PROGRAM ANNOUNCEMENT & APPLICATION INSTRUCTIONS

ADVANCED FELLOWSHIP IN HEALTH SERVICES RESEARCH

Fellowship Director:
Debra Saliba, MD, MPH, AGSF
saliba@rand.org

January 2017
TO: Applicant, Advanced Fellowship in Health Services Research
FROM: Debra Saliba, MD, MPH, AGSF
SUBJECT: Application Instructions
DATE: January 2017

Thank you for your interest in a Postdoctoral Research Fellowship at the VA HSR&D Center for the Study of Healthcare Innovation, Implementation & Policy. We welcome applications from individuals who have recently completed a doctoral degree in such health-related disciplines as public health (epidemiology, health services, biostatistics), psychology, organizational sociology, health economics, health administration, nursing, pharmacy, or other related fields.

Fellows typically begin any time between July 1st and September 30th of each year. Please note that Fellows must be United States citizens and must have completed their doctoral degree before beginning the fellowship.

The information we are requesting below will be used to evaluate your interest in—and qualifications for—a VA HSR&D Postdoctoral Fellowship. Please be as complete as possible when providing the requested information. If you have any questions about the Fellowship program or the application instructions, please do not hesitate to contact one of us.

1. General Information, Education and Experience
   Please provide a resume or curriculum vitae containing your current and permanent contact information, citizenship and current employment and educational enrollment. List all educational institutions attended since high school (including name, location, dates attended, major, degree and year granted) and all paid and non-paid jobs held since high school (including teaching and research positions, internships, volunteer work, etc. over the last ten years). Include any post-PhD training, if applicable. List all extracurricular activities, honors/awards and publications you feel are relevant to the review committee’s assessment of your qualifications.

2. Health Services, Social Science and Research Methods Training
   Please summarize prior coursework and any work experience in 1) healthcare settings, 2) the social sciences (including anthropology, economics, psychology, sociology), and 3) statistics and research methods (including epidemiology, program evaluation, research design). Rather than list every course, please provide us with enough information to determine your basic preparation in these fields.

3. Career Goals and Objectives
   Please write a one or two page statement describing your career goals and motivation in applying for this Fellowship. Indicate how the Fellowship would contribute to your broader career goals. Describe your general research interests and, if relevant, any specific project ideas you may have developed. The latter is optional; whether or not you have such ideas will not affect our evaluation of your interest or suitability for the Fellowship.
4. Letters of Reference

Please arrange to have three letters of reference sent to us. Give the individuals from whom you are requesting letters a copy of the Fellowship brochure and this set of instructions. Letters written on your behalf should include: 1) how long and in what capacity your reference has known you, 2) your reference's overall rating of you in terms of suitability for a health services research postdoctoral Fellowship, and (3) an overall impression of your commitment and performance as a student, and/or researcher. Have the letters sent via email attachment (preferred) or US mail to the Fellowship review committee at the address listed on the masthead of this letter.

If you have any questions, please do not hesitate to contact one of us:

Program Director:
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Advanced Fellowship in Health Services Research at the HSR&D Center for the Study of Healthcare Innovation, Implementation & Policy

The VA Greater Los Angeles HSR&D Center of Innovation (COIN) is a consortium of health services research programs at the Sepulveda and West Los Angeles campuses of the VA Greater Los Angeles Healthcare System (GLA), the University of California, Los Angeles, and the RAND Health Program. The COIN is dedicated to the promotion of better health and healthcare for Veterans through better understanding of healthcare provider behavior, the factors that influence it, and the health systems interventions that will improve it. To achieve this mission, Center investigators are committed to:

- Identifying theoretical and empirical models of healthcare provider behavior and quality care;
- Developing, refining and evaluating health systems interventions based on these models to improve the quality and outcomes of care;
- Developing health systems evaluation methods and tools;
- Training VA health services research Fellows and career development awardees about development, implementation and evaluation of health systems interventions;
- Disseminating resource and intervention materials, research results and recommendations to the VA health system and the American public;
- Supporting the implementation of the VA Quality Enhancement Research Initiative (QUERI); and
- Continuing to build appropriate infrastructure to support research, education and dissemination goals.

THE FELLOWSHIP PROGRAM

The Fellowship program is intended to train creative, independent, ethical and productive leaders in health services research who will advance the VA’s research agenda far into the future. The program’s structure, intellectual climate and technical resources enable Fellows to progress in research areas relevant to the COIN’s mission and to do so in a timely, effective and enjoyable manner.

During their two-year tenures, Fellows are expected to maintain an ongoing relationship with one or more research mentors in order to achieve two core Fellowship goals:

1. Complete course work, as needed, in health services research, and
2. Conduct one or more health services research projects which merit presentation at meetings and publication in peer-reviewed journals.

