



**Smarter Health Care**  
National Research Programme

**Care@home and Health Care Policy and Management**

Targeted call for proposals



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## What are National Research Programmes (NRPs)?

Research carried out by National Research Programmes consists of research projects that contribute to the solution of contemporary problems of national importance. Under the provisions of Article 10, paragraph 2, of the Federal Act on Research and Innovation of 14 December 2012 (version of 1 March 2017) the Federal Council selects the topics and foci to be researched in NRPs and mandates full responsibility for implementing the programmes to the Swiss National Science Foundation.

The Federal Ordinance on the Federal Act on Research and Innovation of 29 November 2013 (version of 1 January 2014, art. 10, par.2 Bst. c. V-FIFG) describes the NRP funding scheme as follows:

<sup>1</sup> The National Research Programmes (NRPs) of the Swiss National Science Foundation (SNSF) are a means of generating and conducting coordinated research projects that pursue a common goal.

<sup>2</sup> Topics of research are generally appropriate for National Research Programmes if:

- a. Swiss research can make a significant contribution to the resolution of the problem;
- b. solutions require research contributions from multiple disciplines;
- c. research on the problem can be expected to produce research results that have practical applications within a five-year period.

<sup>3</sup> In exceptional cases, an NRP may also be used for the targeted creation of additional research potential in Switzerland.

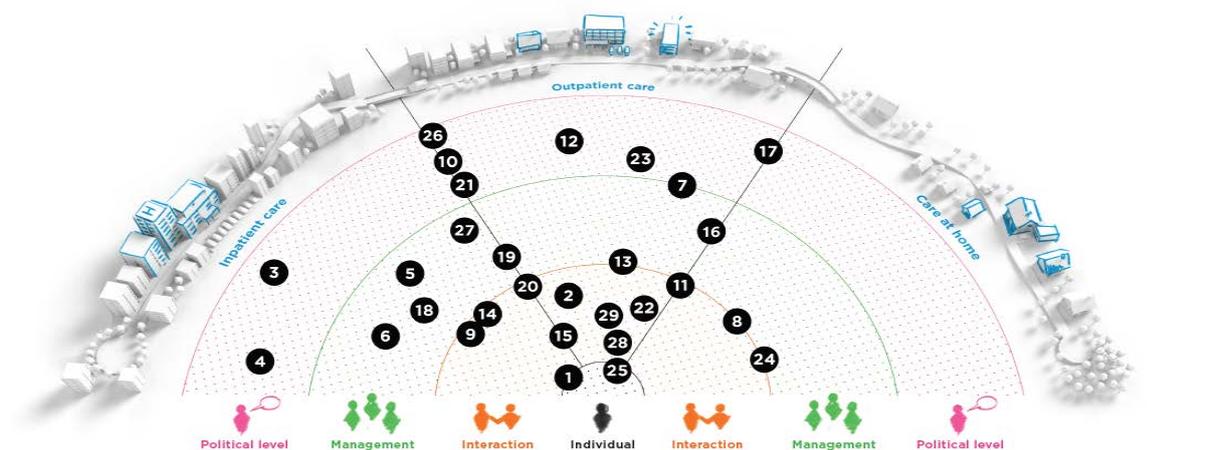
<sup>4</sup> The following criteria are also taken into consideration in setting forth the topics of National Research Programmes:

- a. the programmes can provide the scientific basis for decision-making by the government and administration;
- b. the programmes can be conducted with international collaboration.“

## Targeted Call of the National Research Programme “Smarter Health Care” (NRP 74)

The goals of the NRP "Smarter Health Care" are to provide insight into health care structure and utilization in Switzerland, and into ways to improve health outcomes with a particular focus on prevention and treatment of patients with (multiple) chronic conditions. In addition, and with a more long-term perspective, the NRP aims to raise awareness of the current weaknesses of health care data in Switzerland and to contribute to improved health data. Thereby, health services research can contribute to improvement in diagnostic, preventive and therapeutic services and their utilization. Finally, the NRP aims to create a strong community of health services researchers that conduct world-leading research in this area.

