

# Translational Science and Clinical Pilot Project Award Request for Applications

**Required Pilot Pre-Proposal Due: January 30, 2026**

**Invited Full Application Due: March 27, 2026**

## Introduction

The Southwest Center for Advancing Clinical and Translational Innovation (SW CACTI) is welcoming applications to fund pilot projects focused on Clinical Translational Science (CTS) that are designed to develop, demonstrate and/or disseminate innovations to improve health outcomes, reduce health disparities, and address urgent public health needs across the Southwest region.

The purpose of this RFA is to support pilot projects that utilize the SW CACTI infrastructure to ***produce preliminary data for competitive NIH grant proposals*** in clinical and translational science. Translational Science goals must be highly methodological and demonstrate feasible and generalizable solutions to CTS problems. All awards are dependent upon the availability of SW CACTI funds.

UNM HSC/UA faculty members interested in applying for pilot funding are asked to submit Pilot Pre-Proposals by **January 30th, 2026, at 12:00 pm**. Pilot Pre-Proposals are limited to 2 pages and should include the following:

- The pre-proposal should include a title, description of objectives/aims, the most innovative and novel aspects of your proposed translational science project, description of how the project can be completed in 12 months and must directly address how the project meets the definition of Translational Science.

Additional documents (not included in the 2-page limit):

- NIH formatted Bio sketch for the PI, and a letter of support from your Department Chair/Dean noting your qualifications, availability of protected time, and the potential impact of your work.

Investigators with highly qualified pre- proposals will be invited to submit a full research proposal on **January 30, 2026**. Instructions on how to prepare a full research proposal (elements listed below) will be provided by email with the invitation to participate. Full proposals will be due by noon on **March 27, 2026**.

Pilot applications for this announcement will exemplify the SW CACTI's mission of developing CTS to promote and support the goal of the National Institutes of Health. To support this initiative, we will award grants ranging from **\$25,000-\$50,000** to be spent between July 1, 2026, through June 30, 2027 Allowable costs include the potential for 5% FTE allocation only for ***clinical faculty*** salary with written departmental approval for release time. Applicants are expected to "right size" their budgets and scope of projects.

As part of our SW CACTI award, the NIH initiative seeks to accelerate the movement of clinical science into healthcare practice. Specifically, this effort focuses on advancing CTS by promoting the development, demonstration, and dissemination of innovative practices that improve the translation of research into medical practice. Additionally, it emphasizes the inclusion of underserved populations across the human lifespan, fostering partnerships and collaborations to address health disparities, and ensuring that the benefits of translational science are accessible to all communities.

## Framework for All SW CACTI Pilot Awards

With this pilot funding cycle, the UNM SW CACTI will sharpen its focus towards funding Translational Science projects. CTS projects generally address the science or operational principles of the translational process that transforms validated research observations from biomedical, clinical, and behavioral studies into interventions. CTS project may include those designed to: 1) accelerate change in clinical practice, 2) improve the health of communities, 3) create health policies that mitigate the impacts of extreme poverty and 4) improve the overall health of our communities. **As such, pilot projects with the sole emphasis on Translational Research will not be funded.**

*This RFA contains references and links (below) to resources to help investigators understand how to adapt to this new framework and we offer educational opportunities, consultation, and support to help you make the transition.*

## Translational Science

NCATS defines Translational Science as “*the field of investigation focused on understanding the scientific and operational principles underlying each step of the translational process.*” *The goal of Translational Science is to develop generalizable principles to accelerate translational research” thereby turning “science into health.”*

Projects are intended to: (1) explore innovative new leads or new directions; (2) stimulate team approaches that incorporate less traditional researchers and (3) provide initial support to establish proof of concept. Projects must be feasible within the proposed timeframe, have high methodological and scientific quality, and answer important scientific questions.

