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The Breathe Forward Award

Advancing Innovation in NSCLC Diagnosis

Application Guidelines

Funding Opportunity Details

Program Name:	The Breathe Forward Award
Applications Open:	July 6, 2026
Application Deadline:	October 16, 2026 at 11:59 p.m. PT
Anticipated Notice of Decision:	November 2026
Earliest Funding Start Date:	January 2027
Project Duration:	12 months
Total Funding Available:	\$200,000

The Breathe Forward Award is made possible through the generous support of Boehringer Ingelheim Canada.

Boehringer Ingelheim Canada has no role in proposal review, adjudication, selection, or funding decisions.

1. Overview

The Breathe Forward Award is a \$200,000 national innovation challenge led by Lung Cancer Canada to support practical, scalable solutions that improve how non-small cell lung cancer (NSCLC) is diagnosed in Canada.

Too many people with lung cancer are still diagnosed too late. Diagnosis is not a single step. Patients may move through suspicion, referral, imaging, biopsy, pathology, biomarker testing, and treatment readiness. Delays can occur at any point and may accumulate across the pathway.

The Award was informed by Lung Cancer Canada's NSCLC Diagnostics Innovation Lab, a multidisciplinary initiative that brought together clinical insight, lived experience, and health system leadership to identify where innovation can make the greatest impact.

Through the inaugural Award, Lung Cancer Canada will fund a high-impact project focused on improving diagnostic timelines, coordination, visibility, equity, and system performance in NSCLC diagnosis.

2. Purpose and Objectives

The Breathe Forward Award is designed to support practical, scalable solutions that address the highest-priority challenges identified through Lung Cancer Canada's NSCLC Diagnostics Innovation Lab.

The Award will:

- Focus funding on clearly defined system-level challenges
- Support initiatives capable of improving diagnostic timelines and patient experience
- Encourage collaboration across clinical, research, health system, and lived experience communities
- Generate evidence and learnings that can inform broader system improvement

The Award aims to support projects that can:

- Improve diagnostic timelines
- Strengthen coordination across the diagnostic pathway
- Increase visibility into diagnostic system performance
- Reduce fragmentation, inefficiencies, and unnecessary delays
- Advance equity in access to timely, high-quality diagnosis
- Generate learnings that can inform broader system improvement, advocacy, and policy change

Projects should be practical, implementation-oriented, and relevant to people affected by lung cancer in Canada.

3. Priority Challenge Areas

Applicants may submit projects aligned with one or both of the following challenge areas.

Challenge Area 1: System-Level Infrastructure & Equity

How might we improve system-wide visibility and understanding of NSCLC diagnostic timelines so that patients receive timely diagnosis regardless of provider or region?

This challenge area focuses on improving visibility into diagnostic timelines, system performance, regional variation, inequities, and accountability across the diagnostic pathway.

Potential project areas may include:

- Mapping diagnostic timelines across regions, institutions, or systems
- Identifying bottlenecks, delays, and points where patients are lost
- Measuring variation in diagnostic timelines or access
- Developing benchmarks, dashboards, or measurement tools
- Exploring equity gaps related to geography, rurality, socioeconomic factors, access to primary care, or other structural barriers
- Linking diagnostic performance to patient outcomes or treatment readiness

Challenge Area 2: Diagnostic Pathways & Process Optimization

How might we optimize NSCLC diagnostic pathways, processes, or coordination to reduce delays and ensure consistent, high-quality diagnosis across settings?

This challenge area focuses on improving how patients move through the diagnostic pathway, including the coordination, sequencing, and delivery of diagnostic steps.

Potential project areas may include:

- Streamlining referral-to-diagnosis workflows
- Reducing unnecessary handoffs or repeated steps
- Improving coordination across clinical, laboratory, and health system partners
- Optimizing imaging, biopsy, pathology, or biomarker testing workflows
- Improving sequencing of tests or procedures
- Strengthening diagnostic navigation or pathway ownership
- Improving communication of results and next steps
- Supporting implementation of standardized or locally adapted diagnostic pathways

4. Funding Available

Lung Cancer Canada intends to fund one high-impact project with a \$200,000 award.

To maintain flexibility and maximize impact, Lung Cancer Canada reserves the right to divide the \$200,000 funding pool across more than one project should the adjudication process identify multiple exceptional proposals.

Applicants are asked to provide:

- A full implementation budget based on \$200,000
- A scaled implementation budget based on \$100,000
- Expected outcomes and deliverables under each funding scenario

Projects will be supported over a 12-month implementation period.