The call for proposals in 2015 invited researchers to submit proposals that fit with one or more of the three modules on “Countering under- and overuse to improve allocation of resources”, “Coordination and collaboration among health care professionals” and “Caring for patients with multiple chronic conditions”. The Steering committee together with external experts selected 29 proposals for funding (Figure). The Research Council of the SNSF approved these projects in December 2016.



**1 Abel:** Learning from migrant women’s experiences and improving healthcare services; **2 Auer:** Promoting participatory medicine in colorectal cancer screening; **3 Aujesky:** What factors affect the performance of elective interventions in Switzerland?; **4 Bayer-Oglesby:** Social inequalities in the provision of in-patient healthcare in Switzerland; **5 Bodenmann:** Using case management to remove burden on emergency departments; **6 Bugnon:** Optimising the medication of elderly persons living in nursing homes; **7 Chmiel:** Improving the data situation in out-patient healthcare; **8 Crivelli:** Cost-effectiveness of home treatment for acute mental illness; **9 Csajka:** Automatic detection of adverse drug events in the geriatric care; **10 Elger:** Promoting the merging of health data in Switzerland; **11 Ey-chmüller:** End of life: more quality and less suffering through better planning and coordination?; **12 Felder:** Less fee-for-services, more flat reimbursement: Does it work in the out-patient sector?; **13 Gerfin:** What effects does the closure of general practices have on patients and the health service?; **14 Huttner:** Reliably determining optimal antibiotic durations; **15 Jenni:** Provision of care for children with developmental disorders in the canton of Zurich; **16 Liebig:** Successful models of palliative care in Switzerland; **17 Lucas:** Diagnosing dementia: cantonal policies and ethical issues; **18 Müller:** Does systematic interprofessional collaboration shorten the length of hospital stays?; **19 Neuner-Jehle:** Optimised medication and communication at discharge; **20 Peng-Keller:** The spiritual dimension of pain therapy; **21 Stucki:** Standardised reporting of functioning of people with chronic diseases; **22 Streit:** Optimising medication with electronic decision-making assistants in patients with multiple chronic illnesses; **23 Rosemann:** Do financial incentives improve the treatment of diabetes?; **24 Rüesch:** Better data on the quality of home care; **25 Santos-Eggimann:** What are long-term care choices in the older population?; **26 Schwenkglenks:** How do guidelines and recommendations influence medical treatment?; **27 Simon:** Development of a nurse-led care model for nursing homes; **28 Tarr:** Vaccine-sceptical patients and doctors in Switzerland; **29 Watzke:** Better identification and treatment of mental disorders in primary care

Figure: Overview of the funded projects

This targeted call aims to fill some gaps that exist in the view of the Steering Committee of NRP 74 even though the 29 funded projects cover a wide range of topics. The gaps include projects on (1) care for patients with chronic conditions at home and in their social context and (2) projects on how the Swiss health care system could be organized and managed in order to provide care for patients with chronic conditions in the future that would optimally balance the needs and preferences of the Swiss population and the available resources. For this reason, the Steering Committee of NRP 74 has approved an amount of **CHF 1.8 million** to support presumably 4-6 research projects out of a targeted call.

## 1. Purpose of the targeted call

The goals of this targeted call is to fill the gaps described above and invites projects for two specific areas that include (1) care for patients with chronic conditions at home and in their social context and, (2) projections into the future about how health care policy and management could optimize the care for patients with chronic conditions and the use of resources.

### **Area 1: Care for patients with multiple chronic conditions at home and in their social context**

A number of parties are involved in the care of patients with multiple chronic conditions. General practitioners and specialist physicians in private practice or outpatient clinics as well as general home-care services (e.g. Spitex, health leagues) provide medical services needed by patients. Many relatives and friends spent considerable amounts of times caring for patients with multiple chronic conditions as informal caregivers. In addition, the social context including the living environment, social network and work environment contribute importantly to the lives and care of patients with multiple chronic conditions. Given the current demographic developments and the increased need for integrated and long-term care there are many open questions how patients with multiple chronic conditions are best care for at home in an affordable way.

