This is a competitive award process. Awards will be based on the strength of the proposal and the needs of the *Back to Bedside* initiative.

The proposal must include the following sections:

### I. Contact information

1. Project Title
2. Resident/Fellow Project Lead Contact Information
  - a) Name
  - b) Address
  - c) Specialty/Program, PGY/Total years required to complete specialty training
  - d) Email (work)
  - e) Email (personal)
  - f) Phone
3. Resident/Fellow Project Co-Lead Contact Information (If applicable)
  - a) Name
  - b) Address
  - c) Specialty/Program, PGY/Total years required to complete specialty training
  - d) Email (work)
  - e) Email (personal)
  - f) Phone
4. Resident/Fellow Team Members (for each team member, include permanent email and PGY)
5. Faculty Mentor Contact Information
  - a) Name
  - b) Title
  - c) Address
  - d) Specialty/Program
  - e) Email (Permanent)
  - f) Phone

6. Sponsoring Institution
  - a) Name
  - b) Address
  - c) ACGME Sponsoring Institution Code

## II. Initiative Narrative

7. Describe your concept for an innovation to foster meaning in work and get residents and fellows *Back to Bedside*. (Limit 500 words)
8. Describe how you will consider inclusivity and equity in your project and within the project team. (Limit 250 words)
9. Detail your plan for evaluation of the progress of your project. Consider applicable measurement tools (qualitative and/or quantitative study methodologies) in your project design. Provide specific survey or study tools intended for use and details for other evaluation tools. Note that at least three time points for data collection, including baseline assessments, are encouraged. (Limit 250 words)
10. Describe your plan for dissemination of your project and outcomes to impact other residents and/or fellows. Consider internal and external audiences and the community that will be impacted. (Limit 250 words)
11. Describe the project succession plan, with particular attention to addressing resident/fellow turnover during the entire cycle of the project. (Limit 250 words)

## III. Award Amount

Applicants must apply for funding at one of three amounts depending on the scope and needs of their project. Indicate the funding request for the proposed project:

- \$15,000
- \$10,000
- \$5,000

## Upload the following as one single PDF document:

Use 12-point font and one-inch margins; include the budget (required), letters of commitment (required), and letters of support (optional) as a single PDF.

### IV. Budget Instructions and Forms

Provide a detailed budget for the two-year project period. The submitted budget must be detailed and specific. The budget may include:

- Support for data management and research personnel (e.g., statistician, research assistant)
- Materials and supplies
- Licensing fees for measurement tools (e.g., Maslach Burnout Inventory)
- Publication costs
- IRB costs
- Technology development or capital expenses

The budget for award money may *not* include:

- Support for travel and lodging for project-associated meetings (support must be committed by the institution as outlined above)
- Institutional overhead
- Indirect costs

### V. Letters of Commitment

1. Include a letter of financial commitment from the designated institutional official of your institution that explicitly states that the institution will contribute support, including time, administrative resources, and funds for:
  - travel and lodging for at least two (and up to five) project members, including a Faculty Mentor, to attend two Learning Collaborative meetings (two days in length each) with other awardees at the ACGME office in Chicago, Illinois over the course of the award funding period; and,
  - funds for registration fees (estimated at \$550), travel, and lodging expenses for at least two project members, including a Faculty Mentor, to attend and present at the 2026 ACGME Annual Educational Conference in San Diego, California.
2. Include a letter of support from the program director indicating approval for the project to be implemented and support for the attendance of the Resident/Fellow Project Lead and up to three additional project members at the activities listed above.

### VI. Letters of Support

Applicants *may* submit up to three additional letters from leadership within the Sponsoring Institution, clinical site, or program in support of the proposal. Such letters should not exceed two pages.