The Reimagining Nursing Initiative
REQUEST FOR PROPOSALS
THE REIMAGINING NURSING INITIATIVE

The American Nurses Foundation’s Reimagining Nursing (RN) Initiative elevates the nursing profession’s capability to match the future demands of health by investing in opportunities for transformative change that lie at the intersection of education, regulation, and practice. To do that, we are looking for grantees to pilot and evaluate bold new ideas and undertake this work in ways that allow others to replicate the pilot’s success, accelerating widespread transformation in nursing. The RN Initiative will ultimately unleash the potential of a diverse, dynamic nursing workforce to propel society into a healthier future.

From 2021–2024, the RN Initiative will grant up to $15 million to as many as 11 innovative pilot programs that equip and enable nurses with leading-edge knowledge, tools, environments, and systems to deliver exemplary care. Each pilot may request $500,000–$1,500,000 over three years. We are looking for pilots that address one or more of the following priorities that capture the key dimensions of the nursing profession: capability, quality and reach.

• **Practice-Ready Nurse Graduates** supports innovations in competency validation and clinical preceptorship that ensure newly-graduated nurses can immediately contribute to and succeed in a continuously transforming health delivery system.

• **Technology-Enabled Nursing Practice** supports the design and implementation of technology-based tactics and tools that meaningfully enhance the practice of nursing.

• **Direct-Reimbursement Nursing Models** expands nursing practice and elevates the value of nursing through direct reimbursement for nursing care delivery, management, and coordination outcomes.

Our ultimate hope is to bring to scale those pilots that succeed, disrupting — for the better — long-standing practices that leave nurses underdeveloped, underutilized, and underappreciated.
THE PILOTS

Practice-Ready Nurse Graduates

The RN Initiative seeks pilots to create a highly adept, diverse workforce where nursing schools, their clinical practice partners, employers, and licensure processes, deliver the best possible nurse into practice. New nurses will have greater satisfaction, productivity, competence, and confidence from the outset of their nursing career. This will increase nurse retention and reduce turnover costs. The RN Initiative believes expanding nurses’ competencies will better equip them to improve patient care and satisfaction and eliminate health inequities.

The RN Initiative is seeking pilots that:

• Assess and validate demonstrated performance-based competencies;

• Maximize the real-world experiences of the student, including opportunities to prepare to practice outside of an acute care setting (e.g., community, home, long-term care, public health facility, etc.);

• Create a bridge between the academic and practice environments;

• Develop faculty skill in delivering competency-based education;

• Incorporate augmented reality, virtual reality, holography, and other technology-enabled learning tools to provide additional immersive clinical experience that will aid competency development; and/or

• Show evidence that the social determinants of health are grounded in the curriculum and are evidenced in the performance of the nurse.
Technology-Enabled Nursing Practice

The RN Initiative seeks pilots that demonstrate improved efficiency and clinical outcomes by having nurses engage directly with companies to design and implement technology-based tactics and tools. Solutions designed not just for nurses, but by nurses, will lead to better tools that meaningfully enhance the practice of nursing. Pilots must engage a diverse group of nurses to ensure solutions work across the profession.

The RN Initiative is seeking pilots where nurses, informaticists, computer scientists, and developers work together to apply design principles that:

• Enhance nurse competencies through AI-based clinical decision-making support;
• Automate task-oriented activities, increasing efficiencies and freeing nurses to focus on solution-based care of their patients;
• Expand access to care by leveraging telehealth and other technologies that make it possible for nurses to meet patients where the patients are;
• Expedite nurses’ competencies from novice to expert through decision support tools;
• Augment care through patient monitoring, symptom management, palliative care, care coordination, and operations;
• Evaluate the impact and value of nursing and improve the quality of patient outcomes in a cost-effective manner; and/or
• Improve interoperability, align technology better with actual nurse workflows to increase efficiencies, or other ideas that transform technology in ways that enhance the practice of nursing.
Pilots should be capable of deploying technology at the individual nurse, clinical practice, community, and/or health care system levels. Concepts must show the ability to scale and achieve widespread adoption. We also seek pilots that advance health equity using technology. Given the three-year window for pilot completion, we expect that pilots will focus on augmenting or expanding existing technology or bringing existing prototypes into practice settings as opposed to designing and deploying a completely new technology or process.

