

Instructions - Assembly/Committee Projects

NEW - APPLICATION

The following instructions have been designed to assist you in completing the Assembly/Committee Project Application.

Below are detailed instructions for each section of the Assembly/Committee Project application. Please be sure to read them carefully and have them available as you work on your application. If you have any questions or encounter any technical problems, please contact Miriam Rodriguez at: mrodriguez@thoracic.org or at 212-315-8639. Applications must be submitted electronically via the ATS website at:

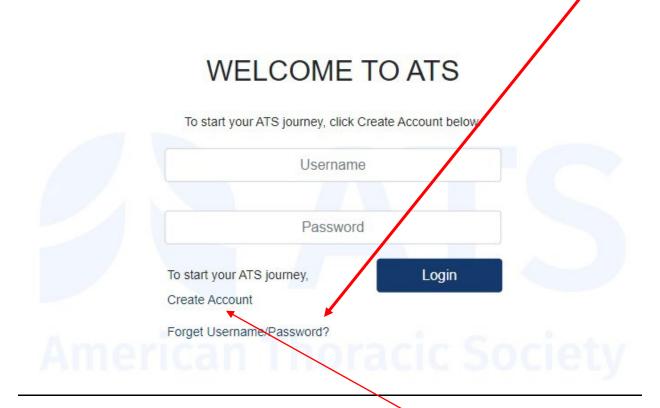
https://www.thoracic.org/form/application/assembly-project.php Late submissions will not be accepted.

The instructions have been designed to correspond with the sections in the application. To review a detailed explanation for section I in the application you will review section I in the instructions.

Some fields in the beginning of the application are self-explanatory and will not need clarification, in those cases you will see the corresponding field with only the name of the field listed.

The Assembly/Committee project application will be web based. You can access the application and instructions on the ATS website under Assemblies at: https://www.thoracic.org/members/assemblies/about/project-application.php#.

You will need your **ATS Username and Password** to begin an application. ATS members can go also recover their forgotten ATS username and by clicking here:



If you are still experiencing problems, please contact our Membership & Subscriptions Dept at membership@thoracic.org.

If you are **not** an ATS member but wish to submit an application, you must create a non-member account to generate a Password. You can do so anytime by clicking here, it will take 1hr to update in the ATS Database and take effect.

To begin an Assembly/Committee Project Application please go to: http://www.thoracic.org/form/application/assembly-project.php you will then need to login using your ATS Username and Password

Once logged into the Project Application webpage you will see the screen below. You will then select an application to begin

Assembly Project Form FY2025 New Project Application FY2025 Renewal Assembly/Committee Project Application

- **NEW Project Application** Are New Projects that require funding and approval for the first time
- RENEWAL Assembly/Committee Project Application Are for those projects that
 were previously approved by the Project Review Committee and the ATS Board of
 Directors.

To submit a New application for a **Joint ATS/ERS Project Application** <u>click here</u> ATS/ERS joint applications must be submitted through the ERS project application portal

Once you have selected the application type you may begin to work on the application. The web-based application will allow you to work on the application as your schedule permits **as long as** you save your work by clicking on the "**Save**" button at the end of the application.

When you have finished working on the application for the day you will need to save your work before exiting the web-based application. When you click on the save button the following menu will appear the next time you login to continue your work.

New Assembly/Committee Project Application [view] [pdf] [edit] [delete]

To continue working on the application click on link in the menu above titled "edit." Once you have completed the application and you are ready to submit, please review the application to ensure that all the information on the form is correct. You may then click the "submit" button. Once you have submitted the application, the web-based system will then generate a confirmation that you will receive via email.

After Submitting the application you will no longer be able to make changes until the revision period opens. Once submitted you will see the following menu when you log in again.

New Assembly/Committee Project Application
[view] [pdf]

When the revision period opens you will see the [edit] field on the menu above.