Submissions are welcome for this area that aim to:

- Assess the feasibility, acceptability, effectiveness and cost (effectiveness and impact) of novel models of care for patients with multiple chronic conditions at home and in their social context.
- Use integrated, multi-stakeholder approaches that embed care in the context where and how patients live (e.g. caring communities). Stakeholder can include health care professionals, informal caregivers, communities (political, social) and members of the social network but also employers.
- Make projections on how novel models of care for patients with multiple chronic conditions at home and in their social context impact on other care providers and what the implications would be for the social security system.
- Investigate factors that facilitate home care at the level of the patients' home, the living environment and the work environment. These factors may be on different levels (see Figure: The

individual (e.g. empowerment), interaction (e.g. of patients with communities, health care or home care service providers), management (e.g. of communities, health care or home care service providers) or political level.

- Develop guidance or policies for cantons, cities and communities on how to facilitate the adoption of novel models of care for patients with multiple chronic conditions at home and in their social context.

Proposals with high potential for innovation in health care for people with multiple chronic conditions are favored. Proposals may address the individual, interaction, management or political level as well as combinations and intersections thereof (see Figure). Proposals that address patients with multiple chronic conditions (and not a specific disease) are favored. Researchers are encouraged to work in teams of health care professionals, sociologists, psychologists, economists, political scientists and other disciplines. Stakeholder involvement, e.g. patients, leaders of (political and social) communities, health care professionals, (continuing) education of health care professionals (e.g. new job profiles), patients, politicians, health authorities and payers (insurance companies), are explicitly encouraged. A sole focus of projects on informal caregivers and their health is not favored since this area of research is currently supported by a call of the Federal Office of Public Health. Researchers should make use of existing data wherever possible and plan efficiently for studies with additional data collection to complement existing data. There are no restrictions in terms of research methods (quantitative and qualitative or combinations thereof). The choice of methods should follow the research question and the degree and type of evidence that is already available on the particular topic. For any study design and method, it is highly recommended to use available guidelines for designing and reporting studies (e.g. accessible on <https://www.equator-network.org/>) and, to provide reasoning for the choice and mix of methods.

## **Area 2: Health care policy and management to optimize the care for patients with chronic conditions**

In order to organize and adapt a health care system, which is accessible, affordable and effective for patients with multiple chronic conditions, health care policy, health care governance and the management of health care providers need to interact in a constructive way. In the Swiss health care system, policies and regulations are defined predominantly for hospital-based services and for the care of patients with acute conditions while the health care system is less regulated and prepared for caring for patients with multiple chronic conditions outside of acute care hospitals. There is potentially a number of ways to adapt the Swiss health care system (see, e.g. also a recent expert report [in German](#); [in French](#)) in order to meet the needs and preferences of patients with multiple chronic conditions but the short- and long-term consequences of such changes to the current systems on population health and resources are unclear.

Submissions are welcome for this module that aim to:

- To make projections (e.g. using simulation studies) into the future about how specific changes to the Swiss health care system (e.g. policies, non-financial and financial incentives, regulations, allocation of resources) would affect the care, patient outcomes and cost for patients with multiple chronic conditions in the future, and to suggest specific changes that would optimally balance the needs and preferences of the Swiss population (which may have to be elicited) and the available resources.
- Understand how health care policy makers (i.e. members of cantonal and national parliaments, cantonal health directorates, administration, interest groups) and health care management (i.e. management of hospital, outpatient and home-base care) currently interact to have an exchange about the care for patients with multiple chronic conditions.
- To develop and test novel ways for facilitating cooperation between health care policy makers, health care governance and health care management in order to organize and adapt a health care system that is accessible, affordable and effective for patients with multiple chronic conditions.
- To investigate how modern management principles could be introduced in order to provide health care services that meet the needs of patients with multiple chronic conditions and to prepare suggestions for new policies and regulations if needed.