**Direct-Reimbursement Nursing Models**

The RN Initiative is seeking pilots that make the value of nursing more visible. Direct reimbursement to nurses for their work is a significant step toward this goal. These pilots must enable and empower nurses to take more leadership in decision making about patient care and well-being and provide entrepreneurial opportunities for nurse teams and advanced practice registered nurses. This includes the design and implementation of nurse-managed clinics as a comprehensive and holistic reimbursable model of care.

Pilots must focus on tests of change that apply or expand an integrated model of nursing practice in the community setting (e.g., home, neighborhood, workplace, telehealth/virtual, hospice, public health facility, long-term care, etc.) funded by direct reimbursement for nursing care delivery, management, and coordination. Care delivery needs to improve accessibility, reduce inequities, and provide value both in terms of lowering cost and improving or maintaining the quality of patient outcomes.

We also are looking for pilots that break down barriers that prevent direct reimbursement from flowing to nursing. This includes lack of billing and reimbursement codes, alternative payment models for value-based care, and models that measure the patient-level cost and quality of nursing care by the individual nurse. We also seek technology tools that support nursing delivery in a community setting.
CHARACTERISTICS OF THE IDEAS WE WILL FUND

The RN Initiative will fund bold ideas. We developed three criteria of “boldness” to ensure we focus on transformation and not incremental change:

- **Future-oriented**: To be truly bold, the idea must become an anchor of nursing in the future.

- **Disruptive**: To be truly bold, the idea must upset something that is happening today, whether it is a work process, a cultural norm, a billing system, etc.

- **Risky (but not reckless)**: To be truly bold, there must be unknown factors and a chance at failure. If we believe an idea will work with very high levels of certainty, we are not pushing the envelope.

CHARACTERISTICS OF THE PILOTS WE WILL FUND

We are looking for pilots with the following characteristics:

- **Sustainability**: If successful, the pilot must be demonstrably sustainable beyond the pilot phase. By the end of year three, pilots need a framework for future implementation and grantees should have the capacity and/or partnerships to carry the work forward. A foundation for replication and scalability should be established.

- **Replicability/Scalability**: If successful, the pilot must have the potential for wide distribution or expansion by the grantee and/or replication by others. If an idea was already done as a pilot, you can submit the push to scale/replicate it as a bold idea.

- **Timely Results**: The pilot phase of the RN Initiative is for up to three years. Within that time, the pilots not only need to launch, but achieve enough results to determine which are successful and might have the ability to be adopted more broadly throughout nursing.

- **Knowledge Creators**: The design and execution of the pilot project needs to produce direct value for nursing and contribute to knowledge creation for the field. The RN Initiative will provide pilot sites technical assistance to identify and share learning from each site.

- **Equity Focus**: Systemic racism impacts nurses, patients, communities, and health care systems, aggravating disparities in access to and quality of care. Pilots need to demonstrate an understanding of the social determinants of health as well as an understanding of racism’s role in creating today’s education, regulation, and practice environment. Pilots should actively work to embed anti-racism strategies.
CHARACTERISTICS OF THE PORTFOLIO WE WILL FUND

When selecting individual pilots, we aim to build a portfolio of pilot grants that are:

- **Diverse:** Funded pilots will represent different geographic areas, including rural and medically underserved communities. Funded pilots will also represent diversity of approaches to transformational change, as well as a diversity of settings. We expect there will be pilots in acute care settings as well as in community settings; we will award at least one pilot grant for a home health setting.

- **Synergistic:** While we expect individual pilots will focus primarily on one of the three priority areas of change, we encourage change in the other priority areas, creating synergy across the portfolio.

INTENDED OUTCOMES

All RN Initiative funded pilots should contribute in some way to several of the following long-term outcomes that make the health care system more equitable and effective. Outcomes of interest include:

- **Practice Outcomes**
  - Increased readiness for practice
  - Decreased attrition from profession
  - Increased efficiency
  - Increased leadership opportunities for nurses
  - Improved regulatory environment

- **Academic Outcomes**
  - Increased ability to prepare nurses through competency-based education
  - Increased diversity of students

- **Patient Outcomes**
  - Increased quality of care
  - Decreased disparities
  - Increased access to care
  - Decreased cost of care
ADDITIONAL INITIATIVE COMPONENTS