If further explanation is needed, please contact Miriam Rodriguez, Managing Director of Assembly, Research and Award Programs, via email at: mrodriguez@thoracic.org

Section I General Project Information

- 1. Project Title Insert title of project not the assembly, committee or group
- 2. **Primary Assembly** Select the name of the Assembly through which the proposed project is being submitted. If you are collaborating with other Assemblies, you can indicate other participating assemblies within your project description

- 3. ATS Sections Select Section if any collaborating on project
- 4. ATS Committee submitting project application (if any) Select the name of the ATS Committee from which the project application will be submitted. Please keep in mind that the project will be reviewed by an assembly who is closely related to the field of work that is being proposed. Please choose NA if a committee is not submitting the application. If there is no Assembly Selected your application will be reviewed by the Documents Committee.
- 5. What official ATS document will be developed as part of this project? Please enter document classification, below is a summary of the ATS Official Document types.
 - For more information on document types see the chart below. The chart below also appears in the ATS guidelines for official ATS Documents (GATS) which can be viewed here. GATS is a comprehensive guide to document development and include all the information needed from start to finish.
 - Please also access our Project Application Resource Center here

The Resource Center will assist Project Investigators in navigating the application process. Additionally, for approved projects, the Project Application Resource Center will help project investigators stay on track throughout the life of the project. You will find several valuable resources on this page that will help you submit and complete an Assembly/Committee project application. You will also be able to see sample applications for each of the document types, and instructions to help guide you through the process.

Official Document type charts follow below:

 $Will \, recommendations \, be \, made \, about \, the \, care \, of \, patients?$ (i.e., which diagnostic test to perform, in which patient to perform diagnostic testing, which treatment to administer, or in which population to administer a treatment) Yes Research or policy Statement Will there be a methodologist Will the document make research to apply the GRADE approach? or policy recommendations? No Yes No Yes Will the document describe how to Technical Statement perform a test or procedure? Clinical Practice Guideline Clinical Statement Will the document report on an Workshop Report ATS-sponsored workshop? No Contact the Documents Development and Implementation

Committee (DDIC)

Figure 1 – Deciding upon the type of document

Table 1 - Comparison of the document types

	Clinical Practice Guidelines	Clinical Statements	Policy & Research Statements	Technical Statements	Workshop Reports
Purpose	Provide evidence- based recommendations for clinical practice	Provide evidence- based recommendations for clinical practice	State the ATS position on matters of research and/or public health policy	Describe how a test or procedure should be performed.	Summarize ATS- sponsored workshops and conferences
Development team includes ≥1 methodologist (expertise in Systematic Reviews and GRADE)	Mandatory	Optional	Optional	Optional	Optional
Systematic Reviews (full or pragmatic)	Mandatory	Mandatory	Optional	Optional	Optional
Use of GRADE to assess quality of evidence and rate strength of treatment recommendations	Mandatory	Optional	Optional	Optional	Optional
Describes implementation and implications for quality improvement	Mandatory	Mandatory	Optional	Optional	Optional
Development of derivatives, e.g. flow sheets, checklists, order sets, slide presentations.	Mandatory	Mandatory	Optional	Optional	Optional
Length of document	4,500 words (print) 10,000 words (online)	4,500 words (print) 10,000 words (online)	3,500 words (print) 10,000 words (online)	3,500 words (print) 10,000 words (online)	4,500 words (online)
Expected duration until submission	2 years	2 years	1 year	1 year	1 year
Journal	AJRCCM with or without separate publication of the systematic reviews in the Ann ATS.	AJRCCM	AJRCCM	AJRCCM	Ann ATS

Section II Project Description

Project Description – Provide a detailed description of the proposed project the detail should include the following components:

- **A. Project Description:** Describe the projects goals and objectives. If this is a project that aims at developing an official ATS document, please include the following in your description:
 - The relevance of the health problem or intervention (e.g. clinical or public health impact, evolving nature, adequacy of reliable data)
 - What specific PICO questions are to be addressed? (for Clinical Practice Guidelines and Clinical Statements only (Maximum of 6 **PICO questions are permitted)** Applicants should list all questions relevant to daily clinical practice that are to be covered by the guideline. Questions should be as specific as possible about the patients/populations to be included or excluded, types of diagnostic or therapeutic interventions to be considered or left out. Questions should be structured in PICO format, specifying the target patient population (P), the intervention or exposure (I), comparators (C), and outcomes of interest (O). While it is expected that the initial set of questions will undergo revision and refinement, applicants are encouraged to be as specific as possible about each one of the PICO elements. (Obtain Documents Development and Implementation Committee (DDIC) approval IF your document is NOT a Clinical Practice Guideline and you plan to include 1 or more RECOMMENDATIONS FOR PATIENT CARE (diagnosis and/or treatment).
 - Rational for ATS Involvement Describe the impact of the problem on ATS members.
 - Who will perform the systematic reviews? (for Clinical Practice Guidelines Only) We encourage project teams to identify one or more members of the team have first-hand experience performing (and publishing) systematic reviews. Applicants are encouraged to recruit qualified individuals with adequate time to help perform systematic reviews. These may include junior members.
- **B.** Other ATS/Non-ATS activities in this area are you aware of any other projects that pertain to your proposal submission topic. If yes, what distinguishes your document from similar ones developed by other societies
- C. How does this project relate to health equality?
 - Consider women, racial/ethnic minorities, LGBTQ, lower socioeconomic status, etc.
 - If a group is disproportionately affected by the project topic (e.g., higher prevalence, less likely to receive treatment, higher morbidity,

mortality, adverse events, etc.) then the topic **IS** related to health equality.

How will health equality be addressed in this project? Examples:

- Include a talk on health equality
- Ask speakers to address how their topic affects health equality or is affected by health inequality
- Address if the research sufficiently includes under-represented groups and how this might affect the project's conclusions or recommendations
- Address if recommendations are feasible for low resource settings.
- **D.** Acknowledgement of viewing A set of educational vignettes on document development here. All document developers will need to review and complete these vignettes prior to submission of a new or renewal project proposal.
 - Module A for all document developers
 - Module B for document developers of a Clinical Practice Guideline
- **E.** For CME Educational Projects/Products only Will this project include an Educational Component that will allow ATS to grant Continuing Medical Education Credits (CME) Your application must include the following:
 - EDUCATIONAL DESIGN Describe your activity
 - **LEARNING OBJECTIVES -** Please indicate the Learning Objectives for the Overall Activity.
 - NEEDS ASSESSMENT ACCME prefers a variety of sources for developing the formal Needs Assessment for a program. Below are some examples:
 - Previous Participant Evaluations
 - o Peer Review
 - Survey of Target Audience
 - Self-Assessment Tests
 - o Planning Committee or Board Recommendation
 - o Advice from Authorities in the Field
 - New Medical Findings/Techniques
 - Review of Current Literature
 - TARGET AUDIENCE Please list anticipated audience by specialty. Below are some examples

Physicians

- Pulmonology
- Critical Care
- Pediatric Pulmonology
- Allergy/Immunology
- Internal Medicine
- o Family Practice

Other Healthcare Providers

- Physician Assistants
- Nurse Practitioners
- Registered Nurses
- Sleep Technologists
- Respiratory Therapists
- Pharmacists
- **DISTRIBUTION MECHANISIM** Please describe how you will disseminate your product to the target audience.
- EVALUATION METHODS Please indicate how your activity will be evaluated. At a minimum, it must review each presentation on achievement of learning objectives. Post-Event evaluation of impact on practice (six months to one year after CME event) is increasingly recommended where appropriate. Below are some examples of evaluation methods.
 - o Basic Program Evaluation
 - Pre- and Post-Test for Attendees
 - Simulation
 - Survey of Patients
 - Case Vignettes
 - Regional or National Data from agencies, foundations or universities on disease prevalence, guideline adherence or practice variation
- **DISSEMINATION** Common categories of Continuing Medical Education (CME) activities include:
 - o Live events national or regional courses or conferences; these can be sponsored by the ATS or jointly sponsored (subject to ATS approval) by the ATS along with another national organization (such as another specialty society and/or a public interest organization) or regional organization (such as an ATS chapter)
 - o Enduring materials printed, recorded or computer assisted instructional materials which may be used over time at various locations and which in themselves constitute a planned CME activity.