5. Eligible Applicants

Applications are welcome from:

- Researchers
- Clinicians
- Health system leaders
- Quality improvement and implementation teams
- Health system innovators
- Multidisciplinary collaborations
- Partnerships involving lived experience

Applicants may apply as individuals, teams, or organizations. The lead applicant must be based in Canada.

Applicants do not need to have a host institution confirmed at the time of application. However, before funds are released, successful applicants must confirm an eligible Canadian host institution, organization, or fiscal sponsor capable of receiving and administering funds in accordance with Lung Cancer Canada's funding requirements.

Eligible host institutions, organizations, or fiscal sponsors may include:

- Universities
- Hospitals
- Research institutes
- Health authorities
- Public health or health system organizations
- Registered charities or non-profit organizations
- Other Canadian organizations approved by Lung Cancer Canada

Multidisciplinary and cross-sector teams are encouraged.

6. Eligible Project Types and Use of Funds

Good-fit projects may include:

- Pathway redesign or process optimization initiatives
- Diagnostic coordination models
- Tools that improve visibility into diagnostic timelines
- Approaches to reduce imaging, biopsy, pathology, or biomarker testing delays
- Equity-focused diagnostic improvement initiatives
- Quality improvement or implementation models that can be scaled
- Technology-enabled approaches that reduce fragmentation or improve coordination
- Models that improve communication between clinical teams, laboratories, and patients

Funding may be used to pilot, implement, adapt, or evaluate practical solutions that address one or both of the Award's priority challenge areas.

Projects may include early implementation or pilot initiatives, provided they are clearly defined, feasible within 12 months, and designed to generate learnings that can inform broader adoption, scale, or system improvement.

Award funds may be used to support activities directly related to the proposed project, including:

- Project coordination
- Personnel directly supporting the project
- Data collection and analysis
- Implementation activities
- Evaluation
- Knowledge translation
- Patient or lived experience engagement
- Patient or caregiver partner honoraria, accessibility supports, travel, or reimbursement for participation, where appropriate
- Tools, materials, or technology directly required to test or implement the proposed solution

7. Ineligible Uses of Funds

The Breathe Forward Award is not intended to support:

- Commercial promotion or product marketing
- Projects designed primarily to promote a specific drug, test, company, technology, or commercial product
- Commercial product development
- Routine clinical care costs
- Standard-of-care services or equipment normally funded through existing systems
- Indirect institutional overhead or infrastructure charges
- Conference travel or publication fees
- General organizational operating costs not directly tied to the proposed project
- Awareness campaigns alone, unless directly tied to implementation and evaluation of a diagnostic improvement project
- Concept development alone without a clear pathway to testing, implementation, or evaluation within the funding period
- Projects without clear relevance to NSCLC diagnosis in Canada

For-profit companies may participate as collaborators where appropriate, but Award funds must be administered through an eligible Canadian host institution, organization, or fiscal sponsor approved by Lung Cancer Canada.

8. Application Requirements

Applicants must submit a complete application package by October 16, 2026 at 11:59 p.m. ET.

Applications should include the following components:

a. Project Title

Provide a concise title for the proposed project.

b. Lead Applicant and Team Information

Include:

- Lead applicant name, title, organization or affiliation if applicable, and contact information
- Co-applicants and collaborators
- Roles and contributions of each team member
- Proposed host institution, organization, or fiscal sponsor, if known

Applicants who do not have a host institution confirmed at the time of application should briefly describe how funds would be administered if selected.

c. Project Summary

Maximum 500 words.

Provide a brief summary of the proposed project, including:

- The problem being addressed
- Alignment with one or both challenge areas
- The proposed approach
- Anticipated outcomes and impact

This summary may be used by Lung Cancer Canada for public communications if the project is funded.

d. Project Proposal

Maximum 5 pages, single-spaced, font size 11 or larger.

The project proposal should include:

- Background and rationale
- Project objectives
- Description of the proposed approach, intervention, model, tool, or process
- Target setting, population, region, or system context
- Implementation plan
- Expected outcomes and deliverables
- Scalability and sustainability considerations
- Knowledge translation plan

A maximum of four supporting figures or tables may be included in an appendix outside the five-page limit.

e. Implementation Readiness Statement

Maximum 1 page.

Applicants must describe why the project is ready to move into practical testing, implementation, adaptation, or evaluation within the funding period.

This statement should address:

- What is already in place
- What partnerships, approvals, data access, or operational supports are still needed
- Whether the project can realistically begin by January 2027
- Any key dependencies that may affect the project timeline

f. Measurement and Evaluation Plan

Maximum 2 pages.

Applicants must describe how progress and impact will be measured.