A Fellow trained in fields or disciplines other than health services research (e.g., sociology, anthropology, and psychology) will likely benefit from UCLA-based training in selected core areas such as health services, evaluation, quality improvement and biostatistics. This will assure sufficient grounding in areas directly related to a successful health services research career path.

Most didactic education takes place at the UCLA Schools of Medicine (Division of General Internal Medicine) and Public Health (Departments of Health Policy & Management and Epidemiology).
Coursework can also be arranged with the UCLA School of Public Policy and Social Research, which provides a rigorous and interdisciplinary social sciences curriculum. In addition to didactic course work, Fellows will participate alongside physician post-doctoral Fellows in seminars on health services research and Fellows’ works in progress.

The Center also partners with other VA, UCLA, and RAND based Centers and investigators whose research is consonant with the VA HSR&D Center’s mission, vision, and goals. These include the VA VISN22 Mental Illness Research, Education, and Clinical Center (MIRECC); the VA Geriatrics Research, Education, and Clinical Center (GRECC); the VA Parkinson’s Research, Education, and Clinical Center (PADRECC); as well as the UCLA School of Public Health and RAND Health.

Developing capability in research is a core Fellowship goal, and toward that end, Fellows are expected to submit at least one paper for publication by the end of their two-year tenures. They typically follow a realistic timeline for achieving this goal:

**Year 1**
- **October**
  - Preliminary Research Ideas to Program Mentor
  - Identify Research Mentors
- **April**
  - Present Research Protocol for Preliminary Approval to Program Director, Program Mentor, Research Mentors
- **June**
  - Final Protocol Submitted for Review to Protocol Committee
  - Final Protocol Committee Meeting
  - Final Protocol Approved

**(by September of Year 2)**

**Year 2**
- **January**
  - Complete Data Collection
- **April**
  - Complete Data Analysis
  - Prepare Abstract for Presentation
- **June**
  - Submit Paper for Publication

COIN investigators are currently working on over 90 research projects in various stages of development or execution. The Center is organized along a series of focused and emerging areas of research. Center leads in each area are noted in parentheses and may be contacted for more information. Fellows should align themselves with one of the Centers many current principal areas of investigation, most notably:

- **Primary Care/PACT** (Lisa Rubenstein, MD, MSPH). Studies work to improve the delivery and performance of primary care practice in the context of VA’s patient-centered medical home model (PACT) by: (1) understanding the determinants that influence the implementation and success of VA PC delivery models, including their links to specialty care, hospitals, and emergency care; (2) developing and testing innovations to support PACT goals, and (3) developing and testing methods for spreading and sustaining successful innovations. **VA Center of Innovation**

- **Women’s Health** (Donna Washington, MD, MPH). Projects focus on accelerating implementation of and access to high-quality comprehensive care for women Veterans by generating evidence to differentiate between access issues (to VA in general, specific types of care, or specific settings) that require interventions to reduce barriers to use of VA care, and content of care issues (e.g., availability and gender appropriateness of specific services or...
groups of services) that may require tailoring in order to address women Veterans’ needs. VA Center of Innovation

- **Vulnerable Populations** (Alex Young, MD, MSHS). Comprised of three Strategic Program Areas (or SPAs), each with its own clinical leader: the Mental Health SPA, the Long Term Care/Aging SPA, and the Palliative Care SPA.
  
  o **Serious Mental Illness (SMI)** (Amy Cohen, PhD). Studies focus on improving care for persistent, potentially disabling disorders such as schizophrenia, bipolar disorder, and chronic major depressive and anxiety disorders. *VA Center of Innovation, VISN 22 MIRECC, and Office of Mental Health Services and Operations*
  
  o **Older Adults** (Debra Saliba, MD, MPH, AGSF). Projects focus on improving long-term care by identifying and implementing evidence-based interventions to improve function and reduce illness. *VA Center of Innovation, VA GRECC, and Offices of Rural Health, Geriatrics & Extended Care, and Nursing Services*
  
  o **Palliative Care** (Karl Lorenz, MD, MSHS). Projects focus on quality and cost-effectiveness, case management for cancer, pain, and end-of-life care. *VA Center of Innovation, QuIRC, and the National VA of Hospice and Palliative Care Program*

- **Emerging Areas.** Research in areas that reflect important innovations (e.g., health services genomics, integrative medicine), build on areas of existing expertise (e.g., infectious disease) or tread new ground in HSR&D (e.g., emergency management)
  
  o **Health Services Genomics** (Maren Scheuner, MD, MPH). Projects focus on strategies for implementing genetic testing and therapeutics to impact health outcomes through delivery of individualized care that can improve diagnosis, prognosis, risk assessment and treatment selection. *VA Center of Innovation and VISN 22*
  
  o **Infectious Diseases (ID)** (Matthew Goetz, MD). Projects focus on improving care for Veterans with HIV, especially in the area of anti-retroviral therapy. *VA Center of Innovation, VA QUERI-HIV/HCV, and RAND*
  
  o **Emergency Management** (Aram Dobalian, PhD, JD). Projects focus on improving US (not just VA) preparedness for response to war, terrorism, national emergencies and natural disasters. *VEMEC*
  
  o **Integrative Medicine** (Stephanie Taylor, PhD). Projects focus on improving Veterans’ quality of life, while reducing pain, medication use, and healthcare costs through Complementary & Alternative Medicine (CAM). *VA Center of Innovation*