Please note that all ATS continuing medical education activities, including those for which CME credit is desired must conform to standards of the Accreditation Council for Continuing Medical Education (ACCME) and the American Medical Association, and be designated for CME by the ATS Education Programs Unit.

For additional information about this process, see the ATS website <u>here</u> to obtain the Application for ATS Initiated Events or if you have any questions

related to the CME process, please consult Suzette Machado, Associate Director, Accreditation of ATS Learning Programs at <a href="mailto:smaller:smal

Section III Methodology

A. Please describe the approach for creating the document. This section should demonstrate that the scope of work can be completed on time. There should be a clear plan for how tasks, such as paper writing, will be completed (e.g., how will writing tasks be divided? what are the opportunities for the committee to provide feedback?). Please include why you feel the selected document type is the most appropriate.

B. Upload Detailed Agenda

- C. Proposed Participants Involvement of proposed members of the ad-hoc committee will be pending completion of Conflict-of-Interest forms and, if necessary, resolution of all Conflicts of Interest. Proposed members will need to submit disclosures only when the project is approved. (Projects may not commence until January, pending final approval by the ATS Board of Directors in December) Please include:
 - Names of participants for the project committee
 - Institution Affiliation
 - Role on Project Committee
 - Area of Expertise below are a few examples:
 - Project Chair Proven reputation as a clinician, scientist or as a methodologist in the topic area, ability to organize and work well with a group, track record of delivering quality products in a timely fashion.
 - Members Clinical, methodological &/or scientific expertise in the topic area (specific or general), diversity in geographic location, gender, as well as writing skills and ability to work as a member of a team)
 - e-mail Address Project member e-mail address
- **D.** Identifying Diversity on Committee The ATS encourages diversity and inclusion on all its committees and projects and has identified several groups that have been historically under-represented on ATS committees. It may not be possible or needed to include all these groups on this project and there is no expected quota for diversity and inclusion.

Section IV: Timetable

- A. Tentative timetable for project completion List each function separately. Functions may include:
 - Zoom Calls
 - Meetings Please note that all full day, "face to face" committee meetings or workshops **MUST** be held in conjunction with the ATS International Conference. Options for full day meetings are Friday or Saturday immediately prior to the Conference.
 - Draft of Document
 - Preparation of products
 - Reviews, etc.

Section V: Conflict of Interest Disclosure

1. Agree to following COI Rules

Disclosure and management of potential conflicts of interest (COI) Conflicts of interest(COI) are direct personal financial or intellectual relationships with a company that has a business interest in the subject matter of the project. Disclosure and management of COI is an integral part of ATS project development because COI can lead to biased generation or assessment of evidence and misinform healthcare decision makers. Medical professional societies are obliged to rigorously manage potential COI, particularly in the development of official documents that affect health care.

- 2. If your project is to develop a Clinical Practice Guideline, in the text box summarize here any actions taken by you (or co-chair if one) to manage conflict of interest issues within your project within the past year, if any (for example: asking panelists during meetings/calls for oral disclosure of commercial relationships relevant to subject matter; adjusting the role of panelists, such as by recusal from involvement in grading and decision-making on specific clinical recommendations)
- 3. Have COI questions documents editor can help.

Section VI Chair Acknowledgement

Submission of application constitutes Electronic Signature. Electronic Signatures are considered binding.

Section X Revising Application after Reviewer Feedback

(Do not complete until Planning Committee reviews are received.)

• Indicate whether you have revised your application based on reviewer feedback.

- Please outline how reviews from the Planning Committee were addressed and how your application was revised accordingly.
- Indicate if we can share your application with other ATS members Many first-time submitters ask to see sample applications, which have proven to be very helpful in developing their own. The Project Review Committee (PRC) reviews all applications and may select several as exemplary models for their completeness and quality.

Collaboration: There will be opportunities for other organizations to co-sponsor the document. The ATS prefers that the project not be discussed with potential co-sponsoring organizations until the project has been approved because premature discussions may jeopardize a final agreement. All negotiations for collaboration will be handled by ATS staff following project approval. You can view the ATS Co-Sponsorship Policy here