The plan should include:

- Key success measures
- Baseline data, if available
- Data sources and collection methods
- How progress will be tracked
- How the project will assess impact on diagnostic timelines, coordination, visibility, equity, patient experience, or system performance
- What evidence or learnings will be generated by the end of the funding period

g. Risk and Mitigation Plan

Maximum 1 page.

Applicants must identify key risks and describe how they will be managed.

Risks may include:

- Delays in ethics, privacy, or institutional approvals
- Challenges accessing data
- Recruitment or engagement barriers
- Implementation barriers in clinical or health system settings
- Technology or workflow adoption issues
- Dependence on external partners or systems
- Budget or timeline pressures

Applicants may provide this section in table format.

h. Equity, Lived Experience, and Stakeholder Engagement Statement

Maximum 1 page.

Applicants must describe how the project considers equity, lived experience, and the perspectives of those needed to support successful implementation.

This should include:

- How people affected by lung cancer will inform the project, where appropriate
- How the project considers populations or settings experiencing barriers to timely diagnosis
- Which clinical, laboratory, health system, community, patient, or caregiver stakeholders need to be involved
- How partners will be engaged in the design, implementation, evaluation, or knowledge translation of the project

Where applicants believe lived experience involvement is not applicable, they must provide a brief rationale.

Applicants are encouraged to include appropriate honoraria, accessibility supports, travel, or reimbursement for patient and caregiver partners in their project budget.

i. Sustainability and Scalability Plan

Maximum 1 page.

Applicants must describe how the project could continue, be adopted, adapted, or scaled beyond the 12-month funding period.

The plan should address:

- What could happen after the funding period ends
- Whether the model, tool, process, or approach could be adopted in other settings
- What conditions would be required for broader implementation
- How the project could inform policy, pathway redesign, quality improvement, advocacy, or future funding

j. Budget and Justification

Applicants must include:

- A detailed \$200,000 project budget
- A scaled \$100,000 project budget
- Budget justification for both funding scenarios
- Other confirmed, pending, or planned sources of funding
- Any in-kind contributions
- A milestone-based budget showing major activities, estimated costs, timing, and deliverables

Indirect costs and institutional overhead are not eligible expenses.

k. Workplan and Timeline

Provide a 12-month project timeline, including:

- Key activities
- Milestones
- Deliverables
- Reporting points
- Anticipated approval or start-up requirements
- Timing for evaluation and knowledge translation activities

l. Letters of Support

Applicants affiliated with a host institution or organization should include a letter of support confirming that the proposed project is feasible and that the institution or organization is willing and able to administer funds if awarded.

Applicants who do not have a host institution confirmed at the time of application may still apply. Confirmation of an eligible host institution, organization, or fiscal sponsor will be required before funds are released.

Additional letters of collaboration may be included where relevant.

m. Applicant CVs or Biographical Sketches

Include CVs or short biographical sketches for the lead applicant and key co-applicants. CVs may be submitted as a single file that includes all relevant applicants.

This CV file is to be submitted separate to the rest of the application components.

n. Ethics, Privacy, Institutional Approvals, and Data Access

Applicants must identify whether the project requires research ethics approval, privacy review, data-sharing agreements, institutional approval, operational approval, or other regulatory approvals.

Required approvals do not need to be completed at the time of application. However, funded projects must secure all required approvals before funds are released, where applicable.

o. Conflict of Interest and Independence Disclosure

Applicants must disclose any actual, potential, or perceived conflicts of interest related to the proposed project.

This includes:

- Commercial relationships relevant to the proposed project
- Involvement with companies whose products, tests, platforms, tools, or services may be used in the project
- Financial or advisory relationships that could be perceived to influence the project
- Any other relationships that may create a real or perceived conflict of interest

The Award may not be used for commercial promotion, product marketing, or activities designed primarily to advance a specific company, product, test, platform, or service.

9. Review Process and Evaluation

Applications will be reviewed through an independent adjudication process led by Lung Cancer Canada.

The adjudication panel may include representation from:

- Medical oncology
- Pulmonary medicine
- Pathology and biomarker testing
- Health systems and implementation science
- Quality improvement
- Lived experience

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Applications will be evaluated based on:

Alignment with Challenge Area

- Clear relevance to one or both priority challenge areas
- Strong connection to improving NSCLC diagnosis in Canada

Potential Impact

- Potential to improve diagnostic timelines, coordination, visibility, equity, or patient experience
- Potential to generate meaningful system learnings

Feasibility and Implementation Readiness

- Clear implementation plan
- Appropriate team expertise
- Realistic timeline and budget
- Evidence that the project can begin within the proposed funding period
- Clear understanding of dependencies, approvals, and operational requirements

Measurement and Evaluation

- Clear success measures
- Appropriate data sources and evaluation methods
- Ability to generate useful evidence or learnings within 12 months
- Relevance of proposed measures to diagnostic timelines, coordination, equity, visibility, patient experience, or system performance