NCATS Definitions:

- **Translation:** The process of turning observations in the laboratory, clinic and community into interventions that improve the health of individuals and communities – from diagnostics, preventions, and treatments to medical procedures and behavioral changes.
- **Translational Research:** The endeavor to traverse a particular step of the translational process for a particular target or disease.
- **Translational Science:** The field of investigation focused on advancing the scientific and operational principles underlying each step of the translational process.
- **Learn more about Translational Science:**
  - <https://ascpt.onlinelibrary.wiley.com/doi/10.1111/cts.13055>
  - <https://ncats.nih.gov/training-education/translational-science-principles>
  - [A New Resource from NCATS: The NCATS Translational Science Principles | clic \(clic- ctsa.org\)](#)
- [SW CACTI Translational Science Panel Video](#)

NIH Definition of Clinical Research: Research with human subjects that is:

- Patient-oriented research. Research conducted with human subjects (or on material of human origin such as tissues, specimens, and cognitive phenomena) for which an investigator (or colleague) directly interacts with human subjects. It includes:
  - (a) mechanisms of human disease
  - (b) therapeutic interventions
  - (c) clinical trials
  - (d) development of new technologies

*Excluded from this definition are in vitro studies that utilize human tissues that cannot be linked to a living individual.*

- Epidemiological and behavioral studies
- Outcomes research and health services research

NIH Definition of [Clinical Trial](#): A research study in which one or more human subjects are prospectively assigned to one or more interventions (which may include placebo or other control) to evaluate the effects of those interventions on health-related biomedical or behavioral outcomes.

NIH Definition of [Human Subjects Research](#): According to 45 CFR 46 Link to Non-U.S. Government Site - Click for Disclaimer, a human subject is "a living individual about whom an investigator (whether professional or student) conducting research:

- Obtains information or biospecimens through intervention or interaction with the individual, and uses, studies, or analyzes the information or biospecimens; or
- Obtains, uses, studies, analyzes, or generates identifiable private information or identifiable biospecimens.

NIH Definition of [special populations](#): Groups who have traditionally been underrepresented in health research or excluded altogether For example, pediatric populations, older adults, people with disabilities and/or rare disorders, underrepresented racial/ethnic and/or sexual and gender minorities, rural populations or populations with low socio-economic status.

NCATS wants the development of methods, resources, scaffolds, procedures that will facilitate translational science. Thus, potential topics in **Translational Science** include<sup>1</sup>:

- |   |   |
|---|---|
| • Understanding of translation                          | • Single/harmonized IRBs  |
| • Translational science                                 | • Clinical trial operational efficiency                               |
| • Target qualification*                                 | • Clinical trial networks   |
| • De-risking undruggable                                | • Adaptive clinical trial designs                                     |
| • Targets/untreatable diseases*                         | • Electronic Health Records for research                              |
| • Predictive efficacy and predictive toxicology         | • Shortening time of intervention adoption*                           |
| • New therapeutic modalities; repurposing*              | • Access and adherence  |
| • Biomarker qualification                               | • Pharmacoepidemiologic studies and comparative effectiveness trials* |
| • Data interoperability and transparency*               | • Integration of project management                                   |
| • Registries and natural history studies*               | • Incentives/credit for team science                                  |
| • Clinical diagnostic and outcome criteria              | • Incentives/credit for health improvements                           |
| • Patient/community engagement                          | • Education/Training (scientific and cultural)                        |
| • Clinical trial participant recruitment and diversity* | • Collaborative structures, agreements, IP management                 |

Major rate-limiting translational problems are the focus of Translational Science. \*Identified in the Drug Development Map (18, Supplemental Figure SB) as being particularly prone to failure, delay in progression, and/or high cost and therefore high priority for innovation. IP, intellectual property; IRB, institutional review board 1 Austin, CP, Opportunities and challenges in translational science, Clin Transl Sci. 2021;14:1629–1647