Grantees chosen as pilot sites will be part of a larger effort to learn from and share the results of their bold new ideas. This will include:

**Evaluation**

Each applicant should plan and budget for an evaluation of the pilot that assesses to what extent the pilot activities were implemented as intended, how nurses were impacted, any preliminary impacts to patients and systems, and the pilot’s effectiveness in achieving its goals. The evaluation should be designed so that annual progress can be reported and learning shared through the pilot term. In addition, the Foundation will be designing an evaluation of the RN Initiative as a whole, assessing the Initiative’s impact on nursing and the potential for these pilot tests of change to become norms in nursing. The Foundation will provide technical assistance and consulting support beyond the grant to support this program evaluation.

**Community of Learning**

Pilot sites, Foundation staff, and health leaders will come together virtually and in person throughout the three years of the program in a learning community intended to provide support and foster shared learnings.

**Reimagining Nursing Campaign**

Only market forces have the power and resources to bring these bold ideas to scale to become common practices. To build interest in and momentum for change, we will launch a compelling and ongoing communications campaign that inspires others to test their own ideas and/or replicate the RN Initiative pilots. The campaign will be developed and led by the Foundation, featuring the voices and expertise of the pilot sites and other initiative stakeholders.
SELECTION PROCESS

An independent team of subject matter experts and thought leaders in the nursing profession will assess the proposals and make recommendations to the Foundation. Foundation staff will then meet with each finalist to conduct due diligence and discuss the additional components of the RN Initiative. Based on the external reviewer recommendations and additional information from Foundation staff, the Foundation’s Grant Review Committee will approve the final grants.

Given the limited funding available for the RN Initiative, not all proposals will receive an award and funding. The Foundation reserves the right to select for negotiation and subsequent funding all, some, one, or none of the proposals received in response to this request for proposals.

HOW TO APPLY

Applicants will apply through the RN Initiative Application Portal. You may save and return to your application multiple times until you are ready to submit. Once submitted, the proposal contact will receive an email confirming receipt of your proposal.

Your application will consist of:

- contact information,
- a narrative,
- project budget, and
- confirmation of participation in additional program components.
The following information will be used to evaluate proposals. We have shared recommended character limits for each section to provide guidance on the level of information requested. In addition, we have shared an overview of the selection criteria and weighting to show how we will evaluate the information provided.