The Center is also nationally and internationally known for its advances in the field of implementation science and quality improvement research. All focused and emerging areas of research noted above are on different trajectories toward implementation of research into routine practice and policy, each with one or more VA policy and/or operations partners involved at different stages of our efforts. The Center has an Implementation Core, with expertise in implementation science, organizational research, clinical informatics, quality improvement methods, stakeholder involvement, and systems engineering. We anticipate Fellows will be involved in appropriate training/education and relevant project participation related to implementation research depending on their content areas of interest. Implementation Core co-leads include Elizabeth Yano, PhD, Alexander Young, MD, MSHS, Brian Mittman, PhD, and Lisa Rubenstein, MD, MSPH.
Fellows will see first-hand the extent to which health services research inquiries influence practice and policy, as well as have direct hands-on experience in using and applying both qualitative and quantitative methods. Qualitative methods will include focus groups and structured interviews, etc. Quantitative methods will include research design, state-of-the-art survey design, data collection, and statistical analysis.

Fellows with research findings are expected to submit abstracts for presentation at a variety of scientific meetings. Prior to submission, all abstracts and presentations must be presented to the Fellow’s Program and Research Mentors for comments and advice. Fellows are also strongly encouraged to attend at least one national meeting of a specialty or discipline-focused organization of which they may be a member (e.g., AcademyHealth, Society for Epidemiologic Research, Academy of Management, etc.), though travel resources may vary depending on VA resources.

TRAINING FACILITIES

Fellows will have space within the Center core at the Sepulveda or West Los Angeles campus at VA GLA. Fellows will have their own desks, computers, filing cabinets and phones, with ready access to Center technical and support staff.

VA Greater Los Angeles Healthcare System. While Fellows maintain office space in the COIN core, they will spend significant time in other parts of the VA Greater Los Angeles, since much of the Center’s ongoing research involves significant collaboration with other GLA research centers as noted above.

Other VA Medical Centers. While not formal training sites per se, other Center collaborators at VA medical centers within and beyond Southern California are available to Fellows. COIN investigators currently collaborate with other VA researchers on a wide array of studies.

PROGRAM DIRECTOR

The Fellowship program is directed by Debra Saliba, MD, MPH, AGSF. Dr. Saliba is the Associate Director for Education for the Los Angeles VA HSR&D Center of Innovation and a physician in the Los Angeles VA GRECC. She is also the Anna and Harry Borun Endowed Chair in Geriatrics and Gerontology at UCLA, where she is a Professor of Medicine, and a Senior Natural Scientist at RAND. Dr. Saliba’s research has created tools and knowledge that can be applied to improving quality of care and quality of life for vulnerable elders across the care continuum. A major theme of this work, including development of the VES-13 survey and revision of the Minimum Data Set (MDS 3.0) for nursing homes, has been giving voice to elders in assessments of their health and healthcare.

Depending on which area of research they wish to pursue, Fellows will be assigned to one or two research mentors in addition to one of the Fellowship director. Fellows will meet weekly with these individuals during intensive periods of project development. Mentors are charged with helping Fellows assemble protocol committees to review their research plans and assisting them in procuring sufficient resources to carry out their projects.
EVALUATION

The Fellowship represents a shared responsibility. The program director and mentors are responsible for providing the structure and advice that enable Fellows to acquire needed knowledge and skills. The Fellows are responsible for acquiring them. This means that Fellows should be devoting the majority of their time and effort to activities relevant to the program. Fellows’ progress is formally charted via quarterly reports.

Fellows begin their programs by first negotiating social contracts with the Fellowship director. Thereafter, on an annual basis, Fellows send an updated social contract to the Fellowship director and their research mentor(s), all of whom will review and sign it. The contract constitutes a formal statement of the Fellows’ career goals, fellowship objectives, research project goals, other accomplishments, and what has, is, or will be done to accomplish the immediate objectives.

Over and above the Fellowship social contract, Fellows prepare Cumulative Quarterly Activity Reports, which are submitted to the Fellowship director and research mentor(s). These cumulative reports, organized by academic quarters, describe Fellows’ specific activities (and the number of hours per week) devoted to research, coursework, informal learning, teaching, administration (relating to work other than their own research projects), and presentations.

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