## Application Deadline, Notice of Awards and Funding Cycle

**Application Release Date:** November 12, 2025

**Pilot Pre-proposal due to SW CACTI:** January 30, 2026, by 12 noon (NM Time)

**SW CACTI invitation to submit full application:** February 27, 2026

**Full Application Deadline:** March 27, 2026, by 12 noon (NM Time)

**IRB Submission Deadline:** March 27, 2026

**Notice of Intent to Fund/Decline:** May 12, 2026

**IRB Approval Deadline for NIH Review:** May 12, 2026

**Notice of Award:** May 12, 2026

**Funding Cycle:** July 1, 2026, through June 30, 2027

## Eligibility and Project Requirements

- **Investigators must submit a Pilot Pre-proposal. Only invited investigators are allowed to submit full proposals for pilot funding.** Submit the Pilot Pre-proposal via redcap here: [SW CACTI Pilot Pre-Proposal Application](#)
- Principal Investigators for these pilot awards *must* have a primary appointment as UNM HSC/U of A faculty (junior or senior investigators). Any other investigator who cannot submit the grants emanating from this pilot award through UNM HSC/U of A is not eligible to receive this award.
- All investigators selected to receive funding and their team members are encouraged to complete the SW CACTI GCP Training Course within 3 months of receiving the award.
- All investigators selected to receive funding will be expected to submit progress reports on go/no-go milestones monthly to ensure continued funding.
- All investigators with human subjects selected to receive funding will be expected to submit a monthly recruitment/enrollment report.
- All investigators selected to receive funding will be expected to submit a Final Progress Report at the end of the funded project and an additional report one year later, detailing progress to date, expenditures, and all submitted publications and grant applications (pending or funded) relating to the pilot project.
- Should investigators receive NIH funding during the Pilot period of performance, the investigator must ensure there is no budgetary overlap.
- Funds may not be used to provide interim support for active projects or to extend previously conducted work.

**Please note:** All funds not spent by the end date of the Pilot Project Award (June 30, 2026) will be returned to SW CACTI and NIH. **No extensions will be granted.** Applicants are eligible for no more than a total of two SW CACTI pilot awards, after which they need to demonstrate that they have received a score for an extramural grant submission before they will be considered for another SW CACTI pilot award.

## Presentations and Publications

- Awardees are expected to publish their findings in scholarly peer-reviewed journals and present their research at professional meetings.
- All publications, grants, and presentations resulting from research funded by the SW CACTI or using SW CACTI resources should link and cite the SW CACTI as a contributing source of support and indicate the SW CACTI's citation as follows: "This

project was supported by the National Center for Advancing Translational Sciences for the National Institutes of Health through Grant Number (UM1TR005466), The University of New Mexico Southwest Center for Advancing Clinical and Translational Innovations."

- Investigators are responsible for linking and citing any journal articles resulting from research funded by this award to the grant in MyNCBI (UM1TR005466), Nancy Pandhi/Sally Radovick), and for submitting the publication for a PMCID number and comply with NIH's Open Access policy (different than an automatically assigned PMID) <https://publicaccess.nih.gov/>

## Evaluation Criteria

Successful projects will exemplify the SW CACTI mission of developing clinical and translational science. Applications should be well-written, precise, and succinct. Applications will be subject to both scientific and programmatic review and will receive scientific review by the SW CACTI Review Committee. The following criteria will be used in evaluating these proposals:

- Overall Impact
- Significance
- Investigator (including an evaluation of the status of prior pilot funding awards and the outcomes from those studies)
- Innovation
- Approach (*should include evaluation of approaches to articulated research barriers, demonstration of feasible and generalizable translational science solutions, team science and interdisciplinary collaboration, feasibility of recruitment if human subjects*). These elements must be realistic for the one-year pilot timeframe.
- Environment
- Utilization of SW CACTI resources

Additional review considerations will include:

- Alignment with SW CACTI programmatic goals
- Probability that this project will lead to extramural funding
- Integration of special populations
- "Go/No Go" Milestones (suggested by the investigator)
- Budgetary Considerations
- Regulatory Approvals
- Letters of Support and Commitment
- Aim(s) with strong Translational Science objectives.