Risk and Mitigation

- Clear identification of key risks
- Practical mitigation strategies
- Realistic understanding of implementation barriers

Scalability, Sustainability, and Knowledge Translation

- Potential to be adapted or scaled across settings
- Consideration of sustainability beyond the funding period
- Clear plan to share learnings, outcomes, and recommendations
- Potential to inform future research, policy, advocacy, pathway redesign, or system improvement

Equity, Lived Experience, and Patient-Centredness

- Consideration of populations or settings experiencing barriers to timely diagnosis
- Meaningful incorporation of lived experience perspectives, where appropriate
- Engagement of relevant stakeholders needed for implementation
- Consideration of patient experience, access, coordination, or navigation

Lung Cancer Canada reserves the right not to fund any application if submissions do not meet the objectives, quality standards, or strategic intent of the Award.

10. Conditions of Funding

Successful applicants must comply with Lung Cancer Canada funding policies and applicable institutional, ethical, privacy, and regulatory requirements.

The Award must be accepted within 15 working days of the date of offer or the Award may be cancelled and offered to the next fundable applicant.

Successful applicants must:

- Confirm an eligible Canadian host institution, organization, or fiscal sponsor before funds are released
- Begin the project within 2 months of the earliest possible start date
- Complete the project within 12 months of the project start date, unless an extension is approved by Lung Cancer Canada
- Participate in project onboarding with Lung Cancer Canada
- Confirm project scope, milestones, success measures, and knowledge-sharing expectations

- Submit a mid-project progress update
- Participate in a mid-project learning exchange with Lung Cancer Canada
- Submit a final report within 2 months of the project completion date
- Provide a public, non-technical summary of outcomes for Lung Cancer Canada communications
- Participate in knowledge-sharing activities related to the project, where appropriate
- Acknowledge Lung Cancer Canada and Boehringer Ingelheim Canada support in communications and publications related to the funded project, using acknowledgement language provided by Lung Cancer Canada

Lung Cancer Canada will disseminate project results publicly only with appropriate review and consent from the funded team.

11. Reporting and Knowledge Sharing

The Breathe Forward Award is intended not only to support innovative projects, but also to generate practical insights that can inform future research, advocacy, and system improvement efforts.

Funded teams will participate in a structured learning and reporting process, including:

Project Onboarding

Funded teams will meet with Lung Cancer Canada to confirm:

- Project scope
- Reporting expectations
- Knowledge-sharing opportunities

Mid-Project Learning Exchange

At approximately six months, funded teams will participate in a progress review and learning exchange with Lung Cancer Canada to:

- Share early results, challenges, and lessons learned
- Review progress against milestones
- Identify opportunities to accelerate impact or address barriers

Final Report and Knowledge Translation

At the end of the funding period, funded teams will submit a final report and participate in knowledge translation activities. This may include:

- Summary of outcomes and key findings
- Lessons learned and recommendations
- Scalability and sustainability considerations
- Public, non-technical summary for Lung Cancer Canada communications
- Presentation of findings to Lung Cancer Canada and key stakeholders

12. Official Languages

Applicants may submit proposals in the official language of their choice. Lung Cancer Canada will ensure appropriate review of applications submitted in either official language.

Applicants are encouraged to consider the inclusion of official language minority communities, where appropriate.

13. Privacy and Confidentiality

Applicant information will be used to review applications, recruit reviewers, administer and monitor awards, compile statistics, and support health research and system improvement.

Applicant information may be shared with reviewers and advisors as required for administration of the Award, subject to applicable confidentiality and conflict of interest requirements.

All personal information collected, used, or disclosed through this funding opportunity will be handled in accordance with applicable privacy legislation, including the Personal Information Protection and Electronic Documents Act, where applicable.

14. Submission Instructions

Applicants must submit a complete application package by: **October 16, 2026 at 11:59 p.m. PST**

Applications should be submitted through the form at:

<https://lungcancercanada.ca/about-us/research-program/the-breathe-forward-award>

Late or incomplete applications will not be accepted.

15. Questions

For questions about the application process or general inquiries about the Breathe Forward Award, please contact: Winky Yau - Manager, Medical Affairs

winky@lungcancercanada.ca

16. Key Dates

Applications Open: July 6, 2026

Application Deadline: October 16, 2026 at 11:59 p.m. PT

Independent Review and Adjudication: October–November 2026

Award Announcement: November 2026

Project Implementation: January–December 2027

Mid-Project Learning Exchange: June–July 2027

Final Report Due: January 2028

Knowledge Sharing and Dissemination: Q1 2028