

CLINICAL SCHOLARS

Frequently Asked Questions

QUESTIONS ANSWERED:

Q: Will the clinical scholars need an a priori academic affiliation?

A: No. You could be a clinician in a practice in a setting not associated with a university.

Q: Can someone apply who will be five years out at the start of the Launch Session but is just shy of five years out from terminal degree at the time of the application due date?

A: We have this requirement of five years out primarily to ensure that people have had enough time in the field and have been in their clinical practice long enough to bring that time to bear upon the “wicked problem.” We will consider individuals who are a couple months short of five years on a case-by-case basis. We’re primarily interested in individuals who can bring their clinical training to bear on the complex, thorny issues that are stymieing our country in being the healthiest it can be for everybody in every place in the country. That’s really our priority.

Q: Can there be one person on the team who is not five years out from the terminal degree or non-clinicians?

A: When you start thinking in the broadest sense about interdisciplinary or inter-professional teams and you start thinking about the most complex problems, you realize the teams might already be comprised of non-clinicians or of people who are not as far along in their clinical training. We recognize that those teams exist, and we embrace those teams. The scholars who would be eligible for funding from the program, however, are those who would be five years out from their terminal degree. We’re open to inclusive teams, but the funding would follow those who are eligible and could then be distributed across the teams in flexible ways to ensure their success.

Q: When does the designation for clinical training begin? The designation for what counts towards clinical training depends on the discipline. For physicians, the designation begins post residency. For other disciplines individuals may obtain a clinical degree and pursue additional training. For individuals with nursing and social work training, the designation begins upon licensure.

Q: What does it mean that a MSW team member be doctorally prepared?

A: For some clinical degrees, like the MSW degree, people might also have a doctoral degree that may or may not be in social work. They have a clinical practice in social work but have doctoral training in another field.

Q: What can the funds be used toward?

A: We are trying to have maximum flexibility in the use of the funds that is appropriate and that we can do. With the heterogeneity in the type of clinical backgrounds that we have, the ways teams are comprised, and the types of projects people might propose, we recognize that some people might need buy-out time from their clinical practices to participate in the project. Others might need funds for equipment or for a program. Other projects might need funding for the non-clinicians, if there are any

on the team, to be able to participate. We're open to looking at how projects propose to use the funds. The amount of funds per project will go with the clinicians who are part of those teams but can be distributed in a variety of ways. We recognize that this is fairly unorthodox and might be different from prescribed uses of funding in other programs. We want to ensure that we are open to the many ways diverse clinicians and complex projects might need to use the funds across the nation. We also recognize that sometimes having an open field is more challenging to write a project in. We have developed three different case studies (example applications). When people log in to the application review system, they'll have examples to see different ways to frame projects. We hope that will give people guideposts about how to use the resources.

Q: Does this program provide research training?

A: There will be some technical skills training. It's different from the prior Clinical Scholars program in that it is not a research training program. Instead, it's a leadership training program. We expect leaders to have some facility with qualitative and quantitative skills and with data collection, interpretation, and dissemination. However, we will provide those skills as needed for the teams that are selected for the program. But this will not be in-depth, formal training in health services research or other types of research skills. We're primarily offering leadership training.

Q: Can non-clinicians participate in the training?

A: Leadership training is provided for each clinical team member who meets program eligibility. Teams are encouraged to share training lessons with their broader team members.

Q: If individual applicants are selected, are they paired with other individual applicants for this program?

A: In the application process, if a group wants to come in as a team, they apply as a team. However, we do anticipate that both within Clinical Scholars and across all four programs, there might be opportunities for people to collaborate with individuals outside their own particular team. There won't be specific pairings. Part of the reason these four programs are launching together and having an all-program meeting in September is that we want a robust network across all four programs. We'll look for ways to do that based on interest and discipline. We encourage participants within the same program or across the four programs to find ways to work together.

Q: Does this program permit both team and individual applications?

A: Team applications are preferred. However, there may be instances when individual applicants prepare compelling applications that describe the complex nature of a "wicked problem" and approaches to the problem.

Q: Are alumni of the previous Clinical Scholars Program eligible to apply to this program? Yes, alumni and current scholars of the previously funded Clinical Scholars Program or the National Clinicians Program are eligible to apply to this program.

Q: For the Clinical Scholars Program, we are wondering if our team would count. Our team is comprised of a physician, therapist, nurse, and dietitian, all working in a close interdisciplinary fashion and applying evidence-based research. We have identified weight management and obesity as

“wicked problem”.

A: The diversity in the clinical disciplines makes it seem like your team would be eligible. Obesity is a “wicked problem.” We would look at the types of complexity, types of outcomes and approaches you’re hoping to use, how community grounded the work is, and application to the Culture of Health framework (http://www.rwjf.org/en/culture-of-health/2015/11/measuring_what_matter.html).