**Scoring:** To emphasize the importance of extramural grant submission and attainment deriving from these pilot awards, each of the first 8 items above will be scored on a 1-9 scale (where 1 is best), and composite scores will then be weighted so that the final overall impact score is determined as follows:

- Innovation: 10%
- Significance: 10%
- Approach, Environment, and Investigator: 30%
- Plan for and probability of extramural funding: 30%
- Aim(s) with strong Translational Science objectives: 20%

**Please Note:** If a pilot is deemed successful, investigators may be invited to participate in a short video to highlight the dissemination and implementation of their research, showcasing its real-world relevance and potential for broader application.



## Guidance for Studies Enrolling Human Participants

If your project requires recruitment of human participants, please include the following information as part of the Approach section of the application. The review committee will be specifically looking for these details.

- What is the available population for recruitment?
- Is your target enrollment number feasible in the one-year time limit of the pilot award? Is that number based on a power analysis?
- Do you have sufficient protected time for this study separate from other duties?
- Do you have prior experience from other studies recruiting this population?
- When will you enroll your first participant and what percentage of your population is likely to meet the inclusion/exclusion criteria?
- [SW CACTI Services Available](#)

Note: The SAGE committee will review every pilot with human participants **at 1-month intervals** to assess enrollment progress. Concerns will be directly communicated to PIs by phone and email. Corrective actions may be suggested or taken including assistance and training. Warnings may be issued that pilot funding may be pulled and the study discontinued, unless the PI provides a good rationale that lagging enrollment will catch up with projections.

## Budget Guidelines

Utilization of SW CACTI Core services is strongly encouraged and will be a review consideration. It is important that you schedule a meeting with the SW CACTI Research Navigator at [dlsedillo@salud.unm.edu](mailto:dlsedillo@salud.unm.edu) after being invited for a full application. This consultation step is required for planning purposes and to ensure effective use of SW CACTI Core services utilization for your research proposal.

Responsible budgeting is critical for the 12-month project, and it is common to overestimate what you can accomplish in that limited time frame. Your proposed budget will be reviewed and potentially revised based on Peer Review and Core management feedback. If successfully funded, reallocation of the budget is strongly discouraged. However, consideration will be made for the reallocation of funds within SW CACTI Cores if justified. Prior approval is necessary. SW CACTI resources included in the budget will be covered using a non-refundable voucher program. These funds may not be reallocated to other expenses after the grant has been awarded. ***Rationale for not using SW CACTI Core services needs to be specifically justified.***

Details of services offered by each Core can be found at each of the following links:

- [Biomedical Informatics](#): Offers clinical data warehouse mining, “honest broker” services for access to data from multiple sources, and web-based electronic data capture and survey tools via REDCap.
- [Biostatistics](#): The SW CACTI Biostatistics, Epidemiology and Research Design Support (BERD) Core is designed to provide UNM HSC/UA investigators with expert early consultation and service on all aspects of study design, biostatistics, and basic data management for effective clinical and translational studies. Please note that this service does not include data collection, data entry, and similar services that are the responsibility of your team.
- [Clinical and Community Research Units](#): Provides community engagement and outreach, study coordination and project implementation, qualitative interviewing, focus

group facilitation Community Engagement Studios, data management, clinical services, and qualitative analysis investigators.

- [Translational Technologies](#)

#### **SW CACTI Offers:**

- [Translational Laboratory](#): Offers state-of-the-art equipment, technical assistance, consultation on protocol and assay development for any SW CACTI partner institution.