Proposals with high potential for innovation in health care policy and management are favored. Proposals may address the management and political level in particular but does not exclude the interaction and individual level (see Figure). Proposals that address the care for patients with multiple chronic conditions (and not a specific disease) are favored. Researchers are encouraged to work in teams of political scientists, health care managers, communication scientists, health care professionals, sociologists, psychologists, economists, and other disciplines. Stakeholder involvement, e.g. politicians, health authorities, managers of health care providers and payers (insurance companies), patients, health care professionals and other relevant parties, is explicitly encouraged. Researchers should make use of existing data wherever possible and plan efficiently for studies with additional data collection to complement existing data. If barriers for using existing data (e.g. data protection, use of routine data, development and use of identification information) are detected researchers are welcome to consult with the NRP 74 programme manager who will coordinate with federal and cantonal agencies. There are no restrictions in terms of research methods (quantitative and qualitative or combinations thereof). The choice of methods should follow the research question and the degree and type of evidence that is already available on the particular topic. For any study design and method, it is highly recommended to use available guidelines for designing and reporting studies (e.g. accessible on <https://www.equator-network.org/>) and, to provide reasoning for the choice and mix of methods.

## 2. Submission procedure

This targeted call is open to any researchers irrespective of whether they submitted a first or second stage proposal in response to the first call. Researchers interested in applying should submit (1) a letter of intent first and then (2) a research proposal within the timeline as stated in the timetable (see schedule under 2.4). The letters of intent provide the Steering Committee with the information that it needs for selecting international experts for the review panel. The letter of intent will be checked with respect to conformity to the goals of the targeted call of NRP 74. The letters serve the SNSF to know how many applications to expect and does not have any binding character for researchers or the SNSF. If the research described in the letter of intent clearly does not conform to the goals, the authors will be notified.

### 2.1 Letter of intent

It is recommended to use the official form provided specifically for this NRP (on [www.nrp74.ch](http://www.nrp74.ch)). The letter of intent must contain the following information:

- Applicant's name and institution
- Research topic and project goal
- Duration
- Planned collaboration with research groups in Switzerland and abroad
- Estimate of required financial resources

The start of research for these new projects is set between 1 December 2018 and 1 February 2019. The projects must be limited to a duration of no more than **36 months**.

The average budget of a project is expected to range between 300'000 to 400'000 CHF. This range is meant as a reference point. Smaller and larger budgets are possible.

Cross-border research projects are supported if the competence of researchers from abroad is essential for realising the project. As a rule, the share of financing requested for researchers abroad may not exceed 30% of the overall budget, and the person responsible for the project abroad may not be assigned the role of corresponding with the SNSF. For applicants from abroad, the norms and salary rates of the relevant country will be applied *mutatis mutandis*, with the SNSF maximum rates generally serving as the upper limit. Before submitting a proposal for a cross-border research project, please contact the programme manager of NRP 74.

Research projects from the second call must adhere to SNSF guidelines. The call document of NRP 74 as well as the funding regulations and instructions for the submission on the mySNF portal must be considered.

## 2.2 Online submission of proposals on mySNF

Full proposals have to be submitted on the mySNF portal ([www.mySNF.ch](http://www.mySNF.ch)). All forms, rules of procedure and instructions for the submission of proposals can be found on [www.mysnf.ch](http://www.mysnf.ch) under “Information/documents” after selecting the corresponding NRP and creating an application.

The research plan must be composed using the template provided on mySNF. Furthermore, please consider the directives for research plans. In order to access the two documents a new application must be created on mySNF choosing Programmes (national and international) > National Research Programmes (NRP) > NRP 74: Targeted Call. The documents you can find on the left-navigation at the bottom of the page under “Information/documents”. For this, user-registration is needed. User accounts obtained in the past are valid and provide access to all the funding instruments of the SNSF. It is recommended to request new user accounts as early as possible, however, they need to be requested no later than five working days before the submission deadline from the homepage of the mySNF portal.