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<tr>
<th>Requested from Applicant</th>
<th>Selection Criteria</th>
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<tr>
<td><strong>Pilot Description:</strong> Describe your proposed pilot through a summary of the strategy, timeline, and activities. Be explicit about how your pilot advances one or more of the RN Initiative’s priority areas for change. (6,000 characters)</td>
<td>Is the project plan and design feasible? Is the timeline realistic?</td>
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<td>How well does the proposed pilot address one or more of the RN Initiative priorities?</td>
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<td>If the pilot focuses on a single priority, are there synergies, or connections, with the other priorities?</td>
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<td>(Evaluation Weight: 10%)</td>
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<td><strong>Expected Results:</strong> Describe the expected results of your pilot in measurable terms. How do you plan to demonstrate that you achieved these results? Tell us when and how you will collect data to measure both progress during the pilot and results at the end of the pilot. Share any other evaluation or learning components that are part of your pilot. (3,000 characters)</td>
<td>Are the plans for monitoring progress and assessing results logical and realistic?</td>
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<td>How likely is it the pilot team will achieve expected results within three years? Are the projected results significant enough (i.e., number of nurses impacted, number of sites served, etc.) to demonstrate the possibility of meaningful change in nursing?</td>
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<td>(Evaluation Weight: 15%)</td>
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<td><strong>Boldness:</strong> Explain how your pilot idea relates to what currently exists and why it is future-focused, disruptive, and risky. Share how you developed your pilot idea, including any research or work by yourself or others that inspired this idea. Specify the top three risks you may encounter during the pilot, the steps you will take to mitigate these risks, and how we (as the funder) can help. (4,500 characters)</td>
<td>Does the proposal present a bold, innovative idea to transform nursing? What makes the idea bold? Has the pilot leadership considered and planned for potential risks?</td>
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<td>(Evaluation Weight: 15%)</td>
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<td><strong>Nursing Driven:</strong> Describe how nurses have been engaged in the pilot design and will be engaged in the pilot as leaders, decision makers, advisors, evaluators, and/or participants. Describe your approach to ensuring diverse voices are engaged in your work. (1,500 characters)</td>
<td>Will the pilot meaningfully engage a diverse group of nurses in the design and execution? Is the number of nurses involved large enough to show the impact of change? (Evaluation Weight: 20%)</td>
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<td><strong>Sustainability/Scalability:</strong> Share your plans for the pilot after the RN Initiative’s three-year grant ends. Describe your vision for how your pilot idea, if successful, could be widely distributed or expanded by you and/or replicated by others. Identify potential barriers to sustainability and scaling and how they might be overcome. (3,000 characters)</td>
<td>How likely is it that the pilot, if successful, could transform nursing on a large scale? (Evaluation Weight: 20%)</td>
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<td><strong>Equity:</strong> Explain how your pilot will incorporate the social determinants of health, promote health equity, and/or expand the diversity of the nursing profession. Share any approaches to addressing racial, gender, wealth, or other inequities in the pilot. (3,000 characters)</td>
<td>To what extent will the pilot incorporate the social determinants of health, promote health equity, and/or expand the diversity of the nursing profession? Has the pilot incorporated strong ideas to address inequities? (Evaluation Weight: 20%)</td>
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<td><strong>Institution Qualifications:</strong> Provide a brief description of the organization(s) involved in the pilot and what resources each will contribute towards the pilot’s success. Describe the institutional commitment of the lead organization and any project partners. Address how the pilot will be managed. Share the institution(s) past experiences and successes in undertaking bold and innovative work like the proposed pilot. (6,000 characters)</td>
<td>Does the applicant or partnership have the capacity (e.g., expertise, resources, track record, etc.) to undertake this pilot? Will the approach to pilot management support the success of the pilot? (Evaluation Weight: Not weighted. Reviewers will provide a narrative assessment.)</td>
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<td><strong>Key Staff Qualifications:</strong> List the key staff involved in the pilot and the roles they will play. Include a one paragraph bio describing the skills, experience, and expertise each will contribute to the pilot. Include email addresses for all key staff. (4,500 characters)</td>
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<td><strong>Pilot Budget:</strong> Please attach a three-year budget for the pilot.</td>
<td>Has the applicant budgeted sufficient resources to achieve the pilot’s expected results? (Evaluation Weight: Not weighted. Reviewers will provide a narrative assessment.)</td>
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PILOT BUDGET GUIDANCE

Please provide a three-year budget for the pilot that consists of three parts: projected expenses, projected income (the requested RN Initiative grant plus any other in-kind contributions, donations, and other funding sources secured for the pilot), and a narrative description of expenses to provide more context for the proposed budget. When preparing the budget also include:

• A breakout of Year 1, Year 2, and Year 3 expenses and income with a total budget not to exceed $1,500,000 unless the pilot has already secured additional sources of support.
• Costs for two to three key staff to travel to the Washington, D.C. area for the annual grantee meeting.
• Clearly identified direct and indirect costs. For more guidance on the Foundation’s indirect cost policy [click here](#).

CONFIRMATION OF PARTICIPATION IN ADDITIONAL PROGRAM COMPONENTS

Applicants will need to confirm their willingness to participate in the following additional program components and should budget staff time and travel in the pilot budget for these activities.

• Robust evaluations to understand the results and impact of each pilot.
• A learning community which includes periodic virtual meetings and annual in-person meetings.
• Foundation communications efforts to share key learnings that will support scaling and replication of each pilot idea.
## TECHNICAL ASSISTANCE

We encourage applicants to attend an informational webinar to hear more about how the RN Initiative hopes to achieve transformation in nursing and ask any questions about the application process and requirements. To register to attend, select a session below.

- **August 23 @ 2pm ET**
- **August 31 @ 4pm ET**
- **September 16 @ 1pm ET**
- **September 29, 2021 @ 4pm ET**

We also encourage applicants to reach out to staff with any questions via [RNI@ana.org](mailto:RNI@ana.org).