#### **Outside Resources:**

- [Center for Molecular Discovery](#): Expertise multiplexed, high-through outflow cytometry for drug discovery.
- [Human Imaging \(Mind Research Network\)](#): Focus on human imaging providing MRI, MEG, and EEG services.
- [UNM Human Imaging Core](#): Focus on human imaging and providing MRI services.
- [Preclinical Imaging Core \(Brain and Behavioral Health Institute\)](#): The Preclinical Imaging Core at Domenici Hall houses a 7T MRI scanner (BrukerBioSpec70/30USR) and a PET insert for preclinical and molecular in vivo and ex vivo imaging. The scanner is equipped with state-of-the-art multi-channel RF coils, allowing high-resolution in vivo or ex vivo imaging for application in life science, biomedical and preclinical research.
- [KUSAIR \(Keck-UNM Small Animal Imaging Facility\)](#): Provides high quality and customer specific functional imaging services on small animal research.

#### **Costs *not* covered under these awards:**

- faculty salaries unless clinical FTE buyout
- Clinical faculty may request up to 5% FTE with agreement from the Chair of their Department. A letter of confirmation from the Chair is required.
- postdoctoral salaries
- non-UNM HSC/UA staff salaries
- graduate student support (stipends, tuition, etc.)
- administrative or office supply costs (office supplies, paper, ink, telephone, etc.)
- equipment > \$5,000 (items < \$5,000 are at the discretion of the committee and can be removed from the budget)
- computers, laptops, tablets
- monetary incentives to clinics or providers (e.g., recruitment bonus)
- other items typically supported by indirect costs (publication costs, printing/duplication costs)

## **IRB Guidelines**

CTSA is required to obtain prior approval of all pilot projects from NIH prior to funding. Because of this, all pilot submissions will be required to submit one of the below IRB letters with their submission. **Applications without IRB submission by March 27, 2026**, will be administratively disqualified. This deadline provides HRPO/IRB with efficient time to review all submissions prior to submission to NIH. **Projects will need IRB approval by May 12, 2026.**

- IRB Letter with Determination of Non-Human Subjects Research
- IRB Letter with Approval of Exemption #1-9 Human Subjects Research
- IRB Letter with Approval of No More Than Minimal Risk Human Subjects Research
- IRB Letter with Approval of Greater than Minimal Risk Human Subjects Research

The following applies to each project:

- Each pilot submission must have its own standalone IRB protocol.
- Amendments or a sub-study/ancillary study to an existing IRB-approved parent protocol are not allowed.
- Pilot application title must match IRB protocol title and be reflected on the approval letter.
- Principal Investigator of the pilot application must match the Principal Investigator on the IRB protocol and be reflected on the approval letter.
- IRB modifications to the approved pilot protocol are not permitted after NIH approval. Every effort should be made to execute the protocol as approved by the IRB, Pilot Review Committee, and NIH.

Clinical Trial:

All studies meeting the NIH definition of a [Clinical Trial](#) must be registered on ClinicalTrials.gov and have an NCT number assigned to the study. Investigators should make sure the consent has the required language for Clinical Trial registration as it appears in the HRPO consent template. Investigators should register their protocol on CT.gov after receiving IRB approval. Registration is an NIH requirement prior to enrollment of the first participant.

## How to Apply

Investigators interested in applying to this RFA **must first submit [SW CACTI Pilot Pre-Proposal Application](#)** through a REDCap survey due **January 30, 2026, by 12 noon**. The Sage Committee will review Pilot Pre-Proposal for project feasibility and responsiveness to Translational Science. Following the review SW CACTI will invite investigators to submit a full proposal for funding.

All applications are due **by 12:00 noon on the due date (03/27/2025)**, which can be found at the top of this RFA. Applications that are late or do not adhere to the above instructions may be administratively denied and not reviewed for funding. Please email Daron Vigil-Scott, [Dvigilscott@salud.unm.edu](mailto:Dvigilscott@salud.unm.edu), with any questions about this RFA or the application process.



QR Code to [SW CACTI Pilot Pre-Proposal Application](#)