The Steering Committee of NRP 74 expects full proposals to be submitted in English. The deadline for submission is **28<sup>th</sup> May 2018, 17:00**.

In addition to the data that has to be entered directly in mySNF the following documents need to be uploaded:

- Research plan (as PDF file)

Applicants must use the document template provided on the mySNF portal. The project description must not exceed 20 pages (including tables, references etc.).

- Short CVs and publication lists of all applicants (as PDF files). The CVs must not exceed two pages each. Links to publication lists may be included.
- Supplementary documents (support letters, confirmation of co-operation or co-financing, forms regarding international co-operations, etc.) can be uploaded on mySNF.

## 2.3 Project selection and selection criteria

The secretariat of the Programmes division will check for formal criteria such as completeness of application, adequate formal presentation and submission by the deadline. Applications that do not satisfy these formal criteria will not be processed further.

Based on international peer-review followed by an assessment by the Steering Committee, research proposals will be submitted to the National Research Council for approval or rejection.

Full proposals will be reviewed on the basis of the following criteria:

- **Compliance with the goals of the targeted call:** proposals must reflect the objectives as outlined in the call and comply with its overall framework.
- **Scientific quality:** proposals must fulfil international state-of-the-art criteria with respect to scientific quality as well as methodology.
- **Scientific originality:** proposals must contain an innovative component and be relevant as compared to completed or running research projects in the same field.

- **Inter- and transdisciplinarity:** projects with research questions addressed by different disciplines or that demand approaches that transcend the boundaries between science and practice must secure adequate cooperation between the actors, project management and the methodology.
- **Application and implementation:** the potential for practical application and implementation of results is a key element of National Research Programmes. Projects of high practical relevance are therefore given priority.
- **Personnel and infrastructure:** applicants must have a sound scientific track record in the field of the submitted project. Adequate personnel resources and an adequate infrastructure must be secured for the project.

## 2.4 Schedule of the second call

The following schedule is set out:

Call for full proposals	28 <sup>th</sup> November 2017
Deadline for submission of letters of intent	7 <sup>th</sup> February 2018
Deadline for submission of full proposals	28 <sup>th</sup> May 2018; 17:00
Final decision on full proposals	October 2018
Start of research	1 <sup>st</sup> December 2018 – 1 <sup>st</sup> February 2019

## 2.5 Contacts

For general questions concerning the submission and evaluation procedure, please contact the programme manager: Kathrin Peter, [nrp74@snf.ch](mailto:nrp74@snf.ch) or 031 308 22 22.

For questions concerning salaries and eligible costs, please contact the Head of Finances, Roman Sollberger: [roman.sollberger@snf.ch](mailto:roman.sollberger@snf.ch) or 031 308 22 22.

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E-mail: [mysnf.support@snf.ch](mailto:mysnf.support@snf.ch)

mySNF Homepage: [www.mysnf.ch](http://www.mysnf.ch)

## 3. Actors

### Steering Committee

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Dr Penny Hollander Feldman, Center for Home Care Policy and Research Visiting Nurse Service of NY

Prof Dr Steffen Flessa, Faculty of Law and Economics, Greifswald University

Prof Dr Thomas Gächter, Institute of Law, University of Zurich

Prof Dr David C. Goodman, The Dartmouth Institute for Health Policy & Clinical Practice, Dartmouth Medical School, USA

Prof Dr Katharina Janus, Center for Healthcare Management, Germany, and Columbia University New York, USA

Prof Dr Daniel Strech, CELLS (Centre for Ethics and Law in the Life Science Institute for History, Ethics and Philosophy of Medicine), Hannover Medical School

Prof Dr Michel Wensing, University Hospital Heidelberg, Dept. of General Practice and Health Services Research, Germany

Prof Dr Marcel Zwahlen, Institute of Social and Preventive Medicine, University of Bern

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#### **Programme Manager**

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#### **Head of Knowledge Transfer**

Manuela Oetterli, Lucerne

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