### SCHEDULE

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<tr>
<th>Date</th>
<th>Event Description</th>
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<tr>
<td><strong>August 17, 2021</strong></td>
<td>Request for Proposals opens</td>
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<tr>
<td><strong>October 25, 2021</strong></td>
<td>Proposals due (11:59pm ET). Due to our aggressive review schedule, we cannot accept late applications.</td>
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<tr>
<td><strong>December 15, 2021</strong></td>
<td>Finalists selected. Applicants not selected as finalists also notified.</td>
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<tr>
<td><strong>December 16, 2021 – January 10, 2022</strong></td>
<td>Meetings with finalists.</td>
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<tr>
<td><strong>January 31, 2022</strong></td>
<td>Pilot sites selected from among the finalists.</td>
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<tr>
<td><strong>February 1, 2022</strong></td>
<td>Selected pilots begin work on or after this date.</td>
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<tr>
<td><strong>January 31, 2025</strong></td>
<td>Selected pilots report results to the Foundation.</td>
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<tr>
<td><strong>May 31, 2025</strong></td>
<td>Pilot and Initiative results shared with the field.</td>
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ELIGIBILITY AND TERMS

ELIGIBILITY CRITERIA

Who is eligible?

- Non-profit organizations.

- For-profit entities are eligible to apply with the understanding that all grant funds must be used for a charitable, educational, or other tax-exempt purpose; grant funds must be segregated from the grantee’s general funds; and, that the pilot will not result in more than incidental benefit or profit to any private persons or the business (other than any intended charitable beneficiaries). This will mean that the requested grant amount cannot exceed the organization’s cost in carrying out the charitable or educational activity and that the pilot either will not result in any profit to the for-profit organization or its shareholders or that any profits will be returned to the American Nurses Foundation or otherwise dedicated exclusively for charitable or educational purposes.

- Government entities or public agencies.

Who is not eligible?

- Individuals.

- Pilot sites outside of the United States or its territories.

- Organizations that discriminate on the basis of race, color, religion, creed, age, sex, national origin or ancestry, marital status, sexual orientation, gender identity, genetic information, status as a disabled or Vietnam-era veteran, union affiliation, or status as a qualified individual with a disability.
GRANT TERMS

Intellectual Property

The Reimagining Nursing (RN) Initiative is dedicated to accelerating permanent, widespread change in nursing. To do that, we are looking for grantees who can not only test bold new ideas but undertake this work in ways that create knowledge products that can be used by others to replicate the pilot’s success and extend the reach of the RN Initiative. Therefore, any intellectual property created with RN Initiative funding must be shared, at no cost, with others.

To advance the goal of the RN Initiative, the American Nurses Foundation will enter into an agreement with the grantees. The grant agreement will contain general terms of a transaction, including terms related to intellectual property. Under the terms of the agreement, a grantee must:

- Represent and warrant that it has obtained all necessary licenses for any third-party content used in the intellectual property created under the grant agreement and that the intellectual property will not infringe on third-party rights;
- Indemnify the Foundation and its parent organization, affiliates, directors and officers, and its employees from any third-party claims arising as a result of the grant;
- Publicize the development of the intellectual property created under the grant agreement;
- Maintain any software and/or digital products created for years beyond the term of the grant; and
- Grant to the Foundation a nonexclusive, royalty-free, worldwide, perpetual, irrevocable license to reproduce, publish, modify, and distribute any products created under the grant agreement for noncommercial purposes.

The Foundation recognizes that different projects will have different intellectual property features. However, the Foundation is committed to applying the terms of its agreements consistently among its grantees. Accordingly, during the grant consideration process, program staff will work with potential grantees to define the intellectual property to be created under the grant and clarify its ownership and licensing terms in advance of making grant decisions.
ABOUT THE AMERICAN NURSES FOUNDATION

The American Nurses Foundation (the Foundation) was founded in 1955 as the research, education, and charitable affiliate of the American Nurses Association. Since then, it has fought tirelessly to advance the nursing profession by raising funds for advances in research, education, and clinical practice to the benefit of the whole health care system.

The Foundation is a thought leader and action catalyst, a convener, and a conduit. We identify the most pressing issues facing nursing, collaborate with leaders both within and beyond nursing on likely innovations, and strive to get the right resources directed toward the best actors to research, test, and augment these programs.

Our vision is to achieve “a healthy world through the power of nursing”, and this is more relevant today than ever as the Foundation supports nurses and the profession through the COVID-19 pandemic.

The RN Initiative is the Foundation’s latest and most ambitious effort to evolve the practice of nursing to transform health and health care.